## **Clinical Council**

The NSW Health Pathology Clinical Council (the Council) has been established as a Committee of the NSW Health Pathology Board pursuant to clause 33 of the Board Constitution.

This Charter sets out the role, responsibilities and composition of the Council.

#### 1. Role

The role of the Council is to foster close relationships between NSW Health Pathology and key stakeholders and to provide a forum for consulting with and involving clinicians in the development and delivery of NSW Health Pathology's strategy, clinical policy and pathology, forensic and analytical science services which support stakeholder priorities and needs as they relate to patient care and community needs.

In fulfilling its responsibilities, the Council will observe and promote the core organisational values of Respect, Integrity, Teamwork and Excellence. The Council is an advisory committee only and has no decision-making powers.

## 2. Responsibilities

The Committee is directly responsible and accountable to the Board for the exercise of its responsibilities. In carrying out its responsibilities, the Committee must at all times recognise that the Board has primary responsibility for the governance, risk management and compliance of the organisation and the Chief Executive has primary responsibility for the management of the organisation.

The responsibilities of the Council are providing the NSW Health Pathology Board and Chief Executive with advice on:

- a) changes to models of care, new developments for service delivery/configuration and any other issues relevant to the delivery of pathology, forensic and analytical science services;
- b) strategic, clinical service and operational planning;
- c) opportunities for service delivery improvement presented by new and emerging technology and innovation developments;
- d) the integrity and appropriateness of information communication including the transfer and rendering of results; and
- e) providing advice on any other matters referred to it by the Board or Chief Executive.

## 3. Membership

#### 3.1 Members

The Chair of the Council shall be appointed by the Chair of the Board. The Chair shall serve for the duration of their appointment to the Council.

The Council shall consist of the following members:

- Director, Medical Services and Chief Pathologist (Chair);
- Member of the Board;



## **Clinical Council**

- NSW Health Pathology Chief Executive or the Chief Executive's delegate;
- Representative (not working in pathology) from a Local Health District or Specialty Network (to be sourced via nominations by clinicians on the applicable Local Health District/Specialty Network Medical Staff Council and endorsed by the Chief Executive of the relevant Local Health District/Specialty Network);
- Representative from the Agency for Clinical Innovation;
- Representative from the Clinical Excellence Commission;
- Representative from the Health and Education Training Institute;
- Representative from the Bureau of Health Information;
- Representative from the Office of the State Coroner;
- Representative from NSW Ambulance;
- Representative from the Cancer Institute;
- Representative from the Office of Health and Medical Research;
- One pathology registrar and one non-pathology registrar;
- Community member from Health Consumers NSW.

Appointment of additional members of the Council, and removal of Council members, shall be by the Board in accordance with the Board Constitution and in consultation with the NSW Health Pathology Chief Executive.

Board members appointed to the Council hold office for such a period as the Board may determine, or until the person's appointment as a member of the Board expires and is not renewed or the office is otherwise vacated, whichever occurs first.

#### 3.2 Attendees

The following positions will be invited to attend each meeting of the Council:

- Director, Clinical Operations;
- Director, Statewide Clinical Services and Chief Medical Information Officer;
- Director, Strategy and Transformation
- Director, Scientific and Technical Strategy;
- Director, Forensic and Analytical Science Services; and
- Director, Public Health Pathology.

The Chair of the Council may invite any person as it determines to attend and address a meeting of the Council (either for the duration of the meeting or in relation to a specific agenda item).

## 4. Secretariat Support

The Director, Medical Services is responsible for providing secretariat support to the Council.

## 5. Meetings

## 5.1 Frequency and Location

Council meetings may be held face to face, by telephone, videoconference, or other electronic means. The Council shall meet at least four times per year for 1.5 hours.



## **Clinical Council**

The Chair of the Council may request the Chair of the Board to give written approval to the conduct of a special meeting where the Chair of the Council considers that a matter is of such urgency that a special meeting should be held. If approved, a special meeting shall be held at least 48 hours but not later than 7 days after receipt by the Chair of the Board of such a request. The Chair of the Council is to ensure that at least 24 hours' notice is given of a special meeting to every member of the Council and each person invited to attend the meeting. Notice of a special meeting is to specify the business to be considered at that meeting, and only business specified in the notice is to be considered at the special meeting.

## 5.2 Quorum

A quorum shall consist of a majority of members. Attendees do not count towards the quorum.

## 5.3 Decision-making

Decisions of the Council shall be by consensus of members (attendees do not have any voting rights). Decisions unable to made by consensus are to be escalated to the Board. Decisions may be made at a duly called and constituted meeting, or by a resolution in writing to all members and physically or electronically signed by all members. Decisions are to be stated in the minutes of the meeting at which they were decided.

## 5.4 Agenda and Minutes

The agenda shall be agreed by the Chair prior to the meeting. All papers must be submitted to the Secretariat by the specified submission deadline. The agenda and papers shall be distributed by the Secretariat at least one week prior to the meeting dates. Only with the Chair's permission will late papers be accepted.

All meetings shall be minuted, and the minutes distributed to all members of the Council with the agenda papers for the next meeting. The deliberations and minutes of the Council must be submitted to the Board for information.

## 6. Reporting

The Council shall provide a report to the Board at each Board meeting which includes matters considered or approved by the Council or referred to the Board for consideration or decision, any matters of concern and emerging issues. The report is a standing agenda item at each Board meeting and will be prepared and presented to the Board by the Chair of the Council.

In addition, the Council will, at least once a year, report to the Board and Chief Executive on its operation and activities during the year. The report should include:

- a summary of the work the Council performed to fully discharge its responsibilities during the preceding year; and
- details of meetings, including the number of meetings held during the relevant period, and the number of meetings each member attended.

Should the Council need to refer or report a matter to another Board Committee, the Chair will write to the respective Chair, with a copy to the Board Chair.



## **Clinical Council**

## 7. Conflicts of Interest

Council members must declare any conflicts of interest at the start of each meeting or before discussion of the relevant agenda item or topic. Details of any conflicts of interest should be appropriately minute and recorded in NSW Health Pathology's <a href="Conflicts of Interest and Gifts and Benefits Procedure">Conflicts of Interest and Gifts and Benefits Procedure</a>.

Where members or observers at the Council meetings are deemed to have a real, or perceived, conflict of interest it may be appropriate that they are excused from Council deliberations on the issue where a conflict of interest exists.

#### 8. Evaluation

The Committee shall undertake an annual self-assessment of the effectiveness of the Committee and provide that information to the Board, along with any information the Board requests to facilitate its review of the Committee's performance and its membership.

## 9. Review of Charter

This Charter will be reviewed by the Council at least every 2 years. This review will include consultation with the Board. Any substantive changes to this Charter will be recommended by the Council and formally approved by the Board Chair.

## 10. Version History

Version No	Approval Date	Approved By	Details
1.0	28 October 2020	Board	
1.1	18 June 2021		Minor amendments to reflect changes to NSWHP Attendee Position Titles
1.2	14 November 2022	Board Chair	Minor amendment to meeting duration