

OTAGO & SOUTHLAND DISTRICT HEALTH BOARDS' COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEES

Terms of Reference



Objective

The objective of the Community and Public Health Advisory Committees (CPHACs) of Otago and Southland District Health Boards (Otago and Southland DHBs) is to give their Boards advice on health improvement measures; on the needs their populations and priorities for utilising health funding, and the mix and range of services required to meet these objectives.

Functions

- 1) The functions of the CPHACs of the Otago and Southland DHBs are to:
 - Give the Board/s advice on:
 - a) the needs of the resident populations of the Otago and Southland DHB districts
 - b) any factors that the committee believes may enhance or degrade the health status, of the resident populations of the Otago and Southland DHB districts; and
 - c) priorities for use of the limited health funding available to either or both Otago and Southland DHBs
 - The aim of CPHACs' advice will be to ensure that service delivery provided for the Otago and Southland DHB populations maximises the overall health gain for the populations through:
 - a) all service interventions the Otago and Southland DHBs has provided or funded or could provide or fund for the populations;
 - b) all policies the DHBs have adopted or could adopt for their populations
 - The Committees advice will be consistent with the New Zealand Health Strategy (2001)

The Committees are to ensure the priorities of the community are reflected in the District Strategic Plan (DSP) of the Otago and Southland DHBs, and to ensure that appropriate processes - including consultation - are followed in preparation of the plan. The members shall take into account any differences in the health and disability service issues arising in each District.

Responsibilities

The Committees are responsible for:

- 1) Taking an overview of the populations and health improvement

- 2) Providing recommendations for new initiatives in community and public health improvement
- 3) Addressing the prevention of inappropriate hospital admissions through health promotion and community care interventions
- 4) Examining the role that primary care, disability support, public health and other community services - as well as hospital services - can play in achieving health improvement
- 5) Ensuring better co-ordination across the interface between services and providers
- 6) Focusing on the needs of the populations and developing principles on which to determine priorities for using finite health funding
- 7) Interpreting the local implications of the nation-wide and sector-wide health goals and performance expectations
- 8) Providing advice on strategies to reduce the disparities in health status; especially relating to Maori and Pacific Island peoples
- 9) Providing advice on priorities for health improvement and independence as part of the strategic planning process
- 10) Ensuring the processes and systems are put in place for effective and efficient management of health information through the Otago and Southland DHB districts, including policies regarding data ownership and security
- 11) Ensuring that recommendations for significant change or strategic issues have noted input from key stakeholders and consultation has occurred in accordance with statutory requirements and Ministry guidelines.

Accountability

The CPHACs are accountable to the boards of Otago and Southland DHBs. The Boards may individually or jointly delegate to the CPHACs authority to take actions on their behalf.

Any recommendations of the Committees must be ratified by the boards of Otago and Southland DHBs. In doing so, the members shall take into account any differences in the health and disability service issues arising in each District.

The CPHACs may only give advice or release information to other parties under authority from either or both Otago and Southland DHBs and in accordance with the New Zealand Public Health and Disability Act (2000).

The Committees are subject to clauses in Schedule 4 of the New Zealand Public Health and Disability Act (2000) relating to giving notice of meetings, holding meetings and admission of the public.

The Committees are to comply with the standing orders of either or both Otago and Southland DHBs.

The Otago and Southland District Health Boards' Chairs will annually review the performance of the CPHACs.

Confidential Business

Where business is to be transacted for which a right to exclude the public exists, the meetings shall, upon adoption of the following resolution, exclude the public:

"It is resolved that the public be excluded under clause 32 of the Fourth Schedule of the Act for the following reasons:

- a) The meeting is to discuss the following matter/s (describe general subject of matter/s to be discussed)
- b) the information should be withheld from the public for the following reason, (describe reason), being a ground which exists for excluding the public under clause 32 (a)/(b)/(c)/(d)/(e) of the Act.

On the conclusion of confidential business the meeting shall resume as an open meeting and the business transacted in committee shall be confirmed upon the adoption of the following resolution:

"It is resolved that the Committees resumes as an open meeting and the business transacted in the Committees be confirmed."

Membership

All twelve members of the CPHACs are to be appointed in common by the both Otago and Southland DHBs. The membership of the CPHACs will compromise of:

- Four Board members from Otago DHB
- Four Board members from Southland DHB
- Four appointed members (two each from the Otago DHB and Southland DHB regions)

The Chairperson of both Otago and Southland DHBs will mutually agree upon the appointment of the Chairperson of the CPHACs.

Membership will provide for Maori representation. The CPHACs can obtain additional advice as and when required.

Where a person, who is not a Board member, is appointed to the CPHACs, the person must give the Otago and Southland DHBs a statement that discloses any present or future conflict of interest, or a statement that no such conflicts exist or are likely to exist in the future.

Linkages

The Committee will have linkages with the following DHB Committees:

- Otago and Southland DHBs' Disability Support Advisory Committee
- Kaitiaki Hauora - Southland District Health Board
- Mahi Hauora – Otago District Health Board
- Otago and Southland DHBs' Audit and Risk Committee
- Otago and Southland DHBs' Hospital Advisory Committee
- Other relevant reference groups

For the committees to function effectively, it will need effective liaison with the community and providers. It is the committees' responsibility to drive this liaison with direct communication and consultation and through the membership and/or establishment of committees, subcommittees or other consultation mechanisms as appropriate.

Meetings

Meetings of the CPHACs will be held together and are to be normally convened on a monthly basis and as required. The venue for the meeting will alternate between an agreed Otago and Southland site, with technology (e.g. video or teleconferencing) aiding from remote locations where appropriate.

Attendance

A member may be removed from the CPHACs by the Otago and Southland DHBs for non-attendance at two consecutive meetings without reasonable excuse or apology. The Otago and Southland DHBs will give notice in writing to the member/s and the committees stating the reasons, after consulting the member/s and the committees.

Review

The Terms of Reference for the CPHACs shall be reviewed annually.

Management Support

Otago and Southland DHB CEOs will ensure adequate provision of management and administrative support to the CPHACs function.