

Murrumbidgee Primary Health Network

Clinical Governance Committee

Terms of Reference

1. Aims and Objectives

Clinical Governance has been defined as the exercise of corporate accountability, both external and internal, for the management of clinical performance throughout a health organisation. Clinical governance systems assign responsibilities to all level of the organisation including the health providers, managers and Directors.

The purpose of the Murrumbidgee Primary Health Network (MPHN) Clinical Governance Committee is to ensure that by application of appropriate clinical governance and the underlying principles across the organisation, the services MPHN commission or deliver are Safe, Effective, Appropriate, Consumer-centred, Accessible and Efficient.

2. The role of the Committee is to:

- ensure that MPHN has a robust clinical governance structure, policies, and performance reporting framework to safeguard quality and safety of delivered and commissioned clinical services, including the Wagga GP After Hours Service;
- monitor performance of the MPHN delivered and commissioned clinical services for continuous quality improvement and clinical risk management;
- advise the firsthealth Limited Board (Board) on key decisions regarding quality and safety of health services delivered or commissioned by MPHN;
- foster a person centred care that is respectful of, and responsive to, the preferences, needs and values of service consumers;
- prioritise action and resources to areas where the greatest improvements are possible;
- provide leadership and support to development and implementation of clinical governance systems in other health practices and commissioned services in the region;
- facilitate and implement understanding of safety and quality in commissioned services;
- build a supportive culture that is open about failure and error, and where sharing of good ideas and practice is valued;
- foster organisational commitment to continuous improvement within MPN and commissioned service providers.

3. Membership

- Board Directors x 2
- GP x 2
- Community/Consumer Representative x 1 ⁺
- Murrumbidgee Local Health District delegate x 1

4. In attendance

- MPHN Chief Executive Officer
- MPHN Executive Commissioning and Operations
- MPHN Senior Manager System Integration
- MPHN Senior Manager Commissioning
- MPHN Clinical Lead

⁺ The Community /Consumer Representative position shall be filled by the Chair of the Community Advisory Committee.

Other managers, clinicians and contracted providers may be co-opted or invited to attend as required.

5. Quorum

A quorum will consist of 50% of the membership plus one member, and must include at least one Board Director.

6. Meeting Procedures

A Board member will be elected to chair the Committee at the first meeting in each calendar year. The tenure of the Chairperson will be one year with eligibility for re-election. In the absence of the Chairperson, a chair will be nominated from attendees at the meeting. MPHN staff will prepare the Agenda and action the Minutes.

7. Meeting Schedule

The Committee will meet quarterly.

8. Communication Mechanisms

Agendas should be distributed 5 calendar days prior to each meeting. A record of the proceedings of all meetings shall be documented and distributed within two weeks' time after each meeting.

The resolutions from committee meetings are an inclusion in the MPHN Board papers.

9. Disclosure of Interests by Members

Members of the committee must declare their relevant personal and non-personal interests at the time of their appointment. At the commencement of each meeting the Chair will invite members to declare whether there are any matters in the agenda that they have a "direct or pecuniary interest". This will provide members with an opportunity to discharge their obligations as members.

Members should not have a personal interest in any agenda item under discussion. If a member (including the Chair or Vice Chair) have an interest in a matter under discussion they will absent themselves from that portion of the meeting. If the Chair and Vice-Chair are both absent, the Chair is responsible for nominating another Chair for that agenda item.



10. Expected Member Conduct

- Members of the committee will be bound by their respective organisational/professional code of conduct.
- Observe the highest standards of impartiality, integrity and objectivity in relation to the advice they provide;
- Be accountable for their activities and for the standard of advice they provide to the Board;
- Provide the Board with formal recommendations supported by board papers, and requiring a written reasoned response from the Board;
- Members who obtain information in the course of their engagement on the Clinical Governance Committee must not improperly use the information to gain an advantage for themselves, someone else or another organisation, or cause detriment to the Murrumbidgee Primary Health Network.

11. Document Control

This Terms of Reference to be reviewed every (choose most appropriate):

☒ 1 year ☐ 2 years ☐ 3 years

Date	Version	Comments/Modifications
2018	1.0	Document created
April 2022	1.1	Amended to reflect membership, meeting frequency, updated disclosure of conflict of interest requirements and expected member conduct
June 2022	2.0	Endorsed by Committee at meeting held 28 June 2022.
March 2023	3.0	Endorsed by Committee at meeting held 14 March 2023 Approved by firsthealth Limited Board at meeting held 28 March 2023.

