

# National Hypertension Taskforce Membership Categories and Criteria Framework

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## **Background**

The National Hypertension Taskforce (the Taskforce), established by Hypertension Australia (HA) and the Australian Cardiovascular Alliance (ACvA), was launched by Minister Mark Butler on December 8, 2022. The collaboration between HA and the ACvA was formalised under a Memorandum of Understanding (MoU) signed on May 25, 2023, which outlines the governance arrangements supporting the Taskforce's operations.

The MoU designates HA and the ACvA as the auspicing parties for the Taskforce, committing both organisations to joint decision-making, resource allocation, and regular progress updates. While there is no financial commitment outlined in the MoU, both HA and ACvA have made substantial in-kind contributions to support the Taskforce and its working groups.

The goal of the Taskforce is to increase Australia's blood pressure control rates from 32% to 70% by 2030. A wide range of key stakeholder organisations (through their nominated representatives) and individuals were invited to join the Taskforce based on their organisational and individual expertise.

## **Current Status**

The Taskforce has reached a new level of maturity, necessitating additional governance and a framework to support its growth and funding. The following categories and criteria are proposed to facilitate this maturation process.

## **Membership Categories and Criteria**

### **Founding Partners and Co-Founding Partners**

*Founding Partners* are the original organisations that established and launched the National Hypertension Taskforce. These are HA and the ACvA.

#### Roles and responsibilities:

- Founding Partners have made, and continue to make, significant in-kind contributions and are committed to long-term support and strategic decision-making for the Taskforce.
- Founding Partners will have a least one representative as Co-chairs of the Taskforce, on the Steering Committee, Operations team, Advocacy Group and Communications Group.

#### Recognition:

- They hold a unique status as the initiators and hosts of the Taskforce, acknowledged in all Taskforce materials (including, but not limited to, the website, media releases, position statements) as “Founding Partners”.
- Reciprocal use of logos (the Taskforce, Co-Founding Partners, Organisational Partners and all Taskforce organisational members' websites).

*Co-Founding Partners* are the organisations that have, and continue to contribute strategically to the Taskforce since it was launched. These are the Stroke Foundation and the Heart Foundation. A multilateral MoU must be executed to formalise the partnership between the Co-Founding Partners, and the Founding Partners (HA and ACvA) on behalf of the Taskforce. Endorsement must be obtained from the Founding Partner's (HA and ACvA) boards.

Roles and responsibilities:

- Co-Founding Partners are committed to supporting the Taskforce's long-term strategy to improve blood pressure control rates in Australia, in collaboration with the Founding Partners and Steering Committee.
- Co-Founding Partners agree to provide additional strategic and project management support through the Executive Officer of the National Hypertension Taskforce. Co-Founding Partners also agree to provide strategic advocacy, communications and media support.
- Co-Founding Partners will have a least one representative on the Taskforce Steering Committee. Representation on other groups will also be encouraged, such as the Working Groups, the Advocacy Group.
- The minimum required contributions of Co-Founding Partners are attendance at meetings, active participation in collaborative efforts to achieve the Taskforce's goal, ensuring organisational commitment, providing clear communication pathways between the Taskforce and the organisation, overseeing special projects endorsed by the Steering Committee that contribute to the Taskforce's goal.

Recognition:

- They will be formally recognised in Taskforce materials (including, but not limited to, the website, media releases, position statements) as "Co-Founding Partners".
- Reciprocal use of logos (the Taskforce, Founding Partners (HA and ACvA), and Organisational Partners).

**Partner Organisations**

*Partner Organisations* are organisations that demonstrate strong alignment with the Taskforce's objectives and a willingness to commit substantial time and resources.

New organisations can apply to become a partner by submitting a proposal to the Taskforce Steering Committee outlining their commitment to the Taskforce's goals, the resources they will contribute, and how they can add value to the Taskforce. The Steering Committee will evaluate and make the final decision on the outcome of the application. Refer to the [Taskforce website](#) for current list of Partner Organisations.

Roles and responsibilities:

- The required contributions of Partner Organisations are a commitment to the Taskforce's goals, representation on Taskforce meetings, activities and actions.

#### Recognition:

- Partner Organisations will be formally recognised in Taskforce materials (including, but not limited to, the website, media releases, position statements) as “Partner Organisations”.
- Reciprocal use of logos (the Taskforce, Founding Partners (HA and ACvA), Co-Founding Partners (Heart Foundation and Stroke Foundation) and all other Partner Organisations).

#### **Taskforce Members**

- There are two types of Taskforce members: Organisational Representative Members and Individual members.
  - **Organisational Representative Members:** Partner Organisations are represented by a nominated representative of their choosing to participate in the Taskforce activities. Organisational members are nominated by their home organisation. Refer to the [Taskforce website](#) for current list of Organisational Representative Members.
  - **Individual Members:** Nominated by the Taskforce Steering Committee based on their skills and expertise. Their membership is not necessarily affiliated with any Partner Organisations.

#### Roles and responsibilities:

- All Taskforce Members agree to a minimum set of key performance indicators, such as attendance at the Taskforce meetings, working group participation, and promotion of the Taskforce's work.
- No financial contribution is required at this time, but the minimum required contributions of all Taskforce Members (Individual and Organisational Representative Members) is participation in meetings, working group activities, and promotion of the Taskforce's work within their organisations and networks.

#### Recognition:

- Organisational Representative Members will be acknowledged formally by name, including logo usage on the Taskforce materials and website.
- Reciprocal use of logos (the Taskforce, Founding Partners (HA and ACvA), Co-Founding Partners (Heart Foundation and Stroke Foundation), and Partner Organisations).

#### **Taskforce Supporters**

- This category implies a financial contribution of at least \$10,000p.a. to the Taskforce's work. Supporters can be individuals, organisations, philanthropic entities, or industry.
  - Supporters need not be Taskforce members but must align with the Taskforce's mission and objectives. In order to maintain the integrity of our mission, the Taskforce will not accept funding or support from, or be affiliated with, industries or groups connected to tobacco (cigarettes, e-

cigarettes, cigars), alcohol, gambling, and unhealthy food and beverage organisations. This includes sponsorships, research grants, consultancies, direct funding, advertising, gifts or loans.

- Acceptance of financial support should be endorsed by the Steering Committee and approved by the Founding Partners, as required under the MoU.
- Governance arrangements for the allocation of funds will need to be agreed between the Founding Partners (HA and ACvA) and Supporters.

#### Roles and responsibilities:

- Financially supporting the Taskforce with \$10,000 or more per year.
- Must not claim Taskforce endorsement of their products or services.

#### Recognition:

- Taskforce Supporters will be acknowledged formally by name and logo on the Taskforce website and any event that their financial contribution is in support of.

### **Beyond 2030**

The Taskforce was established by the Founding Partners (HA and ACvA) with the goal to increase Australia's blood pressure control rates from 32% to 70% by 2030. After 2030, responsibility for the ongoing management and sustainability of the Taskforce outputs will transfer to Hypertension Australia.