



## **Expression(s) of Interest (EOI) for membership positions on the Paediatric Palliative Care National Clinical Network New Zealand Child and Youth Clinical Network Program**

The New Zealand Child and Youth Clinical Networks (NZCYCN) are calling for applications from people who have an interest in Paediatric Palliative Care (PPC) for tamariki and/or rangatahi within Aotearoa, to join the Paediatric Palliative Care Clinical Network.

We are seeking additional members with a background in specialities that interact with PPC, as well as rural/regional paediatricians and those from an Allied Health background and/or experience in working alongside Māori and Pacifica communities.

Applicants should align with the Paediatric Society of New Zealand (PSNZ) strategy; Te Tiriti o Waitangi provides overarching guidance, supported by interconnected themes to improve equity, strengthen partnership and connectiveness, and build a culturally responsive workforce that has the skills and resources to support nationally consistent model of care, standards of practice, and quality of service.

The full PSNZ strategic plan can be found here: <https://www.paediatrics.org.nz/about/our-strategy>.

We have a focus on strengthening our equity lens therefore we will prioritise applicants who identify and have experience working within Māori and Pacific communities. If you are interested in being a member of a group that provides national quality improvement for tamariki and their whānau with Paediatric Palliative Care needs, we would love to hear from you.

The aim of all the PPC network is to improve outcomes for pēpi, tamariki, rangatahi in the context of their whānau. Further information about the program can be accessed via the NZCYCN's website:

<https://www.paediatrics.org.nz/our-work/nz-child--youth-clinical-networks/paediatric-palliative-care>

### **How do Networks work?**

Clinical Networks receive funding and administrative support to work collaboratively to improve the delivery of services to whānau in a range of settings. Work plans are developed by them then approved by the NZCYCN Governance Group with deliverables that have timeframes. This may include practice guidelines, whānau information, education for health professionals and a range of other activities that are based on best evidence.

The Network includes multi-disciplinary teams of people across a range of health settings; primary, secondary, and tertiary and across a geographical range in Aotearoa New Zealand. The whānau voice is also integral to the network.

### **How often does the PPC Network meet?**

The PPC Network meets approximately six to eight times per year. This usually includes five short meetings by Zoom or Teams and one face-to-face day meeting, usually either in Wellington or Auckland.

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The Terms of Reference (TOR) provide an overview of governance and the responsibilities of the functions expected from the PPC Network and are attached to this document. We recommend you discuss submitting your application with your workplace (if appropriate) so that you can receive time to attend the face-to-face meetings. All transport costs and expenses associated with travel are funded.

#### **Term of appointment**

The term of the appointment currently is to the end of **June 2026**, as this aligns with our contract with the Ministry of Health.

#### **How to apply**

If you have the experience we are looking for, we invite you to send an email or an attached letter with a brief summary of the skills, experience and qualifications you would bring to this role.

Please also attach your CV and include your contact phone number.

**Send your application to the NZCYCN Support Administrator, Kat Kirchmann, by email:**  
**[kat.kirchmann@paediatrics.org.nz](mailto:kat.kirchmann@paediatrics.org.nz) by Friday 13 February, 2026.**

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## **NZCYCN Paediatric Palliative Care Clinical Network**

### **Terms of Reference**

#### **Background:**

The New Zealand Paediatric Palliative Care (PPC) Clinical Network (CN) was commenced to lead and provide clinical oversight of the implementation of the *Guidance for Integrated Paediatric Palliative Care Services in New Zealand 2011*.

Due to the Palliative Care Advisory Group being disbanded, the PPC Clinical Network continued its work providing education, working on national PPC Clinical Guidelines, and ongoing work in promotion of PPC across Aotearoa.

#### **Vision:**

Pēpē, tamariki, rangatahi and whānau in Aotearoa have equitable access to palliative care that meets their needs.

#### **Te Tiriti o Waitangi:**

Te Tiriti o Waitangi provides overarching guidance, supported by interconnected themes to improve equity, strengthen partnership and connectiveness, and build a culturally responsive workforce that has the skills and resources to implement nationally consistent model of care, standards of practice, and quality of service (Paediatric Society strategy 2021-2025).

The PPC CN commits to these principles for Māori tamariki requiring palliative care to have their needs met, this includes support for their Whānau.

The PPC CN recognises that Māori tamariki are likely dying with palliative care needs in rural and regional Aotearoa that currently don't have access to PPC, therefore equity of access is a top priority for the PPC CN.

#### **Definition**

The CN functions as an Oversight Network, as defined by the National Health Board in 2010, where multiple provider organisations link by a clinical network.

"A clinical network is established at national, regional, or sub-regional level to provide consistent clinical governance. This includes, appointment of a network clinical leader, and movement toward consistent quality assurance activities, prioritisation rules, clinical pathways, referral guidelines and treatment protocols, with associated service audit. The network makes recommendations to the national or regional funder(s) and the host provider Te Whatu Ora as appropriate and provides an annual work programme and report."

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## **Role**

The role of the PPC CN is to provide clinical leadership and oversight of the provision of services for pēpi, tamariki and rangatahi with serious illness, and their whānau in Aotearoa New Zealand. This will be achieved by:

1. Delivery of PPC model of care to Te Whatu Ora, Te Aka Whai Ora and Whaikaha that has an emphasis on equity and accessibility for tamariki in all regions of Aotearoa especially tangata whenua tamariki and their whānau.
2. Ensuring integration, collaboration, and coordination for key stakeholders.
3. Meeting all current priorities, incorporating best evidence and up to date information, national and global.
4. Recommending education development goals building national capacity.
5. Recommending workforce development and implementation.
6. Linking current and future relevant work to the paediatric workforce.

## **Scope**

The scope of the CN encompasses all PPC services provided in primary, secondary, and tertiary health care settings for pēpi, tamariki and rangatahi living with serious illnesses, and their whānau.

The CN covers the following organisations:

- The specialist PPC service at Starship Hospital at Te Whatu Ora (Te Toka Tomai) and Rei Kōtuku Charitable Trust (Whanganui a tara).
- All Te Whatu Ora Regions providing PPC services with those specialists who have a special interest, nurse practitioners or CNS.
- MoH – Manatu Hauora
- Hospices throughout Aotearoa especially Rainbow Place and Nurse Maude that provide PPC Clinical Nurse Specialists and specialist allied health staff for support.
- NGO's including True Colours Waikato that provide PPC CNS and allied health staff that provide nursing and allied health support to tamariki with Palliative Care needs.
- NGO's that support tamariki with PPC needs such as Child Cancer Foundation, Leukaemia & Blood Cancer NZ, Canteen, Kenzie's Gift, Skylight, Grief Centre, Heart Kids NZ, Kidney Kids and Muscular Dystrophy Association.
- Identified consumer groups.

## **CN Membership**

The CN will be comprised of recognised experts and clinical leaders in PPC. In addition to clinicians, membership may include other appropriate key sector management and non-government palliative or paediatric organisation representation.

- Members will be selected based on clinical experience in PPC, professional discipline represented and geographic location. The intention is for the CN to be reflective of the multidisciplinary approach to PPC and broadly represent the geographic regions of NZ. It is essential for the CN to have Māori and/or Pacific, and we will endeavour to include consumer representation.

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- The CN to be chosen from professionals responding to an Expression of Interest request.
- The Chair of the CN will be appointed by the NZCYN governance group.

### **Communication, Meetings and Website Resources**

- The majority of contact within the group will be via e-mail.
- There is an expectation that members will review requests in a timely manner
- Meetings shall be held approximately 4 times per year by zoom and includes 1 face to face full day meeting. These meetings will be supported by the PSNZ management team
- A quorum for a formal meeting will require 50% of members + 1
- The CN team members will contribute to completing the PPC work plan as decided by the CN that year.
- The CN will provide resources and information on the NZCYCN website.
- (<https://www.starship.org.nz/for-health-professionals/new-zealand-child-and-youth-clinicalnetworks/>) and follow the agreed process for the submission of this material.
- The CN will provide support for the updating of parent information on the KidsHealth website (<https://www.kidshealth.org.nz/>) when required.

### **Accountability and Reporting**

- The CN is accountable to the PSNZ.
- Reporting will be by the Chair with support by the administration and programme manager.
- Minutes of meetings to be recorded and sent as part of the above reporting requirements.

### **Network Roles and Responsibilities**

The roles and responsibilities of the Clinical Lead and CN members are:

- a) Clinical Lead for the CN will be responsible for:
  - Providing clinical leadership, advice and information for PPC services
  - Developing an annual Work Plan, with the CN, for approval by the PSNZ
  - Reporting to the MoH through the PSNZ on progress with implementing the annual Work Plan
  - Providing oversight of the work programme, including monitoring of performance
  - Acting as spokesperson for the clinical network.
  - Managing meeting processes
  - Convening individual work streams to address specific issues, as required
- b) CN members will be responsible for:
  - Participating and contributing to meetings
  - Providing input to the annual Work Plan

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- Supporting the Clinical Lead
- Providing expert advice to work stream activity
- Reporting from, and to other organisations and own networks on the PPC CN activity
- Not disclosing any confidential information or making media statements on matters relating to the clinical network without the prior approval of the whole CN and Chair.

#### **Review**

These Terms of Reference will be reviewed by the CN biennially.

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