**Immunisation Taskforce**

**Terms of Reference**

October 2022

# **Aim**

The Immunisation Taskforce has been commissioned by the Chief Executive of Te Whatu Ora to provide a focus on immunisation. The Taskforce will contribute evidence-based advice on how Aotearoa can build a fully functioning system to deliver all the immunisations available in Aotearoa, with a focus on priority populations and the systemic issues that lead to inequitable access and disparities in vaccination rates across Aotearoa. There is an opportunity for greater, and more effective, coordination across the health system to accelerate the uptake of immunisations in Aotearoa. These immunisations include:

* All childhood immunisations
* COVID-19 immunisations
* Maternal immunisations
* Influenza
* Catch up on missed immunisations, with particular focus on MMR.

The current changes to the wider health system provide an opportunity for a redesign of the current immunisation system. This can be informed by, and through leveraging, the knowledge and experience acquired through the COVID-19 vaccine roll-out, including the use of novel approaches, infrastructure and outreach campaigns designed around priority populations. The experience of the administration of the COVID-19 vaccine to children highlighted fundamental ethnic inequalities and inequities in the system. The Taskforce will contribute advice on opportunities to address these.

# **Role**

The Taskforce will report back to the Chief Executive of Te Whatu Ora through the Director, National Public Health Service. Its role will include contributing advice to Te Whatu Ora on how Te Whatu Ora can:

* Develop a governance structure around immunisations in Aotearoa. This should include leadership and responsibility for the system
* Establish the appropriate roles and functions of all parts of the immunisation system and process
* Meet its obligations under Te Tiriti o Waitangi by working towards the elimination of ethnic disparities in the immunisation system in Aotearoa, and ensure equity is embedded in all aspects of the immunisation system
* Support and empower Māori providers, whānau, hapū, and iwi to deliver the immunisation programme to their communities where possible
* Promote and create disability inclusive and accessible immunisation programmes
* Improve enablers in the immunisation system to increase vaccination uptake in an equitable and accessible way
* Promote and support the development of Māori and Pacific providers to deliver vaccines through culturally appropriate methods in their own communities

In addition, the Taskforce will have a role in:

* Ensuring the effective prioritisation of immunisation-related initiatives by Ministry of Health, the National Public Health Service, health districts and regions.
* Acting as an escalation point for regional issues identified with the delivery of influenza, childhood, MMR, Covid, and maternal immunisations, and providing guidance to resolve issues quickly where possible

The Taskforce will also consider for endorsement any proposals or plans provided by other immunisation advisory groups. The Taskforce will provide Te Whatu Ora with its best advice. This advice is not binding, as Te Whatu Ora may take a different position.

# **Sub-groups and wider consultation**

The Taskforce will convene appropriate sub-groups to meet and provide specialist advice when required or requested by Te Whatu Ora. The Taskforce will nominate a chair from the Taskforce for each of these sub-groups. The Taskforce and sub-groups are required to have targeted consultation with Māori health experts. The Taskforce and sub-groups may request expansion of consultation beyond the membership in order to develop robust advice that is fit for purpose. Stakeholder reference groups may be convened with the permission of Te Whatu Ora to capture other wider interests (such as social sector, education, business) in the shaping of advice.

# **Scope**

The scope of this Taskforce will include, but not be limited to, resolving issues and realising opportunities associated with:

**Delivery**

* *System constraints*
* *Operational strategy*
* *Service delivery and design*

**Workforce**

* *Resourcing constraints and initiatives.*
* *Identification of legislative blockages.*
* *Staff training and micro-credentialing requirements.*
* *Maintaining workforce capacity within Māori and Pacific Providers*

**Funding**

* *Funding models and relative incentives.*
* *Funding streams for Māori and Pacific Providers.*

**Communications**

* *Public facing communications.*
* *Health sector communications.*

**Equity**

* *Priority populations’ initiatives and activities*

**Technology**

* *Consumer-facing initiatives*
* *Provider-facing initiatives*
* *System enhancing*

## **Scope of advice**

The Taskforce provides advice and recommendations on the Programme in the environment of other advisory groups. In particular:

* **COVID-19 Vaccine [National Immunisations] Technical Advisory Group** – provides science advice and decision to use advice on specific vaccines.
* **COVID Vaccine Independent Safety Monitoring Board** - provides expert advice on vaccine safety.
* **SROs Forum** – identifies delivery and operational issues at the day-to-day level.
* **The Programme Leadership Group** – provides oversight and assurance of the Programme, reporting to the Director, National Public Health Service. This flows through to the Te Whatu Ora CE, and Te Whatu Ora and Te Aka Whai Ora Boards.

Together, these groups will input into advice that is considered by the National Public Health Service, Te Whatu Ora, Manatū Hauora, Te Aka Whai Ora and the Public Health Agency.

The Taskforce may canvas areas in providing advice to the National Public Health Service, Te Whatu Ora and Te Aka Whai Ora but does not hold specific responsibility for doing so.

# **Membership**

## **Appointment process**

Membership of the Taskforce, including the appointment to the role of co-chairperson is through a direct selection appointment process by the Director of the National Public Health Service.

Members will be appointed based on their individual skills, knowledge and expertise. In most cases members are not appointed as representatives of organisations and are expected to contribute their own views and perspectives on the practical implementation of the Programme, and together form a system view.

Consideration will be given to have Māori, Pacific, and Disability representation and tino rangatiratanga (decision making) when appointing members.

Members will be required to sign a Conflict-of-Interest declaration form, as well as a Charter agreeing to the Taskforce principles and values to accept their appointment to serve as a Taskforce member.

## **Group composition**

This Taskforce will be chaired by Dr Owen Sinclair and Cathy O’Malley.

Its membership will include representatives from:

***Regional Health Districts***

* **Cathy O’Malley, Co-Chair** (National Chair, NIP Immunisation Leads & Covid SROs, Southern)
* **Dr Debbie Holdsworth** (National Chair, GMs Planning & Funding, Northern)
* **Lesley Batten** (Associate Director of Nursing, Localities and Commissioning Directorate, Central Region)
* **Rachel Court** (Regional Lead, Te Manawa Taki Region)

***National Public Health Service***

* **Astrid Koornneef** (Director, Prevention)
* **Ramon Pink** (Clinical Director, Canterbury)

***Te Aka Whai Ora – Māori Health Authority***

* **Dr Rawiri McKree Jansen** (Deputy Chair, Te Aka Whai Ora – Māori Health Authority)

***Public Health Agency***

* **Graham Cameron** (Equity lead, Public Health Agency - Te Pou Hauora Tūmatanui)

***Partners***

* **Dr Owen Sinclair, Te Rarawa, Co-Chair** (Paediatrician and Honorary Senior Lecturer, Faculty of Medical and Health Sciences, Paediatrics, Child and Youth Health, Auckland)
* **Bronwen Shepherd** (Community Pharmacist, Regional Manager, Clinical Lead – Care in the Community, Green Cross Health)
* **Claire MacDonald** (Midwifery Advisor, New Zealand College of Midwives)
* **Christine McIntosh** (General Practitioner and Senior Lecturer, University of Auckland)
* **Dr Emma Best** (Medical Advisor, The Immunisation Advisory Centre)
* **Margaret Southwick** (Clinical Team Leader, Vaka Atafaga Pacific Nursing Services)
* **Nicky Hart** (Chief Executive Officer, Fielding Health Care)
* **Rachel Noble** (General Manager, Disability, Te Whatu Ora, Capital and Coast)
* **Teara Gillman** (Tāmaki Hub site lead, Ngāti Whatua)
* **Terina Moke** (Chief Executive, Raukura Hauora o Tainui)
* **Epidemiological** *(tbc)*

***Ex-officio members***

* **Christine Nolan** (Group Manager National Contracts, Quality, Workforce, National Immunisation Programme)
* **Jonathon Chua** (Principal Advisor, Evaluation and Behavioural Science, Public Health Agency - Te Pou Hauora Tūmatanui)
* **Mike Rankin** (Group Manager, Data and Insights)
* **Patricia Joseph (**Group Manager Equity, National Immunisation Programme)
* **Rachel Dillon** (Group Manager Office of the Director, National Immunisation Programme)
* **Rachel Mackay** (Group Manager Operations, National Immunisation Programme)
* **Tara Swadi** (Group Manager Strategy & Planning, National Immunisation Programme)

Further attendees may be added as the Taskforce progresses, and additional attendees will be invited as needed for specific agenda items.

# **Reporting**

1. Fortnightly data updates for Covid vaccination rates [provided by NIP].
2. Monthly immunisation reports [provided by NIP].
3. A dashboard of identified risks, for example, risks relating to vaccination rates and the health reforms / transition at the programme level [provided by secretariat]
4. Progress against the NIP Workstream Plan [provided by NIP on request]
5. Fortnightly Immunisation Taskforce Action Tracker (update fortnightly) [provided by secretariat].

**Decision rights**

*The objective of the Taskforce is to be:*

A forum for surfacing and escalating issues and/or blockages to the operation and delivery of immunisations and vaccinations. The Taskforce will also provide a mechanism to feedback learnings and on the ground intelligence. This collective approach will inform and help drive improvements in our approach so as to raise national immunisation rates back up to 95% and then sustain that.

The Taskforce will be accountable to the Director, National Public Health Service. The Director is accountable to the Chief Executive of Te Whatu Ora.

**Core responsibilities of all the members**

* have a commitment to upholding the principles of Te Tiriti o Waitangi
* have a commitment to ensuring equity of access and equity of health outcome for all New Zealanders, with a particular focus on Māori, Pacific, and disability groups
* have a commitment to work for the New Zealand public
* act in their professional capacity as experts on areas relevant to the National Immunisation programme
* provide the Taskforce with their own views and insights
* prepare for meetings, including reading any material sent out prior to the meeting
* prioritise attendance at the meetings and in the case of non-attendance, notify the Chair (or Secretariat) in advance of the meeting at the earliest possible opportunity.
* When circumstances prevent them from attending meetings, members will forward any comments, concerns and queries to the Chair before the meeting.
	1. **Terms of appointments**

Appointments are made for the duration of the Taskforce, unless otherwise determined by the Director of the National Public Health Service.

The Director may terminate the appointment of any member at any time by notification in writing.

# **Meeting procedures**

Taskforce meetings will be held primarily through virtual means. The Secretariat will ensure the appropriate arrangements are made for members.

Draft minutes will be provided to members within **five** working days of the meeting.

Meeting agendas and relevant papers will be provided to attendees at least **two** working days before the meeting. The Chair may accept late items and papers at their discretion.

Feedback may be requested on various issues and proposals out of the usual meeting cycle. Te Whatu Ora will endeavour to give the Taskforce as much time as possible to consider the information provided and provide feedback.

# **Liability**

Members are not liable for any act or omission done or omitted in their capacity as a member, if they acted in good faith, and with reasonable care, in pursuance of the functions of the Taskforce.

# **Confidentiality**

Members of the Taskforce will be privy to confidential and commercially sensitive information. It is expected that all information shared and discussed, including the agenda, material and minutes, are confidential. Members must ensure confidentiality is maintained and documents kept securely. Release of correspondence or papers can only be made with the prior approval of Te Whatu Ora.

Members must ensure that any information acquired or created for the Taskforce consideration is only used for performing duties as a member. Members may not use their knowledge of confidential Taskforce issues to provide inequitable benefit, gain or advantage to any individual, private or public agency or group.

Members are free to, and are expected to, express their own views within the context of meetings, or the general business of the Taskforce.

Members agree they will not at any time disclose to any person otherwise than necessary for these ToR or as required by law, any information they acquire for the purpose of providing and completing the services. In carrying their functions members of the Taskforce, members shall not make public statements of any kind on behalf of the Taskforce.

No members will make media statements of any kind on behalf of the Taskforce unless requested or approved to do so by the Director, National Public Health Service.

All Taskforce related agendas, minutes, email and other communication are subject to release under the Official Information Act 1982 unless otherwise excluded for release under the provisions of that Act.

All requirements around confidentially will apply equally to all members, guests and staff supporting the Taskforce.

# **Conflicts of Interest**

The Taskforce will adhere to the Public Service Commission’s guidelines on conflicts of interest.

Members should perform their functions in good faith, honestly and impartially and avoid situations that might compromise their integrity or otherwise lead to conflicts of interest. Proper observation of these principles will enable public confidence in the work of the committee to be maintained.

Members must complete a written Declaration of Conflict[[1]](#footnote-2) of interest both on appointment and annually, irrespective of whether they have a conflict of interest.

Any actual, perceived or potential conflicts of interest must be disclosed.

The Taskforce will have Conflicts of Interest as a standing item first on the meeting agenda to accommodate verbal disclose and to ensure the Conflicts of Interest register is kept up-to-date and accurate.

Conflicts of interest must also be considered with every agenda item, with the extent of any conflict/s assessed and fully documented in the minutes, including action taken to manage the conflict.

# **Fees**

Members of the Taskforce are entitled to be paid fees for attendance at meetings. Members who are not already paid for their time through wider state sector arrangements are eligible to claim a fee of $225 per day (based on an eight-hour day). The level of attendance fees is set in accordance with Cabinet Office Circular CO (19) 1, Fees framework for members appointed to bodies in which the Crown has an interest.

# **Expense Reimbursements**

Members could be entitled to be reimbursed for actual and reasonable travelling and other expenses incurred in carrying out their duties, with prior agreement.

The expectation is that the standards of travel, accommodation, meals and other expenses are modest and appropriate to reflect public sector norms. Airfares and accommodation where funded should be booked through the HNZ.

# **Term of the Immunisations Taskforce and review of the ToR**

The Taskforce will be disestablished on 23 December 2022, or at any time earlier if the duties of the Taskforce have been fulfilled or it is no longer required. The end date for the Taskforce will be reviewed in November 2022 for any requirement to further extend the term.

The work and terms of reference of the Taskforce may be amended, replaced or revoked by Te Whatu Ora at any time, and will be reviewed regularly by Te Whatu Ora, in conjunction with the Taskforce Chairs.

1.  [↑](#footnote-ref-2)