

# ANZSPM General Practice Special Interest Group [GP SIG] Terms of Reference

The Australian and New Zealand Society of Palliative Medicine Inc (ANZSPM) is a society for medical practitioners aiming to improve health outcomes by working with and influencing the system and community around the person with a life-limiting illness. ANZSPM is governed by a Council made up of elected and appointed members.

ANZSPM Special Interest Groups (SIGs) provide an avenue for member engagement and contributions to ANZSPM policy, professional development and the ANZSPM knowledge base, consistent with ANZSPM's strategic objectives.

SIGs focus on a range of areas of interest relating to palliative medicine practice. SIGs report to the Council which in turn supports activities of all SIGs, ensuring they are advancing the interests of ANZSPM, its members and/or the practice of palliative medicine.

An SIG is formed following consideration and acceptance of the proposal to form the SIG by the ANZSPM Council.

SIG Name: General Practice Special Interest Group (GP SIG)

# **Purpose:**

The GP SIG exists as a forum to advance the understanding of palliative care amongst general practitioners; and provide advocacy for the further development of general practitioners' skills in palliative medicine.

#### **Objectives:**

#### The GP SIG will:

- 1. Clearly articulate and represent the needs of general practitioners, for addressing as appropriate by the relevant stakeholder groups, specifically:
  - a. helping to shape, and inform the development of, accredited training programs, workshops and events (including ACRRM, GPNZ, PCA, PEPA, RACGP and RACP)
  - contributing to developments in telehealth with state and territory health services, through contribution to policy development and expert advice on the general practice clinical consultation in palliative care
- 2. Provide support and advice for GPs, in relation to the 'non-medical' aspects of palliative care
- 3. Contribute to the development of educational resources specific for general practitioners
- 4. Clearly communicate best practice to the GP workforce
- 5. Contribute to the development of policy and position papers, as appropriate, for consideration of the ANZSPM Council
- 6. Provide advocacy in the general community of the role of general practice in the provision of palliative care
- 7. Develop the SIG as a supportive network of GPs with an interest in improving quality of life for people living with life-limiting illnesses.



#### **Activities:**

The activities of the GP SIG will be directed broadly toward addressing the following concerns as relevant to general practitioners in providing palliative care:

- 1. Patient complexity
- 2. Inadequate training
- 3. Insufficient resources

### Specifically, the GP SIG will:

- Provide a forum for interaction of all doctors with an active interest in palliative care in general practice.
- Develop, support and promote up-skilling and training opportunities in palliative care for general practitioners including:
  - o Webinar meetings
  - o Promotion of existing training opportunities
  - o Foster research relevant to palliative care in the general practice setting
  - Presentations on the topic of palliative care at GP conferences and scientific meetings
  - Consider the development of face-to-face meetings
- Collaborate on the development of ANZSPM resources appropriate to general practitioners
- Contribute to ANZSPM events to foster knowledge and interest amongst general practitioners
- Provide advocacy (when endorsed by ANZSPM Council)

### **Intended Participants:**

Membership is open to all ANZSPM members with an interest, experience and/or expertise in the role of general practitioners in the provision of palliative care within Australia and New Zealand.

#### SIG governance:

SIG members will elect a Convenor of the SIG for an two [2] year term. A call for nominations will be facilitated at the expiry of that term.

The SIG will conduct meetings via Zoom or other video-conferencing platform. Notice of meeting will be provided as early as practical, and not less than two [2] weeks prior to a meeting. Minutes and notes taken from meetings will include an action register identifying the decisions and actions arising from each meeting.

Minutes should be circulated to SIG members for comment within 7 business days of the meeting and will be approved by the Convenor. A copy of the minutes must be provided to the ANZSPM secretariat within 7 business days after approval by the Convenor.

ANZSPM is not responsible for any costs associated with the pursuit of the SIG's objectives and activities, unless previously discussed and agreed upon.

## **Meeting intervals:**

Meetings will be held at least four [4] times per annum by video/teleconference. A face-to-face meeting will be sought where possible during major ANZSPM events (ANZSPM Conference or ANZSPM Medical & Surgical Update). More frequent meetings can be convened as required during specific work activities.



### **Reporting to ANZSPM Council:**

The Convenor is required to provide a report to the ANZSPM secretariat for submission to ANZSPM Council on a six-monthly basis. Additionally, a report on the SIG's functions for the prior financial year including outcomes on meetings, topics and emerging issues the SIG addressed is to be submitted to the ANZSPM secretariat in July each year for inclusion in the ANZSPM Annual Report.

# Confidentiality

All information nominated as confidential by SIG members must remain confidential and not be divulged outside of the SIG's proceedings, other than to members of the ANZSPM Council or secretariat.

### **Approval and amendment**

The SIG will review this Charter as required and, at least, every two [2] years. Once amended, the Charter will be submitted to the ANZSPM Council for approval.

Last reviewed: [21 June 2021]