



The Sydney  
children's  
Hospitals Network

care, advocacy, research, education

C O R P O R A T E  
G O V E R N A N C E  
A N D  
M A N A G E M E N T  
C O M M I T T E E  
F R A M E W O R K

THE SYDNEY CHILDREN'S HOSPITALS NETWORK



## CONTENTS

Introduction and Purpose	4
SCHN Corporate Governance framework	4
Corporate Governance Standards	5
Standard 1: Establish robust governance and oversight functions	5
Standard 2: Ensure clinical responsibilities are clearly allocated and understood	5
Standard 3: Set the strategic direction for the organisation	5
Standard 4: Monitor financial and service delivery performance	7
Standard 5: Maintain high standards of professional and ethical conduct	8
Standard 6: Involve stakeholders in decisions that affect them	8
Standard 7: Establish sound audit and risk management practices	8
SCHN Management Committee Framework	9
SCHN Corporate Governance and Management Committees	9
SCHN Network and Key Site Based Committees	11

## VERSION CONTROL

Version and Date	Description / Comments	Updated by
V1 September 2018	Draft governance framework	T Petty
V2 October 2018	Draft corporate governance framework, updated to include Capital Planning and Monitoring Sub-committee	T Petty
V3 February 2019	Endorsed by Audit and Risk Committee with minor changes to wording	T Petty

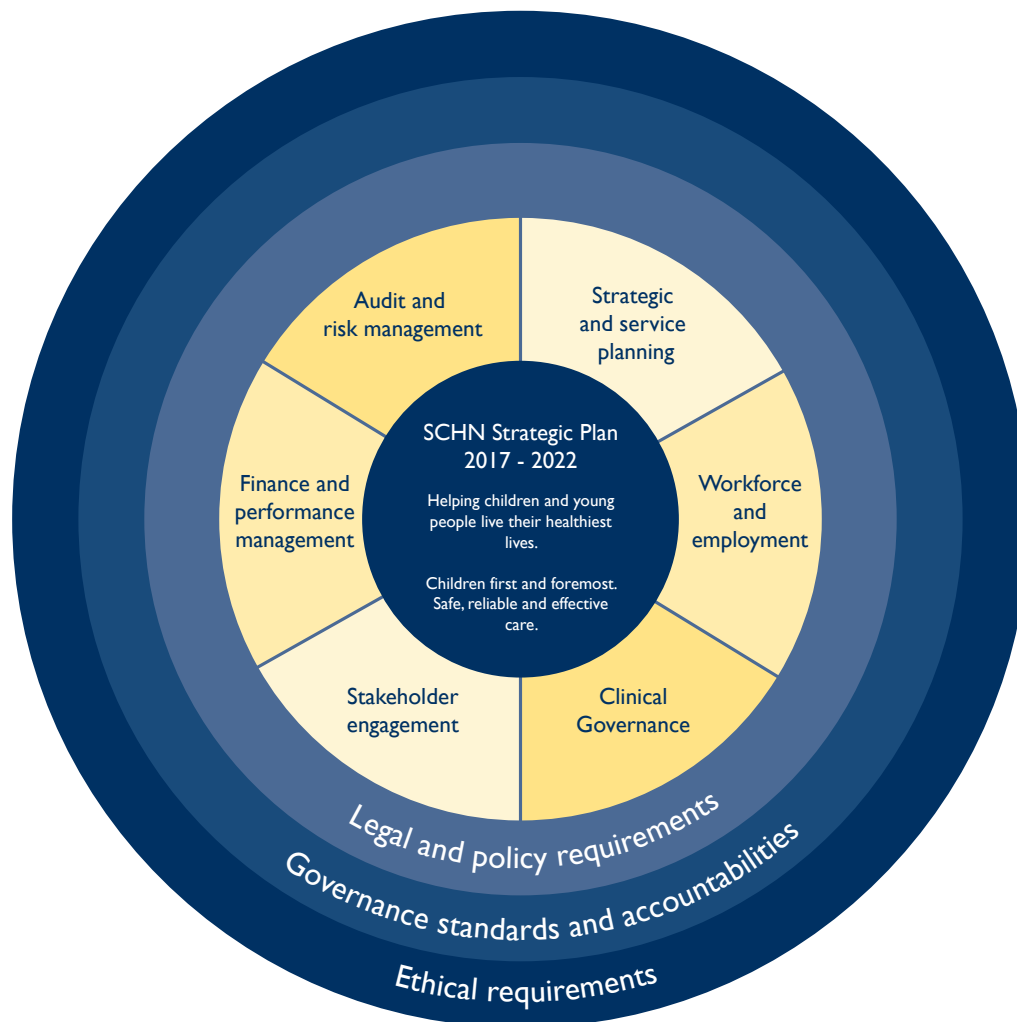
## INTRODUCTION AND PURPOSE

This framework articulates the governance and management committee structure for The Sydney Children's Hospitals Network (the Network), and is focused on ensuring robust corporate governance standards across executive or peak committees. The framework is aligned with NSW Health's System Governance and System Management Committee Framework, NSW Health's Corporate Governance Compendium and the 2018-2019 Service Agreement between the Secretary, NSW Health and the Network.

This framework delivers a coordinated focus across committees on strategic priorities and system performance, balanced against the need to manage critical emerging issues and general business matters.

## SCHN CORPORATE GOVERNANCE FRAMEWORK

NSW Health's Corporate Governance and Accountability Compendium outlines the key elements of robust governance for organisations within NSW Health, which is supported by the CORE values (collaboration, openness, respect and empowerment). In applying this to the Network, the governance framework is summarised in the diagram below. At the centre are the key elements of effective governance all public health organisations are responsible for managing, and the outer circles are the key external governance requirements that apply to all of our activities.



The SCHN committee framework provides an oversight function of these key areas of governance which includes the peak committees as required by the Health Services Act 1997 (NSW), and as defined in the NSW Health By-laws which include the Network's Board, Board Subcommittees, and legislatively required committees.

## GOVERNANCE STANDARDS

All SCHN committees are committed to establishing, maintaining and promoting good corporate governance, which is reflected in the terms of reference for each committee, implemented through the CORE values, and adherence to the Code of Conduct. The corporate governance standards are described in NSW Health's Corporate Governance and Accountability Compendium, and the application of these standards are incorporated into SCHN's Annual Corporate Governance Attestation Statement. The seven corporate governance standards are described below.

### STANDARD 1: ESTABLISH ROBUST GOVERNANCE AND OVERSIGHT FUNCTIONS

SCHN ensures that the authority, roles and responsibilities of its governance, management and operating structures are clearly defined documented and understood.

This is achieved by the development and implementation of:

- Appointment of SCHN Board, and Board Subcommittees in accordance with NSW Health By-laws
- SCHN organisational structure
- SCHN committee structure
- SCHN Committee Development and Administration Policy and application to all SCHN Committees and Terms of Reference
- SCHN Delegations Manual
- SCHN Policies and Procedures approval process
- Position Descriptions for employees, contractors, contingent workers
- Performance appraisal process

### STANDARD 2: ENSURE CLINICAL RESPONSIBILITIES ARE CLEARLY ALLOCATED AND UNDERSTOOD

Clinical responsibilities and consultative structures, including the role and authority of clinical directors and senior managers are clearly defined and understood, and SCHN complies with the governance standards and checklists as described in NSW Health's Corporate Governance and Accountability Compendium.

Clear accountabilities for management and service delivery are achieved by the development and implementation of:

- SCHN organisational structure
- SCHN committee structure
- Compliance with NSW Health By-laws including the establishment of defined committees, including Medical Staff Council, Clinical Staff Council, Joint Consultative Committee and credentialling committees for medical, nursing and allied health staff
- Staff forums
- SCHN policies, procedures and other organisational documents for clinical and non-clinical activities, including the SCHN Policy and Procedure Committee defined processes
- Complaint management system including the Patient's Friend
- Incident review and management system, including IIMS and root cause analysis teams
- Monthly licensing checks undertaken by Workforce Services

### STANDARD 3: SET THE STRATEGIC DIRECTION FOR THE ORGANISATION

Strategic plans provide a structure for the progressive achievement of the long term vision and objectives for SCHN. This is achieved by the development and implementation of:

#### SCHN STRATEGIC PLAN 2017 – 2022

- This plan's purpose is to help children and young people live their healthiest lives possible and seeks to transform the organisation, aiming to be a leader in paediatric healthcare in not only NSW, but nationally and internationally.
- The plan aims to achieve its strategies through a number of horizons over the course of the plan with work commencing across all horizons in the strategic areas of: Clinical care, People and culture, Education, Research, Advocacy, Early intervention, Networks and partnerships, Systems and processes, Infrastructure, and Finances.

## SCHN STRATEGIC QUALITY AND SAFETY PLAN

- This plan describes the vision and direction to drive and improve safety and quality across the Network. In addition, it sets out the key priority areas and activities required to continue to achieve the delivery of safe, effective and high quality care for our consumers. It is about transforming care so that we become Safer, Smarter and Stronger.

## STATE EMERGENCY MANAGEMENT PLAN (EMPLAN)

- EMPLAN is available to all staff. It outlines our role and responsibilities in the case of a state emergency.

## CLINICAL EDUCATION OPERATIONAL PLAN

- The Sydney Children's Hospitals Network Clinical Education Operational Plan is the foundation to develop and sustain highly skilled health workforce which is key to delivering excellence in care to children, young people and their families/carer.

## CLINICAL SERVICES PLAN

- Currently draft plans for the Westmead and Randwick campuses are undergoing consultation.

## SCHN NURSING AND MIDWIFERY SERVICES PLAN 2017 – 2022

- Nursing and Midwifery is the largest staff group within the SCHN workforce and responsible for providing care both in the acute and community contexts to children and young people, their families and carers.
- The SCHN Nursing and Midwifery Services Plan was developed with wide consultation from the nursing community. It incorporates the domains of quality and safety, education, research and workforce as the four cornerstones of the strategic plan.

## EDUCATION AND TRAINING STRATEGIC PLAN 2017 - 2022

- Education is set to take a renewed direction within the Network and with key partnerships to build the direction of paediatric healthcare education over the coming five years.

## RESEARCH STRATEGIC PLAN 2018 - 2022

- The Research Strategic Plan 2018-2022 is a resource for all research staff at the Sydney Children's Hospitals Network. It outlines our vision to be a world-leading centre for translational research in children and young people.
- The Strategic Plan outlines the strategies in place to enhance the integration of research and clinical care and leverage game changing technologies for maximising health outcomes. These include:
  - Enhancing the profile of research across the Network
  - Embedding research and evidence-based approaches as a seamless component of clinical care
  - Upskilling staff in research methodology and analytics
  - Implementing systems and processes supporting research embedded into clinical care
  - Advocating for additional resourcing for SCHN Clinical Research Centres to enhance service delivery
  - Focusing on research value

## WORKFORCE STRATEGIC PLAN 2018 - 2021

- The Workforce Strategic Plan outlines people and workforce strategies to deliver the strategic and clinical services plans and to build a contemporary and efficient workforce that can respond for changing and future demands on the services provided.

## ABORIGINAL EMPLOYMENT AND WORKFORCE DEVELOPMENT STRATEGY

- The Network has developed a localised strategy in line with the NSW Health Aboriginal Workforce Strategic Framework 2016-2020 to increase the Aboriginal workforce across the public health sector in clinical, non-clinical and leadership roles.
- The key objectives of this strategy include:
  - Increase the representation of Aboriginal employees to 2.6% across NSW Health.
  - Increase the representation of Aboriginal people working in our clinical areas.
  - Develop partnerships between the health and education sectors to deliver real change for Aboriginal people wanting to enter the health workforce and improve career pathways for existing Aboriginal staff.
  - Provide leadership and planning in Aboriginal workforce development.
  - Provide employment to Aboriginal university graduates in health professions.
  - Build a NSW health workforce which closes the gap in health outcomes between Aboriginal and non-Aboriginal people by providing culturally safe and competent health services.

## OVER OUR TRACKS: SCHN ABORIGINAL HEALTH STRATEGIC PLAN 2018-2021

- The focus of healthcare services for Aboriginal children and families must ensure there is access to high quality services that is evidence-based, culturally safe and responsive and support optimum outcomes for child health, development and wellbeing.
- There is a focus on integrated services that ensure children and families are at the centre and included in all aspects of decision-making. The key elements in this approach include:
  - Building services around a primary health care model
  - Multi-disciplinary, collaborative team-based approach
  - Well-resourced, highly-skilled, and culturally competent workforce
  - Continuity of care
  - Comprehensive, holistic assessment which ensures that children and their families are supported to access the range of services required to meet their needs and aspirations. This includes not only universal and targeted health services but comprehensive educational and social support services, tools, and other resources
  - Flexible service delivery
  - Place-based model (local or regional) for collaboration and integration of services

## SUSTAINABILITY PLAN 2017 – 2022

- Health care organisations such as the Network have substantial environmental impact which is influenced by:
  - Using significant amounts of energy to keep the hospitals “plugged in” to meet the demands of essential medical equipment, heating, cooling, lighting and ICT equipment.
  - Water usage is high with water-intensive processes such as dialysis, sterilisation, chilled water for air conditioning units, cleaning and hand washing.
  - Complex waste streams and single-use items
  - Travel related carbon emissions as our services extend to home visits, remote and rural areas where travel is by road or air for staff or patients and their families.
- The Sustainability Plan has been developed to ensure there is a consistent approach to monitoring and reporting on our environmental performance and includes initiatives that will assist the Network in better managing its resources and operations.
- Targets and strategies have been set to increase recycling, opportunities to reuse, renewable energy opportunities, reduce energy consumption, reduce water consumption, reduce clinical waste and reduce the necessity of travel.

## STANDARD 4: MONITOR FINANCIAL AND SERVICE DELIVERY PERFORMANCE

To ensure the efficiency and effectiveness of resource utilisation by SCHN, regular reviews of financial and service delivery performance are undertaken. This is achieved by the development and implementation of:

- SCHN Performance Agreement with Ministry of Health
- SCHN Finance and Performance Committee
- Compliance with Ministry of Health Accounting Manual and SCHN Delegations Manual
- SCHN Performance Appraisal process
- SCHN revenue and Patient Administration Committee
- SCHN Capital Planning and Monitoring Committee
- SCHN Performance and Planning Committee
- ACHN Activity Based Funding Implementation Committee
- Acquittal and audited reports for special purpose and trust funds, including research grants

## STANDARD 5: MAINTAIN HIGH STANDARDS OF PROFESSIONAL AND ETHICAL CONDUCT

SCHN has processes in place to ensure that staff, contractors and contingent workers such as volunteers and students are aware of and abide by NSW Health Code of Conduct, professional licensing and registration requirements and other mandatory conditions of employment or appointment. This is achieved by the development and implementation of:

- Medical and Dental Appointments Advisory Committee
- Nursing Appointments and Advisory Committee
- SCHN Credentialing and Defining the Scope of Practice Policy

- SCHN oversight of the State Scope of Clinical Practice Unit
- SCHN Medical Workforce Advisory Committee
- SCHN Employment Review Committee
- SCHN Volunteers Policy
- SCHN Work Health Safety - Engineering Contractor Management Procedure
- SCHN Student Placement Agreements with respective universities
- SCHN orientation program for employees and contingent workers such as contractors and students
- Managing Misconduct Policy
- Nominated Public Interest Disclosure Officers
- Workforce Culture programs such as “A Safe Place to Work”, “It Starts With Me” and violence and bullying prevention policy and toolboxes

## STANDARD 6: INVOLVE STAKEHOLDERS IN DECISIONS THAT AFFECT THEM

Systems and process have been developed by SCHN to ensure the rights and interests of key stakeholders are incorporated into the organisational plans, and that stakeholders are provided access to understandable information about the organisation and its proposals. This is achieved by the development and implementation of:

- SCHN Families and Consumer Advisory Council, including its sub-groups such as Parent Advisory Groups
- SCHN Youth Advisory Council
- Consumer representation on the SCHN Health Care Quality Committee
- Consumer engagement appointments across SCHN, including Patient’s Friend appointments at Sydney Children’s Hospital, Randwick and at The Children’s Hospital at Westmead, and complaints management processes
- SCHN Rights and Responsibilities Charter (developed in partnership with in partnership with the SCHN Families and Consumer Council which is aligned with the Australian Charter of Healthcare Rights)
- Key position holders in Executive Services, Office of the Chief Executive and the Office of the Directorate of Clinical Governance and Medical Administration provide responses to statutory agencies such as the Ministry of Health, Coroner, Clinical Excellence Commission, Health Care Complaints Commission, and Ombudsman
- SCHN Public Interest Disclosures Policy
- SCHN Subpoenas, Statements and Medico-Legal Requests Procedure
- Policies and procedures in place for GIPA, Medical Records requests
- Representation on precinct redevelopment committees on the Randwick and Westmead campuses
- SCHN Joint Consultative Committee
- SCH and CHW Staff Consultative Committees
- SCHN Clinical Council and Medical Staff Councils
- Annual general public meeting
- Memoranda of Understanding, Contracts and Agreements with stakeholders in the provision of service delivery, and delineation of responsibilities
- Strategic directions outlined in Standard 3

## STANDARD 7: ESTABLISH SOUND AUDIT AND RISK MANAGEMENT PRACTICES

SCHN has an established internal audit function that oversees the adequacy and effectiveness of internal controls risk management and governance. Audit and risk management functions have been included in the organisational and committee structures, and assurance is provided to the Chief Executive, Board and Board Subcommittees through established committees and reporting requirements. Sound audit and risk management practices are achieved by the development and implementation of:

- SCHN Audit and Risk Committee
- SCHN Audit and Risk Committee Charter
- Annual Corporate Governance Attestation Statements
- NSW Audit Office undertakes annual audits of SCHN
- SCHN Risk Management Framework which identifies roles and responsibilities in responding to and escalating risks and opportunities, and the SCHN Risk Management Plan
- SCHN and Ministry of Health’s Incident Management Policy and Procedures



- SCHN Health Care Quality Committee (including site based patient safety and quality committees)
- SCHN Workplace Health and Safety Committee (including site based work health and safety committees)
- SCHN Public Interest Disclosures Policy
- SCHN Internal Audit and Risk Management appointments
- SCHN Internal Audit scheduled audits

## SCHN MANAGEMENT COMMITTEE FRAMEWORK

The corporate governance framework is supported by existing SCHN peak committees, key position holders and business process as described in this document.

SCHN’s Corporate Governance and Management Committees and Peak Committees are summarised in the diagrams below, followed by a detailed SCHN Committee Structure.

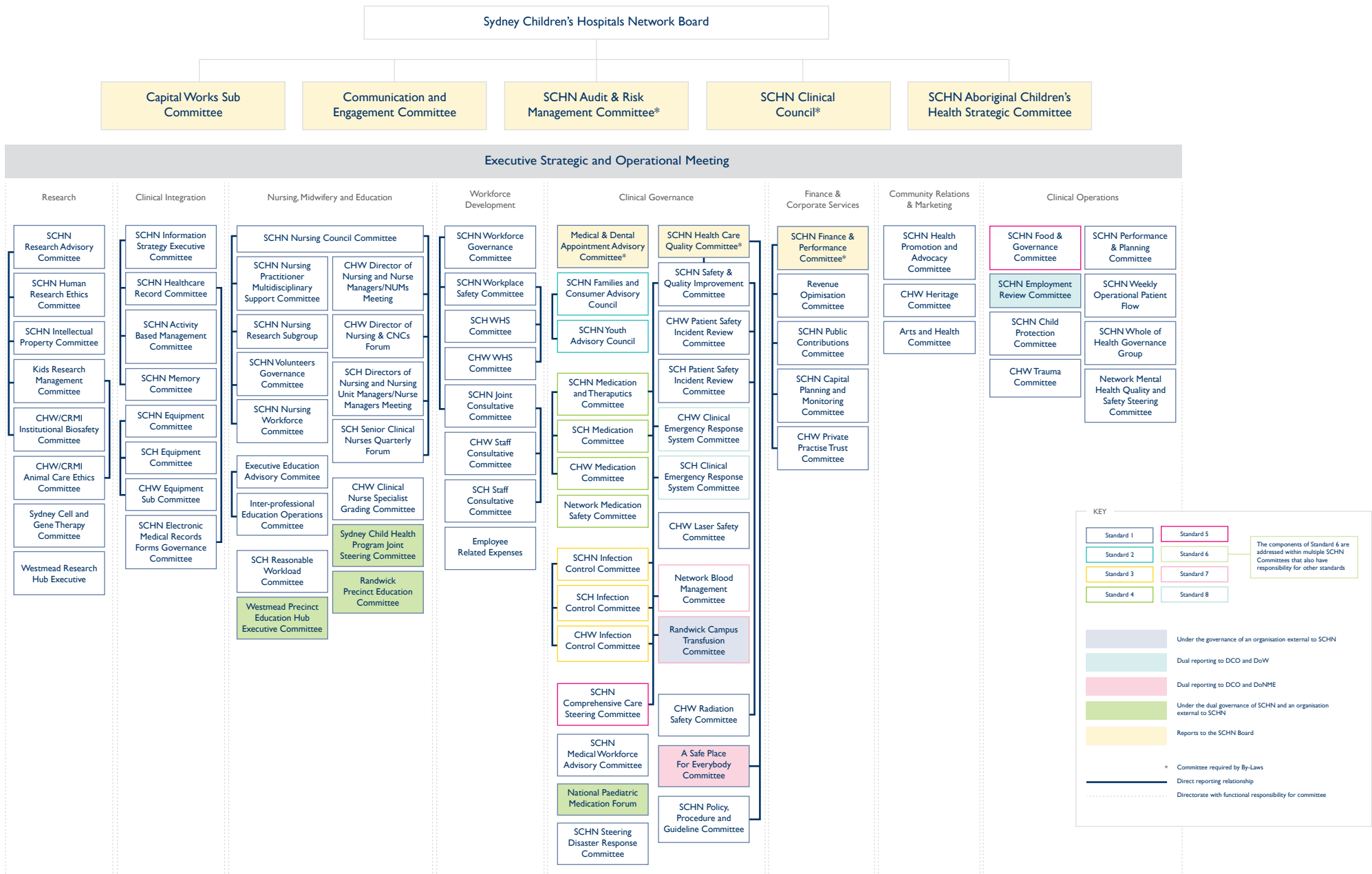


### SCHN CORPORATE GOVERNANCE AND MANAGEMENT COMMITTEES

Committee	Governance Focus	Chair	Secretariat
SCHN Board	<ul style="list-style-type: none"> <li>• Governance and oversight of SCHN planning, policy, financial performance, policy development and implementation, quality of delivery of clinical care, health and safety of the workforce and activities across SCHN.</li> </ul>	Chair	Manager Executive Services or nominee
SCHN Audit and Risk	<ul style="list-style-type: none"> <li>• In accordance with NSW Health By-laws and NSW Government requirements</li> <li>• Monitor, review and provide advice on SCHN’s governance processes, risk management, control frameworks and external accountability obligations</li> <li>• Oversight of financial statements as provided by the SCHN Finance and Performance (Board Subcommittee).</li> </ul>	Board appointed (independent)	Nominated by the Executive Sponsor

Committee	Governance Focus	Chair	Secretariat
Medical and Dental Advisory	<ul style="list-style-type: none"> <li>In accordance with NSW Health By-laws</li> <li>Provide advice and recommendations to the Chief Executive relating to appointments of senior medical and dental staff</li> <li>Review compliance reports regarding medical staff performance agreements</li> </ul>	Board appointed (independent)	Nominated by the Executive Sponsor
SCHN Health Care Quality	<ul style="list-style-type: none"> <li>In accordance with NSW Health By-laws</li> <li>Ensure accountability for the quality and safety of patient care and standards of care delivery</li> <li>Oversight of developments and improvements to the quality of health care</li> </ul>	Board Member	Provided by Clinical Governance Unit
SCHN Finance and Performance	<ul style="list-style-type: none"> <li>In accordance with NSW Health By-laws</li> <li>Oversight of key performance indicators, capital expenditure, investment portfolio performance and procurement governance</li> <li>Monitoring operating and capital works funds to ensure appropriate and efficient management</li> <li>Monitor compliance with government accounting directives and policy</li> </ul>	Board Member	Provided by the Directorate of Finance and Corporate Services
SCHN Capital Planning and Monitoring	<ul style="list-style-type: none"> <li>In accordance with NSW By-laws</li> <li>Oversight of capital works and planning activities</li> <li>Monitor planning and building matters, with a particular focus on campus redevelopment at Westmead and Randwick</li> <li>Ensure that due diligence is undertaken in planning and building activities, including consultation with relevant stakeholders to ensure future major capital works are fit to provide paediatric health services.</li> </ul>	Board Member	Office of the Chief Executive or nominee
SCHN Workplace Safety	<ul style="list-style-type: none"> <li>In accordance with NSW work health and safety legislation</li> <li>Monitor compliance with legislation, national and state directives regarding work health and safety</li> <li>Oversight and monitoring on key performance indicators</li> </ul>	Director of Workforce	Provided by the Workforce Services Directorate
SCHN Clinical Council	<ul style="list-style-type: none"> <li>In accordance with SCHN By-laws</li> <li>Oversight of clinical effectiveness and implementation of evidence based practices</li> <li>Monitoring and advice on efficient allocation of clinical services and provides a forum for proposals regarding new clinical services, technologies and medications</li> </ul>	Executive Medical Director	Provided by the Clinical Operations Directorate
SCHN Executive Strategy	<ul style="list-style-type: none"> <li>Monitor effectiveness and achievement of strategic directions and alignment with Government policy</li> <li>Oversight of projects and initiatives and the impact on achievement of strategic directions</li> <li>Review performance and implement actions to ensure alignment of services and strategy</li> </ul>	Chief Executive	Office of the Chief Executive or nominee
SCHN Executive Operational	<ul style="list-style-type: none"> <li>Review overall SCHN performance to ensure effective and efficient health service delivery</li> <li>Monitor the performance of: funded service activity volumes; service performance measures; strategic priorities; governance requirements and financial performance</li> <li>Ensure operational decisions align with strategic directions</li> <li>Monitor and review significant risks impacting on SCHN</li> </ul>	Chief Executive	Office of the Chief Executive or nominee

# SCHN NETWORK AND KEY SITE BASED COMMITTEES



THE SYDNEY  
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