

Corporate Governance Attestation Statement

SYDNEY LOCAL HEALTH DISTRICT

1 July 2022 to 30 June 2023



**CORPORATE GOVERNANCE ATTESTATION STATEMENT
SYDNEY LOCAL HEALTH DISTRICT**

The following corporate governance attestation statement was endorsed by a resolution of the Sydney Local Health District Board at its meeting on 21 August 2023.

The Board is responsible for the corporate governance practices of the Sydney Local Health District. This statement sets out the main corporate governance practices in operation within the Sydney Local Health District for the 2022-23 financial year.

A signed copy of this statement is provided to the Ministry of Health by 31 August 2023.

Signed:

A handwritten signature in black ink, appearing to read "John Ajaka".

Honourable John Ajaka
Chair

Date 21. 08. 23

A handwritten signature in black ink, appearing to read "Teresa Anderson".

Dr Teresa Anderson, AM
Chief Executive

Date 17-8-23

STANDARD 1: ESTABLISH ROBUST GOVERNANCE AND OVERSIGHT FRAMEWORKS

Role and function of the Board and Chief Executive

The Board and Chief Executive carry out their functions, responsibilities and obligations in accordance with the *Health Services Act 1997* and the *Government Sector Employment Act 2013*.

The Board has approved systems and frameworks that ensure the primary responsibilities of the Board are fulfilled in relation to:

- Ensuring clinical and corporate governance responsibilities are clearly allocated and understood
- Setting the strategic direction for the entity and its services
- Monitoring financial and service delivery performance
- Maintaining high standards of professional and ethical conduct
- Involving stakeholders in decisions that affect them
- Establishing sound audit and risk management practices.

Board Meetings

For the 2022-23 financial year the Board consisted of a Chair and 12 members appointed by the Minister for Health. The Board met 11 times during this period. The members of the Sydney Local Health District (SLHD) Board for 2022-23 include:

- Dr Teresa Anderson, AM, Chief Executive
- The Hon. John Ajaka, Chair
- Ms Ronwyn North, Member
- Dr Mary Haines, Member
- Mr Richard Acheson, Member
- Ms Kerry-Anne Hartman, Member
- Mr John McGee, Member
- Mr Robert Furolo, Member
- Ms LaVerne Belleair, Member
- Dr Paul Hosie, Member
- Adj/Professor Karen Crawshaw, Member
- Dr John Sammut, Member
- Mr Raymond Dib, Member

Authority and role of senior management

All financial and administrative authorities that have been delegated by a formal resolution of the Board on 9th July 2012 and are formally documented within a Delegations Manual for the Sydney Local Health District (SLHD).

The roles and responsibilities of the Chief Executive and other senior management within the SLHD are also documented in written position descriptions.

Regulatory responsibilities and compliance

The Board is responsible for and has mechanisms in place to ensure that relevant legislation and regulations are adhered to within all facilities and units of the SLHD, including statutory reporting requirements.

The Ministry of Health and Sydney Local Health SLHD policies have procedures that are available to staff and are posted on the intranet. The SLHD employs a Policy Manager to oversee policy development, coordination and dissemination of policies. The Policy Manager reports to the Chief Executive through the Executive Director, Clinical Governance and Risk.

The Board also has a mechanism in place to gain reasonable assurance that the SLHD complies with the requirements of all relevant government policies and NSW Health policy directives and policy and procedure manuals as issued by the Ministry of Health.

STANDARD 2: ENSURING CLINICAL RESPONSIBILITIES ARE CLEARLY ALLOCATED AND UNDERSTOOD

The Board has in place frameworks and systems for measuring and routinely reporting on Clinical Governance and the safety and quality of care provided to the communities the SLHD serves. These systems and activities reflect the principles, performance and reporting guidelines as detailed in NSW Health Policy Directive '*Patient Safety and Clinical Quality Program*' (PD2005_608).

The SLHD has:

- Clear lines of accountability for clinical care which are regularly communicated to clinical staff and to staff who provide direct support to them. The authority of facility/network general managers is also clearly understood.
- Effective forums in place to facilitate the involvement of clinicians and other health staff in decision making at all levels of the SLHD.
- A systematic process for the identification and management of clinical incidents and minimisation of risks to the SLHD.
- An effective complaint management system for the SLHD and complaint information is used to improve patient care.
- A Medical and Dental Appointments Advisory Committee to review the appointment or proposed appointment of all visiting practitioners and specialists. The Credentials Subcommittee provides advice to the Medical and Dental Appointment Advisory Committee on all matters concerning the clinical privileges of visiting practitioners or staff specialists.
- An Aboriginal Health Advisory Committee with clear lines of accountability for clinical and other health services delivered to Aboriginal people. The Aboriginal Health Steering Committee provides leadership and support for the system wide approach to addressing the directions and strategies of the SLHD's Aboriginal Health Strategic Plan and the SLHD Strategic Plan. In addition, the committee ensures that the implementation process is community driven, respectful of Aboriginal culture, supportive of ongoing partnerships, and committed to Closing the Gap between Aboriginal and non-Aboriginal people by striving to have the healthiest Aboriginal community in Australia. The use of Aboriginal Impact Statements is incorporated into all Facility Strategic Plans and their continued use is monitored for all future health service plans to ensure health services are aligned and deliver the health, cultural and social needs of Aboriginal people.
- The SLHD has an Executive Director of Aboriginal Health who reports directly to the Chief Executive as a member of the SLHD Executive team. The Director attends the weekly executive meeting and all peak governance committees. Aboriginal Health is the responsibility of all members of the Executive and Clinical Streams. SLHD has a partnership agreement with Aboriginal Medical Services (AMS).
- Adopted the *Decision Making Framework for NSW Health Aboriginal Health Practitioners Undertaking Clinical Activities* to ensure that Aboriginal Health Practitioners are trained, competent, ready and supported to undertake clinical activities.
- Achieved appropriate accreditation of healthcare facilities and their services.
- Licensing and registration requirements which are checked and maintained.
- A Medical Staff Executive Council, at least two Medical Staff Councils and a Mental Health Medical Staff Council (or an alternative mechanism established in accordance with the Model By-Laws).

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- A Hospital Clinical Council for each public hospital in the entity (where appropriate that Council may be a Joint Hospital Clinical Council covering more than one hospital).
 - A Local Health District Clinical Council.

The Chief Executive has mechanisms in place to ensure that the relevant registration authority is informed where there are reasonable grounds to suspect professional misconduct or unsatisfactory professional conduct by any registered health professional employed or contracted by the SLHD.

Health services are required to be accredited to the National Safety and Quality Health Service (NSQHS) Standards under the Australian Health Service Safety and Quality Accreditation Scheme (the AHSSQA Scheme).

The SLHD intends to submit an attestation statement confirming compliance with the NSQHS Standards for the 2022/23 financial year to their accrediting agency by 30 September 2023. The SLHD submitted an attestation statement to the accrediting agency for the 2021/22 financial year.

STANDARD 3: SETTING THE STRATEGIC DIRECTION FOR THE ENTITY AND ITS SERVICES

The Board has in place strategic plans for the effective planning and delivery of its services to the communities and individuals served by the SLHD. This process includes setting a strategic direction in a 3- to 5-year strategic plan for both the SLHD and the services it provides within the overarching goals of the 2022/23 NSW Health Strategic Priorities.

SLHD-wide planning processes and documentation is also in place, covering:

- Detailed plans linked to the Strategic Plan for the following:
 - Asset management
 - Asset management plan (AMP)
 - The Asset Management Plan 2022/2023-2026/2027 sets out the SLHD approach to deliver the strategies identified in the Strategic Asset Management Plan 2022/23 to 2031/32. It involves the identification of risks and mitigation strategies (including maintenance and monitoring performance).
 - Strategic asset management plan (SAMP)
 - The Strategic Asset Management Plan 2022/23 to 2031/32 outlines the strategies to deliver on the NSW Health Asset Management Objectives. This involves outlining the infrastructure to meet demand across SLHD facilities, in line with the strategic direction of the facilities.
 - Information management and technology
 - The SLHD Digital Health Strategy 2022-2027 was launched on 3 June 2022.
 - Research and teaching
 - The SLHD has the Research Strategic Plan 2018-2023 which enables the District to support and harness research and innovation.
 - A Sydney Education Strategic Plan was launched for 2023-2028.
 - Workforce management
 - Progress against the Workforce Strategic Plan 2023-2028 is reviewed regularly.
 - The Aboriginal Workforce Action Plan 2023-2028 was released after extensive consultation with stakeholders during FY22/23.
- Local Health Care Services Plan
 - SLHD has an overall strategic plan that states its vision to provide “excellence in health and healthcare for all”.
 - Each facility within SLHD has a strategic plan outlining the service direction and specific actions to improve the health of the local catchment population and delivery of services over a 5-year horizon. This is available at <https://www.slhd.nsw.gov.au/planning/currentPlans.html>
- Corporate Governance Plan
 - The Corporate Governance Plan was launched in 2021 and is reviewed annually and updated for 2023.
 - The Chief Executive has implemented practices that ensure that the primary governing responsibilities in relation to the SLHD are fulfilled with respect to:

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- Setting strategic direction.
 - Ensuring compliance with statutory requirements.
 - Monitoring performance of the District.
 - Monitoring financial performance of the District.
 - Monitoring the quality of health services.
 - Industrial relations/workforce development.
 - Monitoring clinical, consumer and community participation.
 - Ensuring ethical practice.
- Aboriginal Health Action Plan
 - The Aboriginal Health Strategic Plan for 2018-2022 covers Aboriginal related health priorities. Progress against the plan is monitored by the Aboriginal Health Steering Committee.
 - Aboriginal related priorities are also covered in the overarching SLHD Strategic Plan 2018-2023. Progress against the plan is reviewed regularly.

STANDARD 4: MONITORING FINANCIAL AND SERVICE DELIVERY PERFORMANCE

Role of the Board in relation to financial management and service delivery

The SLHD is responsible for ensuring compliance with the NSW Health Accounts and Audit Determination and the annual Ministry of Health budget allocation advice.

The Chief Executive is responsible for confirming the accuracy of the information in the financial and performance reports provided to the Board and those submitted to the Finance and Performance Committee and the Ministry of Health and that relevant internal controls for the SLHD are in place to recognise, understand and manage its exposure to financial risk.

The Board has confirmed that there are systems in place to support the efficient, effective and economic operation of the SLHD, to oversight financial and operational performance and assure itself financial and performance reports provided to it are accurate.

To this end, Board and Chief Executive certify that:

- The financial reports submitted to the Finance & Performance Committee and the Ministry of Health represent a true and fair view, in all material respects, of the SLHD's financial condition and the operational results are in accordance with the relevant accounting standards
- The recurrent budget allocations in the Ministry of Health's financial year advice reconcile to those allocations distributed to units and cost centres.
- Overall financial performance is monitored and reported to the Finance and Performance Committee of the SLHD.
- Information reported in the Ministry of Health monthly reports reconciles to and is consistent with reports to the Finance and Performance Committee.
- All relevant financial controls are in place.
- Write-offs of debtors have been approved by duly authorised delegated officers.

Service and Performance

A written Service Agreement was in place during the financial year between the Board and the Secretary, NSW Health, and performance agreements between the Board and the Chief Executive, and the Chief Executive and all Health Executive Service Members employed within the SLHD.

The Board has mechanisms in place to monitor the progress of matters contained within the Service Agreement and to regularly review performance against agreements between the Board and the Chief Executive.

The Finance and Performance Committee

The Board has established a Finance and Performance Committee to assist the Board and the Chief Executive to ensure that the operating funds, capital works funds, resource utilisation and service outputs required of the SLHD are being managed in an appropriate and efficient manner.

The Finance and Performance Committee receives monthly reports that include:

- Financial performance of each major cost centre
- Subsidy availability
- The position of Restricted Financial Asset and Trust Funds
- Activity performance against indicators and targets in the performance agreement for the SLHD

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- Advice on the achievement of strategic priorities identified in the performance agreement for the SLHD
- Year to date and end of year projections on capital works and private sector initiatives.

Letters to management from the Auditor-General, Minister for Health, and the NSW Ministry of Health relating to significant financial and performance matters, are also tabled at the Finance and Performance Committee and/or the Audit and Risk Committee.

During the 2022-23 financial year, the Finance and Performance Committee was chaired by Ms Ronwyn North, and comprised of:

- Dr Teresa Anderson, AM, Chief Executive, SLHD
- Ms Ronwyn North, Chair
- Mr John McGee, Board Member
- Mr Ross Sinclair, Executive Director of Finance, SLHD (from February 2023).
- Mr Puneet Datta, Acting Executive Director of Finance, SLHD (until December 2022).
- Ms Genevieve Wallace, Executive Director of Operations, SLHD (from April 2023).
- Ms Gina Finocchiaro, Director Workforce and Corporate Operations, SLHD
- Dr Andrew Hallahan, Executive Director, Medical Services, Clinical Governance & Risk, SLHD
- Ms Ivanka Komusanac, Director of Nursing & Midwifery Services, SLHD
- Ms Lorraine Ho, Director Performance Monitoring, Systems Improvement, & Innovation, SLHD
- Dr Margy Halliday, Risk Manager, SLHD
- Hannah Storey, Chief of Staff, SLHD

The Chief Executive and Director of Finance attended all meetings of the Finance and Performance Committee except where on approved leave.

STANDARD 5: MAINTAINING HIGH STANDARDS OF PROFESSIONAL AND ETHICAL CONDUCT

The SLHD has adopted the NSW Health Code of Conduct to guide all staff and contractors in professional conduct and ethical behaviour.

The Code of Conduct is distributed to, and signed by, all new staff and is included on the agenda of all staff induction programs. The Board has systems and processes in place to ensure the Code is periodically reinforced for all existing staff. Ethics education is also part of the SLHD's learning and development strategy.

The SLHD has implemented models of good practice that provide culturally safe work environments and health services through a continuous quality improvement model.

There are systems and processes in place and staff are aware of their obligations to protect vulnerable patients and clients – for example, children and those with a mental illness.

The Chief Executive, as the Principal Officer, has reported all instances of corruption to the Independent Commission Against Corruption where there was a reasonable suspicion that corrupt conduct had, or may have, occurred, and provided a copy of those reports to the Ministry of Health.

During the 2022-23 financial year, the Chief Executive reported 12 cases to the Independent Commission Against Corruption.

Policies and procedures are in place to facilitate the reporting and management of public interest disclosures within the SLHD in accordance with state policy and legislation, including establishing reporting channels and evaluating the management of disclosures.

During the 2022-23 financial year, the SLHD reported 3 of public interest disclosures.

The Board attests that the SLHD has a fraud and corruption prevention program in place.

STANDARD 6: INVOLVING STAKEHOLDERS IN DECISIONS THAT AFFECT THEM

The Board seeks the views of local providers and the local community on the SLHD's plans and initiatives for providing health services, and also provides advice to the community and local providers with information about the SLHD's plans, policies and initiatives.

During the development of its policies, programs and strategies, the Entity considered the potential impacts on the health of Aboriginal people and, where appropriate, engaged with Aboriginal stakeholders to identify both positive and negative impacts and to address or mitigate any negative impacts for Aboriginal people.

Organisation Statement:

This year, we've seen how the culture of discovery in Sydney Local Health District drives incredible advances in practice, research and new models of care for our patients and their loved ones. Our Executive and Board are incredibly proud of the way our staff and services have emerged from the intensive pandemic response period to innovate services and apply learnings, to care for our communities.

We have cared for 1.5 million people in our outpatient services, and a further 81,900 patients treated with COVID-19. Almost 176,500 people attended our Emergency Departments, with 43,650 arriving by ambulance. There were over 163,460 admissions and discharges at our hospitals and almost 43,160 operations were performed in our hospitals and through collaborative care arrangements. Close to 5000 babies were born at RPA and Canterbury Hospitals.

Our services in our communities have continued to deliver excellent care close to people's homes, working in partnership with community to keep people healthy. Our Community Health Services delivered care to 37,615 clients in service locations across the District with care delivered in 3,056 homes. Children received care on almost 63,658 occasions from our community health staff.

We refreshed our inclusion statement and showcased our commitment to equity and diversity, turning the District rainbow during Sydney WorldPride.

Our District achieved the highest results in NSW Health across every theme in the People Matter Employee Survey highlighting culture and engagement.

We would like to thank everyone who supports our work to make a difference for our community. Sydney Local Health District is *Ngurang Dali Mana Burudi*, 'a place to get better'.

About our district and services:

Each year we care for more than 740,000 people who live in our District, and more than one million people who come into our District each day to visit, study and work.

The traditional custodians of the land are the Gadigal, Wangal and Bediagal people, they are three of the twenty-nine clans of the great Eora nation.

Sydney Local Health District is made up of hospitals and health services delivered in various settings in the community and a range of associated support services. The District is one of the top performing health services in Australia. Royal Prince Alfred Hospital was named the best hospital in Australia by Newsweek in 2022 and 2023 and, together with Concord Hospital, was named among the top hospitals in the world.

Hospitals operated by the District include Royal Prince Alfred Hospital, Concord, Canterbury, Balmain and Sydney Dental Hospital. The District is also home to Australia's first virtual hospital, **rpavirtual**.

The District is located in the centre and inner west of Sydney and is made up of the Local Government Areas of the City of Sydney (western part), Inner West Council, Canterbury-Bankstown (Canterbury part), Canada Bay, Burwood and Strathfield.

People of Aboriginal and Torres Strait Islander heritage make up one per cent of the population.

The District is home to a large number of established and emerging Culturally And Linguistically Diverse (CALD) communities. Around half of the District's population was born overseas, including significant numbers of refugees, asylum seekers and special humanitarian entrants. Forty-six per cent speak a language other than English at home.

The top health issues for people in our District include insecure housing and homelessness; chronic conditions including cardiovascular disease, diabetes and obesity; mental health; infectious and communicable diseases - COVID-19, sexually transmitted infections, blood borne viruses; drug and alcohol, nicotine and vaping

By 2036 our population is projected to increase to 819,540 with 13.3 per cent of the population to be over the age of 70.

The population is socio-economically diverse, with pockets of both extreme advantage and extreme disadvantage. The District has a large population of people who are homeless – over 6000 people and 465 boarding houses (44 per cent of all boarding houses in NSW).

More than 28,000 people with disability live in the District and there are over 53,000 unpaid carers who provide support across the inner west.

Staff, culture, sustainability and innovation:

Innovation and opportunities to collaborate are important in our District and we have a range of plans, programs and events to support this. This year, we began consultation for our new District Strategic Plan. We also refreshed our Pitch Innovation series, which has invested more than \$1.7 million in the ideas of our staff since it began in 2014. Our Sydney Innovation Week brought our staff, community and partners together to showcase innovation in our District, connect and collaborate with colleagues and foster new ideas to improve healthcare for our communities.

A significant focus for the District is our 14,000 strong workforce, more than 70 per cent are women. This year we launched our new workforce strategic plan and commenced our new service medal program, acknowledging the contribution of more than 6,000 staff who have served NSW Health for 10 years or more in the first year of the program. We have continued to focus on supporting our staff in the workplace with important health and wellbeing programs. Our MDOK program will be known as My District Ok following an extension of the successful program to include support for all staff.

In the People Matter Employee Survey in 2022, Sydney recorded the highest Engagement (67 per cent) and Culture Index (65 per cent) in the State, job satisfaction was at 71 per cent.

We recognised the significant contribution of our staff in 2021-22 at our Annual Innovation and Excellence Awards at the Annual General Meeting.

Recognising that we are fortunate to work in one of the best healthcare systems in the world, many of our staff have signed on to our workplace giving program. The program has contributed around \$2 million over the last decade to the Barbara May Foundation, supporting maternity services in Africa.

Environmental Health and Sustainability is also important to us, Sydney Local Health District has a Sustainability Steering Committee that meets regularly to implement change in our workplace. We are part of the Global Green and Healthy Hospitals Network, a global organisation whose members are dedicated to reducing the environmental impact of the healthcare sector. The District has an aspiration to be carbon neutral by 2030.

Partnering with our community:

Partnering with our community is central to our vision, “excellence in health and healthcare for all”.

We are proud of our strong partnerships and collaborations with community and non-government organisations including, for example, the Aboriginal Medical Service, Redfern; the Lebanese Muslim Association and Central and Eastern Sydney PHN. Our team has been strengthened by new and existing partnerships - including other government agencies (especially the NSW Police and Department of Communities and Justice), non-government organisations, community leaders and private businesses. I would like to thank our community for their ongoing support.

Throughout the COVID-19 pandemic response our partnerships with community groups, leaders and their networks helped us to keep our community healthy. We have continued to work with our partners to find new ways of caring for our community.

There are a range of ways we engage our community through formal and informal mechanisms. These include meetings and forums, community events and open days, health promotion activities, information sessions, education sessions, formal and informal consultations, clinical co-design and re-design, working groups, key safety and quality groups and through volunteering, fundraising, donations, communication and media initiatives and programs.

We have a formalised structure for partnering with consumers. There is a dedicated community participation framework and guiding documents which articulate our commitment to consumer partnerships – these documents are reviewed regularly.

Across the district we have continued to grow our Consumer and Community Advisory Networks (CCAN). There are over 100 consumers who regularly contribute to the district through our major advisory networks with many more contributing to individual services, projects, clinical re-design, and research. We have formal networks at Balmain, Canterbury, Concord, RPA, RPA Virtual and Sydney Dental Hospitals as well as Mental Health, Sydney Education and Sydney Research.

Our Diversity Programs and Strategy Hub is integral to our approach to community participation. As part of our COVID-19 response the District established the Canterbury Community Leaders Forum. This important network has continued, gathering essential insights and establishing accessible, community-trusted settings for access to health information. We launched the District's first Culturally and Linguistically Diverse Health Strategic Plan.

Our LGBTIQ+ communities are among the largest in Australia. Since recruiting the state's first LGBTIQ+ Program Manager, we have held a number of activations and developed a range of programs and resources for staff and community. This includes an LGBTIQ+ Charter of Healthcare rights in partnership with the National Safety and Quality Commission on Healthcare, inclusivity and safety training for staff, the establishment of a District Allies Group with over 100 members, and activations for vaccinations, screening and health packs for community.

Our Connecting The Dots National Nutrition Service, delivered by Karitane and Healthy Beginnings, delivered 21 live early childhood nutrition webinars to 336 health professionals and 58 parent webinars to 535 parents and carers, 205 older people commenced a healthy ageing program, 100 primary schools participated in Live Life Well @ School program, 296 early childhood centres participated in Munch and Move program, 600 international students engaged in our sexual health promotion programs.

We had targeted health promotion campaigns for CALD communities in NSW covering various health issues like HIV, viral hepatitis, COVID-19, gambling harm, festivals, monkeypox and mental health. Through media and social media we reached over 200,000 people and had 24,782 video views. We also delivered education to more than 1260 people from 11 different language groups and had 268 cultural support workers engaged in the delivery of programs for community.

Our Sydney Health Care Interpreter Service received 70,577 calls and 69,332 requests for interpreting.

The District hosts a range of community events throughout the year. This year they included, our Annual General Meeting, our Aboriginal Cultural Events, World Pride, Fair Day, Royal Easter Show, RPA HealthOne Green Square open day, district wide consumer and community forums, stalls in our hospitals and community centres.

Each year Sydney Local Health District receives donations from the community and in-kind support. We'd like to thank our donors and organisations for their generous contribution and thank them for partnering with us to help improve our services for our patients and communities.

Communication:

Effective communication, teamwork, and strong partnerships are fundamental to supporting the work of the District. In Sydney Local Health District communication is everyone's business.

We have a formal Communication and Partnership sub-committee to report to the board on key communication and partnership initiatives.

The district utilises a range of communication tools to help engage our community and our staff and help our patients access health information. This year we launched a new website <https://slhd.health.nsw.gov.au>. Other platforms include our intranet; digital storytelling platforms including SydneyConnect; social media including Facebook, Instagram, LinkedIn, Vimeo, YouTube, Instagram and Twitter; media stories, columns and community notices in newspapers; electronic messages to our staff; brochures and factsheets; newsletters; wayfinding and signage; publications and plans; speaking engagements; education sessions. Each year the District contributes to the NSW Health Annual Report and publishes a Year in Review publication capturing the work of the District over the course of the year.

Information on the key policies, plans and initiatives of the SLHD and information on how to participate in their development are available to staff and to the public at <https://slhd.health.nsw.gov.au/planning/our-plans/publications>

The SLHD has the following in place:

- A consumer and community engagement plan to facilitate broad input into the strategic policies and plans.
- A patient service charter established to identify the commitment to protecting the rights of patients in the health system.
- A Local Partnership Agreement with Aboriginal Community Controlled Health Services.
- Mechanisms to ensure privacy of personal and health information.
- An effective complaint management system.

STANDARD 7: ESTABLISHING SOUND AUDIT AND RISK MANAGEMENT PRACTICES

Role of the Board in relation to audit and risk management

The Board is responsible for supervising and monitoring risk management by the SLHD and its facilities and units, including the system of internal control. The Board receives and considers all reports of the External and Internal Auditors for the SLHD, and through the Audit and Risk Management Committee ensures that audit recommendations and recommendations from related external review bodies are implemented.

The SLHD has a current Risk Management Plan that identifies how risks are managed, recorded, monitored and addressed. It includes processes to escalate and report on risk to the Chief Executive, Audit and Risk Committee and Board.

The Plan covers all known risk areas including:

- Leadership and management
- Clinical care and patient safety
- Health of population
- Finance (including fraud prevention)
- Communication and information
- Workforce
- Legal
- Work health and safety
- Environmental
- Security
- Facilities and assets
- Emergency management
- Community expectations

Audit and Risk Management Committee

The Board has established an Audit and Risk Management Committee, with the following core responsibilities:

- to assess and enhance the SLHD's corporate governance, including its systems of internal control, ethical conduct and probity, risk management, management information and internal audit
- to ensure that appropriate procedures and controls are in place to provide reliability in the SLHD's financial reporting, safeguarding of assets, and compliance with the SLHD's responsibilities, regulatory requirements, policies and procedures
- to oversee and enhance the quality and effectiveness of the SLHD's internal audit function, providing a structured reporting line for the Internal Auditor and facilitating the maintenance of their independence
- through the internal audit function, to assist the Board to deliver the SLHD's outputs efficiently, effectively and economically, so as to obtain best value for money and to optimise organisational performance in terms of quality, quantity and timeliness; and
- to maintain a strong and candid relationship with external auditors, facilitating to the extent practicable, an integrated internal/external audit process that optimises benefits to the SLHD.

The SLHD completed and submitted an Internal Audit and Risk Management Attestation Statement for the 12-month period ending 30 June 2023 to the Ministry without exception.

The Audit and Risk Management Committee comprises 4 members of which 4 are independent and appointed from the NSW Government's Prequalification Scheme for Audit and Risk Committee Independent Chairs and Members.