TERMS OF REFERENCE

**EQUITY IN THE COMMUNITY COMMITTEE**

**(COMMUNITY & PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE)**

# Establishment

The Committee is established by the Board (“Board”) of Northland District Health Board (“NDHB”) under sections 34 and 35 of the New Zealand Public Health and Disability Act 2000 (“the Act”). The Board may amend the terms of reference for the Committee from time to time.

# Functions of Committee

The function of the Committee is to give the Board advice on:

* The needs, and any factors that the Committee believes may adversely affect the health status, of NDHB’s resident population
* Priorities for use of health funding provided
* The disability support needs of NDHB’s resident population
* Priorities for use of the disability support funding received

The aim of the Committee’s advice is to ensure that the following maximise the overall health gain for its population:

* All service interventions NDHB has provided or funded in the community or could provide or fund in the community for the care of its population
* All policies NDHB has adopted or could adopt for the care of its population
* The kinds of disability support services the DHB has provided or funded or could provide or fund
* All policies NDHB has adopted or could adopt for the care of disability support service users

The Committee’s advice may not be inconsistent with national policies and strategies such as the New Zealand Health Strategy and the New Zealand Disability Strategy.

1. **Membership**
* Membership of the Committee shall be determined by the Board
* Appointment of members must comply with the requirements set out in Clause 6 Schedule 4 of the Act
* The Board will appoint the Chair of the Committee
1. **Responsibilities**

The Committee is responsible for:

* Monitoring the health status and needs of the Northland population
* Monitoring performance against NDHB’s plans including population health plans, the Annual Plan and the Northern Region Long Term Investment Plan.
* Advising the Board on the implications for planning and funding of nation-wide health strategies
* Advising the Board on strategies to reduce the disparities in health status
* Advising the Board on priorities for health improvement and independence as part of the strategic and annual planning process and monitoring progress on targets
* Ensuring disability support services and public health are considered in conjunction with personal health
* Advising the Board on issues related to the delivery of health services accessed by people with disabilities including how it can effectively meet its responsibilities towards the government’s vision and strategies for people with disabilities.

The Committee will identify issues and opportunities in relation to the provision of health services that the Committee considers may warrant further investigation and advise the Board accordingly.

1. **Relationship with Board and Management**

The Committee is established by and accountable to the Board. The Committee’s role is advisory only, and unless specifically delegated by the Board from time to time in accordance with clause 39(4) of Schedule 3 of the Act, no decision-making powers are delegated to the Committee.

The Committee shall receive all material and information for its review or consideration through the Chief Executive Officer.

The Committee shall provide advice and make recommendations to the Board only, and is not authorised to give any directions or issue any instructions to NDHB officers or employees unless specifically requested in writing by the Board.

The Committee is to be cognisant of the work being undertaken by other committees to ensure a cohesive approach to health and disability planning and delivery.

1. **Meeting Procedure**

The Committee shall meet regularly as determined by the Board. Meetings shall be conducted in accordance with:

* The requirements of the Act
* The NDHB Standing Orders

The Committee may invite any NDHB officers and employees to attend its meetings as required.

**Approved January 2020**