

Te Ikaroa | Central Regional Consumer Council – Terms of Reference

Purpose	<p>Regional consumer councils aim to support health care services to be responsive to needs of the communities they serve.</p> <p>Te Ikaroa Regional Consumer Council (RCC) will:</p> <ul style="list-style-type: none">• Facilitate appropriate consumer engagement with Health NZ• Provide consumer perspectives and insights to inform health service planning• Support Health NZ to address health inequities by identifying and advising on issues requiring consumer, community and whānau engagement• Provide feedback on reports and initiatives related to health service delivery and available health-related information as requested• Provide regular communication with communities and relevant consumer groups as directed by Health NZ• Include community voice through diverse representation (including Māori, Pacific peoples, rainbow communities, and people with a disability)• Improve health services by offering feedback on the consumer experience.
Context	<p>The Te Ikaroa Central RCC is one of four regional consumer councils established by Health New Zealand Te Whatu Ora (Health NZ). Health NZ has established these Councils to ensure it meets its obligations under the Code of Expectations for health entities' engagement with consumers and whānau,¹ which includes the obligation that it must engage with consumers at all levels. The Code places our response to consumers, whānau and communities at the heart of planning, design, delivery, and evaluation of health services.</p>
Date and Review	<p>These terms of reference (TOR) are reviewed every two years following the last date ratified, or at the discretion of the Council or Central Region leadership. The terms of reference will be submitted to Central Region leadership, Health NZ for consideration and ratification.</p>
Te Tiriti O Waitangi	<p>Te Tiriti o Waitangi partnership is recognised and embedded in the membership responsibilities and obligations and in the development and prioritisation of the RCC work-programme.</p>
Meetings	<p>Meetings will be usually online, using MS Teams or similar virtual platform. Meetings will usually be held monthly.</p>

¹ [HQSC Code-of-expectations_English_20230515-v2.pdf](#)
[HQSC Code-of-expectations Te Reo Māori](#)

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	<p>Understanding the importance of connecting kanohi ki te kanohi (face to face), we'll look to have at least two in-person meetings each year, while balancing this with everyone's availability, other commitments, and our responsibility to use resources wisely.</p> <p>At least half plus one of all members not including the Secretariat are required to be in attendance for the meeting to be held.</p>
Membership	<p>Each council has 12-15 members, including two Co-Chairs. One Co-Chair must identify as Māori, and ideally, one member should identify as a woman or be gender diverse.</p> <p>Membership of the regional consumer council is diverse to reflect the region and includes a mix of urban and rural people, Māori, Pacific peoples, youth/rangatahi, older people, people from rainbow communities, people with a disability, and Asian communities.</p> <p>The term of a member is two years and can be extended.</p> <p>Any member may resign at any time by giving one month's written notice to the Co-Chairs and the Secretariat.</p> <p>Any member who is absent without reasonable excuse from three consecutive meetings is considered to have vacated their membership.</p>
Member responsibilities	<p>The Council provide endorsement and recommendations to the Health NZ sponsor/partner and to the relevant directorate in writing.</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 will 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 and professional, engage in intellectual discourse and be respectful of others' views. <p>The Council will report regularly on their reviews, findings and endorsements (or otherwise) to the Central Region leadership team, Health New Zealand and/or others as appropriate.</p>
Health NZ responsibilities	<p>Health NZ will:</p> <ul style="list-style-type: none"> • identify and request advice 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 • support RCC members to the best of their abilities with requests for information, queries, and other concerns • provide guidance to RCC members on how they can effectively advise Health NZ and the wider regional health system • ensure consumer voice and contribution is heard, understood, and valued

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	<ul style="list-style-type: none"> • provide respectful and constructive feedback to RCC members • respect that RCC members' perspectives and expertise will be on the table in partnership with health professionals • think creatively, critically, and strategically, in a way that upholds staff and consumer values and interests • provide clear communication in layman's terms to enable the full participation of RCC members.
Secretariat Responsibilities	<p>Health NZ will provide the secretariat function for the RCC.</p> <p>The Secretariat:</p> <ul style="list-style-type: none"> • records the minutes of all scheduled RCC meetings • circulates draft minutes and actions within two weeks of the meeting • checks and evaluates any papers received and prioritises them for discussion based upon need and urgency, in partnership with Co-Chairs at agenda-setting meetings • circulates agenda pack at least three working days ahead of each meeting to allow for reading time • maintains a Conflicts/Declaration of Interests Register • maintains a current action list • provides information for reporting • ensures payment processes are correctly completed for RCC members' reimbursement for all meetings and activities consistent with the current Health NZ Reimbursement Rates for Consumer Engagement policy and these terms of reference • arranges all scheduled meetings and tracks attendance • arranges room bookings, travel, equipment and other resources needed for any scheduled face-to-face meetings and activities.
Proposal Process, Decision Making	<p>Submission process</p> <p>The process for submitting papers to the RCC differs based on whether the paper is seeking advisory input or seeking endorsement for development or implementation within Health NZ. Not all agenda items have papers, and for those items, they do not need to follow this process.</p> <p>Papers intending to seek advice or acknowledgement will be submitted using a standardised template to the Secretariat (Appendix One).</p> <p>For papers seeking endorsement for local or regional consumer engagement and whānau voice initiatives within Health NZ, a more comprehensive process may be required.</p> <p>Initially, these are screened by the Secretariat and Co-Chairs and prioritised for discussion based on need and urgency.</p> <p>Members may want a Health NZ partner/sponsor, who could be part of a presentation during a meeting (i.e. on behalf of a clinical or operational service supporting the paper). Support for this is available through the Secretariat in the first instance.</p> <p>Decision making</p>

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	<p>All decisions are first attempted to be resolved through discussion and mutual agreement.</p> <p>Decisions are sometimes delegated to subcommittees, as directed by Co-Chairs and supported by Health NZ. Subcommittees will report their active work at the next scheduled RCC meeting.</p> <p>When a single view from Council is required, the group strives for decision-making based on consensus. A consensus is defined as an agreement reached by all members present. All members present contribute and agree to the consensus decision.</p> <p>The minutes of the meeting will clearly reflect the discussion, including all viewpoints expressed, and the rationale behind the final decision or if there is a lack of consensus.</p>
Conflicts of Interest	<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 a member believes they have a conflict of interest regarding an agenda item, they will disclose this in or prior to the meeting at the time of the agenda item and it will be recorded in the minutes.</p> <p>This does not exclude a member from contributing to that agenda item, however, the member or a Co-Chair may present a course of action to proportionally manage the conflict.</p>
How we engage with Health NZ	<p>The RCC works with the regional health system (including primary, secondary, and tertiary care) aligned to its preferences for collaboration. These preferences sit within a collaboration document that acknowledges the need for Health NZ to administer and conduct health services and carry out consumer engagement, while respecting the needs of RCC members who engage with the health system.</p> <p>This document is provided to health services who engage with us.</p> <p>The “How We Engage” document is attached as Appendix Two.</p>
Security/ Confidentiality	<p>Business of councils is considered UNCLASSIFIED (open for public knowledge) by members unless otherwise stated.</p> <p>Information that is considered IN-CONFIDENCE or SENSITIVE (information for only those intended to receive it) is noted via security classifications mentioned in the shared documents and information, or verbally by a speaker. Minutes are not taken of IN-CONFIDENCE or SENSITIVE information.</p> <p>Members do not disclose any IN-CONFIDENCE or SENSITIVE information to anyone outside the group, other than to group members, without the prior approval of the Co-Chairs in consultation as appropriate with the group member (unless the matter concerns the conduct or performance of the Co-Chair) and treat this material with the utmost care and discretion.</p> <p>Members sign a confidentiality agreement to enable this process.</p>

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Accounting / Reporting	<p>Advice, recommendations and endorsements are reported to the Central Region leadership, and/or other appropriate leadership in Health NZ.</p> <p>A summary of advice, recommendations, and approvals are made publicly available as appropriate.</p>
Fees and Expenses	<p>Fees are paid in line with applicable Health NZ policy.</p> <p>Health NZ reimburses members for actual and reasonable expenses in attending scheduled Council meetings. Fees 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 time: full duration of the scheduled meeting ○ preparation time: half the duration of the meeting • reimbursement of certain out of pocket expenses (e.g. parking) • Meeting Fees are categorised as honoraria and as such are subject to withholding tax pursuant to Schedule 4 Part B of the Income Tax Act 2007 No 97. <p>Payment for any non-scheduled meetings, working groups and sub-committees must be agreed by Health NZ.</p> <p>To receive reimbursement, members submit an invoice within 30 days following a meeting or approved activity to the Secretariat.</p> <p>Health NZ pays invoices within 30 days of receiving them.</p> <p>Fees are not paid to salaried public servants who undertake work for the RCC in their official capacity (ex officio).</p>

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