1. PURPOSE AND SCOPE
This policy describes the terms of reference for the Māori Health Advisory Group (MHAG).

2. KEYWORDS
Indigenous, Health Committee, Advisory Group, Aboriginal, Torres Strait Islander, Māori, Action Plan

3. BODY OF POLICY

3.1. Background
The Māori Health Advisory Group is responsible for providing advice on the implementation of the Māori Health Action Plan and advice on other key Māori health initiatives, projects and content in RACS position statements and policies. The Advisory Group functions under the oversight of the RACS Indigenous Health Committee. The Advisory Group meets regularly to discuss strategies and progress towards the implementation of the Māori Health Action Plan.

3.1. Objectives
The Advisory Group will:

3.1.1. Support the Indigenous Health Committee to effectively implement the vision and goals of the Māori Health Action Plan

3.1.2. Make recommendations to the Indigenous Health Committee on key Māori Health initiatives and projects and Māori health content in RACS position statements and policies

3.2. Powers and Activity

3.2.1. The Advisory Group will report to the Indigenous Health Committee and seek guidance and input from the New Zealand National Board.

3.2.2. The Advisory Group shall have power as delegated from time to time by the Indigenous Health Committee.

3.2.3. The Advisory Group will be chaired by a Fellow who is a member of the Indigenous Health Committee. The Chair will be determined by the Advisory Group.

3.2.4. A member of this Advisory Group will be co-opted to the New Zealand Board unless the Advisory Group considers that there is already appropriate representation from an existing member of that Board.

3.3. Composition and Size

3.3.1. The Advisory Group will include at least six members, and shall comprise at least five Fellows and at least one trainee.

3.3.2. Advisory Group members must be nominated by at least one other member of the Advisory Group and supported by the majority.

3.3.3. Recommendation on Advisory Group membership is to be made to the Indigenous Health Committee for approval. Members will be appointed for a term of 3 years and shall be eligible for re-appointment for two further
periods of 3 years, in line with the Indigenous Health Committee Terms of Reference.

3.3.4. The Advisory group shall, at the discretion of the Chair, invite observers from Te ORA (Māori Medical Practitioners Association), other Medical Colleges or medical bodies or any other relevant organisation, to provide input into meetings.

3.4. Meetings

3.4.1. The Advisory Group shall meet regularly, at such times deemed necessary by the Chair, but not less than four times per year. All costs associated with Advisory Group meetings will be covered by the annual budget of the Indigenous Health Committee.

3.5. Quorum

A quorum will be 50% of those eligible to vote.

3.6. Accountability and Reporting


3.6.2. The Advisory Group will, where relevant, report to the New Zealand National Board.

3.6.3. The Māori Health Advisory Group’s meetings will be recorded in minutes and be forwarded to the Secretariat, Indigenous Health Committee, for distribution to the Indigenous Health Committee.

4. ALTERATIONS TO THE ADVISORY GROUP’S TERMS OF REFERENCE

Any alterations to this policy are subject to the approval of RACS Council through the Fellowship Services Committee and the Professional Development and Standards Board (PDSB).

5. ASSOCIATED DOCUMENTS

Indigenous Health Committee Terms of Reference
RACS Indigenous Health Position Paper
RACS Māori Health Action Plan

Approver: Professional Development and Standards Board
Authoriser: Council