This document identifies mandatory requirements and roles and responsibilities for the implementation of the Queensland Health Delegations Policy.

Queensland Health Delegations Policy

Implementation Standard for Queensland Health Delegations

1. Purpose
This Implementation Standard identifies the minimum (and auditable) requirements that evidence the implementation of the Queensland Health Delegations Policy and, identifies individual positions and associated accountabilities as they relate to the application of the Queensland Health Delegations Policy.

2. Scope
Compliance with this Implementation Standard is mandatory for all Queensland Health employees and Health Service Chief Executives to whom the Director-General delegates functions.

3. Supporting documents
Authorising Policy:
- Queensland Health Delegations Policy

4. Related documents
- Instrument of Delegation
- Instrument of Sub-Delegation
- Delegation Manuals
- Queensland Health Governance Framework

5. Requirements
The positions of Minister for Health, Director-General, Chief Health Officer, Director of Mental Health, Hospital and Health Board Members and Health Service Chief Executives hold specific responsibilities described in various pieces of legislation. The individuals occupying these positions are responsible for adherence to the prescribed requirements. To ensure the efficient and effective operation of Queensland Health and Hospital and Health Services, these authority
holders may delegate certain authority, functions or power to office holders or employees. In making a delegation, the delegating authority holder may limit the extent of the authority, function or power to be delegated e.g. the Director-General may delegate most human resource functions to the Health Service Chief Executive, but may decide to not delegate the approval of payments over the award rate.

When the authority holder delegates an authority, function or power to a position, the person occupying the position becomes personally accountable for the exercise of that authority, function or power. However, the authority holder remains ultimately responsible for the performance of the functions, or the exercise of the authority or power.

In regards to groups established within Queensland Health including committees, while the Director-General may only delegate to individual positions and not committees, the position to which the delegation is made may also be the Chair of a Departmental Executive Committee. When nominating individual positions to be Chair of a Departmental Executive Committee, the Director-General must ensure the individual position has the requisite delegations to make decisions, which enable the committee to effectively perform its functions in accordance with its Terms of Reference.

Note that any reference to a Departmental Executive Committee in this Implementation Standard is distinct from, and has no connection with an Executive Committee established under section 32A of the Hospital and Health Boards Act 2011.

A fundamental requirement in developing and managing delegations is the application of:

- Instruments of Delegation
- Delegation Manuals.

### 5.1 Preliminary Considerations

In deciding which powers and functions to delegate to whom, officers must be satisfied that:

- the authorising legislation specifically allows the authority, function or power to be delegated and/or sub-delegated as applicable
- they have duly considered the structure of the organisation and the standing/seniority of the officer is the appropriate level to hold the delegation
- the delegate has the authority necessary to discharge the delegated responsibilities in accordance with their role description
- the delegate has the capacity and sufficient resources to perform the function and exercise the delegated authority or power
- the delegate has the appropriate qualifications and experience to exercise the delegation or, if not, the person to whom the authority is to be delegated is given the opportunity to build those skills prior to accepting the delegation
- no actual or potential conflict of interest exists.

### 5.2 Instrument of Delegation

An Instrument of Delegation must be used to delegate statutory authority, function or power to a delegate. It must be a written instrument, signed by the delegator and available for audit.

#### 5.2.1 Applying an Instrument of Delegation

The Instrument of Delegation is the document through which an authority holder delegates the authority, function or power. The Instrument of Delegation must record what authority, function
or power is being delegated; the source of the authority, function or power; the name and position of the delegator; the position to which the authority is delegated; and any conditions to which the delegation is subject.

5.2.2 Instrument of Sub-Delegation

A sub-delegation arises when legislative authority, function or power is further delegated by a person to whom the authority, function or power has been delegated. To be lawful, the primary delegation must permit the sub-delegation. For example, the Director-General may delegate the power to procure goods to a Deputy Director-General and the Deputy Director-General is authorised to sub-delegate the power to the relevant position in their Division. The Instrument of Sub-Delegation must record the authority, function or power that is being sub-delegated; the source of the authority, function or power; the name and position of the sub-delegator; the position to which the authority is sub-delegated; and any conditions to which the sub-delegation is subject.

5.2.3 Applying an Instrument of Delegation

The two instruments of delegation that apply legislation across Queensland Health are:

- Instrument of Delegation
- Instrument of Sub-Delegation.

5.3 Informing Instruments – Manuals of Delegations

The manuals of delegation inform the delegation. These manuals provide delegates with a clear understanding of the responsibilities and limits of each delegation, and must be available and understandable to those required to discharge the delegations or impacted by the delegations.

To provide clarity and direction about appropriate behaviours and decision making, a manual of delegation must set out the authority, function or power to be delegated, the positions/levels of delegates, and conditions or limits to the delegation.

Written manuals of delegation must be maintained in relation to the specific type of activity being delegated. Functions traditionally delegated by responsible officers include those relating to:

- Finance (expenditure, special payments and loss write-off or assets)
- Patient Trust Fund
- Contract signing
- Procurement of goods and services (authority to sign requisitions, purchase orders)
- Real property
- Right to Information and Privacy
- Human resource management (approve role descriptions, advertising vacancies, appointments)
- Health related matters (root cause analysis, annual report, performance, public hospitals, health services plan).

When preparing and reviewing manuals of delegation, individuals must be satisfied that:

- authority is devolved to the greatest degree practicable and permissible for the effective and efficient operation of Queensland Health
- the manual of delegation clearly identifies the scope of the authority, function or power that has been delegated, to whom, when, the legal origin and any conditions on the delegation
Queensland Health: Implementation Standard for Queensland Health Delegations

- the manual of delegation is accessible (available and understandable) to those required to perform delegated functions or impacted by these delegated functions

- the manual of delegation is clearly documented and recorded

- processes are in place to regularly review the exercise of delegated authority, function or power. Note: review may be triggered by change in individual positions (descriptions or titles) and/or legislative amendments.

5.4 Reviewing Delegations

Delegation owners must ensure that:

- processes are in place to ensure the manuals of delegation are regularly reviewed and updated and that Instruments of Delegation reflect any amendments made to the manuals

- processes are in place to ensure Instruments of Delegation are authorised by the Director-General or delegate

- processes are in place to regularly review the exercise of delegated authority.

6. Review

This standard is due for review on: 17 July 2014

Date of Last Review: July 2012

Supersedes: Queensland Health Delegations Implementation Standard May 2010

7. Business Area Contact

Office of the DDG, System Policy and Performance

8. Responsibilities

<table>
<thead>
<tr>
<th>Position</th>
<th>Responsibilities</th>
<th>Accountabilities/Audit Criteria</th>
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</table>
| Director General, Chief Health Officer, Director Mental Health | • The Director-General, Chief Health Officer and Director of Mental Health have direct statutory responsibilities. These Authority Holders may delegate functions to a Health Service Chief Executive or an appropriately qualified public service officer / employee of Queensland Health.  
• Both the Director-General and the Director of Mental Health have the statutory authority to delegate certain functions and to approve the sub-delegation of certain functions.  
• The Director-General must not | Queensland Health delegations are compliant with legislation, specifically section 46(1) of the Hospital and Health Boards Act 2011 and section 492 of the Mental Health Act 2000.  
Queensland Health Instruments of Delegation are compliant with the requirements in this standard and are signed by the delegator in accordance with section 27A(3) of |
<table>
<thead>
<tr>
<th>Position</th>
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</tr>
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<tbody>
<tr>
<td>Departmental Executives</td>
<td>• Departmental Executives are responsible for discharging the delegated responsibility of their position.</td>
<td>the Acts Interpretation Act 1954.</td>
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<td></td>
<td><strong>Sub-delegation:</strong></td>
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<td></td>
<td>• Where the Authority Holder has delegated to a departmental executive or public service officer, the executive / public service officer may, with the written approval of the Authority Holder, sub-delegate the functions to an appropriately qualified departmental employee.</td>
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<tr>
<td>Health Service Chief Executive</td>
<td>• A Health Service Chief Executive may delegate their functions under the Hospital and Health Boards Act 2011. These delegations are subject to the relevant Hospital and Health Service Delegation Policy.</td>
<td>Queensland Health delegations are compliant with legislation, specifically section 46(5) of the Hospital and Health Boards Act 2011.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Queensland Health Instruments of Delegation are compliant with the requirements in this standard and are signed by the delector in accordance with section 27A(3) of the Acts Interpretation Act 1954.</td>
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</table>
Position | Responsibilities | Accountabilities/Audit Criteria
--- | --- | ---
Sub-delegations:  * Where the Director-General has delegated to the Health Service Chief Executive, the Health Service Chief Executive, with the written approval of the Director-General, may sub-delegate the functions to an appropriately qualified health executive employed by the Service or health service employee employed in Queensland Health and working for the Service.  

Health Service Chief Executive sub-delegations (of delegations made by the Director-General) are compliant with legislation and meet the requirements outlined in Queensland Health Delegation Policy and Implementation Standard.

Current and future delegators  * Establishing and revising delegations of authority in accordance with this Implementation Standard.  

Approved delegations have been developed in accordance with the requirements in this Implementation Standard.

Delegates  * exercising authority in an ethical, professional manner in accordance with relevant legislation, policies and guidelines  
* delegates are personally responsible for their decisions and actions under delegations  
* When exercising a delegation of a function relating specifically to a statute or subordinate legislation (e.g. a Regulation), the delegate is responsible for checking the provisions of the statute or subordinate legislation before exercising the delegation.  

The exercise of delegated authority is monitored through individual position reporting systems e.g. managers monitor compliance of individual positions.

9. Definitions of terms used in this policy and supporting documents

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition / Explanation / Details</th>
<th>Source</th>
</tr>
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<tbody>
<tr>
<td>Approve</td>
<td>For the purpose of this policy approve means to confirm or sanction formally and can only be performed by an individual exercising appropriate delegations.</td>
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<tr>
<td>Authority</td>
<td>For the purpose of this policy authority means a power or authorisation to act, which is derived from legislation or through formal delegation.</td>
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<tr>
<td>Authority Holder</td>
<td>For the purpose of this policy an authority holder is an officer with statutory authority. The authority holder is the person/position who has the authority, function or power assigned to them under legislation.</td>
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<tr>
<td>Delegate</td>
<td>A person to whom a statutory authority, function or power has been delegated.</td>
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<tr>
<td>Delegator</td>
<td>The delegator is the person who has the authority, function or power assigned under legislation and who has the legislative</td>
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Delegation
A procedure where a person or entity (delegator) authorises another (delegate) to exercise an authority, function or power of the delegator in their own right.

Primary delegation
The primary delegation is the delegation from the person occupying the position with the statutory authority, function or power.

Sub-delegation
A sub-delegation occurs when a delegated authority, function or power is further delegated by the person in the position that received the primary delegation.

Delegation Manual
A manual that outlines the functions, positions, responsibilities and limits on delegations.

Guidelines
Guidelines provide advice on best practice and are intended to support decision making. They allow a level of flexibility and discretionary judgement and do not contain mandatory steps or requirements.

Instrument of Delegation
A document through which a person holding an authority, function or power authorises another to exercise the authority, function or power.

May
When used in policies or standards the term ‘may’ means there is a degree of choice as to whether to comply.

Must
When used in policies or standards the term ‘must’ means compliance is mandatory.

Policy
A policy is a document that sets out the principles and course of action for the organisation to achieve a particular outcome. Policy must be consistent with relevant legislation. Compliance with policy is mandatory for all staff covered in its scope.

Policy Custodian
Officer responsible for leading the development of the policy and/or overseeing the implementation and review of an approved policy.

Policy Implementation Standard
A Policy Implementation Standard is a process standard that defines the parameters for decision-making and clarifies responsibilities and compliance issues for staff.

It sets out the:
- minimum, mandatory requirements that shall be met in implementing the policy
- identifies responsibilities and accountabilities for implementation requirements
- identifies how compliance with these requirements will be monitored and audited

Consistency in implementing the requirements in a Policy Implementation Standard can be promoted through the development of procedures, protocols, guidelines and workplace instructions.

Procedure
Procedures are an agreed (recommended and approved) set of practices – generally sequential – that are developed to support consistency and quality in the performance of an activity or delivery of a service across more than one work unit.
They may allow for some flexibility or be mandatory. Any mandatory steps shall be clearly identified and compliance auditable.

Protocol
Protocols are very specific guidelines which are expected to be followed in detail, with little scope for variation.
Responsibilities | Responsibility in this context means accountabilities of each individual position.
---|---
Standard | A Standard can be defined as a document established by consensus and approved by a recognised body that provides for common and repeated use, rules, guidelines or characteristics for activities or their results aimed at the achievement of the optimum degree of order in a given context.
| Special terms used in standards help clarify compliance
| Must – mandatory and must be complied with
| May – implies that there is a degree of choice

| Workplace Instruction | Procedures, protocols or guidelines which apply only to the staff within a particular work unit.

10. Approval and Implementation

**Policy Custodian**
Deputy Director-General, System Support Services

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

**Approving Officer:**
Deputy Director-General, System Support Services

**Approval date:** 17 December 2012
**Effective from:** 17 July 2012