

TERMS OF REFERENCE

Hawke's Bay District Health Board Māori Relationship Board

September 2014

Purpose	The purpose of the Māori Relationship Board (MRB) is to maximise the relationship between the Hawke's Bay District Health Board (HBDHB) and Ngāti Kahungunu Iwi Inc. (NKII), to benefit the Māori population within the Kahungunu rohe principally by identifying and removing health inequities and instituting processes that support Māori centric models of health care.
Functions	 The functions of the MRB are to: a) Identify and convey the needs and aspirations for health and wellbeing of the Māori population within Hawke's Bay. b) Ensure effective plans are jointly developed and maintained by HBDHB and NKII to address health inequities and to foster mana motuhake. c) Monitor and make recommendations on the implementation of these plans. d) Monitor the strategic development and performance of HBDHB delivered and funded services, to ensure they support the removal of disparities and are responsive to the needs of Māori. e) Monitor the operational performance of services targeted particularly at Māori. f) Prioritise the use of funding and access to services. The aim of the MRB's advice is to: a) Identify and reduce/remove existing and potential health inequities. b) Promote and enhance whānau models of care c) Monitor the patient care experience for Māori ensuring all services are accessible, appropriate and responsive to meet their needs. d) Ensure all funding and services are appropriate, recognise agreed values and provide value for money.
Level of Authority	The MRB has the authority to provide tangible advice and make recommendations to the HBDHB Board. The Kahungunu Health Sector representative members of MRB will decide and progress any documentation that requires NKII Board Endorsement through the appropriate NKII processes. Ngāti Kahungunu Iwi endorsement can, and is only to, be provided by the Ngāti Kahungunu Iwi Inc. Board.

Membership	Members of MRB:
	 Will be appointed for any period that terminates no later than four months after the end of the term of the HBDHB Board that appointed them. (Note: The full term of a Board is three years). Members may be reappointed by the 'new' Board.
	The appointment of a Board member to MRB terminates if the member ceases to be a member of the Board.
	Remuneration will be based on the Cabinet Fees Framework which provides for payment for each member's attendance at meetings or workshops, up to a maximum of ten per year.
	 Composition: Chairman of Ngāti Kahungunu lwi Incorporated, or alternate No less than two and no more than six HBDHB Board members, at least two of whom should be Māori Community members (up to six nominated by NKII or from the community)
	One Ahuriri District Health Representative.
	HBDHB Board members who are not committee members may attend this committee as observers, and with the approval of the committee chair, have the right to speak.
Chair	The Chair shall be appointed by the HBDHB Board from the HBDHB Maori Board members on MRB. HBDHB shall consult with NKII on this appointment.
Quorum	A quorum will be half the members if the number of members is even, and a majority if the number of members is odd.
Meetings	MRB may have up to eight meetings or workshops per year, at times and places agreed by the Chair. The Standing Orders adopted by HBDHB apply to MRB meetings, however Tikanga will take precedence.
Reporting	The Chair shall report on MRB business to the Board, with such recommendations as the MRB may deem appropriate.
Minutes	Minutes of all meetings and outcomes of all workshops will be circulated to all members of the Committee within one week of the meeting/workshop taking place. HBDHB Board members will be sent a copy of the minutes/outcomes, on request.