

Charter

Medical and Dental Appointments Advisory Committee

The NSW Health Pathology Medical and Dental Appointments Advisory Committee (the Committee) has been established as a Committee of the NSW Health Pathology Board pursuant to clause 33 of the Board Constitution.

This Charter is to be read in conjunction with the Terms of Reference for the Committee signed by the Secretary, NSW Ministry of Health on 25 February 2019. These documents set out the role, responsibilities and composition of the Committee.

1. Role

The role of the Committee is to provide advice, and where appropriate make recommendations, to the Chief Executive on appointment or proposed appointment of staff specialists, dentists or postgraduate fellows and the clinical privileges that should be granted to those persons.

In fulfilling its responsibilities, the Committee will observe and promote the core organisational values of Respect, Integrity, Teamwork and Excellence. The Committee is an advisory Committee only and has no decision-making powers unless delegated to it by the Board.

2. Responsibilities

The responsibilities of the Committee are as stipulated in clauses 2 and 3 of the Committee Terms of Reference, namely:

2.1 In respect of medical practitioners employed by NSW Health Pathology

- (1) The Committee will:
 - (a) provide advice, and where appropriate make recommendations with reasons, to the Chief Executive of NSW Health Pathology concerning matters relating to the appointment or proposed appointment of staff specialists, dentists or postgraduate fellows;
 - (b) consider any application that has been referred to the Committee by the Chief Executive of NSW Health Pathology for:
 - (i) appointment of a staff specialist, dentist or postgraduate fellow; or
 - (ii) a proposal to appoint a person as a staff specialist, dentist or postgraduate fellow;
 - (c) provide advice, and where appropriate make recommendations with reasons, to the Chief Executive of NSW Health Pathology concerning the clinical privileges which should be allowed to staff specialists, dentists and postgraduate fellows; and
- (2) Where the Chief Executive of NSW Health Pathology has delegated such a function to that position, the medical administrator of NSW Health Pathology (however designated) may appoint a staff specialist or postgraduate fellow to an available position for a period not exceeding three (3) months. Such appointment may be extended for one further single 3-month period. However, any exercise of this delegation shall be subject to the advice of the Committee, if the advice or recommendation of the Committee is required for that position.

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2.2 In respect of medical practitioners employed or appointed by a Local Health District or Specialty Network:

- (1) The Committee will:
 - (a) provide advice, and where appropriate make recommendations with reasons, to the Chief Executive of a Local Health District or Specialty Network concerning matters relating to the appointment or proposed appointment of staff specialists, dentists, visiting practitioners or postgraduate fellows who undertake work in an NSW Health Pathology laboratory;
 - (b) consider any application that has been referred to the Committee by the Chief Executive of a Local Health District or Specialty Network for:
 - (i) appointment of a staff specialist, visiting practitioner, dentist or postgraduate fellow; or
 - (ii) a proposal to appoint a person as a staff specialist, visiting practitioner, dentist or postgraduate fellow; and
 - (c) provide advice, and where appropriate make recommendations with reasons, to the Chief Executive of a Local Health District or Specialty Network concerning the clinical privileges which should be allowed to staff specialists, visiting practitioners, dentists and postgraduate fellows for work undertaken in a NSW Health Pathology laboratory.

3. Membership

3.1 Members

In accordance with clause 4 of the Committee Terms of Reference, the Committee shall be composed of:

- 2 members appointed by the Board (at least one of whom is not a medical practitioner), one of whom is to be nominated as the Chair of the Committee;
- 2 members nominated by the NSW Health Pathology Medical Staff Council;
- the Chief Executive or his/her nominee;
- the Director, Medical Services and Chief Pathologist or his/her nominee;
- such of the following persons (being medical practitioners) appointed by the Chief Executive as are necessary, in the Chief Executive's view following consultation with the two members nominated by the NSW Health Pathology Medical Staff Council, for the proper consideration of a matter or class of matters referred to the Committee:
 - a. one representative of NSW Health Pathology relevant to the matter under consideration;
 - b. one representative with qualifications in the specialty or subspecialty relevant to the matter under consideration;
 - c. one representative of a university affiliated with NSW Health Pathology for the purposes of the training of health practitioners'
- where a matter or class of matters referred to the Committee concerns the appointment or clinical privileges of a person who provides services or undertakes works in an NSW Health Pathology laboratory, a representative of the laboratory to which the appointment relates.

A member of the Committee who is appointed by the Board shall hold office for such period

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as the Board determines. A member of the Committee who is a nominee of the NSW Health Pathology Medical Staff Council is to hold office for 3 years. Where a member has been appointed to, or is nominated to be on, the Committee for the purpose of considering a particular matter or matters, he or she is a member only for the period or periods during which that matter or matters is under consideration by the Committee.

A member of the Committee shall absent themselves from the meeting during any discussion by the Committee of the appointment or clinical privileges of that member.

3.2 Attendees

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

4. Credentials (Clinical Privileges) Subcommittee

The Committee is to establish at least one subcommittee called the Credentials (Clinical Privileges) Subcommittee (the Sub-Committee) to provide advice to the Committee on all matters concerning the clinical privileges of visiting practitioners, staff specialists, dentists or postgraduate fellows. The responsibilities and membership of the Subcommittee shall be as stipulated in clauses 6, 7 and 8 of the Terms of Reference.

5. Secretariat Support

The Director, Medical Services and Chief Pathologist is responsible for ensuring Secretariat support for the Committee and Subcommittee.

6. Meetings

6.1 Frequency and Location

Committee and Subcommittee meetings may be held face to face, by telephone, videoconference, or other electronic means. The Committee shall meet monthly (except for January). The Subcommittee shall meet as required and determined by the Chair of the Subcommittee.

The Chair of the Committee may request the Chair of the Board to give written approval to the conduct of a special meeting where the Chair of the Committee 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 Committee is to ensure that at least 24 hours' notice is given of a special meeting to every member of the Committee 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.

6.2 Quorum

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

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6.3 Decision-making

Decisions of the Committee and Subcommittee shall be by consensus of members (attendees do not have any voting rights). Decisions of the Committee unable to be made by consensus are to be escalated to the Board, and decisions of the Subcommittee unable to be made by consensus are to be escalated to the Committee. 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 made at a meeting are to be stated in the minutes of the meeting at which they were decided.

6.4 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 Committee or Subcommittee (as applicable) with the agenda papers for the next meeting. The deliberations and minutes of the Committee must be submitted to the Board for information.

7. Reporting

7.1 Reporting to the Board and other Board Committees

The Committee shall provide a report to the Board at each Board meeting which includes matters considered or approved by the Committee 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 Committee.

In addition, the Committee 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 Committee 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 Committee 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.

8. Conflicts of Interest

Committee and Subcommittee 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 minuted and recorded in NSW Health Pathology's Conflicts of Interest Register in accordance with [NSW Health Pathology's Conflicts of Interest and Gifts and Benefits Procedure](#).

Where members or observers at a Committee or Subcommittee meeting are deemed to have a

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real, or perceived, conflict of interest in a matter, the Chair may decide to exclude them from Committee or Subcommittee deliberations on the matter.

9. Evaluation

The Committee shall undertake an annual self-assessment of the effectiveness of the Committee (including the Subcommittee) 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.

10. Review of Charter

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

11. Version History

Version No	Approval Date	Approved By	Details
1.0	29 October 2020	Board	
1.1	18 June 2021	Board Chair	Minor amendments to reflect changes to NSWHP Attendee Position Titles
1.2	14 November 2022	Board Chair	No changes required