

2 Our governance

By capitalising on local control and clinical leadership, Metro South Health's Board continues to develop the health service's culture of innovation and accountability in order to deliver better health outcomes for the community.

An accountable structure

Hospital and Health Board

The Metro South Hospital and Health Board is responsible for setting the overall strategic direction, establishing goals and objectives for the health service, and monitoring the organisation in line with government health policies and directives. The Metro South Hospital and Health Board reports to the Queensland Minister for Health.

Metro South Health Executive

The Health Service Chief Executive is responsible for overall management, performance and activity outcomes for Metro South Health. The Chief Executive reports directly to the Board.

Reporting to the Chief Executive is a group of Executive Directors, each responsible for a service, portfolio or professional stream within the organisation.

Clinical streams

Through its facilities, Metro South Health delivers a full suite of specialties to the community. These services are categorised into eight core health specialty areas, which are referred to as 'clinical streams'.

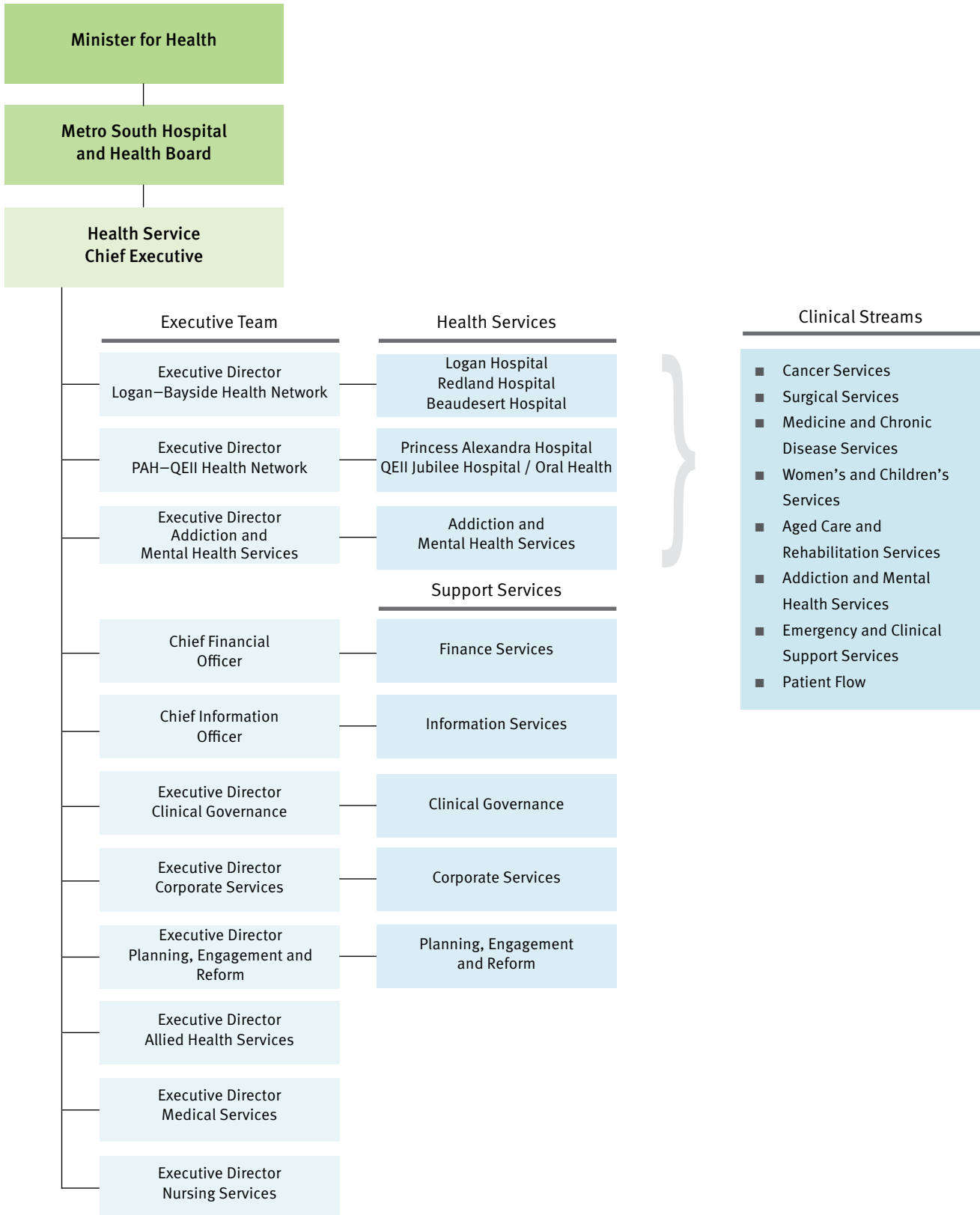
Each of the eight clinical streams is led by a single Clinical Stream Leader, supported by one or more Sub Stream Leaders.

The benefit of the clinical stream governance is improved integration of services across Metro South Health, and targeted innovation and clinical redesign.

Clinical Stream Leaders report directly to the Health Service Chief Executive and are expected to:

- undertake service planning and stakeholder engagement
- redesign clinical services
- innovate for the future.

Organisation structure



Our Board

The Metro South Hospital and Health Board (the Board) comprises five or more members appointed by the Governor in Council on the recommendation of the Queensland Minister for Health pursuant to the *Hospital and Health Boards Act 2011*.

The Board is responsible for the governance activities of the organisation and derives its authority to act from the *Hospital and Health Boards Act 2011* (the Act). Each member brings a broad range of skills, expertise and experience to the Board.



Metro South Hospital and Health Board members

The Board is responsible for setting strategic direction, establishing goals and objectives for executive management, monitoring the organisation in line with current government health policies and directives, and ensuring that adequate and appropriate community consultation is undertaken.

The Board reports to the Honourable Lawrence Springborg, Minister for Health.

Key responsibilities

The Board's key responsibilities include:

- reviewing and approving strategies, goals, annual budgets and financial plans as designed by the hospital and health service in response to community and stakeholder input
- monitoring financial performance on a regular basis
- monitoring operational performance on a regular basis including compliance with clinical regulations and standards
- ensuring that risk management systems are in place to cover all of the organisation's key risk areas including operational, financial, environmental and asset related risks
- ensuring that Metro South Health has policies and procedures to satisfy its legal and ethical responsibilities
- monitoring committee reporting on operational, financial and clinical performance
- determining the desired culture for the hospital and health service to enhance its reputation with the community and stakeholders
- reporting to and communicating with government, the community and other stakeholders on the financial and operational performance of the organisation.

Functions

The functions of the Board are to:

- oversee and manage Metro South Health (the HHS), and
- ensure that the services provided by the HHS comply with the requirements of the Act and the objectives of the HHS.

2013–14 Highlights



In 2013–2014, the Board developed, monitored and advised on the following:

- 2012–2016 Strategic Plan: 2014 update
- 2013–2014 Operational Plan
- reopening of birthing and procedural services at Beaudesert Hospital
- roll-out of the Department of Health's medical contracts for senior and visiting medical officers
- Workforce Services policy framework
- health service plans:
 - Medicine and Chronic Disease
 - Aged Care and Rehabilitation
 - Surgical Services
 - Oral Health Services
- maturity of the Metro South Health Risk Management Framework
- Metro South Health budget assessment, including consideration of funding changes and the impact on operational plans
- financial and operational performance monitoring
- significant update of the Finance Management Practice Manual and financial delegations framework
- workforce engagement strategy: PAVE the way.

Board members



Mr Terry White AO

**Chairman
Metro South Hospital and
Health Board**

Appointed 18 May 2012
to 17 May 2016

Terry White is a pharmacist with extensive board and business experience including roles as a Member of Parliament, Minister of the Crown, President of the Pharmacy Guild and consultant to healthcare companies such as Faulding, Mayne and Symbion.

Terry established the Terry White Chemists franchise group in 1994 which has grown into a billion dollar business employing more than 4500 staff and is currently Chair of Terry White Chemists Group Investments. He served as Deputy Chair of the Workcover Board (from 1997–2012) following the Kennedy Inquiry into the Workers Compensation Scheme.

In 2006, he was appointed as an Officer of the Order of Australia for his services to the retail industry, the community and to Parliament. In 2011 he was inducted into the Queensland Business Leaders Hall of Fame in recognition of his exceptional entrepreneurship and innovation in national retailing, as well as his significant contributions to public leadership and the community. In 2012, Terry was recognised as a Queensland Great for his contributions to the State as a business and community leader.

His personal and business achievements are the topic of his biography 'A Prescription for Change—The Terry White Story', published by the University of Queensland Press and authored by Walkley Award-winning Tony Koch, a journalist of The Australian.



Mr Peter Dowling AM

**Deputy Chair and Board
Director**

Appointed 29 June 2012
to 17 May 2016

Peter Dowling is an accountant and company director. He is a Fellow of CPA Australia and The Institute of Chartered Accountants in Australia and a Fellow of The Australian Institute of Company Directors. He was formerly a partner with international accounting firm Ernst & Young. He is a Centenary of Federation Medal recipient and was made a Member of the Order of Australia in 2007 for services to accountancy and the community.

Peter has a number of other board and audit and risk committee appointments.

He is a Director of CUA, CPA Australia, WorkCover, TAFE Queensland, Lexon Insurance and The Asset Institute, among others. He is the Chair of the Audit and Risk Committees for the Sunshine Coast Regional Council, Queensland Transport and Main Roads, the Queensland Department of Energy and Water Supply and the Queensland Crime and Corruption Commission. He is also a Member of the Audit and Risk Committees for the Moreton and Redlands Councils and the Queensland Department of Environment and Heritage, and is the Queensland Honorary Consul for Botswana.



Dr John Kastrissios

Board Director

Appointed 29 June 2012
to 17 May 2017

Dr John Kastrissios is a general practitioner (GP) who has a special interest in the management of cardiovascular disease, asthma, diabetes and mental health. He is a former National Asthma Council clinical educator and is a current board member of the Greater Metro South Brisbane Medicare Local.

John works as a GP supervisor for graduate registrars in training with General Practice Training Queensland. He also teaches medical students from Griffith University, Bond University and University of Queensland.

John is a member of the Queensland Clinical Senate and a former member of the National e-Health Transition Authority’s Clinical Leads and Queensland Health’s Clinical Informatics Steering Committee.

John was previously the chair of Greater Metro South Brisbane Medicare Local, the South East Primary Health Care Network and General Practice Queensland, and deputy chair of the Australian Medicare Local Alliance Board.

In 2008 he received the John Aloizos Medal for outstanding individual contribution to the Australian General Practice Network.

He is a graduate of the Australian Institute of Company Directors.



Ms Margo MacGillivray

Board Director

Appointed 14 June 2013
to 17 May 2017

Margo MacGillivray has practiced as a commercial lawyer for more than 25 years. During that time, she has been a partner of a premier Australian law firm, and General Counsel for large, multi-national entities. Margo has a particular focus on corporate governance and enterprise-wide risk management.

She has also been a member of the Queensland Executive of the Australian Corporate Lawyers Association.

Margo has also been a member and Deputy President of the Queensland Parole Boards. These were senior government positions requiring high level decision making and risk management.

Margo holds a Bachelor of Laws (Hons) and Bachelor of Arts. She is also a Graduate of the Australian Institute of Company Directors.



Ms Lorraine Martin AO

Board Director

Appointed 7 September 2012
to 17 May 2016

Ms Lorraine Martin is a highly successful corporate business woman, experienced board member and outstanding community leader. She was recognised in the 1994 Australia Day Honours List when she was awarded an Order of Australia (AO) for service to business and commerce, particularly in the field of education and training. She is also the former National President of Women Chiefs of Enterprises-International and Queensland President of the Australia Brunei Business Council.

Lorraine established Lorraine Martin College in 1976, which comprised vocational training and personnel agency services. In 1987, she established Queensland's first private English language centre. The group merged with Education and Training Australia in 1996 and grew to include campuses in Brisbane, Cairns, Gold Coast and Sydney. The organisation is now known as Martin College.

Lorraine is a highly experienced board member, having served on numerous public and private sector boards in areas including health, education and community services, including: Mater Hospital Trust; Prince Charles Hospital Foundation; Mindcare (Mental Health Foundation); State Training Council (Queensland); Austrade; Employment Services Regulatory Authority; Bond University School of Business; Queensland State Chamber of Commerce and Industry; Office of Economic Development for the City of Brisbane; Australian Institute of Company Directors; Australian President of Women Chiefs of Enterprises International.



Professor Johannes (John) Prins

Board Director

Appointed 29 June 2012
to 17 May 2016

Professor John Prins is an active clinician-scientist, a key opinion leader in diabetes and endocrinology in Australia and sits on numerous national and international scientific, clinical and educational committees and boards for the National Health and Medical Research Council, non-government organisations and industry.

John undertook his clinical training in endocrinology in Brisbane and then completed a PhD in adipose tissue biology at the University of Queensland.

His first post-doctoral research appointment was at the University of Cambridge, UK, based at Addenbrooke's Hospital. He returned to Brisbane in 1998 after being awarded a Wellcome International Senior Research Fellowship.

In 2004 he was founder and director of the UQ Centre for Diabetes and Endocrine Research, one of the most prominent and successful groups on the Princess Alexandra Hospital campus, which merged with the UQ Centre for Immunology and Cancer Research in 2007 to form the Diamantina Institute.

As chair of the Centre of Health Research on the Princess Alexandra Hospital campus from 2005 to 2009, he coordinated campus-wide research strategy, fostered research, facilitated the recruitment of researchers to the campus, and integrated research and clinical activities.

In 2009 John was appointed chief executive and director of the Mater Medical Research Institute. John has substantial commercialisation experience, holds two international patents and was founder and scientific director of a biotech company—Adipogen Pty Ltd. John is actively involved in undergraduate and postgraduate teaching and training, and has ongoing research interests in obesity and diabetes.



Dr Marion Tower

Board Director

Appointed 29 June 2012
to 17 May 2016

Dr Marion Tower is the Director of Undergraduate Studies and Deputy Head of School at the University of Queensland's School of Nursing and Midwifery.

Prior to becoming a lecturer in nursing and midwifery in 2002, Marion was a registered nurse working in various public and private organisations in emergency, critical care and community health areas. She has a strong interest in safety and quality in healthcare and in nurse education.

Marion was a member of the QEII Health Community Council from 2003–2011 and was a member of the QEII Health Service District Safety and Quality Committee.

Marion has a PhD from Griffith University for research on the health and healthcare for women affected by domestic violence.

Board member attendance

Board member	MSHHB meetings	Executive Committee meetings	Finance Committee meetings	Audit and Risk Committee meetings	Safety and Quality Committee meetings	Combined Audit and Risk, and Safety and Quality meetings
Total meetings	11	11	5	5	5	1
Terry White AO	11	11	–	–	–	–
Peter Dowling AM	10	10	5	5	–	1
Dr John Kastrissios	11	11	–	–	3	1
Professor John Prins	10	10	5	5	5	1
Dr Marion Tower	10	10	–	–	4	–
Lorraine Martin AO*	11	11	2	2	4	1
Margo MacGillivray	10	10	5	5	–	1

*On 25 March 2014, Ms Lorraine Martin stepped down from the Finance and Audit Committee. Ms Martin remained on the Safety and Quality Committee.

Note: In October 2013, a combined Audit and Risk, and Safety and Quality Committee meeting was held along with the standard meeting.

Remuneration of Board members

Board member	Base and post employment benefits (\$'000)	Non-monetary benefits* (\$'000)	Total remuneration (\$'000)
Terry White AO	80	–	80
Peter Dowling AM	41	–	41
Dr John Kastrissios	41	–	41
Professor John Prins	40	–	40
Dr Marion Tower	41	–	41
Lorraine Martin AO	41	–	41
Margo MacGillivray	42	–	42
Total	326	–	326

* e.g. travel arrangements

Policy note:

Key management personnel and remuneration expense disclosures are made in accordance with section 5 of the Financial Reporting Requirements for Queensland Government Agencies issued by Queensland Treasury and Trade. Refer to Note 35 for the disclosures on key management personnel and remuneration.

Board roles

Board Chair

The Chair of the Board is elected on the recommendation of the Queensland Minister for Health following an advertised recruitment process.

The Chair of the Board's responsibilities are:

- presiding over all meetings of the Board. In the event of the Chair being absent, the Deputy Chair shall preside for the course of that meeting
- maintaining a regular dialogue and mentoring relationship with the Health Service Chief Executive (HSCE)
- monitoring the performance of the Board and individual members and promote the ongoing effectiveness and development of the Board
- managing the evaluation and performance of the HSCE and the Board
- informing the Minister about significant issues and events.

Health Service Chief Executive

The Board appoints the HSCE and delegates the administrative function of Metro South Health to the HSCE and those officers to whom management is delegated.

The HSCE responsibilities are:

- managing the performance and activity outcomes of Metro South Health
- providing strategic leadership and direction for the delivery of public sector health services in the HHS
- promoting the effective and efficient use of available resources in the delivery of public sector health services in the HHS
- developing service plans, workforce plans and capital works plans
- managing the reporting processes for performance review by the Board
- liaising with the executive team and receiving committee reports as they apply to established development objectives.

The HSCE may delegate the chief executive's functions under the *Hospital and Health Boards Act 2011* to an appropriately qualified health executive or employee.

Corporate Secretary

The Corporate Secretary provides administrative support to the Board.

The Corporate Secretary is responsible for:

- preparing agendas and minutes
- organising Board meetings
- organising Directors' attendances
- preparing the Board induction packages
- providing a point of reference for communication between the Board and Metro South Health Executive
- attending to all statutory filings and regulatory requirements.

Our Executive team

Health Service Chief Executive

Dr Richard Ashby was appointed Chief Executive of the Metro South Hospital and Health Service in July 2012.

Dr Richard Ashby AM

Dr Richard Ashby is one of the state's most experienced clinicians and health service administrators. In 2010, Dr Ashby was awarded a Member of the General Division of the Order of Australia for service to emergency medicine, to medical administration, and to a range of professional associations. He is active across a broad range of medical areas, including teaching, research and consultancy.

Dr Ashby previously held the post of Executive Director and Director Medical Services at the Princess Alexandra Hospital. Dr Ashby is a University of Queensland graduate who undertook his internship at the Princess Alexandra Hospital and subsequently worked in provincial and rural centres and at the QEII Hospital. He was appointed Director of Emergency Medicine at the Royal Brisbane Hospital in 1989, a post he held until his appointment as Executive Director Medical Services at the Royal Brisbane and Women's Hospital in 2000.

Dr Ashby is a past President of the Australasian College for Emergency Medicine and was Chairman of the International Federation for Emergency Medicine from 1994 to 1996.

In the period 2000–2006, Dr Ashby also acted as District Manager at both the Royal Brisbane and Women's Hospital and Princess Alexandra Hospital for lengthy periods. Dr Ashby was appointed Executive Director of Medical Services at PAH in September 2006 and, in 2008, was additionally appointed as Executive Director of the hospital.

Dr Ashby is a Director of the Translational Research Institute and Australian e-Health Research Centre.

Executive team

Mr Robert Mackway-Jones Chief Finance Officer

Robert has 18 years of health sector experience and more than 12 years of senior leadership experience within the New Zealand environment. He joined Metro South Health in June 2013. Robert's New Zealand health experience included various financial roles and sector leadership roles. From 2010 to 2013 he led the health needs assessment, strategic planning, funding and contracting for health services activities for the Southern District Health Board while concurrently fulfilling its Chief Financial Officer role.

Ms Kay Toshach

Executive Director, Planning Engagement and Reform

Kay has a background in physiotherapy and worked as a senior clinician within Queensland Health and the United Kingdom's National Health Service before pursuing an interest in workforce, organisational development and change management. Both within the Princess Alexandra Hospital and more recently, across Metro South Health, she has been responsible for leading a range of broad change initiatives including workforce and performance models, critical service partnerships, planning frameworks and corporate governance models. Kay acted as the Metro South Health executive lead for the transition to an independent statutory body in line with national and state health reform in 2012.

Mr Michael Draheim Chief Information Officer

Michael is a registered nurse with postgraduate qualifications in intensive care, health administration and information systems. He has a background in clinical education, informatics and leadership positions across both the public and private sectors and has worked in health delivery roles in Queensland, New South Wales and Tasmania. Michael has experience in the implementation, management and delivery of ICT and its benefits in hospital and health care environments. He is passionate about working with clinicians in expanding the understanding and value informatics can bring to health care.

Mr Peter Frew Executive Director, Corporate Services

Peter has significant experience in organisational improvement, industrial relations and human resource management. Peter has established governance processes, policy frameworks, and oversaw the development of performance scorecards which measure key performance indicators against service agreements and organisational costings. Peter has also overseen the Metro South Corporate Services Reform Program, preparing the organisation for contestability and improving efficiency.

Dr Michael Daly Executive Director, Clinical Governance

Michael graduated from University College Dublin, where he trained in the Mater Hospital. After his internship, he moved to Queensland and in 2000 he became Deputy Director Medical Services at Toowoomba Hospital. Michael was appointed Executive Director, Medical Services in West Moreton in 2002 and with the health reforms of 2005–2006, he founded the Southern Area Clinical Governance Unit. In 2008, Michael was appointed Executive Director, Clinical Governance at Metro South Health. In 2014, Michael was appointed as Adjunct Associate Professor at the Queensland University of Technology's School of Public Health and Social Work and School of Clinical Sciences.

Mr Brett Bricknell**Executive Director, Logan-Bayside Health Network**

Brett began his career in health as a physiotherapist in 1989, working first in New South Wales and then the United Kingdom. On returning to Australia in 1994, Brett was appointed as the first Director of Physiotherapy Services at Logan Hospital, where his interest in a career in health service management began. Brett has held senior management positions in health service planning, allied health services, community and primary health services, and acute hospital services. Brett was appointed as Executive Director, Logan-Bayside Health Network in October 2012.

Dr Stephen Ayre**Executive Director, PAH-QEII Health Network**

Dr Stephen Ayre began his career as a general practitioner on the Sunshine Coast and has worked in several hospitals across the State. Stephen is a graduate of the University of Queensland Medical School, has a Masters in Health Administration from the University of NSW and is a Fellow and Jurisdictional Coordinator Training for the Royal Australasian College of Medical Administrators. He has worked in senior management roles across health, including community health, medical superintendent and medical services. Stephen also worked in Tasmania, where he was the CEO of the Launceston General Hospital from 2004 to 2008. He also worked as the Executive Director of Medical Services at The Prince Charles Hospital from 2008 to 2014. Stephen was appointed as Executive Director, Princess Alexandra Hospital and QEII Jubilee Hospital Health Network in May 2014.

Dr Susan O'Dwyer**Executive Director, Medical Services**

Dr Susan O'Dwyer has worked in various medical administration roles at various facilities across Queensland Health since 2001. Susan's experience includes a 7-year term at the Department of Health with responsibilities for medical workforce, education and training. Susan has a long-standing involvement with the Australian Medical Council, including accreditation activities for international medical graduate pathways, prevocational accreditation, and specialist college accreditation. Susan is a Censor with the Royal Australasian College of Medical Administrators and a member of the Queensland Board of the Medical Board of Australia. She is also the chair of the Queensland Registration Committee of the Medical Board of Australia, and a member of the Australian Medical Council prevocational accreditation standards committee. These professional roles complement Susan's role with Metro South Health as the professional lead for medical practitioners.

Ms Veronica Casey**Executive Director, Nursing and Midwifery Services**

Veronica has held nursing executive leadership positions in Queensland Health since 1998. She worked in nursing director roles at The Prince Charles Hospital, the Royal Brisbane Hospital and the Royal Women's Hospital prior to her appointment as Executive Director, Nursing Services at Princess Alexandra Hospital. During her time at PAH, she has been instrumental in helping the hospital achieve re-designation under the Magnet® credentialing program, and the introduction of the Nurse Sensitive Indicator performance monitoring system. In 2010, she was appointed as one of three inaugural international commissioners for the American Nurses Credentialing Centre. Veronica was appointed as a Board Member on the Nursing and Midwifery Board of Australia in May 2014.

Ms Gail Gordon**Executive Director, Allied Health Services**

Gail is an occupational therapist with postgraduate qualifications in business administration. She has held a range of senior occupational therapy roles in the public and private sectors. She was Director of Allied Health at QEII Jubilee Hospital until her appointment as Executive Director of Allied Health, Southside Health Service District in 2007. Gail was appointed as Executive Director, Allied Health Services for Metro South Health in 2008. Gail has established a health service wide allied health professional structure to support effective governance of services and provided executive leadership in the implementation of innovative allied health models of care.

Professor David Crompton OAM**Executive Director, Addition and Mental Health Services**

David worked in private practice as a rural general practitioner prior to commencing psychiatry training and spending 12 years in private psychiatry practice. David is a Professor within the School of Health Service and Social Work and holds academic titles with the University of Queensland and Queensland University of Technology. He has held leadership roles in Queensland Health and New South Wales Health and is the coordinator for the Centre for Neuroscience, Recovery and Mental Health. He was awarded a Medal of the Order of Australia for development of community based mental health services for veterans, development of community post-traumatic stress disorder and anxiety and substance abuse treatment services. David's research interest includes the impact of trauma and natural disasters, suicide and factors that influence recovery of individuals with mental illness.

Board committees

The Metro South Hospital and Health Board (the Board) has established four committees to assist in carrying out its functions and responsibilities. The four committees are:

- Executive Committee
- Finance Committee
- Audit and Risk Committee
- Safety and Quality Committee.

The Board has authorised the committees, within the scope of their responsibilities, to examine any matter in relation to its objectives as it sees fit or as requested by the Board. The Board committees are subject to annual review.

The committees are led by Board members with the Chair of each committee being a member of the Board and supported by the Health Service Chief Executive (HSCE) or other senior executives in Metro South Health.

Executive Committee

The Executive Committee is an advisory committee to the Board. The Executive Committee functions under the authority of the Board in accordance with section 32B of the *Hospital and Health Boards Act 2011*.

The Executive Committee is established to support the Board by:

- working with the HSCE to progress strategic issues identified by the Board
- strengthening the relationship between the Board and the HSCE to ensure accountability in the delivery of services by the HHS
- developing strategic service plans for the HHS and monitoring their implementation
- developing key engagement strategies and protocols, and monitoring their implementation
- performing any other functions required by the Board or prescribed by the Regulation.

The Executive Committee meets monthly, or as determined by the Board.

Committee members: Terry White AO – Chair; Peter Dowling AM; Dr John Kastrissios; Professor John Prins; Margo MacGillivray; Dr Marion Tower; Lorraine Martin AO.

Finance Committee

The committee was established under part 7, section 31, of the *Hospital and Health Boards Regulation 2012*.

The committee functions under the authority of the Board in accordance with Schedule 2, section 8, of the *Hospital and Health Board Act 2011*.

The Finance Committee has the following functions:

- assessing the HHS budget and ensuring the budgets are:
 - consistent with the organisational objectives of the HHS
 - appropriate having regard to the HHS funding
- monitoring the HHS cash flow, having regard to the revenue and expenditure of the HHS
- monitoring the financial and operating performance of the HHS
- monitoring the adequacy of the HHS financial systems, having regard to its operational requirements and obligations under the *Financial Accountability Act 2009*
- assessing financial risks or concerns that impact, or may impact, on the financial performance and reporting obligations of the HHS, and how the HHS is managing the risks or concerns
- assessing the service's complex or unusual financial transactions
- any other function given to the committee by the Board (if the function is not inconsistent with a function mentioned in the dot points above)
- identifying risks and mitigating strategies associated with all decisions made
- implementing processes to enable the committee to identify, monitor and manage critical risks as they relate to the functions of the committee.

The Finance Committee is required to meet at least four times per year or as required by the Chair.

Committee members: Peter Dowling AM – Chair; Professor John Prins; Margo MacGillivray; Lorraine Martin AO.

Audit and Risk Committee

The committee was established under part 7, section 31, of the *Hospital and Health Boards Regulation 2012*.

The Audit and Risk Committee operates with due regard to its terms of reference and the Queensland Treasury's Audit Committee Guidelines. The terms of reference is consistent with the requirements of the *Hospital and Health Boards Regulation 2012*, is reviewed annually and approved by the Board.

The purpose of the Audit and Risk Committee is to provide advice and assistance to the Board on:

- the service's risk, control and compliance frameworks
- the service's external accountability responsibilities as prescribed in the *Financial Accountability Act 2009*, *Auditor-General Act 2009*, *Financial Accountability Regulation 2009* and *Financial and Performance Management Standard 2009*.

The Audit and Risk Committee advises the Board on the following matters:

- assessing the adequacy of the HHS financial statements, having regard to the following:
 - the appropriateness of the accounting practices used
 - compliance with prescribed accounting standards under the *Financial Accountability Act 2009*
 - external audits of the HHS financial statements
 - information provided by the HHS about the accuracy and completeness of the financial statements
- monitoring the HHS compliance with its obligation to establish and maintain an internal control structure and systems of risk management under the *Financial Accountability Act 2009*, including:
 - whether the HHS has appropriate policies and procedures in place, and
 - whether the HHS is complying with the policies and procedures
- monitoring and advising the Board about its internal audit function
- overseeing HHS liaison with the Queensland Audit Office in relation to the HHS proposed audit strategies and plans
- assessing external audit reports for the HHS and assessing the adequacy of action taken by management as a result of the reports
- monitoring the adequacy of the HHS's management of legal and compliance risks and internal compliance

systems, including the effectiveness of the systems in monitoring compliance by the HHS with relevant laws and government policies

- evaluation and approval of the Internal Audit Charter, Internal Audit Strategic and Annual Audit Plans
- through Internal Audit, oversight and appraisal of HHS financial operational reporting processes
- reviewing the effectiveness of the internal audit function and ensuring that it meets the requirements of the professional standards issued by Institute of Internal Auditors and has regard to the Queensland Treasury's Financial Accountability Handbook
- monitoring the effectiveness of HHS performance information, and compliance with the performance management framework and performance reporting requirements
- assessing the HHS complex or unusual transactions or series of transactions, or any material deviation from the HHS budget
- any other function given to the committee by the HHS (if the function is not inconsistent with a function mentioned in dot points above)
- reviewing the risk management framework for identifying, monitoring and managing significant business risks, including fraud
- liaising with management to ensure there is a common understanding of the key risks to the agency. These risks will be clearly documented in the risk register which will be regularly reviewed to ensure it remains up-to-date
- assessing and contributing to the audit planning process relating to risks and threats to the HHS
- reviewing effectiveness of the HHS's processes for identifying and escalating risks, particularly strategic risks.

The Audit and Risk Committee meetings are held at least quarterly with a schedule of meetings agreed in advance.

Committee members: Peter Dowling AM – Chair; Professor John Prins; Lorraine Martin AO; Margo MacGillivray.

Safety and Quality Committee

The committee was established under part 7, section 32 of the *Hospital and Health Boards Regulation 2012*. The committee functions under the authority of the Board in accordance with schedule 1, section 8 of the *Hospital and Health Boards Act 2011*.

The committee advises the Board on matters relating to the safety and quality of health services provided by the HHS, including strategies for the following:

- minimising preventable patient harm
- reducing unjustified variation in clinical care
- improving the experience of patients and carers of the HHS in receiving health services
- complying with national and state strategies, policies agreements and standards relevant to promoting consultation with health consumers and members of the community about the provision of health services by the HHS
- monitoring the HHS governance arrangements relating to the safety and quality of health services, including monitoring compliance with the HHS policies and plans about safety and quality
- promoting improvements in the safety and quality of health services provided by the HHS
- monitoring the safety and quality of health services being provided by the HHS using appropriate indicators developed by the HHS
- collaborating with other safety and quality committees, the department and statewide quality of health services
- any other function given to the committee by the HHS Board (if the function is not inconsistent with a function mentioned in dot points above)
- identifying risks and mitigating strategies associated with all decisions made
- implementing processes to enable the committee to identify, monitor and manage critical risks as they relate to the functions of the committee.

The Safety and Quality Committee meets bi-monthly or as required by the Chair.

Committee members: Professor John Prins – Chair; Dr Marion Tower; Dr John Kastrissios; Lorraine Martin AO; Dr Richard Ashby, Health Service Chief Executive; Dr Michael Daly, Executive Director Clinical Governance.

Health service committees

Metro South Health Service Executive Committee

The Health Service Chief Executive (HSCE) has single point accountability for the total performance of the health service but relies on the advice of the Metro South Health Service Executive Committee and the transmitted accountability of the members through that Executive.

The responsibility of the Metro South Health Service Executive Committee is to oversee the delivery and performance of services and give advice to the HSCE by monitoring and making decisions regarding:

- quality and safety
- employment and human resources
- activity
- capital works
- budget assignment
- equipment purchases
- expenditure.

Membership of the Metro South Health Service Executive Committee consists of:

- Health Service Chief Executive – Chair
- Chief Finance Officer
- Executive Director, PAH-QEII Health Network
- Executive Director, Logan-Bayside Health Network
- Chief Information Officer
- Executive Director, Addiction and Mental Health Services
- Executive Director, Clinical Governance
- Executive Director, Planning, Engagement and Reform
- Executive Director, Nursing and Midwifery Services
- Executive Director, Corporate Services
- Executive Director, Allied Health Services
- Executive Director, Medical Services
- Facility Managers.

Meetings are held once a month.

Metro South Health Quality and Safety Committees

Metro South Health-wide quality and safety activities are directed and governed by the Metro South Health Executive Committee.

Each facility or service maintains a local quality and safety committee that meets monthly.

Members of these committees include:

- Executive Director, Clinical Governance, Metro South Health
- Quality and safety coordinators
- Executive and clinical leaders.

Meetings are held once a month.

Finance Network

The Metro South Health Finance Network oversees the financial management of the health service which includes activity, staffing and budget. This is achieved by:

- ensuring sound financial management of Metro South Health facilities
- undertaking financial planning processes including implementing changes to the funding model, activity based funding and setting up the HHS
- ensuring own source revenue strategies are in place in each facility to assist in meeting targets
- ensuring reporting requirements are met for Metro South Health's finance function
- informing finance directors of changes and requirements to ensure compliance and budget objectives are met
- undertaking client engagement with the Department of Health's Shared Service Provider.

Membership of the Metro South Health Finance Network consists of:

- Chief Finance Officer – Chair
- Director of Finance – Financial Accounting, Metro South Health Finance
- Metro South Health Manager, Policy and Performance
- Metro South Health Manager, Own Sourced Revenue
- Finance Director, PAH-QEII Network
- Finance Manager, Princess Alexandra Hospital
- Finance Manager, Queen Elizabeth II Jubilee Hospital
- Finance Director, Logan-Bayside Network
- Finance Manager, Logan Hospital
- Finance Manager, Redland Hospital
- Finance Director, Addiction and Mental Health Services
- Metro South Health Financial Accountant
- Metro South Health Management Accountant
- Metro South Health Business and Financial Analyst
- Metro South Health Director, Decision Support.

The Manager, Department of Health Shared Service Provider, has a standing invitation to the meeting.

Meetings are held once a month.

Credentialing and Scope of Clinical Practice Committee

The Metro South Health Credentialing and Scope of Clinical Practice Committee's purpose is to:

- ensure that all medical and dental practitioners utilising Metro South Health facilities practise high quality care, by granting Scope of Clinical Practice only to those practitioners who are appropriately qualified, trained and experienced to undertake clinical care within the facility
- ensure that the Scope of Clinical Practice granted is appropriate to the Service Capability Framework of each facility within Metro South Health.

The committee comprises representatives from the following:

- surgical specialties
- medical specialties
- addiction and mental health services
- obstetrics and gynaecology
- other specialties (e.g. radiology, cancer services) as required
- Director of Nursing and Midwifery (or nominee)
- Director of Oral Health Services (or nominee, when assessing a dental applicant).

In 2013–2014, membership of the Metro South Health Credentialing and Clinical Scope of Practice Committee consisted of:

- Executive Director, Clinical Governance – Chair
- Executive Director, Medical Services
- Executive Director, Nursing and Midwifery Services
- Executive Director, Oral Health Services
- Director, Medical Services, QEII Jubilee Hospital
- Director, Medical Services, Logan-Beaudesert
- Director, Medical Services, Redland-Wynnum
- Deputy Director Medical Services, PA Hospital
- Staff Specialist, Rheumatology, PA Hospital
- Staff Specialist, General Medicine, PA Hospital
- Staff Specialist, Obstetrics and Gynaecology, Logan-Beaudesert
- Staff Specialist, General Surgery
- Staff Specialist, Psychiatry.

Corporate Services Directors Meeting

The Metro South Health Corporate Services Directors Meeting oversees Corporate Services' performance (including financial), key risks and priorities, policies, and reform processes. Objectives include:

- review and approve strategies, goals and directions in response to Metro South Health Service Executive requirements
- monitor financial performance for facility Corporate Services on a regular basis
- monitor operational performance of facility Corporate Services on a regular basis
- oversee and address key risk matters for Corporate Services
- introduce a quality improvement process for Corporate Services matters.

Membership of the Metro South Health Corporate Services Directors Meeting consists of:

- Executive Director, Corporate Services – Chair
- Director, Corporate Services, Logan-Bayside
- Manager, Corporate Services, Redland-Wynnum
- Manager, Corporate Services, QEII Jubilee Hospital
- Director, Corporate Services, Addiction and Mental Health Services
- Senior Director, PA Support Services, PA Hospital
- Director, Corporate Business and Performance
- Director, Capital Delivery, Asset and Infrastructure
- Senior Director, Building Engineering and Maintenance Services
- Senior Director, Workforce Services
- Director, Industrial Relations.

Meetings are held once a month.

Executive Planning Committee

The Metro South Health Executive Planning Committee provides corporate governance and leads decision-making processes for strategic and service planning within Metro South Health. The Committee prioritises service planning activities and capital development projects, monitors and reviews existing plans and ensures planning aligns with relevant legislation, standards, government policy and Metro South Health's strategic intent.

Membership of the Metro South Health Executive Planning Committee consists of:

- Chief Finance Officer – Chair
- Executive Director, PAH-QEII Network
- Executive Director, Logan-Bayside Network
- Executive Director, Metro South Corporate Services
- Executive Director, Planning, Engagement and Reform
- Executive Director, Addiction and Mental Health Services
- Chief Information Officer, Metro South Health
- Director, Capital and Asset Management
- Director, Building Engineering and Maintenance Services
- Director, Planning.

Meetings are held once a month.

Workforce Services Managers Committee

The Metro South Health Workforce Managers Committee determines the strategic direction and implementation protocols for the delivery of workforce services planning and workforce culture improvement activities. Objectives include:

- provide a platform for the ongoing development of members' planning and culture management capacity, knowledge and skills
- provide advice to the Corporate Services directors relating to occupational health and safety management
- facilitate the implementation of occupational health and safety plans and initiatives within each facility and across Metro South Health.

Membership of the Metro South Health Workforce Services Managers Network consists of:

- Senior Director, Workforce Services – Chair
- Director, Workforce Services, PAH-QEII
- Manager, Workforce Services, QEII Jubilee Hospital
- Director, Workforce Services, Logan-Bayside
- Manager, Workforce Services, Redland-Wynnum
- Manager, Workforce Services, Addiction and Mental Health Services
- Occupational Health and Safety Manager, Redland-Wynnum
- Occupational Health and Safety Manager, QEII Jubilee Hospital
- Occupational Health and Safety Manager, Logan-Bayside
- Director, Health Reform
- Director, Industrial Relations
- Manager, Staff Complaints.

Meetings are held once a month.

Building, Engineering and Maintenance Management Group

The Metro South Health Building, Engineering and Maintenance Management Group oversees building and maintenance performance (including financial), key risks and priorities, policies, and reform processes.

Membership of the Metro South Health Building, Engineering and Maintenance Management Group consists of:

- Director, Building, Engineering and Maintenance Services – Chair
- Senior Director, PA Support Services, PA Hospital
- Director, Corporate Services, Logan-Bayside
- Director, Corporate Services, QEII Jubilee Hospital
- Manager, Corporate Services, Redland Hospital
- Client Manager, PAH-QEII
- Client Manager, Logan-Bayside
- Client Manager, Community and oral health services
- Client Supervisor, QEII Jubilee Hospital
- Client Supervisor, Redland Hospital.

Meetings are held once a month.

Nursing and Midwifery Executive Committee

The Metro South Health Nursing and Midwifery Executive Committee provides leadership and strategic direction for nursing and midwifery services. It advises and makes recommendations to the Metro South Health Service Executive regarding the planning and management of health services. It also responds to issues relevant to nursing as they arise.

Membership of the Metro South Health Nursing and Midwifery Executive Committee consists of:

- Executive Director, Nursing and Midwifery Services – Chair
- Executive Director of Nursing, PA Hospital
- Director of Nursing Services, QEII Jubilee Hospital
- Director of Nursing and Midwifery, Logan-Bayside
- Director of Nursing, Aged Care and Residential Services
- Director of Nursing, Addiction and Mental Health Services
- Surgical Services, Sub Stream Leader – Peri Operative
- Nursing Director, Education, PA Hospital
- Nursing Director, Centre of Excellence in Nursing, Nursing Standards and Clinical Performance
- Patient Flow, Ambulatory Care and Hospital Avoidance Clinical Stream leader.

Meetings are held bi-monthly.

Metro South Health Consultative Forum

The Metro South Health Consultative Forum (MSHCF) is a joint consultative forum established in accordance with the *Metro South Health Consultative Forum Terms of Reference 2014*.

The forum enables consultation and communication between Metro South Health management and union representatives.

A number of Local Consultative Forums have been established which report to the MSHCF, including those at:

- Princess Alexandra Hospital
- Logan Hospital
- QEII Jubilee Hospital
- Redland Hospital
- Beaudesert Hospital
- Addiction and Mental Health Services
- Oral Health Services
- Building Engineering and Maintenance Services.

The forum has joint chairpersons (one union and one management). For the purposes of meetings, this role alternates between management and union representatives. Membership of the forum consists of:

- Union representation (officials and delegates):
 - Together Queensland Union
 - Queensland Nurses Union
 - United Voice Union
 - Australian Workers Union
 - Automotive, Metals, Engineering, Printing and Kindred Industries Union
 - Electrical Trades Union
 - Construction, Forestry, Mining, Energy Union
 - Plumbers Union Queensland
- Management representation (or delegates)
- Health Service Chief Executive
- Executive Director, PAH-QEII
- Executive Director, Logan-Bayside
- Executive Director, Addiction and Mental Health Services
- Facility Manager, Redland-Wynnum
- Facility Manager, QEII Jubilee Hospital
- Director, Oral Health Services
- Executive Director, Allied Health
- Executive Director, Corporate Services
- Executive Director, Nursing and Midwifery Services
- Director, Industrial Relations.

Meetings are held once a month.

Human Research Ethics Committee

The Metro South Health Human Research Ethics Committee (HREC) acts in a consultative and advisory capacity with researchers to ensure that all clinical, research and management practices are conducted in an ethical and scientifically robust manner. The purpose of the committee, in accordance with the *National Statement on Ethical Conduct in Human Research (2007)*, is to ensure that all human research is conducted in an ethical manner, and to promote and foster ethical and good clinical/health research practice that is of benefit to the community. Key objectives of the committee include:

- protect the mental and physical welfare, rights, dignity and safety of research participants
- facilitate and promote high calibre ethical research through efficient and effective review processes
- ensure that all clinical and ethical research is conducted responsibly.

The National Statement requires the HREC to comprise of members with specific experience, knowledge and skills. As per section 5.1.30, the membership of the Metro South Health HREC includes:

- a chairperson, with suitable experience, whose other responsibilities will not impair the HREC's capacity to carry out its obligations under this National Statement
- at least two lay people, one man and one woman, who have no affiliation with the institution and do not currently engage in medical, scientific, legal or academic work
- at least one person with knowledge of, and current experience in, the professional care, counselling or treatment of people; for example, a nurse or allied health professional
- at least one person who performs a pastoral care role in a community, for example, an Aboriginal elder, a minister of religion
- at least one lawyer, where possible one who is not engaged to advise the institution
- at least two people with current research experience that is relevant to research proposals to be considered at the meetings they attend. These two members may be selected, according to need, from an established pool of inducted members with relevant expertise.

Meetings are held once a month.

Allied Health Directorate Meeting

The Metro South Health Allied Health Directorate Meeting provides leadership and strategic direction for allied health professionals across Metro South Health to improve the quality and effectiveness of patient care. Its objectives include:

- provide leadership to Metro South Health allied health and individual allied health professions in matters relating to allied health professional practice and workforce
- provide strategic directions for Allied Health Services consistent with the Metro South Health Strategic Plan, the *Allied Health Professional Plan* and the *Allied Health Practitioners Office Queensland Plan*
- provide advice and consultation to the Executive Director, Allied Health for their role as a representative on the Metro South Health Service Executive Committee
- support Metro South Health allied health governance, workforce development, education and training and research
- lead the implementation of innovative models of care, methods of service delivery and allied health management tools.

Membership of the Metro South Health Allied Health Directorate Meeting consists of:

- Executive Director, Allied Health – Chair
- Executive Director, Clinical Support Services, PA Hospital
- Director, Allied Health, QEII Hospital
- Director, Allied Health, Logan-Bayside
- Director, Therapies and Allied Health, Addiction and Mental Health Services
- Allied Health Workforce Development Officers.

Meetings are held once a month.

Disaster and Emergency Management Committee

The Metro South Health Disaster and Emergency Management Committee provides a health service-wide disaster and emergency network. The committee aims to enable each Metro South Health facility to optimally prepare and respond to disaster and emergency incidents at a facility, health service-wide or statewide level, and to develop a consistent health service-wide plan which complies with national and state policies.

Specifically, the Metro South Health Disaster and Emergency Management Committee provides strategic and operational advice to the Chief Executive, Metro South Health and Executive Directors on policy, implementation plans and coordination of relevant incidents across Metro South Health. These may include:

- disaster and emergency management planning, resourcing and realignment
- monitoring of processes and outcomes
- legislative and regulatory issues
- coordinated response for disaster and emergency incidents
- other matters within scope as determined by the Chair or the Chief Executive, Metro South Health
- joint exercises.

Membership of the Metro South Health Disaster and Emergency Management Committee consists of:

- Executive Director Medical Services, PA Hospital – Chair
- Deputy Director Medical Services, PA Hospital
- Director Medical Services, Logan Hospital
- Executive Director, Addiction and Mental Health Services
- Director Medical Services, Redland Hospital
- Director Medical Services, QEII Jubilee Hospital
- Emergency Management Coordinator, Mater Health Services
- Director, Metro South Public Health Unit
- CEO, Greater Metro South Brisbane Medicare Local
- Manager, Executive Services, PA Hospital
- Representative from PA Hospital Emergency Department
- Director, Health Equity and Access Unit
- Queensland Ambulance Service representative.

Sub-committees of the Metro South Health Disaster and Emergency Management Committee include:

- Metro South Health Pandemic Meeting
- Metro South Health Major Event Management Committee.

Meetings are held quarterly.

Clinical Ethics Committee

The Metro South Health Clinical Ethics Committee provides a forum for discussion about clinical ethics issues and situations in a safe and confidential environment.

Membership of the Metro South Health Clinical Ethics Committee consists of:

- Metro South Health Clinical Ethics Coordinator – Chair
- Executive Director Medical Services, Metro South Health
- Executive Director Medical Services, PA Hospital
- Executive Director Nursing Services, PA Hospital
- Executive Director Nursing and Midwifery Services, Metro South Health
- Executive Director Clinical Governance, Metro South Health
- Clinical expertise representative
- Legal expertise representative
- Consumer expertise representative
- Pastoral care expertise representative.

Meetings are held once a month.

Directors of Medical Services Committee

The Metro South Health Directors of Medical Services Committee is a health service-wide medical management clinical network. It aims to enable each Metro South Health facility to optimally deliver medical services by facilitating cooperation and to ensure a consistent health service-wide standard.

Specifically, the committee provides strategic and operational advice to the Executive Director Medical Services, Metro South Health on policy, implementation plans and any related matters, including:

- health needs of communities
- service planning, resourcing and realignment
- clinical governance
- medical workforce and industrial issues
- care processes and care support processes
- monitoring of care processes and outcomes
- information technology
- technological advances
- legislative and regulatory issues
- other matters within scope as determined by the Executive Director, Medical Services, Metro South Health.

Membership of the Directors of Medical Services Committee consists of:

- Executive Director Medical Services, Metro South Health – Chair
- Directors, Medical Services at each Metro South Health facility
- Deputy Directors, Medical Services at each Metro South Health facility
- Medical Administration Registrars.

Meetings are held once a month.

Radiation Safety Management Reference Group

The Metro South Radiation Safety Management Reference Group monitors, reports and advises on the use of ionising and non-ionising radiation sources across Metro South Health, in order to minimise the risk to staff, patients and the public arising from radiation sources. Key functions include:

- investigate the planned use of and monitor current practices relating to all radiation sources within Metro South Health
- monitor and advise the “Possession Licensee” on compliance issues relevant to radiation safety legislation and associated radiation safety and protection plan(s)
- review and audit safe working practices and emergency procedures for radiation sources
- provide a reporting and support mechanism for radiation safety officers to raise concerns regarding identified radiation-related hazards and risks
- recommend policy in relation to processes and practices involving radiation and its sources within Metro South Health
- review the continuing education of those persons who work with or near radiation sources
- monitor changes in legislation and assess the impact of such changes on operators and other affected persons
- review incidents involving radiation sources and advise the “Possession Licensee” on the management of the incident and risk control measures
- review planned and completed quality improvement activities involving management and use of radiation sources.

Membership of the Radiation Safety Management Reference Group consists of:

- Executive Director Medical Services, PA Hospital – Chair
- Deputy Director Medical Services, PA Hospital
- Director Medical Imaging, Redland and Wynnum
- Director Medical Imaging Services, Logan and Beaudesert hospitals
- Director Medical Services, Logan, Redland and QEII Jubilee hospitals
- Director of Radiology, PA Hospital
- Assistant Director Radiology, PA Hospital
- Director of Radiation Oncology, PA Hospital
- Director of Radiation Oncology, Mater

- Director Vascular Surgery, PA Hospital
- Professor, Cancer Services, PA Hospital
- Director of Cardiology, PA Hospital
- Operating theatres representative
- Radiation safety officers
 - Diagnostic Radiology/Nuclear Medicine/Radioisotopes
 - Radiation Oncology, Mater
 - Radiation Oncology, PA Hospital
 - Laser, PA Hospital and QEII Jubilee Hospital
 - Redland Hospital
 - Logan Hospital
 - TB Clinic
 - Breast Screening
 - X-Ray, QEII Jubilee Hospital
- Workforce Services representative
- Biomedical Technology Services Site Manager
- Clinical Governance Unit representative
- Oral Health representative.

Meetings are held once a month.

Statewide CIO Forum

The Statewide CIO (Chief Information Officer) Forum is a statewide forum for information sharing and alignment of ICT services across hospital and health services.

Membership of the Statewide CIO Forum consists of representatives from the following:

- Metro South HHS
- Sunshine Coast HHS
- Gold Coast HHS
- Townsville HHS
- South West HHS
- Torres and Cape HHS
- North West HHS
- Darling Downs HHS
- Central Queensland HHS
- Mackay HHS
- Wide Bay HHS
- Metro North HHS
- West Moreton HHS
- Children's Health Queensland HHS
- Queensland Ambulance Service
- Cairns and Hinterland HHS
- Health Service Delivery Reform and Health Renewal Portfolio
- Health Services Information Agency
- ICT Portfolio, Health Services Information Agency.

Meetings are held once a month.

ICT Executive Committee

The Metro South Health ICT Executive Committee is the governance body responsible for the overarching strategy and high-level direction for information, communications and technology (ICT) across Metro South Health.

The ICT Executive Committee takes an interest in enterprise-level ICT projects that impact Metro South Health, to ensure that the health service's specific requirements are taken into account, resourcing is appropriate and that any specific change management issues are addressed. However, the primary focus is on initiatives that are related specifically to Metro South Health and are within the health service's control. Such initiatives include:

- current operational systems
- new clinical systems
- new business support systems
- communication systems
- supporting infrastructure.

Membership of the Metro South Health ICT Executive Committee consists of:

- Health Service Chief Executive – Chair
- Chief Finance Officer
- Chief Information Officer
- Executive Director, Medical Services
- Executive Director, Nursing and Midwifery Services
- Executive Director, Allied Health Services
- Executive Director, Corporate Services
- Executive Director, Logan-Bayside
- Executive Director, PAH-QEII
- Executive Director, Addiction and Mental Health Services
- Facility Manager, QEII Jubilee Hospital
- Facility Manager, Bayside
- Health Information Management Services representative
- Chief Information Officer/Executive Director, Health Service Information Agency
- Chief Executive, Greater Metro South Brisbane Medicare Local
- Clinical Lead, ieMR Project
- Clinical Lead, Patient Flow
- Relevant staff invited as required.

Meetings are held once a month.

Addiction and Mental Health Clinical Council

Metro South Health's Addiction and Mental Health Clinical Council provides oversight of clinical initiatives and ensures best practice across the health service.

Membership of the Metro South Addiction and Mental Health Clinical Council consists of:

- Director, Medical Services, Metro South Addiction and Mental Health Services (MSAMHS) – Chair
- Director, Therapies and Allied Health, MSAMHS
- Director, Clinical Governance, MSAMHS
- Director of Nursing, MSAMHS
- Clinical Director, Psychosis Academic Clinical Unit (ACU)
- Clinical Director, Rehabilitation ACU
- Clinical Director, Mood ACU
- Clinical Director, Older Adult ACU
- Clinical Director, Child and Youth ACU
- Clinical Director, Recovery and Access Services ACU
- Clinical Director, Consultation Liaison ACU
- Director, Addiction ACU
- Director, Social Inclusions and Recovery, MSAMHS.

Meetings are held once a month.

Addiction and Mental Health Executive Committee

Metro South Health's Addiction and Mental Health Executive Committee provides oversight of clinical initiatives and ensures best practice across the health service.

Membership of the Metro South Addiction and Mental Health Committee consists of:

- Executive Director, Metro South Addiction and Mental Health Services (MSAMHS) – Chair
- Director, Therapies and Allied Health, MSAMHS
- Director, Clinical Governance, MSAMHS
- Director, Medical Services, MSAMHS
- Director of Nursing, MSAMHS
- Director, Corporate Governance, MSAMHS
- Director, Addiction Academic Clinical Unit
- Director, Social Inclusions and Recovery, MSAMHS.

Meetings are held once a month.

Addiction and Mental Health Medication Safety Advisory Committee

Metro South Health's Addiction and Mental Health Medication Safety Advisory Committee provides a comprehensive approach to the development, review and implementation of medication management standards, evidence-based practice guidelines and other medication safety initiatives across the health service.

Membership of the Metro South Addiction and Mental Health Medication Safety Advisory Committee consists of:

- Clinical Governance Team Leader, Metro South Addiction and Mental Health Services (MSAMHS) – Chair
- Consultant Psychiatrist representative, MSAMHS
- Senior Registrar representative, MSAMHS
- Pharmacist from all sites
- Nurse Educator, MSAMHS
- Addictions representative, MSAMHS
- Clozapine Coordinator, MSAMHS
- Team Leader representative, Mood and Psychosis Academic Clinical Unit
- Inpatient Nurse Unit Manager representative, MSAMHS
- Quality and Safety Manager, MSAMHS
- Consumer carer consultant representative, MSAMHS.

Meetings are held once a month.

Ethics and code of conduct

The *Public Sector Ethics Regulation 2010* defines Metro South Health as a public service agency, therefore the *Code of Conduct for the Queensland Public Service* is applicable to employees of the health service.

Metro South Health is committed to upholding the values and standards of conduct outlined in the *Code of Conduct for the Queensland Public Service*, which came into effect on 1 January 2011. The code of conduct applies to all employees of Metro South Health and was developed under the *Public Sector Ethics Act 1994* consisting of four core aspirational principles:

- integrity and impartiality
- promoting the public good
- commitment to the system of government
- accountability and transparency.

Each principle is strengthened by a set of values and standards of conduct describing the behaviour that will demonstrate that principle.

All Metro South Health employees are required to undertake training in the *Code of Conduct for the Queensland Public Service* during their induction and thereafter undertake re-familiarisation training annually or following any change to the document.

Employees are able to readily access the following training throughout the year on the code of conduct:

- orientation sessions
- intranet based modules
- CD containing training.

Manager, Staff Complaints

With the enactment of the *Hospital and Health Boards Act 2011* from 1 July 2012, the obligation to report allegations of suspected official misconduct to the Crime and Misconduct Commission under the *Crime and Misconduct Act 2001* rested with the Chief Executive of Metro South Health.

The Manager, Staff Complaints is the central point within Metro South Health to receive, assess and refer allegations of suspected official misconduct to the Crime and Misconduct Commission. This role enables the Chief Executive, Metro South Health to fulfil the obligation to report allegations of suspected official under the *Crime and Misconduct Act 2001*.

Prevention

During 2013–2014, ethical awareness, fraud prevention, public interest disclosures and Official Misconduct information sessions were delivered to staff in Metro South Health. These sessions were delivered to a variety of positions and levels within Metro South Health. In addition, learning and development staff delivered training on ethical decision making, code of conduct and official misconduct processes to all new staff members through induction and orientation.

Assessment and investigation

The assessment of suspected official misconduct matters is undertaken by the Manager, Staff Complaints with advice and assistance sought from specialist stakeholders relevant to the allegations such as:

- Director, Industrial Relations
- Executive Director, Clinical Governance
- Chief Financial Officer
- Director, Audit and Risk Management
- Department of Health Police Liaison Unit – Queensland Police Service Inspector
- A senior Department of Health workplace services unit representative.

Audit and risk management

External scrutiny

Metro South Health's operations are subject to regular scrutiny from external oversight bodies. These include Queensland Audit Office (QAO), Australian Council on Healthcare Standards, Health Quality and Complaints Commission, Postgraduate Medical Education Council of Queensland, medical colleges, National Association of Testing Authorities and others.

ACHS Accreditation Survey

Accreditation is a formal process to assist in the delivery of safe, high quality health care based on standards and processes devised and developed by health care professionals for health care services. It is public recognition of achievement of accreditation standards by a health care organisation, demonstrated through an independent external peer assessment of that organisation's level of performance in relation to the standards.

In September 2013, the Princess Alexandra Hospital underwent an independent, external accreditation survey by a team from the Australian Council on Healthcare Standards. This external review was against the requirements outlined in the National Safety and Quality Health Service Standards. The Standards became mandatory on 1 January 2013.

In the accreditation report, it was identified that Princess Alexandra Hospital had met or exceeded the mandatory requirements across all standards with no high priority recommendations arising from the survey. This is a significant achievement and provides confidence to the community that the hospital meets or exceeds contemporary health service standards.

All other Metro South Health hospitals will undergo accreditation in 2014–2015.

QAO Audit

As a public sector entity, Metro South Health is subject to an annual audit by the QAO. The QAO Final Management Report provided to Metro South Health for the 2012–13 financial year contained no high risk issues. The report referred to several reporting matters that would be followed up by QAO during the audit planning processes for 2013–14:

- plans by the Department of Health to transfer legal title of land and buildings to Metro South Health
- the need to develop a protocol with the Department of Health regarding the accounting for and valuation by which completed capital work in progress assets are to be transferred to Metro South Health
- the need to assess the useful (standard) lives for medical equipment under \$200,000
- the lack of an effective audit trail for the identification, review and update of useful life as part of the annual stocktake process
- scope to improve processes for the collating of information for the expenditure commitments disclosure in the financial statements.

The audit committee also considered all audit recommendations by the QAO including performance audit recommendations during 2013–14.

QAO's interim management letter was issued on 22 May 2014 with no high risk issues identified. Only one moderate risk issue was identified in relation to the lack of investigation into unexplained adjustments on inventory reconciliations. Overall, the interim audit identified that Metro South Health's internal controls were operating effectively.

In addition to the QAO management letters provided directly to Metro South Health, QAO also issued several Auditor-General Reports to Parliament that contained recommendations of relevance to Metro South Health.

Report 8: 2013–14 Result of audit: Hospital and Health Services entities 2012–13

This report covers the results of QAO's 2012–13 financial audits of the 17 Hospital and Health Services (HHS) established on 1 July 2012 to provide public health services in Queensland. The report summarises the results of QAO's financial audits, the timeliness and quality of financial reporting and the systemic issues with internal controls identified during their audits. QAO also analysed indicators of financial performance and sustainability with which each HHS can be assessed.

There were no additional specific recommendations in this report directed to Metro South Health.

Report 13: 2013–14 Right of Private Practice: Senior medical officer conduct

This was the second report relating to the performance audit of the right of private practice (RoPP) arrangements

at Queensland's HHSs. It focussed on the third line of inquiry, which was to determine whether practitioners were participating in the scheme with probity and propriety and in full compliance with their contractual conditions.

Allegations of widespread absenteeism received by QAO could not be substantiated nor disproved. The attendance monitoring systems at HHSs lacked basic accountability and relied primarily on the integrity of senior medical officers (SMOs). Further, basic administrative processes relating to requesting and processing of SMO leave failed and the responsibilities and requirements of employees operating within the processes were unclear, increasing the risk of inadvertent error or intentional misconduct.

In some cases, allowing SMOs to structure their weekly work arrangements contributed to additional overtime and the extent of overtime paid and on-call allowances indicated that more than four per cent of SMOs were at increased risk of fatigue.

Some SMOs were afforded access to hospital facilities to treat their own private sector patients, resulting in the private business of SMOs being subsidised. Some surgeons were double dipping and others were breaching their RoPP contracts.

QAO made six recommendations for improvement to HHS processes. In a letter dated 3 February 2014, the Metro South Hospital and Health Board Chair wrote to the Auditor-General indicating agreement with the first five recommendations, and indicating that the sixth recommendation did not have relevance to Metro South Health.

Report 17: 2013–14 Queensland Ambulance Service performance

This audit examined the operational effectiveness of the Queensland Ambulance Service (QAS), focusing on service access and responsiveness, integration with Queensland Hospitals regarding patient handover and QAS performance monitoring and reporting systems.

Key findings included:

- QAS responds quickly to most incidents, providing a quality and equitable service across the State, despite not meeting many of its own targets for dispatch, response and Code 2 incidents. It is outperforming the rest of Australia in statewide median response times
- a pressing issue is the rapid escalation in growth in

the use of ambulance services by Queenslanders, particularly for emergency and urgent incidents. Ageing population and increasing incidence of chronic diseases contribute to this accelerating growth in demand

- QAS is a high cost organisation, compared to ambulance services in other jurisdictions, with the highest cost per head of population—the key determinant of overall efficiency. QAS could better manage employee costs, such as meal overtime and unplanned absence
- the ability of QAS to continue to provide its current standards of emergency and pre-hospital care for patients is at risk. A whole-of-government response is required to address these challenges for QAS.

Recommendations included:

- facilitating the sharing of hospital patient outcome data with QAS to help measure the effect of pre-hospital care on patient outcomes
- determining underlying causes for the rapid growth in demand for QAS emergency responses, and implement strategies to address these causes and reduce the cost per head of population to service this demand.

Risk management

Metro South Health is committed to managing risk in a proactive, integrated and accountable manner. The health service's risk management practices recognise and manage risks and opportunities in a balanced manner. Risk is an inherent part of the health service's operating environment. Risk management activities are incorporated into strategic planning, governance reporting and operational processes.

Metro South Health has a risk management policy and integrated risk management framework based on the *Australian/New Zealand ISO Standard 31000:2009* for risk management. The policy and framework outline Metro South Health's intent, roles, responsibilities and implementation requirements. All accountability areas are responsible for implementing the policy and framework, and developing and maintaining risk registers.

The risk management framework defines the processes for risk identification, recording, rating, key controls identification, determination of risk treatment required and regular monitoring and reporting of risks. Key accountability bodies within our risk framework include:

- **Metro South Hospital and Health Board**
The Board retains ultimate responsibility for monitoring key risks and ensuring there are systems and processes in place to identify, manage and monitor these risks. The Board has delegated responsibility for overseeing risk management activities to the Audit and Risk Committee
- **Audit and Risk Committee**
The Audit and Risk Committee oversees the assurance of the health service’s risk management framework, internal control structure and systems’ effectiveness for monitoring compliance with relevant laws, regulations and government policies
- **Metro South Health Service Executive**
The executive management team, known as Metro South Health Service Executive, has active risk management responsibilities both collectively and individually as executive directors in charge of separate service delivery streams.

Risks are controlled within the financial and management accountabilities of each position. The Health Service Chief Executive is supported by the executive director of each stream. The Health Service Chief Executive and executive directors manage risks with support from management structures within their areas of responsibility. Significant risks are reported to the Board and the Audit and Risk Committee on a regular basis.

The Audit and Risk Committee aims to oversee Metro South Health’s risk management activities and procedures by mitigating risks to tolerable levels, managing the risks that may affect the ability to continue to provide services, the development and integration of a strategic approach to managing risks (strategic, operational and financial), and embedding the process into routine governance and management practice.

Internal Audit

Internal Audit is an integrated component of corporate governance, promoting efficient management and assisting in risk management. The function operates under the Board charter, consistent with the internal auditors’ standards. In line with the overriding requirement of independence from management and to maintain objectivity, the head of Internal Audit reports directly to the Audit and Risk Committee for the effective, efficient and economical operation of the function. The Internal Audit function operates with due regard to Queensland Treasury and Trade’s Audit Committee Guidelines.

The Internal Audit unit has a central role in improving operational processes and financial practices by:

- assessing the effectiveness and efficiency of Metro South Health’s financial and operating systems, reporting processes and activities
- identifying operational deficiencies and non-compliance with legislation or prescribed requirements
- assisting in risk management and identifying deficiencies in risk management
- bringing a broad range of issues to management’s attention, including performance, efficiency and economy
- monitoring whether agreed remedial actions have been undertaken.

The strategic and annual audit plan, endorsed by the Audit and Risk Committee and approved by the Board, directs the unit’s activities and provides a framework for its effective operation. A risk-based planning approach is used to develop audit plans, including considering risk registers and consulting with internal stakeholders and the QAO. Audit reports include recommendations to address deficiencies in risk treatment and all audit reports are reviewed by the Audit and Risk Committee.

2013–14 Highlights



Achievements for 2013–2014 include:

- continued development of in-house capability and knowledge
- provision of value-added services including fraud investigations, by-request reviews and acquittal certificates
- implementation of an electronic audit tool that will increase efficiency in line with leading audit practices
- continued development of the internal audit function as a business partner within Metro South Health
- 100 per cent of audit recommendations achieved through understanding business operations and negotiation with management
- completion of the approved audit plan, targeting higher risk areas and improving the effectiveness of systems, processes and risk management.

Information systems and recordkeeping

Changes to recordkeeping practices and systems in 2013–2014

Metro South Health undertook the following changes to recordkeeping practices and systems:

- in June 2014, scanning of inpatient records on discharge commenced at Princess Alexandra Hospital as part of release one of the integrated electronic Medical Record (ieMR). Inpatient notes are available for viewing within 48 hours of being received by the Scanning Unit
- a Metro South Health forms management process was established to standardise and ensure consistency of forms across the health service
- a framework was put in place to standardise non-clinical records management across Metro South Health to ensure consistency with specified legislation, policy and standards.

Recordkeeping roles and responsibilities

All new Metro South Health employees are made aware of their responsibilities regarding security, confidentiality and management of medical records at a variety of forums including staff orientation and department inductions. Each facility within Metro South Health has procedures to ensure all aspects of medical record management are undertaken appropriately.

Training is provided to all relevant administrative officers and competency assessments are undertaken to ensure staff are able to meet record management requirements. Relevant information packs and electronic resources are made available to assist in records management. Health Information Management Services staff routinely attend administrative forums and meetings to ensure important updates, issues and process changes are communicated and understood. Audits and reviews are undertaken and results fed back to relevant areas to ensure compliance with records management processes.

Medical records department staff undergo training and orientation processes to ensure they are competent in the requirements of record management. Staff undertake training and competency assessment for each position they perform within the department. Procedures and processes within the department are constantly reviewed

to ensure a high level of service is provided at all times.

Written and electronic resources are available at all times to assist in maintaining a high level of service.

Audits are routinely undertaken within and external to the medical records department to ensure that the record management system is operating appropriately.

Management of records

Across Metro South Health, each facility has a medical records department responsible for the lifecycle management of the clinical records in accordance with the relevant statutory requirements. Non-clinical records are managed through each service's administration department.

Digital records—integrated electronic Medical Record (ieMR)

Princess Alexandra Hospital commenced scanning of inpatient notes into the ieMR in June 2014. Information is scanned within 48 hours of the notes arriving in the Scanning Unit and is then available for viewing in the ieMR.

Quality and auditing processes have been implemented to ensure a high quality scanning service is provided at all times. Numerous electronic and paper resources are available for all relevant staff to ensure the information in the ieMR is accurate and available as soon as possible.

Redland and QEII Jubilee hospitals currently manage a paper medical record system. Logan Hospital has had an electronic system since 2008 that supports the scanning of clinical information. It is anticipated that the ieMR will be available at each Metro South Health facility within the next 2–3 years.

Reliability and security

Metro South Health is compliant with the Queensland Government's *Information Standard 40: Recordkeeping*. Metro South Health-wide procedures have been implemented to ensure security of clinical records are maintained.

Back-up systems are in place and maintained to ensure records can be located and delivered during down times of the patient master index.

All facilities have physical security measures in place such

as swipe card access to secure departments, information windows, visitor registers and medical record tracking systems.

Retention and disposal

Metro South Health facilities adhere to the Queensland State Archives *Health Sector (Clinical Records) Retention and Disposal Schedule 2012*. There is an ongoing culling and destruction process. The State Archives is still completing a schedule for the management of functional records. Until a schedule is provided, all functional records within Metro South Health are being permanently retained.

Metro South Health is compliant with Queensland Government *Information Standard 31: Retention and Disposal*. Medical record destruction is undertaken regularly at facilities, in line with current retention schedule requirements. Destruction is undertaken in line with best practice and audits are completed to ensure accuracy.

Confidential information disclosure

Section 160 of the *Hospital and Health Boards Act 2011* requires that any confidential information disclosures made in the public interest by a service are outlined in the annual report for that service. There was one disclosure of confidential information by Metro South Health under this provision in 2013–2014:

- the release of medical information to Mater Health Services to enable the review of a clinical incident with a severity assessment code of 1 (SAC1) by the Mater Health Service.

Open data

The Queensland Government has committed to releasing as much public service data as possible through its Open Data Initiative. Under the initiative, a large volume of government data, where suitable for release, is published on the following website:

www.qld.gov.au/data

Metro South Health has published the following data on the government's Open Data website:

- health service expenditure on consultancies
- information relating to staff overseas travel including employee name, costs, purpose and destination.

