



IMSANZ Models of Care Special Interest Group (MOC SIG)

Terms of Reference

DRAFT 16 Dec 2024

1 Introduction

The Internal Medicine Society of Australia and New Zealand (IMSANZ) is dedicated to advancing the practice of internal medicine and promoting the professional development of its members through education, research, and advocacy.

Delivering timely, efficient and cost-effective care to patients in General Medicine, who often have multiple comorbidities and high level of complexity, requires collaboration, innovation, leadership and advocacy at individual health service as well as at systems level. The performance of models and quality of care provided to these patients need to be evaluated through a set of indicators and measures that are highly relevant and specific to General Medicine. Additionally, a robust and healthy General Medicine workforce is required to meet the challenges and demands of care delivery. Currently there is a significant heterogeneity across Australia and Aotearoa New Zealand in General Medicine models of care, clinical quality indicators measured and workforce sizes.

The IMSANZ MOC SIG is established to advance the delivery of effective patient care, and the development of a sustainable workforce, in General Medicine through sharing information, resources and experiences, conduct of research and evaluation, providing systems level leadership, and engagement in policy and advocacy.

2 Purpose

The main objectives of MOC SIG are to:

1. To provide an accessible forum and high-level input to discussions regarding General Medicine models of care and workforce issues across Australia and New Zealand
2. To provide opportunities for regular sharing of information, mutual learning and a platform for collaboration, development, evaluation and reporting of General Medicine models of care in various settings, while embracing heterogeneity and diversity
3. To provide an understanding of current General Medicine models of care and their effectiveness across various settings in Australia and New Zealand (conceptualised through a patient's journey to access health care: e.g. community and ambulatory care, ED and acute care interface, bed substitution models such as HITH, inpatient care, intermediate care etc., as well as setting, e.g. metro, regional, rural, remote etc)
4. To provide an understanding of drivers and influences behind evolution of General Medicine models of care over time (e.g. increasing patient complexity, ED access issues, bed pressures, budgetary limitations)
5. To collaborate with and provide support to existing state-based general medicine networks who are already working on these issues
6. To embrace and collaborate with larger communities of practice in general medicine (e.g. hospital pharmacists, nurses, allied health), who are integral to effective operation of general medicine models of care
7. To develop measurable performance and quality indicators relevant to General Medicine

8. To provide high-level guidance for optimal staffing/workforce required to effectively operationalise various MOCs in diverse settings
9. To develop standardised research guidelines for development, evaluation and reporting of General Medicine models of care so as to improve generalisability and shared learning
10. To provide educational experiences on models of care and systems leadership to general and acute care medicine advanced trainees

3 Scope

The MOC SIG activities will include, but not be limited to:

- Organising regular meetings to set high level agenda, objectives and initiatives relating to models of care and workforce issues in General Medicine
- Enabling and promoting research and quality improvement initiatives relating to models of care and workforce issues in General Medicine
- Promoting the knowledge and understanding of diverse models of care and their effectiveness across the board, while accounting for heterogeneity
- Defining research, evaluation and reporting parameters to assess the performance of different models of care
- Defining clinical performance and quality indicators highly relevant and specific to General Medicine
- Providing high level advocacy for optimal models of care delivery to our unique group of patients in General Medicine
- Providing high level advocacy for workforce sizing issues for General Medicine
- Collating and disseminating resources relating to models of care and workforce development
- Facilitating mentorship and networking opportunities for IMSANZ members interested in models of care and workforce issues
- Providing feedback and recommendations to the IMSANZ Board and council on issues affecting the MOC SIG
- The MOC SIG should contribute at least one session (including leadership forum) to the scientific programme at the IMSANZ ASM in each year

4 Membership

- Membership of the MOC SIG is open to all IMSANZ members with interest in models of care, clinical quality indicators and workforce development
- Members should represent a cross-section of the IMSANZ membership and bring diverse geographical representation, health service setting representation, perspectives and expertise relevant to the MOC SIG focus.
- There will be no time-limits to membership terms
- The MOC SIG chair will be supported by the steering committee. The total number of steering committee members is at present not capped.
- At least one member of the MOC SIG should be represented on the IMSANZ Council or Board

5 Roles and Responsibilities

- Chair: Leads the MOC SIG, sets the agenda for meetings, represents the SIG in IMSANZ Council meetings, and oversees the execution of the group's activities.
- Members: Participate actively in meetings, contribute to the group's initiatives, and promote the SIG's objectives within the wider IMSANZ community.
- IMSANZ is under no obligation to meet any costs associated with the operations of this group.

6 Meetings

- The MOC SIG will meet a minimum of 4 meetings per calendar year, or as deemed necessary by the Chair. Meetings may be held in person, virtually, or in a hybrid format.
- Special meetings may be called to address specific issues or opportunities.
- A quorum for meetings shall consist of at least 50% of the SIG members.

7 Reporting

- The MOC SIG will report directly to the IMSANZ Board.
- The MOC SIG will provide meeting minutes to the IMSANZ Board.
- An SIG report will be presented at each IMSANZ Council meeting, providing updates on its activities, achievements, and any recommendations for the society's consideration.
- The MOC SIG will also participate in contributing to newsletters and membership matters updates

8 Amendments

- These Terms of Reference may be amended at any time with the approval of the IMSANZ Board, based on recommendations from the MOC SIG or as a result of changes in the society's strategic direction.

9 Approval and Review

- These Terms of Reference are effective as of [Effective Date] upon approval by the IMSANZ Board.
- The Terms of Reference will be reviewed at the start of each two-year term, or as necessary to ensure they remain relevant and effective in meeting the needs of members.

Adoption Date: [Adoption Date]
 Next Review Date: [Review Date]
 Approved by: IMSANZ Board

Revision Number	Revision Date	Revision Notes	Owner
DRAFT	2 Feb 2024	Version 1 working doc drafted by LS	Leigh-anne Shannon, CEO