

Good Practice Guide for Boards

Volume 2



Good Practice Guide for Boards - Volume 2

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Foreword

The Good Practice Guide for Boards was developed as a response to advice on Queensland Health's Governance Framework that was delivered by an expert panel in 2019. Recommendation 6 of the advice was that a 'Good Practice Guide' (the Guide), and a supporting program for Board members is developed to build and maintain the capability and effectiveness of Hospital and Health Boards.

In order to meet this recommendation, the Guide has been developed in two volumes to cover distinct but related governance matters:

- Volume 1 of the Guide is designed as a reference text that focuses on hard governance (including legislative and policy frameworks, the context of the health system, and formal roles of stakeholders in the Queensland public health system). The purpose of this volume is to provide a comprehensive outline of the structures, frameworks and responsibilities of which Board members must be aware and understand to properly execute their duties and responsibilities.
- Volume 2 of the Guide (this document) focuses on soft governance (such as culture, leadership and relationships).

The purpose of this volume is to provide guidance and advice to board members on a broad variety of soft governance topics and emerging issues of interest to boards, and to provide prompts to initiate and drive consideration and conversation of soft governance topics. This includes:

- A short summary of each topic, including numerous links to allow for additional reading (including academic papers, best practice guides from around the world and papers written by various professional organisations). Links that may be behind a paywall are indicated by a lock (🔒) icon.
- A series of quotes and scenarios designed to inform board members of the views of their peers and drive discussions between board members on topics of mutual interest and expertise. This information was sourced from a series of interviews held with Hospital and Health Board Chairs and members.
- Points for consideration and discussion, either individually or as a group, to assist in applying these concepts to their own boards.

Topics that are explored in this volume are broadly aligned to the fundamentals of governance that underpin the achievement of good public sector governance, as outlined in the Australian National Audit Office document '*Public Sector Governance: Strengthening Performance Through Good Governance*'.

The Guide has been widely consulted among Hospital and Health Boards as well as the Department of Health.

Feedback relating to the Guide is welcome, and should be sent to statutoryagencies@health.qld.gov.au.

Culture and good governance

Why is culture an important consideration for Hospital and Health Boards?

A positive culture in an organisation is proven to increase organisational and staff performance, productivity and reputation. In healthcare, there are well documented correlations between positive cultures and improved outcomes for patients, including mortality rates, readmission rates and patient satisfaction. [Read More](#)¹

What is culture?

According to Greg Medcraft, former Commissioner and Chairman of the Australian Securities and Investments Commission, “Culture is a set of shared values and assumptions within an organisation. It reflects the underlying ‘mindset of an organisation’, the ‘unwritten rules’ for how things really work. It works silently in the background to direct how an organisation and its staff think, make decisions and actually behave”. In other words, culture is “**the way we do things around here**”. [Read more](#)²

How we see it – boards as stewards of culture

A Hospital and Health Board is ultimately responsible for the culture of the organisation that it governs. Given the importance of culture to organisational performance, it is imperative that boards understand their role in creating, embedding and maintaining a good corporate culture.

How does a board create a good culture?

A board must have a clear and shared understanding about the type of culture that is required to achieve its purpose. The desired culture must be well communicated to executives and staff, and the board should work to ensure alignment between the desired culture and the actual culture of the organisation. These actions are not ‘set and forget’; they require an ongoing commitment by the board to continually review, discuss and address cultural performance. Health Service Chief Executive (HSCE) turnover, environmental change, or major structural reform are catalysts that may require consideration of whether the desired or embedded culture is appropriate for the challenges being faced by an organisation. [Read More](#)³

How does a board influence culture?

Almost all actions by a board and its committees have the potential to impact on the culture of the organisation in some way. Boards directly impact culture through decisions such as appointing a HSCE and setting the strategy and priorities for the organisation. Boards also influence culture through modelling desired behaviours and decisions and engaging other senior staff and influencers throughout the organisation. It is important that the actual behaviour of boards is reflective of the desired culture that has been communicated to staff, to avoid a disconnect between the two. [Read More](#)⁴

How can a board measure and monitor their culture?

Boards should consider evidence-based, best practice and relevant information from varied sources to provide a holistic picture of organisational culture. Staff surveys, turnover rates, health and safety reports and complaints can provide objective indications of whether the organisation has a good culture, while regular discussions of culture at board meetings,

interactions with staff (as opposed to just executives) and periodic engagement with customers and community stakeholders can inform input into such an assessment.

What are you saying?

Leadership is the most profound influence on culture, and culture is what leads to good outcomes. **John Wakefield, Director-General, Queensland Health**

You can take the pulse of an organisational culture the minute you walk into a facility. Verbal and body language, the working environment and immediate staff behaviour all suggest whether an organisation has a good culture. Being visible and seeing the organisation firsthand is key to boards understanding the culture within an organisation. - **Rob Stable, former Chair, Metro North Hospital and Health Board**

Boards have a direct impact on culture. They need to create opportunities which support directors to follow through with their passions so that they can have an impact on the service. Every director should be able to, at the end of their term, look back on the legacy they left through their service. - **Ian Langdon, Chair, Gold Coast Hospital and Health Board**

Every organisation has its own cultural challenges. Changing culture can be difficult and does not usually happen quickly. Receiving ongoing feedback, monitoring data relating to staff leave and workforce surveys and being out and about in facilities and communities provides valuable insight. - **Hospital and Health Board Chair**

The board has ultimate accountability for the cultural health of our organisations and has a role in forming and monitoring culture. Board members can learn much about the culture of the organisation through site visits, interacting with frontline staff, and observing interactions of senior management with one another, including the HSCE, at board meetings and informal events. Other information that assists in monitoring the cultural dimensions of the organisation includes the results of staff satisfaction surveys, responses to customer compliments and complaints, internal audits, performance managements systems and exit interviews. - **Colette McCool, member, Gold Coast Hospital and Health Board**

Additional Reading

- [Various Authors \(2017\) Managing Culture - A good practice guide, First Edition⁵.](#)
- [Australian Institute of Company Directors – Not-for-Profit Principle 10: Culture⁶](#)
- [Dan Pontefract \(2017\) If Culture Comes First, Performance Will Follow, Forbes⁷](#)

For Discussion...

- How does your board measure the culture of your organisation?
- What actions does your board take to ensure a positive culture?

Health sector leadership

Why is leadership important in the health sector?

Leadership is the most influential factor in shaping organisational culture. There is clear evidence between effective leadership and the achievement of organisational priorities.

What is leadership?

There is wide ranging and differing research and discourse relating to leadership. Leadership in healthcare is particularly complex, but as a general concept revolves around developing and driving vision, ideas, direction and inspiration within an organisation. Leadership is exercised at all areas of an organisation, by individuals in any level or position. [Read more](#)⁸

How is leadership different to management?

While leadership is distinct from management, the two concepts overlap - *“the Board must understand its role as the governor of a company, not its manager... the delineation between directing and managing is the starting point in an effective governance system”*. Exercising leadership skills at board level is different to the management of operational matters for which the HSCE and Executives have responsibility – however still requires understanding and curiosity with relation to the management of the Hospital and Health Service (HHS). [Read more](#)⁹

How we see it – Hospital and Health Boards as health sector leaders

Hospital and Health Boards are established to control a HHS and are accountable to the Minister for Health and Ambulance Services for the performance of their HHS. They are the most senior leaders of their health service and must understand and be visibly committed to their role. The board must ensure that their leadership qualities, strategies and behaviours provide direction to the organisation, alignment to defined courses of action and commitment to the HHS and its goals. It is important that the board understands and models the leadership facets it expects from its organisation to ensure that individuals and groups collectively act in a manner that support the goals of the HHS, as their behaviours will directly and indirectly influence the behaviours of the broader organisation. [Read more](#)¹⁰

Effective leadership is fundamental to maintaining trust in an organisation and its activities, allowing boards to develop and maintain good relationships and effectively resolve crisis situations. [Read more](#).¹¹

How does a board foster good leadership?

The board should consider its leadership capability and whether its directors are displaying the competencies needed to provide strong and effective leadership to the health service, through continual objective and subjective assessments. The board should also consider whether professional development interventions and improvement activity relating to leadership should be targeted at individuals, or to the board as a collective. [Read more](#)¹²

What are you saying?

The board Chair should be the person in the health service with the least job security. The board is charged with the provision of safe and quality care, and the buck stops with the Chair. - **Mike Willis, Chair, Queensland Health Board Chairs' Forum and Chair, West Moreton Hospital and Health Board**

New board members should understand that being a Hospital and Health Board member is more than a job, it's a great privilege. You strive to achieve the best possible health care for patients, and to give the best support to the front line, which is so important to those who are actually receiving the care. - **Rob Stable, former Chair, Metro North Hospital and Health Board**

Incoming board members should recognise that it is a privilege to be able to give back to your community through serving on a board. It's an opportunity to make a difference to people's lives, that is offered to very few people. - **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)**

Hospital and Health Boards have come a long way since their inception in 2012. They still work with a great deal of complexity that is not always apparent to external parties, but are far more experienced, and comfortable with their role in oversight of HHS governance and performance. - **Paul Woodhouse, Chair, North West Hospital and Health Board**

To effect lasting change, leadership behaviour needs to be visibly aligned with the organisational culture and values it seeks to create. - **Helen Chenery, member, Gold Coast Hospital and Health Board**

Emotional and social intelligence is key to leadership in a board setting. It is a high-pressure role, and members need to have conscious knowledge and personal insight. - **Lisa Caffery, Deputy Chair, Central Queensland Hospital and Health Board**

Additional Reading

- [Leadership in healthcare: a summary of the evidence base¹³](#)
- [How a good leader reacts to a crisis - Harvard Business Review¹⁴](#)

For Discussion...

- What are the leadership qualities that you seek to embody on your board?
- What actions does your board take to visibly model leadership to your organisation?

Tailored governance

Why is tailored governance important on boards?

Hospital and Health Boards play a core role in the performance of the Queensland public health system. Boards should tailor their governance frameworks to meet the specific requirements of their local geographic area and the communities that they serve.

What is tailored governance?

In a public health system context, tailored governance ensures that governance structures address the specific needs of a board's geographic location, health care system processes and stakeholder engagement needs.

How we see it – ensuring governance is locally appropriate

Hospital and Health Boards were established in part to ensure that the Queensland health system better caters to needs and expectations of local regions.

Tailored governance requires boards to understand and respond to the local needs, challenges and stakeholder expectations across their area of oversight. It allows a board to enhance the performance of their service specific to the delivery needs of local communities by tailoring its own policy framework, systems and processes to these local needs and expectations. [Read more](#)¹⁵

It is important to acknowledge that the challenges faced by boards differ depending on their region – particularly in rural and remote regions.

Understanding local needs

Board members can use multiple strategies to understand and respond to local needs. This can include working with the HSCE to ensure shared understanding of operational needs of the HHS and community, meeting with staff and inspecting different sites, engaging with local stakeholders and community organisations, and sharing best practice insights with boards of similar regions. A system of effective checks and balances should be in place between boards and management to ensure that management understands the expectations of the board in relation to serving the needs of the local community, tailors plans and strategies accordingly, and acts in a way that is reflective of and responsive to these needs. [Read more](#)¹⁶

The board should ensure that local needs are understood and catered to through all activities and decisions including:

- oversight of the organisation
- HSCE appointment and succession planning
- setting and modelling values, ethical standards and strategic direction
- ensuring appropriate frameworks of internal controls (e.g. compliance and risk management).

What are you saying?

*Health in Queensland is still very much an applied mechanism which must be tailored to accommodate the lifestyle and demographic challenges and needs of local communities. As a board, you must develop a deep understanding of the health needs of the local community and reflect that in the health services that are provided. It's all about local ownership, local engagement with communities to address local needs. Our communities decide for themselves needs that require addressing. Trying to develop and deliver new services without community buy-in can be disastrous. - **Paul Woodhouse, Chair, North West Hospital and Health Board***

*When you live in a rural environment you need to be aware that it does not function the same as a metro area, so good governance means being able to address risks and performance issues specific to the area. - **Leone Hinton, former member, Central Queensland Hospital and Health Board***

*It is local adaptation and local responsibility that drives improvements to the health system. Board members are members of the community and are directly accountable to their community. It is not an intellectual exercise; it is a practical issue that requires the board to set strategy for the organisation in a way that understands and represents community expectations - locally responsible and locally responsive. - **Ruth Stewart, former member, Torres and Cape Hospital and Health Board***

Additional Reading

- [Standards Australia Good Governance Principles \(AS8000 2003\)](#)¹⁷
- [Directors at Work: A Practical Guide for Boards, Geoffrey Kiel, Gavin Nicholson, Jennifer Ann Tunny, James Beck](#)¹⁸

For Discussion...

- How do you ensure board-level awareness of the unique needs of your health service?
- How do your governance frameworks reflect the specific needs of your health service?

Board diversity

Why is diversity on Hospital and Health Boards important?

As a large, complex public entity, Queensland Health requires public sector boards to have a broad mix of skills, expertise, perspectives and innovative thinking. Board diversity enables effective decision-making and improves the social well-being of the communities they serve.

What is diversity?

Diversity is any collective mixture characterized by differences, similarities, and related tensions and complexities. [Read more](#)¹⁹

How we see it

Diversity is often seen through a prism of gender, age and ethnic representation on boards, in teams and in workplaces. Hospital and Health Boards should be aware of the [Queensland Health Workforce Diversity and Inclusion Strategy 2017-22](#) which includes focus areas and priority groups when considering the skills and attributes required for effective boards.

What else is it about?

There's more to board diversity than representation of members with different demographic characteristics. It is important that diversity on a board is not tokenistic, and that representatives of different demographic groups are appropriately skilled and empowered to add value to board considerations and decision-making. Emerging research findings into diversity have identified cognitive diversity as a key driver to adding value to the performance of an organisation. [Read more](#)²⁰

What is cognitive diversity?

Cognitive diversity is not predicted by factors such as gender, ethnicity, or age. Studies have shown that it is rather about how individuals think about, and engage with, new, uncertain, and complex situations. [Read More](#)²¹

A cognitively diverse team fosters a thriving culture, stimulates innovation and encourages fresh perspectives which makes for an effective team environment. [Read more](#)²²

How do we know we have a diverse board?

Cognitive measurement tools such as *Emergenetics* and the *AEM-Cube* may assist boards in identifying and assessing the level of cognitive diversity skills and needs on boards to improve board performance. [Read more](#)²³

What are you saying?

*Board members are not nominated as specialist experts or representatives of a geographic region or demographic. Rather, they are appointed to share their knowledge and experience so that the board can draw upon the broadest possible viewpoint. - **Michelle Morton, Deputy Chair, Townsville Hospital and Health Board***

*At a board level, diversity is about diversity of thinking and views. Diversity can also relate to geography. There are many communities represented by the Central Queensland Hospital and Health Service with extremely different needs, so it is important that a board has a genuine comprehension of diversity of place.
- **Lisa Caffery, Deputy Chair, Central Queensland Hospital and Health Board***

Board diversity is particularly important in Hospital and Health Services that represent a significant number of Aboriginal and Torres Strait Islander communities in the more remote areas. If a board makeup is too different to the communities we serve, the communities are unlikely to trust the board. It's one thing to have a diversity of board members, another to have a diversity of voices on boards.

*If you want a competent board, board members must have relevant experience, which requires heavy investment in education and the development of a strongly supportive and open board culture. - **Ruth Stewart, former member, Torres and Cape Hospital and Health Board***

*Diverse boards provide benefits, however tokenism must be avoided as it can be counterintuitive. Anyone appointed must be an effective contributor to a board, rather than being purely a demographic or geographic representative – this can mean that you are not always able to achieve 'representative' diversity. - **Darryl Camilleri, Deputy Chair, Mackay Hospital and Health Board***

Additional Reading

- [Diversity on Boards - more than just the 30% club²⁴](#)
- [Queensland and Health Workforce Diversity Inclusion Strategy 2017-22²⁵](#)

For Discussion...

- Is your board demographically and cognitively diverse?
- What actions does your board take to include a broad range of viewpoints and ensure experiences are considered?

Cultural capability

Why is cultural capability an important consideration for Hospital and Health Boards?

Skills in recognising and developing cultural capability is required for boards to understand and respond to the cultural needs of the communities they serve.

What is cultural capability?

Queensland Health defines cultural capability as the skills, knowledge, behaviours and systems that are required to plan, support, improve and deliver services in a culturally respectful and appropriate manner²⁶.

How we see it - boards as stewards of cultural capability

Queensland Health has a highly complex health system and having to navigate the system as a board can be challenging. We recognise that there is no single approach to building cultural capability on boards. Research findings reveal that capability differs based on the outlooks, personal bias, demographics information, language and embedded belief systems of boards and board members. [Read more](#)²⁷

Boards should consult the [Queensland Health Aboriginal and Torres Strait Islander Cultural Capability Framework 2010-2033](#)²⁶ which encourages ownership of the process of embedding cultural capability in all aspects of the healthcare system. The Framework provides valuable guidance in identifying and developing the required cultural capabilities for your specific delivery areas. Boards are encouraged to develop their own cultural capability practice sessions and identify cultural capabilities already on their boards and how they can further develop these capabilities using the identified capabilities from the Framework.

How does a board develop good cultural capability?

The findings of two recent studies on how to develop community specific cultural capability in the healthcare sector reveal that:

- Embedding cultural competence as a health system, service and professional capability is critical to ensuring equitable healthcare quality for consumers from culturally diverse backgrounds. [Read more](#)²⁸
- While a knowledge gap exists in measuring the effectiveness of cultural capability in health care service delivery and improved outcomes for diverse cultural communities, tailoring service delivery to meet the needs and preferences of specific communities works. [Read more](#)²⁹

Board Chairs are encouraged to share with other boards what already works well, as well as the identified challenges in improving cultural capability and performance on their respective boards.

How does a board influence organisation wide cultural capability?

By embedding cultural capability in organisational culture, governance and policies, the board as an influencer enables a high-performance workplace, and encourages fresh perspectives and enhanced innovative ways of problem solving across the organisation. This increases the likelihood that services delivered are culturally appropriate to consumers.

What are you saying?

A strategy that fits in the Torres Strait Islands is not going to fit the aboriginal population. Any model must adapt to the community that it seeks to serve as their cultural histories and needs are very different. This is crucial to local communities having confidence in their boards. **Ella Kris, Chair, Torres and Cape Hospital and Health Board**

There is a strategic need for boards to understand the nature of the local communities that we serve, including the disadvantage that people have in health terms. Here in the South West, I ensure board meetings are held in different areas across the region to give board members an awareness and understanding of the local health service, the population, their health care risks as well as the workforce needs specific to those locations. All of our areas have slightly different approaches to addressing health care needs of the locals who live there. Local initiatives are far more likely to succeed and be sustainable, than those forced on staff from above, as they are more likely to meet the needs of their locals.

Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair of South West Hospital and Health Board)

Cultural capability is highly contextually specific to the community served by a health service. Among board members, this needs to be part of a lifelong learning process and must be considered within a cultural capability framework. **Scott Davis, Deputy Chair, Torres and Cape Hospital and Health Board**

Additional Reading

- [Training mental health professionals in cultural capability: sustainability of knowledge and skills, Joanna Bennett, International Journal of Culture and Mental Health, 201230](#)
- [What does it mean to be culturally competent?, Rhonda Livingstone, The Australian Children's Education and Care Quality Authority, July 201431](#)

For Discussion...

- What actions does your board take to ensure that members have an appropriate level of cultural capability for the people and region that you serve?

Board dynamics

Why are strong board dynamics important?

Strong boardroom dynamics are key to good governance and are an essential aspect of a high performing board. Boards that work as a team while valuing individual input are well positioned to engage with risk and are more likely to make effective decisions. [Read more](#).³²

What are board dynamics?

Board dynamics relate to the behavioural aspects of how a board functions, as opposed to the tasks they perform or their documented processes. Board dynamics are about how boards interact individually and as social constructs, rather than what is considered and actioned.

How we see it

Every board is made up of individuals who work together to achieve strategic goals for an organisation. As such, every board will have different dynamics and ways of working together. Despite individual differences, boards should cultivate an environment whereby healthy discussion and differences in opinion and ideas are able to be respectfully aired and challenged. In other words, boards must function as a high performing team in order to succeed. [Read more](#).³³

What else is it about?

A key part of strong boardroom dynamics is creating healthy tension to ensure robust discussion of ideas and executive activities. This can be a delicate balance as the behaviours that create tension can also create conflict, which can be disruptive and lead to hostile and detrimental board dynamics. Conversely, a board with no tension (sometimes called a cosy or silent board) can be just as damaging as it can lead to 'groupthink', or bad ideas going unchallenged. [Read more](#).³⁴

How do we ensure strong board dynamics?

Board dynamics are intangible yet can be clearly felt by those present in a meeting. Directors should build an awareness of their own style of interaction and appreciation for the style of others, considering whether their viewpoints and behaviours are in the best interests of the organisation. The board should aim for a team dynamic, seeking to strike a balance between valuing and welcoming difference in debate, while ensuring that these do not devolve into unworkable conflict.

What are you saying?


*Chairs should be first among equals and call out bad behavior if they expect the rest of the organisation to do the same. **Rob Stable, former Chair, Metro North Hospital and Health Board***

*The Chair should set the tone for meetings, with an inclusive approach where all board members are expected to contribute. This means meetings are held regularly, board members have read the meeting papers and are given an opportunity to express their views, and the meeting is summarised by the chair at the end. **Peta Jamieson, Chair, Wide Bay Hospital and Health Service***

*All members are different – some will actively fill silences should they occur. The Board Chair has the responsibility of managing meetings and ensuring that all around the table get a chance to engage and have a say on the matters under discussion. **Ruth Stewart, former member, Torres and Cape Hospital and Health Board***

*In participating in board discussions I endeavour to hone and demonstrate the principles of honesty (expressing what I really think during board meetings and aligning what I think, feel and say), humility (being open to hearing other's opinions and taking a modest view of my own importance), hard work (not only reading all papers thoroughly but also taking time to familiarise myself with the organisation and industry) and finally, humour (laugh with others and laugh at myself). I find these behaviours are powerful in building the board team. **Colette McCool, member, Gold Coast Hospital and Health Board***

Additional Reading

- [A board is like an orchestra – Sam Mostyn on high performing Boards – AICD, 2017³⁵](#)
- [Conflict and Tension in the Boardroom – ICSA, Henley Business School³⁶](#) 

For Discussion...

- What are the behaviours that you exhibit at board meetings to ensure good dynamics?
- Are there existing behaviours that can be worked on either individually or as a board, to further improve board dynamics?

Relationship between boards and Health Service Chief Executives

Why is a good relationship between the board and the Health Service Chief Executive important?

A good relationship between a board and HSCE sets the groundwork for a high performing executive team. Clear communication, mutual understanding of expectations, and active performance management are all key indicators of good practice in relationship building between the board and HSCE.

The formal relationship between the Chair and HSCE

The board is mandated under the [Hospital and Health Boards Act 2011](#) (HHB Act) to appoint a HSCE to manage the Service under direction by the board. HSCEs are appointed through a written contract with the Board Chair. The contract must include matters stated in Section 74 (2) of the HHB Act and may be terminated by the Board Chair with written notice of at least one month before it is to take effect. Termination of an HSCE is only effective once approved by the Minister for Health and Ambulance Services (Section 74(4)).

How we see it – a relationship built on a shared vision

Boards and HSCEs are the strategic and operational leaders of a health service and have distinct roles within the system. Both are expected to work together to build and maintain a relationship that allows both parties to act in the overall, long-term interest of the health service. The board should work with the HSCE and executive leadership of the HHS to achieve the shared vision and goals of the service. Good governance here calls for a collaborative partnership on strategies and mitigation of key risks. [Read more](#)³⁷

While boards have strategic oversight of all operational activities of the service and can request investigation of issues or topics as needed, they should not intervene in the day-to-day business of the service. That is the domain of the HSCE. While a robust and trusted relationship between both parties is beneficial to the performance of a health service, there must be a clear understanding that the HSCE must answer to the board as a matter of practice, however, the board does not, as part of its mandate, answer to the HSCE. [Read more](#)³⁸

Performance management

Ensuring accountability for performance is key to ensuring that board expectations of the HSCE are met. Expectations for performance must be clearly communicated through a formal contract and should be reiterated and reviewed through ongoing discussions, particularly where changes to strategy or the external environment necessitate a change to performance expectations. The board should agree on how and when formal reviews of the HSCE performance will occur, the format for these reviews, who will lead the review and the strategy to resolve any actions for improvement. [Read more](#)³⁹

HSCE performance management is a responsibility for the entire board, although the final decision on whether a contract is renewed or terminated is the responsibility of the board Chair, subject to approval by the Minister.

What are you saying?

*Clarity of roles is very important. Board members are overseers and governors. Our job is to respectfully interrogate the information provided and ask the difficult questions, not to run operations. **Mike Willis, Chair, Queensland Health Board Chairs' Forum, Chair, West Moreton Hospital and Health Board***

*I travel long distances between sites with my Chief Executive. This gives us generous time to debate and explore issues and provide mentoring opportunities. While there is clear separation in our roles, ensuring we have the time to ensure good strategic alignment between the board and executive has been invaluable to the performance of our HHS. The role of the board is, 'noses in, fingers out'. **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)***

*Boards must be mindful that they do not get involved in the operational day to day running of the HHS - this is the Chief Executive's role. **Tim Mulherin, (late) Chair, Mackay Hospital and Health Board***

*It is important for the board to have an open and honest relationship with the Chief Executive. Both parties should engage in robust discussion, identify and resolve issues consistent with the Strategic Plan. The board has to recognise the role of the Chief Executive as a key driver of cultural change and values in action. **Kim Forrester, Deputy Chair, Metro North Hospital and Health Board***

Additional Reading

- [Relationship between the board and management](#), Australian Institute of Company Directors⁴⁰
- [Performance appraisal of the CEO](#), Australian Institute of Company Directors³⁹

For Discussion...

- How does your board ensure that the relationship with the HSCE is positive and collaborative?
- How would your board manage HSCE performance issues?
- Is your board clear about the separation of roles between the board and the HSCE?

Clinical governance

Why is clinical governance important?

A strong and effective clinical governance framework ensures that clinical services are safe and of a high quality; that patients, clinicians and broader stakeholders have confidence in the safety and quality of clinical services provided; and that clinical services are scrutinised and improved as a matter of practice.

What is clinical governance?

According to the Australian Commission on Safety and Quality in Healthcare, clinical governance is 'the set of relationships and responsibilities established by a health service organisation between its state or territory department of health, governing body, executive, workforce, patients, consumers and other stakeholders to ensure good clinical outcomes'.

[Read more](#)⁴¹

How we see it

Hospital and Health Boards are accountable for the overall quality of care provided by a HHS. It is essential that boards have high level knowledge of the clinical services provided by their own organisation, as well as the key clinical risks and linkages with other agencies such as Queensland Ambulance Service, Primary Health Networks and other HHSs.

While a clinical governance framework is distinct from other governance frameworks, it is just as important. To be successful, a clinical governance framework must be integrated into the overarching governance framework, be embedded in the culture of the organisation, and clearly link with other governance aspects such as risk or financial governance.

How does a board ensure a high quality of clinical governance?

By design, boards have a diverse mixture of skills and experiences to ensure that they can effectively govern a HHS. It is unlikely that all board members will have knowledge of detailed clinical concepts. The HHB Act requires a clinician member on each board, as well as to establish a Safety and Quality Committee. Boards should leverage these resources to ensure that they are appropriately informed on matters of clinical quality and safety (such as serious clinical risks or incidents), and that appropriate context is provided to improve informed decision-making.

The board must be satisfied that any clinical governance system established within their health service will withstand close external scrutiny. This is why HHS service agreements require routine assessment against clinical standards for clinical services provided by a HHS, which includes consideration of clinical governance frameworks. Establishing measures to assess clinical standards and progress is crucial to this process. [Read more](#)⁴²

What are you saying?

*At Metro North, the board has a deep understanding of the complexity of clinical governance. Many board members are also members of clinical councils across the organisation, which allows these bodies to be in tune with board priorities, and vice versa. **Marie-Louise Fleming, member, Metro North Hospital and Health Board***

*In the early stages of the Hospital and Health Board system, boards weren't particularly involved in clinical governance – it was more the realm of clinicians. As maturity has increased at the board and system level, there is more understanding and engagement with system leadership on clinical governance. The management team are more willing to come out and listen to the issues on the ground in our area. This then loops back to addressing these issues with better risk mitigation and strengthening of governance in service delivery. **Leone Hinton, former member, Central Queensland Hospital and Health Board***

*Clinical governance can be one of the most challenging aspects of serving on a Hospital and Health Board. It is important that clinical knowledge is shared with other board members who may not have the same level of clinical understanding of an issue. For example, the importance of primary health care to save lives and allow people to live well. **Ruth Stewart, former member, Torres and Cape Hospital and Health Board***

*It is important for board members and clinicians to manage their expectations of each other's roles. This requires transparency and visibility from all parties, which may include having clinicians come along as observers to board meetings or board members engaging staff at the operational level. **Marion Tower, member, Metro South Hospital and Health Board***

Additional Reading

- [National Model Clinical Governance Framework - ACSQH⁴¹](#)
- [Clinical Governance Standard Audit Tool – Clinical Excellence Queensland⁴³](#)
- [Clinical Governance and the National Model Clinical Governance Framework - ACSQH⁴⁴](#)

For Discussion...

- How does your board ensure that clinical governance is appropriate to the needs of the organisation?
- Is your board appropriately informed of key clinical risks, and mitigation strategies?

Networked governance structure

Why is a networked governance structure important?

A networked governance structure ensures that individual health agencies collaborate and coordinate their activities in the best interests of the broader Queensland healthcare system.

Why is Queensland Health transitioning to a networked governance structure?

In March 2019, the Department of Health engaged an expert panel to provide advice sought by the Minister for Health and Ambulance Services regarding Queensland Health's governance framework. The advice outlined the strengths and weaknesses of the existing federated model of governance and recommended that the Queensland Health governance structure knowingly evolve toward a networked governance structure to improve integration of health care across the system. [Read more](#)⁴⁵

What is a networked governance structure?

The panel definition of networked governance specific to health is where 'each part of the system recognises its obligations to the system as a whole and to one another'. For a HHS, this involves understanding and building mutual and reciprocal obligations between HHSs and the broader health system, taking a state-wide view where possible, and strengthening horizontal linkages across the system.

How we see it - networked governance as an enabler of integrated healthcare

The purpose of the Queensland Health system is to provide leadership and direction, and to work collaboratively to enable the public health system to deliver quality services that are safe and responsive for Queenslanders. This purpose should be at the heart of each HHS. [Read more](#)⁴⁵

While Hospital and Health Boards are responsible for the publicly-funded clinical care delivered within specified geographic regions, they should also recognise that there are many additional providers, facilitators and stakeholders of healthcare services within, and external to, their region that need to be considered when planning and delivering health care. The best patient outcomes are delivered through a coherent and efficient health system, when care is integrated with other providers at different levels of the health care system and across formal boundaries. [Read more](#)⁴⁶

What are you saying?

*There is a need to measure how well we are doing on state-wide quality and safety performance. This requires boards to work together and be held accountable to that broader commitment. - **Mike Willis, Chair, Queensland Health Board Chairs' Forum, and Chair, West Moreton Hospital and Health Board***

*Implementing networked governance is actually about a values-based way of operating rather than a visible, structural model. Boards need to ensure that they are aware of the implications of decisions they make on the broader health system, their impacts and any opportunities arising from mutual interests – as opposed to a singular focus on those at a local area. - **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)***

*Patients don't see a distinction from one service to another in the same way as Hospital and Health Services do. They expect health providers to be there to help them. - **Karen Tully, Chair, South West Hospital and Health Board***

*It is important for boards to have a whole-of-system perspective which enables HHSs to understand what hasn't worked in the past and ensure that we make continuous improvements that move us away from how it's always been done. - **Leone Hinton, former member, Central Queensland Hospital and Health Board***

Additional Reading

- [Advice on Queensland Health's Governance Framework¹⁵](#)
- [Australian Health Care – The Challenge of Reform in a Fragmented System](#), Jane Hall⁴⁶

For Discussion...

- What strategies does your board have in place to integrate care across health service boundaries for mutual benefit?
- How does your board ensure awareness of the broader needs of the health system, outside of your health service?

Effective board meetings

Why is it important that boards run effective meetings?

Board meetings are the main opportunity for boards to exercise informed decision-making. It is imperative to maximise the value of the limited time that boards have together to ensure that meetings are successful with outcomes that reflect good governance practices.

Adequate time and preparation

Proper preparation by every board member is key to an effective meeting. Members must ensure that they have enough time to complete any pre-reading, attend board and sub-committee meetings and any other matters related to their role as a board member.

Board members should make use of a formal meeting cycle that provides clarity as to the frequency, location, advance agenda items and proposed attendees of upcoming meetings. This allows the board and organisation to plan for board meetings and provides awareness of topics that may need to be researched and considered in advance.

Appropriate information

The board is in control of the information that it receives. It should ensure that the agenda and supporting meeting papers are aligned to board priorities in order to facilitate informed discussion and decision making. The board, through the Chair, should discuss issues of quality, quantity or the size of the agenda and supporting papers with executive leadership and the board secretary to improve discussion and decision making.

Board members should always read the minutes of board meetings and be satisfied that the minutes reflect that they have discharged their duties appropriately and provide a record that adequately and succinctly captures their discussions and decisions for future reference. Minutes act as the primary legal record of the meeting and can be summarised as a key communication to the organisation as to the activities and considerations of the board. [Read more](#)⁴⁷

Active participation

Board members should actively exhibit and contribute certain behaviours and qualities in board meetings to increase the likelihood of valuable input and to improve the overall quality of the meeting. These include integrity, curiosity and courage, emotional intelligence, a genuine interest in the activities of the health service, and instinct. It is the responsibility of the Chair to raise performance issues with board members should improvements be required to member contributions, preparation or behaviour. [Read more](#)⁴⁸

In-camera sessions

An in-camera session is a closed meeting of the board without the presence of the health service executive. Given the distinction between boards and executive, the board may benefit from regular in-camera sessions to discuss management performance or openly explore and challenge ideas prior to presenting the board's collective view to the executive. [Read more](#)⁴⁹

What are you saying?

*As Chair, I have an expectation that board members are coming to meetings well prepared and ready to make informed decisions on key agenda items. This ensures that discussion is constructive and business-focused rather than sharing ignorance or wasting time by seeking information that is already available. Where necessary I engage in frank one-on-ones with board members should there be concerns about that member's obligations as a board member. - **Jim McGowan, Chair, South West Hospital and Health Board (former Chair, South West Hospital and Health Board)***

*The expectation of how a meeting will progress occurs far in advance of the actual meeting. Reading the board papers ahead of the meeting is crucial to flagging to members the key issues for consideration and the direction that discussions need to be taken. - **Kim Forrester, Deputy Chair, Metro North Hospital and Health Board***

*It is important that board members see each other as teammates and can speak up and be heard - especially around issues that may cause tension such as financial performance, risk management and lessons learnt. - **Leone Hinton, former member, Central Queensland Hospital and Health Board***

Additional Reading

- [Joint Statement of Board Minutes – Australian Institute of Company Directors, Governance Institute of Australia, August 2019⁴⁷](#)
- [Directors at Work: A Practical Guide for Boards, Kiel et al, 2009⁵⁰](#)

For Discussion...

- How do you prepare for a board meeting?
- Are there improvements to the way that your meetings are prepared and held that could improve meeting effectiveness?

Effective committee meetings

Why is it important for boards to establish effective board committees?

Properly structured and managed board committees allow for the application of specialist knowledge to address complex issues and results in more efficient task allocation and improved accountability for outputs – all of which helps boards to improve their overall performance. [Read more](#)⁵¹

What is a board committee?

A board committee is usually established by a board to ensure that complex or detailed issues are delegated and effectively dealt with by specialists in a field. Board committees ensure that board time is used effectively, with committees undertaking duties that may be impractical for the full board to undertake. Properly managed committees that act on clear expectations can be invaluable to the effective execution of board duties. [Read more](#)⁵²

How we see it

Hospital and Health Boards are required by the *Hospital and Health Boards Act 2011* (the HHB Act) and [Hospital and Health Boards Regulation 2012 \(Qld\)](#) to establish four prescribed board committees (Executive, Safety and Quality, Finance and Audit).

In addition to these mandatory committees, a board can establish additional committees for effective and efficient performance of its functions. Board committees are tasked with providing advice and making recommendations to the board on specific matters related to the functions of the board. A board can delegate board powers to a committee of the board, if all members of that committee are board members.

Considerations when establishing and managing board committees

When establishing a board committee, the board should consider whole of government policy guidelines, such those outlined in the [Governing Queensland](#) suite of handbooks. Both the board and the board committee must have a clear and shared understanding of the purpose, activity, and expectations with regards to decision making and reporting relating to a board committee. This includes taking care to ensure that the responsibilities of the committee do not overlap with other committees. The board must also ensure that the composition and number of committee members is appropriate to the desired outputs. Experts, management staff and external parties may be required to allow the committee to undertake its duties in an informed manner. In addition, board representation is key to ensuring that the work of a board committee is aligned to board expectations and to minimise any information segregation that can arise from the execution of specialised activity by board committees. [Read more](#)⁵³

What are you saying?

*At Metro North, board members have high visibility on clinical councils and committees. This ensures high levels of expertise among board members to enable effective decision-making. It also allows the board to assess whether issues reported to the board align to the issues that are explored more deeply at committees. **Kim Forrester, Deputy Chair, Metro North Hospital and Health Boards***

*Committee members should take the time to read papers thoroughly, which helps to identify what's working or detect any warning signs if something is not going well. The executives and staff called to attend these meetings are the experts, and it is the role of the committee to interrogate the information provided so that they are properly informed. **Karen Tully, Chair, South West Hospital and Health Board***

*Most of the work on the board is done at committee level. We ensure that any board member is able to sit on any committee. This allows for board members to access detailed information as needed. **Darry Camilleri, Deputy Chair, Mackay Hospital and Health Board***

*Fostering a learning culture as opposed to 'naming and blaming' is key to driving more honest conversations and probing questions [at committee meetings]. There is a level of organisational maturity that must be built to own these issues and to create this type of culture in committees and management. **Leone Hinton, former member, Central Queensland Hospital and Health Board***

*Board committees provide assurance and advice to the board that the right strategies and processes are in place at an operational level, to ensure effective service delivery. **Marion Tower, member, Metro South Hospital and Health Board***

*Non-prescribed committees can be important for boards to be flexible and address ongoing and emergent board priorities. These groups should have well defined boundaries, be time-limited and have relevant terms of reference. A reporting pathway through to leadership is imperative to drive results. **Helen Chenery, member, Gold Coast Hospital and Health Board***

Additional Reading

- [Board Committees- AICD⁵²](#)
- [Best Practice for Board Committees – Diligent⁵³](#)

For Discussion...

- How does your board ensure the effectiveness of its committees?
- Does the membership structure of board committees have a good mix of board members, experts and executives?
- Does your board have any priorities that may be best managed through a board committee?

Role of Board Secretaries

How does the board secretary support the board?

An informed and engaged board secretary helps to protect the organisation by ensuring the board governs in accordance with the [Hospital and Health Boards Act 2011 \(the HHB Act\)](#) and governance best practice.

How does the board secretary support the board?

As the responsibilities of boards have increased and there is a greater focus on competent, accountable, ethical and strategic leadership, the volume of work and necessary skills to support the board have resulted in increased importance of the role of the board secretary. The board secretary role includes supporting the day-to-day business of the board and executive, and an extensive array of secretariat and governance-focused functions.

The board, particularly the Chair, relies on the board secretary to provide administrative support (i.e. taking meeting minutes, circulating papers etc.), as well as providing guidance on directors' statutory duties under the law, disclosure obligations, corporate governance requirements, and effective board practices and processes. The board secretary is a key interface between the board and the rest of the organisation.

The role of the board secretary has developed into much more than ensuring compliance against basic statutory requirements. Greater public scrutiny and the need for increased compliance regulation as a result of recent royal commissions, such as those into the [Banking, Superannuation and Financial Service Industry](#), have continued to shape the role of the board secretary as a governance professional and trusted advisor to the board.

What are the skills and responsibilities of an informed and engaged board secretary?

The board secretary understands good practice in corporate governance, ensuring that the way the board discharges its duties, runs meetings, and makes decisions complies with the HHB Act. A skilled board secretary is seen as a trusted advisor to the board.

Responsibilities may include elements of both compliance and performance, including record-keeping, quality control of board papers, ensuring compliance against relevant legislation, providing and procuring governance advice for directors and facilitating collaboration between members. [Read more](#)⁵⁴


What are you saying?

The board secretary must have a close working relationship with the Chair and with the rest of the board to ensure statutory compliance. My expectation is that a board secretary has a clear understanding of their responsibility under the Act, as well as to the expectations of the board that they are serving. They must be able to facilitate rapid responses to the Department of Health, and act as an effective support mechanism to ensure meetings are efficient. **Paul Woodhouse, Chair, North West Hospital and Health Board**

The person in the board secretary role needs to be loyal, incredibly attuned to the role of the board, and able to facilitate everything the board requires to carry out its role. This includes a compliance function to ensure that the board is meeting all its mandatory requirements under legislation. **Kim Forrester, Deputy Chair, Metro North Hospital and Health Board**

A board secretary needs to facilitate communication between the board and the organisation. To do this well they need to understand the business of the board, as well as the many functional parts of the organisation. They should know what is being discussed at the operational level and understand the impacts of these discussions at the strategic level. Excellent communications skills are indispensable, as is a mix between secretariat skills and strategic insight. **Marie-Louise Fleming, member, Metro North Hospital and Health Board**

Additional Reading

- [Joint statement on board minutes, August 2019 – Australian Institute of Company Directors and Governance Institute of Australia](#)⁴⁷
- [The digital habits of highly effective boards – A guide for 2020 and beyond – VISMA.com](#)⁵⁵
- [Future of the Governance Professional – Governance Institute of Australia](#)⁵⁶ 

For Discussion...

- Is the role of the board secretary well understood on your board?
- How has the role of the board secretary changed in your service – are there plans to change this role further?

The relationship between boards and Board Secretaries

Why is shared understanding of the relationship between boards and board secretaries important?

A shared understanding of this relationship is important for the effective governance of the Hospital and Health Service and is crucial in establishing and maintaining a good working relationship between the board and the Health Service Chief Executive.

How we see it

The board secretary is expected to act as the interface between the Hospital and Health Board and the HSCE by ensuring the flow of appropriate information and provision of advice and support. The secretary is responsible for ensuring correct board processes and governance procedures are followed.

The secretary as an intermediary between the board and the organisation

The secretary has a unique role with dual accountability to the board and the HSCE. The secretary reports to the board Chair on board matters, ensuring that appropriate and adequate information is provided to the board so they can undertake due diligence and assessment of HHS performance. The secretary reports to the HSCE operationally on strategic governance matters to enable the HSCE to align activities with board expectations. [Read more](#)⁵⁷

Communication and confidentiality

Good communication between a board and the secretary is crucial in ensuring the board can undertake board business in an effective and timely manner. The secretary should establish clear protocols of communication with the board and establish the most effective communication methods for directors.

There should be an understanding between boards and secretaries that all communication is confidential and that during scheduled board and committee meetings all conversations, unless otherwise stated, are recorded for official minutes. This may include situations where board conversations are required to be confidential from executives.

Managing performance

Boards should regularly provide feedback to the secretary on performance to maintain continuous improvement in governance practices. Key duties of the secretary should be reviewed as part of monthly and annual evaluations of meetings.

What are you saying?

*There must be open communication between the board and the secretary, however the secretariat must also understand their role is one of support to the board. The secretary needs to understand and assist the board in meeting key obligations and responsibilities, while being open to suggestions that make meetings more efficient. **Ella Kris, Chair, Torres and Cape Hospital and Health Board***

*The Chair is expected to work very closely with the board secretary to ensure compliance as mandated under the Act. As a result, the relationship between the Chair and secretary needs to be built on trust and professionalism. **Paul Woodhouse, Chair, North West Hospital and Health Board***

*A good board secretary can respectfully challenge executives and enable deep dives into complicated issues. **Marie-Louise Fleming, member, Metro North Hospital and Health Board***

Additional Reading:

- [The Role of the Company Secretary: Influence, Impact and Integrity](#)⁵⁸
- [The Role of the Company Secretary in the NHS](#)⁵⁹

For Discussion...

- What feedback is provided to the board secretary to allow for continual improvement of performance?
- How does your board manage potential tension of the role of the company secretary as a position that is responsible to the board, with reporting obligations to the HSCE?

Strategic planning

Why is strategic planning important?

Good strategic planning increases the likelihood that an organisation will achieve a desired future state through shared understanding of vision, purpose and priorities, and coordinated activity.

What is strategic planning?

Planning is a function of management that is designed to determine and drive achievement of organisational objectives. Planning is a proactive activity, based on consideration of internal and external environments that may impact on the achievement of the objectives. Strategic planning is long-term planning undertaken at the highest level, designed to establish the priorities and influence the very nature of an organisation. [Read more](#)⁶⁰

How we see it

Strategic planning occurs at all levels of the health system. A strategic plan for a Hospital and Health Service must take into account systemwide plans, including the [Department of Health Strategic Plan](#)⁴⁵ as well as local requirements and expectations.

How to approach strategic planning

Strategic planning is a coordinated activity between boards and management. During the planning process the board should seek to strike a balance to ensure that they have ongoing oversight and final say on matters of strategy, while the design, drafting and implementation of plans is led by management. HHBs must also have regard for specific requirements of government when undertaking strategic planning activity. [Read more](#)⁶¹

The process to develop, monitor and review strategy must be well understood by boards and management. This involves ensuring that methodology is formally considered and decided upon, and that appropriate time is set aside to consider and develop the strategy (for example, through a strategic planning workshop) at various stages of completion. Final strategic plans must reflect the desired strategic direction of the board and fall within the acceptable risk appetite. [Read more](#)⁶²

Revisiting and ongoing monitoring of plans

It is important that strategic plans are continually monitored in order to ensure that decisions and considerations by the board and management align to the long-term direction and goals set by the strategic plan. While planning is important in terms of ensuring a deliberate strategy to guide an organisation, the board must be sensitive to emergent changes in their environment and be prepared to amend strategies. Monitoring organisational performance against strategic plans is a key challenge for boards. Boards should ensure that the information they receive allows consideration of whether, cumulatively, the activity of the organisation places it on a trajectory to meet strategic objectives. [Read more](#)⁶³

What are you saying?

*A strategic plan must be dynamic. It should be reviewed on a regular basis, but stand up to long-term scrutiny. **Rob Stable, former Chair, Metro North Hospital and Health Board***

*Strategic planning is something we take seriously from a board perspective. We are well prepared in this area. Even in difficult situations the board should still be working toward their strategic goals. **Tim Mulherin, (late) Chair, Mackay Hospital and Health Board***

*A good strategic plan should be undertaken in collaboration between the executive team and the board. It should centre on the purpose of the organisation, then unpack what success looks like with high level indicators to ensure that performance can be measured. Risk planning, operational planning and project planning must be factored in, as all activity in the organisation must link back to the board's strategic direction. There is a continual need to understand why HHSs are choosing to undertake particular activities and how these align to strategy. **Helen Darch, member, Metro South Hospital and Health Board***

Additional Reading:

- [The Big Lie of Strategic Planning – Harvard Business Review](#)⁶⁴
- [Strategic Planning in Healthcare: An Introduction for Health Professionals – Brian C. Martin](#)⁶⁰

For Discussion...

- What are the strategic planning processes for your Hospital and Health Board?
- How often is your strategic plan reviewed?
- How does your board monitor progress toward achieving the strategic plan?

Measuring performance

Why is performance measurement important for Hospital and Health Boards?

Performance management in the health context allows for understanding as to how well an organisation is executing its activities and to effect positive change to improve the quality, efficiency and effectiveness of care.

What is performance measurement?

Performance measurement uses outcomes and process measures to evaluate the extent to which a system achieves specified objectives. Performance measures are put in place to support policy outcomes, improve the quality of strategic and operational decision-making, and are integral to accountability. It requires the ability to measure relevant components of the health system and their relationships with each other including the performance of Hospital and Health Boards. [Read more](#)⁶⁵

How we see it – board performance as an indicator of good governance

The *Hospital and Health Board Act 2011* requires the Director-General and each HHS to enter into a binding service agreement signed by the board Chair. Service agreements typically include measures including budget, Minimum Obligatory Human Resource Information (MOHRI), a mechanism for monitoring the number of employees in Queensland Health, National Emergency Access Targets (NEAT), National Elective Surgery Target (NEST), patient off stretcher time (POST) and Emergency Department wait times. [Read more](#)¹⁵

Tailored performance measures

Hospital and Health Services have marked differences in budget, funding models, models of care and community demographics. Boards should therefore ensure that performance considerations take into account additional measures that focus on improving the quality, effectiveness and efficiency of their local health service. This may include negotiating service agreements to meet local needs through the inclusion of measures that may include procurement, capital works, human resource management or clinical capabilities. [Read more](#)¹⁵

Boards should consider whether the performance targets they have set, and the indicators of performance that they receive, adequately measure the progress toward meeting the strategic priorities of the organisation. Local targets and measurements may need to be designed that are not explicitly required, through a compliance mechanism to adequately measure progress. Board members should also work to familiarise themselves with the drivers that lead to performance outcomes in order to better interrogate performance measures and improve decision-making.

What are you saying?

*Service level targets are important as they reflect the health needs of the community and the capacity of the health service to meet those needs. As a board, we have to ensure that the health service is providing safe, high quality care and is working as effectively and efficiently as possible, within finite resources, to meet those needs. **Lorraine Ferguson, Chair, Sunshine Coast Hospital and Health Board***

*Boards need to understand what drives the results behind the key performance indicators they are provided. They need to be equipped with the penetrating questions that drive understanding of performance and ensure pressure on management to improve where necessary. **Ian Langdon, Chair, Gold Coast Hospital and Health Board***

*Boards need to be prepared to interrogate information. This may require reconceptualization of what is presented to boards, and in what format. One way of doing this is reshuffling the Board agenda to ensure that matters that have serious and significant outcomes are highly visible, rather than being buried in the minutiae of board committees. This ensures a focus on prioritising and achieving the most significant outcomes for the Hospital and Health Service and the communities they serve. **Marion Tower, Member, Metro South Hospital and Health Board***

*Figuring out healthcare performance is the billion-dollar question. Boards need to balance qualitative and quantitative measures so that they have a broad understanding of performance. While it is important that boards monitor Commonwealth and State performance indicators, they should also take care to ensure that metrics that are important to their clinical workforce are considered, and that metrics do not trivialise safety and quality of care. **Helen Darch, member, Metro South Hospital and Health Board***

Additional Reading:

- [WHO - Performance measurement for health system improvement: experiences, challenges and prospect, 2008⁶⁶](#)

For Discussion...

- What are the key measures that indicate good performance in your health service?
- What are the drivers that impact on these measures?

Financial governance¹

Why is financial governance important?

Good financial governance is a set of responsibilities and practices, policies and procedures used by an agency's executive to provide strategic direction, ensure objectives are achieved, manage risks and use resources responsibly and in a transparent way. [Read more](#)⁶⁷

What are the main requirements of financial governance?

The two main requirements of financial governance are performance and accountability.

Performance relates to how governance arrangements are used to contribute to overall performance and the delivery of outcomes:

- to improve results by effective use of performance information
- for more equitable and cost-effective learning outcomes due to efficient use of resources to successfully deliver government programs and services
- to increase the value of businesses using a cycle of continuous improvement.

Accountability relates to how governance arrangements are used to ensure that the requirements of the law, regulations, Parliament and community expectations are met:

- to fulfil obligations and legislative requirements in the best interests of customers with clear procedures, roles and responsibilities to ensure confidence in decisions and actions
- to act impartially and ethically to meet community expectations of integrity, transparency and openness.

A balance is required between performance and accountability to achieve better results, use resources in the best and most efficient ways, capture opportunities to add value to public assets, act with integrity and ethically in the best interests of customers, and ensure that decisions are supported by transparent and clear roles, responsibilities and procedures.

Principles of financial governance for boards

Seven inter-related elements should guide boards financial governance practices:

Direction—shared understanding of purpose and priorities through collaboration and effective planning and resource allocation

Expectations—agreed performance expectations through effective communication and best practice management

¹ Provided by the Finance Branch, Queensland Health

Delivery—quality customer-focused service delivery through effective resource management, monitoring, review and reporting

Improvement—enhance organisational performance through review, intervention, capability building and internal control mechanisms

Risk management—regularly assess and respond to risks and opportunities as a part of daily activities

Responsibilities—accountability and transparency for decisions through legislative compliance, information management, evaluation and corporate reporting

Alignment—functions, structures and culture that support organisational goals through quality leadership, a clear line of sight, role clarity and empowered staff.

What are you saying?

*Boards must become more efficient in an environment where public health is used more often. This requires a collaborative approach and can be difficult to approach at an individual HHS level. This is no longer a philosophical discussion - HHBs must be able to prove their effectiveness to secure funding for desired services. **Paul Woodhouse, Chair, North West Hospital and Health Board***

*Good financial management at the board level requires members to read and understand the content provided, use other board members as a sounding board, and have the confidence to ask the questions of executives to ensure that the information is thoroughly investigated and understood. **Karen Tully, Chair, South West Hospital and Health Board***

Additional Reading:

- [The Importance of strong financial governance – Healthcare Financial Management Association](#)⁶⁸

For Discussion:

- How does your board ensure good financial management?
- Is the quality and timeliness of financial reporting considered by the board appropriate, and critically interrogated as a matter of practice?

Engaging with risk

Why is board engagement with risk important?

Mature understanding of, and engagement with, risk allows agencies to set and achieve realistic objectives, comply with their obligations, improve decision-making and effectively and efficiently allocate and use resources.

[Read more](#)⁶⁹

What is risk?

The International Risk Management Principles and Guidelines standard (AS/NZS ISO 31000:2009) define risk as the effect of uncertainty on objectives. Every organisation has risks that must be managed to minimise the likelihood and severity of events that may have a negative impact on the organisation, its patients, staff and stakeholders. Conversely, risk offers opportunities that can improve outcomes for an organisation. [Read more](#)⁷⁰

How we see it

Risk is not an inherently negative concept. It is present in every action and is a continually evolving consideration for boards. Healthcare is an extremely complex environment in which to operate and is subject to both evolutionary and sudden transformation as a result of changes to the local, national or global healthcare environment. [Read more](#)⁷¹

Hospital and Health Boards assume responsibility for their health service and are responsible for providing strategic direction, authority and oversight to the overarching risk function. Boards should therefore understand and be satisfied that the organisation has effective systems to proactively identify, manage and mitigate risk. This requires a good understanding of the types of risk to which they are exposed and clarity as to how the organisation is expected to respond. Boards should set a risk appetite for the organisation to explicitly state their expectations with regards to the amount and types of risk that should be accepted. Board committees can provide an opportunity for boards to explore and provide advice on specific risks more deeply than would otherwise be possible at the board level. [Read more](#)⁷²

Strategic versus operational risk

Boards should understand the various categories of risk to which they are exposed, including strategic, operational, clinical, financial and compliance. Boards should focus on strategic risks as they relate to the ability of an organisation to achieve its objectives. Boards should exercise caution that strategic risks are not confused with operational risks, which could affect the ability of an organisation to execute its strategic plan. Boards should clearly specify those risks which it considers strategic and therefore remain the direct responsibility of the board to consider and manage. The oversight function of the board requires that they are informed of appropriate operational risks – even though they do not directly manage these risks. [Read more](#)⁷³

Risk culture

A robust risk culture is necessary for a health service to respond and adapt well to uncertainty. The risk culture for an organisation is the shared attitudes and behaviours toward the management of risk. The board plays a key role in setting the risk culture by providing clear expectations for the tolerance for risk and by modelling the behaviours it expects with regards to risk appetite. This ensures that decisions that the board would consider as high risk are limited, as are missed opportunities due to an overly cautious approach.

What are you saying?

Hospital and Health Services are not one size fits all. The issues faced in Metro areas are not the same as those being experienced by the South West. To properly engage with risk boards must understand the needs of their local population. **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)**

Understanding and engaging with risk is key to effective board activity. Boards in healthcare are operating in an inherently risky environment and need to be focused on mitigation and monitoring strategic risk and at times feel confident to undertake deep dives on critical issues. A good risk and mitigation strategy is required at board level to ensure a balanced approach; being overly cautious can stall activity and innovation, whereas too high a risk tolerance can be dangerous. **Scott Davis, Deputy Chair, Torres and Cape Hospital and Health Board**

In practice, health professionals work on risk mitigation all the time. They may not understand the language of risk, but they do understand the principles, which can make them a rich source of information for boards. **Leone Hinton, former member, Central Queensland Hospital and Health Board**

Risk is one of the key issues facing boards. There are many risks which are difficult to manage if boards don't have access to the information required for informed decision-making. Board members should triangulate information collated from board reporting and data with that collected through discussions with staff and communities. This allows comparison between primary and secondary information. **Helen Darch, member, Metro South Hospital and Health Board**

Additional Reading:

- [Risk Management policy – Queensland Health](#)⁷⁴
- [Risk management for Directors – Governance Institute of Australia](#)⁷²

For Discussion

- Consider the information that your board needs to assure itself that strategic risks are being controlled. Is this being received in a format and standard of quality that allows for ongoing monitoring and control of strategic risk?

Board evaluations

Why are board evaluations important?

Board and individual director evaluations are critical to provide feedback on individual and group performance to enable continual growth and improvement.

What is a board evaluation?

A board evaluation is a framework that provides for review of the performance of board governance activities such as roles, process, key functions, effectiveness and dynamics. Board evaluation improves the ability of a board to perform its functions in accordance with the [Hospital and Health Board Act 2011](#).

How we see it – board evaluations enable continual improvement

It is good practice for boards to undertake an informal board evaluation at each meeting to address any emergent performance issues. More extensive board evaluation should be instigated on an annual basis. The board will determine what is to be included in a board evaluation, however, may consult with stakeholders such as the Department of Health or the board secretary to inform the evaluation criteria.

The evaluation may be qualitatively based, where a director is asked to comment on any aspects of the meeting and/or a short quantitative based questionnaire can be used to allow tracking of meeting performance over time. As per recommendation 7 of the Advice into Queensland Health's Governance Framework, at least once in a three-year cycle, the Chair of each Hospital and Health Board should commission an independent external review of the board's performance and provide the findings to the Director-General.

Group versus individual evaluations

When establishing a board evaluation, it is important to clarify what group or which individual/s are being evaluated. Potential components that could form part of a board evaluation include:

- **The board as a whole** – this assesses how the board is performing its functions as per the *Hospital and Health Board Act 2011*.
- **The board's committees** – this assesses the adequacy of the board's committee structure and how well they support the role of the board in delivering its functions as detailed in the terms of reference.
- **Individual directors** – this assesses how well directors perceive themselves and other directors in contributing to the work of the board.
- **The board Chair and Chairs of committees** – this assesses how well the Chairs fulfil their roles considered against the expectations of those roles.

All evaluation outcomes should be documented and used to promote continuous improvement.

Benefits of a board evaluation

Boards that undertake regular evaluation processes find improvement across several aspects of governance, including improved leadership, greater clarity of roles and responsibilities,

improved teamwork, accountability, decision-making, communication and more efficient board operations.

What are you saying?

Board members are able to give constructive feedback on the board's performance, and by extension, on my performance. It is important that the performance of the Chair is included in evaluations, as this feedback is used to improve our understanding and oversight function of the health service. **Paul Woodhouse, Chair, North West Hospital and Health Board**

Healthcare is not something that stands still. The role of the board and subsequent expectations are subject to constant change. Evaluation is key to understanding whether the board and members reflect expectations across the health system and of the communities they serve. **Marion Tower, member, Metro South Hospital and Health Board**

A key part of our board performance evaluation is an annual planning day to discuss its role, function, who we are, what's working and what's not working in terms of board performance, expectations of board members. **Leone Hinton, former member, Central Queensland Hospital and Health Board**

Improvement in action:

An independent evaluation of the board and its committees identified risk management as an area for improvement. Implementation of the recommendations of the evaluation resulted in a significant improvement in good governance at board level. Through the board meeting process there is now a formal mechanism in place to ensure we have measures of continuous improvement happening. - **Peta Jamieson, Chair, Wide Bay Hospital and Health Service**

Additional Reading:

- Board evaluation and director appraisal - [AICD](#)⁷⁵
- Global board evaluation practices and trends – [Corporate Secretaries International Association](#)⁷⁶

For Discussion...

- How regularly does your board conduct informal and formal board evaluations? Are these used to improve performance?

Preventative healthcare

Why is preventative healthcare important?

A proactive approach with relation to preventative healthcare activity is crucial to reduce the number of unnecessary or preventable presentations, thereby reducing unnecessary burden on the healthcare system.

What is preventative healthcare?

The World Health Organization defines preventative healthcare as “approaches and activities aimed at reducing the likelihood that a disease or disorder will affect an individual, interrupting or slowing the progress of the disorder or reducing disability.”

The main goal of preventative healthcare is to reduce avoidable hospital admissions and presentations by funding and improving the capacity of primary care services to prevent and better manage high risk chronic illness and its complications. [Read more](#)⁷⁷

How we see it

The Queensland Government is committed to pursuing preventative healthcare as a strategic priority [Read more](#)⁷⁸. Chronic diseases are the leading causes of death and disability worldwide. Well-executed preventative healthcare activities are more effective, less expensive and have a greater population impact than the treatment of avoidable admissions. [Read more](#)⁷⁹

The *Public Health Act 2005* provides the legislative basis to protect public health through cooperation between the state government, local governments, health care providers and the community. In addition, the *Hospital and Health Boards Act 2011* states that a health service should include a program or activity for the prevention and control of disease or sickness, the prevention of injury, or the protection and promotion of health.

The role of the board in preventative healthcare

Hospital and Health Boards have a fundamental governance role in overseeing patient safety and quality. Effective board oversight is clearly linked to patient outcomes. [Read more](#)⁸⁰.

Given the long-term health and financial benefits of preventative healthcare, Hospital and Health Boards should pursue a collaborative approach between their health service, health care providers and the community to encourage integrated and sustainable preventative healthcare, education programs and initiatives to reduce premature mortality and morbidity, improve quality of life and to reduce unnecessary hospitalisation.

What are you saying?

*The focus of the health system is often on sickness rather than health. We understand we would do better if we were running community wellbeing programs, but funding is still mainly directed to the hospitals. There is still some cultural resistance to a preventative and wellness focus in healthcare. **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)***

*The importance of promoting prevention is that you keep people healthy for longer, so hospitals can focus on acute care instead of spending large amounts of time on people with chronic illness. **Marie-Louise Fleming, member, Metro North Hospital and Health Board***

*Preventative health can provide great return on investment, however, often requires discretionary funding to deliver. Boards need to invest strategically to ensure that services provided are good for the community and must be inventive about ways to keep people healthy for which they are not necessarily reimbursed. **Helen Darch, member, Metro South Hospital and Health Board***

*It is critical that we get people to stop coming to hospitals that don't need to be here, as we are primarily funded to provide health care rather than deliver prevention activities. Communication and partnerships with non-government organisations and Primary Health Networks are key to ensuring that critical patient cohorts can be strategically targeted to prevent unnecessary hospitalisation. **Marion Tower, member, Metro South Hospital and Health Board***

Additional Reading

- [The skills required for preventative healthcare – Adi Gaskell, Forbes](#)⁸¹
- [Successful prevention of non-communicable diseases: 25 year experiences with North Karelia Project in Finland](#)⁸²

For Discussion...

- What is your board strategy relating to healthcare prevention?

Research and innovation

Why is research and innovation important in a health context?

Advances in research and innovation play a critical role in driving ongoing improvement across the Queensland health system by finding and applying new knowledge and discoveries in a cost-effective way.

What is research and innovation in the context of healthcare?

Research is about discovering new treatments and technologies and making sure that existing treatments are used in the best possible ways to improve outcomes for patients and the healthcare system. Research can find answers to things that are unknown, filling gaps in knowledge and changing the way that healthcare professionals work.

Innovation can take many forms, ranging from drug therapies, surgical procedures, devices and tests, through to new forms of health professional training, patient education, and management, financing and service delivery models. [Read more](#)⁸³

What are the benefits of supporting research and innovation?

Health research has high value to society. It can provide important information about disease trends and risk factors, outcomes of treatment or public health interventions, functional abilities, patterns of care, and health care costs and use. Research is essential to finding out which treatments work better for patients, filling gaps in knowledge and changing the way that healthcare professionals work.

How we see it

The department, together with Hospital and Health Services, already invest in health research to improve health outcomes for the state and to encourage world class global research. This process takes time, funding and commitment at all levels of the health system and must be well understood and driven by Hospital and Health Boards.

Boards should set the tone of their organisation in supporting and committing to a dynamic system-wide research culture in collaboration with other health services, hospital foundations and local and global research partners such as universities and the corporate sector. A mature research and innovation strategy can be used to attract, support and develop researchers, and encourage innovation to improve health outcomes. [Read more](#)⁸⁴

What are you saying?

Boards have to be literate to the risks of an innovation agenda and understand how to read opportunities and challenges of these partnerships. The role of the board is to give permission, define the risk appetite for people to try new things, and to drive translational activity. **Scott Davis, Deputy Chair, Torres and Cape Hospital and Health Board**

A well-structured research strategy must understand the spectrum of research quality (high quality, good quality and emerging). This approach has the patient at the center of care

and drives a research innovation agenda that is translational and can deliver practical benefits to patients and the health service. **Marie-Louise Fleming, member, Metro North Hospital and Health Board**

HHBs need to be aware of the long-term implications of partnerships/collaborations and ensure that matters of commercialisation and intellectual property are considered early, to ensure that they are addressed appropriately and in a timely manner. **Helen Chenery, member, Gold Coast Hospital and Health Board**

Research drives practice, without a strong research culture the status quo will remain [so] it's important to have research strategies that articulate what the organisation is setting out to achieve and enable boards to measure their progress. **Marion Tower, member, Metro South Hospital and Health Board**

Identifying and applying knowledge and technologies from non-healthcare industries can play a role in driving on-going improvement across healthcare. Learnings from logistics utilised in air traffic control in the aviation industry have led to improvements in patient flow, and partnerships with the digital innovators have led to improvements in patient care. **Colette McCool, member, Gold Coast Hospital and Health Board**

Improvement in Action

Researchers at The Prince Charles Hospital Foundation (The Common Good) are at the forefront of global ground-breaking research into the treatment of silicosis. The treatment is called 'Whole Lung Lavage' and involves washing the toxic silica dust out of the lungs with 25 litres of warm saline solution. Currently the Foundation is on a major fundraising drive to secure additional research funding into this life-saving treatment. The ongoing success of this research requires the Foundation to work closely with the HHS, the board and clinicians to ensure that the research translates well into practice and that the Hospital and Health service has the capacity to roll out the treatment. **Bonny Barry, member, Metro North Hospital and Health Board**

Additional Reading:

- [Problems and promises of innovation: why healthcare needs to rethink its love/hate relationship with the new](#), Mary Dixon Woods, Rene Amalberti, Steve Goodman, Bo Bergman, Paul Glasziou, 2010⁸³

For Discussion...

- What strategies are in place to foster a culture of innovation within your HHS?
- Is there a research strategy in place that is appropriate to the broader strategies of your organisation?

ICT and cyber security²

Why we need it

Adoption of technologies and migration to digitally-based healthcare provision is creating an unprecedented reliance on the information and communication technology (ICT) environment. Mature ICT and cyber security systems reduce the likelihood of data theft, disruption or interference of ICT platforms which could lead to potentially severe impacts including patient harm.

What is cyber security and information security

Cyber security is broadly defined as the measures used to protect the confidentiality, integrity and availability of information, systems and data from cyber compromise. Information Security is a set of processes, practices and technology solutions which are designed to protect IT infrastructure (such as computers, smartphones, networks and communication links), software programs, and data, from unauthorised access, use or destruction. [Read more](#)⁸⁵

How we see it

For Queensland Health, cyber security is about achieving the balance between delivering high quality healthcare and protecting information.

With advances in clinical methodologies and supporting technology, the reliance on digital enablers becomes more critical for the effective delivery of advanced healthcare. Queensland Health takes data privacy and confidentiality obligations seriously and acts in accordance with the *Information Privacy Act 2009* and *Hospital and Health Boards Act 2011* as well as a range of other relevant legislation that governs the health sector and state government bodies.

Queensland Health holds sensitive personal, medical, and financial information for patients of the public health system, as well as sensitive information on the functions of the organisation, its staff and partners. Additionally, Queensland Health also supports and delivers services that are critical to the health and wellbeing of the residents and visitors to the state who rely on the Queensland public health service and must protect the ongoing function of these services.

There is an ever-increasing need to be resilient in an aggressive and constantly changing cyber security threat environment to protect healthcare systems and data that are continually growing in volume, distribution, and value to cyber criminals.

The threats of cyber-attack, data theft and information leakage with the associated reputational damage are significant for all health services. To mitigate these threats, services need to ensure adequate protection mechanisms are in place and supported by appropriate awareness training and procedures. [Read more](#)⁸⁶

²² Provided by eHealth Queensland

How is cyber security managed in Queensland Health?

Currently HHSs and the department are largely approaching the adoption of security solutions independently. The challenge of managing cyber security in a federated model has been addressed in part by the adoption of a Memorandum of Understanding between all HHSs to facilitate a collaborative relationship for the delivery of cyber security services.

In 2019, Queensland Government adopted *Information Standard 18: Information Security (IS18)*. All accountable officers and statutory bodies, as defined in the *Financial Accountability Act 2009*, are bound under this standard to develop, document, implement, maintain and review appropriate security controls to protect the information they hold. This is being achieved by establishing appropriate information security policies, undertaking planning and governance in line with the standard, and adopting all specified frameworks, standards and reporting requirements – an Information Security Management System.

The benefits of cyber security skills on boards

The HSCE has overall responsibility for information security across HHS managed systems/all local systems in their HHS. The HSCEs provide assurance to the board and the Director-General in relation to the appropriate application of cyber security and compliance to Queensland Government legislation and policy requirements. System-wide reporting of incidents and vulnerabilities is in place to ensure the Director-General has state-wide oversight of information security risks, incidents and issues. The board and the Department of Health Cybersecurity Team need to work together to affect a behavioral change amongst employees to make the way they interact with technology safe, automatic and consistent.

What are you saying?

IT and cyber security are well and truly on the radar for boards, and members don't need to be IT and cyber experts to ensure that these risks are mitigated. Boards should always be able to outline their framework for managing IT and cyber security risks, show an understanding of the assets that could lead to a collapse of system and have visibility of the controls to limit this occurring. - Mike Willis, Chair, Queensland Health Board Chairs' Forum and Chair, West Moreton Hospital and Health Board

The challenge with IT is to advance the digital health footprint and at the same time attempt to modernise legacy IT services in order to ensure the best available security. - Marie-Louise Fleming, member, Metro North Hospital and Health Board

Additional Information (links internal to Queensland Health)

- [Queensland Health Cyber Security Strategy \(2019-2024\)](#)
- [Queensland Health Cyber Security Awareness Strategy](#)
- [Department security policy framework](#)

For Discussion...

- What are the main IT and cyber security risks facing your HHS?
- Does your board have a broad understanding of IT and cyber security?

Data and information management³

Why is data and information management important in a health context?

Information is of critical strategic importance to Queensland Health and must be managed appropriately. Information is central to improving healthcare outcomes and providing integrated care. Insights allow us to make decisions about the way we deliver quality care, support better services and make the most of our resources.

How we see it

The Queensland Health vision for information management is “our information is fit for purpose and easily and securely shared to support good decision-making”.

Boards and senior management are responsible for ensuring that appropriate governance frameworks, policies and processes for information management activities are in place and are being adhered to, in order to manage risk appropriately. However, with the exponential growth of data, and changes to the way businesses operate caused by digital disruption, not only is it a challenge for governance to keep pace with new developments, it can be a challenge for boards and senior management to fully understand the opportunities and risks arising from all the information management activities throughout an organisation.

Having a workforce that is confident and capable to manage and use information and digital health technologies is essential. [Read more](#)⁸⁷

What is information management?

Information is a valuable asset that must be effectively managed and maintained. Well managed information enhances decision-making and supports service delivery. Queensland Health has set out a clear commitment, strategic direction and consistent approach for the use and management of its information. Implementing strategic information management practices reinforces a robust information management culture within Queensland Health.

Managing information as a core strategic asset is the responsibility of all business areas of Queensland Health (including clinical and non-clinical).

Information management includes the following areas:

- Data management
- Information asset management
- Information access and use management

³ Provided by eHealth Queensland

- Information governance
- Record keeping.

Underpinning all services that Queensland Health provides is information that covers:

- The care and treatment of patients, including the monitoring of personalised medicine in the use of digital technologies.
- Administration and management of services across the health ecosystem.

Why do boards need to be aware of this?

In their oversight role, boards should play a crucial role in “enabling good data and information across the health sector that bring innovative advances in the way we create, use and manage information”.

Digital information is fundamental to advancing healthcare for our consumers, clinicians and the community through digital innovation. Health sector trends such as ageing populations, increases in chronic and complex diseases and rising healthcare costs have triggered a priority shift towards digital health and connected systems that enable optimal patient care and reduce strains on the healthcare system.

What are you saying?

*The other area which we need to address is technology – How do we as boards better utilise technology in the provision of health services, while maintaining the critical doctor-patient relationship? **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)***

Additional Information (links internal to Queensland Health)

- [Queensland Health Information Management Strategy](#)
- [Queensland Health Information Management Strategy Roadmap](#)
- [Queensland Health Information Management Strategy one pager](#)
- [Queensland Health Information Management Framework](#)

For Discussion...

- How does your board ensure effective oversight of data and information management?
- How confident is your Board that your HHS is compliant with related record and retention and disposal policies and procedures?

Financial and operational reporting⁴

Why is financial and operational reporting important for your board?

Financial reporting is the reporting of financial data against prior periods and enables board members to review an entity's financial position over a specified period. It also allows board members to gain an understanding as to how the entity is tracking, compared to budget. Operational reporting enables board members to better understand how efficiently and effectively the entity is running, based on facility-specific key performance indicators (KPIs).

What is financial and operational reporting?

The objective of financial reporting is to provide consistent, timely and accurate data by operational unit management to executive management.

How we see it – financial literacy as crucial to managing risk

Good financial literacy is crucial to board oversight of financial reporting. *The Financial Accountability Act 2009* requires departments and statutory bodies to:

- prepare annual financial statements and have them audited by the Auditor-General
- prepare an annual report and have the appropriate Minister table it in Parliament.

Both the financial statements and annual report must be prepared in the way, and within the timeframe, stated in the [Financial and Performance Management Standard 2019](#) (FPMS).

External and internal reporting

External Reporting includes:

- the financial statements
- the annual report.

Internal reporting:

- provides relevant and accurate financial information to assist informed management decision-making
- gathers and reports information in a timely manner, in accordance with user needs
- provides information for assessing the financial performance and financial accountability of a department.

⁴ Provided by the Financial Governance Branch, Queensland Health

Where can I find out more about the board’s financial reporting obligations?

The FPMS refers departments and statutory bodies to the documents Financial Reporting Requirements for Queensland Government Agencies (FRRs) and the Annual Report Requirements for Queensland Government Agencies (ARRs). The requirements in these documents may change over time to reflect the changing environment and emerging best practice.

What are you saying?

*Good financial management often requires the board to make tough decisions as to where funding should flow. The nature of healthcare is that there are always competing priorities, so the board must be agile and courageous enough to prioritise funding in the best possible way, to ensure that patients and their families get high quality and safe care. **Kim Forrester, Deputy Chair, Metro North Hospital and Health Board***

*It’s important for board executives to understand financial reporting and budget management. A Board needs to work with management to ensure that they are clear on Board expectations with relation to what is reported to the Board and how. Often it is not what is being said that is most significant. Members should look at the figures, watch the body language around the table, listen to the discussions and be prepared to ask the distressing questions to fully understand an issue. **Ruth Stewart, former member, Torres and Cape Hospital and Health Board***

Additional Reading

- Financial Reporting Requirements for Queensland Government Agencies (FRRs)⁸⁸
- Annual Report Requirements for Queensland Government Agencies (ARRs)⁸⁹
- [What to consider before approving financial statements – AICD](#)⁹⁰

Managing conflicts of interest⁵

Why is it important for boards to identify and manage conflicts of interest?

Conflicts of interest can be damaging to public confidence in the public sector and to the reputation of government. Appropriately declaring and managing conflicts of interest provides confidence that board members are acting in the interests of the board as opposed to their own interest and reduces reputational risk for the board, organisations and the government.

What is a conflict of interest?

- An **actual conflict of interest** involves a direct conflict between the interests and responsibilities of the board and existing private interests of a member.
- A **perceived** or **apparent conflict of interest** can exist where it could be perceived, or it appears, that private interest could improperly influence the members performance and responsibilities on the board – whether or not this is in fact the case.
- A **potential conflict of interest** arises when a member has a private or personal interest that could conflict with their position on the board in the future.

How we see it

Boards are required to abide by the [Code of Conduct for the Queensland Public Service](#)⁹¹, putting the public interest first by carrying out their duties in a fair and unbiased manner, within established ethical frameworks, and identifying and managing any actual, perceived (apparent) or potential conflicts of interests.

What should I do if they identify a conflict of interest?

Members are required to disclose their personal particulars prior to appointment, including any actual, perceived or potential conflicts of interest. If there is any doubt as to whether a conflict of interest exists, the relevant member should err on the side of caution and declare the interest. Members who have or acquire, directly or indirectly, a personal or pecuniary interest in a matter decided or under consideration by the board must take reasonable steps to ensure the interest is declared to the board and managed appropriately. [Read more](#)⁹²

What should a Board do if a conflict is declared?

Disclosure of a conflict should be recorded in the minutes of the meeting of the board. The board should discuss the conflict and any controls that could be introduced to avoid or limit the significance of the conflict to the health service and *must not* be present when the board considers the issue or take part in a decision relating to the issue. Ongoing management of the conflict is the responsibility of the board and the relevant member/s. If

⁵ Provided by the Ethical Standards Unit, Queensland Health

an appointed member has a change to their circumstances which might affect their suitability as a board member, including a conflict of interest that is unable to be appropriately managed by the board on which they are serving, they must report this to the Minister. The Board must ensure that a Register of Disclosed Interest is maintained.

What are you saying?

*Managing conflicts of interest is a real challenge for board chairs and members. Any perceived conflict must be raised early and concerns clearly stated to the impacted member. Boards should be encouraged to consult experts as required, including the Integrity Commissioner, as it allows for objective consideration of matters in a way that may be difficult for those close to the potential conflict or individual. **Lorraine Ferguson, Chair, Sunshine Coast Hospital and Health Board***

*The practical management of conflicts of interest is key to protecting the integrity of the decision-making process but can be murky in practice given the amount and nature of competing interests of members. Board members need to take the time to understand how their own interests may conflict or converge with those of the board. If members are uncertain about their interests, they should hold frank and open conversations with other decision makers to ensure conflicts are resolved. **Bonny Barry, member, Metro North Hospital and Health Board***

Additional Reading

- [Code of Conduct for the Queensland Public Service](#)⁹¹
- [Queensland Integrity Commissioner - Identifying, disclosing and managing personal interests: A Guide for Multi-Member Decision Making Bodies](#)⁹²
- [Department of the Premier and Cabinet Queensland, 'Welcome Aboard: A guide for members of Queensland Government Boards, committees and statutory authorities'](#)⁹³

For Discussion...

- Are you confident that your board is appropriately identifying and managing all conflicts of interests?

Board confidentiality

Why is confidentiality important?

Maintaining confidentiality of board discussions ensures that the boardroom is a trusting environment, facilitating high-quality discussions and decisions. Maintaining confidentiality also reduces legal and reputational risk for boards and their organisations.

How we see it

Hospital and Health Board members are appointed into positions of high visibility and entrusted with responsibility to ensure the effective performance of a HHS. Effective functioning of boards requires trust between members in order to ensure that information and viewpoints can be shared freely and drive honest board discussions in the interest of the organisation. Board discussions can sometimes be of a highly sensitive nature with possible personal, professional and organisational implications. In addition, information received may have legal implications including being commercial-in-confidence, clinically confidential or have privacy implications. [Read more](#)⁹⁴

All board decisions must be documented in the official minutes to ensure that key discussions and decisions are clearly recorded. Board members should not publicly share personal views, speculate on future directions, criticise any political party or continue debate on an issue after a decision has been made by the board. This ensures the interests of the health service and Queensland Health are protected.

Directors must be aware of their responsibilities to maintain the confidentiality of information to which they have access, that is not publicly available. As per the [Code of Conduct for the Queensland Public Service](#)⁹¹ confidentiality should be maintained even once a member is no longer serving on a board.

Board chairs have a responsibility to create ongoing awareness on their boards about maintaining confidentiality of board decisions, appropriate conduct outside the boardroom and awareness around the impacts of the use of media and social media platforms to express personal views publicly on the health system, the board, or outcomes of a board decision.

Engaging with the media

Media queries and engagement must be handled in a consistent manner as directed by the **board Chair** and **Health Service Chief Executive**. The board Chair and HSCE can direct media teams or public affairs officers to manage all local media enquiries including patient condition reports and interview requests to prepare a response to the media (with the exception of those services whose media is managed centrally). These arrangements should be clearly documented and made available to board members through a local media policy or protocol. Board members who receive an enquiry about a political or sensitive issue relating to the health service should refer this matter to the board Chair or HSCE. [Read more](#)⁹⁵

What are you saying?

*The board Chair is the official spokesperson of the board. The exception to this rule is where the board Chair delegates to another member with expert knowledge of the issue/area. **Karen Tully, Chair, South West Hospital and Health Board***

*The context of media engagement drives what should be said on behalf of the board or organisation, and determines who responds, which is normally the board Chair or Chief Executive. Each board will address this in a slightly different way, but a unified and coordinated message requires members to understand their role in media engagement and where they fit in the chain of communication. **Helen Darch, member, Metro South Hospital and Health Board***

Additional Reading:

- [Queensland Health Media Relations Standard](#)⁹⁶

For Discussion...

- Does your board have clear processes in place for handling confidential documents when a Board member or Chair retires?
- Under what circumstances would you talk to the media in your role as a board member or Chair?
- How would your board respond to unapproved disclosure of information from a board member?

Engaging with staff

Why is engagement with health service staff important?

A board-led culture of collaboration, improvement and innovation across the health service is critical for instilling trust, ownership and driving high performance among staff for better service outcomes. Staff engagement provides boards with deeper insights into system performance, the communities they care for and the challenges faced by staff on a regular basis.

What is staff engagement?

In the health context, staff or employee engagement is about people at all levels of the service engaging in effective dialogue and action to deliver the highest quality patient care and to create great places to work. This results in an environment where people find their work meaningful and work together for patients, their colleagues and the future success of the organisation.

How we see it

In addition to the formal channels already in place in your health service for staff engagement, it is essential that boards get to know the people on the frontline of the service, by engaging staff doing the work, hearing about the communities that they serve and listening to their challenges and successes. These insights can be compared with formal reporting, allowing for a board to make better informed decisions which can lead to better outcomes for patients through improved service delivery.

While board members may engage staff on hospital walk arounds, workplace visits or through other informal channels, they must always be mindful of the formal channels for staff engagement already in place through management. Board members should always ensure that the HSCE or a delegate is aware of proposed or emergent staff engagement activities.

How can boards improve engagement in this area?

Boards should understand the current staff engagement strategy of their local health service and align their own level of engagement accordingly. Boards can enhance engagement by putting in place additional formal or informal mechanisms. For example, understanding whether strategic outcomes would benefit from an engagement process, and progressing a consultation, involvement or collaboration mechanism for engagement as required.

This approach can ensure that all HHS activities, from strategic planning to operational delivery, are influenced by employees and that a progressive and sustainable approach to engaging employees is firmly embedded in the board's good governance practice.

What are you saying?

*Board members need to remember that staff are accountable through the Health Service Chief Executive, not the board, so any messages from the board to staff need to be clearly aligned to those of the Chief Executive. Having said that, it's important that board members do talk to staff regularly. While it does give board members the chance to talk about the footy and the rain, it also lets staff interact with their leaders, and keeps the board grounded by giving them a sense of the issues that staff are actually concerned about. **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)***

*Boards need to take part in coal face engagement with their organisation if they are to truly understand how it works and what is actually going on. Boards that are too far above the rest of the organisation will find it difficult to make good decisions and inspire good behaviour. **Bonny Barry, member, Metro North Hospital and Health Board***

Additional Reading:

- [Medical Engagement and NSW Whole of Hospital Program, Dr Sally McCarthy, Clinical Lead NSW MOH Whole of Hospital Program, June 2013²²](#)

For Discussion...

- What strategies does your board have to ensure awareness of the issues that are important to staff?

Whistleblowing⁶

Why is it important for boards to have oversight of whistleblowing?

Whistleblowers can provide important danger signals with regards to unethical behaviour or misconduct within an organisation. Driving whistleblower protection systems from board level ensures best practice in governance and risk management and can improve accountability and transparency across the organisation.

Whistleblowing

Reporting information about certain types of wrongdoing in the public sector is commonly known as 'whistleblowing'. In Queensland, the legal term for whistleblowing is making a 'Public Interest Disclosure'. [Read more](#)⁹⁸

The [Public Interest Disclosure Act 2010 \(PID Act\)](#), serves to encourage the disclosure of information about suspected wrongdoing by providing protection from reprisal action that may be taken against a person who reports it.

How we see it

It is important that public sector boards are seen to support, encourage and protect those who report wrongdoing. Those who disclose wrongdoing value the efforts that their agency takes to address any detriment they may face as a result of making the disclosure, even though their experience may be difficult.

Board members must be aware of public sector agencies obligations under the PID Act to ensure that public interest disclosures are properly assessed and investigated, and that appropriate action is taken in relation to any wrongdoing that is identified.

What boards need to know

Under the PID Act, identifying information about a person making a disclosure, the person alleged to have engaged in wrongdoing and details of the disclosure itself are all confidential.

It is highly recommended that board members make themselves familiar with what information could constitute a public interest disclosure and their Hospital and Health Service policy for the reporting, assessment and investigation of public interest disclosures.

⁶ Provided by the Ethical Standards Unit, Queensland Health

What are you saying?

*Where senior managers in an organisation did not act ethically themselves, the effort being put into whistleblowing policies and procedures was largely wasted. The phrase “walk the walk” was used frequently. One of the most disturbing criticisms that was made about leadership in the area of whistleblowing was that there are many managers who publicly support the process but act privately against it. **Whistling While they Work, Roberts et al. 2009, p. 24***

*The Health Service Chief Executive has responsibility for managing any whistleblowing activity in the community. If I am approached by a member of the community, I ensure the information is relayed through the correct channels to the Chief Executive – with the board to note and follow up should the risk be serious enough. Operationally, the board would not be involved, however, we must have confidence that a process is in place to resolve the issue. I would consider matters directly impacting the health and safety of staff or patients as the most serious and deserving of board attention. **Karen Tully, Chair, South West Hospital and Health Board***

Additional Reading:

- [What is a public interest disclosure?](#)⁹⁸
- [What are an agency's public interest disclosure obligations?](#)⁹⁹
- [Improving the management of Public Interest Disclosures](#)¹⁰⁰

For Discussion...

- How does your board signal that it supports and encourages those that report wrongdoing?
- Does your board, either directly or through a committee, monitor corrupt conduct within the organisation?

Engaging with the Department of Health

Why is effective engagement with Queensland Health important?

A constructive relationship between Hospital and Health Boards and the Department of Health (the department) is essential to ensuring strategic alignment between different parts of the health system, improving role clarity, and increasing collaboration and transparency.

Formal responsibilities

The *Hospital and Health Boards Act 2011* (HHB Act) creates an integrated health care system in Queensland, whereby the overall management of the public health system is the responsibility of the department while Hospital and Health Services are established independently and locally controlled by a Hospital and Health Board as the principal providers of public sector health services. This approach reflects the subsidiary principle, whereby responsibility for areas of policy or decision-making rests with the level of delivery that is closest to the recipient, that is also capable of performing the function effectively.

[Read more](#)¹⁰¹

How we see it – building and maintaining a constructive relationship

While there are considerable benefits to this improved structure, it also creates a level of ‘cooperative tension’ between HHSs, as the providers of care, and the department as the central agency responsible for system wide direction setting, planning, purchasing, regulatory and other responsibilities. [Read more](#)¹⁰²

Building and maintaining an open and constructive relationship between boards and the department provides for collaborative leadership of the Queensland health system. This improves alignment of system-wide priorities, increases role clarity, and fosters opportunities to collaborate. It also allows for issues and risks to be proactively addressed and ensures better awareness of activities occurring between state and HHS actors and stakeholders.

Opportunities to engage

There are numerous formal opportunities for engagement between boards and the department, including through Performance Review Meetings, Board Forums and orientation sessions. Boards should also consider and pursue less formal opportunities to build relationships, such as attendance at showcases, serving on working groups and informal discussions with departmental staff.

What are you saying?

*There are competitive tensions between Hospital and Health Boards and the Department which are a sign of a healthy system. Without this tension, one side could dominate, or alternatively there could be disconnect between different levels of the system. **Mike Willis, Chair, Queensland Health Board Chairs' Forum and Chair, West Moreton Hospital and Health Board***

*The starting point with departmental engagement is to recognise that we are all part of the same health system. Good relationships start with the right attitude, and while there are formal processes to facilitate interaction, boards and Chairs need to maximise their opportunities to engage with the Department at all levels. **Ian Langdon, Chair, Gold Coast Hospital and Health Board***

*There cannot be a cookie cutter approach to addressing healthcare challenges, given the differences in need between services. **Ella Kris, Chair, Torres and Cape Hospital and Health Board***

*Our primary engagement with the Department is through the board Chair and Health Service Chief Executive. The relationship is about improving shared understanding of roles and expectations, while ensuring local knowledge and experiences are taken into account. **Ruth Stewart, former member, Torres and Cape Hospital and Health Board***

For Discussion...

- What are the primary engagement strategies that your board uses to ensure alignment with the Department of Health?
- What competitive tensions exist between your HHS and the department? How are these resolved or managed?

Consumer and community engagement

Why should boards have oversight of consumer and community engagement in their health service?

Placing consumer and community engagement at the heart of the board's stakeholder engagement process is mutually beneficial to hospitals and communities. The earlier boards get involved in engaging consumers and the local community connected to their health service, the sooner the feedback received can be incorporated into strategic planning, service planning and design. This process is crucial to understanding and achieving improved health outcomes for the health service and more importantly for the patients and the broader community.

Consumer and community engagement is about establishing effective engagement and meaningful connections between the HHS, communities and individuals – from frontline contact with the treating clinician, to involvement in strategy development, service delivery planning, recruitment processes and the review of information and resources. [Read more](#)¹⁰³

How we see it

One of the guiding principles of the HHB Act is that HHSs should have '*engagement with clinicians, consumers, community members and local primary healthcare organisations in planning, developing and delivering public sector health services*' (Section 13 (1)(h)). The Act specifically requires that each HHS develop and publish a consumer and community engagement strategy to promote consultation with health consumers and members of the community about the provision of health services by the HHS.

Getting consumer and community engagement right

Implementation of a mature consumer and community engagement strategy is good governance, ensures that boards understand the needs of their consumers and community, and allows for partnerships to be built to improve services. Good engagement also allows boards to compare formal reporting with the experience of their customers. This can enable better informed decision-making about service delivery aligned to the priorities of consumers and communities and provide insight into the culture of the organisation from a customer perspective. [Read more](#)¹⁰⁴

At a presentation to board Chairs on November 2019, Health Consumers Queensland recommended that boards carefully consider their consumer and community engagement strategy to drive maximum shared benefit, including:

- Is our consumer engagement meaningful or is it a public relations or compliance exercise?
- Who is responsible for the Partnering with Consumers Standard in the organisation?
- Where does consumer engagement sit within the organisational structure?
- Is our consumer engagement adequately resourced? [Read more](#)¹⁰⁵

What are you saying?

*Boards have a particular duty to serve those that don't have a voice in their communities, as these are the people most at risk, and who may not know how to make the system work for them. Recent cases of unethical behaviour, including outcomes of Royal Commissions into Banking and Aged Care sectors, have taught us important lessons about whistleblowing and the need to listen to consumers. An organisation will fail if it doesn't listen to the people they are serving. **Mike Willis, Chair, Queensland Health Board Chairs' Forum and Chair, West Moreton Hospital and Health Board***

*If we are serious about closing the gap, we need to be listening to how local communities do things so we can address their health issues in a safe and culturally appropriate way. **Ella Kris, Chair, Torres and Cape Hospital and Health Board***

*Engagement is absolutely essential to everything we do, as community understanding and support is critical to success. The North West Hospital and Health Service actively engages their local community to find out what their needs are and how the service could further improve on addressing these needs. **Paul Woodhouse, Chair, North West Hospital and Health Board***

*As a board we work with local government and other stakeholders on local programs. Board members are expected to be engaged at all levels with local government, communities, health providers and other services to ensure a deep understanding of the needs of their region. **Jim McGowan, Chair, Metro North Hospital and Health Board (former Chair, South West Hospital and Health Board)***

*I live in a rural and remote town where everyone knows everyone – understanding the needs of the local community is what I do on a regular basis. This can assist in making sure our systems are right for our patients. **Karen Tully, Chair, South West Hospital and Health Board***

For Discussion...

Many boards experience challenges with effectively engaging consumers.

- What actions does your board take, and what is expected from you as a board member, to ensure that board activities are aligned to the expectations of your community and consumers.
- Is there a mechanism for the board to hear unfiltered information directly from consumer representatives?
- What is the budget allocation to resource and support consumer partnerships?
- Are consumers being involved in major decisions? E.g. purchase of land, new buildings and/or development of new models of care?

Hospital foundations

Why is it important for boards to understand the work undertaken by foundations?

Hospital foundations are established as independent statutory agencies and raise funds to help a specified Hospital and Health Service support the health and wellbeing of the community. A hospital foundation can support a Hospital and Health Service (HHS) by providing assets or services that may otherwise not be available.

What is a hospital foundation?

A hospital foundation is an independent entity set up to support and improve public healthcare through fundraising while providing a pathway for local community members to engage with and directly support their local hospitals as volunteers, as outlined in their individual objectives. Hospital foundations are governed by the [Hospital Foundations Act 2018](#) (the HF Act). Foundations report directly to the Minister for Health and Ambulance Services.

How are they different to boards?

Foundations do not receive any government funding and support their associated hospitals through fundraising. Foundations raise money to fund research programs, purchase new equipment, training of staff or other activity that would benefit the associated HHS. They may also lease infrastructure or provide services, such as hospital coffee shops or car parks. Queensland currently has 12 hospital foundations. The Queensland Register of Foundations has further information relating to hospital foundations. [Read more](#)¹⁰⁶

Do boards have oversight of foundations?

Hospital and Health Boards do not have oversight of foundations. However, by design, there are clear inter-relationships between the two bodies. It is a requirement under the HF Act that one of the members that make up the foundation board must be the Chair of the board of the associated HHS or a member of the board nominated by the Chair.

How we see it – benefits of board engagement with hospital foundations

While a foundation and its associated HHS are two separate entities, building and maintaining a good relationship and ensuring strategic alignment is key to the ability of a foundation to maximise its value to the associated HHS. A mature relationship is typified by aligned strategies between the two organisations to identify and agree on priorities for investment of donated funds. This ensures that targeted outcomes are achieved through ensuring that funds raised by the foundation are distributed on resources aligned to the needs, capabilities and priorities of the associated HHS.

What are you saying?

*Metro North is an incredibly complex board which recognises the huge opportunities presented by a close relationship with our foundations to achieve more support around research for our staff and clinicians. Hospital foundations provide great opportunities for improving clinical care through funding research and staff opportunities that might not otherwise be available. While foundations must be able to forge their own paths, they are most successful when they communicate and align with health services. **Bonny Barry, member, Metro North Hospital and Health Board***

Additional Reading:

- [Resources for Foundations, Boards and Committees](#)¹⁰⁷

For Discussion...

- How does your board ensure strategic alignment between the needs of the HHS and the activities of its associated hospital foundation?
- Does the HHB representative (Chair or Chair's nominee) report to the HHB regularly?

Clinical partnerships

Why is clinical engagement an important part of a board's oversight role?

Healthcare organisations that have mature and ongoing engagement with their clinical workforce achieve higher staff morale, better care and clinical outcomes for their patients, and improved financial performance. [Read more](#)¹⁰⁸

What is clinical engagement?

Clinical engagement is a two-way process whereby clinicians actively contribute to maintain and enhance the performance of an organisation, while the organisation recognises this commitment by supporting and encouraging safe and high-quality care. [Read more](#)¹⁰⁹

Good clinical engagement ensures that clinicians are listened to, empowered, and contribute to all levels of planning and service delivery.

How we see it

The *Hospital and Health Boards Act 2011* requires that each health service must develop and publish a clinician engagement strategy to promote consultation with health professionals working in the service, and requires that one or more members of the board is a clinician. Boards must have oversight of the clinician engagement strategy, which should be used to guide clinical engagement activity and to consider the impact of major decisions on the clinical workforce.

Multifaceted clinical engagement

Clinicians have considerable autonomy, authority and influence within healthcare organisations. Clinicians can directly influence the care delivered by a service and are uniquely placed to view the safety and quality of care delivered within a service first-hand.

A mature clinician engagement strategy is central to the effective operation of HHSs. Given that HHSs are complex socio-political entities, effective clinician engagement must have regard for factors such as differences in clinical priorities and viewpoints, clinical and administrative boundaries and the current and historical interaction between stakeholder groups. A multifaceted clinician engagement strategy can provide the basis for an honest dialogue between clinicians and the board and improve alignment between strategic and clinical agendas. Good clinical engagement ensures that the board is in touch with clinical priorities and concerns and can build clinical leadership capability. [Read more](#)¹¹⁰

What are you saying?

*Successful boards need to be constantly connecting with clinicians and consumers. A view of what is occurring at the clinical level, can relate to the culture of a facility, and provide assurance that clinicians are being equipped so that high quality safe care is provided. Boards need to show flexibility, and need to be open to different clinical models, but also provide opportunities to engage and hear back from staff. **Anonymous***

*Gold Coast HHB has a strong commitment to stakeholder engagement. The board meets regularly with the executive leadership team, patients, staff, our community and collaborators. The information we gather from these interactions provides the board with additional insights into what's happening on the ground in addition to what is reported through official channels and metrics. **Helen Chenery, Board Member, Gold Coast Hospital and Health Board***

Additional Reading

- [Professional Identity: Enabler or Barrier to Clinical Engagement?, Louise Kippist, Anneke Fitzgerald, Employment Relations Record Vol 14, No 2](#)¹¹¹
- [Benefits and barriers of clinical engagement: A qualitative study of perceptions of medical practitioners and human resource managers in three Victorian public hospital, Bonias, Bartram, Leggat, Australian New Zealand Academy of Management](#)¹¹²
- [Fact Sheet; Implementation tips – engaging clinicians, ACSQH](#)¹¹³

For Discussion...

- How does your board ensure that it understands the needs, expectations and priorities of its clinical workforce?

Strategic partnerships

Why are strategic partnerships important?

Good strategic partnerships can reduce duplication and achieve results that would not be possible as individual entities. In the healthcare context, productive partnerships between organisations is key to improving care integration and patient outcomes. [Read more](#)¹¹⁴

What is a strategic partnership?

A strategic partnership is a formal agreement between two or more parties that have committed to share resources such as finances, human resources or information to achieve common objectives. [Read more](#)¹¹⁵

How we see it

Hospital and Health Services provide an essential service in a highly complex environment. Strong, well defined partnerships are key to ensuring the provision of integrated care that reflects local and regional needs. [Read more](#)¹¹⁶

Strategic partners may include Primary Health Networks, universities and research bodies, non-government--organisations, private healthcare providers and non-healthcare providers whose activities directly or indirectly impact on health. The benefits of a well-defined and mature strategic partnership will depend on the desired outcomes. These may include improved patient outcomes, reduced duplication, research that meets local needs and translates to changes to clinical care or management, and improved human resource capability and capacity.

How do we develop strategic partnerships with local and external stakeholders?

There is no 'one size fits all' approach to a productive partnership. However, a shared understanding of the purpose and scope of the partnership and agreed governance arrangements are key to ensuring continued understanding and ongoing benefit to participating organisations. Boards should have an awareness of current and potential partners, as well as risks and the anticipated and actual benefits of any partnership that is pursued. The *Hospital and Health Boards Act 2011* strengthens local decision-making and accountability, so partnerships should be considered in the context of local healthcare requirements.

While boards are not typically involved in the day to day management of partnerships, they have an important strategic oversight role. This includes considering whether strategic partnerships are aligned to the strategic plan of the HHS, understanding and monitoring partnership incentives, and being satisfied that governance arrangements are appropriate. Boards may also have a role in strategic relationship management to ensure that the partnerships can be maintained in the best interests of the HHS and broader health system over the long term.

What are you saying?

The Gold Coast Hospital and Health Service is the biggest employer in the region. Size gives us an opportunity to provide leadership to the whole Gold Coast with regards to employment. As a part of this, we have been working with the Gold Coast Council to hold breakfasts designed to link the community together and drive more opportunities for employment for people with disabilities. This is not engagement for the sake of it, it is used to drive positive change, and increase community ownership and links with the activities of the health service which results in mutual benefits. **Ian Langdon, Chair, Gold Coast Hospital and Health Board**

There are both challenges and benefits to strategic partnerships that the board must be aware of in its governance role. Boards should engage with strategic partners, develop Memoranda of Understanding for intersectoral collaborations where appropriate and be informed of any strategic or operational issues that may arise in a partnership through the Chief Executive and the executive management team. **Lorraine Ferguson, Chair, Sunshine Coast Hospital and Health Service**

Research partnerships can be beneficial for services by allowing for additional funding streams and acting as an attractor for high caliber clinicians with a research interest. If the balance is right, then research conducted by partners aligns with health service priorities and responding to the challenges unique to their location and communities and developing solutions to addressing issues. **Scott Davis, Deputy Chair, Torres and Cape Hospital and Health Board**

Improvement in action

One of the major challenges to the CQHHS has been maintaining workforce stability and sustainability. We know that people who grow up in a region are more likely to stay in the region, yet Central Queenslanders who want to study medicine currently have to travel a long way from home to Brisbane or Townsville to do so. As a result of the close partnership already established with CQ Uni and University of Queensland, we are now working together to solve this issue and create a new medical program for rural, remote and regional Central Queenslanders. The new program will target local students, giving them the opportunity to apply for places on the medical program at locally-based universities and with the goal of ultimately practicing in CQHHS. This is a huge outcome for locals who were at a disadvantage based on their geographical location. 2022 will see the first intake of 30 students who will have the opportunity to enrol in a medical program that is closer to home, which will assist in keeping much needed skills in the region. This program has the ability to transform healthcare for Central Queenslanders.

Lisa Caffery, Deputy Chair, Central Queensland Hospital and Health Board

Additional Reading

- [The challenge for academic health partnerships](#)¹¹⁷
- [Making Industry – University partnerships work](#)¹¹⁸

For Discussion...

- What are the main strategic partnerships with your HHS?
- What is the role of the board in identifying, establishing and maintaining these partnerships?
- How does your board monitor the outcome of strategic partnerships?

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