

## TITLE

Board Subcommittee attendance and Charter review

<input type="checkbox"/> For information	<input checked="" type="checkbox"/> For approval
<input type="checkbox"/> For discussion	<input checked="" type="checkbox"/> For endorsement

## PURPOSE

To seek the Chief Executive's endorsement and Board Chair's approval of changes to management representation at Board subcommittee meetings and associated changes to the Board subcommittee Charters

## RECOMMENDATIONS

That the Chief Executive endorse, and the Board Chair approve:

- the proposed changes to management attendance at Board subcommittee meetings and
- the amendments to the Charters for each of the subcommittees, as provided in [Appendix 1](#).

## BACKGROUND

- In October 2023, the Chief Executive tasked the Director, Legal and Corporate Governance with reviewing NSWHP's management committee structure. Feedback obtained from SLT and other senior managers during the review indicated that, while the current committee structure enabled appropriate collaboration and consultation on key areas of decision-making, overall, the structure had failed to keep up with changes to NSWHP's strategy and accountabilities.
- A new committee structure was proposed and endorsed by SLT in December 2023. One of the key objectives of the new structure is to ensure that there is adequate management oversight of strategic focus areas and key accountabilities and risks, particularly in relation to performance (financial and operational), quality and clinical safety, and strategy design and delivery.

## KEY ISSUES

- One of the expected benefits of the new committee structure, in particular the new Performance Management Committee and Statewide Quality and Clinical Safety Committee, is that it will allow more time to be spent at Board subcommittee meetings on governance rather than management matters. In addition, it is hoped that sharper committee oversight and deliberations at the management level will support improved information sharing and escalation at the Board and Board subcommittee level. As part of this, SLT subcommittee meeting cadence and reporting will be designed to align with the Board subcommittee requirements.
- To ensure a clearer delineation between governance and management accountability, it is recommended that SLT and senior manager attendance at Board subcommittee meetings be refined as follows:
  - Quality and Clinical Safety Committee – Chief Executive, Director of Clinical Governance (Patient Safety), Chief Pathologist, Chief Information Officer, Associate Director Clinical Operations, Director of Scientific and Technical Strategy, Chief Operating Officer, Associate Director of Clinical Governance (Quality)
  - Finance and Performance Committee – Chief Executive, Director of Finance and Corporate Services, Chief Operating Officer, Director of People and Culture, Associate Director of Financial Operations, Associate Director of Revenue and Process Improvement, and Associate Director of Planning and Performance
  - Audit and Risk Management Committee – Chief Executive, Director of Corporate Governance, Director of Finance and Corporate Services, Enterprise Risk Manager
- Other SLT members and senior managers will be invited to attend specific agenda items of the Board subcommittee where they are required to present or provide information.
- The Chairs of the Board subcommittees have been consulted on the proposed changes.
- An additional amendment has been made to the Quality and Clinical Safety Subcommittee Charter to emphasise management's responsibility to provide relevant information and in-depth reporting to enable the Committee to fulfil its responsibilities in relation to current and planned use of data and technology.

## NEXT STEPS/RECOMMENDED ACTIONS:

- Subject to Chief Executive endorsement and Board Chair approval, clean versions of the updated charters will be provided to the Board for information published and published on the NSWHP intranet and extranet.

- It is anticipated that the changes in attendance will be implemented over the next 1-2 scheduled subcommittee meetings, however the SLT sponsors of each of the subcommittees have undertaken to work with the relevant chair beyond that time to ensure adequate information flows, including support for agenda setting and improved reporting.

**CONSULTATION**

- SLT
- Board subcommittee chairs

**RISK**

<b>Risk Statement</b>	If NSWHP does not adopt a fit for purpose governance framework due to the failure to implement the new Committee structure then NSWHP will struggle to deliver on its objectives and meet its performance and compliance obligations
<b>Risk Category</b> <i>Select relevant category (one only)</i>	<input type="checkbox"/> Clinical Care and Patient Safety <input type="checkbox"/> Health of the Population <input type="checkbox"/> Workforce <input type="checkbox"/> Communication and Information <input type="checkbox"/> Facilities and Assets <input type="checkbox"/> Security <input type="checkbox"/> Emergency Management <input type="checkbox"/> Legal <input type="checkbox"/> Finance <input type="checkbox"/> Work Health and Safety <input type="checkbox"/> Environmental <input checked="" type="checkbox"/> Leadership and Management <input type="checkbox"/> Community Expectations
<b>Risk Mitigation Strategy</b>	Refer to Next Steps/Recommended Actions

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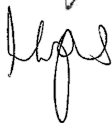
**Brief approved by:**

Ms Vanessa Janissen, Chief Executive



Date: 18 April 2024

Dr Nigel Lyons, Board Chair



Date: 22 April 2024

**List of appendices**

- [Appendix 1 – Updated Board subcommittee charters](#)