



COMMONWEALTH GAMES AUSTRALIA

PERFORMANCE & HEALTHCARE

ADVISORY GROUP CHARTER

1. INTRODUCTION

Commonwealth Games Australia (CGA) recognises the health, safety and wellbeing of team members (athletes & officials) is paramount to any Australian Commonwealth Games Team.

For CGA, integrity in sport is paramount. Athlete performance is enhanced through the integration of evidence-based scientific principles and methods and innovative sports medicine support.

The CGA Performance and Healthcare Advisory Group (PHCAG) is an expert panel made up of sport physicians, sport scientists and high-performance personnel. It provides advice to the CGA Board and Team Executive on focused, applied and performance-impacting sport science, technology and medical services for Australia's Commonwealth and Youth Games Teams (Games Team) delivered ethically and with a strong emphasis on athlete well-being.

The PHCAG makes recommendations on any matter relating to:

- i. the health and well-being of team members focusing on the prevention of injury and illness.
- ii. the protection and promotion of drug free sport.
- iii. the ethical use of medical and performance services provided to enhance team performance.
- iv. the best practice in performance and healthcare support in a Games environment.
- v. preparation and planning for future Commonwealth Games and Commonwealth Youth Games; and
- vi. partnerships within Australia's high-performance system that will give a Commonwealth Games team a competitive edge.

The PHCAG is an advisory body only. It is not authorised to make any public statements or comments or take any public position on any issues without prior approval from CGA.

2. PURPOSE

PHCAG purpose is to analyse, develop and where necessary disseminate information relevant to healthcare and performance to maximise healthy participation in Games Teams, reduce injury risk, and to facilitate optimal team performance. It plays a leading role in the appointment of Games medical and performance personnel to support Team members in their pursuit of excellence and well-being.

3. AUTHORITY

- i. Guide CGA on matters pertaining to healthcare, safety and well-being and performance as it relates to a Games Team.
- ii. Develop and promote the adoption of ethical, legal, and quality assured standards in healthcare and performance for Games Teams.
- iii. Ensure excellent healthcare and doping compliance for Games teams.
- iv. Provide recommendations on all policies and operational matters related to healthcare, safety, well-being and anti-doping compliance for Games team members.
- v. Oversee the development of high-performance system healthcare, safety, well-being and performance personnel through a Games team.

4. RESPONSIBILITIES

Team performance is at the forefront of the PHCAG's remit. The responsibilities of the PHCAG are:

- i. Determine and recommend guidelines, policies, position statements, rules, and regulations for Games Teams.
- ii. Determine, advise and recommend sports medicine and performance requirements comply to the highest ethical, legal, and quality assured standards for Games Teams to enhance performance.
- iii. Assist with determining the pharmaceutical, medical, physiotherapy and performance equipment needs of Games Teams.
- iv. Ratify and nominate healthcare and performance Games Team personnel ensuring a focus on cohesion & succession and that nominees are accredited and up to date with their national accreditation agency (e.g. ESSA, ASCA, SDA, APA etc.).
- v. Advise CGA and member sports on sports medicine, environmental and general health issues pertaining to forthcoming Commonwealth Games.
- vi. Provide guidance on research priorities for the CGA over a Games cycle (based on where the next Games are to be held) to be incorporated in any research/innovation grants.
- vii. Ensure compliance with the National Sport Science and Sport Medicine Best Practise Guidelines for Games teams.
- viii. Advise CGA on an anti-doping strategy.
- ix. Assist CGA with its compliance with the World Anti-Doping Code and Commonwealth Games Federation (CGF) Anti-Doping Standards including disseminating information to member sports; and
- x. Provide other healthcare and performance advice and services as requested by CGA.

CGA may, from time to time, refer matters to the PHCAG for its input and feedback.

5. MEMBERSHIP

5.1. Composition

PHCAG is an expert panel on applied and performance-impacting healthcare and performance services. This collaborative structure allows experts to share insights and knowledge across performance disciplines. In turn, this assists CGA in being more targeted and effective in developing game-changing programs that enhance athletes' ability to reach their true potential and excel at the Commonwealth Games.

The PHCAG shall consist of up to ten (10) individuals representing medical, scientific, and high-performance areas relevant to enhancing a Games Team performance:

- i. healthcare (medicine, physiotherapy, psychology or psychiatry, nutrition, soft tissue & recovery),
- ii. performance (sports psychology, strength & conditioning, biomechanics & physiology),
- iii. technology (performance analysis) and
- iv. performance management (performance director/manager).

PHCAG may co-opt others as required when specific knowledge is required to assist in Games Team performance.

The Chief Medical Officer (CMO) for the next Australian Commonwealth Games Team, once appointed by the CGA Board will also be a member. A standing invitation remains for representation on the PHCAG from the CGF Medical and Anti-Doping Commission should one of its members be resident in Australia.

The CGA's General Manager, Team Performance and Delivery will attend PHCAG meetings as CGA's representative.

5.2. Application Process

As soon as practicable following the conclusion of a Commonwealth Games, CGA will seek nominations from individuals within Australia's high-performance system to join PHCAG. This includes but is not limited to Australian and State Institutes of Sport and professional discipline bodies.

Appointment to the PHCAG is solely at the discretion of CGA.

5.3. Criteria for Applicants

Successful applicants will require the following attributes:

- i. Appropriate professional qualifications.
- ii. Current registration with their relevant professional body/ AHPRA.
- iii. Well respected for expertise in sports medicine, a sport science-performance discipline or high-performance management, both nationally and internationally.
- iv. Knowledge of medical requirements, anti-doping requirements, sport science performance disciplines and operations for Games Teams and how these areas can work collaboratively to enhance performance.
- v. Interest in giving input and feedback into Games planning.
- vi. Knowledge and passion for the Commonwealth Games and interest in its future growth.
- vii. Ability to give objective advice and opinions; and
- viii. Any other qualification or experience that is considered important to achieve PHCAG outcomes.

With respect to the Chair:

- ix. Demonstrated leadership ability on committee, commissions, and other similar bodies.

5.4. Tenure

All members shall be appointed no later than four years prior to the forthcoming Commonwealth Games and remain on the PHCAG for six months after the Games to allow them to participate in any post Games review process.

5.5. Payment

Membership of the PHCAG is on a voluntary basis with CGA. CGA will pay reasonable agreed expenses where relevant to attend meetings. CGA, at its discretion, may also pay a small per meeting fee in recognition of the time and expertise that is dedicated to this group during the members tenure period.

5.6. Chair

CGA will appoint the Chair from either the PHCAG members or externally.

6. MEETINGS

The PHCAG will meet up-to two times per year either in person, video conferencing or a combination of the two. CGA will meet the travel costs for PHCAG members to attend meetings.

A quorum will consist of 50% of the PHCAG and must include the Chair and Chief Medical Officer (once appointed).

Members of the PHCAG are expected to keep any matters raised at meetings confidential where required by CGA.

Members are required to disclose any conflicts of interest and not be present whilst the matter is discussed or voted on the matter.

DOCUMENT REVISION HISTORY

Version no.	Approved	Date	By Advisory Group	By CGA Board
1	Draft	15/08/2018	N/A	Pending
1	Final	16/11/2018	N/A	Approved
2	Draft	5/11/2019	Approved	N/A
2	Final	6/12/2019	N/A	Approved
1	Draft	01/03/2024	N/A	Approved

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