

# Consumer Advisory Group

## Application Form



Thank you for your interest in joining the Burnside Hospital Consumer Advisory Group (CAG). The CAG plays a vital role in shaping the patient experience by providing feedback, sharing insights, and helping us improve the quality and safety of our care.

We're looking for individuals who are passionate about healthcare, represent the diverse voices of our community, and are committed to making a positive difference.

Please complete the form below to express your interest.

We look forward to learning more about you.

### Contact details:

**Surname:** Click or tap here to enter text.

**First Name:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**Phone:** Click or tap here to enter text.

**Preferred contact method:**  Phone  
 Email

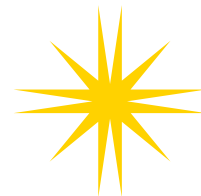
**Email:** Click or tap here to enter text.

**Age Range:**  18-24  25-39  40-54  55-64  65+

### Please select any of the following that apply to you:

- I am a person with a disability
- I identify as an Aboriginal and/or Torres Strait Islander
- I identify as a member of a cultural or ethnic group
- I am a current or past practicing healthcare professional
- I am/have been a carer
- I am a person from a non-English speaking background
- I have been a patient (or carer of a patient) of Burnside Hospital
- I have private health insurance

**Are you currently representing, or have you previously represented, the community as a consumer representative at another health service?**  No  Yes



**What services do you have consumer knowledge and/or experience of?**

**Please select all that may apply.**

	Day Surgery	Overnight Stay	Obstetrics	Visitor	Other
Burnside Hospital Toorak Gardens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Burnside Hospital Stepney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Hospital in SA <i>e.g. Royal Adelaide Hospital, Queen Elizabeth, Flinders Hospital, etc</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Another private hospital in SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you selected other above, please list information here:

Click or tap here to enter text.

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**What appeals most to you about being a consumer representative at Burnside Hospital?**

Click or tap here to enter text.

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**Why do you feel you will be able to contribute to the committee, presenting not only your own personal views and experiences, but also those of whom you may be representing from the community?**

Click or tap here to enter text.

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