

Gold Coast Hospital and Health Board

Finance and Performance Committee Charter

v6.2



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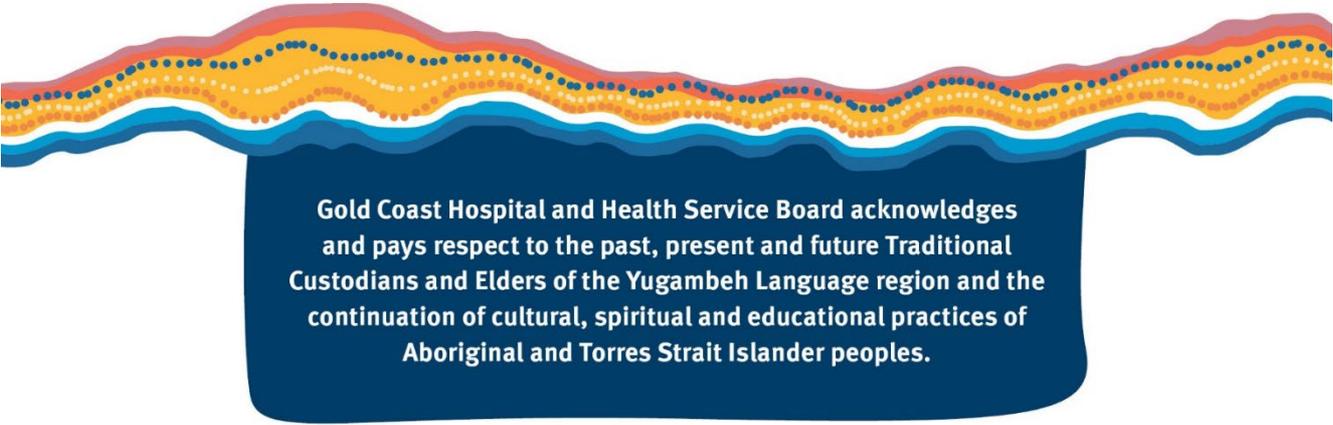
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Date: April 2023

Review Date: June 2025

Version: 6.2



Gold Coast Hospital and Health Service Board acknowledges and pays respect to the past, present and future Traditional Custodians and Elders of the Yugambah Language region and the continuation of cultural, spiritual and educational practices of Aboriginal and Torres Strait Islander peoples.

The artwork throughout this document was produced for Gold Coast Health by Riki Salam, We are 27 Creative.

1. The Charter

This document, to be known as the Finance and Performance Committee Charter (the Charter), has been approved by the Gold Coast Hospital and Health Board (the Board). Any previous version of the Charter/Terms of Reference is hereby revoked. This Charter will continue in effect until revoked by the Board.

The Charter establishes the Finance and Performance Committee's purpose, function, membership, reporting and administrative arrangements.

The Charter will be periodically reviewed to maintain its alignment with excellence in governance standards and compliance with legislation, policy and best practice.

This Committee Charter should be read in conjunction with the Board Charter. The Board Charter outlines the general provisions for meetings which also apply to Board Committee meetings.

2. Purpose

The Gold Coast Hospital and Health Service (Gold Coast Health) is a statutory body under the *Hospital and Health Boards Act 2011*.¹ It is also a statutory body under the *Financial Accountability Act 2009* and the *Statutory Bodies Financial Arrangements Act 1982*, and is a unit of public administration under the *Crime and Corruption Act 2001*.²

The Finance and Performance Committee (the Committee) reports directly to the Board and functions under the authority of the Board in accordance with Schedule 1, subsection 8(1)(b) of the *Hospital and Health Boards Act 2011*, and regulations 44(1)(b) and 46 of the Hospital and Health Boards Regulation 2023.

The purpose of the Committee is to provide advice and make recommendations to the Board on matters pertaining to the financial and operational performance of Gold Coast Health.

¹ HHB Act, subsection 7(1)

² HHB Act, section 21



3. Function and Responsibilities

In accordance with section 46 of the Hospital and Health Boards Regulation 2023, the Committee advises the Board on the following functions:

- a) Advising the board about the matters stated in paragraphs (b) to (g)
- b) Assessing Gold Coast Health's budgets, and ensuring the budgets are:
 - i. consistent with the organisational objectives of Gold Coast Health
 - ii. appropriate having regard to the Gold Coast Health's funding.
- c) Monitoring cash flow, having regard to the revenue and expenditure of Gold Coast Health
- d) Monitoring the financial and operating performance of Gold Coast Health
- e) Monitoring the adequacy of Gold Coast Health's financial systems, having regard to its operational requirements and obligations under the *Financial Accountability Act 2009*
- f) Assessing and providing advice to the Board on financial risks and opportunities which may impact the financial performance and reporting obligations of the Service, and the management plans in place to mitigate risk
- g) Assessing complex or unusual financial transactions and providing advice to the Board on suitability, controls and risk management
- h) Any other functions given to the Committee by the Board, providing that the function is not inconsistent with the above.

The Committee also has the following responsibilities:

- Maintain oversight of Service Agreement negotiations and variations
- Review the financial position, financial projections and strategic implications for Gold Coast Health
- Assess financial and operational risks which may impact on financial performance
- Monitor the progress of major capital and infrastructure projects
- Monitor the progress of transformation and digital innovation initiatives
- Monitor activity performance against prescribed indicators and targets, including the performance measures in the Service Agreement with the Department of Health
- Review strategic business cases as required and in accordance with the Investment Framework
Monitor the strategic implications of the medium to long-term asset management strategies of the organisation
- Monitor performance and implementation of strategic initiatives to mitigate risk and improve performance.

4. Authority and Decision-Making

The Committee has an oversight role and does not replace or replicate management's primary responsibilities and delegations, or the responsibilities of other executive management groups within Gold Coast Health.

The Committee is advisory in nature, and does not hold financial, procurement or any other form of delegation on behalf of the Board. The Committee is a "prescribed committee" under section 44 of the Hospital and Health Boards Regulation 2023. The Committee has no Executive powers; it may pass resolutions however it is not authorised to make decisions.

A resolution is validly made by the Committee, even if it is not passed at a meeting, if most of the Committee members give written agreement to the resolution and notice of the resolution is given under procedures approved by the Committee.

In discharging its responsibilities, the Committee has the following authorities:

- The Chair of the Committee can access all information and personnel that are reasonably required to fulfill the Committee Charter.



- The Chair of the Board and the Chief Executive will be consulted where information requests are considered of a private, sensitive, or confidential nature.
- The Committee may request the attendance of any member of the Executive Management Team, including the Chief Executive, or member of the Board, at a Committee meeting.
- The Committee may seek advice from external advisors, including legal or financial advisors, with approval of the Board.
- The Committee may recommend investigations, reviews, and reports on matters within its Charter.
- The Committee may recommend matters to the Board for approval or noting.
- Issues unable to be resolved by the Committee are escalated to the Board.

The Chair of the Committee has the authority to create relevant sub-committees or other subordinate bodies deemed necessary to assist the Committee in discharging its responsibilities.

5. Guiding Principles

The Committee must recognise and adhere to the principles set out in the *Hospital and Health Boards Act 2011*, *Hospital and Health Board Regulation 2023*, the *Public Sector Act 2022* and the *Financial Accountability Act 2009* in carrying out the Committee's function.

The relevant principles from the above-mentioned legislation are contained the Board Charter. The Committee must also conduct itself in accordance with the Gold Coast Health values below:



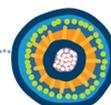
6. Relationships

The Committee reports directly to the Board. The Committee may recommend matters to the Board for approval or noting.

The Committee and other Committees of the Board may refer matters between each other for deeper analysis or investigation and reporting back within the Charters of the referring committee.

At the discretion of the Committee Chair, representatives of relevant Gold Coast Health groups may be invited to attend meetings on behalf of their respective representative group.

Following each Committee meeting, the Committee Chair will provide a summary report to the Board.



7. Reporting

The Committee will provide prompt and constructive reports on its findings directly to the Board, highlighting issues it considers are not being adequately addressed by management, particularly those issues which could present a material risk or threat to Gold Coast Health.

The Chair may give a verbal or written report at any meeting of the Board at the invitation of the Chair of the Board.

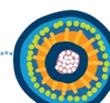
An example annual work plan (shown at **Appendix 1**) has been developed in line with the responsibilities outlined in the Charter. Each year, the example work plan will form the basis of an Annual Committee Forward Planning and Reporting Calendar to be developed throughout the year to include additional discussion items as and when required.

The Committee provides the following reports:

Recipient	Report	Frequency	Responsibility
Board	Finance and Performance Committee Minutes	After each meeting	Secretariat
Board	Finance and Performance Committee Chair Summary Report including matters for the attention of the Board and/or other Committees	After each meeting	Chair
Board	A summary of the results of the Committee's self-assessment	Annually	Chair

The Committee may also receive reports or presentations from other employees or external agencies as and when required or where relevant to the Committee's functioning. The standing reports include:

Report	Frequency	Responsibility
Finance and Performance Report	Each meeting	Chief Finance Officer
Finance and Activity Flash Report	Each meeting	Chief Finance Officer
Executive Performance on a Page Report	Each meeting	Chief Finance Officer
Update on the financial position and forecast (where available)	Each meeting	Chief Finance Officer
Review of Special Payments over \$5,000	Quarterly	Chief Finance Officer
Review of Gifts and Benefits Register	Quarterly	Executive Director, Corporate Affairs



Transformation and Digital Portfolio Overview	Quarterly	Executive Director, Strategy, Transformation and Major Capital
Detailed Report on one major Transformation and Digital Project	Quarterly	Executive Director, Strategy, Transformation and Major Capital
Capital Works and Infrastructure Report	Quarterly	Executive Director, Strategy, Transformation and Major Capital
Aboriginal and Torres Strait Islander KPI Report	Quarterly	Executive Director, Corporate Affairs
Update on Service Agreement Negotiations and Budget Setting Process	Annually (as required)	Chief Finance Officer and Chief Executive
Joint Regional Mental Health Plan Annual Progress Update	Annually	Executive Director, Mental Health and Specialist Services
Strategic Asset Maintenance Plan (SAMP)	Annually	Executive Director, Strategy, Transformation and Major Capital
Asset Management and Maintenance Plan (AMMP)	Annually	Executive Director, People and Operations

8. Membership

The Committee shall have at least three (3) members of the Board. All Committee members are to be appointed by the Board. The Board Chair is an ex-officio member of the Committee. Additional members can be considered by the Chair of the Committee and recommended to the Board for approval. Current Committee membership is outlined at **Appendix 2**.

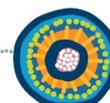
Chairperson

- The Chair will be appointed by the Gold Coast Hospital and Health Board.
- In the absence of the Chair, an alternate Board member may be nominated by the Chair of the Board until the Board appoints another Committee Chair or the existing Committee Chair returns.
- The Chair is responsible for ensuring that an induction process is undertaken for all new members.
- The Chair may delegate that the induction be performed by another Finance and Performance Committee member or the Secretariat.

Standing Invitees

The following persons (or a person acting that position) shall be invited to attend each meeting:

- Board Directors who are not a member of the Committee
- Chief Executive
- Chief Finance Officer
- General Manager, Surgical and Critical Care
- General Manager, Medicine
- General Manager, Emergency and Specialist Services



- Executive Director, Corporate Affairs
- Executive Director, Strategy, Transformation and Major Capital
- Executive Director, People and Operations
- Executive Director, Organisational Development.

While it is expected that the occupants of the abovementioned positions will be in attendance, where special circumstances prevent their attendance, appropriate staff can and should attend in their absence.

Proxies

Board Members are not permitted to appoint a proxy to attend the meeting on their behalf.

9. Committee Meetings and Processes

Quorum

The quorum for the Committee meetings will comprise of 50% of members, or if 50% is not a whole number, the next highest whole number, including the Chair. Ex-officio and external members should not be included in the count when determining the number needed for a quorum and they should not be counted when determining if a quorum is present.

Members participating in a meeting by use of technology, such as teleconferencing, are taken to be present at the meeting.³

If a quorum is not met, the following must occur:

- At the Chair's discretion, the continuation of the meeting will be decided.
- If the meeting proceeds, all decisions will be preliminary decisions and will then proceed to a quorum consensus out of session.

Frequency of Meetings

The Committee will meet monthly (except in January), and the schedule of meetings will be agreed in advance. The Chair may call additional meetings as required.

Secretariat

The Secretariat support function will be provided by the Corporate Affairs division. The role of the Secretariat is outlined in the Board Charter and includes the preparation of meeting papers and administrative support. The Secretariat will prepare and maintain a corporate file of the Committee's records.

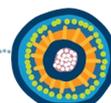
Files must be kept securely and confidentially in accordance with the requirements of the *Public Records Act 2002*. Records must also be retained in accordance with [Queensland Government's General Retention and Disposal Schedule for Administrative Records](#). In general, papers considered by the Committee are retained permanently.

Agenda

The agenda should be set allowing for appropriate consultation to include emerging issues and emphasis on the most significant risks and threats.

- Members wishing to place items on the agenda must notify the Secretariat at least fifteen (15) days prior to the scheduled meeting.
- The agenda must be cleared by the Chair prior to distribution to members.

³ HHB Act, Schedule 1, subsection 6(5)



- The agenda and relevant (supporting) papers will be sent out to all members four (4) days prior to the meeting.
- Late agenda items will be tabled at the discretion of the Chair.

Papers, Submissions and Reports

Papers in respect to agenda items are to be supplied to the Secretariat no later than ten (10) days prior to the scheduled meeting via email to gchhsboard@health.qld.gov.au.

- Papers must be submitted on the correct cover paper template, available from the Secretariat.
- All papers must be submitted in Word format (as per Committee cover paper template), unless otherwise agreed.
- The numbers and names of electronic attachments must mirror the numbers and names used in the cover paper.
- Papers are quality reviewed by the Secretariat and cleared by the Executive Director, Corporate Affairs prior to distribution to the Committee.

Minutes

- Minutes of meetings will be prepared by the Secretariat within five (5) days of the meeting.
- Minutes (and action items) must be cleared by the Chair within seven (7) days of the meeting, subject to confirmation by the Committee at the next meeting, prior to distribution to Members and other Board Directors.
- Minutes will be distributed to all Members and other board directors immediately, once cleared by the Chair.
- Minutes are included in the meeting papers, and are taken as draft until they are ratified at the next meeting of the Committee.
- Minutes should comply with the minuting guidelines as detailed in the Board Charter.

Urgent Out-of-Session Matters

Items can be managed out-of-session where the item is urgent and must be considered before the next scheduled meeting. Out-of-session matters must be minuted at the next meeting of the Committee. The Board Charter outlines the process for written resolutions of the Board and Board Committees.

10. Disclosures and Conflicts of Interest

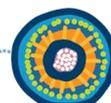
To meet the ethical obligations under the *Public Sector Ethics Act 1994*, members must declare any conflicts of interest, whether actual, potential, apparent, or likely to arise, and manage those in consultation with the Chair.

Committee members (and other attendees) must, at the start of the meeting, declare any conflicts of interest in relation to specific agenda items of Committee meetings whether actual, potential, or perceived. The Chair of the Committee must require the conflicted person to leave the room while the remaining members determine whether the conflicted person is entitled to attend the meeting for the discussion.

A Register of Interests will be maintained by the Secretariat.

11. Confidentiality

Members of the Committee may receive information that is regarded as 'commercial-in-confidence', subject to legal privilege, clinically confidential or have privacy implications. Members acknowledge their responsibility to maintain confidentiality of all information that is not in the public domain.



12. Committee Performance and Professional Development of Members

The Committee will review its performance on annual basis, including compliance (or otherwise) with the Charter, the results of which is to be provided to the Board. The Board may commission an external peer review of the Committee's performance at its discretion.

The Committee will be evaluated in terms of its performance against the approved Charter and the annual work plan through an annual self-assessment process (refer **Appendix 3**).

The Chair may provide Committee members with feedback on their contribution to the Committee's activities, and periodically arrange professional development for Committee members, as required.

13. Changes and/or Review of the Charter

The Charter may be altered following Committee consultation, endorsement by the Chair of the Committee, and approval by the Board. The Charter will be reviewed every two years or earlier if considered necessary.

This Gold Coast Hospital and Health Board Finance and Performance Committee Charter was formally approved by the Gold Coast Hospital and Health Board on 20 June 2023.



Signature

Ian Langdon OAM

Board Chair

Gold Coast Hospital and Health Board

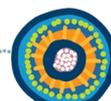


14. Document Control

Date	Nature of Amendment	Version
16 February 2021	Revised Charter to align with new branding template approved by the Board – refer HB21-02C1.	v3.0
12 August 2021	Amendment Committee membership as approved on 26 May 2021 by the Board – refer HB21-05C2.	v3.1
12 August 2021	Amendment to Invited Attendees in section 10 – Membership.	v3.2
12 August 2021	Amendment to the <i>Hospital and Health Boards Act 2011</i> to reflect changes current as at 30 April 2021, and review of all other legislation.	v3.3
12 August 2021	Amendment of Committee Workplan – Appendix 2.	v3.4
21 September 2021	Revised Charter approved by the Board – refer HB21-09C1.	v4.0
10 March 2022	Minor amendments to formatting following the annual review of the charter.	v4.1
19 April 2022	Revised Charter approved by the Board – refer HB22-04C1.	v5.0
10 February 2023	Revised Charter for Chair feedback.	v5.1
14 April 2023	Revised Charter endorsed by Committee for Board approval.	v5.2
20 June 2023	Revised Charter approved by the Board – refer HB23-06D2.	v6.0
18 July 2023	Membership update	v6.1
21 September 2023	Minor update to align changes to the Hospital and Health Boards Regulation 2023, effective 1 September 2023 (refer HB23-08F3) and addition of the Executive Director, Organisational Development as an invited attendee.	v6.2

Contact for enquiries and proposed changes:

Contact	Board and Executive Services
Phone	5687 0516 or 5687 0514
Email	gchhsboard@health.qld.gov.au



Appendix 1 – Example Committee Work Plan

The example annual work plan has been developed in line with the Committee’s responsibilities outlined in the Charter. Each year, the example work plan will form the basis of an Annual Committee Forward Planning and Reporting Calendar to be developed throughout the year to include additional discussion items as and when required.

This document will constantly be updated, and the below table is designed to give an indication only. The Committee does not meet in January.

Category: Recommendation to the Board (R), Noting (N), Feedback (F)

	Deliverable	Description	Owner	Category (R, N, F)	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
1	Review Committee Charter	Biennial Review of the Committee Charter with attached work plan	Secretariat	R					✓ (Next due: 2025)						
2	Committee Evaluation	Aligned to Board Committee and Board reviews	Secretariat	R					✓						
3	Forward meeting schedule and work plan	Review the following year’s meeting schedule and work plan	Secretariat	F										✓	
4	Finance and Performance Report	A monthly update on financial and performance outcomes for primary Service Agreement Key Performance Indicators	CFO	R	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
5	Finance and Activity Flash Report	A monthly overview of financial performance and activity	CFO	R	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
6	Executive Performance on a Page Report (PoP)	The PoP provides a regular update on financial and performance outcomes for Key Performance Indicators (KPIs) directly impacted by COVID-19	CFO	N	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓



	Deliverable	Description	Owner	Category (R, N, F)	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
7	Update on the financial position and forecast (where available)	A monthly update on year-to-date financial and QWAU position. The full-year financial forecast will also be presented as it is available	CFO	R	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
8	Review of Special Payments over \$5,000	An opportunity to review the Special Payments Register for the previous quarter	CFO	N	✓			✓			✓			✓	
9	Review of Gifts and Benefits Register	An opportunity to review the reportable gifts and benefits register for the previous quarter	EDCA	N	✓			✓			✓			✓	
10	Transformation and Digital Portfolio Overview	A quarterly consolidated overview of the significant change activities (excluding capital infrastructure) that Gold Coast Health is delivering within the Transformation and Digital portfolio	EDSTMC	N	✓			✓			✓			✓	
11	Detailed Report on one major Transformation and Digital Project	A detailed report into one of the transformation and digital initiatives	EDSTMC	N		✓			✓			✓			✓
12	Capital Works and Infrastructure Report	A quarterly progress update for major capital projects	EDSTMC & EDPO	N	✓			✓			✓			✓	
13	Aboriginal and Torres Strait Islander KPI Report	An update on the outcomes for Aboriginal and Torres Strait Islander Health for the previous quarter	EDCA	N	✓			✓			✓			✓	

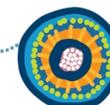


	Deliverable	Description	Owner	Category (R, N, F)	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
14	Update on Service Agreement Negotiations and Budget Setting Process	Updates on the planning and delivery of a balanced budget as well as negotiations with the Department of Health regarding the Service Agreement	CFO & CE	R	Budget setting and SLA negotiations (as available)			Prelim budget	Budget for endorsement						
15	Differential Cost of Service Delivery	A bi-annual analysis into the differential cost of service delivery between Gold Coast Health against other Hospital and Health Services	CFO	N			✓						✓		
16	Joint Regional Mental Health Plan	Annual update on the progress of the plan	EDMHSS	N								✓			
17	Strategic Asset Maintenance Plan (SAMP)	Endorsement of the annual submission to the Department of Health	EDSTMC	R								✓			
18	Asset Management and Maintenance Plan (AMMP)	Endorsement of the annual submission to the Department of Health	EDPO	R								✓			



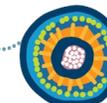
Appendix 2 – Membership as of 1 June 2023

Member	Committee Membership Type	Initial Board Appointment Date	Current Tenure Cessation Date
Ms Teresa Dyson	Chair and Member	18 May 2016	31 March 2026
Mr Ian Langdon OAM	Member	18 May 2012	31 March 2024
Mr Michael Kinnane ESM	Member	18 May 2018	31 March 2026
Mr Peter Dowling AM	Member	10 May 2021	31 March 2024
Prof Cindy Shannon AM	Member	18 May 2020	31 March 2024
Mr Lucas Patchett OAM	Member	18 May 2021	31 March 2026
Ms Colette McCool PSM	Member	29 June 2012	31 March 2024

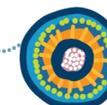


Appendix 3 – Finance and Performance Committee Self-Assessment Tool

	Strongly agree	Agree	Undecided	Disagree	Strongly disagree
Membership					
1. The size of the Committee is appropriate to the business and the responsibilities in the Charter.					
2. The Committee has an appropriate balance of skills, knowledge and experience.					
3. All members are financially literate and able to understand financial statements with at least one member with accounting or related financial expertise.					
Meetings					
4. The Committee meets regularly throughout the year and the number of meetings is appropriate for the business and the responsibilities of the Committee.					
5. Meeting agendas prioritise time spent on strategic and high-risk issues.					
6. There is sufficient member attendance at all meetings.					
7. The agenda and meeting papers are provided well in advance of meetings.					
8. Minutes are taken and appropriately circulated to members in a timely manner, and to the Board.					
9. The frequency, day and venue of the meetings are suitable.					



	Strongly agree	Agree	Undecided	Disagree	Strongly disagree
10. All members of the Committee have opportunities to participate during meetings.					
11. The Committee is run in a manner that allows for objectives to be achieved in a reasonable amount of time.					
Function					
12. The Committee has assessed the Service's budgets to ensure they are consistent with the organisational objectives.					
13. The Committee has monitored the financial and operating performance of the Service.					
14. The Committee has assessed financial risks and opportunities which may impact the financial performance of the organisation, and the management plans in place to mitigate risk.					
Governance					
15. Any potential, actual or perceived conflicts have been appropriately managed in line with agreed policies and processes.					
16. Senior staff are readily accessible to discuss confidential matters privately as required.					
17. The Committee reports its proceedings and recommendations to the Board after each committee meeting.					
Committee Charter (available here)					



	Strongly agree	Agree	Undecided	Disagree	Strongly disagree
18. Does the Committee Charter adequately describe the responsibilities, purpose and function of the Committee?					
19. The Committee is effective in achieving the stated purpose of the Committee.					
20. Are there additional areas the Committee should focus on in the future? If so, please list them below for consideration.					
21. Should any changes be recommended to the Charter in order to allow the Committee to better meet its intended purpose? Please list any suggested changes to the Charter below.					
<i>Other comments (please include any suggestions to improve the Committee's functioning, performance or processes)</i>					

