

Our governance

Government bodies

The following table outlines the annual reporting arrangements for government bodies in the health portfolio. For more information about each government body, including their achievements, please refer to their annual reports.

Related entity	Legislation	Role	Reporting arrangements
Hospital and Health Services (16)	<i>Hospital and Health Boards Act 2011</i>	Hospital and Health Services (HHSs) are governed by independent Hospital and Health Boards (HHBs) responsible for the delivery of public hospital and health services. Each HHS is accountable, through the board chair, to the Minister for local performance, delivering local priorities and meeting national health standards.	Required to prepare their own annual reports, including independently audited financial statements.
Council of the QIMR Berghofer Medical Research Institute	<i>Queensland Institute of Medical Research Act 1945</i>	The council's role is to ensure the proper control and management of the institute, which was established for the purposes of conducting research into any branch or branches of medical science.	Required to prepare their own annual reports, including independently audited financial statements.
Office of the Health Ombudsman	<i>Health Ombudsman Act 2013</i>	<p>The office is Queensland's independent health complaints management agency, and single point of entry for complaints relating to registered and unregistered health practitioners, the public, and private and not-for-profit health service organisations.</p> <p>Its primary functions under the Act are to:</p> <ul style="list-style-type: none"> • receive and investigate complaints about health services and health service providers • decide what action should be taken and, in certain instances, take immediate action to protect the public • monitor the health, conduct and performance functions of the Australian Health Practitioner Regulation Agency and its national health practitioner boards • provide information about minimising and resolving health service complaints • report publicly on the performance of its functions. <p>The office was established on 1 July 2014 to replace the Health Quality Complaints Commission, which ceased operation on 30 June 2014. The work of the office is overseen by the Health Ombudsman.</p>	Required to prepare their own annual reports, including independently audited financial statements.
Hospital foundations (14)	<i>Hospitals Foundations Act 1982</i>	<p>Hospital foundations—constituted as statutory bodies under the Act—help their associated hospitals provide improved facilities, education opportunities for staff, research funding, and support the health and wellbeing of communities.</p> <p>They are administered by voluntary boards (except for the HIV Foundation Queensland, which is administered by a remunerated board) appointed by the Governor in Council on recommendation of the Minister.</p> <p>The HIV Foundation Queensland delivers HIV prevention, support and education services across the whole-of-population to increase awareness of HIV testing and treatment and to address HIV stigma and discrimination.</p> <p>To view the hospital foundations, visit www.health.qld.gov.au</p>	Required to prepare their own annual reports, including independently audited financial statements.

Related entity	Legislation	Role	Reporting arrangements
Queensland Mental Health Commission	<i>Queensland Mental Health Commission Act 2013</i>	<p>The commission seeks to improve the mental health and wellbeing of all Queenslanders, as well as minimise the impact of substance misuse in our communities, by:</p> <ul style="list-style-type: none"> • developing a whole-of-government strategic plan to integrate systems and improve services • monitoring, reviewing and reporting on issues affecting people with mental illness • promoting prevention, early intervention and community awareness strategies. <p>The work of the commission is overseen by the Queensland Mental Health Commissioner and is supported by a Queensland Mental Health and Drug Advisory Council.</p>	Required to prepare their own annual reports, including independently audited financial statements.
Mental Health Court	<i>Mental Health Act 2000</i>	<p>The court's primary role is to determine unsoundness of mind and fitness for trial of people facing criminal proceedings who are referred to the court. This ensures offenders with mental illness and intellectual disability are removed from the criminal justice system and the patient's welfare and protection of the community is managed by the health and disability sector.</p> <p>Constituted by a Supreme Court Judge and supported by two assisting psychiatrists, the court is the appeal body to the Mental Health Review Tribunal, another statutory agency established under the Act.</p>	Required to prepare their own annual reports, including independently audited financial statements.
Mental Health Review Tribunal	<i>Mental Health Act 2000</i>	<p>The tribunal's primary role is to protect the rights of people receiving involuntary treatment for mental illness. It provides an independent review, and makes decisions about whether involuntary treatment is required, and whether treatment will be given in hospital or in the community. In making these decisions, the tribunal must balance the rights of the patient with the rights of others and the protection of the community.</p> <p>The tribunal is comprised of a president and members, including lawyers, psychiatrists and other people with relevant qualifications and experience.</p>	Required to prepare their own annual reports, but financial transactions are included in the <i>Department of Health annual report 2014–15</i> .
Director of Mental Health	<i>Mental Health Act 2000</i>	<p>The director is a statutory office holder discharging a number of responsibilities under the Act. These include:</p> <ul style="list-style-type: none"> • authorising Queensland mental health services and practitioners • protecting the rights of involuntary patients • exercising powers in relation to people with mental illness who are, or have been, subject to criminal justice system processes. 	Required to prepare their own annual reports, but financial transactions are included in the <i>Department of Health annual report 2014–15</i> .
Panels of assessors	<i>Health Ombudsman Act 2013</i>	<p>Under the Act, a range of public and professional panels are established to assist the Queensland Civil and Administrative Tribunal by providing expert advice to judicial members hearing disciplinary matters relating to healthcare practitioners.</p> <p>The tribunal deals with serious disciplinary matters which, if substantiated, may result in the cancellation or suspension of a practitioner's registration.</p>	The panels' financial transactions are not included in the <i>Department of Health annual report 2014–15</i> as their transactions are funded by the Australian Health Practitioner Regulation Agency. The panels' expenses are available via open data.

Related entity	Legislation	Role	Reporting arrangements
Professional conduct review panels	<i>Health Ombudsman Act 2013</i>	<p>Panels were established to conduct disciplinary proceedings for health practitioners registered with Queensland registration boards under the Act.</p> <p>All complaints and notifications received by a Queensland registration board prior to the commencement of the <i>Health Practitioner Regulation National Law Act 2009</i> on 1 July 2010 have been finalised pursuant to transitional arrangements. As such, the role of the Secretary to the Professional Conduct Review Panels ceased on 9 April 2015.</p>	The panels' financial transactions are included in the <i>Department of Health annual report 2014–15</i> .
Radiation Advisory Council	<i>Radiation Safety Act 1999</i>	<p>The council's role is to:</p> <ul style="list-style-type: none"> • examine and make recommendations to the Minister about the operation and application of the Act • propose amendments, radiation safety standards and issues on radiation • conduct research into radiation practices and transport of radioactive materials in Queensland. 	The council is required to prepare their own annual report, but financial transactions are included in the <i>Department of Health annual report 2014–15</i> .

Boards and committees

Description	Total on-costs
<p>Commissioning Board</p> <p>The board provides advice to the Deputy Director-General, Health Commissioning Queensland, on commissioning strategies, market management and development, and performance enablement and delivery.</p> <p>Key achievements 2014–15:</p> <ul style="list-style-type: none"> • commenced in January 2015, replacing the Performance Management Executive Committee • governance oversight of \$30 million <i>HHS waiting list reduction strategy</i> (\$28.4 million allocated) • commissioning reviews—Gold Coast HHS, and rural and remote HHSs • market management—specialist services standing offer establishment and ophthalmology contract management • performance enablement—HHS performance oversight, non-government organisation contract baseline assessment, and <i>Surgery Connect</i> performance oversight. <p>Six board meetings were held in 2014–15.</p>	Non-remunerated advisory body
<p>Health Support Queensland Advisory Board</p> <p>The board was established on 1 August 2014 to provide advice to the Director-General on the provision of health support services to enable improved patient outcomes across the public health system.</p> <p>Key achievements 2014–15:</p> <ul style="list-style-type: none"> • contributed to the strategic direction and management of Health Support Queensland through the development of a strategic framework and strategy to action • assisted in the development of business improvement strategies and internal governance arrangements to support improved efficiency and benefits for Health Support Queensland's customers • endorsed Pathology Queensland's <i>Operational plan 2015–17</i>, including pricing strategy. <p>Six board meetings were held in 2014–15.</p>	<p>Expenditure totalled \$13,859.</p> <p>This included \$12,769 in total remuneration for members' fees.</p>

Description	Total on-costs
<p>Herston Health Precinct Redevelopment Taskforce</p> <p>The taskforce was established in July 2014 to provide advice to the Minister and Treasurer regarding the development and progression of the Registration of Interest and Expression of Interest process, led by Projects Queensland (Queensland Treasury) for the <i>Herston Quarter</i>.</p> <p>Key achievements 2014–15:</p> <ul style="list-style-type: none"> provided senior government and private sector expertise and guidance to the project team created focus on the review of success factors attributable to international health precincts promoted the establishment of a Herston Health Precinct governance body of senior site stakeholders to work together, develop and operate in a collaborative fashion assisted the government's work in partnering with the private sector to redevelop the Herston Quarter into a master planned integrated health and mixed-use precinct. <p>Ten taskforce meetings, including a site visit, were held in 2014–15.</p>	Non-remunerated advisory body.
<p>Progressive Autonomy Projects Board</p> <p>The board was established in July 2013 to oversee and govern HHSs becoming legal owner and manager of their land and building assets, and prescribed as employers.</p> <p>Key achievements 2014–15:</p> <ul style="list-style-type: none"> eight HHSs prescribed as employers effective 1 July 2014 seven non-prescribed employer HHSs provided with additional human resources delegations effective 20 August 2014 directed and risk managed the progressive transfer of the legal ownership of its real property assets to the 16 HHSs, timetabled at 1 July 2014 (three HHSs), 1 December 2014 (six HHSs) and 1 July 2015 (seven HHSs) ensured the alignment of the <i>Land and building transfer project</i> with Queensland Government's commitment to empowering local communities and the healthcare workforce to make decisions about local healthcare needs. <p>Seven board meetings were held in 2014–15.</p>	Non-remunerated advisory body.
<p>Patient Safety Board</p> <p>The board was established in 2013, under the <i>Hospital and Health Boards Act 2011</i>, to monitor the performance of HHSs pertaining to patient safety and take remedial action when patient safety performance does not meet the expected standard.</p> <p>Key achievements 2014–15:</p> <ul style="list-style-type: none"> monitored the performance of HHSs pertaining to patient safety initiated remedial action when patient safety performance of HHSs did not meet the expected standard. <p>Four board meetings were held in 2014–15.</p>	Expenditure for remuneration of consumer members only totalled \$1062.
<p>Ministerial Health Infrastructure Advisory Council</p> <p>The council's role was to ensure the uniform and robust treatment of potential new health infrastructure business opportunities involving the private and non-government sectors.</p> <p>The council's operations ceased upon expiry of members' terms of appointments on 16 December 2014.</p>	Non-remunerated advisory body. Expenditure totalled \$10,363.

Public Sector Ethics Act 1994

Code of conduct

The *Code of Conduct for the Queensland Public Service* applies to all Queensland Health staff. The code is based on the four ethics principles prescribed in the *Public Sector Ethics Act 1994*:

- integrity and impartiality

- promoting the public good
- commitment to the system of government
- accountability and transparency.

To ensure staff receive appropriate education and training about public sector ethics, during 2014–15:

- 5878 Queensland Health employees, apart from Queensland Ambulance Service, completed online ethics integrity and accountability training.

The course focuses on the four ethics principles and ethical decision-making, and incorporates competencies relating to fraud, corruption and misconduct, and public interest disclosures

- 501 Queensland Ambulance Service employees completed online training covering the code of conduct and ethical decision-making
- 3910 departmental employees completed either face-to-face or online refresher code of conduct training. This training was launched by the Director-General in March 2015 as part of the department's commitment to providing a workplace free from any form of harassment and discrimination
- 153 staff completed the *Practical people management matters for health program*—as part of the *Leadership development strategy*. The program aims to:
 - ensure supervisors are aware of their people management responsibilities
 - emphasise the role leaders play in conducting themselves as positive role models and ensuring their staff conduct themselves in a manner consistent with the code of conduct.

Risk management

The department's *Risk management framework* provides the foundation and organisational arrangements for managing risk within the department. It aligns with the AS/NZS ISO 31000:2009 *Risk management – principles and guidelines*.

The framework aims to streamline and embed risk management to support the department in achieving its strategic and operational objectives through:

- proactive executive involvement
- assessment and response to risk across the whole department
- real-time analysis of risk exposures and meaningful reporting.

During 2014–15, the department:

- improved the risk management system for departmental and strategic health system matters
- reviewed and updated the risk management framework, *Risk Appetite Statement* and the fraud control framework
- increased its focus on risk management accountability, communication of risks, and

improved risk management and governance processes

- created and tested a crisis and continuity plan to improve disruption risks to the department, and the promotion of a new business continuity framework
- increased staff awareness of fraud-related issues, including line manager accountability, red flags, control and reporting measures via its annual *Fraud Awareness Month* initiative. This initiative compliments mandatory fraud awareness and code of conduct training.

Conduct Advisory Services

Conduct Advisory Services (CAS) is the department's central point for receiving, reporting and managing allegations of suspected corrupt conduct under the *Crime and Corruption Act 2001* and public interest disclosures under the *Public Interest Disclosures Act 2010*.

The unit enables the Director-General to fulfil a statutory obligation to report public interest disclosures to the Queensland Ombudsman and allegations of suspected corrupt conduct to the Crime and Corruption Commission. Allegations referred back to the department by the commission are managed or monitored by the unit.

The unit managed 52 complaints of corrupt conduct comprising 111 allegations, and reviewed and advised the department's executives and work units on a further 51 matters. A further six complaints were received and reviewed by the unit relating to HHS staff or were not within the department's jurisdiction. These were referred to the commission for consideration and necessary action.

In addition to managing investigations for the department, the unit provided 389 instances of advice to HHSs, the department's executives and work units regarding corrupt conduct and public interest disclosures.

1700 staff completed face-to-face ethical awareness, managing corrupt conduct and managing public interest disclosure training as part of the unit's focus on misconduct prevention by raising ethical awareness and promoting integrity. The unit's development and release of comprehensive public interest disclosure online training allows employees who work shift work or those who are remotely located to complete the required mandatory training.

External scrutiny

During 2014–15, the department was impacted by three Queensland Audit Office (QAO) performance reviews:

- *QAO Report No. 2 Hospital infrastructure projects*—five recommendations were raised and the department agreed to implement these.
- *QAO Report No. 3 Emergency department performance reporting*—four recommendations were raised and the department agreed to implement these.
- *QAO Report No. 5 Hospital and Health Service entities 2013–14*—three recommendations were raised and directed at HHSs in conjunction with the department.

All recommendations have been actively monitored by the Audit and Risk Committee, with the Internal Audit Unit maintaining the departmental record. The majority of recommendations have been implemented with those currently outstanding being actively managed by the responsible officers to ensure timely finalisation.

Audit and Risk Committee

The Audit and Risk Committee's primary role is to provide independent audit and risk management advice to the accountable officer, and to assist in the discharge of financial management responsibilities imposed under the *Financial Accountability Act 2009* and the Financial and Performance Management Standard 2009.

The committee operates in accordance with its charter and Queensland Treasury's *Audit committee guidelines*.

Members	Position
Dr Michael Cleary	A/Director-General, Queensland Health (Chair)
Mr Len Scanlan	Independent member (Deputy Chair)
Mr Ken Brown	Independent member
Dr Judy Graves	Executive Director, Medical Services Royal Brisbane and Women's Hospital Metro North HHS
Ms Lisa Dalton	Independent member
Mr Chris Johnson	Independent member
Ms Annette McMullan	Chief Legal Counsel, Department of Health
Mr David Eeles	Deputy Commissioner, Queensland Ambulance Service

During 2014–15, the committee met on eight occasions to oversee the:

- review and the robustness of the department's risk management framework
- performance of the Internal Audit function
- integrity of the *Chief finance officer assurance statement* and annual financial statements
- implementation of audit recommendations
- matters relating to corporate governance.

The committee also:

- endorsed the annual program of work for the internal audit function and the co-sourced arrangements for the delivery of this work
- assessed the progress of internal audit's work against the approved annual work program
- regularly reviewed progress in implementing various strategies around risk management, including deep dive evaluations into particular high-level risks facing the department
- undertook detailed analysis of the department's financial statements prior to providing their recommendation for approval
- regularly reviewed all matters raised by QAO specifically around financial and performance issues ensuring timely implementation of recommended actions.

Costs associated with independent committee members' fees totalled \$30,985.

Internal audit

The Internal Audit Unit provides independent, objective business assurance and advisory services to help improve the operations of the department.

It operates under the *Financial Accountability Act 2009* and the Financial and Performance Management Standard 2009, and in accordance with its *Internal Audit Charter and Audit plan 2014–15* (which are endorsed by the Director-General, and the Audit and Risk Committee). The unit also has due regard to the Queensland Treasury's *Audit committee guidelines*.

The Director of Internal Audit is directly accountable to the Director-General for leading an effective and efficient internal audit function.

In 2014–15, the unit:

- reviewed its co-sourced delivery service model

- reviewed risk registers to identify and capture actions taken to address areas of concern
- engaged with senior executives to help inform its program of work for the 2015–16 financial year
- reviewed a number of business areas and provided recommendations to improve key governance processes and business practices
- provided advice and assistance on key projects and initiatives, including the *Digital hospital program board* and the *Integrated workforce management solution*
- monitored implementation of agreed audit recommendations
- developed the *Audit plan 2015–16*, which contains upcoming reviews as a result of undertaking a robust risk analysis process.

The unit plays an important role in improving operational processes and financial practices, by:

- identifying areas of non-compliance with legislation and prescribed requirements
- assisting in risk management and identifying risk improvement opportunities
- monitoring agreed actions to ensure they have been satisfactorily implemented
- assessing the effectiveness and efficiency of departmental financial and operating systems, reporting processes and activities.

Public sector renewal program

Land and buildings transfer

From 1 July 2015, the HHSs will have legal ownership of land and buildings. During 2014–15, the department worked closely with HHSs to assist in the transition and to ensure a sustainable model for service delivery, both within the department and to HHSs.

Business Improvement Office

The office assists the Minister and the Director-General to deliver business improvement initiatives and address complex issues facing the public health system.

The office collaborates with others to deliver high-quality outcomes that improve Queensland Health's strategic and system governance, major project portfolio capability, and the effectiveness of the Department of Health by encouraging the adoption of 'best practice' processes and the delivery of business strategies that enable organisational objectives to be achieved.

Business improvement comprises a range of multidisciplinary specialists and draws upon expertise within the department to implement and deliver organisational change and business improvement initiatives that are consistent with the strategic direction of the department, and supports the executive in delivering key business improvement programs under their sponsorship and leadership.

Information systems and recordkeeping

The department is committed to improving recordkeeping practices that adhere to the *Public Records Act 2002*, *Information Standard 40: Recordkeeping* and *Information Standard 31: Retention and Disposal of Public Records*.

The department has a dedicated records and information management team which provides strategic direction and operational support, including:

- registration of files in the departmental recordkeeping system
- creation of files for business areas
- advice and assistance to the department and HHSs.

During 2014–15, the department continued to progress toward compliance recordkeeping practices, by:

- providing two online training modules:
 - *Introduction to recordkeeping*
 - *Records management basics*
- introducing the *Electronic document and records management system* to the department's Legal and Governance Branch, with complete implementation across the department to occur in 2015–16.