Advisory Committee on Assisted Reproductive Technology

Annual Report 2015/16

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# Foreword

On behalf of the Advisory Committee on Assisted Reproductive Technology (ACART), I am pleased to present this Annual Report for 2015/16.

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 on related aspects of assisted reproductive technologies (ART). This year, ACART has worked on two substantial areas of advice for the Minister and commenced two substantial revisions of existing guidelines.

ACART continued to progress its advice on the requirements for informed consent in the context of ART. One of the principles of 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, especially involving donations of gametes (eggs or sperm) and embryos. 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. ACART carried out a second consultation with the public in 2015 and finalised this advice to the Minister in 2016.

ACART has also prepared advice 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 international expert advice obtained in late 2014, ACART has been developing 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 would mean that such use of cryopreserved ovarian tissue can be undertaken by fertility clinics without the need for ethical review by ECART. ACART consulted on the matter and will provide this advice to the Minister in early 2017.

ACART has commenced 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 and renamed *Donation Guidelines*). This review and consultation will include consideration of removing the ‘biological link’ policy (where there is a biological or genetic link between at least one intending parent and the resulting child), as is currently required. This is perhaps the most significant shift in policy position since ACART commenced its work under the HART Act. We hope this review will generate interest in ART during ACART’s public consultation in 2017.

ACART also began its review of the *Guidelines on the Use, Storage and Disposal of Sperm from a Deceased Man* (to be renamed *Posthumous Reproduction Guidelines*). These guidelines were initially issued in 2000 and they predate the HART Act. They raise 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 and are in need of review. The Committee briefed the Minister in May and in June 2016 and sought agreement from the Minister that its work programme will include a review of these guidelines.

ACART is reliant on the wide range of expertise of its members. The Committee is pleased that Associate Minister Dunne agreed to extend ACART’s membership from eight to ten members, adding additional bioethics and cultural (Pasifika) expertise to complement the current make-up of the committee in June 2016. We also farewelled Nikki Horne, a hardworking and enthusiastic consumer representative member of the Committee and appointed a new consumer representative member.

ACART undertook a considerable amount of work in the 2015–2016 period for a committee of its size and the level of the policy advice it gives to the Minister. Despite the increase in the Committee’s membership and the substantial workload, the secretariat support was reduced during the year, placing unrealistic pressure on the secretariat in its support role of ACART’s work programme. I wish to take the opportunity to acknowledge the administrative support the Committee receives from the hard-working and dedicated secretariat at the Ministry of Health. Finally, I would like to record the Committee’s appreciation of the policy work by Betty-Ann Kelly, who retired in July 2016. Betty-Ann was part of the secretariat for eight years and made a significant contribution to the work of the Committee.





**Alison Douglass**

Chair, Advisory Committee on Assisted Reproductive Technology

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# 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 2015/16.

## 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).

# 

# ACART’s work during 2015/16

## ACART meetings

ACART met as a full committee, with the support of the Secretariat, six times during 2015/16. (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.)

## Key projects in 2015/16

### Advice projects

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

In 2015/16, ACART continued to develop 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.

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

ACART will be providing final advice in the second half of 2016.

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

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.

In 2015/16, ACART developed proposed advice and consulted the public on the proposed advice (as required by the HART Act) during May and June 2016. It anticipates providing final advice to the Minister by early 2017.

### Guidelines projects

#### Review of the donation guidelines

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, ACART investigated 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.

ACART intends to undertake initial consultation with selected stakeholders by the end of 2016 before public consultation.

*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. ACART anticipates undertaking public consultation in 2017.

#### Advice to the Minister of Health on 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.

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

### 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 2015/16, 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 agrees with the proposal and the details are set out below.

ACART will continue the current practice of including in 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.

The third annual report about ECART’s decisions was provided at ACART’s April 2016 meeting, to cover the period from 1 July 2014 to 30 June 2015.

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 2015/16

## Links with ECART

The HART Act requires that ACART and ECART each liaise with the other committee. 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 attending meetings of the other committee as a member-in-attendance
* facilitating a joint training day for new ACART and ECART members.

## Conference attendance

ACART supported members to attend the following conferences.

* Kathleen Logan attended the Redefining Families conference in Auckland in January 2016.
* Nikki Horne attended the Fertility Society of Australia conference in Canberra in September 2015.

## Other external engagement

Nil

## Publications

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

* ACART’s *Annual Report 2013/14*
* Agendas of ACART meetings, after each meeting
* Minutes of ACART meetings, after their confirmation at each following meeting
* *Assisted Reproductive Technology in New Zealand 2012*
* Consultation document *Informed Consent and Assisted Reproductive Technology: Proposed advice to the Minister of Health*
* Consultation document *The Use of Cryopreserved Ovarian Tissue to Restore Ovarian Function: Proposed Advice to the Minister of Health*

# ECART decisions 2015/16

Between 1 July 2015 and 30 June 2016 ECART considered 48 applications for assisted reproductive procedures. There were:

* 20 applications for surrogacy involving fertility providers
* 7 applications for gamete donation between certain family members
* 9 applications for embryo donation for reproductive purposes
* 11 applications for the creation and use, for reproductive purposes, of an embryo created from donated eggs in conjunction with donated sperm
* 1 application for preimplantation genetic diagnosis with human leucocyte antigen tissue typing.

ECART did not consider any applications for human reproductive research between 1 July 2015 and 30 June 2016.

Of these applications, 37 were approved outright, 3 were approved subject to conditions and 8 were deferred.

In addition, ECART considered 41 applications to extend the storage period of gametes or embryos. ECART approved 40 applications and declined 1 application.

The details of these decisions are set out in ECART’s *Annual Report 2015/16.*

# Governance

## Chair and Deputy Chair

### Current Chair

Alison Douglass was appointed Chair in January 2015. Alison was Acting Chair from July 2014 until her appointment.

### Deputy Chair

Members selected Mike Legge as Deputy Chair in February 2015.

## Contact with the Minister of Health

* The Chair and Deputy Chair, and Chair of ECART, met the Associate Minister of Health, Hon. Peter Dunne, on 26 May 2016.
* Associate Minister Dunne attended ACART’s 16 October 2015 meeting.

# 

# Appendix 1: ACART membership

## ACART members in the period

Alison Douglass — Chair

Associate Professor Michael Legge — Deputy Chair

Dr Karen Buckingham

Jonathan Darby

Gillian Ferguson (from June 2016)

Nikki Horne (term ended April 2016)

Kathleen Logan

Sue McKenzie

John McMillan (from June 2016)

Catherine Poutasi (from June 2016)

Barry Smith

### Secretariat staff members

Betty-Ann Kelly, senior policy analyst (from January – July 2016)

Martin Kennedy, senior policy analyst (from May 2015)

Stella Li, policy analyst (to May 2016)

Hayley Robertson, policy analyst (to March 2016)

Additional administrative support was provided by the Business Services and 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 2015/16

#### **Alison Douglass** (Deputy Chair to 30 June 2014, Acting Chair from 1 July 2014, Chair from January 2015)

##### 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. She 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. Before 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**

##### 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**

##### 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 University of Cambridge, and completed a law and arts degree at University of Otago.

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.

#### **Nikki Horne**

##### Membership role: Consumer perspective

Nikki Horne was appointed to ACART in November 2010 for two years, and has since been reappointed until December 2015.

Nikki is a member of Fertility New Zealand, the national group for consumers of fertility services. She has served as a committee member of the Auckland Group for over six years, and has previously been a Member of the Board. Her specific roles have included facilitating consumer contact support groups, organising information evenings, and clinic liaison. Nikki was appointed as an independent trustee of The Fertility Funding Charitable Trust in 2014.

Nikki currently works as the Social Media and Event Manager at Career Engagement Group in Auckland. Nikki is married with two daughters, both born after years of IVF treatment and recurrent miscarriage. After completing her family, Nikki was an egg donor for another couple.

#### **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 The University of Newcastle School of Medicine and Public Health (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 (2004–2009), Cambridge (2002–2004) and 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 Master’s degree in Psychology from The University of Auckland, and completed Bachelors and Honours study at Otago and Victoria universities.

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.

Catherine is a member of the Australia – New Zealand Evaluation Association, the Australasian Evaluation Society, the International Coach Federation, and the European Mentoring and Coaching Council. Catherine is also Chair of the Pasifika Foundation (2014–present).

#### **Barry Smith QSM**

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

Barry Smith (Te Rarawa, Ngâti 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 Māori 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 Queens Service Medal in 2008.

# Appendix 2: Member attendance at full ACART meetings

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Member** | **August 2015** | **October 2015** | **Dec**  **2015** | **February 2016** | **April 2016** | **June 2016** |
| Alison Douglass (Chair) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Michael Legge (Deputy Chair) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Karen Buckingham | A | ✓ | A | ✓ | ✓ | A |
| Jonathan Darby | ✓ | ✓ | ✓ | ✓ | A | ✓ |
| Nikki Horne  (Term ended April 2016) | ✓ | ✓ | A | ✓ | ✓ | – |
| Kathleen Logan | ✓ | A | ✓ | ✓ | ✓ | ✓ |
| Sue McKenzie | ✓ | A | ✓ | A | ✓ | ✓ |
| Barry Smith | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Gillian Ferguson  (Appointed June 2016) | – | – | – | – | – | ✓ |
| John McMillan  (Appointed June 2016) | – | – | – | – | – | A |
| Catherine Poutasi  (Appointed June 2016) | – | – | – | – | – | ✓ |
| **Total members present** | **7** | **6** | **6** | **7** | **7** | **8** |

✓ Present

A Apologies

The committee increased in size in June 2016, going from 8 to 10 members.

# 

# Appendix 3: ACART working groups

| **Working group** | **Responsibilities and meeting dates** |
| --- | --- |
| *Guidelines Review Working Group*  Alison Douglass  Mike Legge  Kathleen Logan  Nikki Horne (to April 2016)  Karen Buckingham  Barry Smith | Reviewed three donation guidelines (family gamete donation, embryo donation, use of donated eggs plus donated sperm) and surrogacy guidelines, to include reviewing eligibility criteria and ACART’s ‘biological link’ policy and considering condensing them into one guideline.  The Working Group met on 25 September 2015 and 27 May 2016. |
| *Informed Consent Working Group*  Jonathan Darby  Alison Douglass  Nikki Horne (to date)  Mike Legge  Sue McKenzie | Continued work on proposed 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 met on 20 November 2015. |
| *Human reproductive research working group*  Alison Douglass  Mike Legge  Sue McKenzie  Barry Smith | Prepared a briefing for Associate Minister Dunne on human reproductive research.  There was no Working Group meeting over this time. |
| *Use of cryopreserved ovarian tissue*  Karen Buckingham  Alison Douglass  Mike Legge  Sue McKenzie  Catherine Poutasi | Developed advice to the Minister of Health that the use of cryopreserved ovarian tissue be declared an established procedure under section 5 of the HART Act.  The Working Group met on 25 September and 20 November 2015. |
| *Guidelines for posthumous reproduction*  (Membership TBC)  Gillian Ferguson  Alison Douglass  Mike Legge | Reviewed 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 Minister agreed to this being included in the work programme and a working group will be established. |