Expression of Interest: National Stroke Rehabilitation Taskforce National Advisory Working Groups

The Australian Stroke Coalition (ASC) National Stroke Rehabilitation Taskforce (the 'Taskforce') is seeking experienced health professionals with relevant expertise in stroke rehabilitation to join its National Advisory Working Groups (NAWG).

Background

The ASC was established by the Stroke Foundation and the Australian and New Zealand Stroke Organisation (ANZSO) in 2008. The ASC brings together representatives from organisations working in the stroke field to work together to improve the access to and quality of stroke care, and to strengthen the voice for stroke care at a national and state and territory level.

The ASC has established the Taskforce to address critical gaps in stroke rehabilitation and support equitable access to high-quality care across the lifespan, including paediatrics, through the development of a national stroke rehabilitation strategy.

The NAWGs will support the Taskforce by bringing together multidisciplinary expertise to provide expert input and develop evidence-informed recommendations across key areas of stroke rehabilitation to inform the National Stroke Rehabilitation Strategy.

Overarching advisory group/s (Eg. A lived experience advisory group) will also be established to provide perspectives and insights that NAWGs can draw on to inform their work and support their objectives.

National Advisory Working Groups*

NAWGs will initially (first 12 months) be focused on 4 priority areas. Each NAWG will collaborate to develop national policy recommendations aligned with its defined objectives, to inform the National Stroke Rehabilitation Strategy. NAWGs will consider stroke rehabilitation across the lifespan, including paediatrics. The draft key objectives of each of the groups are outlined below, definitions and scope of the groups may be refined.

1. **Workforce and standards:**
    - Establish recommendations for national workforce and service standards to support best-practice stroke rehabilitation.
    - Identify pathways for workforce development, capability enhancement and credentialling.
2. **Access to excellent rehabilitation care (0-12months after stroke)**
    - Identify and prioritise key elements of a nationally supported stroke rehabilitation model of care that supports best-practice rehabilitation across the continuum, including a model that delivers:

- Rehabilitation interventions at the right time and in the right setting for people at different stages of recovery within the first 12 months following stroke.
- Effective care transitions and alternative service models where appropriate considering community reintegration and technology-enabled care.

3. **Excellent long-term support to promote life-long recovery after stroke (>12months after stroke)**
    - Identify and prioritise key elements of a nationally supported stroke rehabilitation model of care that supports best-practice stroke care beyond the initial 12 months following stroke.
        - Rehabilitation interventions at the right time and in the right setting for people at different stages of recovery beyond the initial 12 months following stroke.
        - Follow-up systems or service models, self-directed/telehealth/virtual reality, addressing long-term unmet needs.
4. **Data and monitoring:**
    - Develop a framework for national collection, linkage and reporting of stroke rehabilitation data across the care continuum that supports:
        - Consistent approach to measuring rehabilitation quality, outcomes and service performance.
        - Quality improvement, benchmarking and system accountability.
    - Identify key governance, infrastructure and data requirement to support the strategy.
5. **Funding and economics:**
    - Develop a compelling investment case for stroke rehabilitation by articulating its health, social and economic value.
    - Identify the evidence and data required to demonstrate the return on investment of best-practice rehabilitation models.
    - Inform future funding, policy and system reform by identifying priority investment opportunities and funding challenges across Commonwealth and state-funded systems.

*** All NAWGs will consider the needs of priority populations and include multidisciplinary, lived experience, and geographically diverse perspectives.**

Each NAWG will comprise approximately 8 members. NAWG members will be drawn from a range of health professions and areas of relevant expertise and do not need to be members of the Taskforce or ASC. All NAWGs will undertake their activities in line with the NAWG Terms of Reference.

Each NAWG will be led by a Chair and Deputy Chair. The Chair and Deputy Chair will be nominated by the National Stroke Rehabilitation Taskforce as a separate process to this EOI.

Expectations and commitment

NAWGs are expected to meet approximately 9 times over 9 months, with meetings lasting approximately 60-90min. Additional meetings may be scheduled if required. Members should also allow time between meetings to review materials, provide input and complete agreed activities approximately 8hours per month.

Members should have sufficient capacity to participate consistently throughout the NAWG term, including contributing to the development and review of recommendations and attending a minimum of 80% of scheduled NAWG meetings.

Applicants are responsible for ensuring they have sufficient organisational support and/or personal capacity to meet the expected commitments of NAWG membership.

Selection Process

EOI's will be considered based on:

- Key selection criteria as outlined below
- The diversity of perspectives represented across the working group.
- Appropriate representation across disciplines, sectors, and geographical locations.
- Consideration of any potential conflicts of interest

Applicants who are not selected for a position on a working group may be invited to participate in a consultation group, providing an opportunity to review and provide feedback on materials developed by the NAWGs before they are circulated for broader consultation.

How to apply

To apply please submit the following:

- Online application form (Expression of Interest: National Stroke Rehabilitation Taskforce Advisory Working Groups – Fill out form) which addresses the following:
    - Identifies which NAWG you are interested in joining and why
    - Declaration of any conflicts of interest and/or stakeholder affiliation
    - Your ability to meet the expected commitment, including confirmation you obtained sufficient organisational support and/or have personal capacity to meet the expected commitments of NAWG membership.
    - Responses (250-300 words) to the following criteria:
        - Knowledge, skills and experience relevant to the NAWG objectives
        - The perspective, insights or contribution you would bring to the NAWG
- A brief CV (no more than 2 pages) tailored to the role **via email to sdwyer@strokefoundation.org.au**

Any questions please email sdwyer@strokefoundation.org.au.

Key Dates

EOI open	28/8/26
EOI closes	20/9/26

Applications assessed	By end 30/9/26
Applicants notified	2/10/26
First NAWG meeting	TBC- Estimate late October