

SDOC22/163 (June 2022)

Southern NSW Local Health District

Board Charter



The Southern NSW Local Health District Board acknowledges the traditional custodians of the lands where our services operate and pays respects to Elders past, present and emerging.

The Board's mission is to improve the wellbeing of the community we serve. The Board's vision is to be a recognised leader in rural healthcare. The Board commits to the values of Collaboration, Openness, Respect and Empowerment.

Southern NSW Local Health District (SNSWLHD) is constituted under the *NSW Health Services Act 1997* to manage public hospitals and health institutions and provide health services. The primary purpose of a local health district, as set out in [Chapter 2 \(9\)](#) of the *Health Services Act 1997*, is to provide relief to sick and injured people through the provision of care and treatment, and promote, protect and maintain the health of the community.

The Minister for Health appoints six to 13 Board Members, with suitable skills and expertise, for a fixed term of up to five years. Members are eligible to seek re-appointment and hold office for up to ten years. The Minister appoints one member as the Chair, with the Deputy Chair to be nominated by the Chair for the Minister's approval. Members are eligible for remuneration (and travel expenses) as determined in the instrument of appointment.

The Board focusses on leading, directing and monitoring the activities of the LHD and driving overall performance through the Chief Executive.

Board's Role

The specific governance oversight functions of LHD Boards are defined in s28 of the Health Services Act 1997:

- approve and ensure effective clinical and governance frameworks to support the maintenance and improvement of standards of patient care and services;
- approve systems to support efficient, effective and economic operations, managing the budget, meeting performance targets and equitable deployment of resources to meet community needs;
- approve strategic plans to guide the delivery of LHD services;
- seek the input of providers and local communities and confer with the Chief Executive on encouraging community and clinician involvement in planning services;
- approve the LHD Annual Report;
- provide strategic oversight of and monitor the District's financial and operational performance under the State-wide performance framework against Service Agreement performance measures;
- confer with the Chief Executive on operational targets and performance measures and approve the Service Agreement;
- liaise with other Districts on local and state-wide initiatives for the provision of health services; and
- complete the Chief Executive's annual performance review in accordance with the Act's Executive Service provisions.

Chair's Role

- leads the Board, ensuring cohesiveness and effective operation;
- provides a link between the Board, Ministers and their departments;
- ensures regular evaluation of Board and Board Members' performance;
- represent the Board at external meetings and functions; and
- act as an official spokesperson

Board Member's Role

As well as the NSW Health Governance and Accountability Compendium responsibilities, Members:

- carry out duties in the best interest of SNSWLHD, ensuring appropriate stewardship of public resources, maintaining a duty of care in the public interest and the interest of staff and those in its care;
- comply with all relevant laws and policy directives including the NSW Health Code of Conduct;
- participate effectively in Board meetings, committees, and support Board activities;
- maintain knowledge and awareness of matters relevant to the delivery of strategic priorities;
- support Board decisions to stakeholders; and
- acts as a conduit between the Board and the community.

Chief Executive's role

[Part 2 Division 1 \(24\)](#) of the *Health Services Act 1997* defines the role of the Chief Executive as being the management and control of affairs of local health district.

Board Meetings

- [Schedule 4A Part 3](#) of the *Health Services Act 1997* and the model by-laws set out the specific details of Board procedure
- The Board aims to hold five meetings outside the Queanbeyan administrative headquarters each year;
- Board members are encouraged to nominate agenda items for inclusion;
- Matters for In-Camera discussion may be raised directly with the Chair;
- Board papers are to be made available at least seven calendar days in advance of each meeting;
- Board Minutes for disclosure are to be published for public information, and
- Board Members are permitted to attend any Committee meeting.

Attendance

- Attendance may be in person or virtually;
- Apologies are to be provided to the Chair and Secretariat prior to the day of the meeting;
- The Chief Executive attends Board Meetings and Board Committee meetings as an *ex officio* member; and
- Where required, the Executive and other personnel attend Board meetings to provide information and assist decision making.

Committee Structure

The Board may establish Committees to assist it in its work, in addition to the required Committees - Health Care Quality Committee, Performance Committee and Audit and Risk Committee.

Southern NSW Local Health District subcommittee structure

