

Document Title:	<b>COMPLAINTS ABOUT THE PUBLIC OFFICIAL: SECTION 48A OF THE CRIME AND CORRUPTION ACT 2001</b>						
Document ID:	cq_c67	Version No:	1.0	Effective Date:	08/05/2019	Next Review Date:	31/08/2022
Document Custodian:	Manager Human Resource Services			Executive Sponsor:	Executive Director, Workforce Division		
Endorsement:	<b>[SIGNED]</b> <b>Andrew Bailey</b> A/Manager Human Resource Services Workforce Division, CQHHS  Date: 06/05/2019			Authorisation:	<b>[SIGNED]</b> <b>Sharyn O'Mahoney</b> A/Executive Director, Workforce Division CQHHS  Date: 08/05/2019		

## Policy Statement

The Health Services Chief Executive is the public official of the Central Queensland Hospital and Health Service (CQHHS). This policy sets out how CQHHS will deal with a complaint (information or matter<sup>1</sup>) that involves or may involve corrupt conduct<sup>2</sup> of its Health Services Chief Executive (HSCE) as defined in the *Crime and Corruption Act 2001*.

## Person Centred Care Statement

CQHHS' intent is to deliver high-quality care that is safe, of value and to provide an ideal experience for consumers, their carers and family - Person centred care is the foundation for achieving this. CQHHS will focus on delivering person-centred care to enable the success of achieving better outcomes for consumers, better experience for consumers and staff; and better value care. CQHHS will support consumers to engage as partners in their own care and ensure the consumers' health literacy is considered.

## Intent

The policy is designed to assist CQHHS to:

1. Comply with s48A of the *Crime and Corruption Act 2001 (CC Act)*
2. Promote public confidence in the way suspected corrupt conduct of the HSCE is dealt with (s34(c) of the *CC Act*)
3. Promote accountability, integrity and transparency in the way CQHHS deals with a complaint that is suspected to involve, or may involve, corrupt conduct of the HSCE.

## Scope

This policy applies:

- If there are grounds to suspect that a complaint may involve corrupt conduct of the HSCE of the CQHHS
- To all persons who hold an appointment in, or are employees of, the CQHHS.

For the purpose of this policy a complaint includes information or matter as defined below.

## Policy

This document is underpinned by the relevant legislation and standards.

### Complaint involving a reasonable suspicion of corrupt conduct, where there is a nominated person

Where there is a nominated person, if a complaint may involve an allegation of corrupt conduct of the HSCE, the complaint may be reported to:

- The nominated person **or**
- A person to whom there is an obligation to report under an Act<sup>3</sup> (this does not include an obligation imposed by ss37, 38 and 39(1) of the *CC Act*).

If there is uncertainty about whether a complaint should be reported or not, it is best to report it to the nominated person.

If the nominated person reasonably suspects the complaint may involve corrupt conduct of the HSCE, they are to:

- (a) Notify the Crime and Corruption Commission (CCC) Queensland of the complaint<sup>4</sup>
- (b) Deal with the complaint, subject to the CCC's monitoring role, when —
  - Directions issued under s40 apply to the complaint, if any, **or**
  - Pursuant to s46, the CCC refers the complaint to the nominated person (see below) to deal with<sup>5</sup>.

If the HSCE, reasonably suspects that the complaint may involve corrupt conduct on their part, **and there is a nominated person**, the HSCE, must:

- Report the complaint to the nominated person as soon as practicable and may also notify the CCC
- Take no further action to deal with the complaint unless requested to do so by the nominated person in consultation with the Central Queensland Hospital and Health Service (CQHHS) Board Chair.

### **Nominated person**

Having regard to s48A (2) and (3) of the *CC Act*, this policy nominates the:

Executive Director Workforce Division, CQHHS  
152-156 Bolsover Street  
Rockhampton Qld 4700  
Email: CQHHS\_Workforce\_ESO@health.qld.gov.au  
Phone: (07) 4920 5616

to notify<sup>6</sup> the Crime and Corruption Commission (CCC) of the complaint and to deal with the complaint under the *CC Act*.<sup>7</sup>

Once the CQHHS nominates a person, the *CC Act* applies as if a reference about notifying or dealing with the complaint to the HSCE is a reference to the nominated person.<sup>8</sup>

### **Resourcing the Nominated person**

If pursuant to ss40 or 46 of the *CC Act*, the nominated person has responsibility to deal with the complaint:<sup>9</sup>

- (a) The CQHHS will ensure that sufficient resources are available to the nominated person to enable them to deal with the complaint appropriately<sup>10</sup>
- (b) The nominated person is to ensure that consultations, if any, for the purpose of securing resources sufficient to deal with the complaint appropriately are confidential and are not disclosed, other than to the CCC, without:
  - authorisation under a law of the Commonwealth or the State **or**
  - authorisation or consent of the nominated person responsible for dealing with the complaint
- (c) The nominated person must, at all times, use their best endeavours to act independently, impartially and fairly having regard to the:
  - purposes of the *CC Act*<sup>11</sup>
  - the importance of promoting public confidence in the way suspected corrupt conduct in the CQHHS is dealt with<sup>12</sup>
  - the CQHHS's statutory, policy and procedural framework.

If the nominated person has responsibility to deal with the complaint, they:

- Are delegated the same authority, functions and powers as the HSCE to direct and control staff of the CQHHS as if the nominated person is the HSCE of the CQHHS, for the purpose of dealing with the complaint only
- Are delegated the same authority, functions and powers as the HSCE to enter into contracts on behalf of the CQHHS, for the purpose of dealing with the complaint
- **Do not** have any authority, function or power that cannot — under the law of the Commonwealth or the State — be delegated by HSCE to the nominated person.

### **Liaising with the CCC**

The HSCE is to keep the CCC informed of:

- The contact details for the HSCE and the nominated person
- Any proposed changes to this policy.

### **Consultation with the CCC**

The HSCE will consult with the CCC when preparing any policy about how the CQHHS will deal with a complaint that involves or may involve corrupt conduct of the public official/CEO<sup>13</sup>.

### **Statutory references**

Unless otherwise stated, all statutory references are to the *Crime and Corruption Act 2001*.

## **Roles & Responsibilities**

### **Nominated Person Responsibilities**

In matters which involve complaints against the HSCE the nominated person will assume the responsibilities as detailed in this policy.

## **Appendices**

- Nil

## Definition of terms

Term	Definition	Source
Crime and Corruption Commission (CCC)	The Commission continued in existence under the <i>Crime and Corruption Act 2001</i>	<a href="#">Crime and Corruption Act 2001</a>
Complaint	Includes information or matter:	s48A(4) <i>Crime and Corruption Act 2001</i>
Corruption	As defined in Schedule 2 (Dictionary) of the <i>Crime and Corruption Act 2001</i> .	Schedule 2 (Dictionary) <i>Crime and Corruption Act 2001</i>
Corrupt conduct	As defined in s15 of the <i>Crime and Corruption Act 2001</i>	s15 of the <i>Crime and Corruption Act 2001</i>
Corruption – degrees of urgency	Highly sensitive or urgent cases should be expedited in line with page 2.5, chapter 2 of the Corruption in Focus: A Guide to Dealing with Corrupt Conduct in the Queensland Public Sector	<a href="http://www.ccc.qld.gov.au/corruption/information-for-the-public-sector/corruption-in-focus">http://www.ccc.qld.gov.au/corruption/information-for-the-public-sector/corruption-in-focus</a>
Deal with	As defined in Schedule 2 (Dictionary) of the <i>Crime and Corruption Act 2001</i> .	Schedule 2 (Dictionary) <i>Crime and Corruption Act 2001</i> .
Nominated person	See relevant section of this Policy	
Public Official/CEO	As defined in Schedule 2 (Dictionary) and s48A of the <i>Crime and Corruption Act 2001</i> .	Schedule 2 (Dictionary) and s48A <i>Crime and Corruption Act 2001</i>
Unit of public administration (UPA)	As defined under s20 of the <i>Crime and Corruption Act 2001</i>	s20 of the <i>Crime and Corruption Act 2001</i>

## Supporting documents

### Authorising Legislation, Policy and Standard/s:

- [NSQHS Standard 1 - Clinical Governance](#)
- [NSQHS Standard 2 - Partnering with Consumers](#)
- [Hospital and Health Boards Act 2011](#) (PDF)
- [Human Rights Act 2019](#)
- [Crime and Corruption Act 2001](#) (PDF)
- [Public Service Act 2008](#) (PDF)
- [Public Sector Ethics Act 1994](#) (PDF)
- [Public Interest Disclosure Act 2010](#) (PDF)
- [Criminal Code Act 1899](#) (PDF)
- [Code of Conduct for the Queensland Public Service](#)
- [E9 \(QH-POL-218\) Requirement for reporting corrupt conduct](#) (PDF)
- [I5 \(QH-POL-202\) Public interest disclosure](#) (PDF)
- [E12 \(QH-POL-140\) Human Resource – Employee Complaint](#) (PDF)
- [CQHHS Human Resources - Requirements for reporting corrupt conduct](#) (PDF)

### Procedures, Guidelines, Protocols:

- [CQHHS Human Resources - Public Interest Disclosure Management](#) (PDF)
- [CQHHS Fraud Control](#) (PDF)
- [CQHHS Human Resources - Employee Complaints](#) (PDF)
- [CQHHS Human Resources – Requirements for Reporting Corrupt Conduct](#) (PDF)
- [CQHHS Consumer Health Care Rights procedure](#)

### Forms and Templates:

- Nil

## References and Suggested Reading

- [Corruption in Focus: A Guide to Dealing with Corrupt Conduct in the Queensland Public Sector](#)
- [Corporate Services Fraud Control](#) website
- [Australian Charter of Healthcare Rights](#)
- [CQHHS Clinical Governance Framework](#) (PDF)
- [Consumer and Community Engagement Strategy](#) (PDF)

1. See s48A of the *CC Act* and definitions below
2. The CCC's Corruption function encompasses both "corrupt conduct" and "police misconduct". For the purposes of the Queensland Police Service, wherever the term "corrupt conduct" is used in the policy, they would also have to consider police misconduct, as per s37 of the *CC Act*
3. See s39(2) of the *CC Act*
4. Under ss37 or 38, subject to s40 of the *CC Act*
5. Under ss41 and 42 and/or ss43 and 44 of the *CC Act*
6. Under ss37 or 38 of the *CC Act*
7. Under Chapter 2, Part 3, Division 4, Subdivisions 1 & 2 of the *CC Act*
8. See s48A(3) *CC Act*
9. Under ss41 and 42 and/or ss43 and 44 of the *CC Act*
10. See the CCC's corruption purposes and function set out in ss4(1)(b), 33, 34, 35 and the [UPA]'s relevant statutory, policy and procedural framework which help inform decision making about the appropriate way to deal with the complaint
11. See ss57 and the CCC's corruption purposes and function set out in ss4(1)(b), 33, 34, 35 of the *CC Act*
12. See s34(c) *CC Act*
13. Section 48A of the *CC Act*

## Consultation

Key stakeholders (position and business area) who were provided the opportunity to review this version are:

Position and Business Area	Date of consultation
Principal Advisor (Governance, Risk and Policy)	May-19
A/Manager Human Resource Services, Workforce Division	May-19
Manager Workforce Culture and Performance	May-19
A/Manager Workforce Safety and Wellbeing	May-19
A/Chief Finance Officer Assets and Commercial Services	May-19
Executive Director Medical Services	May-19
Executive Director of Nursing and Midwifery, Quality and Safety	May-19
A/Executive Director, Rural and District-wide Services	May-19
Executive Director, Rockhampton Hospital	May-19
Executive Director, Gladstone and Banana	May-19
Executive Director Strategy, Transformation and Allied Health	May-19
Director, Aboriginal & Torres Strait Islander Health and Wellbeing	May-19
Workforce Safety and Wellbeing Unit, Workforce Division	May-19
Human Resource Services Unit, Workforce Division	May-19
Workforce Culture and Performance Unit, Workforce Division	May-19
Workforce Governance – Manager Consultation Team	May-19
Workforce Management and Planning	May-19
A/Executive Director, Workforce Division	May-19

## Risk Rating

<b>Risk Rating</b>	<input type="checkbox"/> Very High	<input checked="" type="checkbox"/> High	<input type="checkbox"/> Medium	<input type="checkbox"/> Low	As per <a href="#">QH Risk Matrix</a>
--------------------	------------------------------------	--	---------------------------------	------------------------------	---------------------------------------

## Audit Strategy

<b>Audit strategy</b>	Assess effectiveness, security and maintenance of process and actions relating to reports of corrupt conduct within CQHHS
<b>Audit tool attached</b>	To be developed
<b>Audit date</b>	Annually
<b>Audit responsibility</b>	Human Resource Services, Workforce Division
<b>Expected Outcome / Key Performance Indicators</b>	<ol style="list-style-type: none"> <li>1. Currency and accuracy of database in respect of:             <ol style="list-style-type: none"> <li>a. Details of reports received</li> <li>b. Analysis of data, trends and recommendations made to Executive Management Team</li> <li>c. Appropriateness of actions taken</li> <li>d. Cost of investigations if required</li> <li>e. Outcomes documented</li> </ol> </li> <li>2. Security surrounding storage of data</li> </ol>

## Key Words

Corruption, corrupt, reporting, fraud, deception, maladministration, investigation, ethics, misconduct, professional misconduct, integrity, accountability, responsibility, health service investigator, Code of Conduct, Human Resources, CQHHS

## Review

This document will be reviewed as per the [CQHHS Procedural Documentation Review Schedule](#) (PDF)

## Supersedes

N/A

## Reasons for new document/revised document

- Planned/Period Review
- Recommendation(s) from a coronial enquiry or an incident analysis (RCA/HEAPS)
- Identification of gaps in existing procedures or processes
- Change to current service delivery model or the introduction of new equipment
- Change to legislation, standards, QH policy
- To improve an existing control or as a treatment action for an identified risk
- Patient Safety and Quality Improvement Service alert/notice
- In response to consumer feedback