Advisory Committee on Assisted Reproductive Technology

Annual Report 2016/17

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# Foreword

On behalf of the Advisory Committee on Assisted Reproductive Technology (ACART), the outgoing Chair and incoming Chair are pleased to present this Annual Report for 2016/17.

ACART’s functions involve issuing guidelines and giving advice to the Ethics Committee on Assisted Reproductive Technology (ECART) on assisted reproductive procedures and human reproductive research, as well as providing advice to the Minister of Health (the Minister) on related aspects of assisted reproductive technologies (ART). This year, ACART has completed two substantial areas of advice for the Minister and commenced two substantial revisions of existing guidelines.

ACART advised the Minister on the requirements for informed consent in the context of ART. One of the principles of the Human Assisted Reproductive Technology Act 2004 (the HART Act) is that individuals should make informed choices and give informed consent. In ART, this process can be complex and involve multiple parties. The focus of this advice is to increase transparency in regard to the information provided to ensure informed decisions; the avoidance and management of disputes; and recognition of the interests of various stakeholders in ART procedures. This advice complements the rights of all parties to ART under the Code of Health and Disability Services Consumers’ Rights.

ACART advised the Minister on the use of cryopreserved ovarian tissue to restore ovarian function. Ovarian tissue cryopreservation was declared an established procedure in 2005, however, the subsequent *use* of the tissue was not. On the basis of expert advice obtained in late 2014, ACART developed advice to the Minister that the use of cryopreserved ovarian tissue to restore ovarian function become an established procedure under Section 6 of the HART Act. This will mean that clinics will be able to use cryopreserved ovarian tissue without the need for ethical review by ECART.

ACART progressed a major review of three guidelines involving the donation of gametes and embryos, as well as the surrogacy guidelines (to be merged into a single guideline). The review includes consideration of the ongoing need for the “biological link” policy (where a genetic or gestational link between at least one intending parent and the resulting child is required). A change to this policy would remove unjustifiable discrimination, and remove some existing barriers to use ART for the formation of families. We hope this review will generate interest in ART during ACART’s public consultation in 2017.

ACART also made significant progress on its review of the *Guidelines on the Use, Storage and Disposal of Sperm from a Deceased Man*. These guidelines were initially issued in 2000 and predate the current regulatory framework, including the HART Act. The review will consider important ethical questions about how people’s gametes and embryos should be treated after they die.

The current guidelines for human reproductive research, *Guidelines for Research on Gametes and Non-viable Embryos* (2005) also predate the HART Act. In March 2017, the Associate Minister of Health agreed that the Committee’s work programme should include a limited review of these outdated guidelines.

ACART undertook a considerable amount of work in the 2016/17 period for a committee of its size and the level of the policy advice it gives to the Minister. We are very grateful to ACART’s members who contribute significant amounts of expertise and time to enable this work to progress. Membership changes saw us farewell Karen Buckingham who had reached the end of her six-year term as the member with expertise in assisted reproductive procedures. We welcomed Sarah Wakeman as the new member in that role. We also farewelled Alison Douglass who had been a member of the Committee for six years and Chair since June 2014. As incoming Chair, I would like to acknowledge Alison’s contribution to the Committee. Alison brought extensive legal knowledge and enthusiasm to the Committee’s work and led major pieces of policy review during her time as Chair.

ACART also continued its close working relationship with ECART, the Ministry of Health and providers of fertility services. We wish to take the opportunity to acknowledge the policy and administrative support the Committee receives from the Secretariat at the Ministry of Health, and to thank the Ministry for its ongoing support of the Committee.



**Alison Douglass**

Chair, Advisory Committee on Assisted Reproductive Technology



**Gillian Ferguson**

Incoming Chair, Advisory Committee on Assisted Reproductive Technology

Contents

Foreword iii

Introduction 1

Purpose of this report 1

Background 1

ACART’s functions 1

ACART’s work during 2016/17 3

ACART meetings 3

Advice projects in 2016/17 3

Guidelines projects in 2016/17 4

ACART’s monitoring functions 5

Other issues considered by ACART during 2016/17 6

Conference attendance 6

Other external engagement 6

Publications 6

ECART decisions 2016/17 7

Governance 8

Chair and Deputy Chair 8

Contact with the Minister of Health 8

Appendix 1: ACART membership 9

ACART members in the period 9

Secretariat staff members 9

Biographies of ACART members 10

Appendix 2: Member attendance at full ACART meetings 16

Appendix 3: ACART working groups 17

# Introduction

## Purpose of this report

Section 42(3) of the HART Act requires ACART, as soon as practicable after each 12‑month period ending on 30 June, to provide the Minister of Health with a report on:

* its progress in carrying out its functions
* the number and kinds of decisions made by ECART in that period.

## Background

ACART was established under section 32 of the HART Act, and first met in September 2005. Appendix 1 gives biographical information on ACART’s membership during 2016/17.

## ACART’s functions

ACART’s functions, as set out in section 35 of the HART Act, are to:

* issue guidelines and give advice to ECART on the matters that ECART must take into account in considering whether to give, change or cancel an approval for an extension to the applicable period for the storage of a human *in vitro* gamete or a human *in vitro* embryo
* issue guidelines and give advice to ECART on any matter relating to any kind of assisted reproductive procedure or human reproductive research, and keep such guidelines and advice under review
* advise the Minister of Health on aspects of, or issues arising out of, kinds of assisted reproductive research and, without limitation, provide advice as to whether:
* the HART Act or another enactment should be amended to prohibit or provide for any kind of assisted reproductive procedure or human reproductive research
* any kind of procedure or treatment should be declared an established procedure (that is, a procedure that does not require ECART approval) on the basis of the information, assessment, advice and ethical analysis required under section 6 of the HART Act
* any established procedure should be modified or should cease to be an established procedure
* a moratorium should be imposed on any kind of assisted reproductive procedure or human reproductive research
* regulations should be made under section 76 of the HART Act to regulate the performance of any kind of assisted reproductive procedure or the conduct of any kind of human reproductive research
* liaise with ECART on general and specific matters relating to assisted reproductive procedures or human reproductive research
* consult with anyone who, in the opinion of ACART, is able to assist it to perform its functions
* perform any other function that the Minister of Health assigns to it by written notice.

For the purposes of performing the above functions, ACART must monitor:

* the application, and health outcomes, of assisted reproductive procedures and established procedures
* developments in human reproductive research.

ACART’s terms of reference are available on its website (www.acart.health.govt.nz).

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# ACART’s work during 2016/17

## ACART meetings

ACART met as a full committee, with the support of the Secretariat, six times during 2016/17. (Appendix 2 sets out member attendance at these meetings.) Working groups met as required between meetings to progress projects. (Appendix 3 sets out further information on working group membership and meetings.)

## Advice projects in 2016/17

### Advice to the Minister of Health on informed consent

On 2 September 2016, ACART sent advice to the Minister of Health on informed consent in human assisted reproductive technology.

ACART is required to provide the Minister of Health with advice on requirements for informed consent in relation to the use of gametes and embryos in human reproductive research (section 37(1)(f) of the HART Act), and in relation to human assisted reproductive technology (section 38(d)). While the HART Act does not provide detailed requirements for informed consent, it provides for regulations to be made. ACART has concluded that informed consent in human reproductive research is best addressed as part of any future work to review guidelines on human reproductive research.

ACART had consulted the public in the second half of 2015. In addition to receiving written submissions, ACART held a number of small meetings including with fertility services providers, the Otago Bioethics Centre and Health and Disability Commissioner.

### Advice to the Minister of Health on the use of cryopreserved ovarian tissue

ACART provided final advice to the Minister on 8 February 2017.

In 2015/16 ACART had developed proposed advice, and consulted the public on that proposed advice (as required by the HART Act) during May and June 2016.

The storage of cryopreserved ovarian tissue has been permitted in New Zealand since 2005. When ovarian tissue cryopreservation was declared an established procedure, it was considered that the safety of the use of the tissue was in doubt due to the novelty of the procedure and limited evidence available at the time. Consequently, women in New Zealand may cryopreserve and store ovarian tissue, but are unable to use it.

ACART has kept a watching brief on developments in the use of cryopreserved ovarian tissue, and after reviewing the findings of a report commissioned in 2014 agreed to develop advice to the Minister of Health that it should become an established procedure.

## Guidelines projects in 2016/17

### Review of the donation guidelines

By 30 June 2017, ACART had made substantial progress on a consultation document and anticipated consulting the public in the second half of 2017.

The review of eligibility criteria follows the review instigated by the 2011 complaint to the Human Rights Commission. The project had been on hold while other projects were progressed. However, following discussion with the Associate Minister of Health, a Working Group was reconvened in June 2015 to progress work on the project, and it is currently priority work for ACART.

In 2015/16 and 2016/17, ACART looked at the history of work on the guidelines, and the current trends in and attitudes towards fertility treatment that involves donations. It proposed provisions to include in the guidelines, looking particularly at whether it is necessary to require a biological link between at least one intending parent and a resulting child, and if and when a ‘medical need’ should be required. ACART also assessed the possibility of merging the existing guidelines into one guideline.

### Posthumous reproduction: review of the Guidelines for the Storage, Use and Disposal of Sperm from a Deceased Man

The current guidelineswere issued in 2000. They predate the HART Act (2004) and reflect the technologies of the time. For instance, techniques for successful cryopreservation of eggs were not yet established. ACART undertook preliminary scoping work in 2014, gathering information about the regulatory framework that addresses the collection, storage and use of gametes and embryos from deceased and comatose individuals. It concluded that the guidelines should be reviewed, and their scope broadened to include the use of gametes (sperm and eggs) and embryos from deceased and comatose people.

In 2015 the Associate Minister of Health agreed to this being part of ACART’s work programme and ACART has been working on the matter during 2016 and 2017. By 30 June 2017, ACART had almost completed a consultation document and anticipated consulting in the second half of 2017.

### Guidelines on, and advice to the Minister of Health about, human reproductive research

Section 37 of the HART Act requires ACART to provide the Minister of Health with information, advice and, if it thinks fit, recommendations on certain matters in relation to the use of gametes and embryos in human reproductive research.

The current *Guidelines for Research on Gametes and Non-Viable Embryos*, developed by the former National Ethics Committee on Assisted Human Reproduction, prior to the HART Act (2004), remain in force. However, this effectively limits any human reproductive research to be undertaken in New Zealand. ACART considers that the current guidelines are well overdue for revision.

## ACART’s monitoring functions

### Monitoring the application and health outcomes of assisted reproductive procedures and established procedures

Section 35(2) of the HART Act requires ACART to monitor the application and health outcomes of assisted reproductive procedures and established procedures.

### ANZARD Report

During 2012 ACART finalised a contract with the University of New South Wales to produce a quantitative, New Zealand-specific report on numbers, types and perinatal outcomes of assisted reproductive treatments, based on the annual ANZARD report (which in most aspects combines Australian and New Zealand data). The New Zealand report drew on 2009 data, and has been placed on ACART’s website. The New Zealand specific reports are for the calendar year.

Five further New Zealand-specific reports have now been received, for 2010, 2011, 2012, 2013 and 2014. ACART anticipates continuing to contract for annual New Zealand-specific reports, following the release of each ANZARD report.

The fifth ANZARD report, covering the 2013 calendar year, was seen at ACART’s December 2016 meeting. The sixth annual report, covering the 2014 calendar year, was received in June 2017 and will be seen by ACART in October 2017.

### Psychosocial outcomes

ACART also monitors, through published papers, health and psychosocial outcomes for parties involved in assisted reproduction and resulting children.

### Monitoring developments in human reproductive research

Section 35(2) of the HART Act also requires ACART to monitor developments in human reproductive research. During 2016/17, members and the secretariat shared relevant media and academic journal articles with each other, and the secretariat distributed *Bionews* articles and Human Fertilisation and Embryology Authority updates to members.

### Monitoring the decisions of ECART

ACART’s terms of reference require it to monitor ECART’s decisions to ensure the decisions fall within the guidelines set by ACART. In April 2012, ACART considered options for the future operation of the function. In August 2012, ACART wrote to ECART seeking views on ACART’s proposal. ECART agreed with the proposal and the details are set out below.

ACART will continue the current practice of including in its agendas the summaries of applications prepared by the ECART Secretariat, with the relevant ECART minutes. In addition, the ACART Secretariat will report annually to ACART about ECART applications and decisions.

ACART receives full copies of all applications to ECART. ECART is required to give ACART a copy of an approval and the relevant application, as soon as is practicable after giving an approval. The copies are available at ACART meetings for members to read if interested.

## Other issues considered by ACART during 2016/17

### Links with ECART

The HART Act requires that ACART and ECART liaise with one another. ACART is required to liaise with ECART on general and specific matters relating to assisted reproductive procedures and the conduct of any kind of human reproductive research.

ACART’s liaison with ECART during the period included:

* a member of each committee attended meetings of the other committee as a member-in-attendance
* ACART provided ECART non-binding advice about applications for some procedures.

## Conference attendance

ACART supported members to attend the following conferences:

* Alison Douglass and Gillian Ferguson attended the New Zealand Bioethics Conference, in Dunedin, in January 2017.
* Mike Legge attended the Fertility Society of Australia conference, in Perth, in September 2016.

## Other external engagement

ACART hosted a “Sector Day” in Wellington, on 10 February 2017. A broad range of interested parties from clinics, universities, government departments and interest groups attended. The event was opened by Associate Minister of Health Hon Peter Dunne.

## Publications

ACART published on its website ([www.acart.health.govt.nz](http://www.acart.health.govt.nz)):

* ACART’s *Annual Report 2014/15*
* Agendas of ACART meetings, after each meeting
* Minutes of ACART meetings, after their confirmation at each following meeting
* Submissions and minutes of meetings for the consultation on *The Use of Cryopreserved Ovarian Tissue to Restore Ovarian Function: Proposed Advice to the Minister of Health*.

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# ECART decisions 2016/17

Between 1 July 2016 and 30 June 2017, ECART considered 73 applications for assisted reproductive procedures and human reproductive research. There were:

* 30 applications for surrogacy involving fertility providers
* 7 applications for gamete donation between certain family members
* 17 applications for embryo donation for reproductive purposes
* 17 applications for the creation and use, for reproductive purposes, of an embryo created from donated eggs in conjunction with donated sperm
* 2 applications for research on gametes or non-viable embryos.

Of these applications:

* 44 were approved outright
* 7 were approved subject to conditions
* 20 were deferred
* 2 were declined.

In addition, ECART considered 63 applications to extend the storage period of gametes or embryos. ECART approved all 63 applications.

The details of these decisions will be set out in ECART’s *Annual Report 2016/17*.

# Governance

## Chair and Deputy Chair

### Current Chair

Alison Douglass was appointed Chair in January 2015. Alison had been Acting Chair from July 2014 until her appointment. Alison’s term on the committee and as the Chair ended on 22 June 2017.

Gillian Ferguson began her term as the Chair on 23 June 2017, for a period of three years. Gillian had originally been appointed to ACART in June 2016.

### Deputy Chair

Members selected Mike Legge as Deputy Chair in February 2015.

## Contact with the Minister of Health

Gillian Ferguson met the Associate Minister of Health, Hon Peter Dunne, on 23 June 2017.

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# Appendix 1: ACART membership

## ACART members in the period

Alison Douglass – Chair to 22 June 2017

Associate Professor Michael Legge – Deputy Chair

Dr Karen Buckingham – to 1 December 2016

Jonathan Darby

Gillian Ferguson – Chair from 23 June 2017

Colin Gavaghan – from 23 June 2017

Kathleen Logan

Sue McKenzie

John McMillan

Catherine Poutasi

Barry Smith

Dr Sarah Wakeman – from 2 December 2016

## Secretariat staff members

Betty-Ann Kelly, senior policy analyst – to July 2016

Martin Kennedy, senior policy analyst

Isabel Ross, policy analyst – from August 2016

Administrative support was provided by the Committee Support team in the Strategy and Policy Business Unit of the Ministry of Health, in particular Moana Tupaea.

## Biographies of ACART members

### Members during 2016/17

#### Alison Douglass (Deputy Chair to 30 June 2014; Acting Chair from 1 July 2014; Chair from January 2015 to 22 June 2017)

##### Membership role: Expertise in relevant areas of the law

Alison Douglass was appointed to ACART in May 2011 for three years. Members selected her as Deputy Chair in July 2013, and she became Chair from January 2015. She has been appointed until June 2017.

Alison is a barrister and has been a practising lawyer since 1985, and specialises in health and disability law. She is the 2014 recipient of the New Zealand Law Foundation international research fellowship and is currently undertaking a law reform project on updating New Zealand’s mental capacity law and practice. Prior to moving to the independent bar in 2008, Alison was a partner, then consultant, to a Wellington law firm, Tripe Matthews and Feist. She completed an LLB at the University of Canterbury (1984) and has a Master of Bioethics and Health Law from the University of Otago (1999).

Alison is the former convenor, now member, of the New Zealand Law Society Health Law Committee, which provides submissions on health law reform and until July 2014 Alison was co-chair of the ACC Research Ethics Committee. She was the legal member to the Interim then National Ethics Committee on Assisted Human Reproduction (1993–2002) prior to the enactment of the HART Act, and is a former chair of the Wellington Ethics Committee. She has worked part-time as a senior lecturer in health law and bioethics at the University of Otago, Wellington. In July 2014 Alison was appointed Adjunct Senior Lecturer to the Bioethics Centre, University of Otago.

Alison has published journal articles on assisted reproductive technology, and in 2006 prepared the Report on the Regulatory Framework Governing Assisted Reproductive Technologies in New Zealand for the Ministry of Health.

She lives in Dunedin and is married with three children.

#### Michael Legge (Deputy Chair from February 2015)

##### Membership roles: Expertise in human reproductive research, and expertise in ethics

Associate Professor Michael Legge was initially appointed to ACART in October 2011 for one year with the role of expertise in ethics. When he was reappointed in 2013 for two years he took on the additional role of expertise in human reproductive research. He has been appointed until October 2017.

Michael recently retired as Associate Professor of Biochemistry, Associate Dean of Medical Education and Director of Medical Laboratory Science at the University of Otago, and holds an Honorary Associate Professorship with the university. He was previously National President of the Infertility Society of New Zealand (1995–1998).

Michael was a member of the University of Otago Human Ethics Committee (2000–2011). He is a member of the European Commission Ethical Review Panel (2006–present) and the European Commission Life Science Expert Panel (2003–present).

Michael completed a PhD in Experimental Embryology at the University of Essex (1988) and a Bachelor of Science in Mammalian Physiology at London South Bank University, United Kingdom (1972). He also completed a Fellowship with the Royal College of Pathologists of Australasia (2010), and is a Fellow of both The New Zealand Institute of Medical Laboratory Science (1978) and The Institute of Biomedical Science United Kingdom (1973).

#### Dr Karen Buckingham (to 1 December 2016)

##### Membership role: Expertise in assisted reproductive procedures

Dr Karen Buckingham was appointed to ACART in November 2010 and is currently serving her second term on ACART.

Karen is a graduate of the Auckland School of Medicine and trained as an obstetrician and gynaecologist in both New Zealand and the United Kingdom. She worked as a senior lecturer at the University of Auckland from 2003 to 2008 and as a consultant obstetrician and gynaecologist for Auckland District Health Board from 2003 to 2012. For the past 16 years she has worked mainly in the field of reproductive endocrinology and infertility. She now works in private practice for Repromed and Auckland Gynaecology Group.

Karen has held a wide range of clinical, teaching and research roles in New Zealand and overseas. Her particular interests include recurrent pregnancy loss and polycystic ovarian syndrome.

She lives in Auckland with her husband and three children.

#### Jonathan Darby

##### Membership role: Disability perspective

Jonathan Darby was appointed to ACART in April 2013 for three years.

Growing up in Christchurch, Jonathan has lived experience of disability having being a paraplegic since birth. He is an enrolled barrister and solicitor of the High Court who has significant experience in the disability sector. He was a member of Canterbury District Health Board Community and Public Health & Disability Advisory Committee (2011–2013). He is the current presiding member of the Lottery Individuals with Disabilities distribution committee.

He holds a Bachelor of Laws (2007), a Bachelor of Arts (2007), a New Zealand Diploma in Business, and a Diploma in Management. He is employed by Auckland Disability Law as their community worker.

#### Gillian Ferguson (Chair from 23 June 2017)

##### Membership role: Consumer perspective

Gillian Ferguson was appointed to ACART in April 2016 for three years.

Gillian has been appointed to the role of a member who is able to articulate issues from a consumer perspective. She has used assisted reproduction in having her two children.

Gillian has a Masters degree in law from Cambridge University, and completed a law and arts degree at Otago University.

She has extensive public policy experience in senior roles in Australia, most recently as the Executive Director of the NSW Office for Women's Policy for four years. Other roles in Australia have included providing policy advice in the NSW Department of Premier and Cabinet and at the NSW Law Reform Commission. Her earlier work in New Zealand included being an Assistant Crown Counsel in the Bill of Rights team at the Crown Law Office.

Gillian was recently appointed to the Film and Literature Board of Review. She is actively involved in the disability sector, including as a member of the Management Committee of The Family Network.

#### Kathleen Logan

##### Membership role: Ability to articulate the interests of children

Kathleen Logan was appointed to ACART in April 2015 for three years.

Kathleen is a Senior Advisor for the Children’s Commissioner who was, up to June 2016, Dr Russell Wills. She advocates for the rights and wellbeing of children in New Zealand, and is interested in child development and improving childhood outcomes.

In the past, Kathleen had a 13-year research career in human and animal reproduction and genetics, graduating in 1998 from Newcastle University Medical School (UK) with a PhD in reproductive physiology. Subsequently, she was a policy analyst in science research and investment for the Royal Society of New Zealand and then a science strategy advisor for the New Zealand Government.

#### Sue McKenzie

##### Membership role: General layperson

Sue McKenzie was appointed to ACART in April 2013 for three years, and has since been reappointed until April 2019.

She has had two careers over the last 30 years – lecturing as a senior academic at tertiary level and a private business consultancy advising corporates and small business clients. Sue has had a long voluntary association with various business and community groups at a local and national level.

Since the Christchurch earthquakes she has relocated to the country and now works fulltime on her Board positions. Her Board positions and responsibilities include the Medical Radiation Technologists Board (as Convenor of the Education Committee and a member of the Professional Standards Committee), a Trustee of the Rata Foundation (Chair of the Housing Committee and a member of the Investment Committee), Chair of the Greater Canterbury Response Forum working with the Ministry of Social Development regarding transforming social services, and a member of the Canterbury/Aoraki Conservation Board (member of the Land and Water Committee and Chair of the Awards and Marketing Committee).

Sue is also a member of the Institute of Directors and a Justice of the Peace.

#### John McMillan

##### Membership role: Expertise in ethics

Professor John McMillan was appointed to ACART in April 2016 for three years.

John is Director of the Bioethics Centre at the University of Otago. Prior to this appointment he was an Associate Professor at the School of Medicine, Flinders University, Senior Lecturer at the Hull York Medical School (2004–09), the University of Cambridge (2002–04) and the University Oxford (1998–2002) where he taught ethics to philosophy and medical students.

He is the author of over a hundred book chapters and articles, including several that are particularly relevant to the work of ACART.

#### Catherine Poutasi

##### Membership role: General layperson

Catherine Poutasi was appointed to ACART in April 2016 for three years. Catherine is Samoan and has close contacts with the Pasifika community.

Catherine holds a Masters degree in Psychology from The University of Auckland, and completed Bachelors and Honours study at the University of Otago and Victoria University of Wellington.

She is Director and owns Integrity Professionals Ltd. Integrity Professionals is a consultancy business based in Auckland and Wellington, New Zealand and Wollongong, New South Wales, Australia. The firm’s services include evaluations, monitoring, organisational reviews, research projects, service reviews, strategic planning, and senior management advice, support and mentoring. Much of her work for central government and the community sector has had a health focus.

Before establishing her business Catherine worked in policy and planning roles in central government agencies.

#### Barry Smith QSM

##### Membership role: Expertise in Māori customary values and perspectives

Barry Smith (Te Rarawa, Ngāti Kahu) was appointed to ACART in April 2013 for three years, and has since been reappointed until April 2019.

Barry is a Population Health Analyst with Lakes District Health Board based in Rotorua. He was previously a contract analyst and assessor with the Ministry of Health.

Barry is a member of the Health Research Council College of Experts and chairs the Health Research Council Ethics Committee and the Lakes DHB Research and Ethics Committee. He is a member of the Auckland Regional Tissue Banks Governance Advisory Board and the Podiatrists’ Board of New Zealand.

Barry’s current research work on ethics in Maori contexts is supported by the Health Research Council and the Royal Society of New Zealand Marsden Fund. He holds a BSc in chemistry and mathematics, an MPhil and PhD in sociology, a Grad Dip Arts in music and a Dip Tchg. He was awarded the Queen’s Service Medal in 2008.

#### Dr Sarah Wakeman

##### Membership role: Expertise in assisted reproductive procedures

Dr Sarah Wakeman was appointed to ACART in 2016 for the three year period beginning on 2 December 2016.

Sarah is a graduate of Otago Medical School and trained as an obstetrician and gynaecologist in Hawke’s Bay and Christchurch. She then went on to subspecialise in reproductive endocrinology and infertility, spending time working in Christchurch and Melbourne, and gained her CREI (Certificate of Reproductive Endocrinology and Infertility) in 2008. She has been working in the area of infertility for 16 years. She is the medical director of Fertility Associates, Christchurch, which provides both public and private fertility related services. She has special interests in recurrent miscarriage, genetic testing and fertility preservation. She has ongoing involvement in clinical research and teaching of medical students and graduates.

Sarah is married and has three school-age children.

# Appendix 2: Member attendance at full ACART meetings

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Member** | **August 2016** | **October 2016** | **December2016** | **February 2017** | **April 2017** | **June 2017** |
| Alison Douglass (Chair) (Term ended on 22 June 2017) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Michael Legge (Deputy Chair) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Karen Buckingham (Term ended on 1 December 2016, which was before the date of the December meeting) | ✓ | ✓ | NA | NA | NA | NA |
| Jonathan Darby | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Gillian Ferguson (Chair from 23 June 2017) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Kathleen Logan | ✓ | ✓ | ✓ | ✓ | ✓ | Apol |
| Sue McKenzie | ✓ | ✓ | ✓ | Apol | ✓ | ✓ |
| John McMillan | ✓ | ✓ | Apol | ✓ | ✓ | ✓ |
| Catherine Poutasi | ✓ | ✓ | Apol | ✓ | ✓ | ✓ |
| Barry Smith | ✓ | ✓ | ✓ | Apol | ✓ | ✓ |
| Sarah Wakeman (Term began on 2 December 2016) | NA | NA | ✓ | ✓ | Apol | ✓ |
| **Total members present** | **10** | **10** | **8** | **8** | **9** | **9** |

✓ Present

Apol Apologies

Note: Colin Gavaghan’s membership began on 23 June 2017, which was after the date of the June meeting.

# 

# Appendix 3: ACART working groups

| **Working group\*** | **Responsibilities and meeting dates** |
| --- | --- |
| ***Review of the Donation Guidelines***  Alison Douglass  Gillian Ferguson  Mike Legge  Kathleen Logan  Barry Smith | Review the three donation guidelines (family gamete donation, embryo donation, use of donated eggs with donated sperm) and surrogacy guidelines.  The Working Group met on:   * 5 July 2016 * 28 March 2017 * 25 May 2017 (teleconference). |
| ***Human reproductive research***  Alison Douglass  Gillian Ferguson  Mike Legge  Kathleen Logan  Sue McKenzie  Catherine Poutasi  Barry Smith | Agreed a review of the guidelines on human reproductive research with Associate Minister Dunne.  A working group met on 9 May 2017 (by teleconference) to scope the proposed project. |
| ***Guidelines for posthumous reproduction***  Alison Douglass  Gillian Ferguson  Mike Legge  Sue McKenzie  John McMillan  Sarah Wakeman | Review the guidelines for the storage, use and disposal of sperm from a deceased man, to include all posthumous gametes and ensure there is an accessible law and procedure.  The Working Group met on:   * 7 November 2016 * 13 March 2017 * 15 May 2017. |
| ***Informed consent***  Jonathan Darby  Alison Douglass  Mike Legge  Sue McKenzie | *Advice sent to the Minister on 2 September 2016.*  Advice to the Minister of Health on informed consent requirements for assisted human reproduction, as required by section 38(d) of the HART Act.  The Working Group did not meet during the period 1 July 2016 to 30 June 2017. Work on the advice was done out of session. |
| ***Use of cryopreserved ovarian tissue***  Karen Buckingham  Alison Douglass  Mike Legge  Sue McKenzie  Catherine Poutasi | *Advice sent to the Minister on 8 February 2017.*  Advice to the Minister of Health that the use of cryopreserved ovarian tissue should be declared an established procedure under section 5 of the HART Act.  The Working Group did not meet during the period 1 July 2016 to 30 June 2017. Work on the advice was done out of session. |

\* This list presents all committee members who were on a working group at some time during the 2016/17 period. Not all members were necessarily present at all meetings or on a working group at the same time as all the other listed members.