

Terms of Reference

Clinical Governance Committee

1 Purpose

The Clinical Governance Committee will set the organisation's strategic direction, monitor its performance against that direction and assure itself that a culture of safety and quality improvement operates at NCH.

Ensuring initiatives are linked to the key performance indicators and are consistent with the strategic direction of North Canberra Hospital and the Canberra Health Service: which is articulated as four priority areas:

- Personal health services – improving the experience of our consumers
- A great place to work – creating an environment to attract, recruit, develop and retain the highest calibre talent
- A leading specialist provider – we will be leaders in key areas of research, education, and clinical excellence
- A partner to improve people's health – work in partnership to tackle barriers to health care

This committee provides a forum for communication, collaboration, effective problem solving and informed decision making in the delivery of quality and safe care.

2 Membership

The Committee will comprise:

- General Manager
- Executive Director of Medical Services (Chair)
- Executive Director of Nursing and Midwifery
- Executive Director of Allied Health and Palliative Care
- Executive Director of Surgical Division
- Executive Director of Critical Care Division (Future Position)
- Executive Director of Director Medical and Mental Health Division
- Executive Director Women and Children Division
- Clinical Governance and Quality Unit Manager
- Clinical Incident and Consumer Feedback Coordinator
- Clinical Performance and Risk Coordinator
- Standards and Quality Improvement Coordinator
- Senior Manager, Strategic Projects
- Consumer representative

- Other representatives (visitors, additional consumers, subject matter experts) may be co-opted by the Chair as required.

3 Principles and Conduct

We all want to work in an environment where we are supported and respected, members' behaviour is to be based on the principles outlined in the Canberra Health Service workforce culture and leadership standards; in particular, the Diversity, Inclusion and Respect, Equity and Diversity policies, and the ACT Public Sector Code of Conduct.

Secretariat:

The Committee will be supported by Quality and Safety Administrative Coordinator as secretariat

The responsibilities of the secretariat include preparing and sending notices of meetings, calendar invites, agenda, recording the minutes of meetings and performing administrative duties deemed necessary by the Group.

4 Functions

- Lead, establish and review the strategic direction and policy framework
- Provide oversight of strategic risks
- Oversee and review relevant aspects of management performance, ensuring organisational accountability
- Establish and lead the organisation's safety and quality culture
- Assure itself on matters associated with data, monitoring and reporting
- Champion a culture of accountability and consumer engagement

5 Structure

- Subordinate Executive Committee
- Superordinate to all related Committees as shown



6 Meetings

- The Committee meets monthly but with a minimum of six meeting to occur in any year
- All new and general business items will be submitted to meeting secretariat one week prior to meetings
- The Agenda will be available at least 5 days before the meeting
- Standing agenda items will be discussed, as well as new/other business at each meeting
- The minutes will be available to the Chair within one week of the Committee Meeting

7 Frequency

Monthly meetings with option of Online or in person attendance.

8 Quorum

At least six members present, including:

- Chair (or Proxy)
- 4 Executive Directors
- 1 CGQU Representative

9 Agenda and Meeting Papers

Notice of any meeting shall be given in writing not fewer than 14 (fourteen) working days before the day of the meeting unless it is necessary to call a special meeting, in which case the notice period may, of necessity, be shorter.

The Chair will determine the formal agenda - agenda items must be forwarded to the secretariat 7 (seven) working days prior to the next scheduled Committee Meetings.

The agenda and any supporting papers for a meeting are to be prepared by secretariat and distributed no fewer than 5 (five) working days before the day of the meeting.

Members or their proxies are obliged to have reviewed all supporting material before the meeting. The minutes of meetings are to be prepared by the secretariat, validated by the Chair, and distributed to the Members for review and endorsement at least seven (7) business day before the meeting.

Action Items

Members are responsible for their own action items.

The secretariat will assist members in relation to all matters including queries in relation to the follow up of action items.

From time-to-time, matters may be referred to the Committee for an immediate response. In such case, the Chair is to determine the relative urgency of the request and may either:

- Call a special meeting; or
- Consult with members using email or other means, providing a reply representing the decision of the Group; or
- Draft a response on behalf of the Committee, with response tabled at the next meeting.

10 Confidentiality & Conflict of Interest

The Committee members are expected to adhere to the ACT Health guidance to maintaining confidentiality and conflict of interest.

Members must declare any potential, actual or perceived conflicts of interest at the commencement of each meeting and seek the Chair's direction for appropriate management both to the immediate situation and any ongoing management of conflicts.

For decisions relating to a conflict of interest the Committee member will excuse themselves.

11 Record Keeping

The Committee meeting documentation and files are the property of ACT Health and must be preserved in accordance with the Canberra Health Service records management policies and procedures and the Freedom of Information Act 2016.

12 Committee evaluation

The Committee Meetings will be evaluated against its terms of reference and will be the subject of an annual report to the NCH Executive Committee, submitted in the first quarter of the following financial year. The terms of reference will be reviewed annually alongside preparation of the annual report unless the need for a more frequent review should arise.

Should the meeting members and / or its Chair identify the need, the Group may determine a process for additional external evaluation.

13 Changes to the Terms of Reference

The terms of Reference will be reviewed every 2 years. Minor changes to membership may occur prior to this if agreed to by members

Endorsed: 11 October 2023