Legislation Compliance Policy – General Legislation

Implementation Standard for Monitoring and Reporting Compliance with General Legislation

1. Purpose
This Implementation Standard identifies the minimum requirements for legislation compliance reporting with regard to General Legislation and identifies the accountabilities and responsibilities of individual positions in relation to these requirements.

2. Scope
This standard applies to all Department of Health (DoH) employees and contracted staff (permanent, temporary and casual) employed in the department’s divisions and commercialised business units. The monitoring of other agencies and statutory bodies (eg HHs) is out of scope for this policy.

Roles and responsibilities relating to Portfolio Legislation are outlined in the Regulatory Compliance Policy.

3. Supporting documents
Authorising Policy and Standard/s:
- Legislation Compliance Policy – General Legislation
- Department of Health Portfolio and General Legislation Schedules

Procedures, Guidelines and Protocols:
- Procedure for Reporting Actual/Potential Breaches of General Legislation

Forms and templates:
- Breach Notification Report
- Legislation Compliance Statement Template

4. Related documents
- Risk Management Policy (QH-POL-070)
- Regulatory Compliance Policy (under development)
5. Requirements

5.1 Legislation Schedule

5.1.1 There will be a single Legislation Schedule for DoH Portfolio and General Legislation of the Queensland Parliament which identifies the nominated Legislation Custodian or Legislation Compliance Manager for each Act.

5.1.2 The Risk and Governance Unit (RaGU) shall be responsible for changes to the Schedule.

5.1.3 The Schedule will be centrally located on the Queensland Health Policy website.

5.1.4 Compliance Managers shall ensure changes to General Legislation for which they are responsible, are identified, communicated to affected areas and reported to RaGU.

5.1.5 The Regulatory Instruments Branch (RIU) shall identify relevant changes to Portfolio Legislation and inform RaGU of required changes to the schedule quarterly.

5.1.6 RaGU shall survey Compliance Managers and Legal Branch to identify any relevant changes to General Legislation quarterly.

5.1.7 The Chief Governance Officer (CGO) shall coordinate a review of the entire Schedule each year to ensure content is relevant and current.

5.1.8 RIU shall republish updated Schedules upon request of the Custodian of the Legislation Compliance Policy.

5.2 Monitoring and Reporting

5.2.1 All DoH employees and contracted staff (permanent, temporary and casual) shall:

5.2.1.1 Ensure they comply with legislation.

5.2.1.2 Ensure they are able to provide demonstrated evidence should it be required (e.g. completion of Code of Conduct Training).

5.2.1.3 Proactively identify and report actual/potential breaches in accordance with the Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation.

5.2.2 All supervisors and managers shall:

5.2.2.1 Ensure employees have knowledge of, and access to information about their responsibilities in relation to General Legislation.

5.2.2.2 Ensure DoH management systems and processes incorporate legislation requirements and that they enable and support staff in their operations and decision making.
5.2.2.3 Ensure activities to demonstrate compliance are supported and undertaken in accordance with legislation requirements and/or DoH policy (e.g. training records)

5.2.2.4 Report actual or potential breaches in compliance with legislation in accordance with the *Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation*

5.2.2.5 Develop management plans in response to actual or potential breaches to ensure compliance and reduce risk of recurrence in accordance with the *Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation*

5.2.2.6 Provide documented evidence of compliance to Compliance Managers in accordance with reporting cycle and/or upon request of others e.g. auditors.

5.2.3 Compliance Managers shall:

5.2.3.1 Be familiar with their delegated legislation

5.2.3.2 Monitor and record activities and outcomes in compliance with delegated legislation

5.2.3.3 Receive and review breach reports

5.2.3.4 Identify actual/potential breaches and ensure they are effectively managed

5.2.3.5 Risk assess possible recurrence and document outcomes in QHRisk

5.2.3.6 Identify, assess and report risks which may affect other areas or the Health System as a whole

5.2.3.7 Report breaches in legislation in accordance with the *Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation*

5.2.3.8 Complete and submit compliance statements at the end of each financial year in accordance with the annual compliance reporting cycle. Statements shall include:

5.2.3.8.1 Summary outlining compliance with the Act

5.2.3.8.2 Detail of any actual or potential breaches - to include action taken, outcomes and recommendations.

5.2.4 The Deputy Director-General, System Support Services Division (DDG SSS) shall request annual compliance reports on behalf of the Minister from DoH Compliance Managers.

5.2.5 The Chief Risk Officer (CRO), Risk and Governance Unit (RAGU) shall coordinate legislation compliance statement return and brief the DDG SSS on the information received.
5.2.6 The DDG SSS shall provide the Minister with an annual compliance statement and inform him/her of significant breaches in General Legislation throughout the year.

5.3 Legislation Compliance Register

5.3.1 The Legislation Compliance Register shall be maintained by the Assistant Risk Advisor, RAGU.

5.3.2 The Legislation Compliance Register shall include information on current and relevant General and Portfolio Legislation, Legislation Custodians and Compliance Managers; annual compliance statements and outcomes relating to any actual and/or potential breaches in compliance.

6. Review

This Standard is due for review on: 30/9/2015

Date of Last Review: June 2013

Supersedes: Legislative Compliance Standard Version 1 2010

7. Business Area Contact

Governance Branch, System Support Services Division

8. Responsibilities

<table>
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<tr>
<th>Position</th>
<th>Responsibility</th>
<th>Audit criteria</th>
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<tbody>
<tr>
<td>All employees and contracted staff</td>
<td>Comply with legislation Report in accordance with the Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation</td>
<td>Annual and by exception compliance reports</td>
</tr>
<tr>
<td>Managers and supervisors</td>
<td>Have processes in place to ensure employees aware of responsibilities, compliance activities are undertaken and reporting occurs in accordance with the Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation Develop management systems which support staff and incorporate legislation requirements</td>
<td>Annual and by exception compliance reports</td>
</tr>
<tr>
<td>Compliance Managers</td>
<td>Have internal processes in place to ensure compliance is monitored and recorded and reporting occurs in accordance with the Procedure for Reporting Actual/Potential Breaches in Compliance with General Legislation Ensure breaches are effectively managed and risk assessments undertaken in accordance with the Procedure Prepare and submit annual compliance statements Monitor General Legislation and inform RaGU of relevant changes Participate in annual Legislation Schedule review</td>
<td>Breach Notification Reports Risk profile reports Annual and exception compliance reports Schedule current and complete</td>
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</tbody>
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9. Definitions of terms used in the policy and supporting documents

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition / Explanation / Details</th>
<th>Source</th>
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</thead>
<tbody>
<tr>
<td>Agency</td>
<td>A department of government or independent body that reports to the Minister for Health e.g. Department of Health.</td>
<td>DoH</td>
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<tr>
<td>Breach of compliance with legislation</td>
<td>A breach can occur as a result of an act or failing to act, and includes a failure to comply with a legislation or other requirement under this Policy</td>
<td>Acts Interpretation Act 1954 (Qld)/ DoH</td>
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<tr>
<td>• Actual</td>
<td>Evidence suggests breach has occurred</td>
<td>DoH</td>
</tr>
<tr>
<td>• Potential</td>
<td>Evidence suggests breach is likely to occur without intervention</td>
<td>DoH</td>
</tr>
<tr>
<td>Compliance Manager</td>
<td>Nominated senior officer responsible for monitoring and reporting compliance with a particular Act of part of an Act of (General Legislation)</td>
<td>DoH</td>
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<tr>
<td>General Legislation</td>
<td>Legislation that applies across government</td>
<td>DoH</td>
</tr>
<tr>
<td>Monitored Agency</td>
<td>An agency that is monitored by DoH e.g. The Australian Health Practitioner Regulation Agency</td>
<td>DoH</td>
</tr>
<tr>
<td>Legislation Custodian</td>
<td>Nominated senior officer responsible for administration of a particular Act or part of Act (Portfolio Legislation)</td>
<td>DoH</td>
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<tr>
<td>Portfolio Legislation</td>
<td>Legislation that is the responsibility of the Minister via an agency</td>
<td>DoH</td>
</tr>
<tr>
<td>Significant Breach of compliance with legislation</td>
<td>Failure to meet responsibilities under General Legislation and the failure could result in the discipline or suspension or the termination of employment of the officer or officers involved and/or penalties under legislation</td>
<td>DoH</td>
</tr>
<tr>
<td>SBAR Model</td>
<td>A structured Communication Tool which improves the quality of interaction (Situation, Background, Assessment, Recommendation)</td>
<td>Australian Commission for Safety and Quality in Health Care</td>
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10. Approval and Implementation

Policy Custodian:
Chief Governance Officer, Governance Branch

Responsible Executive Team Member:
Deputy Director-General, System Support Services Division

Approving Officer:
Director-General, Department of Health

Approval date: 03/09/2013
Effective from: 03/09/2013

Version Control

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Prepared by</th>
<th>Comments</th>
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<tr>
<td>2.0</td>
<td>June 2013</td>
<td>Linda Moule</td>
<td>Review of the 2010 Legislative Compliance</td>
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<td></td>
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<td>Implementation Standard</td>
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