

Health New Zealand Regional Consumer Councils

Terms of Reference

<p>Name</p>	<p>Health New Zealand Te Whatu Ora will establish one Regional Consumer Council (the Council) in each of Te Waipounamu, Central, Te Manawa Taki and Northern regions.</p>
<p>Date Ratified</p>	<p>The Terms of Reference is draft, and subject to change by the Council. The Terms of Reference should be finalised at the second meeting, before ratification by the Executive Leadership Team, Health New Zealand.</p> <p>The date of the next review is January 2025.</p>
<p>Role/Purpose</p>	<p>Health New Zealand will work to ensure it meets its obligations under the Code of Expectations for Consumer Engagement by health entities. The Code places consumers, whānau and communities at the heart of design, development, and evaluation of health services.</p> <p>The Council's role is as follows:</p> <ul style="list-style-type: none"> • Enable consumer engagement with Health New Zealand • Identify and advise on issues requiring consumer, community and whānau engagement - including input into development of health service priorities and strategic direction, elimination of inequities, and enhancement of safety and quality of services to patients and whānau. • Review and advise on reports, developments and initiatives relating to health service delivery, and availability of health-related information. • Ensure regular communication with communities and relevant consumer groups.

	<ul style="list-style-type: none"> • Link with special interest groups, as required, for strategic special issues and problem-solving. <p>This approach will strengthen consumer feedback and enable learnings to be applied consistently across healthcare networks.</p>
<p>Scope and Definitions</p>	<p>District Consumer Councils will transition into the new Regional Consumer Councils. Health New Zealand highly values the local consumer voice and will ensure the local voice continues to be heard through regional Councils, Iwi Māori Partnership Boards, focus and working groups, feedback on initiatives and projects, and in many other ways. Local engagement is at the heart of the health system and will continue.</p> <p>Initially the Regional Consumer Councils will be expected to focus on hospitals, though over time that may broaden to community healthcare.</p>
<p>Responsibilities and Activities</p>	<p>Health New Zealand will build on existing relationships with former local Consumer Councils and bring these into evolving regional and national structures in ways that better support consumers, whānau, staff and services.</p> <p>The Council will provide strategic advice from a consumer and whanau perspective, to support Health New Zealand design, evaluation, and delivery of services, directly to those requesting it either in a meeting or in follow-up communications.</p> <p>Where relevant, the Council will provide endorsement and recommendations to the Health New Zealand sponsor/partner and to the relevant directorate in writing.</p>

	The Council will report regularly on their reviews, findings, and endorsements (or otherwise) to the Regional Director Hospital and Specialist Services, Health New Zealand.
Te Tiriti o Waitangi	Te Tiriti o Waitangi partnership will be embedded in the membership and in the development and prioritisation of the Council work programme.
Meetings	<ul style="list-style-type: none"> • Meetings will usually be held online, using Microsoft Teams or a similar virtual meeting platform. • Members will have access to meeting papers via an online secured file system. • Member's access needs related to taking part in these meetings should be identified and worked through. • Meetings will be closed to non-members unless in agreement with the Council and Co-Chairs. • Meetings will be held monthly, expected to be 2 to 4 hours including preparation. • At least 50% of all members not including the Secretariat are required to be in attendance for the meeting to be held.
Membership	<p>Each Council shall have 12-15 members, including two Co-Chairs. To reflect partnership as set out in Te Tiriti o Waitangi, one Co-Chair role should reflect the Māori partner and the other Co-Chair role the Health New Zealand partner such as the Regional Director of Operations Hospital and Specialist Services.</p> <p>Consumer membership of the Regional Consumer Councils is expected to be diverse to reflect the region and include a mix of urban and rural people, Māori, Pacific peoples, people from Rainbow communities, and disabled people, with consideration given to Asian communities.</p>

	<p>Staff membership aside from the Regional Director of Operations Hospital Specialist Services, may include other Health New Zealand regional leaders.</p> <p>All Council members need to be:</p> <ul style="list-style-type: none"> • Passionate about people accessing the best possible healthcare, and skilled at amplifying the voice of whānau to drive improvement. • Considering issues from a ‘big picture’ perspective, informed by the voices of communities. • Have a good understanding of population health inequities, and how to address them. • Have a good understanding of the health system including Te Tiriti o Waitangi. • Have strong community networks and communications skills, and strategies to engage people in the work of the Council. <p>The term of a Council member is two years and can be extended.</p> <p>Any member may resign at any time by giving written notice to the Co-Chairs.</p> <p>Any member who is absent without reasonable excuse from three consecutive meetings shall be considered to have vacated their membership.</p>
<p>Secretariat Responsibility</p>	<p>The responsibilities of the Secretariat include the following:</p> <ul style="list-style-type: none"> • Ensuring any identified access needs of members are worked through. • Circulate draft minutes and actions within two weeks of the meeting. • Screen papers received and prioritised for discussion based upon need and urgency.

	<ul style="list-style-type: none"> • Circulate agenda items at least 5 working days ahead of each meeting to allow for members to raise conflicts of interest. • Circulate agenda pack at least 3 working days ahead of each meeting to allow for reading time. For members with conflicts of interest, specific agenda documents will not be provided for the specific item. • Maintain a Conflicts/Declaration of Interests Register • Maintain a current action list. • Provide information for reporting. • Ensure payment processes are correctly completed for consumers reimbursement for all meetings and activities. • Arrange all scheduled meetings and track attendance. • Arrange room bookings, travel, equipment, and other resources needed for any scheduled face-to-face meetings and activities.
<p>Members' Responsibility</p>	<p>The responsibilities of Members include the following:</p> <ul style="list-style-type: none"> • Te Mauri o Rongo sets out expectations all members are to be aware of and abide by • Members of the group must perform their functions in good faith, honestly and impartially, and avoid situations that might compromise their integrity or otherwise lead to conflicts of interest. • Members are expected to be punctual, polite, professional, engage in intellectual discourse and be respectful of others' views. • Agenda items to be submitted to the Secretariat at least 5 working days prior to each meeting. • Members with conflicts of interests will need to be raised at least 3 working days ahead of each meeting to ensure non-disclosure of information to conflicted members.

	<ul style="list-style-type: none"> • Apologies to be sent as soon as possible to the Secretariat for quorum purposes and if required, a suitably briefed and authoritative delegate to be in attendance with the approval of the Co-Chairs. • Members can provide their input via email prior to meetings where they cannot attend. • Members are invited to submit edits to draft minutes, which will be finalised at the start of each meeting. • Undertake additional activities agreed by the group (such as reviewing for comment, or attending relevant hui on behalf of) • Lead/facilitate the completion of respectively owned action items within the agreed timeframes. • Sign a confidentiality agreement. • Exercise all due professional care and diligence in the performance of their obligations under these Terms of Reference in accordance with the standards of skill, care, and diligence normally practised by suitably qualified and experienced persons in performing services of a similar nature.
<p>Proposal Process, Decision Making and Escalation</p>	<p>Submission process:</p> <p>The process for submitting papers to Councils will differ based on whether the paper is seeking advisory input or seeking endorsement for development or implementation within Health New Zealand.</p> <p>Papers intending to seek advice or acknowledgement will be submitted using a standardised template to the Secretariat.</p> <p>For papers seeking endorsement for local or regional consumer engagement and whanau voice initiatives within Health New Zealand, a more comprehensive process may be required.</p>

Initially, these will be screened by the Secretariat and prioritised for discussion based upon need and urgency.

All papers are expected to have a Health New Zealand partner/sponsor, who may be asked to be part of the presentation (i.e., on behalf of a clinical or operational service supporting the paper). Support for this may be requested through the Secretariat in the first instance.

Decision making:

The group will strive for decision-making based on consensus for all proposal submissions. A consensus is defined as an agreement reached by more than half of the members present. All members present will have the ability to contribute to the consensus.

Members who are absent from the meeting will not be able to contribute to the consensus.

All decisions must be resolved through discussion and mutual agreement.

Escalation:

In cases where the vote is neutral, the Co-Chairs will have the final decision.

In instances where consensus or vote is not achieved, the nature of the disagreement and the reasons provided by the dissenting members will be documented.

The minutes of the meeting will clearly reflect the discussion, including all viewpoints expressed, and the rationale behind the final decision or the lack of consensus.

<p>Conflicts of interest</p>	<p>Members must disclose all Standing Interests and Interests in a Matter along with any actual, potential, or perceived conflicts of interest.</p> <p>If, upon receipt of the Agenda Outline for a meeting (to be sent by the Secretariat 5 working days ahead of each meeting), a member becomes aware that they have an Interest in a Matter in relation to that Agenda, they must disclose that Interest(s) to the Co-Chairs at least 3 working days prior to each meeting.</p> <p>Upon receipt of a member's disclosure of an Interest in a Matter in relation to an Agenda item, the Secretariat will refrain from providing any documentation about the matter to that member prior to the meeting at which time the Council will decide, (1) whether the Interest creates a conflict of interest; and (2) if so, how that conflict will be managed.</p> <p>All disclosures of an Interest in a Matter in a meeting, whether it is a conflict of interest and, if so, how it was managed, must be recorded in the Minutes of that.</p>
<p>Confidentiality</p>	<p>All business of the Council, other than information before them already available in the public domain or intended for dissemination in the public domain, is confidential and must be treated as confidential by all members.</p> <p>Members are not to disclose any confidential information to anyone outside the Council, other than to members, without the prior approval of the Co-Chairs in consultation as appropriate with the member (unless the matter concerns the conduct or performance of a Co-Chair/s) and are to treat this material with the utmost care and discretion.</p>

<p>Accounting/Reporting</p>	<p>Advice, recommendations, and endorsements will be reported to the Regional Director, Hospital and Specialist Services, Health New Zealand.</p> <p>A summary of advice, recommendations or approvals will be made publicly available as appropriate.</p>
<p>Fees and Expenses</p>	<p>Fees are not paid to salaried public servants.</p> <p>Health New Zealand will reimburse Consumer members for actual and reasonable expenses in attending scheduled Council meetings and working groups. Consumer members are paid into a bank account for preparation, attendance, and travel in relation to scheduled Council meetings and working group meetings:</p> <ul style="list-style-type: none"> • Meeting and preparation time \$60 per hour, \$70 per hour for a chair or co-chair role • Reimbursement of certain out of pocket expenses (e.g. parking) • Meeting Fees are categorised as honoraria and as such are subject to withholding tax following Schedule 4 Part B of the Income Tax Act 2007 No 97. <p>Any non-scheduled meetings involving accommodation and travel must be agreed by Co-Chairs and arranged by Health New Zealand.</p>