



Continence Nurses Society Australia
(formerly Australian Nurses for Continence)

Constitution
of
Continence Nurses Society Australia
For an
**INCORPORATED
ASSOCIATION**

Acknowledgements

The 2012 Continence Nurses Society Australia (CoNSA) Management Committee would like to acknowledge the significance of the work undertaken by all CoNSA State and National members in relation to the creation of this and all previous constitutions. The following constitutions were used as a foundational base on which this current document was developed.

2006 Constitution, Australian Nurses for Continence (ANFC)

2009 Constitution, Australian Nurses for Continence (ANFC)

NSW Constitution, Association of Nurse Continence Advisors New South Wales - ANCAN

QLD Constitution, Association of Nurses for Continence – ANC

SA Constitution, South Continence Nurses Society Australia Interest Group - SANFCIG

VIC Constitution, Victorian Nurses for Continence - NFC

This constitution is written in accordance with the Consumer Affairs Victoria Associations Incorporation Act (1981) Schedule 4 Regulation 18.

1. NAME OF THE INCORPORATED ASSOCIATION

The name of the Incorporated Association is CONTINENCE NURSES SOCIETY AUSTRALIA referred herein as the CoNSA.

2. DEFINITIONS WITHIN THIS CONSTITUTION

2.1 The CoNSA is a national professional interest group of nurses who have specialist knowledge and skills in continence care, whose member groups consist of State and Territory bodies who are associated under the CoNSA leadership.

2.2 The Rules refers directions and or sections contained in this constitution.

2.3 The MANAGEMENT COMMITTEE (MC) means the executive management committee of the CoNSA, referred herein as the MC.

2.4 MEMBER means a financial member of the CoNSA. There are 4 classifications of membership; Full Membership: Associate Membership: Affiliation Membership: Lifetime Membership.

2.5 A FULL MEMBER:

2.5.1 Is an individual Registered Nurse (Div 1) or a Midwife as defined by the Australian Health Practitioner Regulation Agency (referred herein as AHPRA).

2.5.2 Has full voting rights.

2.5.3 Can take up a position on the Management Committee.

2.6 An ASSOCIATE MEMBER may be:

2.6.1 An individual Registered Nurse (Div 2) as defined by the Australian Health Practitioner Regulation Agency (referred herein as AHPRA) .

2.6.2 A Non-Nursing Health Professional.

2.6.3 A Retired CoNSA Member, who is no longer registered with AHPRA.

2.6.4 Is interested in supporting the work of the CoNSA through their membership.

2.6.5 Does not have voting rights at a General Meeting or within a MC.

2.6.6 Cannot be elected onto the MC, but can be appointed to the MC for a specified role and term.

2.7 An AFFILIATE MEMBER:

2.7.1 Is an organisation or individual who may or may not have a financial or clinical interest in continence.

2.7.2 Is interested in supporting the CoNSA through affiliation direct with National CoNSA.

4.6.3 Does not have voting rights at a General Meeting or within a MC.

5.6.3 Cannot be elected onto the MC, but can be appointed onto the M.C for a specified role / term.

2.7.5 Membership Levels of Affiliation are: Individual, Platinum, Gold, Silver and Individual.

2.8 A LIFETIME MEMBER:

2.8.1 Is a member of the CoNSA who has been granted Lifetime membership by their State or Territory organisation.

2.8.2 Has full rights of membership as afforded to the Full Individual Member.

2.9 A NON-FINANCIAL MEMBER:

2.9.1 Status occurs when membership with their State or Territory Continence Nurse body has not been renewed within 3 months of the stated renewal date.

2.9.2 Cannot identify as a member or be elected onto or vote on the MC, or vote at a general Meeting.

2.9.3 Payment of membership after that period is deemed a new membership and cannot be deemed as continual membership.

2.10 An ORDINARY MEMBER refers to a member of the MC, who is not an officer of the CoNSA. The role of ordinary members is defined under 11.8 and 11.9.

2.11 A GENERAL MEMBER refers to a member of the CONSA, who holds no position on the MC. General members however have responsibilities and rights as defined in Section 4 through Section 8.

2.12 A CONTINENCE NURSE ADVISOR is an APHRA Registered (DIV 1) Nurse who has undergone competency assessment with the standards identified in appendix 4 "CoNSA Competency Standards for Continence Nurse Advisors".

2.13 ANNUAL GENERAL MEETING – referred herein as AGM, is a General Meeting of the members of the CONSA convened annually in accordance with Rule 12.

2.14 An EXTRAORDINARY MEETING is a General Meeting called for all members outside of the AGM, which

2.13.1 Enables the National Representative Body to communicate and explore CoNSA issues.

2.13.2 Provides feedback to the membership via in person meeting, post or electronic means.

2.13.3 Provides the membership opportunities for voting via paper, show of hands post or electronic ballot.

2.15 A GENERAL RESOLUTION means a resolution passed by a majority at the Annual General Meeting (AGM) or as a result of activity as defined an Extraordinary Meeting.

2.16 An ORDINARY RESOLUTION is passed at a MC meeting.

2.17 TIME Definition

2.16.1 Month means a calendar month.

2.16.2 A financial year means from July 1st to June 30th.

2.18 The ACT means the Associations Incorporation Act 1981 (Vic). Regulations mean regulations under the Act; and Relevant Documents have the same meaning as in the Act.

2.19 DOCUMENT refers to documents in written format and those delivered or kept as electronic copies.

3 MISSION AND VISION STATEMENT

3.1 MISSION STATEMENT:

Continence Nurses Society Australia (CoNSA) is a national professional interest group of nurses who have specialist knowledge and skills in continence care. Continence nurses provide services which are an integral part of an interdisciplinary approach to care of people who have incontinence and other bladder and bowel problems. By supporting its' membership through advocacy, policy development, research, education, and establishment of clinical practice standards, CoNSA promotes continence across Australia.

3.2 VISION STATEMENT:

The CoNSA will maintain a high profile, authoritative, active and sustainable national body for continence nursing in Australia, promoting excellence in continence care.

3.3 AIMS of the CoNSA

- 3.3.1 Represent the interests of nurses and midwives in continence care.
- 3.3.2 Promote and protect the role of specialist continence nurses.
- 3.3.3 Develop and sustain quality organisational governance processes.
- 3.3.4 Provide comprehensive useful services to members.
- 3.3.5 Develop positive and productive relationships with all levels of government and NGO's: industry; professional and consumer organisations
- 3.3.6 Promote evidence-based continence care that places the person with continence needs and their family at the centre of care.
- 3.3.7 Advocate for the interests of people with incontinence, their families, carers and unregulated workers.
- 3.3.8 Provide, support and promote education on continence care.
- 3.3.9 Contribute to policy on continence care.
- 3.3.10 Promote research that will contribute to evidence based practice for continence care.

4 MEMBERSHIP

- 4.1 The Membership of CoNSA is made up of members of State/Territory Continence Nurse Bodies. Therefore, to be a member of CoNSA, individuals must first be members of a State/Territory organization. Exceptions to this rule are Affiliate Memberships which is discussed in section 5.6.
- 4.2 There are 4 classifications of membership. Full Membership; Associate Membership, Affiliation Membership and Lifetime Membership. As defined in section 2.2.to 2.7.
- 4.3 The current State /Territory Member continence nurse bodies identify, in their organization's constitution, the role of the CoNSA as their National Representative Body. The relationship with the State and Territory bodies are formalized in this document.
- 4.4 Upon the acceptance of the membership application by the State /Territory body and payment of the subscription, the applicant shall upon notification by the State body to the National Secretary automatically become a member of the CONSA. It is the responsibility of the State /Territory body to notify the National CONSA of new members and renewals within a month of receipt of the completed membership application.
- 4.5 The National Secretary is responsible for the collation of the National Members' Data Base separate to the State / Territory body holdings of State Members' data base. Domains in this National Data Base will include Member Name, Membership Status, Area of practice, Professional Title, Contact Details and Date when first joined the CoNSA.
 - 4.5.1 A register of all State members will be maintained in an orderly manner by each State /Territory body and shared with National CoNSA body in a timely manner. The register must reflect the member's CoNSA membership classification, and any members request re the sharing of personal member information as set out in sections 4.5.

4.5.2. The State or Territory Body membership application must afford the CoNSA the right to publish on the CoNSA website, in member information as consented in appendix 3.

4.5.3 It is the member's responsibility to follow up any change in contact details or images that are necessary. Notification of contact change is made to the State Secretary and then by email to the National Secretary @ CoNSAsec@gmail.com. CoNSA is not responsible for members not receiving membership benefits when the member has not maintained their contact details.

4.5.4 Members will also be required to consent to agree to the Conditions set out in this CoNSA Constitution on the membership application.

4.6 Confidentiality of Members and CoNSA knowledge must be maintained. Access to CoNSA members' contact details will be restricted to CoNSA business and cannot be shared external to CoNSA activity without the individual's permission. Members maintain the rights afforded by the Victorian Information Privacy Act 2000

4.6.1 Members and Contractors undertaking an administrative or Management Committee role within the AFNC will provide a binding undertaking that both the Members and CoNSA Information will be kept confidential and not shared outside of the organisation.

4.6.2 Conditions under which the CoNSA website operates with member information is covered under Section 11.10 and 11.11.

4.6.3 A CoNSA member may be given access to other member's details where it is deemed by the CoNSA Secretary to be beneficial to the membership goals, and benefit both the Member and the CoNSA. Such sharing of information will not breach the individual's rights to request privacy.

4.7 MEMBER REMUNERATION

4.7.1 The assets and income of CoNSA shall be applied exclusively to the promotion of its objects and no portion shall be paid or distributed directly or indirectly to members, except as bona fide remuneration for services rendered or expenses incurred on behalf of CoNSA as approved by the MC.

4.7.2 Receipts are to be given to the Treasurer by the CoNSA member when making a claim for reimbursement of relevant expense/s.

4.7.3 Disputes that arise regarding reimbursement shall be resolved at a meeting of the MC.

4.7.4 All ordinary members of the MC are voluntary and hence are unsalaried.

4.7.5 Contractual Persons nominated to the CoNSA MC and other roles on behalf of CoNSA, will be declared to the membership. The contract will identify all the terms and conditions of agreement between CoNSA and the contractor.

4.7.6 A member of the MC or any of CoNSA's sub-committees having a direct or indirect pecuniary interest in a contract, or proposed contract with CoNSA must disclose the nature and extent of that interest to the MC and shall not vote with respect to that proposed contract. This member's financial interest and the subsequent withdrawal from voting associated with any contractual agreement decision must be noted in the minutes for future transparency of proceedings.

5. MEMBERSHIP FEES

5.1 Part of a Full or Associate member's subscription fee to their State or Territory organization pays for their membership to CoNSA.

5.2 CoNSA membership Annual fees are deemed payable by each State/Territory organization each financial year, either 1 week after the State/territory body Audit report or by the 1st August whichever occurs first. The number of financial members at this report will be the basis on which payment of membership subscription to national are calculated.

5.3 New memberships or Renewal Membership fee paid to State or Territory body after annual audit reconciliation (5.2) confers National Membership. Therefore, these national fees along with member details (as per the requirements for the National Membership Data Base), should be forwarded to the National Treasurer within one month of receipt so the new/ renewing member can be afforded National Membership rights.

5.4 The membership fees payable from the State or Territory body to National CoNSA for Full and or Associate Memberships shall be determined from time to time in an Annual General Meeting of CoNSA.

5.5 Fees are paid by member to State / Territory body on an Annual Basis. There is no capacity for pro-rata payment of part annual National CoNSA fees, as we are a volunteer organisation. Membership can only be conferred on an annual basis and no part payment of annual fees confers membership.

5.6 Affiliation member fees to the CoNSA will be negotiated on an individual, confidential and annual contractual basis with final approval of the Management Committee. Affiliated Membership categories are Platinum, Gold, Silver and Individual categories.

5.7 Under certain circumstances it may be of benefit to The CoNSA to enter into Memorandums of Understanding (MOU) with external organisations to achieve mutual goals.

5.7.1 MOU does not afford the other party Affiliation Membership unless the MOU conditions include this specifically.

5.7.2 MOU conditions are discussed and voted on at MC meetings.

5.7.3 MOU's have defined time frames for existence.

5.7.4 MOU can only be signed by the President on behalf of the CoNSA or the Vice President upon President Incapacity.

5.8 A right, privilege, or obligation of a person by reason of membership of the CoNSA

5.8.1 Is not capable of being transferred or transmitted to another person;

5.8.2 Terminates upon cessation of membership, resignation, non-financial status or death

5.8.3 May change due to change of status to the member's Registration with APRHA and thus the membership classification as defined in Section 2.2.

6 CESSATION OF MEMBERSHIP

6.1 A person ceases to be a member of CoNSA if:

6.1.1 The person resigns from their State/Territory organization. Resignation as such implies resignation from the National CoNSA.

6.1.2 A member becomes non- financial for 3 months past the renewal date of the 1st of July each year. As the annual renewal date is known being the 1st July, then removal from membership will be automatic and the onus is not on the national CoNSA to seek the members' renewal.

6.1.3 A Full member is no longer recognized as Registered by AHPRA, and has made no arrangement to change their Full Member Membership status. In this case, where deemed appropriate, CoNSA will attempt through the State /Territory Body to contact the member with membership options available.

6.2 Their State/Territory body is wound up and ceases to exist.

6.2.1 Under this situation the CoNSA will contact members and offer alternative arrangements to remain CoNSA members.

6.3 Their State/Territory body merges with another organisation or changes in such a way that the new organization's profile and role are significantly different from the original CoNSA State/Territory organization member organization.

- 6.3.1 A condition on the merger or variation by the State Territory body will include a requirement for the new organization to inform CoNSA MC in writing of the change, and on behalf of existing members discuss continuing CoNSA membership.
 - 6.3.2 The CoNSA MC will decide if the members of the new State/Territory organization will or will not continue to be members of CoNSA.
 - 6.3.3 Under the situation where the new organisation is not compatible with CoNSA, or an agreement mutually beneficial to both the new organization and CoNSA members cannot be reached, then the members will be canvassed and offered alternative arrangements to remain CoNSA members.
- 6.4 If the New State territory body undergoes change in only their name then there will be no impact on membership status. A change in name shall be notified to the CoNSA MC in writing.
- 6.5 The State / Territory body is to inform the National secretary of any change in membership status of its members, such as non- renewal and resignation, so that the National data base is maintained.

7. DISPUTES AND MEDIATION

- 7.1. The grievance procedure set out in this rule applies to disputes under these Rules between —
a member and another member; or a member and the CoNSA.
- 7.2 The parties to the dispute must, in good faith, attempt to settle the dispute by mediation The parties to the dispute must meet and discuss the matter in dispute, and, if possible, resolve the dispute within 14 days after the dispute comes to the attention of all of the parties.
- 7.3 If the parties are unable to resolve the dispute at the meeting, or if a party fails to attend that meeting, then the parties must, within 10 days, hold a meeting in the presence of a mediator. The mediator must be a person chosen by agreement between the parties.
- 7.4 In the absence of agreement upon a mediator;
 - 7.4.1. In the case of a dispute between a member and another member, a person is appointed by the MC of the CoNSA;
 - 7.4.2. In the case of a dispute between a member and the Association, a person who is a mediator appointed or employed by the Dispute Settlement Centre of Victoria (Department of Justice).
 - 7.4.3. The mediator;
 - 7.4.3.1 May or may not be a member of the CoNSA.
 - 7.4.3.2 The mediator cannot be a member who is a party to the dispute.
 - 7.4.3.3The mediator must declare any personal interest in the dispute to the MC and if this is prejudicial to either party the MC will appoint or request a new mediator.
- 7.5 The mediator, in conducting the mediation, must :
 - 7.5.1 Give the parties to the mediation process every opportunity to be heard;
 - 7.5.2 Allow due consideration by all parties of any written statement submitted by any party.
 - 7.5.3 Ensure that natural justice is accorded to the parties to the dispute throughout the mediation process.
 - 7.5.4 Report back to the MC with the mediation outcome and identify any action required.
- 7.6 Only if after the mediation process (described Section 7 & 8) does not result in the dispute being resolved, may the parties seek to resolve the dispute in accordance with the Act or otherwise at law.

8 DISCIPLINE, SUSPENSION AND EXPULSION OF MEMBERS

8.1 The grievance procedure must allow for natural justice to be applied as legislated under the Association Incorporation Act 1981 14.B.3 (Victoria)

8.2 The MC may take action if, during a MC meeting it is identified that a member / members

- 8.2.1 Has / have refused or neglected to comply with CoNSA Rules; or
- 8.2.2 Is involved in a dispute concerning CoNSA business that has not resulted in satisfactory mediation outcomes; or
- 8.2.3 Is guilty of conduct unbecoming a member or prejudicial to the interests of the CoNSA.

8.3 If it is determined that as a result of 8.2 determination that action is needed the MC may

- 8.3.1 Suspend a member from membership of the CoNSA for a specified period; or expel that member from the CoNSA; and / or
- 8.3.2 Seek compensation from the member, where recovery action is required.

8.4 The following process must occur where conditions result in the MC executing suspension or expulsion of a member; or in a member seeking compensation / re-dress; or mediation being unable to achieve a successful outcome;

- 8.4.1 A meeting of the MC is held in accordance with sub-rule (7.2), the committee confirms the resolution;
- 8.4.2 If the member exercises a right of appeal to the CoNSA, a meeting of the committee to confirm or revoke the resolution must be held not earlier than 14 days, and not later than 28 days, after notice has been given to the member.
 - 8.4.3 If the member lodges an appeal, the Secretary must as soon as practicable, give to the member written notice of the appeal meeting —
 - 8.4.3.1 Setting out the resolution of the committee and the grounds on which it is based; and
 - 8.4.3.2 Stating that the member, or his or her representative, may address the committee at a meeting to be held not earlier than 14 days and not later than 28 days after the notice has been given to that member; and
 - 8.4.3.3 Stating the date, place and time of that meeting; and
 - 8.4.3.4 Informing the member that he or she may either attend that meeting or give to the committee a written statement seeking to revoke the resolution prior to the date of that meeting;
 - 8.4.3.5 Informing the member that, if at appeal, the committee confirms the resolution, he or she may, not later than 48 hours after that meeting, give the Secretary a notice to the effect that he or she wishes to appeal to the CoNSA in a General Meeting against the resolution.
- 8.4.4 At any meeting of the MC with the member to confirm or revoke a resolution passed under sub-rule (7.2), the MC must —
 - 8.4.4.1 Give the member, or his or her representative, an opportunity to be heard;
 - 8.4.4.2 Give due consideration to any written statement submitted by the member or any other CoNSA member on this issue;
 - 8.4.4.3 Determine by resolution whether to confirm or to revoke the resolution.

- 8.4.5 If member then chooses to further dispute the MC appeal resolution, the member may, not later than 48 hours after that meeting, give the Secretary a notice to the effect that he or she wishes to appeal to the Association in a general meeting against the resolution.
- 8.4.5.1 Following such a receipt, the Secretary must notify the committee who will convene a General Meeting of the CoNSA to be held within 21 days from the date of notification to the secretary.
- 8.4.6 At a General Meeting of the CoNSA convened to consider member appeal against the MC appeal
- 8.4.6.1 No business other than the question of the appeal may be conducted;
- 8.4.6.2 The committee may place before the meeting details of the grounds for the resolution and the reasons for the passing of the resolution;
- 8.4.6.3 The member, and representative, must be given an opportunity to be heard;
- 8.4.6.4 The members present must vote by secret ballot on the question whether the resolution should be confirmed or revoked.
- 8.4.6.5 A resolution is confirmed if, at the General meeting, if more than fifty per cent of the members vote in favour of the resolution by ballot (in person or by proxy). If the appeal by the member is successful, the member's rights are returned. Previous meeting minutes on these issues need to be amended to reflect this outcome.

9. MANAGEMENT COMMITTEE

- 9.1 Subject to section 23 of the Act, The CNSA Management Committee shall be comprised of the following office bearers:
- 9.1.1 President
- 9.1.2 Vice President
- 9.1.3 Secretary
- 9.1.4 Treasurer
- 9.1.5 State Representative of each Australian State and Territory
- 9.1.6 Public Officer.
- 9.2 Officer bearers shall be subject to annual re-election at the Continece Nurses Society Australia National Annual General Meeting, except for State or Territory Representatives of each Australian State and Territory - see 9.4. Additional 'non CoNSA elected' positions assigned by the MC may include the following positions which will be reviewed by MC annually-
- 9.2.1 National Website Co-ordinator,
- 9.2.2 CoNSA sub-committees members or
- 9.2.3 CoNSA representatives sitting on external committees as representatives of CONSA interests by invitation from the MC for a defined term and role.
- 9.3 Nominations for candidate for election as President, Vice President, Secretary, Treasurer and Public Officer should be on CoNSA Nomination Form (appendix 2) distributed one month before the AGM.
- 9.3.1 A serving MC member shall be eligible to stand for re-election without nomination, but should indicate to the secretary their willingness to continue to serve on the CoNSA by completing the Nomination form (see appendix 2).

- 9.3.2 For all other members nomination to be eligible to stand for election requires completed nomination forms including two member nominators and member nominee signatures to be received one week prior to the AGM by the CoNSA Secretary.
- 9.4 Nominations will process as follows;
- 9.4.1 Should there be more than one nomination for a position then voting will take place by secret Ballot. AGM members attendees voting slips will be distributed the prior to meeting commencement upon signing the attendance list. Non attending members can nominate voting representation via proxy. The votes are counted by two (2) CoNSA members who are nominated and overseen by the Public Officer.
- 9.4.2 Should there be only one nomination for a position then the candidate will be deemed elected.
- 9.4.3 Should there be insufficient candidates, nomination recruitment will continue at the end of the AGM and will be determined by the MC to take position until next AGM. Should that activity identify and result in more than one nominee for the role then the MC will determine candidate by vote.
- 9.5 All committee positions for State / Territory Body Representatives shall be subject to election or re-election at their State /Territory Annual General Meeting and are not subject to National Electoral Activity. It is recognised that members in States or Territories where there is no local body, may choose to belong to any State / Territory body, through which they access CoNSA membership. In this case it is the consensus between the local members in that State or Territory that determines the National Representative. If there is no consensus then the MC will appoint a member to ensure The CoNSA Management Committee is representing all States and Territories.
- 9.6 The CoNSA Management Committee may appoint a person to fill a vacancy on the committee in the period between the CoNSA AGMs. An appointed Management Committee member shall hold office until the next Annual General Meeting of the CoNSA and shall be eligible for election to the committee without nomination at the next AGM.
- 9.7 An CoNSA Management Committee (MC) member shall be a financial member of CoNSA, except in the case where a contractor is undertaking a defined role and term of service, as invited by the MC. The MC contractor is covered under a contractual agreement, and as such has no voting rights.
- 9.8 The first committee of the Incorporated Association shall be comprised of such persons as hold office prior to Incorporation. The first committee shall hold office until the first Annual General Meeting after incorporation.
- 9.9 A MC member ceases to be a Member of the committee should their membership be defined under Section 6 - Cessation of Membership and as such should notify the President to address the situation.
- 9.10 The MC may at a Committee meeting by resolution, remove any member of the committee before the expiration of the member's term of office and appoint another member in his or her place to hold office until the expiration of the term of the incumbent first-mentioned member. Removal from MC can result from the member being:
- 9.10.1 Disqualified from being a committee member by the Act;
- 9.10.2 Expelled as a member under these rules;
- 9.10.3 Incapacitated by ill health which impacts on their ability to perform in their role;
- 9.10.4 Absent without apology from more than two consecutive meetings;
- 9.10.5 No longer is the duly appointed representative from State /Territory bodies or other represented committees or affiliations.
- 9.10.6 The removed member has access to the grievance process as set out in Sections 7 &8.

- 9.11 When a member is unable to attend a MC or act as a representative for CoNSA at a meeting, the CoNSA MC member must ensure there is an alternate representative attending the meeting. An apology should be forwarded to the Secretary identifying the alternative member attending and contact details. The alternate representative should be well briefed by the incumbent representative and/or their State/Territory body on current and upcoming issues being dealt with by CoNSA .A full briefing back to their State or Territory members should be provided to enable continuity in dealing with issues.
- 9.12 It is important the MC members maintain their contact details with their State / Territory body and the other members of the MC. A such a MC contact register shall be shared between MC members..

10 SUB-COMMITTEES

- 10.1 The Sub-committees are established to work on specific projects that have been identified by the MC as requiring a national focus.
- 10.2 Sub-committees may change over time and the names and statements of duties of the Sub-committees will be adapted to meet these changes.
- 10.3 The Chairperson of a Sub-Committee will be appointed by the MC and become an invited MC member.
- 10.4 The member of each Sub- Committee will be appointed on the basis of having:
- 10.4.1 Knowledge, skills and experience as relevant to the Sub-Committee.
 - 10.4.2 An interest in pursuing these at a national level for CoNSA.
 - 10.4.4 Time to contribute to active participation.
 - 10.4.5 Energy to drive the agenda the Sub-committee is dealing.
- 10.5 Membership of sub-committees.
- 10.5.1 CoNSA members will be invited onto the sub-committees where relevant.
 - 10.5.2 There may be occasions when an CoNSA Sub-Committee requires particular expertise and/or advice in relation to the work they are undertaking, that is not available through the membership.
 - 10.5.3 If a person who is not a member of CoNSA is co-opted to a Sub-committee, a formal letter of appointment from the President will appoint them as a member on a particular sub-committee and outline the terms and conditions of that appointment. This position does not afford the subcommittee member any membership rights in the CoNSA.
- 10.6 The Contractual process for hiring experts and /or advisors are as follows;
- 10.6.1 The MC will call for expressions of interest (EOI) through the CoNSA network.
 - 10.6.2 Persons or companies replying to the EOI will provide the MC with a written proposal and curriculum vitae, including references.
 - 10.6.3 The MC will then make a decision, and the President will send the successful candidate a formal letter of appointment.
 - 10.6.4 The contracting of such persons or companies by the MC will be broadcast through the CoNSA network at the time of hiring.

11 ROLES AND FUNCTION OF THE MANAGEMENT COMMITTEE (MC)

- 11.1 The affairs of the CoNSA shall be managed and controlled by a MC. The MC may exercise all such powers and do all such things as are within the objects of the CoNSA, except for activity restricted by the Act or these to be done by the CoNSA in a General Meeting.

- 11.2 MANAGEMENT COMMITTEE ROLES include but are not limited to
- 11.2.1 Responsibility for administration of the affairs of CoNSA.
 - 11.2.2 Authority to make and interpret the meaning of the constitution rules and any matter/s relating to CoNSA on which the rules are silent.
 - 11.2.3 Implementation of policy decisions as determined and agreed by the CoNSA members.
 - 11.2.4 Acting as the executive committee of CoNSA that provides the leadership and supports the CoNSA mission and vision statement in section 3.
 - 11.2.5 Representing and acting primarily in the interests of CoNSA, and then in the interests of the State/Territory organizations that nominated them.
 - 11.2.6 Identifying and sourcing financial support for the work of CoNSA.
 - 11.2.7 Managing, protecting and controlling the funds and other property of CONSA.
 - 11.2.8 As necessary seek nominations from CoNSA members to act as CoNSA representatives on relevant State and National committees. The MC will appoint a person to fill the role of CoNSA from these nominations. The MC reserves the right to make changes to CoNSA representation on these external committees.
- 11.3 The MC MEETING PROCESS:
- 11.3.1 A quorum shall be greater than 50% of the MC Office Bearers and State/Territory Representatives.
 - 11.3.2 The MC will meet at least 3 monthly as determined by the President.
 - 11.3.3 The MC shall carry out the business of CoNSA using systems including a mix of correspondence, electronic, internet, teleconference meetings and or face-to-face meetings.
 - 11.3.4 MC decisions will usually be arrived at by consensus. However if there is a matter that requires a vote, MC members shall each have one vote, while the President remains silent and does not vote. However in the event of a tied vote the President has the deciding vote.
 - 11.3.5 An Agenda will be distributed a week before each meeting and the meeting will be limited to that activity identified in the agenda, at the President's discretion.
 - 11.3.6 Minutes of each meeting will be taken and circulated to CoNSA membership by the State/Territory representatives on the MC.
 - 11.3.7 In the event of a decision of the MC being required urgently between meetings, the President, or at their direction, another person may canvas the opinions of the MC and formulate resolutions circulated to each of the MC Members.
 - 11.3.8 MC members may attend State or Territory body meetings representing the CONSA as determined by the CoNSA.

11.4 ROLE AND FUNCTION OF THE PRESIDENT

11.4.1 Preamble:

The role of President of the CoNSA is a leadership and guidance role. The President needs drive, enthusiasm, and a clear vision of the purpose and direction of the Association. Team skills are vital, as the effective functioning of the management committee depends on the ability of its members to work together for the good of the Association.

11.4.2 Title :

The President of the Association may sign official documents as "President, CoNSA"

11.4.3 Appointment of the President

The President is elected by members of the Association by ballot at the Annual General Meeting for a period of 1 year, The President-elect takes office at the end of the Annual General Meeting. A casual vacancy may be filled by appointment until the next Annual General Meeting. The President must be a financial full member of the Association – An Associate or Affiliate member or a non- member is not eligible for appointment or election as President. The President cannot hold a concurrent position on the committee (ie. President and State /Territory Representative).

11.4.4 Accountability of the President

The President is accountable to the members of the association through Annual General Meetings, the MC and the election process. The MC holds the President accountable for proper execution of standing and delegated responsibilities. In addition, the President is accountable to the Office of Consumer and Business Affairs for carrying out statutory obligations under the Associations Incorporation Act 1981.

11.4.5 Responsibilities of the President

11.4.5.1 The President's primary roles as leader of the CoNSA is to represent the CoNSA membership.

11.4.5.2 Chair all CoNSA meetings including MC, General (AGM and Extraordinary) meetings and attend as required in an ex-officio capacity sub-committee meetings.

11.4.5.3 If unable to attend a meeting, the Vice President, Secretary, or Treasurer or another ordinary committee member will be selected in this order to chair that meeting.

11.4.5.4 Ensure that all actions of the committee are in accordance with the Constitution and relevant statutes and regulations.

11.4.5.5 Act as spokesperson for the Association to the media and other external entities. If this role is delegated, the President remains accountable and hence must still authorise any public statements.

11.4.5.6 Represent the CoNSA to affiliated and other bodies as deemed appropriate by the Management Committee.

11.4.5.7 Act on the written Proxy voting instructions from members of the CoNSA who are unable to attend a general meeting, without nomination of any other member of the CoNSA. The President must report proxy votes strictly as instructed in the proxy form.

11.4.6 Compensation for the President;

11.4.6.1 The position of President is voluntary, and hence is unpaid. The President is prohibited under the Associations Incorporation Act 1981 and the CoNSA Constitution from deriving profit from the Association:

11.4.6.2 The Treasurer is authorised to meet any reasonable out-of-pocket expenses incurred by the President in carrying out CoNSA duties, provided receipts are made available for any claimed expenses. Where any dispute arises, it shall be resolved at a meeting of the MC.

11.4.7 Performance of the President

11.4.7.1 The President must have a close working knowledge of the CoNSA Constitution. This is vital, as many of the President's responsibilities must be carried out in accordance with the Constitution. Likewise a working knowledge of the Associations Incorporation Act 1981 is needed.

11.4.7.2 No Association cheque should be co-signed or payment authorised electronically without seeing original documentation outlining the need for payment.

11.4.7.3 The President may apply to the committee for a leave of absence of up to four months. Where absence at a meeting is anticipated it is preferable the President will elect for the Vice President, Secretary, Treasurer (in this order) or ordinary committee member to officiate for the meeting. Failure to attend more than two consecutive meetings without apology, may result in suspension from the position of President, and creation of a casual vacancy by the MC.

11.4.7.4 The President must chair meetings in such a manner as to ensure efficient, yet fair dealing with each item on the agenda. The President retains control of the meeting, and members are expected to follow the directions of the President.

11.4.7.5 Any potential or actual conflict of interest relating to a proceeding of the committee must be declared to the committee, who will decide what course of action to take in accordance with the Associations Incorporation Act 1981. The conflict of interest and the resulting action by the committee will be tabled in the minutes.

11.4.7.6 While the President is not required to seek prior approval from the committee for making public statements, surveying MC members' opinions before formulating a response is advisable. The President may be called to explain statements to the MC if perceived to be inconsistent with the Aims of the CoNSA.

11.4.7.7 The MC, in the event of misconduct or continuing poor performance by the President, may declare the position vacant. This must be done in accordance with the Constitution, and the appeal process. Such a course of action is a last resort, undertaken only when the interests of the Association are threatened by the actions or continued inaction of the President.

11.5 THE ROLE OF THE VICE PRESIDENT

11.5.1 Preamble:

The role of Vice President of the CoNSA is to support and assist the President and other committee members, both directly and indirectly. The Vice President is able to immediately step into the role of President if the need should arise, to provide continuity of leadership to the Association.

11.5.2 Title:

The Vice President of the CoNSA may sign official documents as "Vice President, CoNSA".

11.5.3 Appointment of Vice President

11.5.3.1 Elected annually by members at the AGM of the Association in accordance with the constitution.

11.5.3.2 The Vice President-elect takes office at the end of the Annual General Meeting. If vacated the position may be filled by appointment for the remainder of the term of office as determined by the MC.

11.5.3.3 The Vice President must be a financial full member of the Association.

11.5.4 Accountability of the Vice President

11.5.4.1 Vice President is immediately accountable to the President of the CoNSA, and then to the committee. The committee holds the Vice President accountable for proper execution of standing and delegated responsibilities.

11.5.4.2 Where the Vice President is delegated a responsibility by another office bearer, he or she will be accountable to that person for the performance of the delegated responsibilities.

11.5.5 Responsibilities The Vice President's primary roles are;

11.5.5.1 Supporting the President in the performance of his or her duties, and supporting the other members of the committee in the performance of their duties.

11.5.5.2 Chairing any meeting of the CoNSA from which the President is absent or unable.

11.5.5.3 Acting as spokesperson for the CoNSA to the media and other external entities, with the authorization of the President. The President remains accountable and hence must authorize any public statements.

11.5.5.4 Representing the association to affiliated and other bodies as deemed appropriate by the committee and or President.

11.5.5.5 Providing support and guidance to new members of the committee, to orientate them to their roles and portfolios, and facilitate their development into productive participants in the committee.

11.5.5.6 Collaborating with other members of the committee to ensure that projects and tasks are completed in a timely manner and assist other members of the committee with their respective portfolios when appropriate.

11.5.6 Compensation: for Vice President;

11.5.6.1 The position of Vice President is voluntary, and hence is unpaid. The Vice President is prohibited under the Associations Incorporation Act 1981 and the CoNSA Constitution from deriving profit from the Association'

11.5.6.2 The Treasurer is authorised to meet any reasonable out-of-pocket expenses incurred by the Vice President in carrying out CoNSA duties, provided receipts are made available for any claimed expenses. Where any dispute arises, it shall be resolved at a meeting of the MC.

11.5.7 Performance: of the Vice President

11.5.7.1 The Vice President must have a working knowledge of the CoNSA Constitution. This is vital, as many of the President's responsibilities must be carried out in accordance with the Constitution, and the Vice President may be called upon to fulfil the duties of President at short notice. Likewise a working knowledge of the Associations Incorporation Act 1981 is needed.

11.5.7.2 Failure to attend more than two consecutive MC without apology may result in suspension from the position of Vice President, and creation of a casual vacancy. The Vice President may apply to the committee for a leave of absence of up to four months, subject to the Rules of the CoNSA.

- 11.5.7.3 The Vice President is presiding a meeting, must act in such a manner as to ensure efficient, yet fair dealing, with each item on the agenda. The Vice-President retains control of the meeting, and members are expected to follow his/her directions.
- 11.5.7.4 Any potential or actual conflict of interest relating to a proceeding of the committee must be declared to the committee, who will decide what course of action to take in accordance with the Associations Incorporation Act 1981. The conflict of interest and the resulting action by the committee will be tabled in the minutes.
- 11.5.7.5 The MC, in the event of misconduct or continuing poor performance by the Vice President may declare the position vacant. This must be done in accordance with the Constitution, and there is an appeal process. Such a course of action is a last resort, undertaken only when the interests of the CONSA threatened by the actions or continued inaction of the Vice President.

11.6 THE ROLE OF THE TREASURER

- 11.6.1 Preamble: The Treasurer of the CoNSA is personally accountable for the finances of the Association. The role demands integrity, acuity, computer literacy and accountability.
- 11.6.2 Title: The treasurer may sign documents as "Treasurer, CoNSA"
- 11.6.3 Appointment of the Treasurer
- 11.6.3.1 Elected to the position by the members of the CoNSA by annual ballot at an Annual General Meeting. The Treasurer elect takes office after the Annual General Meeting.
- 11.6.3.2 Should a casual vacancy occur the MC will nominate a member to fill that vacancy until the next AGM.
- 11.6.3.3 The Treasurer must be a financial full member of the Association.
- 11.6.3.4 Accountability: Given the responsible nature of the role, the Treasurer is accountable not only to the MC and the members of the Association, but also to the Crown. Improper actions by the Treasurer may well result in criminal proceedings, as well as expulsion from the MC and the CoNSA.
- 11.6.4 Responsibilities of the Treasurer includes but not limited to;
- 11.6.4.1 Activity as a Member of the committee.
- 11.6.4.2 Maintaining the CoNSA's financial records in accordance with Australian Audit Standards to comply with the Associations Incorporation Act 1981 and the CoNSA Constitution.
- 11.6.4.3 Developing, implementation, and monitoring budgets as required by the Management Committee.
- 11.6.4.4 A Close working knowledge of the Constitution, the Associations Incorporation Act 1985, and the Australian Audit Standards.
- 11.6.4.5 Presenting financial report to the committee at each meeting and as requested by the President or other committee members.
- 11.6.4.6 Arranging an audit of the Association's financial records prior to the AGM, with the auditor to be approved by the committee.
- 11.6.4.7 Receiving all money payable to the Association.
- 11.6.4.8 Issuing signed and stamped receipts for all money received.
- 11.6.4.9 Maintaining the Association's petty cash and cheque account.

- 11.6.4.10 Acting as Mandatory signatory to Association cheques, which must then be countersigned by a Full member as nominated by the MC.
- 11.6.4.11 Reimburse legitimate CoNSA expenses, only after sighting documentation verifying the expense.
- 11.6.4.12 The Treasurer may be reimbursed for out-of-pocket expenses, but these must be validated and approved by the committee members including at least one of the President or the Vice President.
- 11.6.4.13 Generating invoices for money owed to the Association.
- 11.6.4.14 Liaising with the Secretary to maintain the membership database with financial members.
- 11.6.4.15 Providing financial advice to the MC and be prepared to seek investment advice re finances.
- 11.6.4.16 As determined by the President, act as a delegate to other organizations.

11.6.5 Delegations of the Treasurer Role

- 11.6.5.1 The Treasurer must directly supervise any delegated tasks which involve the financial handling,
- 11.6.5.2 Under the Associations Incorporation Act 1981, the Treasurer retains full personal responsibility for all financial transactions carried out in the name of the CONSA, and for financial reporting.

11.6.6 Compensation for the Treasurer

- 11.6.6.1 The Treasurer is specifically and expressly prohibited from deriving personal profit from the activities of the Association.
- 11.6.6.2 Any misuse of Association funds for personal gain constitutes a criminal offence.
- 11.6.6.3 Actual and potential conflict of interest must be declared to the committee, who will decide if the Treasurer should step down, be absent during certain discussions, or continue as usual. The issue and any subsequent decision by the committee is to be tabled in the minutes.

11.6.7 Key Performance Indicators

- 11.6.7.1 Up-to-date financial records.
- 11.6.7.2 Timely reports to the committee.
- 11.6.7.3 Satisfy the requirements of the auditor.
- 11.6.7.4 Provide accurate financial advice to the committee.
- 11.6.7.5 Attend all committee meetings. If unable to do so, provide the Secretary with a written Treasurer's Report to present to the meeting. Where absence of the Treasurer is anticipated it is preferable the treasurer should appoint a briefed delegate for the meeting which can be from within the MC.
- 11.6.7.6 If the Treasurer misses more than two consecutive meetings without apology then the Treasurer may be suspended from the position of Treasurer, and will create a casual vacancy, which will be filled by the MC nominee until next AGM..

11.7 THE ROLE OF THE SECRETARY;

11.7.1 Preamble: The role of Secretary of the CoNSA is a responsible one. The Secretary provides much of the administrative role of the committee, and works in collaboration with the committee.

11.7.2 Title: Secretary of the CoNSA may sign official documents as "Secretary, CoNSA".

11.7.3 Appointment of Secretary.

11.7.3.1 Elected by members of the Association annually at the AGM, in accordance with the Constitution of the CONSA. The Secretary-elect takes office following the AGM.

11.7.3.2 A casual vacancy may be filled by appointment for the remainder of the Secretary's term of office.

11.7.3.3 The Secretary must be a financial full member of the Association.

11.7.4 Accountability of the Secretary;

11.7.4.1 The Secretary is accountable to the members of the CoNSA via AGM and General Meetings, the MC, Communications and the election process.

11.7.4.2 The MC holds the Secretary accountable for proper execution of standing and delegated responsibilities.

11.7.4.3 In addition, the Secretary is accountable to the Office of Consumer and Business Affairs for carrying out statutory obligations under the Associations Incorporation Act 1981.

11.7.5 Responsibilities: of the Secretary;

The Secretary is the principal administrative officer and is responsible for carrying out the decisions of the MC the routine administrative tasks, including, but not limited to.

11.7.5.1 Collate and distribute the notice of meeting and agenda one week prior to the meeting.

11.7.5.2 Record minutes of each meeting including the MC, General and AGM meetings.

11.7.5.3 Distribute the minutes to the committee within one month of the meeting they relate to.

11.7.5.4 Maintain and protect the minute books or electronic minutes as a legal record of the activities of the Association, as required under the Associations Incorporation Act, and the CONSA Constitution.

11.7.5.5 Develop and maintain a database of members of the CoNSA. This data must be secure from unauthorised access.

11.7.5.6 The CoNSA Secretary shall provide the CoNSA Website Coordinator with a members and office bearers details in accordance with MC direction.

11.7.5.7 Distribute publicity and other materials to members of the Association.

11.7.5.8 Distribute publicity and other materials to the website coordinator for inclusion on the CONSA website.

11.7.5.9 Support the Public Officer in distributing and receiving nomination and proxy forms for election of officers.

11.7.6 Delegations: All of the above responsibilities may be delegated to other members of the committee, or members of the Association, except the following:

11.7.6.1 Maintain and protect the minute books or electronic minutes as a legal record of the activities of the Association, as required under the Associations Incorporation Act, and the CoNSA Constitution.

11.7.6.2 The delegation of the task of developing and maintaining the membership database may only be delegated to another MC member or the website coordinator.

11.7.6.3 The committee must approve delegation of any task to a member of the CoNSA who is not a member of the MC.

11.7.7 Compensation for the Secretary;

The position of Secretary is voluntary, and hence is unsalaried. The Secretary is prohibited under the Associations Incorporation Act 1981 and the CoNSA Constitution from deriving profit from the Association:

11.7.7.1 The Treasurer is authorised to meet any reasonable out-of-pocket expenses incurred by the Secretary, provided receipts are made available for any claimed expenses.

11.7.7.2 Where any dispute arises, reimbursement it shall be resolved at a meeting of the committee.

11.7.8 Performance of the Secretary

11.7.8.1 The Secretary must have a close working knowledge of the CoNSA Constitution. This is vital, as many of the Secretary's responsibilities must be carried out in accordance with the Constitution. A working knowledge of the Associations Incorporation Act 1981 is recommended.

11.7.8.2 Failure to attend more than two consecutive meetings without apology may result in suspension from the position of Secretary, and creation of a casual vacancy. The Secretary may apply to the committee for a leave of absence of up to four months, subject to the Rules of the CONSA. Where absence of the Secretary is anticipated, it is preferable the Secretary liaises with the President for alternative arrangements.

11.7.8.3 At each meeting, the Secretary shall report on the progress of delegated responsibilities minuted in the previous meeting. Lack of progress may then be explained, and the committee may then consider alternative delegation of the task if necessary to ensure prompt completion.

11.7.8.4 The committee in the event of misconduct or continuing poor performance by the Secretary can declare the position vacant. This must be done in accordance with the Constitution, and there is an appeal process. Such a course of action is a last resort, undertaken only when the interests of the CoNSA are threatened by the actions or continued inaction of the Secretary.

11.7.8.5 The Secretary shall work closely with the Public Officer. In the absence of the Public Officer the Secretary shall undertake the Public Officer responsibilities as explained in section 11.12

11.8 THE ROLE OF THE STATE AND TERRITORY REPRESENTATIVES - as Ordinary Member of the CONSA MC

11.8.1 Preamble:

The role of representative to the CoNSA is a responsible one. Because the MC includes representatives from all States and Territories, decisions made by the MC should reflect the needs of members nationally.

11.8.2 Title: of State and Territory Representatives

State and Territory Representatives may sign official documents as "State (or Territory) Representative to CONSA", Identifying their sponsoring body representation as appropriate.

11.8.3 Appointment of Representatives;

11.8.3.1 Elected by members of their State or Territory Bodies on an annual basis, representatives assume their role at next MC meeting.

11.8.3.2 A casual vacancy may be filled by State or Territory Body appointment for the remainder of the term of office.

11.8.3.3 The Representative must be a financial full member of the Association.

11.8.4 Accountability of State and Territory Representatives.

11.8.4.1 The Representative is primarily responsible to the CoNSA and then their state body.

11.8.4.2 The MC holds the Representative accountable for proper execution of standing and delegated responsibilities especially in reporting back to State or Territory membership.

11.8.4.3 In addition, each member of the MC is accountable to the Office of Consumer and Business Affairs for carrying out statutory obligations under the Associations Incorporation Act 1981.

11.8.5 Responsibilities of the State and Territory Representatives:

11.8.5.1 To act as conduit between CoNSA and State and their Territory bodies and members.

11.8.5.2 Is familiar with CoNSA Constitution and current issues.

11.8.5.3 Is authorised to speak on behalf of the members of their State or Territory organizations and/or members and seeks instruction from their sponsoring organization on current issues to be dealt with by CoNSA.

11.8.5.4 Is authorized to make decisions at the MC meetings and at the meetings of any sub-committees they may be members.

11.8.5.5 Provides a full briefing back to their State and Territory organizations and/or members to enable continuity in dealing with issues.

11.8.5.6 Sends out the MC minutes and any other relevant information to their State/Territory members as directed by the CoNSA President and/or Secretary.

11.8.5.7 Provides an updated membership list of their State and Territory organization to the CoNSA Secretary at the beginning of each financial year and in 3 monthly reports thereafter.

11.8.5.8 Provides MC with a summary report of each State or territory body activity and upcoming events.

11.8.5.9 Act in other supportive MC roles in filling casual vacancies as need arises and as ratified by the MC.

11.8.5.10 When unable to attend meetings arranges a delegate from the State or Territory body to attend, having briefed the delegate on the responsibility and current activity of the MC.

11.8.5.11 Will not fail to attend two consecutive meetings without apology Failure to do so will cause a casual vacancy in the representative's role. The CoNSA President will then liaise with the State / Territory body to seek an alternate delegate.

11.9 ROLE OF SUB-COMMITTEE REPRESENTATIVES AS ORDINARY MEMBERS OF THE CoNSA MC.

11.9.1 Preamble:

The role of Sub-Committee Representative of the CoNSA is a responsible one. The Committee undertakes activities as directed by the MC.

11.9.2 Appointment of Sub-Committee Representatives to MC.

11.9.2.1 The Chairperson of a Sub-Committee will be appointed by the MC and become an invited member of the MC (as per 10.3).

11.9.2.2 The Representative to the MC should be a Full member of the CoNSA.

11.9.3 Accountability: of Sub-Committee Representatives.

11.9.3.1 The Representative is primarily responsible to the CoNSA and then their committee.

11.9.3.2 Each member of the MC is accountable to the Office of Consumer and Business Affairs for carrying out statutory obligations under the Associations Incorporation Act 1981.

11.9.4 Responsibilities of the Sub-Committee Representative to the MC:

11.9.4.1 To act as conduit between CoNSA MC and their Sub-Committee members.

11.9.4.2 Accurately represents the activities and recommendations of the Sub-Committee.

11.9.4.3 Is authorised to speak on behalf of the members of their Sub-Committee.

11.9.4.4 Provides a full briefing back on all relevant items to their Sub-Committee.

11.9.4.5 Ensures member details of Sub-Committee are kept current.

11.9.4.6 When unable to attend meetings to arrange a delegate from the Sub-Committee to attend, having briefed the delegate on the responsibility and current activity of the MC.

11.9.4.7 Will not fail to attend two consecutive meetings without apology. Failure to do so may cause a casual vacancy in the representative's role at the MC discretion.

11.10 PURPOSE OF THE CONSA WEBSITE:: Is to provide CONSA with a professional and public profile through its website. The CONSA website will be used for the following purposes;

11.10.1 Give details about CoNSA and their office-bearers.

11.10.2 Publicise the CoNSA causes.

11.10.3 Publicise meetings and function.

11.10.4 Advertise CoNSA publications and courses and any other services.

11.10.5 Recruit new members.

11.10.6 Publicise position statements.

11.10.7 Make available CoNSA competencies to members.

11.10.8 Make available membership applications.

11.10.9 Invite suggestions from members.

11.10.10 Post call for nominations for CoNSA elections.

11.10.11 Solicit donations and bequests.

11.10.12 Provide educational material for members or general public.

11.10.13 Communicate better with CoNSA members.

11.10.14 Provide links to other websites of interest.

11.10.15 To set out CoNSA e-mail address.

11.11 ROLE AND FUNCTION OF WEBSITE ADMINISTRATOR:

11.11.1 Manage and update website as instructed by the President, Secretary or Treasurer in accordance with the MC determinations.

11.11.2 Updates the membership database in accordance with information received from the President, Secretary or Treasurer, who will only pass on such information as afforded by the consent conditions under Section 4.5 for personal member information contained within the membership application.

11.11.3 The CONSA Secretary shall provide the CoNSA Website Administrator with a current register of members and office bearers. Domains in this National Data Base will include Member Name,

Membership Status, Area of practice, Professional Title, Contact Details and Date when first joined the CONSA.

- 11.11.4 Each member is responsible to ensure their own details are current.
- 11.11.5 Understands ownership of the CoNSA website, the CoNSA website address, the website intellectual property and systems remain under direct control of the CoNSA members.
- 11.11.6 Posts an electronic copy of the CoNSA minutes and notice of meetings. Appropriate other proceedings may be posted on the CoNSA website at the discretion of the President.
- 11.11.7 Posting of articles, information, web-links and such as approved by MC.
- 11.11.8 Ensure the domain name is available and is registered.
- 11.11.9 In the event of misconduct or continuing poor performance by the Website Coordinator, the MC may declare the position vacant. The MC will then advertise and recruit to the position.
- 11.11.10 Access to Members' details on the website may be available to members only.
- 11.11.11 Maintains the confidentiality and privacy of members by auditing the information posted to the website in public and member's only pages as deemed appropriate. Where there is a concern the Website co-ordinator will refer to the M.C for guidance, primarily through the President or Secretary.
- 11.11.12 Ensure all identifiable personal electronic media that is placed on the website has the agreement of the individual before posting.

11.12 ROLE OF THE PUBLIC OFFICER.

- 11.12.1 Notify the Office of Consumer and Business Affairs of any changes to the officers of the Association, and any alterations to the Constitution or the registered rules of the Association.
- 11.12.2 Send and receive nominations / proxy forms on motion/s or committee elections to each state and territory representative.
- 11.12.3 Advise the membership when nominations / proxy forms on motion/s or committee elections are to be returned to the secretary or public officer with the enclosed contact details
- 11.12.4 Advise the MC about nominations or proxy votes received in a timely manner to ensure smooth conduct of meetings.
- 11.12.5 Elected annually at AGM. Any casual vacancy will be filled by MC nomination of a Full Member residing with the state of incorporation, until the next AGM.
- 11.12.6 This role may be undertaken by the Secretary if a Public Officer has not been appointed by the committee at a time determined by the committee.
- 11.12.7 Attendance at MC committee meeting by Public Officer is not mandated unless the President requests attendance for the meeting. However the Public Officer will be informed by the Minutes of the MC meeting and will need to be conversant with the Activities of the MC, as legislated Public Officer responsibilities may result as result of the MC meeting.

11.13 USE OF THE CONSA SEAL OF THE ASOCIATION.

- 11.13.1 In the event of incorporation the association shall have a common seal upon which its corporate name shall appear.
- 11.13.2 The seal shall not be used without the express authorisation of the committee, and every use of the seal shall be recorded in the minutes of MC meetings.
- 11.13.3 The affixing of the seal shall be verified by the President and an additional committee member.

11.13.4 A Copy of the Seal may also be kept electronically in a secure password accessed file that is passed from President to President. Such Document so sealed with date and version will be noted in the minute is to be distributed as secure PDF documents that cannot be copied or transformed into open documents.

12. THE ANNUAL GENERAL MEETING (AGM);

- 12.1 The Management Committee shall call an Annual General Meeting in accordance with the Act and these rules. The notice of the AGM, Agenda, Nomination and Proxy forms will be sent at least 1 month in advance to members.
- 12.2 Voting may take place during the AGM, and those who cannot attend will be allowed proxy voting (eg one vote per member per decision).
- 12.3 The first Annual General Meeting shall be held within 18 months after the Incorporation of the Association, and thereafter coinciding with the Continence Foundation of Australia Annual National Conference, (unless otherwise requested and voted on by the members).
- 12.4 The order of the business at the meeting shall be:
- 12.4.1 Attendance
 - 12.4.2 Apologies
 - 12.4.3 Confirmation of the minutes of the previous AGM *and* of any Extraordinary Special General Meeting held since the last AGM.
 - 12.4.4 Business arising from the previous minutes
 - 12.4.5 The Treasurer Report presenting the financial statement and auditor's report
 - 12.4.6 State and Territory and Sub Committee Reports
 - 12.4.7 Election of officers of the Management Committee.
 - 12.4.8 Appointment of auditors for next financial audit
 - 12.4.9 Any New Business tabled in Agenda requiring consideration by the association in AGM
 - 12.4.10 Confirmation of the next AGM
- 12.5 Minutes of the AGM will be confirmed at next MC meeting then circulated to members within 3 months of the AGM by CoNSA Secretary to relevant State and Territory Representatives to distribute to their local membership. AGM minutes will also be posted on the CoNSA website.

13. EXTRAORDINARY GENERAL MEETINGS.

13.1 The MC may call an Extraordinary General Meeting / Discussion Forum of members of the CoNSA at any time. All meetings that are not AGM or MC meetings are Extraordinary Special General Meetings.

13.2 General Members may also call an Extraordinary Special Meeting, by forwarding to the CoNSA Secretary a formal request, signed by not less than 10 CONSA members, stating the purpose of the meeting. The MC shall convene an Extraordinary General Meeting for the purpose specified, within the following two months.

13.3 The General Meeting may be in the form of a face to face meeting, postal/ electronic information distribution and subsequent Ballot of members or via teleconferencing or other electronic media that allows discussion of the issue and member feedback and determination as decided appropriate by the MC.

13.4 In the case of an Extraordinary Meeting being requested at an AGM, and support from 10 other members by show of hands it is sufficient to minute the request.

13.5 If an Extraordinary General meeting is not convened within two months, as required by 13.2 above, the members requesting the meeting may convene an Extraordinary Special General Meeting. Such a meeting

shall be convened in the same manner, as nearly as practical, as a General Meeting convened by the MC, and for this purpose the MC shall ensure that the meeting is supported free of charge with particulars of the members entitled to receive a notice of meeting and other usual meeting resources.

13.6 The membership must all have the opportunity to have involvement in the Extraordinary General meeting by information dissemination, writing, proxy, postal voting or via their State Territory Representative, as deemed appropriate by the organisers.

13.7 All business that is conducted at an Extraordinary General meeting is deemed to be special business and the general membership should receive minutes of the meeting within 1 month of the meeting.

14. NOTICE OF GENERAL MEETINGS.

14.1 The Secretary of the CoNSA must send to each member of the CONSA via their State / Territory Representative, a notice stating the place, date and time of the meeting and the nature of the business to be conducted at the meeting.

14.2 Time frame for notification is at least 14 days prior to the General Meeting, or if a special resolution has been proposed at least 21 days, before the date fixed for holding a General meeting of the Association.

14.3 Notice of meeting may be sent to the member.

14.3.1 By the preferred media, being electronic transmission.

14.3.2 By prepaid post to the address provided within the register of members at the members request;

14.4 No business other than that set out in the Notice & Agenda convening the meeting may be conducted at the meeting.

14.5 A member intending to bring any business before a meeting may notify in writing, or by electronic transmission, the issue to the Secretary of that business, who must include that business in the Notice and Agenda calling the next general meeting.

15. QUORUM AT MEETINGS

15.1 No item of business may be conducted at a General Meeting unless a quorum of members entitled under these Rules to vote is present at the time when the meeting is considering that item.

15.2 A Quorum of members of a MC meeting is established when 50% of the Full member membership of the MC is present or represented electronically or by proxy.

15.3 A Quorum of members at General Meetings (including the AGM) is achieved when more than 25% of Full Membership are personally present, represented by proxy or accessing the meeting via electronic media.

15.4 If, within half an hour after the appointed time for the commencement of an Ordinary MC or General Meeting (being an AGM or Extraordinary meeting), a quorum is not present—

15.4.1 The meeting shall stand adjourned under conditions determined by the President or Meeting Leader at the adjournment. The Secretary will make every effort to notify the membership of the new meeting. If at the adjourned meeting the quorum is not present within half an hour after the time appointed for the commencement of the meeting then the agenda and meeting is dissolved and consideration to a new meeting must be convened.

15.4.2 In the case of a meeting convened upon the request of members—the meeting must be dissolved; and members informed of the meeting dissolution.

16. ADJOURNMENT OF MEETINGS

16.1 The President of any meeting may adjourn the meeting from time to time and place to place, with the consent of a majority of members present at the meeting.

- 16.2 If an adjournment is requested by more than 3 members a vote by show of hands will be taken and the President will act upon the voting result.
- 16.3 No business may be conducted at a follow-on adjourned meeting other than the unfinished business from the meeting that was adjourned.
- 16.4 If a meeting is adjourned for 14 days or more, notice of the adjourned meeting must be given in accordance with rule 12 and Notice and Agenda redistributed.
- 16.5 Except as provided in sub rule 16.3, it is not necessary to give notice of an adjournment or of the business to be conducted at an adjourned meeting as the adjourned meeting will complete in a timely period.

17 VOTING AT ORDINARY MC MEETINGS

- 17.1 Upon any single question arising at a General Meeting of the CoNSA, a member has one vote only in response to the vote on that question.
- 17.2 All votes must be given personally, or through electronic media where the voting Full Member can be identified or by proxy.
- 17.3 In the case of an equality of voting on a question, the President of the meeting is entitled to exercise a casting vote.
- 17.4 A Question arising at a meeting of the MC, or at a Subcommittee meeting, shall be determined on verbal agreement, a show of hands, or if requested a poll taken as determined by the President / Chairperson presiding at that meeting.
- 17.5 The conditions under which a member is entitled to vote at a General or MC meeting are as follows;
- 17.5.1 They are a Full Member of the CoNSA and are identified on the National Data Base informed by the State or Territory Body.
- 17.5.2 All monies due and payable by the member to the CoNSA have been paid. An exception to that rule occurs when a meeting is held in the period of annual subscription renewal for the new financial year and it is deemed that the State or Territory body reconciliation is not yet due to be received by National CoNSA; but the member has been financial in the previous membership year.
- 17.6 If, at a General Meeting a vote on any question is demanded by not less than 3 members, it must be taken at that meeting before the meeting is closed in such manner as the President may direct. The voting result shall be deemed to be a resolution of the meeting on that question.
- 17.7 Where the membership needs further information to vote on an issue; the President has the option to adjourn the meeting until members can be fully informed, or to refer the issue to a postal /electronic vote after the information is distributed.
- 17.8 Should the President be absent and no delegate organised a vote should be taken immediately to determine who should lead the meeting.
- 17.9 Voting shall be taken by a show of hands where there is no personal issue involved. When the issue involves determination of personal issues such as electing or voting for or against another member; then at President determination, the voting should be undertaken as a secret ballot. Secret ballots can be collated from slips of paper or electronic responses as determined by the President.
- 17.10 The secretary shall ensure that voting is limited to Full members who have voting rights and as such any voting from an individual that is identified in a secret ballot must remain confidential.
- 17.11 After collation of voting results a declaration by the President will declare that the resolution is either;
- 17.11.1 carried;

- 17.11.2 carried unanimously;
- 17.11.3 carried by a particular majority;
- 17.11.4 lost.

17.12 An entry of the voting result will be recorded in the minutes of the meeting.

18 PROXY VOTING REPRESENTATION.

18.1 Each member is entitled to appoint another member as a proxy by notice delivered to the Secretary no later than 48 hours before the time of the meeting in respect of which the proxy is appointed.

18.2 The notice appointing the proxy for a meeting of the CoNSA, in the form set out in Appendix 1.

19 CONTROL OF CONSA OFFICIAL RECORDS INCLUDING MINUTES OF MEETINGS

19.1 The Secretary of the CoNSA must keep minutes of the resolutions and proceedings of each general meeting, and each committee meeting, together with a record of the names of persons present and apologies at committee meetings.

19.2 These records can be kept in electronic format as deemed appropriate by the MC.

19.3 Archived record control should be passed from exiting MC office bearer to elect office bearers.

20 FUNDS

The Treasurer of the CoNSA must —

20.1 Collect and receive all monies due to the CoNSA and make all payments authorised by the CoNSA;

20.2 Keep correct accounts and books showing the financial affairs of the CoNSA with full details of all receipts and expenditure connected with the activities of the CoNSA.

20.3 All cheques, drafts, bills of exchange, promissory notes, electronic transfers and other negotiable instruments must be signed /authorised by two members of the committee.

20.4 The funds of the CoNSA shall be derived from educational activity, annual subscriptions, grants, sponsorships, donations and such other sources as the committee determines.

21 RULES OF THE CONSTITUTION

21.1 The constitution may be altered (including an alteration to CoNSA's name) by special resolution of the members of CoNSA at a General Meeting..

21.2 Any proposed alterations to the CoNSA constitution will be sent out to members one month prior to an AGM and voted on at that AGM.

21.3 Any agreed alterations to the constitution will be posted on the CoNSA website and distributed to all members.

21.4 The CoNSA constitution shall bind CoNSA and every member to the same extent as if they have respectively signed and sealed by them.

21.5 Subject to any provision in the constitution an alteration to the constitution comes into force at the time that the alteration is passed at an AGM, and communicated to all members. This also applies to any alteration to the name of CoNSA.

21.6 The CONSA Public Officer must inform the Office of Consumer and Business Affairs of any changes in Association Name, Constitution or the Public Officer.

22 CUSTODY AND INSPECTION OF BOOKS AND RECORDS

- 22.1 Except as otherwise provided in these Rules, the treasurer and Secretary must keep in their control all relevant records, documents and securities of the CoNSA.
- 22.2 All accounts, books, securities and any other relevant documents of the CoNSA must be available for inspection by any member upon reasonable request with approval of the management committee.
- 22.3 An officer from the authorised governmental department for Business and Consumer affairs is legislated to audit the Association at any time and access accounts, books, securities and any other relevant documents of the CoNSA as they request.

23 WINDING UP OF THE ASSOCIATION

In the event of the winding up or the cancellation of the Incorporation of the CoNSA Association, the assets of the Association must be disposed of in accordance with the provisions of the Act.

APPENDIX 1



Continence Nurses Society Australia
(formerly Australian Nurses for Continence)

PROXY FORM

I (print name) am a financial Full member of CoNSA.

I assign (print name), a financial full member of CoNSA, to vote my proxy at the AGM of CoNSA to be held on(date).

My Proxy is valid for the following issues:

All elections or voting .

OR

Limited to these issues or decisions as listed below (detail here)

.....
.....
.....
.....
.....

My proxy is assigned under the above conditions the right to vote on my behalf.

SignatureDate

NB All details must be filled in for this to be acceptable as an instrument of Proxy.
All Proxies must be received by the CONSA Secretary 48 hours before the scheduled start of the AGM or General or Management Committee Meeting.

- Proxy to: CoNSA Secretary
(1)Fax: Mark "Attention Secretary/ Public Officer CoNSA"
(2)Email:CoNSAsec@gmail.com
(3)Post: to arrive 48 hours prior to meeting by ..!..!

APPENDIX 2



Continence Nurses Society Australia
(formerly Australian Nurses for Continence)

Nomination Form for Executive Committee

I hereby nominate (print name) for the position of

.....

Nominators: (not required in the case of current incumbent)

Name Signature

Name Signature

Nominee:

Ihereby accept nomination for the position
of

Signature

Date

Contact details for nominee: Ph:..... Email:.....

Please note:

- An election, if required, will take place and the results will be announced at the at the Annual General Meeting (AGM) of the Continence Nurses Society Australia to be held at onat hours in
- Nominations should be accompanied by a brief CV maximum 250 words that can be sent to members
- All nominations are to be received no later than one week prior to the AGM on....., by the Secretary .

Completed Nominations can be sent to:

(1)Fax: Mark "Attention Secretary/ Public Officer CoNSA"

(2)Email:CoNSAsec@gmail.com

(3)Post: to arrive 48 hours prior to meeting by .././..

APPENDIX 3



Continence Nurses Society Australia
(formerly Australian Nurses for Continence)

Members must complete the following to accept membership to the National Body “**Continence Nurses Society Australia** (CONSA)”.

The CoNSA Constitution which can be found on the website and/or upon application to
(insert State /Territory Body).

Consent re the sharing of member information.

I.....(member) agree to accept the terms and conditions of the CoNSA Constitution.

I.....(member) agree to the sharing of my personal information in member Data Bases and on the CoNSA Website between the(State/Territory Body) and National CoNSA.

Please tick consenting box and cross out where applicable under Section 4.5 of the CoNSA.

- 1. I agree / do not agree to the sharing of my member information on the website or other CoNSA media.
- 2. I agree / do not agree to the sharing of my images in which I can be identified on the website or other CoNSA media.
- 3 I agree / do not agree to being contacted for individual CoNSA business circumstances.
- 4. I request that my information or images of me is limited to members only access.

SIGNATURE.....NAME(PRINT).....DATE:.....

APPENDIX 4



Continence Nurses Society Australia

(formerly Australian Nurses for Continence)

Competency Standards for Continence Nurse Advisors

Acknowledgements

These competencies were developed by Bart O'Brien RN, PhD, and MRCNA - Continence Nurse Adviser – with the help of a grant from Australian Nurses for Continence

Assistance was provided by:

Sue Everett - who integrated the MHH competencies with the ANF/ DEETYA, advanced practice competencies. Teri Gibson - provided professional advice from a *nursing competencies background with the Royal College of Nursing, Australia (RCNA Robyn Parkes - provided professional advice from both nursing and Industrial Training Authority Board (ITAB) background Leigh Pretty - assisted with a review of the final draft*

Appreciation is expressed to the more than fifty Continence Nurse Advisors who trailed and gave feedback on earlier drafts and to the State Representatives who coordinated final feedback on this draft.

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Produced By: Australian Nurses for Continence

Role of the Registered Nurse Continence Adviser

Introduction

The Registered Nurse Continence Adviser Competencies have been developed to define and guide the practice of Continence Nurse Advisers (CNAs) throughout Australia.

The role of the CNA is that of an advanced nurse practitioner or clinical nurse specialist and most nurses in this role will experience significant autonomy (and organizational expectation of role initiative) in the exercise of their position descriptions. The role of the Registered Nurse Continence Adviser is dependent on the employing authority, the practice situation and the needs of the particular client population. These competencies apply to all CNAs: in acute hospital settings, aged and extended care facilities and in the community.

Secondly, enactment of the CNA role assumes the practitioner will invoke therapeutic outcomes as an expectation of patient assessment, diagnosis, planning, implementation and evaluation of continence care. CNA's are required to demonstrate a considerable body of knowledge and skills covering divergent responsibilities including, but not limited to, administrative, promotional and educational abilities.

CNA's may work independent of or in close collaboration with the medical and allied health team. CNA's should develop and value such relationships towards optimum outcomes for continence promotion and continence care.

The responsibilities of CNA's can be summarized by the implied autonomy and therapeutic potential of their role. This role requires nurses to adequately and confidently demonstrate defined standards of competence in their practice. For these reasons the Continence Nurses Society Australia has commissioned the CNA Competencies which will be used to guide and monitor the practice of CNA's throughout Australia.

Continence Nurses Society Australia have developed *competencies for the beginning specialist*. These competencies target the advanced practitioner (but new continence nurse adviser) who should be able to meet them. The performance of the new continence nurse adviser can generally be easily distinguished from the performance of an 'expert' CNA through the actual performance criteria. Attainment of these competencies demonstrates that the individual is functioning safely and effectively in all performance aspects of the CNA's advanced role.

The competencies do NOT differentiate between a CNA who has been in the job for 12 months and one who has been there for 12 years. They WILL differentiate a CNA's performance from that of a stomal therapist or a generalist nurse (even of 12 years standing).

GLOSSARY OF TERMS

Competency standard

Competency standards are expressed in units of competency, elements of competency and performance criteria. These competencies are based on the Mount Henry Hospital Competencies for Registered Nurse Continence Advisers, the New South Wales Competencies for the Advanced Nurse and the ANF/ DEETYA Advanced Practice Competencies, plus National consultation - with Australian Continence Nurse Advisers and nursing experts in the field of competency development. They are designed to articulate with other national nursing competency standards.

Continence Nurse Adviser

The CNA is a Registered Nurse with relevant post basic qualifications and/or skills and expertise, who has defined responsibility for promotion, assessment, management and education in the fields of urinary and faecal incontinence.

Element of competency

A clearly defined aspect of the overall competency. There are usually several elements to each competency.

Performance Criteria

The task of performance criteria is to provide measurable parameters (or guides for such) for each of the broader competency statements. Performance criteria are not exhaustive and may be expanded or revised to suit the field of practice of particular CNA's.

Competency Template - Guidelines for Use

The competency template included in this document is an instrument designed to help CNAs with the self-assessment of competence or to review the competence of colleagues.

Competence

CNA competence is self or peer reviewed in column three. The response can be:

- Yes - competence has been observed or identified for that particular criteria
- No - competence has not been demonstrated
- Nlap - the particular criteria does not apply to the review being undertaken. (This response needs to be justified in column 4 in every case)
- Nlat - competence was not attempted during this review. (This response also requires justification in column 4 and applies when demonstration of particular competencies is not possible during a review period)

Evidence of competence

Appropriate evidence of competence needs to be provided through observation; documentation or verbal response (and the responses required for Nlap & Nlat) needs to be briefly summarized in column 4.

This may be summarized as:

- 0 - Observation of competence is the level of evidence
- Doc - Documentation of competence is available or documentation of a specific standard is the required competence
- Des - A description of what is required to demonstrate competence has been given - in the absence of opportunity to demonstrate competence. Eg a procedure may be described, a case study used or other verbal discussion of competent performance given by the CNA under review.

Date

The date of review of each element/criteria needs to be recorded in column 5. Addressing all competencies may be done over a period of some months and should be an ongoing process. Recording dates on the template would help reviewers keep track of how long a particular review has taken.

Initials

Initials of the person(s) assessing competence need to appear against each entry in columns 3 and 4.

There are real opportunities for more than one person to review a CNA's competence. i.e. Competencies 1, 2 & 3 - by their generic professional nature - lend themselves to review by a nurse manager who may not be a Continence Nurse Adviser. Equally, the remaining competencies may be reviewed by more than one colleague. E.g.: In a clinic setting where a group of CNA's with differing skills backgrounds practice - a CNA may opt to have different colleagues review various aspects of their practice OR Competence may be confirmed through review by two colleagues - each of who would initial to indicate that competency has been demonstrated.

Preparation of the template

To use the template the competencies need to be set out into a table set up following the Template format. This format is too bulky to be used in this document. Microsoft Word 'Table' function allows easy creation of a table with six columns, which can then be customised (sized) to fit a page in 'landscape' format,

Once the competencies have been transcribed into MS Word - or another compatible word processing package - they can be cut and pasted into the appropriate columns. Your template is then ready to be printed off and used.

BEST WISHES FOR A GOOD OUTCOME

TEMPLATE FOR ASSESSMENT - USING THE CNA COMPETENCIES

Legend. N/AP = not applicable N/AI = not attempted

COMPETENCY NO.

(Type /write competency here)

<i>Elements of competency</i> <i>(insert below)</i>	<i>Performance criteria</i> <i>(insert below)</i>	<i>Competent?</i> <i>Yes, No, N/AP</i>	<i>Evidence/ Justification</i> <i>(O)bserved, (Doc)umented, (Des)cribed</i>	<i>Date</i> <i>Assessment undertaken</i>	<i>Initials</i> <i>of the person assessing</i>

COMPETENCY STANDARDS FOR CONTINENCE NURSE ADVISORS

Competency standards for Continence Nurse Advisers are located within three domains of practice:

Professional Conduct Role, Promotional Role and Client Care Role.

The Professional/Ethical Conduct Role of the CNA.

COMPETENCY 1: Fulfils the professional and ethical conduct requirements of the nursing profession

Element of competency

1.1 Acts in accordance with the expectations of the Profession

1.2 Regularly engages in the process of self-assessment.

Performance criteria

- *Behaviour is consistent with the Profession's Code of professional Conduct and Code of Ethics*
- *Where unprofessional or unethical conduct is identified, a plan of remedial action is implemented*

- *Practice is defined in accordance with the CNA's current role statement*

- *Feedback on performance is obtained and acted upon:*
 - *From peers*
 - *By participation in performance planning and review activities*
 - *By evaluation of educational activities and patient outcomes*

COMPETENCY 2: Functions in accordance with legislation and common law affecting nursing practice

Elements of competency

2.1 Functions in accordance with legislation and common law affecting nursing practice.

2.2 Relates legislative and common law concepts to policies and procedures.

2.3 Acts to promote protection and safety of client, self and others.

Performance criteria

- *A current authority to practice is maintained*
- *Nursing practice is described and justified with reference to common law and relevant legislation*
- *Interventions which appear inappropriate are challenged and alternatives proposed*
- *Patient safety and wellbeing are maintained by attention to duty of care*
- *Practice is guided by an understanding of the concepts of negligence, consent, trespass, assault and unauthorised access*
- *Patient care is delegated with an awareness of the CNA's legal accountability*
- *Distinguishes between law, guidelines, policy and procedure and procedures.*
- *Relevant changes in legislation and government policy are incorporated into local policies, practices and procedures*

- *Occupational health and safety standards are adhered to and action taken to prevent or reduce potential hazards*

- *Environmental health and safety standards are actively promoted*

COMPETENCY 3: Advocates and protects the rights of individuals /groups

Elements of competency

3.1 Acts to maintain the rights of individual/ groups

3.2 Acts to ensure confidentiality of information.

Performance criteria

- *The client is informed of the identity and roles of health care providers and individual/ groups are encouraged and supported to exercise their rights*
- *Appropriate members of the health care team are advised of clients expressed needs, preferences and decisions Identifies and seeks to rectify structures, policies or practices which inhibit individuals /groups from exercising their rights*
- *Privacy is maintained when information is being collected from clients and they are advised of their rights to confidentiality*
- *Legal and ethical guidelines direct the storage and release of information*

The Promotional Role of the CNA.

COMPETENCY 4: Demonstrates and promotes understanding of practices, contextual factors and standards related to continence.

Elements of competency

4.1 Participates in / is aware of research into practices to contextual factors and standards related continence.

4.2 Devises and implements strategies to promote informed attitudes and practices related to continence

4.3 Initiates, participates and advises in the development and / or review of philosophies, policies, procedures and protocols related to continence.

4.4 Acts as consultant to colleagues in the area of continence promotion and management.

Performance criteria

- *Knows about/ is involved in research endeavours related to continence*
- *Develops/uses materials promoting informed, positive attitudes*
- *Participates in counselling of individuals, groups of clients and health care workers related to attitudes/ practices /standards*
- *Changes in practice are based on current research*
- *Gaps between current practice and existing practice guidelines are identified and existing protocols, policies and procedures are reviewed accordingly*
- *Policies which influence continence management are critically evaluated*
- *Opportunities to disseminated information are created*
- *Information and advice regarding continence is provided on request*

COMPETENCY 5: Develops Therapeutic and Caring Relationships

Elements of competency

5.1 Establishes a climate conducive to the development of therapeutic relationship.

5.2 Engages in therapeutic interactions

5.3 Facilitates therapeutic groups

5.4 Accommodates cultural needs of individuals /groups appropriate to the social context

5.5 Provides for the emotional needs of individuals

5.6 Acts to decrease stress and / or increase effectiveness of coping mechanisms

Performance criteria

- *Establishes the credibility and role boundaries of the CNA*
- *Respect for individuals groups is demonstrated through interaction*
- *Continence programs incorporating a counselling role are formulated (in collaboration with the client, significant others and the health team as appropriate)*
- *Constructive ways of dealing with issues are explored*
- *The nature, purpose and membership of each group is defined and monitored*
- *The unique contribution of each group member is valued.*
- *Cultural needs are identified and appropriately addressed*
- *Established an appropriate context for the expression of feelings*
- *The level of emotional responses by the CAN to the client is appropriate*
- *Anxiety, fear or other forms of distress are recognised*

- *Measures are taken to relieve the distress and further strategies for coping with health changes are explored*

The Client Care Role of the CNA.

COMPETENCY 6: Uses multiple approaches to decision making

Elements of competency

6.1 Demonstrates knowledge and use of clinical decision making processes

6.2 Uses multiple approaches to gather data about the client and situation related to continence

6.3 Uses analytic and interpretive skills to make nursing decisions about the clients care in their context.

6.4 Documents planned and anticipated outcomes in consultation with the client

Performance criteria

- *Relevant aspects of the situation are recognised*
- *Possible and probable consequences of the client situation are considered*
- *There is evidence of systematic data gathering e.g. history taking, physical examination, relevant investigations and situation related to continence*
- *Members of the health team and significant others are consulted as relevant*
- *Other sources are consulted as relevant eg literature, clinical guidelines, best practice guidelines*
- *Data history, examination and investigations are integrated*
- *Previous experience is used to inform decisions.*
- *Issues are prioritise*
- *Potential needs/problems are anticipated or explicated*
- *Nursing decisions are justified in the specific context*
- *Findings, diagnoses and decisions are documented*

COMPETENCY 7: Manages the continence care of individuals and groups

Elements of competency

7.1 Incorporates continuity of care principles in the holistic continence management of individuals

7.2 Client care delivery is based on best practice principles

7.3 Promotes involvement of the client as a participant in the process of care.

Performance criteria

- *Priorities are identified using context specific knowledge*
- *Data from other health professionals is referred to and incorporated when planning care*
- *Development of the care plan accommodates the abilities and resources of clients*
- *Justification for decisions and strategies is documented and communicated*

- *Care is delivered based on accepted clinical practice and using rationales and protocols so that*
 - + *Devices are used safely and effectively eg ultrasound bladder scanners, catheterisation, perineometer, biofeedback equipment etc*
 - + *Special techniques and procedures are used safely and effectively eg bladder irrigation, residual urine, bladder training, per rectum and per vaginal examinations, urinalysis etc*
 - + *Continence products are prescribed according to accepted criteria, policy, resource limits and professional standards*

- *The client is actively involved in all stages of care*
- *Care planning and delivery takes into account client abilities, values and beliefs*
- *Strategies are used to maintain and encourage independence of clients*

7.4 Evaluates client progress towards expected outcomes to reviews plans in accordance with evaluation data

- *Effectiveness of planned care is evaluated in relation to data planned outcomes and appropriate changes to care are made*
- *Client response and behaviour are monitored throughout each intervention*
- *Provision is made for continued availability of necessary resources*
- *Other health care workers are consulted, clients referred as appropriate and continuity of care is ensured eg at discharge or transfer*
- *Outcomes are reviewed with the individual/group*

COMPETENCY 8: Engages in collaborative practice to achieve client outcomes

Elements of competency

8.1 Consults with a range of health care professionals

8.2 Participates in multi-disciplinary clinical decision making

Performance criteria

- *Demonstrates a range of collaborative approaches to continually build and define collaborative networks*
- *Collaborative practice is promoted and facilitated and the contributions of others are recognised and acknowledged*
- *Multi-disciplinary meetings are attended and (where appropriate) the client is managed across multi-agency and inter-making disciplinary lines*
- *The client's perspective is actively pursued and care requirements are clearly communicated using context specific*

8.3 Negotiates agreed outcomes in conflict situations.

- knowledge and experience*
- *Monitors client response to the activities of other health care professionals*
 - *Explores alternative care options when (potential) conflict with client significant others or health care workers is identified*
 - *Provides feedback to other health professionals about negotiated outcomes and documents process appropriately.*

COMPETENCY 9: Educates clients, significant others and health care personnel in the specialty of continence

Elements of competency

Performance criteria

9.1 Assesses learning needs and readiness to learn

- *Determines prior knowledge and health practices*
- *Identify self help abilities and any factors which may impinge on client learning*

9.2 Plans learning /teaching experiences.

- *Client specific learning objectives are identified*
- *Learning experiences are designed to suit individual needs and preferences*

9.3 Develops flexible teaching and educational resources

- *Teaching and educational strategies are demonstrated, relevant to the needs of individuals/groups*
- *Teaching and educational aids and resources are used appropriately*

9.4 Facilitates individual /group attainment of learning objectives

- *Appropriate principles of learning and teaching are used*
- *Teaching is based on contemporary best practice*
- *Appropriate learning resources and opportunities are made available*

9.5 Assesses learning needs of colleagues and encourages education participation in continence education

9.6 Evaluates the effectiveness of teaching/learning experiences

- *Consistent, positive reinforcement is provided within the context of culture and value systems*
- *Appropriate frameworks are used to assess learning needs eg. professional competencies*
- *Opportunities for participation in continuing education are identified and acted upon eg Learning needs arising from changing work practices/technology/legislation etc*
- *Formal and informal feedback from learners (clients and others) is obtained and documented*
- *Achievement of learning outcomes are monitored*
- *Cost effectiveness of education is determined*
- *Teaching and learning plans are modified, based on evaluation and recommendations*

COMPETENCY 10: Manages the specialty of continence and advises the Organisation

NB Application of this competency standard will vary with individual CNA role parameters

Elements of competency

10.1 Negotiates for optimum resources to meet client needs

10.2 Delegates activities to other CNA's /nurses.

Performance criteria

- *An appropriate model/framework(s) for delivery of care is used eg based on:
 - + *Consistency with organisational philosophy*
 - + *The ability of staff to deliver an agreed standard of care*
 - + *Actual and potential alterations in client activity*
 - + *Agreed allocation of human and material resources**
- *Activities delegated are commensurate with the abilities and role statements of staff assigned delegated activities*

10.3 Uses resources for optimum effect

- *Expectations of the CNA's responsibilities and accountabilities are explained*
- *Opportunities are taken for staff to develop necessary skills*
- *Supervision and assistance are provided where required*
- *The continence service is regularly surveyed, data analysed and a strategic plan developed, implemented and evaluated including e.g.:*
 - + *Budget planning and submission*
 - + *Imprest and requisitions/ordering systems*
 - + *Product information library/data bases*
 - + *Guidelines/protocols for trial and use of products*
 - + *Consultation with industry personnel and professional colleagues*

COMPETENCY 11: Engages in activities to improve the continence service

Elements of competency

11.1 Engages in continuous quality improvement processes

11.2 Uses research literature and relevant theoretical frameworks to inform nursing practice

Performance criteria

- *Uses an appropriate framework to evaluate the structure, processes, outcomes and costs of the continence service*
- *Is aware of and contributes to processes for benchmarking continence practices and outcomes against other, comparable settings*
- *Describes links between own practice and research, literature and relevant theoretical frameworks*
- *Research is critically evaluated*

11.3 Uses and participates in the process of continence research

- *Research findings are disseminated to colleagues*
- *Opportunities to participate in, encourage and undertake research are taken e.g.:*
 - + *Relevant conferences and seminars are attended*
 - + *Relevant research material is sought from professional organizations, colleagues, publications and libraries*
- *Areas for research are identified and developed eg*
 - + *Research programs are designed according to professional and ethical guidelines*
 - + *Informed consent is obtained from participants*
 - + *Research findings are used to improve continence management*

11.4 Functions as an advocate for improving continence management

- *Relevant personnel and bodies are kept informed of changes in continence management*
- *Continence education programs are developed and implemented*
- *The continence service is advertised and promoted*