

*Please send your expression  
of interest to*

**Consumer Reference Group**

**Expression of Interest**

**PO BOX 424**

**TRARALGON VIC 3844**

**Phone: (03) 5128 0138**

**or email:**

**[gricswebsite@lrh.com.au](mailto:gricswebsite@lrh.com.au)**

### **GRICS VISION**

*Drawing from the best available  
evidence-based practice,  
GRICS promotes the development of  
a sustainable, integrated  
and multidisciplinary approach to  
the provision of cancer services in  
Gippsland.*

**Gippsland  
Regional  
Integrated Cancer  
Service  
(GRICS)**

**Consumer  
Reference  
Group**



**GRICS**  
Gippsland Regional  
Integrated Cancer Services

Updated 2016

## Who are GRICS?

The Gippsland Integrated Cancer Service (GRICS) was established in 2004 as a partnership between health services and the Department of Health. It was established to be the platform on which improvements in cancer service delivery and patient care could be implemented across Gippsland.

## Involving Consumers

There is overwhelming evidence that Consumers provide valuable insights into health care due to their experiences negotiating the health care system as a patient, client or carer. Consumers provide a unique perspective reflective of what services our community might value and anticipate.

GRICS aims to involve Gippsland consumers, carers and community members, in decision making about their own treatment and care and the health services required to meet the needs of their community.

## Consumer Participation

Consumer participation acknowledges and values the input of patients, carers and community members who have experienced the cancer journey. In recognition of this valued role GRICS has developed a Consumer Participation Plan which outlines how consumers, carers and the broader community view is integrated into GRICS planning and policy development.

The GRICS Consumer Reference Group was also established in 2010 to support the work of GRICS. Its members provide recognised and meaningful contribution which continues to inform GRICS project work.



## Interested in Joining?

If you would like to receive a GRICS Consumer Participation Information Kit including nomination form please complete the following contact details, tear off and forward this section to the address on the back of this brochure or email GRICS

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**NAME:** \_\_\_\_\_

### CONTACT DETAILS

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**PHONE:** \_\_\_\_\_

**MOBILE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_