

TERMS OF REFERENCE

Northern Sydney Local Health District Clinical Council

1. TITLE

Northern Sydney Local Health District Clinical Council (NSLHD Clinical Council)

2. PURPOSE

The NSLHD Clinical Council has been established to:

- Provide a forum to discuss and provide input into strategic planning, priorities for service development, resource allocation, clinical policy development and providing professional (expert) clinical guidance (where appropriate and when needed) to the Chief Executive.
- Facilitate the input of clinicians into the strategic decision-making process, bringing together the LHD Executive, Clinical Networks and senior clinicians on a regular basis.

3. RESPONSIBILITIES

The NSLHD Clinical Council will be required to meet obligations relating to patient safety and quality outlined within the NSLHD By-laws.

The Council will provide the Chief Executive with advice on clinical matters including:

- a. Providing leadership for the quality of health care within NSLHD by measuring, analyzing, evaluating, and reporting the quality of care that is delivered to consumers.
- b. Improving quality, safety, and standards of care through clinical policy within the LHD
- c. Leading evidence based, data driven practice into local delivery of services, minimising inappropriate clinical variation.
- d. Developing innovative solutions that best address the needs of our local communities.
- e. Resource allocation in an activity-based funding environment.
- f. Other related matters on which the Chief Executive may seek advice.

The Council will provide reports to the Chief Executive on the activities of the Clinical Networks, including updates on the implementation of the NSLHD Clinical Services Plan, the NSLHD Clinical Governance Framework, opportunities and issues relating to clinical care, quality and safety, education and research.

4. MEMBERSHIP

- Chief Executive, NSLHD
- Executive Director Operations, NSLHD

- Director Operations NSLHD
- Clinical Network Directors and Clinical Network Managers of the following Networks:
 - Acute and Critical Care Medicine
 - Cancer Services
 - Cardiothoracic and Vascular Health
 - Children and Young People
 - Chronic and Complex Medicine
 - Maternal, Neonatal and Women’s Health
 - Musculoskeletal, Integumentary and Trauma
 - Neurosciences
 - Rehabilitation and Aged Care
 - Supportive and Palliative Care
 - Surgery and Anaesthesia
- Executive Director Medical Services NSLHD
- Executive Director Officer of the Chief Executive NSLHD
- Executive Director Finance and Corporate Services NSLHD
- Executive Director Clinical Governance and Patient Experience NSLHD
- Executive Director Nursing and Midwifery NSLHD
- Executive Director People and Culture NSLHD
- Executive Director Northern Beaches Hospital Partnership NSLHD
- Director Performance, Analytics and Business Intelligence NSLHD
- Executive Director Allied Health NSLHD
- Director Aboriginal and Torres Strait Islander Health and Workforce NSLHD
- Executive Director Media and Communications NSLHD
- Director Mental Health Drug and Alcohol NSLHD
- Director Public Health NSLHD
- Director Population and Planetary Health NSLHD
- Chief Digital Health and Information Officer NSLHD and CCLHD
- Service Director, Mental Health Drug and Alcohol
- Clinical Director, Mental Health Drug and Alcohol
- Service Director, Primary and Community Health (PACH)
- Service Director, Prevention and Response to Violence Abuse and Neglect (PARVAN)
- General Manager, Royal North Shore Hospital
- General Manager, Hornsby Ku-ring-gai Hospital
- General Manager, Ryde Hospital
- General Manager, Mona Vale Hospital
- General Manager, Virtual Care and Hospital in the Home Services NSLHD
- Chair NSLHD Medical Staff Executive Council (MSEC) or representative
- Chair, Research
- Kolling Institute representative
- Chief Executive Officer, Sydney North Primary Health Network
- Consumer representative
- NSW Health Advisory Council representative

a. QUORUM

Quorum is 50 per cent of core membership +1.

5. CHAIR

Expression of Interest via nomination by the membership of the NSLHD Clinical Council. Chair to be rotated every 2 years with Chief Executive discretion to increase duration of Chair's term of service. The Chief Executive NSLHD will co-chair and chair in absence of nominated Chair.

6. EXECUTIVE SPONSOR

Chief Executive, NSLHD.

7. COMMITTEE SECRETARIAT

Executive Officer, Operations NSLHD.

8. FREQUENCY OF MEETINGS

The Council will convene a minimum of 11 meetings per year set in advance from the first meeting of the New Year. The agenda will alternate between standard items and focus areas. The meetings that have a focused agenda will have summary of key outcomes and action items. The Chair of the Council is to ensure agenda and minutes are provided to each member no less than 5 working days prior to regular meetings.

The Chair/Co-Chair has the power to call special meetings as it deems necessary. The Chair may request the Chief Executive give written approval to conduct a special meeting. Notice of the special meeting is to specify the business to be considered at the meeting.

The Chair is to ensure that at least 24 hours' notice is given of a special meeting to each member and each person invited to the meeting. Only special business specified in the notice is to be considered at the special meeting. The special meeting shall be held, if approved, not later than seven days after receipt, by the Chief Executive, of the request.

9. REPORTS

- Chief Executive Report
- Facilities/Services Reports
 - General Manager, Royal North Shore Hospital
 - General Manager, Hornsby Ku-ring-gai Hospital
 - General Manager, Ryde Hospital
 - General Manager, Mona Vale Hospital
 - Service Director, Mental Health Drug and Alcohol
 - Service Director, Primary and Communit Health
- Clinical Quality and Patient Safety
- Sydney North Health Network Report
- Consumer Report

10. REPORTING COMMITTEES

- Royal North Shore Hospital Clinical and Quality Council
- Hornsby Ku-ring-gai Hospital Clinical and Quality Council

- Ryde Hospital Clinical and Quality Council
- Mona Vale Hospital Clinical and Quality Council
- NSLHD Mental Health Drug and Alcohol Clinical and Quality Council
- District Infection Prevention & Control
- Drug & Therapeutic Committee
- Policies, Procedures & Guidelines Committee
- Patient Blood Management Committee
- National Standards Governance Committee

11. METHOD OF EVALUATION

The NSLHD Clinical Council shall undertake a review of the appropriateness of these Terms of Reference annually. In addition, the NSLHD Clinical Council shall perform a self-assessment of the effectiveness of the Council every two years, by way of surveys and or interviews with various parties involved in the Council.