

# TERMS OF REFERENCE

## Northland Health Consumer Council

### November 2014

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#### Purpose

The Northland Health Consumer Council (NHCC) works collaboratively with the Northland District Health Board (DHB) to develop effective partnerships and communication pathways between consumers and the DHB.

Through true partnership, NHCC provides a strong and viable voice for the community and consumers so that they can engage in health service planning and delivery. The Council seeks to enhance consumer experience and service integration across the sector, promote equity and ensure that services are organised around the needs of people.

Through effective processes and communications, the Council receives, considers and disseminates information from and to Northland DHB, consumer groups and communities.

The Council also has a quality improvement role and will advise and encourage best practice and innovation.

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#### Functions

The functions of the Council are to:

- Ensure and enable appropriate consumer participation across the Northland urban and rural districts and national health sectors.
- Identify and advise on issues requiring consumer and community participation, including input into the development of health service priorities and strategic direction, the elimination of inequities, and the enhancement of safety and quality of services to patients and whanau.
- Review and advise on reports, developments and initiatives relating to health service delivery and the availability and/or dissemination of health related information.
- Ensure regular communication and networking with the community and relevant consumer groups.
- Link with special interest groups, as required for specific issues and problem solving.

For the avoidance of confusion, the NHCC will not:

- Provide clinical evaluation of health services or individual patient care plans.
  - Discuss or review issues that are (or should be) processed as formal complaints, for which full and robust processes already exist.
  - Be involved in the Northland DHB contracting processes.
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#### Level of Influence

The Council has the authority to give advice and make recommendations to Northland DHB executive management.

The level of influence of the Council is considered to be equivalent to the Clinical Governance Board. The two groups are complementary in their roles.



## Membership

The Council will comprise ten to fifteen consumer representatives. Members will have diverse backgrounds, contacts, knowledge and skills, and must be passionate about consumers being able to access the best possible services and care from the Northland health sector. In selecting members we will cover a range of interest areas e.g. Maori health, women's health, child health, long term conditions, mental health, disability. Although appointed to reflect the consumer voice in a particular area of interest, an individual member will not be regarded as a representative of any specific organisation or community.

Membership composition will take the following principles into account:

- reflect the requirements of the Northland Health Services Plan
- reflect the population that uses health services
- take into account the need to address disparities in health outcomes
- recognise our responsibilities under the Treaty of Waitangi

Initially half the members of NHCC will be appointed for a one year term, and the remaining half for two years with all further appointments being for terms of two years. Members may be reappointed but for no more than three terms.

Members of the NHCC who are not employed within the public health sector shall receive an honorarium to recognise time commitments. Reasonable travel costs shall be reimbursed.

Individual membership on the NHCC may be terminated or full dissolution of the NHCC may be undertaken by the CEO with 3 months' notice if performance is found to be seriously unsatisfactory.

Members who miss three (3) consecutive meetings will be deemed to have resigned unless it is due to extenuating circumstances.

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## Co-operative Agreements and Arrangements

The Northland Health Consumer Council may co-opt members (whether or not that member is involved in the health sector) in order to enhance consumer experience and service integration across the sector, promote equity and ensure that services are organised around the needs of people.

Co-opted members will not have voting rights and will not be entitled to membership of Northland Health Consumer Council.

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## Chair

The Chair shall be appointed by the Northland DHB CEO. A Deputy Chair will be elected by the NHCC.

The initial Chair and Deputy Chair shall be appointed for a one year term. Subsequent appointments (or reappointments as the case may be) shall be made following consultation with Council members, for longer terms as agreed with the CEO.

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## Quorum

A quorum will be half of the membership plus one.

## **Meetings**

Meetings will be held monthly, excluding January, or more frequently at the request of the Chair. Meetings will usually be for two hours and held at an agreed time that enables members to participate.

Meetings will be open to the public, agendas and meeting minutes will be published on the NDHB website. On occasion when there are issues of confidentiality or other risks, meetings may be closed in full or part.

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## **Training**

Council members will be provided with training and support to undertake their role.

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## **Reporting**

The Council will report to the Chair of the Northland DHB Executive Leadership Team via monthly meeting minutes including any recommendations

Minutes of the monthly Council meeting and any recommendations once approved will be placed on the Northland DHB website.

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## **Minutes**

Minutes will be circulated to all members and the Chair of the NHCC, within one week of the meeting taking place.

With the exception of minutes taken during any “public excluded” section of meetings, minutes of the NHCC shall be made available to the public via the Northland DHB website.