



Australian Government
Australian Digital Health Agency



Digital Health Safety and Quality Governance Committee

Charter

4 April 2017

Approved

1 Purpose

The Australian Digital Health Agency (the Agency) commenced operations in July 2016 to lead the digital transformation of healthcare to create a better health system and enable Australians to make more informed decisions about their health.

The Agency is governed by a [skills based Board](#) which has established an Audit Committee in compliance with section 45 of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and PGPA Rule section 17 - Audit committee for Commonwealth entities.

The committee is a sub-committee of the Board of the Australian Digital Health Agency established to assist the Board discharge its responsibilities under the Public Governance, Performance and Accountability Act 2013 in respect of ensuring that appropriate clinical safety and quality improvement mechanisms are in place and that these mechanisms are effective throughout the Australian Digital Health Agency. This includes any issues identified that could impact on patient care, including safety, quality and associated risk management.

The committee is not responsible for the executive management of these functions. The committee will engage with management in a constructive and professional manner in discharging its responsibilities and formulating its advice to the Board.

2 Composition and Operation

The Australian Digital Health Agency (the Agency) was established by the *Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016* (Rule), which also sets out the composition and operations of the Advisory Committees. This Charter operates within the broader framework of Part 6 of the Rule.

2.1 Functions

The Digital Health Safety and Quality Governance Committee has the following functions:

- To advise on all safety, quality and clinical governance aspects of services and contracts undertaken and/or managed by Australian Digital Health Agency;
- To advise on and provide oversight of the development, implementation and monitoring of all safety, quality and clinical governance approaches and mechanisms, inclusive of continuous quality improvement and clinical risk management undertaken by the Agency;
- To advise on safety, quality and clinical governance matters, including policies, that are referred to the Digital Health Safety and Quality Governance Committee by the Agency Board, Australian Commission on Safety and Quality, Advisory Committees and/or the Australian Department of Health; and

- To approve and recommend the Agency Clinical Quality Plan which will include consideration of the outcomes and recommendations provided by the Australian Commission on Safety and Quality in Health Care based upon the conduct of audits and reviews of Agency clinical approaches.

2.2 Membership

The Digital Health Safety and Quality Governance Committee consists of a Board member and up to 10, other members.

The Board member must be a Board member appointed for his or her skills, experience or knowledge of clinical safety and quality systems, or if there is no such Board member – a Board member nominated by the Board.

A person is not eligible to be appointed as a member of the Digital Health Safety and Quality Governance Committee unless the person is:

- a) A person with expertise in safety and quality and/or clinical governance approaches;
- b) A person nominated by the Australian Commission on Safety and Quality in Health Care with relevant expertise and experience;
- c) a health care provider with specialist registration and expertise in safety and quality and/or clinical governance;
- d) an academic with expertise in safety and quality and/or clinical governance;
- e) a person with research experience in safety and clinical informatics;
- f) a member of the Board's Consumer Advisory Committee with skills, experience or knowledge in safety and quality and/or clinical governance;
or
- g) a member of the Board's Clinical and Technical Committee with skills, experience or knowledge in safety and quality and/or clinical governance.

2.3 Appointment of Chair

The Chair of the Digital Health Safety and Quality Governance Committee is the Board member appointed to the Board for his or her skills, experience or knowledge of clinical safety and quality systems. If there is no such Board member then the Chair will be a Board member appointed by the Board.

2.4 Appointment of Committee Members

Members, (other than a Board member) are to be appointed by the Board, by written instrument, on a part time basis.

Before the Board appoints a person to the Digital Health Safety and Quality Governance Committee the Board must consult the Health Minister and all the State/Territory Health Ministers.

2.5 Term of membership

A person appointed to the Digital Health Safety and Quality Governance Committee (other than a Board member) holds office for the period, not exceeding three years, specified in the instrument of appointment.

A Board member appointed to the Digital Health Safety and Quality Governance Committee will hold office for the same term as their Board appointment. When membership on the Board ceases, their position as a Board nominee on the Digital Health Safety and Quality Governance Committee, will also cease.

Appointments to the committee are made on a skills basis and are not representational in nature. Therefore if a person no longer holds a particular professional role, the Board will consider ongoing membership of the committee on a case by case basis.

2.6 Board direction

The Board may give directions to the Digital Health Safety and Quality Governance Committee relating to the assistance that the committee is to provide to the Board. The committee must comply with those directions.

2.7 Powers

The Digital Health Safety and Quality Governance Committee may, subject to the required membership and Chair appointments by the Board and any written directions of the Board, determine its own procedures.

Reports or recommendations from the Committee to the Board are prescribed under Part 9 of the Rule – Reporting as being a document that, once received by the Board, must, as soon as practicable after the Board has received it, be advised as available to State/Territory Health Ministers. If a request for the information is received the Board must give the report, document or information to the State/Territory Health Minister within 30 days after the request was made to the Board.

2.8 Other terms and conditions

A Digital Health Safety and Quality Governance Committee member holds office on the terms and conditions (if any) in relation to matters not covered by the PGPA Rule that are determined by the Board.

2.9 Acting Chair and Committee Member arrangements

The Board Chair may, by written instrument, appoint a person to act as a member of the Digital Health Safety and Quality Governance Committee during a vacancy in the office of a member of the committee (whether or not an appointment has previously been made to the office) or during any period, or during all periods, when a member of the committee is absent from duty or is, for any reason, unable to perform the duties of the office of the member.

A person must not be appointed to act as a member of the committee for more than 6 months.

A person is not eligible for appointment to act as member of the committee unless the person is eligible for appointment as a member of the committee.

3 Remuneration, allowances and Leave Arrangements

3.1 Remuneration of Committee Members

A Digital Health Safety and Quality Governance Committee member is to be paid the remuneration that is determined by the Remuneration Tribunal.

Remuneration and Allowances for the Australian Digital Health Agency Board's Digital Health Safety and Quality Governance Committee are described in [2015-20 Remuneration and Allowances for Holders of Part-Time public office](#).

However, a Digital Health Safety and Quality Governance Committee member is not entitled to be paid remuneration if he or she holds an office or appointment, or is otherwise employed, on a full-time basis in the service or employment of:

- a State; or
- a corporation (a public statutory corporation) that:
 - is established for a public purpose by a law of a State; and
 - is not a tertiary education institution; or
 - a company limited by guarantee, where the interests and rights of the members in or in relation to the company are beneficially owned by a State; or
 - a company in which all the stock or shares are beneficially owned by a State or by a public statutory corporation.

3.2 Travel, allowances and expenses

Business and travel expenses and will be in accordance with the *Agency Travel, Allowances and Business Expense Policy*. This Policy aligns with public sector expense standards such as 'best fare of the day' economy class travel for domestic flights. A copy of the Policy is available on the Agency website.

3.3 Leave for Digital Health Safety and Quality Governance Committee members

The Board Chair may grant leave of absence to a member of the Digital Health Safety and Quality Governance Committee on the terms and conditions that the Board Chair determines.

The Board Chair must notify the Minister for Health and all the State/Territory Health Ministers if the Board Chair grants a member of the Digital Health Safety

and Quality Governance Committee leave of absence for a period that exceeds 3 months.

4 Committee Members' Responsibilities

The Digital Health Safety and Quality Governance Committee subscribes to conflict of interest principles set out in the Australian Public Service Commission's [Values and Code of Conduct in practice: A guide to official conduct for APS employees and agency heads](#).

4.1 Confidentiality

All deliberations, decisions and activities of the Digital Health Safety and Quality Governance Committee are confidential unless expressly stated by the Chair (or, in the absence of the Chair, any other person presiding over a meeting) or his or her delegate.

4.2 Disclosure of Interests and Conflicts

At each Digital Health Safety and Quality Governance Committee meeting (including meetings convened by teleconference or other form of electronic communication), the Digital Health Safety and Quality Governance Committee Chair must seek declarations of interests from all Digital Health Safety and Quality Governance Committee members present. A Digital Health Safety and Quality Governance Committee member who has a material personal interest in a matter that relates to the affairs of the Agency must give the other Digital Health Safety and Quality Governance Committee members notice of the interest.

The notice must give details of:

- The nature and extent of the interest; and
- The relation of the interest to the affairs of the Agency; and
- Be given at a Digital Health Safety and Quality Governance Committee meeting as soon as practicable after the Digital Health Safety and Quality Governance Committee member becomes aware of his or her interest in the matter.

The details must be recorded in the minutes of the meeting. Additionally, the Australian Digital Health Agency Digital Health Safety and Quality Governance Committee secretariat must retain all details of interests declared and all standing notices of interest.

4.3 Restrictions on outside employment

A member of the Digital Health Safety and Quality Governance Committee member must not engage in any paid employment that, in the Board's opinion, conflicts or may conflict with the proper performance of his or her duties on the Digital Health Safety and Quality Governance Committee.

5 Meetings

5.1 Committee Members' Conduct in meetings

The Digital Health Safety and Quality Governance Committee may, subject to the required membership and Chair appointments by the Board and any written directions of the Board, determine its own procedures.

Section 15 of the Public Governance, Performance and Accountability Rule 2014 deals with the consequences of having a material personal interest and may affect whether a Digital Health Safety and Quality Governance Committee member can be present at a meeting and vote in relation to a matter.

5.2 Convening Meetings

The Digital Health Safety and Quality Governance Committee Chair must convene such meetings of the Digital Health Safety and Quality Governance Committee as are, in his or her opinion, necessary for the efficient conduct of its affairs.

The Digital Health Safety and Quality Governance Committee Chair must convene at least two meetings annually and further meetings dependent on workload.

The Digital Health Safety and Quality Governance Committee Chair must convene a meeting of the Digital Health Safety and Quality Governance Committee if directed to do so by the Minister for Health.

On receipt of a written request signed by a majority of the Digital Health Safety and Quality Governance Committee members, the Digital Health Safety and Quality Governance Committee Chair must convene a meeting of the Digital Health Safety and Quality Governance Committee.

5.3 Presiding at Committee meetings

The Digital Health Safety and Quality Governance Committee Chair must preside at all meetings of the Digital Health Safety and Quality Governance Committee at which he or she is present.

If the Digital Health Safety and Quality Governance Committee Chair is not present at a meeting of the Digital Health Safety and Quality Governance Committee, the Digital Health Safety and Quality Governance Committee members present must elect one of their number to preside at the meeting.

5.4 Quorum

At a meeting of the Digital Health Safety and Quality Governance Committee, a quorum is constituted by a majority of the Digital Health Safety and Quality Governance Committee members for the time being holding office.

However, if:

- a Digital Health Safety and Quality Governance Committee member is required by section 15 of the Public Governance, Performance and Accountability Rule 2014 (which deals with material personal interests):
 - not to be present while a matter is being considered at a meeting of the Digital Health Safety and Quality Governance Committee; or
 - not to vote on a matter that is being considered at a meeting of the Digital Health Safety and Quality Governance Committee; and
- when the Digital Health Safety and Quality Governance Committee member leaves the meeting concerned there is no longer a quorum present the Digital Health Safety and Quality Governance Committee members remaining at the meeting constitute a quorum for the purposes of any consideration of, or vote on, the matter at the meeting.

5.5 Voting

At a meeting of the Digital Health Safety and Quality Governance Committee, a question is decided by a majority of the votes of Digital Health Safety and Quality Governance Committee members present and voting.

The Digital Health Safety and Quality Governance Committee member presiding at the meeting has:

- a deliberative vote; and
- in the event of an equality of votes, a casting vote.

5.6 Committee Minutes

The Digital Health Safety and Quality Governance Committee must keep minutes of its meetings.

6 Committee Reports and Recommendations to the Board

6.1 Sharing information with other jurisdictions

The Agency is a prescribed agency for the purpose of paragraph 82 of the PGPA Act, which means that each State/Territory Health Minister may request the following reports, documents and information from the Digital Health Safety and Quality Governance Committee:

- a report or recommendation prepared by the Digital Health Safety and Quality Governance Committee for consideration by the Board of the Australian Digital Health Agency, once the Board has received the report or recommendation from the Digital Health Safety and Quality Governance Committee has received the report or recommendation from the standing advisory committee.

The Board must advise State/Territory Health Ministers of availability of documents as soon as practicable.

The Board must provide these within 30 days after the State/Territory Health Minister's request.

6.2 Annual performance report to the Board

The Digital Health Safety and Quality Governance Committee must prepare an annual performance report of its deliverables under the Board's national digital health work program for each financial year. The annual performance report must be prepared and delivered by the date requested by the Board before 31 March in the financial year.

7 Resignation and Termination

7.1 Resignation of Committee members

A Digital Health Safety and Quality Governance Committee member may resign his or her appointment by giving the Board Chair a written resignation. The resignation takes effect on the day it is received by the Board Chair or, if a later day is specified in the resignation, on that later day.

7.2 Termination of appointments of Committee members

The Board may terminate the appointment of a Digital Health Safety and Quality Governance Committee member:

- a) for misbehaviour
- b) if the member is unable to perform the duties of his or her office because of physical or mental incapacity
- c) if the member
 - i. becomes bankrupt; or
 - ii. takes steps to take the benefit of any law for the relief of bankrupt or insolvent debtors; or
 - iii. compounds with one or more of his or her creditors; or
 - iv. makes an assignment of his or her remuneration for the benefit of one or more of his or her creditors; or
- d) if the member is absent, except on leave of absence, from 3 consecutive meetings of the committee; or
- e) if the member engages in paid work that, in the Board's opinion, conflicts or may conflict with the proper performance of his or her duties.

8 Committee Performance Review

The Board Chair will arrange for Digital Health Safety and Quality Governance Committee performance reviews every three years. Performance will be assessed against this Charter.

9 Publication and Review of Charter

This Charter will be available on the Agency's website. The Board must review this Charter annually to ensure it remains consistent with the Digital Health Safety and Quality Governance Committee's functions.