

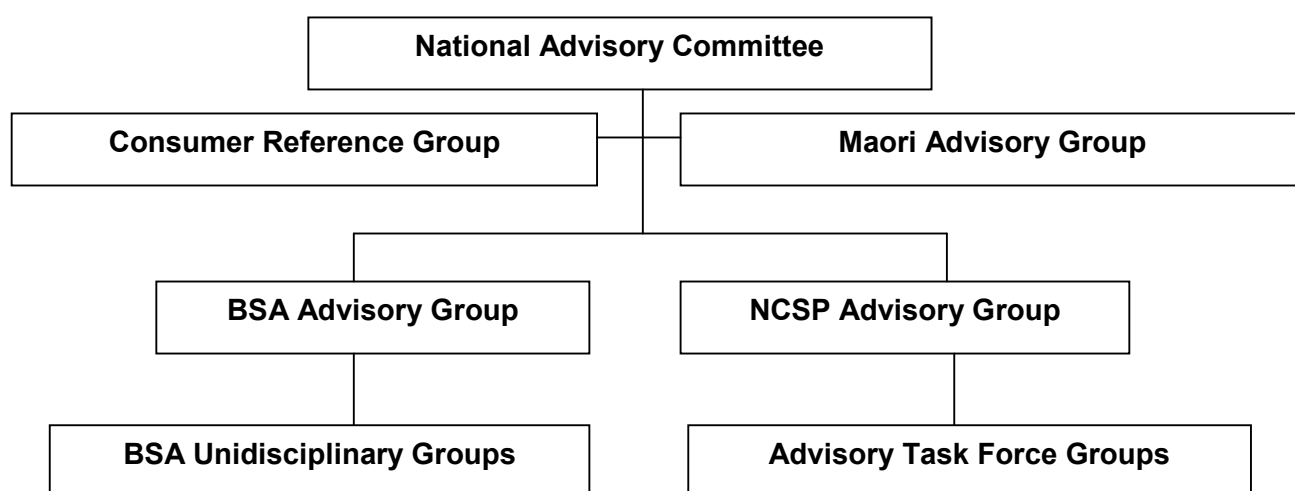
Terms of Reference

BSA Advisory Group

Background

The National Screening Unit (NSU) in the Ministry of Health has a stewardship role for the National Cervical Screening Programme (NCSP) and BreastScreen Aotearoa (BSA). The NSU seeks external advice from a range of sources to support its work. A review in 2002 of advisory input, in consultation with the Population Based Screening Advisory Group (disbanded November 2002), resulted in a revised advisory group structure. The revised structure includes separate Advisory Groups for the breast and cervical screening programmes and the establishment of a national screening advisory body to provide oversight of and advice on screening activities throughout the health sector, including population screening programmes. There will also be a Māori, Pacific and Consumer reference group as outlined in figure 1 below.

Figure 1: Advisory Group Structure for the NSU/MoH



Purpose of the Group

The BreastScreen Aotearoa Programme (BSA) is establishing the BSA Advisory Group (the Group) to support the National Screening Unit (NSU) to achieve its vision, namely:

Saving lives, reducing inequalities, and building the Nation's health by leading the delivery of screening programmes, uncompromising in their quality and trusted by the communities we serve.

Role of the Group

The role of the group is to:

- discuss and provide independent advice on the policy and strategic direction of the Programme in New Zealand. It is expected that members will consult widely within their own constituent groups.
- discuss research and development opportunities for the BSA
- provide advice from time to time on other areas as agreed by the Group and the BSA.
- Provide advice on multidisciplinary operational issues.

Treaty of Waitangi

The Group will operate in accordance with the Treaty of Waitangi principles of partnership, participation and protection.

Composition

The Group comprises members who collectively have wide knowledge and experience in the BSA. The membership consists of:

- One representative from each Uni-Disciplinary Group
- Epidemiologist/Public Health Physician
- Pacific representative
- Representative from the Consumer Advisory Group
- Representative from the Maori Advisory Group
- College of GP's representative (with a primary care focus)
- BSA may co-opt other member(s) as required to address any gaps.

The BSA membership will be ex officio and will comprise of the BSA Manager and BSA Clinical Leader with input from BSA team members as required.

The Group reports to the BSA Manager and BSA Clinical Leader.

Term of Office

The Term of Office will be for two years and may be renewable.

If vacancies occur, BSA will seek input from the Group on specific skills and knowledge required, prior to calling for nominations and making an appointment.

Working Arrangements of the Group

One of the BSA advisory group members will chair the Group. The BSA team will provide administrative and analytical support to the Group.

Meetings will be held quarterly, with teleconferences in between depending on requirements.

Conflicts of interest and confidentiality

Members should formally document their conflicts of interest and identify any conflict of interest prior to a discussion of a particular issue. The Group will then decide what part the member may take in any relevant discussion. Further guidance can be found in the document "*Conflict of Interest Protocol for Ministry of Health Advisory Committees*".

The Group and its members are to treat information held by or about the BSA/MoH as confidential and proprietary to the BSA/MoH. Information should only be disclosed beyond the Group that is necessary for the Group to achieve its tasks.

The Group and its members shall comply with protocols of the BSA/MoH on the use, storage, return and destruction of any information of any nature whatsoever obtained, as a consequence of undertaking advisory functions.

The BSA holds copyright/intellectual property rights on any written outputs of the Group.