Kupuna Advisory Council Charter draft

State Health Planning Development Agency

1. **Purpose**

   The purpose of the Kūpuna Advisory Council (KAC) is to provide the State Health Planning and Development Agency (SHPDA) with community-based advice, perspectives, and recommendations on health care issues affecting kūpuna in Hawaiʻi.

   The Council serves as a forum for members to identify emerging needs, discuss barriers to care, share community perspectives, and provide input on programs, policies, initiatives, and planning efforts that may affect older adults.

   The Council also serves as a strategic advisory body to SHPDA, providing substantive and timely policy advice intended to inform the design, implementation, monitoring, evaluation, and sustainability of initiatives affecting kūpuna.

   The Council is advisory in nature and does not have independent decision-making or regulatory authority.

   Although Council recommendations are nonbinding, SHPDA should systematically seek Council input at meaningful decision points, document the advice received, and provide appropriate follow-up on how recommendations were considered.

2. **Scope**

   The Kūpuna Advisory Council may provide input and recommendations on topics including:

   The Council may also initiate recommendations and review proposed actions within its scope, with particular attention to strategic policy, financing, health system transformation, major grants, and implementation decisions that may affect kūpuna.

- Access to health care and health-related services for kūpuna.
- Primary care, specialty care, behavioral health, oral health, and other health services.
- Long-term care and long-term services and supports.
- Aging in place and community-based services.
- Health care workforce needs affecting services for older adults.

- Transportation, care coordination, and other barriers to accessing care.
- Rural and neighbor island health care needs.
- Health equity and disparities affecting kūpuna.
- State and federal health care initiatives that may affect older adults.
- Health care affordability and financing.
- SHPDA planning activities, programs, studies, and policy initiatives relevant to kūpuna.
- Major grant proposals, awards, and governance activities related to aging, caregiver support, rural health, workforce, care coordination, and community-based services.
- Emerging health care needs or concerns identified by Council members or the community.

The Council may also receive presentations from state agencies, health care providers, community organizations, researchers, contractors, and other subject matter experts to support informed discussion.

3. Membership

The Council should include individuals representing a broad range of experience, geographic areas, and perspectives related to kūpuna health and well-being.

Members are selected to contribute subject-matter expertise, community insight, and lived experience. SHPDA should seek members who can participate meaningfully in designated policy, grant, planning, and implementation workgroups when appropriate.

Membership may include representatives from:

- Community organizations.
- Health care providers and health professionals.
- Behavioral health organizations.
- Hospitals and health systems.
- Long-term care and aging services.
- County agencies.
- State agencies.
- Consumer or caregiver organizations.

- Academic or research institutions.
- Former health care executives or administrators.
- Community leaders.
- Other individuals with relevant professional or lived experience.

SHPDA may invite additional subject matter experts, agency representatives, or community partners to participate in meetings as appropriate.

Members are expected to represent their own knowledge and perspectives unless specifically authorized to speak on behalf of another organization.

4. Responsibilities

a. Advisory Council Members are expected to:

- Attend and actively participate in Council meetings.
- Review meeting materials in advance when provided.
- Share relevant community, professional, and organizational perspectives.
- Identify health care needs, gaps, and emerging concerns affecting kūpuna.
- Provide constructive feedback on programs, policies, studies, and initiatives presented to the Council.
- Participate in discussions and assist the Council in developing recommendations.
- Identify strategic priorities and develop proactive policy recommendations for SHPDA consideration.
- Review significant initiatives and grants at meaningful decision points, including planning, implementation, evaluation, and sustainability.
- When designated to serve on a steering committee, advisory committee, technical workgroup, or other governance body, actively participate, represent the Council's perspectives as appropriate, and report relevant information and outcomes back to the full Council.
- Support development of written recommendations and follow-up on their disposition, including documenting differing or minority views when appropriate.
- Respect differing viewpoints and support productive discussion.
- Disclose potential conflicts of interest when appropriate.
- Share relevant information with their communities or organizations when appropriate.
- Participate in working groups or special discussions when requested and available.

b. Public Statements, Opinion Pieces, and Representation
    - Council members may identify themselves as members of the KAC when publishing opinion pieces, articles, letters to the editor, or making other public statements.
    - When identifying their Council affiliation, members shall clearly disclose that their statements reflect their personal views and do not necessarily represent the official positions of KAC or SHPDA.
    - Members shall not imply that their personal views, statements, or publications are endorsed or approved by KAC or SHPDA unless expressly authorized.
    - Members are encouraged to provide SHPDA with a copy of any public opinion piece or written statement referencing their Council affiliation prior to publication for informational purposes. Providing a copy does not constitute a request for approval or authorization to publish.

c. SHPDA shall

- Attend and actively participate in Council meetings.
- Review meeting materials in advance when provided.
- Share relevant community, professional, and organizational perspectives.
- Identify health care needs, gaps, and emerging concerns affecting kūpuna.
- Provide constructive feedback on programs, policies, studies, and initiatives presented to the Council.
- Participate in discussions and assist the Council in developing recommendations.
- Respect differing viewpoints and support productive discussion.
- Disclose potential conflicts of interest when appropriate.
- Share relevant information with their communities or organizations when appropriate.
- Participate in working groups or special discussions when requested and available.
- Seek opportunities, where appropriate, for KAC members to participate in steering committees, advisory groups, and workgroups associated with major initiatives and grants affecting kupuna. SHPDA recognizes the expertise and perspectives KAC members bring to these efforts.
- Engage the Council early enough for its advice to inform significant policy, grant, planning, and implementation decisions whenever feasible.
- Provide briefings, nonconfidential planning materials, performance information, and progress updates reasonably needed for informed Council advice.
- Maintain a record of formal Council recommendations, action items, responsible parties, and follow-up status, and provide a documented response or status update when appropriate.

5. **Leadership**

Chairperson

- The Chairperson, with Council input and SHPDA support, will help establish a forward-looking annual work plan, coordinate development of Council recommendations, and ensure that representatives serving on external committees or workgroups report back to the Council.
- Attend and actively participate in Council meetings.
- Review meeting materials in advance when provided.
- Share relevant community, professional, and organizational perspectives.
- Identify health care needs, gaps, and emerging concerns affecting kūpuna.
- Provide constructive feedback on programs, policies, studies, and initiatives presented to the Council.
- Participate in discussions and assist the Council in developing recommendations.
- Respect differing viewpoints and support productive discussion.
- Disclose potential conflicts of interest when appropriate.
- Share relevant information with their communities or organizations when appropriate.
- Participate in working groups or special discussions when requested and available.

SHPDA Staff

- SHPDA staff will provide administrative and logistical support to Council leadership.
- SHPDA staff will also maintain meeting records and an action/recommendation log to support accountability and follow-up.

6. **Meeting Structure**

The Council will generally meet on a regular schedule established by SHPDA and Council leadership.

Meeting agendas should provide regular opportunities to review strategic priorities, major initiatives and grants, outstanding recommendations, action items, and

reports from Council representatives serving on related committees or workgroups. Council review should occur before key decisions whenever feasible.

7. **Decision Making Process**

The Council should seek to develop recommendations through discussion and general consensus whenever possible.

Consensus means that members have had an opportunity to provide input and that there is broad support for a recommendation, even if every member does not fully agree with every aspect of the recommendation.

When consensus cannot be reached, the Council may:

- Identify areas of agreement and disagreement.
- Document differing perspectives.
- Continue discussion at a future meeting.
- Request additional information or subject matter expertise.
- Use a vote when a formal determination is necessary.

Any formal vote should be documented in the meeting minutes, including the outcome.

Council recommendations are advisory and are not binding on SHPDA, the Department of Health, or other state agencies.

8. **Expected Outcomes**

Description	Status	Comments
Annual strategic priorities and a documented Council work plan.		
Formal written policy and program recommendations with disposition and responses tracked.		
Documented Council participation in relevant steering committees, advisory committees, and workgroups.		
Regular status updates on priority initiatives, major grants, action items, milestones, and outcomes.		

An annual summary of Council contributions, recommendations, follow-up, and opportunities for improvement.		