

Terms of Reference for the Radiation Safety Advisory Council

1. Introduction

- 1.1 These terms of reference should be read in conjunction with the Radiation Safety Act 2016 which establishes the Radiation Safety Advisory Council (the Council). The terms of reference set out the:
- role and functions of the Council
 - composition of the Council
 - work requirements
 - reporting requirements
 - terms and conditions of appointment
 - duties and responsibilities of Council members.
- 1.2 All references to sections and schedules in these terms of reference refer to the Radiation Safety Act 2016 (the Act).
- 1.3 All references to the Ministry in these terms of reference refer to the Ministry of Health.

2. Background

- 2.1 Most of the duties and functions under the Radiation Safety Act 2016 rest with the Director for Radiation Safety (the Director). The Minister of Health has a small number of powers and the Director-General of Health must employ the Director.
- 2.2 The Director is employed in the Ministry of Health's Office of Radiation Safety which implements and administers the Act. The Ministry of Health contracts for external science advice and compliance/auditing services to support the role of the Director and the Office of Radiation Safety. The Office of Radiation Safety will provide the secretariat support for the Council.
- 2.3 The Council provides the Director, the Minister of Health, and the Director-General of Health an independent source of advice and review on matters such as good practice in radiation regulation, emerging radiation science and technologies, and New Zealand's obligations under international protocols and as a member of the International Atomic Energy Agency.

3. Role and Functions of the Council

- 3.1 The functions of the Council are outlined in section 81.

4. Composition of the Council

- 4.1 The Council will have no more than seven (7) members.
- 4.2 The members of the Council are appointed by the Minister under section 80(3).
- 4.3 The composition of the Council is outlined in section 80.
- 4.4 A chairperson and, if required, a deputy chairperson, are appointed by the Council under clause 3 of schedule 4.

- 4.5 Members' terms of office are outlined under clause 1 of schedule 4.
- 4.6 Knowledge of and experience in physics, human health risks and environmental risks associated with ionising radiation use, and the management of those risks, would be highly desirable to meet the membership requirements specified in the Act. This knowledge and experience would assist the Council to address a stated purpose of the Act to provide protection from harmful effects of ionising radiation (section 3(a)).
- 4.7 Some legal, regulatory, and/or government knowledge and expertise is desirable. This expertise would be valuable for the Council in addressing a stated purpose of the Act to ensure New Zealand meets its international obligations on radiation safety and security (section 3(b)) and the Minister's responsibilities under the Radiation Safety Act 2016.
- 4.8 Representation of radiation source owners and users would also be appropriate. Owners and users include members of a number of health professions, veterinary practitioners, scientific researchers, and industries. There is also a radiation support services 'industry' that enables owners and users to meet the radiation safety requirements by providing maintenance, testing, calibration, and other ancillary services and advice.
- 4.9 The requirement for at least one lay person will also be used to address other desirable perspectives for the Council's membership, such as patients, Māori or ethics.
- 4.10 In making themselves available for appointment, members should ensure that:
- there is no conflict of interest which would preclude their appointment; and
 - they are available to serve for the full term of their appointment.

5. Work Requirements

- 5.1 Appoint chairperson(s) under clause 3(1) of schedule 4.
- 5.2 Establish any procedures that may be required under section 83(1).
- 5.3 Prepare advice or recommendations on any matters under sections 81(a) and (b).
- 5.4 Provide any advice requested under section 81(c), in the form requested, and within a reasonable time of receiving the request.
- 5.5 Prepare an annual report under section 85.

6. Reporting Requirements

- 6.1 Produce annual report under section 85(1) in a form that is suitable for presentation by the Minister to the House of Representatives under section 85(2).

7. Establishment, Review Process and End Date

- 7.1 The Council is established under section 80.

- 7.2 Parliament will review the annual report of the Council as a consequence of section 85(2).
- 7.3 The Council has no stated end date.
- 7.4 The Minister may provide a view of the Council's performance at any time and in any form.
- 7.5 The Ministry will review the Council's terms of reference, fees and secretariat arrangements annually.

8. Meetings

- 8.1 The Council will meet at least 3 times per year, being;
- within two (2) months of the beginning of the year, and again
 - within six (6) months of the beginning of the year, and again
 - within two (2) months of submitting of its annual report for publication.
- 8.2 The Ministry of Health secretariat supporting the Council will arrange meetings, record and distribute meeting minutes, arrange publication and submission of annual report.
- 8.3 The times and places of meetings are to be determined under clause 4(1) of schedule 4.
- 8.4 Quorum requirements for meetings are outlined under clause 4(2) of schedule 4.
- 8.5 Decision procedures for meetings are outlined under clauses 4(3) and 4(4) of schedule 4.
- 8.6 The Secretariat supporting the Council will maintain an interest's register, listing members' interests relevant to the Council's business. Declaration and discussion of conflicts of interest should be a standing item on each meeting's agenda, and actions arising out of this item will be recorded in the minutes.

9. Duties and Responsibilities of a Member

- 9.1 This section sets out the expectations regarding the duties and responsibilities of a person appointed as a member of the Council. This is intended to aid members by providing them with a common set of principles for appropriate conduct and behaviour, and serves to protect the Council and its members from being exposed to legal challenge.
- 9.2 Members are accountable to the Minister under section 80(3).
- 9.3 Council members attend meetings and undertake Council activities as independent persons responsible to the Council as a whole and are not representatives of professional organisations or communities. This issue is particularly important when Council members may, at times, be required to be party to decisions which conflict with the commercial interests of views of other organisations with which they are involved.
- 9.4 There is an expectation that members will attend all meetings and devote sufficient time to become familiar with the affairs of the Council and the wider environment within which it operates.

- 9.5 Council members may be required to serve on advisory or technical committees established under section 82.

10. Removal from Council

- 10.1 A member of the Council may be removed under clause 2(1) of schedule 4.
- 10.2 The process for resignation from the Council is outlined in clause 2(2) of schedule 4.
- 10.3 A member of the Council ceases to be a member when they become ineligible for appointment under clause 1(2)(a) of schedule 4 as outlined under clause 2(3) of schedule 4.

11. Conflicts of Interest

- 11.1 Members should perform their functions in good faith, honestly, impartially and avoid situations that might compromise their integrity or otherwise lead to conflicts of interest. Proper observation of these principles will enable public confidence in the work of the Council to be maintained.
- 11.2 When members believe they have a conflict of interest on a subject which may prevent them from reaching an impartial decision or undertaking an activity consistent with the Council's functions, then they must declare the conflict of interest and absent themselves from the discussion and/or activity. This must be done at the earliest possible opportunity, in the regular agenda item around conflicts of interest, and at the point the relevant item of business comes up in the meeting.

12. Liability

- 12.1 Members are not liable for any act or omission done or omitted in their capacity as a member, if they acted in good faith, and with reasonable care, in pursuance of the functions of the Council.

13. Confidentiality

- 13.1 Meetings including agenda material and minutes, are confidential. Members must ensure that the confidentiality of Council business is maintained.
- 13.2 Members are free to, and are expected to, express their own views within the context of meetings, or the general business of the Council. Members must publicly support a course of action decided by the Council, or if unable to do that, must not publicly comment on decisions.
- 13.3 At no time shall members divulge details of Council matters or decisions to people who are not members, or Ministry employees. Disclosure of Council business to anyone outside the Ministry must be the decision of the Ministry.
- 13.4 Council members must ensure that documents are kept securely to ensure that confidentiality is maintained. Release of correspondence or papers can only be made with the approval of the Ministry. At the end of a member's term, all Council information must be returned to the Ministry.

14. Media

- 14.1 Council members will ensure that all media enquiries are referred to the Council Chair.
- 14.2 The Council Chair will discuss all media enquiries with the Ministry before an agreed media response is made.
- 14.3 The Ministry of Health will apply its established media policy.

15. Remuneration and expenses

- 15.1 Members of the Council are paid fees for attendance at meetings, in accordance with the Cabinet Office Circular CO (12) 6 (19 December 2012): *Fees framework for members appointed to bodies in which the Crown has an interest* (the Fees Framework).
- 15.2 The fees are \$330 per day for the Chair and \$250 per day for other Council Members. Part days will be paid at the day rate.
- 15.3 Actual and reasonable meeting preparation time will be paid pro rata based on the daily rate to a maximum of one day per meeting.
- 15.4 Members who are employees of the State Service, as defined by the State Sector Act 1988, are not entitled to be paid fees for Council business if this is conducted during regular paid work time (ie, members cannot be paid twice by the Crown for the same hours).
- 15.5 Members are entitled to be reimbursed for actual and reasonable travelling and other expenses incurred in carrying out their duties. The expectation is that the standards of travel, accommodation, meals and other expenses are modest and appropriate to reflect public sector norms.
- 15.6 Members of any advisory or technical committee the Council appoints under section 82(1) of the Act shall receive the same remuneration as Council members.
- 15.7 The Chair of the Council will agree budgets with the Secretariat before any advisory or technical committee is appointed under section 82(1) of the Act.

Keriana Brooking
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Candidate Information on the Terms and Conditions of Appointment to the Nursing Council of New Zealand

Health Practitioners Competence Assurance Act 2003

Introduction

This document provides information for prospective candidates for membership of the Nursing Council of New Zealand (the Council). It sets out the:

- role and functions of the Council
- composition of the Council
- terms and conditions of appointment
- duties and responsibilities of a member.

The Council operates under the Health Practitioners Competence Assurance Act 2003 (the Act).

The Role of Registration Bodies in Regulating Health Professionals

Consumers do not always have enough knowledge to make an informed decision whether nurses are competent to carry out their profession. This can be a matter of concern when the actions of an incompetent practitioner may impact on the health and safety of consumers. Health practitioner regulation is one way of providing consumers with information on a practitioner's competence. It ensures that only practitioners who have demonstrated that they meet the minimum standards for entry to an occupation can practise or use particular protected titles.

The Act establishes registration authorities to protect consumers of the services of a wide range of health practitioners. The Act requires registration authorities to establish the competencies required for the registration of practitioners who demonstrate they possess the competencies to practice safely. The Council is one such registration authority.

Individuals appointed to the Council include registered professionals and lay members. Members have a range of experience, from first-time appointees with little or no experience as a member of such authorities to members with extensive experience. The Council draws considerable benefits from having a diverse membership with a range of skills, attributes, and experience.

Functions of the Council

The Council is a body corporate established under section 114 (1) of the Act. The purpose of the Act is to protect the consumers of nursing services through the education, registration and discipline of the nursing profession.

The functions of the Council are set out under section 118 of the Act. As they relate to the Council, these functions are:

- (a) to prescribe the qualification required for scopes of practice within nursing, and, for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes

- (b) to authorise the registration of nurses under this Act, and to maintain registers
- (c) to consider applications for annual practising certificates
- (d) to review and promote the competence of nurses
- (e) to recognise, accredit, and set programmes to ensure the ongoing competence of nurses
- (f) to receive and act on information from nurses, employers, and the Health and Disability Commissioner about the competence of nurses
- (g) to notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a nurse may pose a risk of harm to the public
- (h) to consider the case of nurses who may be unable to perform the functions required for the practice of nursing
- (i) to set standards of clinical competence, cultural competence, and ethical conduct to be observed by nurses
- (j) to liaise with other authorities appointed under this Act about matters of common interest
- (k) to promote education and training in nursing
- (l) to promote public awareness of the responsibilities of the Council
- (m) to exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under the HPCA Act or any other enactment.

Consumer Constituency

The consumer constituency of the Council includes those who use the service of nurse practitioners, registered and enrolled nurses within public and private health care facilities. Those that use their services are a cross-section of New Zealanders in terms of ethnicity, age, gender and geography.

Appointment as a Member of the Council

In making yourself available to be considered for appointment, please ensure that:

- there is no conflict of interest which would preclude your appointment
- you are available to serve for a term of office of up to three years.

As a member of the Council, you will be expected to follow the terms and conditions set out below.

Terms and Conditions of Appointment

Council members are appointed by the Minister of Health for a term of up to three years, by notice published in the *Gazette*. Members may be reappointed but may not hold office for more than nine consecutive years.

Members may decide not to continue in office at any time, in which case they should advise the Minister of Health.

The Act states that appointment members are considered to have vacated their office if they are adjudged bankrupt under the Insolvency Act 1967. The Minister of Health may at any time remove members from office on the grounds of:

- inability to perform the duties of the office
- neglect of duty

- misconduct, proved to the satisfaction of the Minister
- with the concurrence of the Council, by notice given to the member, on the ground that the member's performance on the Council is inadequate.

Duties and Responsibilities of a Member

This section sets out the Minister of Health's expectations regarding the duties and responsibilities of a person appointed as a member of the Council. This is intended to aid members of the Council by providing them with a common set of principles for appropriate conduct and behaviour and serves to protect the Council and its members from being exposed to legal challenges.

As an independent statutory body, the Council has an obligation to conduct its activities in an open and ethical manner. The Council has a duty to operate effectively in a manner consistent with its functions as set out in section 118 of the Act.

General

Council members have a commitment to work for the public of New Zealand. The nurses on the Nursing Council must be competent to practise. They are accountable to the Minister of Health (and through the Minister to the public of New Zealand). The functions of the Council are stated in section 114 of the Act, and the Council operates within these parameters.

Council members attend meetings and undertake Council activities as independent persons responsible to the Council as a whole and are not representatives of professional organisations or communities. This issue is particularly important when Council members may, at times, be required to be party to decisions which conflict with the views of other organisations with which they are involved.

There is an expectation that Council members will make every effort to attend all Council meetings and devote sufficient time to become familiar with the affairs of the Council and the wider environment within which it operates.

Council members may be required to serve on one or more Council committees or working groups.

Legislation and Conflicts of Interest

It is important that Council members have a common understanding of their role as a member in order that decisions can be reached within the spirit of the governing legislation, namely, for the purpose of protecting the public interest through the regulation of nursing.

Council members will be expected, over time, to become familiar with, and operate according to, the:

- Health Practitioners Competence Assurance Act 2003

In addition, the Nursing Council is expected to be familiar with, and operate according to, the:

- Principles of natural justice and administrative law
- Health and Disability Commissioner Act 1994
- Health and Disability Services Code of Consumers' Rights
- Health and Disability Services Act (Safety) 2001
- Trans-Tasman Mutual Recognition Act 1997
- Privacy Act 2020

- Health Information Privacy Code 2020
- Medicines Act 1988
- Health Practitioners Competence Assurance Act 2003
- Treaty of Waitangi
- Codes of Conduct of the Profession

The Council is expected to comply with the intent of the Official Information Act 1982.

Council members should perform their functions in good faith, honestly and impartially and avoid situations which might compromise their integrity or otherwise lead to conflicts of interest. Proper observation of these principles will protect them and will enable public confidence to be maintained.

When Council members believe they have a conflict of interest on a subject which will prevent them from reaching an impartial decision or undertaking an activity consistent with the Council's functions, then they must declare a conflict of interest and withdraw themselves from the discussion and/or activity.

Confidentiality

Meetings, including agenda material and minutes, of the Council are confidential. Council members must ensure that the confidentiality of Council business is maintained.

Members are free to express their own views within the context of Council meetings or the general business of the Council.

Council members must publicly support a course of action decided by the Council or, if unable to do that, must not publicly comment on decisions.

At no time shall Council members individually divulge details of Council matters or decisions of the Council to persons who are not Council members. Disclosure of Council business to anyone outside the Council must be the decision of the Council; or, between meetings, at the discretion of the Chairperson of the Council; or, in the case of committees, the Chairperson of the Committee (if they have the delegated authority of the Council).

Council members must ensure that Council documents are kept secure to ensure the confidentiality of Council work is maintained. Release of Council correspondence or papers can only be made with the approval of the Council.

Meetings of the Council

The Council meets formally on average every six times a year with some two day meetings scheduled. In addition, members may be required to participate on sub-committees established to address specific issues.

At any meeting of the Council the quorum necessary for the transaction of business is half of the full membership (if the Council has an even number of members), or a majority of the full membership (if the Council has an odd number of members).

When carrying out its functions the Council must follow the principles of natural justice and administrative law. The Council must act lawfully, that is, the Council can only act within the limits of its powers as set out in the Health Practitioners Competence Assurance Act 2003 and the Nurses Regulations 1986. The Council must also act fairly when carrying out its functions. Decisions of the Council are reviewable by the Courts and it is also possible for persons to take civil action against the Council or its individual members.

Fees and Allowances

Members of the Council and of any committee appointed by the Council are paid fees for attendance at meetings. Currently, the Chairperson is paid \$790 (less withholding tax) per day and members are paid \$560 (less withholding tax) per day inclusive of reading time. Actual and reasonable travel and accommodation expenses are paid for by the Council.

More detailed information can be obtained from the Chief Executive/Registrar of the Council:

Ms Catherine Byrne
Chief Executive/Registrar
Nursing Council of New Zealand
P O Box 9644
WELLINGTON

Ph: (04) 385 9589
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Terms and Conditions of Appointment to the Podiatrists Board

Candidate Information

Introduction

This document provides information for prospective candidates for membership of the Podiatrists Board (the Board). It sets out the:

- role and functions of the Board
- composition of the Board
- terms and conditions of appointment
- duties and responsibilities of a member

The Role of Responsible Authorities (RA's)

The Health Practitioners Competence Assurance Act 2003 (the Act) came into force in September 2004. It brought all registered health professions in New Zealand, which had previously been regulated under their own separate statutes, under one consistent regulatory framework. The Act's principal purpose is "to protect the health and safety of members of the public by providing mechanisms to ensure that health practitioners are competent and fit to practise their professions.

Consumers do not always have enough knowledge to make an informed decision as to whether podiatrists are competent. This can be a matter of concern when the actions of an incompetent practitioner may impact on the health and safety of consumers. Occupational regulation is one way of providing consumers with information on a practitioner's competence. It ensures that only practitioners who have demonstrated that they meet the minimum standards for entry to an occupation can practise or use protected titles, such as the title "Podiatrist".

Individuals appointed to the Board have a range of experience, from first-time appointees with little or no experience as a member of such authorities to members with extensive experience. The Board draws considerable benefits from having a diverse membership with a range of skills, attributes, and experience.

Functions of the Board

The Podiatrists Board of New Zealand (PBNZ) is the Responsible Authority for podiatrists, established under section 114 of the Health Practitioners Competence Assurance Act. The functions of the Board are set out under section 118 of the Act:

- (a) to prescribe the qualifications required for scopes of practice within the profession, and for that purpose, to accredit and monitor educational institutions and degrees, courses of studies, or programmes
- (b) to authorise the registration of podiatrists under this Act, and to maintain registers
- (c) to consider application for annual practising certificates
- (d) to review and promote the competence of podiatrists
- (e) to recognise, accredit, and set programmes to ensure the ongoing competence of podiatrists
- (f) to receive and act on information from any person about the practice, conduct, or competence of podiatrists and, if it is appropriate to do so, act on that information
- (g) to notify employers, the Accident Compensation Corporation, the Director-General of Health, and the Health and Disability Commissioner that the practice of a podiatrist may pose a risk of harm to the public
- (h) to consider the case of podiatrists who may be unable to perform the functions required for the practice of the profession
- (i) to set standards of clinical competence, cultural competence (including competencies that will enable effective and respectful interaction with Māori), and ethical conduct to be observed by podiatrists
- (j) to liaise with other authorities appointed under the HPCA Act about matters of common interest
- (ja) to promote and facilitate inter-disciplinary collaboration and co-operation in the delivery of podiatry services
- (k) to promote education and training in the profession
- (l) to promote public awareness of the responsibilities of the authority
- (m) to exercise and perform any other functions, powers, and duties that are conferred or imposed on it by or under this Act or any other enactment.

Composition of the Board

Under section 120 of the HPCA Act the Board must have at any time at least five members and the Minister may appoint up to 14 members to the Board. The membership must include:

- a majority of members who are health practitioners; and
- two laypersons, if the Board has at any time eight or fewer members; and
- three laypersons, if the Board has at any time nine or more members.

Consumer Constituency

The consumer constituency of the Board includes those who use the services of podiatrists, as well as those with an interest in the care of themselves and other New Zealanders. Those that use or may use these services are a cross-section of New Zealanders in terms of ethnicity, age, gender and geography.

Appointment as a Member of the Board

In making yourself available to be considered for appointment, please ensure that:

- there is no conflict of interest which would preclude your appointment; and
- you are available to serve for a term of office of up to two or three years.

The Board provides an induction package to all new members and Board members are expected to follow the terms and conditions set out below.

Terms and Conditions of Appointment

Members of the board are appointed by the Minister of Health for a term of either two or three years. Members may be reappointed from time to time, but no person is eligible to be a member for more than nine consecutive years. Any member of the Board may at any time resign as a Board member by advising the Minister of Health in writing.

The HPCA Act states that the appointment members are considered to have vacated their office if they are adjudged bankrupt under the Insolvency Act 1967. The Ministry of Health may at any time remove members from office on the grounds of:

- inability to perform the duties of the office,
- neglect of duty,
- misconduct, proved to the satisfaction of the Minister,
- with the concurrence of the Board, by notice given to the member, on the ground that the member's performance on the Board is inadequate.

Duties and Responsibilities of a Member

This section sets out the Minister of Health's expectations regarding the duties and responsibilities of a person appointed as a member of the Podiatrists Board. This is intended to aid members of the Board by providing them with a common set of principles for appropriate conduct and behaviour and serves to protect the Board and its members from being exposed to legal challenges.

As an independent statutory regulatory body, the Podiatrists Board has an obligation to conduct its activities in an open and ethical manner. The Board has a duty to operate in an effective manner within the parameters of its functions as set out in section 114 of the Health Practitioners Competence Assurance Act 2003.

General

Board members have a commitment to work for the greater good of the Board. They are accountable to the Minister of Health (and through the Minister to the public of New Zealand).

Board members attend meetings and undertake Board activities as independent persons responsible to the Board as a whole. Members are not appointed as representatives of professional organisations or communities. This is particularly important when Board members may, at times, be required to be party to decisions which conflict with the views of other organisations with which they are involved.

Updated January 2022

There is an expectation that Board members will make every effort to attend all Board meetings and devote enough time to become familiar with the affairs of the Board and the wider environment within which it operates.

Board members may also be required to serve on one or more Board committees or working groups.

Board members are expected to attend the disciplinary hearings held by the Board, if required.

Legislation and Conflicts of Interest

It is important that Board members have a common understanding of their role as a member in order that decisions can be reached within the spirit of the governing legislation, namely, for the purpose of protecting the public interest through the regulation of podiatrists.

Board members will be expected, over time, to become familiar with, and operate according to, the HPCA Act.

In addition, the Podiatrists Board is expected to be familiar with, and operate according to, the:

- Principles of natural justice and administrative law
- Te Tiriti o Waitangi/Treaty of Waitangi
- Health and Disability Commissioner Act 1994
 - Code of Health and Disability Services Consumers' Rights
- Health and Disability Services Act 1993
- Trans-Tasman Mutual Recognition Act 1997
- Privacy Act 2020 (replaces the Privacy Act 1993 on 1 December 2020)
 - Health Information Privacy Code 1994
- Ethical Principles and Standards of Conduct of the Profession

The Board is expected to comply with the intent of the Official Information Act 1982.

Board members should perform their functions in good faith, honestly and impartially and avoid situations that might compromise their integrity or otherwise lead to conflicts of interest. Proper observation of these principles will protect the Board and its members and will enable public confidence to be maintained.

When Board members believe they have a conflict of interest on a subject which will prevent them from reaching an impartial decision or undertaking an activity consistent with the Board's functions, then they must declare a conflict of interest and withdraw themselves from the discussion and/or activity.

Confidentiality

Meetings, including agenda material and minutes, of the Board are confidential. Board members must ensure that the confidentiality of Board business is maintained.

Members are free to express their own views within the context of Board meetings, or the general business of the Board.

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Board members must publicly support a course of action decided by the Board, or if unable to do that, must not publicly comment on decisions.

At no time shall Board members individually divulge details of Board matters or decisions of the Board to persons who are not Board members. Disclosure of Board business to anyone outside the Board must be the decision of the Board, or between meetings, at the discretion of the Chairperson of the Board, or in the case of committees, the Chairperson of the Committee (if they have the delegated authority of the Board).

Board members must ensure that Board documents are kept secure to ensure the confidentiality of Board work is maintained. Release of Board correspondence or papers can only be made with the approval of the Board.

Chairperson and Deputy Chairperson

At its first meeting in each year the Board elects one of its members to be its Chairperson, and another to be its Deputy Chairperson. Any such member is eligible for re-election.

The Chairperson presides at each meeting of the Board if he or she is present and willing to preside. If at any meeting the Chairperson is not present or willing to preside, the Deputy Chairperson, if present and willing to preside, presides. If neither is present or willing to preside, the members present must elect a member who is present to preside at that meeting.

Meetings of the Board

The Board meets formally four times a year for one or two-day meetings. In addition, members are required to participate on sub-committees established to address specific issues. The time involved varies but may be between 6 and 12 days per year (this estimate includes work done outside of the formal meetings and hearings). The Chairperson takes a more active role in Board affairs and can spend up to 8 hours a week on Board business.

A quorum of the Board for any meeting is half the membership, including at least one lay member. Every issue before the Board is determined by a majority of the votes of the members present at the meeting. The presiding member has a deliberative vote, and in the case of an equality of votes, also has a casting vote.

When carrying out its functions the Board must follow the principles of natural justice and administrative law. The Board must act lawfully, that is, the Board can only act within the limits of its powers as set out in the Act. The Board must also act fairly when carrying out its functions. Decisions of the Board are reviewable by the Courts and it is also possible for persons to take civil action against the Board or its individual members.

Fees and Allowances

Members of the Board, and of any sub-committees appointed by the Board, are entitled to be paid fees for attendance at meetings. Currently, the Chairperson is entitled to be paid \$800 (less tax) per day and members are entitled to be paid \$600 (less tax) per day. Members may be paid fees for preparation time at the discretion of the Board. The Board pays for actual and reasonable travel and accommodation expenses.

More detailed information can be obtained from the Registrar of the Board.

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