Application for eQC Patient and Carer Advisory Board Member

evaluating Quality Care (eQC) Group of Projects

Closing date: continuing

Center for Health Services Research, The University of Queensland (UQ)

**Researchers at UQ, based in the Center for Health Services Research, are undertaking a large body of research and implementation work around quality of care for patients using health care services. Many of these patients are older adults and patients with dementia.**

The research team, led by Dr. Melinda Martin-Khan, is based at the Centre for Health Services Research at The University of Queensland and is located at Princess Alexandra Hospital in Woolloongabba. We have affiliated projects in Tasmania and regional Queensland. Funding for research is provided by competitive grants including the National Health and Medical Research Council (NHMRC). <https://chsr.centre.uq.edu.au/research/geriatric-medicine>

Dr. Martin-Khan has established a Patient and Carer Advisory Board to seek input from patients and caregivers on all aspects of the research, evaluation and review process (i.e. suitability of protocol, wording of information sheets, and interpretation of research outcomes and policy impacts). The Board has 12 members including persons with dementia, carers of people with dementia, individuals with an interest in dementia and people who are aging but don’t know a lot about memory problems.

Purpose

The eQC Patient and Carer Advisory Board is a strategic collaboration that informs the embedding of consumer partnerships at every level of planning, delivery, monitoring and evaluation of research, translation and policy provided by the Quality of Care research group. The Board also provides an opportunity for the researchers to hear the lived experience of patients and carers and to learn from the knowledge they have gained.

The aim of the eQC Patient and Carer Advisory Board is to engage with patients and carers throughout all stages of our Quality of Care research, translation and policy program to ensure a consistent focus on participant collaboration.

Role of the member

It is expected that patient/carers will provide information and feedback to the Quality of Care research group from a patient/carer perspective. Patient/carers will draw on their lived experience of using the health system (and living with dementia if applicable). The patient/carer will be appointed for an initial one year term, then a following 2 year, then three year terms. Members can resign at any time if their circumstances change.

The role of the patient/carer on the Patient and Carer Advisory Board is to:

* + - * Actively participate by completing pre-meeting reading, asking questions where clarification is required, putting forward opinions in discussions at board meetings
			* Confidently advocate on behalf of health patients and carers
			* Bring a patient/carer perspective to all discussions and decision-making
			* Possess an ability to anticipate how actions (our research methodologies and documentation) might impact patient and carers in a health service environment
			* Have well developed interpersonal skills including the ability to work as part of a team and maintain good working relationships with team members and other stakeholders.

What will Board members do?

People will attend a Board meeting either in-person or by videoconference up to 4 times per year. Each board meeting may be 2-3 hours in duration. There will be pre-reading for the board meeting (draft research protocols, data collection forms, video summary texts, policy statements). There will be an opportunity to provide comment in a split session board meeting to the Chair and leader (Chief Investigator) of the Project if the meeting duration becomes uncomfortable for a member (remunerated as one board meeting).

Each year, we will ask each Board member to individually read a grant application for specific comment (grants are submitted at different times throughout the year; one member will be approached per grant).

Some projects or activities will include focus groups or seminars. Attendance will be optional for Board members. Specific funding will be available to support attendance where a request for attendance is made by invitation and a Board member is able to attend. There is a preference for Board members who are available to attend at least one local focus group each year.

Who is it for?

Membership is renewed individually. In-person meetings will be held at Princess Alexandra Hospital Woolloongabba, with Zoom (videoconference) facilities available for people who are not local.

We welcome participants from around Australia, and in particular regions where current projects are active.

This opportunity is suitable for regular health service users who include:

* People with dementia, and care partners of people with dementia
* People with connections or interest in the health care of people with dementia (but not a carer).
* People who identify as being a part of a minority group in Australia (on the basis of age, disability, ethnicity, gender and sexual orientation)
* A range of ages (over the age of 70; less than 70 years)
* People with chronic health conditions and extensive use of the health care system.

Remuneration and Support

Individuals will be remunerated for their time in line with [Health Consumers Queensland’s remuneration position statement](http://www.hcq.org.au/wp-content/uploads/2015/12/Consumer-Remuneration-Rates-Dec-2015.pdf). Parking and travel expenses will be covered. No printing costs will be paid as documents will be mailed to participants who prefer hard copies.

We will commit to supporting accessibility to ensure that people involved in the Consumer Advisory Board are well placed to understand the content we provide and have an opportunity to share their experience and recommendations. We will provide documentation in plain English with no jargon and acronyms. We will provide hard copies where required. We will provide supported meeting flexibility (additional opportunities to meet with the Chair and Chief Investigator if the meeting time runs too long), and remuneration for participation.

Remuneration:

$237 per meeting for Chair

$187 per meeting for Board Members

$187 per forum for all members [Note: $374 per forum (if the agenda indicates forum is over 4 hours)]

$40 per hour for grant review [Lay summary] (Maximum 2 hours).

How to apply

**Please complete this consumer application form and return to**m.martinkhan@uq.edu.au. For questions regarding the Consumer Advisory Board please email Melinda Martin-Khan on m.martinkhan@uq.edu.au

For assistance to complete application please also ask Melinda by email and she can assist you. A phone appointment to complete the application can be organized.

Positions will be filled as applications are received.

**Consumer Application Form**

eQC Patient and Carer Advisory Board Member

Full name:

Preferred phone number:

Email:

Postal address:

Postcode:

* Would you like us to retain this application for future vacancies? *(Applications not retained are destroyed once the application process is complete.)* YES | NO

Please highlight any group you identify as being a part of:

* Living with Dementia
* Living with a disability/chronic condition
* Caring for someone with Dementia
* Caring for someone with a disability
* Physically isolated or transport disadvantaged
* Culturally or linguistically diverse
* From a non-English speaking background

Do you identify as: Aboriginal | Torres Strait Islander | Both | Prefer not to state

Are you a: Patient | Carer

Age range: 16-24 25-29 30-39 40-49 50-59 60-69 70+

Please describe any support you need to take part in this activity *(examples include support person, hearing loop, dietary requirements)*

I am interested in being considered as Chair.YES | NO

If yes, please describe the experience you have that demonstrates your abilities to Chair this Patient and Carer Advisory Board.

*Tip: Past Chair experience including the name of the group, how many people were involved on the committee, who it reported to and length of time you were/are Chair, any highlights/achievements while in this role.*

*Your responses to the following questions only need to be a brief sentence or two*

* Please describe your experience as a health consumer representative including committees, focus groups, surveys, governance roles, etc.

*Tip: Past consumer representative positions that have similar requirements to the opportunity you’re expressing interest in. Give an indication of how long each position was for, and any relevant highlights.*

* **Please describe any connections you have to your community (e.g. networks, groups)***Tip: Think about how this relates to the role you’re applying for.*
* Please describe your interest in this topic? (Dementia, Quality of Care, Health service use)

*Tip: Although this section usually requires the longest response, try to keep it concise. Things to consider focusing on here include:*

* *any past lived experience that shows your understanding of the topic, or*
* *your understanding of the social/health/economic implications of the topic/condition, or*
* *Any systems change that you have identified that will improve care for health consumers, and possible strategies you could share to affect that change.*

*If applicable –*

* Please provide contact details for a staff member from a university, health service or department you are currently partnering with. (We will advise if you are shortlisted before we contact your referee).

Full name:

Staff Role:

Partnering Activity (eg. Committee Chair):

Organisation:

Phone number:

Email:

Applicant Role: