

## Terms of reference

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26 September 2018

### Chinese Medicine Reference Group

#### 1.0 Purpose

The purpose of the Chinese Medicine Reference Group (Reference Group) is to engage stakeholders in order to achieve a common understanding of the National Registration and Accreditation Scheme and to assist the Chinese Medicine Board of Australia (CMBA or the Board) in progressing its core business.

The Reference Group:

- 1.1 Receives regular information about the progress of the Board's work when appropriate
- 1.2 Is advised of and asked for advice on any significant changes in the broader policy or legislative environment
- 1.3 Provides information on current or anticipated developments and issues
- 1.4 Provides advice on policy development or revisions
- 1.5 Reports on the impact of existing policies
- 1.6 Considers any issues arising from any other developments.

#### 2.0 Accountability

- 2.1 The Reference Group has an advisory role to the CMBA.

#### 3.0 Membership

- 3.1 The members of the Reference Group are selected through an expression of interest process and sector nominations and are appointed at the discretion of the CMBA
- 3.2 The composition of the group, normally at least 10 members, can include:
  - national professional association representatives
  - consumer representatives
  - educational institution representatives
  - representation from the Therapeutic Goods Administration, and
  - four individual Chinese medicine practitioners and one recently graduated Chinese medicine practitioner, who are registered and are selected on merit, based on published selection criteria
- 3.3 Members are appointed for two years.
- 3.4 CMBA members in attendance do so in an ex-officio capacity.

3.5 AHPRA staff may attend as observers at the discretion of the Chair.

3.6 Additional attendees may be invited from time to time.

#### **4.0 Chair**

4.1 The Reference Group meetings are chaired by the Board's Chair (or nominee).

#### **5.0 Meetings**

5.1 The Reference Group normally meets face to face once per year.

5.2 Additional meetings may be called and may be conducted by teleconference as required.

5.3 Members are to be aware of and respect that some agenda items or discussion may be deemed confidential.

5.4 Members should feel free to express views within the context of meetings, and reporting about the meetings should be respectful of others' views.

#### **6.0 Quorum**

6.1 A quorum is not required as the group is not a decision-making body.

#### **7.0 Procedures**

7.1 The Reference Group follows procedures consistent with the National Board, which includes declarations of any conflicts of interest.

7.2 The Chair provides an overview at the beginning of each meeting, ensures a strategic focus for discussions and prioritised agendas, and facilitates an evaluation of each meeting.

#### **8.0 Communications**

8.1 The Reference Group publishes a Communiqué agreed by members on the Board's website after each meeting.

#### **9.0 Terms of reference review period**

9.1 The Reference Group's terms of reference are reviewed every two years or as required.

#### **10.0 Remuneration**

10.1 The Reference Group members receive a sitting fee for attending meetings at the same rate as National Board members for special assignment except where attendance at the meeting is:

- a function of the person's employment, or
- as a professional association representative<sup>1</sup>

10.2 Members eligible for sitting fees have reasonable travel and accommodation costs covered by the Board.

10.3 Other costs or situations are considered on a case-by-case basis.

#### **11.0 Secretariat**

11.1 The Secretariat is provided by the Australian Health Practitioner Agency.

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<sup>1</sup> Consistent with *Professions Reference Group, Terms of Reference* which state 'Members will fund their own attendance at meetings'.