**WALGA Selection Committee**

**Vacancy**

**LOCAL HEALTH AUTHORITIES ANALYTICAL COMMITTEE (LHAAC) (Readvertised)**

**1 Metropolitan Member**

Closing date: 5pm Friday, 8 August 2025

NOMINATION PROCESS

Nominees are asked to complete the attached Nomination Form and email by **5pm Friday, 8 August 2025** to [nominations@walga.asn.au](mailto:nominations@walga.asn.au). Unsigned or late nominations will not be accepted. At the close of the nomination period the Selection Committee will meet and resolve on preferred candidates or make recommendations on preferred candidates to the WALGA State Council.

IMPORTANT NOTE

Please note, your nomination will be provided for the Association’s State Council and/or Selection Committee and where relevant, the Minister and Board Chair. Therefore, it is important that profile information be complete, up to date and typed.

Appointments are conditional on the understanding that nominees will resign when their entitlement terminates, that is, they are no longer Elected Members or Serving Officers of Local Government.

MINISTERIAL APPROVALS

Ministerial approval for appointment requires name to be submitted to the Minister for each position. It is essential that a curriculum vitae, using the attached proforma, be submitted with your nomination form, no more than 2 pages.

EQUALITY

It should be noted that the Government is committed to providing equal selection opportunity for both indigenous and non-indigenous people and all genders and WALGA encourages nominations accordingly.

REASON FOR VACANCY, TERM AND COMMENCEMENT DATE

Term has expired. The term of appointment is for up to three years.

MEETING DETAILS:

Meetings: Quarterly in March, June, September and December

Location: Various locations in the metro area (and occasionally non-metro area)

Day/Time: Friday AM

Duration: Approximately 2 hours

Meeting Fees: A member who is eligible will receive $309 per meeting (up to 4 hours) and $476 per meeting (over 4 hours). A Chair who is eligible will receive $476 per meeting (up to 4 hours) and $732 per meeting (over 4 hours).

Travel Allowance: in accordance with public sector policy (*Remuneration for Government Boards and Committees - Guidelines for the payment of Government Board and Committee members*)

ELIGIBILITY

Open to Elected Members and serving Local Government Officers from all Metropolitan Local Governments.

SELECTION CRITERIA

Nominee to address the following Selection Criteria:

* What is your relevant experience in Local Government? Please provide examples.
* What are your experiences, skills, attributes or qualifications to support the nomination? Please provide examples.
* Please outline your demonstrated interest and/or experience in the position in relation to food hygiene and safety and the Environmental Health area of Local Government service delivery.
* If successful, what do you see as your role and how would you represent Local Government and the Association?

TERMS OF REFERENCE

* Formulate and operate a sampling scheme which provides for the analysis of food and non‑food products supplied across all Local Government areas in Western Australia;
* To fix the fees charged to Local Government participating in the scheme and paid to the appointed analyst contracted to provide analytical services;
* To ensure effective liaison and communication with the Department of Health to avoid duplication in service delivery; and
* To do such other acts and duties as may be required from time to time in performing the functions of the Committee.

MEMBERSHIP

The Committee will comprise of the following representation (under section 247A(3) of the *Health (Miscellaneous Provisions) Act 1911)*:

* Seven Local Government Metropolitan Members to represent Local Government districts that are in the metropolitan area. Three Local Government Non-Metropolitan Members to represent Local Government districts that are not in the metropolitan area.

CONTACT DETAILS

FOR FURTHER PARTICULARS ABOUT THE COMMITTEE PLEASE CALL

Mr Ryan Janes

LHAAC Coordinator

Local Health Authorities Analytical Committee

c/- School of Medical and Health Sciences

Edith Cowan University

270 Joondalup Drive

JOONDALUP WA 6027

0429 562 886 or email [r.janes@ecu.edu.au](mailto:r.janes@ecu.edu.au)

[www.lhaac.org.au](http://www.lhaac.org.au)

FOR FURTHER PARTICULARS ABOUT THE NOMINATION PROCESS PLEASE CALL

Chantelle O’Brien

Governance Support Officer

W.A. Local Government Association

(08) 9213 2013 or email [nominations@walga.asn.au](mailto:mcarey@walga.asn.au)

Nominations must be submitted by the closing date to WALGA - Attention: Chantelle O’Brien at nominations@walga.asn.au by preferably email to [nominations@walga.asn.au](mailto:nominations@walga.asn.au)

Nick Sloan

Chief Executive Officer

**NOMINATION FORM**

Closing date: 5pm Friday, 8 August 2025

**LOCAL HEALTH AUTHORITIES ANALYTICAL COMMITTEE (LHAAC)**

1 Metropolitan Member

(Panel of names)

(Approval by Minister)

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| --- | --- | --- | --- | --- |
| Submission of Nomination | | Nominations must be submitted by the closing date to WALGA - Attention: Chantelle O’Brien to [nominations@walga.asn.au](mailto:nominations@walga.asn.au) | | |
| Nominee Title (e.g. Cr) | |  | | |
| Last Name | |  | | |
| Given Names | |  | | |
| Council | |  | | |
| Home address | |  | | |
| Postal address | |  | | |
| Post Code | |  | | |
| Contact Details  Home:  Work:  Mobile: | |  | | |
| Occupation | |  | | |
| Qualifications | |  | | |
| Curriculum Vitae | | **A curriculum vitae, using the attached proforma, is required ( 1-2 pages only)** | | |
| I hereby submit my nomination and declare that all information I have provided is true and correct. I also certify that my nomination is made in accordance with my Council’s policy on representation (where applicable). Should my nomination be successful, I will make every endeavour to commit the time and effort necessary to undertake this position, and will adhere to the eligibility criteria which specifies that should I no longer be a serving elected member or officer (whichever is applicable) in Local Government, I will resign from the Committee/Board as the Association’s representative. | | | | |
|
| *Nominee:* | (Please sign or type name) | | *Dated:* | (Please enter date) |

|  |
| --- |
| **UNSIGNED OR LATE NOMINATIONS WILL NOT BE ACCEPTED**  **Canvassing of Selection Committee members and WALGA State Councillors will result in disqualification from the selection process.** |

MINISTERIAL APPROVALS

Ministerial approvals for appointment requires name to be submitted to the Minister for the position. It is essential that a curriculum vitae be submitted with your nomination form.

PLEASE NOTE:

Copies of your nomination and supporting documentation is distributed to State Council and where relevant, the Minister and Committee Chair. It is important that profile information be complete, up to date and typed.

Selection Criteria:

🖉Please ensure you address each of the following selection criteria.

Details on how to address the selection criteria are attached to this nomination form.

PLEASE COMMENT ON AND DEMONSTRATE YOUR CAPACITY TO MEET THE FOLLOWING SELECTION CRITERIA:

* What is your relevant experience in Local Government? Please provide examples.
* What are your experiences, skills, attributes or qualifications to support the nomination? Please provide examples.
* Please outline your demonstrated interest and/or experience in the position in relation to food hygiene and safety and the Environmental Health area of Local Government service delivery.
* Please outline your skills and experience in putting forward a position in a dynamic meeting environment and describe how you would fulfil the role representing the Local Government sector in this position?

*Please list the Boards/Committees on which you currently represent Local Government.*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

# Addressing Selection Criteria

Selection of preferred candidates for vacancies on boards and committees is determined by the Association’s Selection Committee, which makes recommendations to State Council for ratification.

The selection process utilised in making recommendations is **merit-based**.

Integral to this process is the requirement to objectively assess and rate applicants on the basis of defined selection criteria for the vacancy. The applicant who rates the highest against the criteria will be the preferred candidate for the vacancy.

Selection criteria describe the qualifications, knowledge, skills, abilities, experience and interest a person requires in order to do a job effectively. The vacancy for which you are applying will include a variety of essential and desirable selection criteria which you must address in your application.

You must meet each of the essential criteria to be considered suitable for the vacancy. Whilst it is not necessary to satisfy the desirable criteria, where there are several candidates who meet the essential criteria, the Selection Committee will shortlist on the basis of the desirable criteria.

Many applicants are unsuccessful because they do not clearly address each selection criteria and assume that the Selection Committee will be able to ‘read between the lines’ in their application.

If you do not have sufficient space on the nomination form to address each of the selection criteria for the position, you may use a separate document. Make sure that you give the document an appropriate title (i.e. ‘Statement Addressing Selection Criteria’), and give each criteria a title using exactly the same wording as appears on the nomination form (i.e. ‘Relevant skills in the area’). List each criterion in the same order as they appear on the nomination form.

To make your selection criteria statement effective, it is recommended that you adhere to the following process:

1. Ensure that you separately address each selection criteria.
2. Under each heading, write one or two short paragraphs explaining how you meet that particular criterion.
3. Each statement addressing a selection criterion needs to demonstrate your experience, skills, education, knowledge or interest which has equipped you to meet the requirements of the position.

Below are some suggestions as to what information to include in the statement you write for each selection criteria:

* **Highlight your relevant skills and experience by describing your major responsibilities through your position on Councils, in current or previous employment or through relevant non-paid work.**

*Example*

*During my 6 years on Council, I have developed skills which are relevant to the vacancy through my extensive involvement as a member on a range of Council committees, including X, Y and Z. Specific skills I have developed on these committees include …...*

* **Indicate the extent of your experience in relation to a particular criterion**

*Example*

*I have over three years’ experience as a member on the following Council committees – X, Y and Z. In addition, I was Chairman of X for two years and Deputy Chairman of Y for four years.*

* **Briefly give details of one or two specific things which you have done that are good examples of your ability to meet the criterion.**

*Example*

*My capacity to represent the interests of Local Government and the Association is demonstrated through my involvement as a member on the X board. During my time in this position, I demonstrated this capacity when an important issue came before the board for a decision which had particular relevance to Local Government. I liaised with the Policy Manager from the Association to be briefed on the ramifications of the issue, and at the next meeting of the board I was able to effectively argue for a period of consultation prior to making a final decision. The result was that the decision was deferred until the Association had completed a suitable period of consultation with member Local Governments.*

* **Where possible, indicate how successfully you meet the criterion. You could do this by referring to feedback you have received from others, or things that you have established which are still being used.**

*Example*

*The Committee which I chaired developed a report on XYZ which was subsequently endorsed by Council. The recommendations were adopted in full and the changes which eventuated are still in operation today.*

* **Mention any relevant qualifications and training you have, particularly if your experience is limited. This may include details of any relevant training courses you have attended or subjects studied.**

**Curriculum Vitae Pro forma**

Please fill in **ALL** required information using the below template, if all information is not supplied this will delay your application.

The following information is required by the Department of the Premier and Cabinet from board member nominees. (For both new members and reappointed members.) A maximum of two pages for each member.

**Title** Mr/Mrs/Ms/Miss/Mx/Dr/Prof….

**Full Name**

**Postal Address**

**Contact Telephone Number**

**Email Address**

**Date of Birth** dd/mm/yyyy

**Current employer and position:**

**Work history relevant to board position:**

* [List]

**Voluntary involvement relevant to board position:**

* [List]

**Qualifications/training:**

* [List]

**Other board experience (list all current positions):**

* [List]

**Current contact details of two (2) referees:**

* [Referee 1] – must include name, job title (if applicable) and contact details
* [Referee 2] – must include name, job title (if applicable) and contact details

[This text to be deleted]

The following information provides important data on the diversity of board membership across government and helps assess achievement of these outcomes.

Aboriginal Yes / No

Torres Strait Islander Yes / No

Person with a disability or special needs Yes / No If yes, please specify

Language other than English spoken at home Yes / No If yes, please specify

Country of Birth – Australia Yes / No If no, please specify