



Local Health Network Governing Boards

Board Chair Expression of Interest Information Pack

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SA Health

Table of Contents

Part 1: Background information on the SA public health system	4
Our vision, values and strategic priorities	4
Our structure	5
New Local Health Networks in country South Australia	6
Part 2: Governing board roles and functions	7
Governance and management arrangements	7
Engagement strategies	8
Chief Executive Officer, Local Health Network	8
Part 3: Appointment criteria	9
Governing board composition	9
Eligibility criteria	9
Selection criteria	9
Part 4: Appointment terms and conditions	10
Appointment subject to the passage of legislation	10
Eligibility to receive fees	10
Governing board member remuneration	10
Term of appointment to a governing board	10
Indemnity and insurance information	10
Probity and screening requirements	10
Anticipated time commitment	10
Part 5: Application process	11
Selection process	11
How to apply	11

Foreword

The South Australian public health system is a large and complex system, servicing a population of approximately 1.6 million with an annual budget of approximately \$6 billion and over 38,000 staff.

The South Australian Government is introducing a new model of governance and accountability in the public health system. A cornerstone of the new model will be the introduction of governing boards for Local Health Networks.

There will be ten governing boards in South Australia, one for each of four of the current Local Health Networks (three metropolitan and one statewide) and six governing boards covering the six new Local Health Networks in Country Health SA.

The South Australian public health system will commence its transition to board governance with the appointment of board Chairs by 31 July 2018. This is the first step in developing a robust, sustainable board governance model. Governing board member appointments will occur later in 2018, followed by training and induction in anticipation of boards being fully operational from 1 July 2019.

The Chair of each governing board will serve in an advisory capacity during the transition period until the commencement of full board operations from 1 July 2019. This will include being involved in the recruitment of governing board members, induction and training of the governing board and general advice and support in preparing the Local Health Networks for board governance and operation. By 1 July 2019, the board Chairs will act in the full capacity as Chairs of the governing boards.

The system needs strong leadership; it needs people with a wealth of knowledge, skills and experience. Board Chairs will be positions of significant leadership and responsibility in the public health system and present an opportunity for experienced leaders to drive Local Health Network decision making. It is expected that this expression of interest process will lead to the identification and appointment of a unique and high calibre set of individuals.

This incredibly important reform is at the heart of the future of the public health system, and I look forward to working with governing board Chairs over the coming year to prepare the system and transition to a new model of governance for South Australia.

Dr Chris McGowan

Chief Executive, SA Health

Part 1: Background information on the SA public health system

SA Health encompasses all Local Health Networks, the SA Ambulance Service and the Department for Health and Wellbeing. SA Health is a diverse organisation with a wide range of responsibilities and provides a variety of services across regional and metropolitan worksites.

SA Health serves all South Australians and recognises the diversity of the South Australian community, including Aboriginal people and people from culturally and linguistically diverse backgrounds. The knowledge, skills and dedication of SA Health staff benefit all South Australians, both individually and collectively.

SA Health staff across the system have worked in partnership to plan and implement a number of major projects such as the transition to the new Royal Adelaide Hospital. These significant measures have occurred alongside SA Health's wider ongoing responsibilities in policy, health protection and promotion, education and research, and service planning and delivery, to support the health and well-being of all South Australians.

SA Health has an important role as part of a larger health and well-being sector. Our partners in the non-government, education, research, private and Commonwealth sectors are vital in achieving this plan's vision. SA Health works closely as part of the Government of South Australia to improve the social determinants of health and well-being.

Our vision, values and strategic priorities

Our people and our partners are actively engaged in improving the health and well-being of all South Australians. Consumers and communities are at the centre of our decisions and inform the design and provision of health and well-being services.

SA Health performs three roles in the health system:



We recognise that how we do our work drives the safety and quality of our services.

Acting consistently with the SA Health values, means that our culture will enable delivery of a contemporary and sustainable health and well-being system and support the achievement of our vision for healthy South Australians to enjoy a great quality of life.

We use the South Australian Public Sector values as a foundation of how we describe and discuss the productive behaviours that we demonstrate ourselves and expect from our colleagues.

Care and kindness are the values that underpin how we treat each other, working together to provide services.

Care and kindness are paramount to everything we do with our consumers, their families, carers, our community, our work colleagues and service partners.

The South Australian Public Sector values articulate our commitment to each other, consumers and the community:



Our structure

SA Health is the brand name for the South Australian public health portfolio of services and agencies responsible to the Minister for Health and Wellbeing. The Department for Health and Wellbeing is an administrative unit under the *Public Sector Act 2009*.

As at June 2018, SA Health comprises of five Local Health Networks:

- Central Adelaide Local Health Network
- Northern Adelaide Local Health Network
- Southern Adelaide Local Health Network
- Women's and Children's Health Network
- Country Health SA Local Health Network.

Details on SA Health's current structure can be accessed through www.sahealth.sa.gov.au.

New Local Health Networks in country South Australia

Six new Local Health Networks will be established in country South Australia, using the same boundaries as the current Country Health SA Local Health Network regions, as follows:

- Barossa Hills Fleurieu Local Health Network
- Eyre and Far North Local Health Network
- Flinders and Upper North Local Health Network
- Riverland Mallee Coorong Local Health Network
- South East Local Health Network
- Yorke and Northern Local Health Network.

A process is underway for the six new Local Health Networks for country South Australia to be established by proclamation under the Health Care Act 2008. Appendix 1 provides a map of the current Country Health SA Local Health Network regions for further information, which provides the proposed boundaries for the six new regional Local Health Networks.

Part 2: Governing board roles and functions

Governance and management arrangements

The functions of a governing board for a Local Health Network will include the following:

- to ensure effective clinical and corporate governance frameworks are established to support the maintenance and improvement of standards of patient care and services by the Local Health Network and to approve those frameworks;
- to ensure:
 - the operations of the Local Health Network are carried out efficiently, effectively and economically; and
 - the Local Health Network manages its budget so that performance targets are met; and
 - that Local Health Network resources are applied equitably to meet the needs of the community served by the Local Health Network;
- to ensure strategic plans to guide the delivery of services are developed for the Local Health Network and to approve those plans;
- to provide strategic oversight of and monitor the Local Health Network's financial and operational performance;
- to prepare and keep under review strategies:
 - for the provision of health services by the Local Health Network; and
 - to promote consultation with health professionals working in the Local Health Network; and
 - to promote consultation with health consumers and community members about the provision of health services by the Local Health Network;
- to advise providers and consumers of health services, and other members of the community served by the Local Health Network, as to the Local Health Network's policies, plans and initiatives for the provision of health services;
- to manage performance against the performance measures in the service agreement between the Local Health Network and the Chief Executive, SA Health;
- to cooperate with other providers of health services, including providers of primary health care, in planning for, and providing, health services;
- to endorse the Local Health Network 's annual report;
- to liaise with the boards of other Local Health Network and the Chief Executive, SA Health in relation to both local and statewide initiatives for the provision of health services.

A governing board is also to carry out other functions assigned to the board by or under the *Health Care Act 2008* or any other Act, or by the Minister.

The governing board for a Local Health Network:

- must comply with any directions of the Minister and any directions of the Chief Executive, SA Health; and
- must comply with any policies of the Department specified by the Minister or the Chief Executive, SA Health to apply to a governing board in the performance of its functions; and
- must not exercise a function in a way that is inconsistent with the exercise of a function by the Chief Executive, SA Health (including a function that has been delegated to the Chief Executive, SA Health).

An act done or decision made by the governing board of a Local Health Network in the course of official functions and duties is an act or decision of the Local Health Network.

Engagement strategies

At a minimum, the governing board for a Local Health Network must develop and publish the following strategies:

- a strategy to promote consultation with health professionals working in the Local Health Network (a clinician engagement strategy);
- a strategy to promote consultation with health consumers and members of the community about the provision of health services by the Local Health Network (a consumer and community engagement strategy).

The governing board must consult with the following persons in developing the strategies:

- for the clinician engagement strategy—health professionals working in the Local Health Network;
- for the consumer and community engagement strategy—health consumers and members of the community.

A strategy developed and published under this section must:

- satisfy any requirements prescribed by regulation for that strategy; and
- be published in a way that allows the strategy to be accessed by members of the public, including, for example, on the internet.

The governing board and the Local Health Network must give effect to the strategies developed and published under this section in performing functions under the *Health Care Act 2008*.

Chief Executive Officer, Local Health Network

The governing board for a Local Health Network may, after consultation with the Chief Executive, SA Health, appoint:

- a specified person; or
- a person occupying a specified office or position,

as the chief executive officer of the Local Health Network.

Any such appointment:

- takes effect following confirmation of the appointment by the Chief Executive, SA Health; and
- is revocable by the governing board at any time, subject to the confirmation of the Chief Executive, SA Health.

The chief executive officer of a Local Health Network is responsible for managing the operations and affairs of the Local Health Network and is accountable to, and subject to the direction of, the governing board for the Local Health Network in undertaking that function (although the governing board cannot give a direction concerning the medical treatment of a particular person).

An act done or decision made by the chief executive officer of a Local Health Network in the course of official functions and duties is an act or decision of the Local Health Network.

Part 3: Appointment criteria

Governing board composition

A governing board consists of six or more members but no more than eight members, being persons who collectively have, in the opinion of the Minister, knowledge, skills and experience necessary to enable the governing board to carry out its functions effectively.

It is also a requirement that at least two members of a governing board are health professionals, meaning an individual who holds, or previously held, general registration in a health profession under the *Health Practitioner Regulation National Law (South Australia)* or an individual who practices, or has previously practised, a profession providing health services involving the provision of care or treatment to other persons (directly or indirectly).

A governing board must as far as practicable be comprised of equal numbers of women and men.

Eligibility criteria

A person is not eligible for appointment to a governing board of a Local Health Network if:

- the person is an employee of the Local Health Network;
- the person is engaged to provide a service to the Local Health Network; or
- the person is an employee of the Department for Health and Wellbeing.

Selection criteria

As far as practicable, the membership of a governing board must comprise persons who between them have knowledge of, and experience and expertise in, the following fields:

- Health management;
- Clinical governance;
- Commercial management;
- Financial management;
- The practice of the law;
- The provision of health services;
- Other knowledge, experience and expertise that, in the opinion of the Minister, will enable the effective performance of the governing board's functions.

Part 4: Appointment terms and conditions

Appointment subject to the passage of legislation

The *Health Care Act 2008* will be amended to include the powers for the Minister for Health and Wellbeing to appoint governing board Chairs. Governing board Chairs will be appointed subject to the passage of legislation. Some of the arrangements outlined in this document may be revised as a result of parliamentary consideration.

Eligibility to receive fees

Governing board Chairs are not paid a salary but are entitled to be paid fees and allowances as recommended by the Department of Premier and Cabinet and determined by the Minister for Health and Wellbeing.

Eligibility to receive fees is determined in accordance with the Department of Premier and Cabinet Circular 16 - Remuneration for Government Appointed Part-Time Boards and Committees (September 2016) which contains the government's policy on remuneration for part-time boards and committees.

Governing board member remuneration

The remuneration rates for governing board Chairs are up to \$70,758 per annum.

Term of appointment to a governing board

Governing board members will be appointed for a period not exceeding three years.

Governing board members will be eligible for reappointment at the expiration of a term of office, however a member may not hold office for more than nine consecutive years.

Indemnity and insurance information

Members of boards and committees are covered by the Department for Health and Wellbeing's insurance in accordance with the Department of the Premier and Cabinet publication "Government Boards and Committees – Guidelines for Agencies and Board Directors"

Probity and screening requirements

Appointment to a governing board is subject to satisfactory completion of formal requirements which may include:

- 100 Point Identity Check and National Criminal Record Check.
- Verification of formal education qualifications and professional memberships material to candidate's application.
- Australian Securities and Investments Commission Banned and Disqualified Register Check.
- Australian Financial Security Authority National Personal Insolvency Index Check.
- International Criminal Record Check if a candidate has lived for more than 12 months in one country in the past 10 years.
- Provision of three professional referees.
- Participation in telephone or face to face screening activities as necessary.

Anticipated time commitment

Governing board Chairs are expected to commit an estimated minimum of one day per week or approximately 500 hours a year in their role.

Part 5: Application process

Selection process

Governing board appointments will be merit based, and appointments will be made through a fair and open process.

As a first step, interested applicants are asked to complete an Expression of Interest Application Form along with a covering letter and CV.

A shortlisting process will then occur with interviews of short-listed applicants planned for mid-July 2018.

Applicants will be advised of progress of their application via email.

How to apply

Please submit your completed Expression of Interest Application Form, covering letter and your CV to search coordinator, Kaavya Karunanithi:

T: +61 (0)2 9900 0104

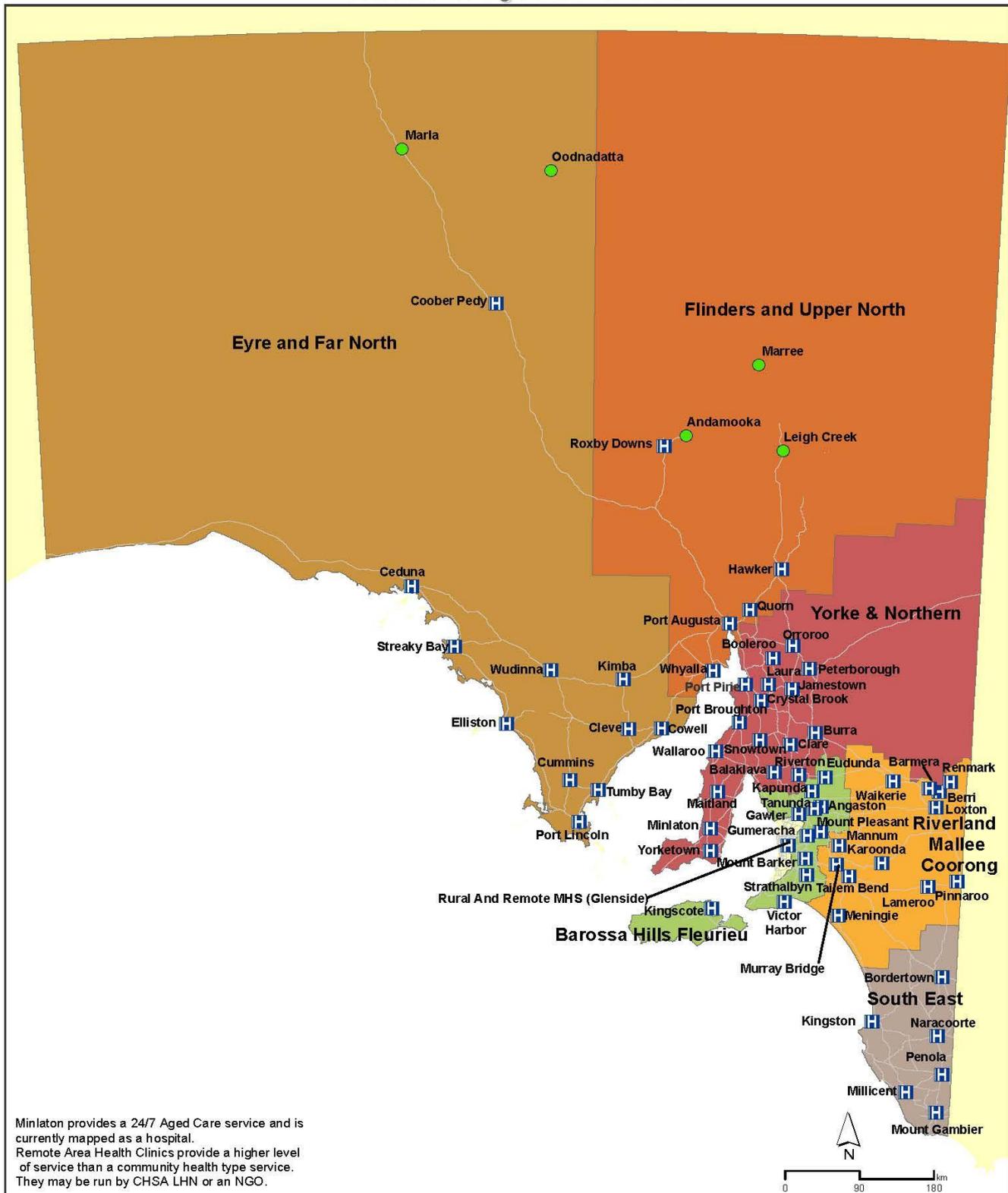
E: knithi@hardygroupintl.com

For the Application Form, please go to either www.sahealth.sa.gov.au/governingboards or www.hardygroupintl.com.

The Application Form also provides contact details for all enquiries.

Deadline for EOI submissions: **5pm Friday 29 June, 2018**

Country Health South Australia Local Health Network Rural Regions 2018



Minlaton provides a 24/7 Aged Care service and is currently mapped as a hospital.
Remote Area Health Clinics provide a higher level of service than a community health type service. They may be run by CHSA LHN or an NGO.

- H Public Acute Hospital
- Remote Area Health Clinic
- Metropolitan Local Health Networks
- Main Roads

Rural Region

- Barossa Hills Fleurieu
- Flinders and Upper North
- Eyre and Far North
- Riverland Mallee Coorong
- South East
- Yorke and Northern

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