

Information for Applicants to the Health and Disability Ethics Committees (HDECs)

www.ethicscommittees.health.govt.nz

What are the HDECs, and what do they do?

Health and disability ethics committees (HDECs) are Ministerial committees established under section 11 of the New Zealand Public Health and Disability Act 2000.

Essentially, the seven HDECs check that health and disability research meets established ethical standards. They do this by reviewing applications from researchers. These applications contain information on proposed research, and its possible ethical implications.

There are seven HDECs nationwide, each of which usually reviews research occurring within a defined area. The table below summarises these areas.

Committee name	Jurisdiction – research occurring within the following DHB regions:	Link to Terms of Reference
Northern X Northern Y	Northland, Waitemata, Auckland, Counties Manukau, Waikato, Lakes, Bay of Plenty, Tairāwhiti	ToRs – Northern X ToRs – Northern Y
Central	Taranaki, Whanganui, Hawke's Bay, Midcentral, Wairarapa, Hutt, Capital and Coast	ToRs - Central
Upper South A Upper South B	Nelson Marlborough, West Coast, Canterbury, South Canterbury	ToRs – Upper South A ToRs – Upper South B
Lower South	Southern	ToRs – Lower South
Multi-region Ethics Committee	<i>reviews research occurring in more than one of the four jurisdictions above</i>	ToRs – Multi-region

What types of health and disability research do HDECs review, and how do they review them?

The two main types of research reviewed by HDECs are:

- **Intervention Studies:** Studies in which researchers intentionally alter people's care or services, in order to study the safety and benefit of doing so. Examples include clinical trials of new drugs or treatment methods.
- **Observational Studies:** Studies in which researchers analyse information but do not alter the care or services that people receive. Examples include many epidemiological studies, case studies, and some audits and related activities.

HDECs review these types of research against ethical guidelines authored by the National Ethics Advisory Committee (NEAC).

The different types of research reviewed by HDECs pose quite different levels of risk. An application may be reviewed by one of two different paths.

1. Higher-risk research goes to “full” review. This means that it is put on the agenda of a meeting and considered by the full committee.
2. Lower-risk research goes to “expedited” review. This means it is reviewed by one or two members at the direction of the committee’s Chair, rather than by the full committee. “Expedited” review is quicker because it can occur between meeting cycles.

The table below summarises the types of research reviewed by HDECs, the paths by which they are reviewed, and the relevant NEAC *Ethical Guidelines* for researchers.

Research type	Examples	Review path	Relevant <i>Guidelines</i>
Intervention studies	Clinical trials Innovative practice	“Full” review	Ethical Guidelines for Intervention Studies
Observational studies	Cohort studies Cross-sectional studies Case control studies	“Full” review	Ethical Guidelines for Observational Studies
	Case reports Case series Descriptive studies	“Expedited” review	
	Audits and related activities	Normally do not require review; may require “expedited” review	

Who can be appointed to HDECs?

Each HDEC has up to twelve members. At least two members should have a recognised awareness of te reo Māori and/or understanding of tikanga Māori.

Half of the members of each HDEC are lay members, including the Chair. Lay members include:

- lawyers
- ethicists
- people with consumer perspectives
- people with community perspectives.

The other half of each HDEC is made up of “non-lay” members. Non-lay members include:

- health researchers
- health professionals
- pharmacists and/or pharmacologists
- biostatisticians.

How much time and work is involved in being a member of an HDEC?

Ten or eleven meetings are scheduled for each HDEC for 2011. The dates of these meetings are available on the HDECs' [website](#). You should be prepared to dedicate four to eight hours of preparation time to each meeting, and an entire day (plus travel time) to attend each meeting.

Meetings of HDECs are held in the following cities.

HDEC	City
Northern X	Auckland
Northern Y	Hamilton
Central	Wellington
Multi-region	Wellington
Upper South A	Christchurch
Upper South B	Christchurch
Lower South	Dunedin

Some items of committee work (such as “expedited” reviews) are handled between meetings. For most members, the between-meeting workload is less than one day per month.

When will appointments to HDECs be made?

Members of HDECs are appointed by the Minister of Health through the public appointments process. This process can be long, and it is not possible to predict when decisions will be finalised. At this stage the Ministry does not expect appointments to be made before the second quarter of 2011.

If your circumstances change and you no longer wish to be considered for appointment to an HDEC, please contact us at the addresses below as soon as possible.

Who should I contact for more information?

On the HDECs:

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