

Expressions of Interest for LGBTI community representatives

WA Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Health Strategy Reference Group

The WA Department of Health is calling for Expressions of Interest from WA LGBTI communities to be representatives on the WA LGBTI Health StrategyReference Group. The Reference Group will contribute to the development and writing of the Strategy. Places are limited.

Representatives will collaborate with identified key stakeholders across the WA health sector, including:

* Department of Health
* Health Service Providers (Child and Adolescent Health Service, North Meropolitan Health Service, South Metropolitan Health Service, East Metropolitan Health Service and WA Country Health Service)
* Aboriginal Health Council of WA
* WA Primary Health Alliance.

The Strategy, aimed at Health Service Providers, will provide a framework to raise awareness of the specific health and mental health challenges of LGBTI people, and support existing LGBTI health services.

The WA LGBTI Health Strategy Reference Group

## Responsibilities

* Provision of advice and guidance from the LGBTI communities’ perspective.
* Contribute to the writing of content of the Strategy, within Health Networks parameters and with the understanding that content will be reviewed for consistency and translation to Department of Health style guide and policy development processes.
* Ensure the content of the Strategy is relevant to and representative of the needs of the LGBTI communities.
* Provide oversight of the community and Health Service Provider consultations.
* Review draft versions of the strategy to ensure incorporated feedback is relevant and representative.

Duration of Reference Group: April 2018 – December 2018

Frequency of meetings: TBD

Time and location of meetings: TBD

### Payment and Reimbursement

Sitting fees are not available for government employees or paid members representing not for profit and/or organisations funded by the Commonwealth, State or Local Government.

Consumers and community members may be offered payment for their contribution if they are not paid members representing their organisation or agency.

### Applications

To apply to be a member of the Reference Group, please complete the following application form, including a statement addressing the selection criteria, and email it to healthpolicy@health.wa.gov.au by **5.00pm, Monday 9 April 2018**.

### Selection Process

Applications will be assessed by a panel of representatives from the LGBTI community and health sector. Applicants will be advised of the outcome by email.



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| **EXPRESSION OF INTEREST** |
| **APPLICATION FORM** |

## Expectations of Reference Group members

To contribute their best effort to achieving the objectives of the group by:

* Contributing fully and constructively at meetings.
* Support the development of the WA LGBTI Health Strategy.
* Bringing a problem solving attitude to the team and contributing to a positive team culture.
* Being reliable, dependable and taking responsibility for actions assigned.
* Adhering to the Terms of Reference of the Group, Public Sector Code of Ethics, and the Health DepartmentCode of Conduct

|  |  |
| --- | --- |
| Name |  |
| Position (if relevant) |  |
| Organisation (if relevant) |  |
| Email address |  |
| Contact phone number |  |

## Selection Criteria

Applicants should demonstrate their capacity to meet the following criteria.

|  |
| --- |
| * Experience in participating in committees/groups that include a range of stakeholders.
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| * Breadth and scope of your LGBTI networks.
 |
| * Substantial knowledge and experience of working with LGBTI communities.
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Please briefly describe your area of interest in the development of the LGBTI health strategy.

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| --- |
|  |

## Community Representation

Which of the following LGBTI communities do you represent and / or are involved with:

|  |  |
| --- | --- |
| Lesbian  | ☐ |
| Gay  | ☐ |
| Bisexual  | ☐ |
| Transgender | ☐ |
| Intersex  | ☐ |
| Other *Please specify:*  | ☐ |

## Lifespan Representation

Which of the following age groups do you represent and / or are involved with:

|  |  |
| --- | --- |
| Youth: 10–24 years | ☐ |
| Adult: 25–64 years | ☐ |
| Older Adults: 65+ years | ☐ |
| All  | ☐ |
| Other *Please specify:*  | ☐ |

## Reference Group positions

Which of the following positions are you applying for? (tick all that apply)

|  |  |
| --- | --- |
| Participant | ☐ |
| Chair | ☐ |

Comment for text box below

Please send completed selection criteria
and email completed form to

healthpolicy@health.wa.gov.au

by **5.00pm, 9 April, 2018**