

FSANZ CONSUMER AND PUBLIC HEALTH DIALOGUE

(REVISED) TERMS OF REFERENCE (2017–19)

The FSANZ Consumer and Public Health Dialogue (CPHD) provides a means by which FSANZ can engage in deeper consultation with peak consumer and public health bodies and academics, with the objective of improving FSANZ's understanding of community food safety and public health issues, and through this communication, provide a more effective food regulatory response.

Objectives:

The aims of CPHD are to:

- broaden FSANZ's understanding of current and emerging consumer and public health issues related to food
- inform FSANZ standards development and communication activities through engaging with peak consumer and public health bodies in a timely manner
- contribute consumer and public health perspectives on issues and challenges related to FSANZ's role and responsibility, and the priorities for the food regulatory system.

And in so doing, FSANZ aims to:

- provide a more effective regulatory response to food safety and public health nutrition issues
- increase effectiveness of FSANZ engagement and consultation with consumers and the public health sector
- improve consumer and public health stakeholder understanding and trust in FSANZ and its processes.

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Membership

The membership of CPHD will be made up of senior representatives from key consumer and public health organisations, Australian and Maori Indigenous consumer representatives and public health academics. Representatives from the Australian Department of Health and New Zealand government, and the ISFR Chair are invited to act as observers on the CPHD.

Members and member organisations will be invited by FSANZ to participate for a renewable term of two years, commencing 1 July. Membership will be reviewed at the end of each term. Sitting fees, travel costs and appropriate out of pocket expenses incurred while participating on CPHD will be met as required.

Chair:

One of the academic members will be invited by FSANZ to act as independent Chair of CPHD for a renewable term of two years, commencing 1 July.

Membership:

Membership is to include representatives from appropriate Australian and New Zealand consumer and public health organisations, public health academics and Indigenous consumer representatives, such that the ratio of representatives from Australia and New Zealand is 8:3 as follows:

Up to 3 consumer organisations e.g.

- CHOICE
- Consumer NZ
- Consumers' Federation of Australia (CFA).

Up to 5 public health organisations e.g.

- Public Health Association Australia (PHAA)
- Dietitians Association of Australia (DAA)
- Australian Chronic Disease Prevention Alliance (ACPDA)
- Activity and Nutrition Aotearoa (ANA)
- Public Health Association of New Zealand (PHA).

Up to 3 public health academics (including the Chair).

Up to 2 Australian, Pacific Islander or Maori Indigenous consumer representatives.

Observers from the Australian Department of Health and the New Zealand government and the Chair of the Implementation Subcommittee on Food Regulation.

Meeting and reporting

Meetings of CPHD are to be held at a minimum of twice a year.

Teleconferences may be held in addition to meetings, or replace one meeting to provide timely advice to FSANZ.

Subject to available funding resources, meetings will be held in the FSANZ Canberra office with a video link to the Wellington office for New Zealand-based members, or convened by teleconference.

Emails

Out-of-session communication addressing minor and specific issues can be pursued through email, particularly follow up of issues following a teleconference or face-to-face meeting.

Secretariat

FSANZ will provide secretariat support. A record of outcomes will be maintained and circulated to members.

Terms of reference last reviewed June 2017