



BAY OF PLENTY HEALTH CONSUMER COUNCIL

Terms of Reference

Ratified 14 October 2020

Purpose:

The Bay of Plenty Health Consumer Council (“BOPHCC”) is an advisory and advocacy body established to advance the Bay of Plenty District Health Board’s (“BOPDHB”) vision of “Healthy Thriving Communities – Kia momoho te hapori oranga” for all health services consumers in the Bay of Plenty.

The Council exists to promote excellence and equity of health services across the Bay of Plenty community.

Functions:

The BOP Health Consumer Council will:

- Contribute a consumer perspective to improving health services and delivering equity in the Bay of Plenty across community, primary and secondary care.
- Recognise the BOPDHB’s commitment to Te Tiriti o Waitangi as articulated in its Maori Health Strategy, Te Toi Ahorangi.
- Champion partnership with whānau in developing and delivering services, in line with Te Toi Ahorangi.
- Provide proactive, timely and well-structured consumer advice to highlight inequities that impact disproportionately on Māori and other priority groups in the BOPDHB rohe.
- Promote meaningful consumer participation and maintain an overview of and advise on consumer engagement activity across the BOPDHB.
- Identify and advise on issues requiring consumer and community participation, including input into the development of health service priorities and strategic direction.
- Review and advise on reports, policy development and initiatives relating to the provision of health services.
- Promote communication and networking with the community and relevant consumer and special interest groups.
- Consider planned services for any omission or disadvantage.

For the avoidance of doubt, the BOPHCC will NOT:

- Provide clinical evaluation of health services
- Be involved in the BOPDHB’s contracting processes
- Be held accountable for decisions made by BOPDHB’s management and/or governance whether compatible with BOPHCC’s views or not
- Discuss or review issues that are (or should be) processed as formal complaints, for which full and robust BOPDHB processes exist
- Represent any specific consumer interest group or organisation nor enter into communication with a clear conflict of interest.

Members 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.

Level of Influence:

The BOPHCC has the authority to give advice and make recommendations to the BOPDHB Board and senior management.

Secretariat:

Secretariat support will be provided by the BOPDHB.

Membership:

The BOPHCC will comprise up to 15 consumer representatives. Members will have diverse backgrounds, contacts, knowledge and skills, and must be passionate about consumers being able to access the best possible health care and services from the BOPDHB. Members will be selected to reflect a range of areas of interest and experience in health and health service provision.

- 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, nor as an “expert” in that field.
- Representation from Iwi with mana whenua across the BOPDHB boundaries must be considered when selecting membership. Members fluent in te reo me ona tikanga and an understanding of mātauranga Māori, will provide cultural awareness that will enhance the functions of the BOPHCC
- Current HCC members to be involved in recruitment and appointment of new members.
- Members may be reappointed for no more than three terms. A term is recognised as 2 years.
- Members will be provided with training and support by the BOPDHB to undertake their roles successfully. All members will uphold BOPDHB’s CARE values and the values of Te Toi Ahorangi.
- Remuneration shall be paid based on the BOPDHB consumer engagement payment and reimbursement of expenses guidelines.
- All Members who reasonably believe they may have an actual or potential conflict of interest is to disclose their interest to the Chair immediately they become aware of it. Any conflict in interest will be recorded.
- Membership may be terminated or full dissolution of the BOPHCC may be undertaken by the Chief Executive Officer (CEO) of BOPDHB in consultation with the Chair of BOPHCC. Termination will be requested within 3 months from when performance is found to be seriously unacceptable.

Members who fail to attend three consecutive meetings without an apology will be asked by the Chair to step down from the BOPHCC.

Chairperson:

- The Chair shall be elected annually by Council members and endorsed by the CEO.
- The current BOPHCC Chair will invite members to submit nominations for the Chair which may be either self-nominations or nominations by one or more members of another member, to be considered at its last meeting of the year. The current Chair will then submit recommendations for the Chair position to the CEO. The elected Chair shall hold office for the forthcoming year, and may be nominated for a second one-year term.

- Members may appoint another member to exercise a proxy vote on their behalf if unable to be present at the vote. Proxy votes shall be delivered in writing to the current Secretariat in advance of the meeting at which the election is being held, signed and dated by the appointing member, and naming the member who is to exercise the proxy vote.

Deputy Chairperson:

- The Deputy Chair shall be elected by Council members.
- The current BOPHCC Chair will invite members to submit nominations for the Deputy Chair which may be either self-nominations or nominations by one or more members of another member, to be considered at its last meeting of the year. The elected Deputy Chair shall hold office for the forthcoming year, and may be nominated for a second one-year term.
- Proxy votes are permitted as for the appointment of the Chairperson.

Meetings:

- A minimum of ten meetings per year will be held February to November - should more meeting time be required this will be treated as an 'out-of-session' consultation.
- A quorum will be half the current membership, including the Chair or delegate.
- Others may attend as invited persons to facilitate the business on hand by invitation of the Chair.
- Minutes and agendas will be circulated at least a week prior to each meeting, with any reading material attached.
- Meetings will be up to two and a half hours, held at an agreed time, to enable all members to participate.
- Meeting summaries will be published on the BOPDHB website.
- Meetings will be open to staff and the public. On occasion when there are issues of confidentiality or other risks, meetings may be closed in full or part at the discretion of the Chair.

Reporting:

- The BOPHCC will report to the BOPDHB Board.
- Reports will be placed on the BOPDHB website once approved by members.
- Minutes of those parts of any meeting held in "public" shall be made available to any member of the public, consumer group, community etc. on request to the Chair.

Terms of Reference Review:

Members will review the Terms of Reference (TOR) biennially and make any recommendations for change to the CEO for consideration and decision by the DHB Board.

Appendices: 1. Shared Expectations.

 <p>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</p>	<p>SHARED EXPECTATIONS (CODE OF CONDUCT)</p>	<p>Policy 3.50.00 Protocol 1</p>
<p>EMPLOYMENT RELATIONSHIPS PROTOCOL</p>		

PURPOSE

Together with our CARE values, all workers (including employees, contractors and volunteers) are responsible for ensuring that their behaviour reflects the BOPDHB's expected standards of conduct to build a positive workplace culture.

BOPDHB is committed to providing organisational support through creating a healthy working environment which fosters wellbeing and positive relationships, where there is an employment relationship this should be done in accordance with the mutual duty of good faith as set out in the Employment Relations Act 2000.

Managers have a responsibility to support employees in achieving these goals, by leading by example and assisting employees to understand the Code of Conduct. A manager is any employee with people management responsibilities.

In addition, under the State Sector Act 1988 and Amendment Act 2013, as a Crown Entity we are required to incorporate the [Standards of Integrity and Conduct](#) in our own Shared Expectations (Code of Conduct).

STANDARDS TO BE MET

1. The Shared Expectations (Code of Conduct) apply to:
 - 1.1 All Bay of Plenty District Health Board (BOPDHB) employees, whether permanent, temporary, full time, part time or casual
 - 1.2 Every volunteer, contractor, consultant or anyone who exercises power, and / or controls resources for or on behalf of BOPDHB (1.1 and 1.2 together defined as "Persons").
 - 1.3 All people as above while, even if they are not at work, if their activities result in reputational risk to the organisation (together, defined as "Persons").
2. The following principles are integrated with our organisational values and behaviours framework.
 - 2.1 We must be fair, impartial, responsible and trustworthy.
 - 2.2 We must act with a spirit of service to the community and meet the same high standards of integrity and conduct in everything we do.
 - 2.3 BOPDHB must maintain policies and procedures that are consistent with integrity and conduct as outlined in the State Sector Act 1988; Amendment Act 2013 and by the State Services Commission.



<p>Mana Atua Aroha ki te tangata love and compassion to the people</p>	<p>Compassion Cares about other people, empathy, understanding</p>
<p>Mana Tupuna Ehara taku toa i te toa takitahi engari he toa takitini It is not mine alone but as a collective</p>	<p>All One Team Involves patients, whanau and colleagues, shares knowledge and information, takes time to listen to others</p>

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<p>Mana Whenua Ma whero ma pango ka oti ai te mahi If everyone does their part, everyone will be responsive.</p>	<p>Responsive Friendly and polite, shows kindness, respects peoples time</p>
<p>Mana Tangata Whaia te iti kahurangi ki te tuohu koe me maunga teitei. Pursue that is precious and do not be deterred by anything less than striving to wellness/hauora</p>	<p>Excellence Consistently follows agreed, safe, best practise, uses positive words and actions</p>

2.4 Bay of Plenty District Health Board (BOPDHB) is committed to creating a workplace that is free from bullying, harassment and discrimination, where people are respected and diversity is embraced. All Persons are entitled to a safe and healthy work environment, where they are not bullied, harassed, or subjected to violent or aggressive behaviour.

2.5 To achieve this goal all Persons are required to behave in a manner consistent with our values attitudes and behaviours “we want to see”. For example but not limited to:

- a) Treat people with respect, courtesy, honesty and fairness
- b) Respect different values, beliefs, cultures and religions
- c) Value the contribution of the people they work with, and work co-operatively
- d) Involve patients, whanāu and colleagues as equal partners
- e) Treat patient, client, employee and business information with the strictest confidence except where expressly authorised otherwise.
- f) Only access or release BOPDHB patient, client, employee and business information when authorised to do so and only to authorised parties
- g) Make fair and transparent decisions
- h) Have empathy and understanding and care for other people. Protect people’s dignity and protect vulnerable groups.

2.6 All Persons conducting BOPDHB business or services will execute their duties in accordance with best practice. This applies to:

- a) The efficient and safe use of resources
- b) Sound logic and decision making processes
- c) Sound financial responsibility and adherence to regulatory guidelines

3. Respect for the Law and the System of Government

3.1 Employees and all other Persons are required to have a working knowledge of the laws, policies and protocols that apply to their work, including the Shared Expectations (Code of Conduct).

3.2 Employees and all other persons (where applicable) are required to carry out any lawful and reasonable directions they are given directly or indirectly by the BOPDHB, and comply with those BOPDHB policies, protocols and practices that apply to their work. They have the right to question a direction, policy or protocol if they believe it is unreasonable or unlawful.

4. What happens if there is a breach of the Shared Expectations (Code of Conduct)?

4.1 Managers must seek to avoid escalation of inappropriate behaviour that may result in a breach of the Shared Expectations (Code of Conduct). They must deal with workplace conflict through timely and direct face to face communication where possible, that is fair and transparent and immediately addresses the behaviour in a constructive and proactive way. For employees, if the breach continues, or is serious, an investigation process may be implemented, with possible disciplinary consequences – refer to policy [3.50.14 Investigation and Disciplinary](#). For

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contractors, any breach shall be dealt with in accordance with the relevant Terms of Engagement.

4.2 If an employee or other Person is concerned about a possible breach of the Shared Expectations (Code of Conduct) the first step, if appropriate is to approach their manager or appropriate BOPDHB contact person. Alternatively if reluctant to approach their manager / contact person they can speak to:

- a) A People and Capability Business Partner who can provide information about this document and what their options are
- b) Their professional leader / advisor
- c) A union representative
- d) Their employer – (if that is not the BOPDHB)
- e) A trusted colleague
- f) Another manager
- g) The Occupational Health Team

4.3 BOPDHB is committed to protecting any person who raises concerns about a breach of the Shared Expectations (Code of Conduct). An employee or other Person who makes a qualifying disclosure about misconduct under the Protected Disclosures Act 2000 in accordance with BOPDHB policy requirements will be granted immunity from any civil or criminal proceeding that may arise from the disclosure of information.

5. More information and advice

5.1 BOPDHB has developed policies and protocols that support the Shared Expectations (Code of Conduct) and any potential issues that may arise. Further assistance can also be obtained from your manager or one of the people referred to in 4.2 above.

6. Awareness of Shared Expectations (Code of Conduct) and the impact of this in the workplace

6.1 This document or other relevant Person's responsibilities as clinical and non-clinical professionals. It is acknowledged that there are other codes of ethical behaviours for certain professional groups. Examples are:

- a) The Health and Disability Services Consumers Code of Rights (this details the 10 rights of consumers and the duties of providers)
- b) Codes of Conduct for individual health professional registration bodies.

ASSOCIATED DOCUMENTS

- [Bay of Plenty District Health Board policy 3.50.00 Employment Relationships](#)
- [Bay of Plenty District Health Board policy 3.50.02 protocol 7 Supporting Staff](#)
- [Bay of Plenty District Health Board policy 3.50.05 Protected Disclosures](#)
- [Bay of Plenty District Health Board policy 3.50.13 Investigation and Disciplinary](#)
- [Bay of Plenty District Health Board policy 5.4.5 Impairment - Management of Impaired Employee](#)
- [Bay of Plenty District Health Board policy 5.4.7 Threatening Behaviour, Bullying, Harassment and Violence in the Workplace - Management](#)
- [Bay of Plenty District Health Board Human Resources controlled documents](#)
- [Bay of Plenty District Health Board Health & Safety controlled documents](#)
- [Bay of Plenty District Health Board Health & Safety Management System controlled documents](#)

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