Queensland Health Delegations Policy

Policy Statement
Queensland Health exercises its statutory authority responsibly, effectively and efficiently. It does so by managing delegations in a clear and standardised manner; ensuring delegations are matched with responsibilities, resources and skills of employees.

Intent of this policy
To ensure the arrangements by which power, authority and functions are delegated throughout Queensland Health:

- Are aligned with legislation and statutory authority
- Clearly articulate the roles and responsibilities, and procedures for making decisions and exercising the delegated authority, function or power
- Comply with Queensland Audit Office requirements
- Promote a consistent and standardised approach to delegations.

Scope
This policy applies to all of Queensland Health including Corporate Divisions, the Health Services Support Agency and Health Services Information Agency.

The Policy also applies to Health Service Chief Executives receiving delegations from the Director-General and officers receiving delegations from the Director of Mental Health.

Specific responsibilities and accountabilities as they relate to the application of this policy are set out in the accompanying standard.

Principles
Queensland Health delegations:

- Are compliant with legislation
- Clearly identify the source of the authority, function or power
- Clearly identify the delegate or position
- Clearly define the authority and responsibilities of delegates
- Are prepared in consideration of the resources and skill of the delegates
- Are only made to delegates who have the appropriate qualifications, experience or standing (classification or seniority in the department) to exercise the authority, function or power
- Outline the procedures for making decisions and exercising the delegated authority, function or power
Are accessible (available, understandable) to those required to discharge the delegations or those impacted by delegations.

**Legislative or other Authority**

Acts Interpretation Act 1954  
Crime and Misconduct Act 2001  
Financial Accountability Act 2009  
Financial Performance Management Standard 2009  
Hospital and Health Boards Act 2011  
Industrial Relations Act 1999  
Information Privacy Act 2009  
Mental Health Act 2000  
Public Service Act 2008  
Statutory Bodies Financial Arrangements Act 1982  
Statutory Bodies Financial Arrangements Regulation 2007

**Supporting documents**

Queensland Health Delegations Policy Implementation Standard

**Review**

This policy will be reviewed at least every two years but review can be triggered at any time by changes in the delegations environment.

**Date of last review:** New Policy  
**Supersedes:** Queensland Health Delegations Policy 21 May 2010
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

Definitions of terms used in this policy and supporting documents

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition / Explanation / Details</th>
<th>Source</th>
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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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<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 authority to delegate this authority, function or power.</td>
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<tr>
<td>Delegation</td>
<td>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.</td>
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<td>Primary delegation</td>
<td>The primary delegation is the delegation from the person occupying the position with the statutory authority, function or power.</td>
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<td>Sub-delegation</td>
<td>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.</td>
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<td>Delegation Manual</td>
<td>A manual that outlines the functions, positions, responsibilities and limits on delegations.</td>
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<td>Guidelines</td>
<td>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.</td>
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<td>Instrument of Delegation</td>
<td>A document through which a person holding an authority, function or power authorises another to exercise the authority, function or power.</td>
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<tr>
<td>Term</td>
<td>Description</td>
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<td>May</td>
<td>When used in policies or standards the term ‘may’ means there is a degree of choice as to whether to comply.</td>
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<tr>
<td>Must</td>
<td>When used in policies or standards the term ‘must’ means compliance is mandatory.</td>
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<td>Policy</td>
<td>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.</td>
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<tr>
<td>Policy Custodian</td>
<td>Officer responsible for leading the development of the policy and/or overseeing the implementation and review of an approved policy.</td>
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| 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.                                                                                                      |