

Our board and management



The Gold Coast Health Board is appointed by the Governor in Council on the recommendation of the Minister for Health and Minister for Ambulance Services and derives its authority from the *Hospital and Health Boards Act 2011* and the *Hospital and Health Boards Regulation 2012*.

The Board provides governance of Gold Coast Health and is responsible for its quality of healthcare services, strategic direction, financial performance and strengthening community partnerships.

The Gold Coast Health Board is well placed to manage continual improvements, expected growth and increasing demand on the health service from the Gold Coast community and visitors. The Board has a range of functions including:

- setting the strategic direction and priorities for the operation of Gold Coast Health
- monitoring compliance and performance
- ensuring safety and quality systems are in place which are focused on the patient experience, quality outcomes, evidence-based practice, education and research
- developing targets, goals and standardised care plans to use public resources wisely
- ensuring risk management systems are in place and overseeing the operation of systems for compliance and risk management reporting to stakeholders
- establishing and maintaining effective systems to ensure that the health services meet the needs of the community within the resource envelope.

The Gold Coast Health Board consists of nine independent members, who bring a wealth of experience and knowledge in public, private and not-for-profit sectors, as well as a range of clinical, health and business experience.

2017–18 Gold Coast Health Board Directors



Mr Ian Langdon – Board Chair MBA, BComm, Dip Ed (Melb Uni), FCPA, FAIM

Appointed 18 May 2012. Current term 18 May 2016 to 17 May 2019.

Ian Langdon has extensive Board experience encompassing roles such as chair, audit committee chair and non-executive director with a wide range of companies in agribusiness, food production, marketing and health. Ian has held various academic positions including Associate Professor and Dean of Business at Griffith University (Gold Coast campus).

Ian is also the Chair of the Executive Committee.



Ms Teresa Dyson – Board Deputy Chair LLB(Hons), BA, MTax, MAppFin, CTA, GAICD

Appointed 18 May 2016. Current term 18 May 2016 to 17 May 2019.

Teresa Dyson has leadership and governance experience across the public and private sectors. Through her legal practice, Teresa has been closely involved in business issues affecting the financial services sector, transport services, infrastructure projects and the energy and resource industry.

Teresa is the Chair of the Finance and Performance Committee.



Mr Robert Buker FCA, AMIIA

Appointed 18 May 2016. Current term 18 May 2017 to 17 May 2021.

Robert Buker has more than 44 years expertise as a Chartered Accountant, with extensive experience delivering internal and external audit, accounting services, corporate governance, project management, as well as providing financial and management consulting.

Robert is the Chair of the Audit and Risk Committee.



Professor Helen Chenery BSpThy, MSpThy, PhD, GAICD, FQA

Appointed 18 May 2016. Current term 18 May 2017 to 17 May 2021.

Helen Chenery is Executive Dean of the Faculty of Health Sciences and Medicine at Bond University. She is a leading language and rehabilitation researcher with a particular interest in the application of digital technologies in healthcare. Helen also has extensive strategic and operational experience in executive leadership roles within the higher education and health sectors, and has led policy and practice reform in dementia care, health workforce and service design, and interprofessional education/practice.



Professor Allan Cripps AO, FAHMS, FAIMS, FASM, FIBMS (UK), AFACHSM

Appointed 29 June 2012. Retired 17 May 2018.

Allan Cripps has extensive experience in both health service provision and in health academe. Allan is currently a Research Professor in the School of Medicine at Griffith University and was previously the Foundation Pro Vice Chancellor of Health.

Allan is the Chair of the Research Committee.



Dr Cherrell Hirst AO, FTSE, MBBS, BEdSt, D.Univ (Hon)

Appointed 18 May 2014. Current term 18 May 2018 to 17 May 2021.

Cherrell Hirst practised medicine for 30 years in community health and paediatrics with a focus on the screening and diagnosis of breast cancer and support for women and families. Since 1990 Cherrell has been involved as a consultant and a non-executive director in a wide range of private and public entities in the health, education, insurance and biotechnology sectors and in various not-for-profit organisations. She was Chancellor of QUT from 1994–2004 and was named Queenslander of the Year in 1995.



Michael Kinnane ESM, FAICD, FAIM

Appointed 18 May 2018. Current term 18 May 2018 to 17 May 2019.

Michael has had an accomplished career as Director General of several Queensland government departments including emergency services for over 12 years and CEO of the Queensland ambulance service for five years. Michael is a strategic change leader who is community- and outcomes-focused with a record of achievements resulting in positive patient outcomes for the community.



Colette McCool PSM, MIM, BA, GAICD, FAICD

Appointed 29 June 2012. Current term 18 May 2018 to 17 May 2021.

Colette McCool has more than 25 years' experience as a senior executive in large and complex public sector organisations. She has held senior leadership positions across economic, cultural and social portfolios in State, Territory and Local Governments, in diverse functional areas such as community services and health, waste management and transport.

Colette is Chair of the Safety, Quality and Clinical Engagement Committee and a Director of the Gold Coast Hospital Foundation.



Professor Judy Searle BMBS, FRANZCOG, MD, GAICD

Appointed 18 May 2016. Current term 18 May 2017 to 17 May 2021.

Judy Searle started her career as a medical specialist before moving primarily into leadership and management positions in academia both in Australia and the UK. She continues to contribute to the health and education sectors as a non-executive board member and as an academic consultant, with particular focus on clinical service provision, academia, policy development, regulation and accreditation, board directorship and medico-politics.



Dr Andrew Weissenberger MBBS (Hons), FRACGP, GAICD

Appointed 7 September 2012. Current term 18 May 2018 to 17 May 2021.

Andrew Weissenberger began his career in hospitals, working at the Mater Hospital in Brisbane, before moving into community general practice in Brisbane and on the Gold Coast. Andrew has a keen interest in the training and education of both medical students and registrars, and is a Senior Lecturer with Griffith University. He is also actively involved as a surveyor for accreditation in general practice.

Improving transparency and governance

All committees of the Board abide by their approved terms of reference. Gold Coast Health values good corporate governance and seeks to adopt best practice.

A change in membership and Chair arrangements for the Board Committees was confirmed on 19 June 2018, however no further meetings were held within the reporting period. The memberships detailed below reflect the arrangements from 1 July 2017 to 19 June 2018.

Finance and Performance Committee

Chair: Teresa Dyson

Members: Robert Buker, Prof Helen Chenery, Prof Allan Cripps (until 17 May 2018)

The Finance and Performance Committee meets regularly to assist the Board in fulfilling its responsibilities to oversee Gold Coast Health's assets and resources. It has a range of functions required under the *Hospital and Health Boards Regulation 2012* Section 33, including reviewing and monitoring the financial performance of the health service in accordance with approved strategies, initiatives and goals.

Audit and Risk Committee

Chair: Robert Buker

Members: Teresa Dyson, Prof Helen Chenery, Colette McCool, Dr Cherrell Hirst

The Audit and Risk Committee is required under the *Hospital and Health Boards Act 2011 (Qld)* and under the *Financial and Performance Management Standard 2009*. The committee operates in accordance with Queensland Treasury's Audit Committee Guidelines and meets bi-monthly to oversee governance, risk and assurance processes. In alignment with the *Hospital and Health Boards Act 2011 (Qld)*, it is responsible for assessing the integrity of the service's financial statements, internal and external audit activities, risk management, and compliance with legal and regulatory requirements.

The Audit and Risk Committee also monitors the management of legal and compliance risks and internal compliance systems, including compliance with relevant laws and government policies.

Safety Quality and Clinical Engagement Committee

Chair: Colette McCool

Members: Dr Cherrell Hirst, Dr Andrew Weissenberger, Prof Judy Searle

The Safety Quality and Clinical Engagement Committee is prescribed by the *Hospital and Health Boards Act 2011 (Qld)* and advises the Board on matters relating to the safety and quality of healthcare provided, including the health service's strategies for the following:

- minimising preventable patient harm
- reducing unjustified variation in clinical care
- improving the experience of patients and carers in receiving health services and
- complying with national and state strategies, policies, agreements and standards relevant to promoting consultation about the provision of health services.

The Safety, Quality and Clinical Engagement Committee also monitors governance arrangements, policies and plans about safety and quality and promotes improvements in safety and quality.

Executive Committee

Chair: Ian Langdon

Members: Dr Cherrell Hirst, Teresa Dyson, Colette McCool, Dr Andrew Weissenberger

As set out in section 32B of the *Hospital and Health Boards Act 2011 (Qld)*, the Executive Committee supports the Board in progressing the delivery of strategic objectives for Gold Coast Health and by strengthening the relationship between the Board and the Chief Executive to ensure accountability in the delivery of services.

Research Committee

Chair: Prof Allan Cripps (until 17 May 2018)

Members: Prof Helen Chenery, Prof Judy Searle, Dr Andrew Weissenberger

The Research Committee advises the Board in relation to building long-term collaborations in research and enhancing clinical service delivery founded on sustainable and trusting partnerships. These research programs are facilitated by a shared collective vision with clear benefits to all parties which will help to position the Gold Coast Health and Knowledge Precinct as a world class health precinct of national and international significance.

Table 7: Board member attendance

Board member	Ian Langdon	Teresa Dyson	Robert Buker	Helen Chenery	Allan Cripps	Cherrell Hirst	Colette McCool	Judy Searle	Andrew Weissenberger	Michael Kinnane
Board	11/12	11/12	12/12	10/12	11/11	12/12	11/12	11/12	9/12	1/1
Executive	5/6	6/6	-	-	-	3/6	5/6	-	5/6	-
Finance and Performance	-	6/6	6/6	6/6	4/5	-	-	-	-	-
Audit and Risk	-	6/7	7/7	6/7	-	6/7	7/7	-	-	-
Safety Quality and Clinical Engagement	-	-	-	-	-	5/5	5/5	5/5	4/5	-
Research	-	-	-	4/5	5/5	-	-	5/5	4/5	-

Board remuneration

The Governor-in-Council approves the remuneration arrangements for Board Chairs, Deputy Chairs and members. The annual fees paid by Gold Coast Health are consistent with the remuneration procedures for part-time chairs and members of Queensland Government bodies and are reported on page 81. The reported fees may be impacted by Fringe Benefits Tax and other factors.

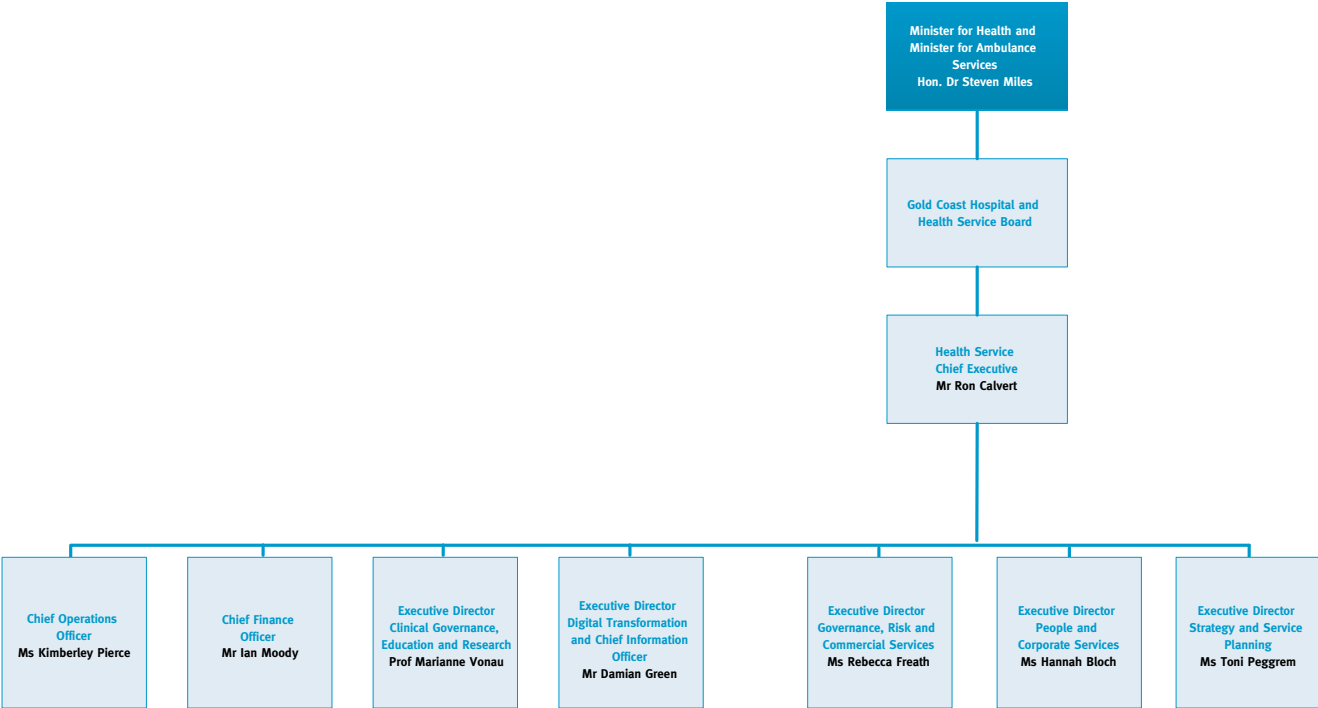
As research plays an integral role in the strategic direction of the organisation, the health service also recognises the Research Committee of the Board.

Several Board members were reimbursed for out of pocket expenses during 2017–18. The total value reimbursed was \$2426.

Gold Coast Health Organisational Structure as at 30 June 2018

Our management structure

Gold Coast Health has a two-tier management structure consisting of the Gold Coast Health Board and Executive Management. The Board supervises the performance of the health service, its management and organisation. It also participates in determining the strategy of Gold Coast Health. Executive Management, in turn, is responsible for the overall conduct of the business and all operational matters, organisation of the health service as well as allocation of resources, determination and implementation of strategies and policies, direction-setting and ensuring timely reporting and provision of information to the Board. The two bodies are separate, and no individual serves as a member of both.



Prepared by: Human Resource Services
August 2018

Varsity Lakes Day Hospital is a six-theatre, 24-bed day hospital which provides endoscopy, plastic surgery, orthopaedic surgery and ophthalmology surgical and support services, allowing for easy access to services for patients requiring day surgery.



VARSITY
LAKES
DAY
HOSPITAL



Queensland
Diagnostic
Imaging
Varsity Lakes

X-RAY • ULTRASOUND
CT • MRI • WOMEN'S IMAGING

Varsity Lakes Day Hospital



Queensland
Government

QML Pathology

Specialists in Private Pathology since the 1920s



Dr. Phil Allen
ORTHOPAEDIC SURGEON
55361177



HARTLEY 1300 HIP KNEE
Hip and Knee (1300 447 563)



**TEMPLE
GYM**



**BASEMENT
PARKING**

Our Executive Management Team



Chief Executive – Ron Calvert BSc (Hons), MBA

Ron commenced as Chief Executive of Gold Coast Health in 2012, bringing with him more than 20 years of health management skills and experience.

He has held Chief Executive roles at England's Doncaster and Bassetlaw National Health Service (NHS) Foundation Trust and Trafford Healthcare NHS Trust, where he introduced a quality regime that resulted in a significant reduction in mortality rates.



Chief Operations Officer – Kimberley Pierce BSc, ENB (Cardiology), CCRN, CertIV (ProjMgmt), GAICD

Kimberley joined Gold Coast Health in 2014 as Divisional Executive Director Diagnostic, Emergency and Medical Services (DEMS) and was appointed Chief Operations Officer in 2017. She has worked in South Africa as a clinical director of 22 private hospitals and was Chief Executive of private hospitals in London and Manchester.



Chief Finance Officer – Ian Moody BA (Hons), FCA, MAICD

Ian joined Gold Coast Health as the Executive Director, Finance and Business Services, in December 2013. With more than 15 years' experience in assurance and consulting in various commercial industries and government sectors, he has an extensive finance background working locally and in the United Kingdom and New Zealand.



Executive Director, Clinical Governance, Education and Research – Professor Marianne Vonau OAM, MBBS, MBA, MPH, FRACS, GAICD

Marianne was the first female neurosurgeon trained in Australia and the first female to be elected President of the Neurosurgical Society of Australasia. She commenced at Gold Coast Health in 2014, bringing with her a wealth of knowledge, skills and experience in neurosurgery, trauma, paediatrics and medical education.



Executive Director, Digital Transformation and Chief Information Officer – Damian Green CMQ, BEc (Hons), BA, AFACHSM, MHISA

Damian joined the Gold Coast Health executive team in January 2013 after 16 years as a consultant working with leaders of public sector organisations to facilitate service transformation through innovative human capital and information management and technology strategies.



Executive Director, Governance, Risk and Commercial Services – Rebecca Freath BBus, LLB, GradDip (LegPrac), GradDip (AppCorpGov), GAICD

Rebecca played a crucial role as a Senior Lawyer in transitioning Gold Coast Health into a statutory body through the introduction of best practice governance systems. She joined the executive team in her current role in 2014. Rebecca came to public health after a strong background in the commercial energy and resources sector.



Executive Director, People and Corporate Services – Hannah Bloch BBus(HRM), LLB

Hannah joined the executive team in September 2016 to oversee the human resources, communication and engagement functions following over 10 years working across Queensland Health. Hannah's role is critical to ensuring the Health Service has the right workforce with the right skills to meet future service delivery needs. She is focused on supporting the broader executive team to engage with staff and drive strategies to build a culture of success.



Executive Director, Strategy and Service Planning – Toni Peggrem BPTHy, BSc, MSc (Ed), GAICD

When Toni started at Gold Coast Health in 2006 she brought with her more than 15 years' experience in health service delivery and health administration. Toni played an integral role in the development, planning and delivery of the Robina Hospital expansion, Robina Health Precinct and Gold Coast University Hospital building projects.



Strategic committees

Executive Management Committees

Executive Management Team

The Executive Management Team is comprised of the Executive Directors, Clinical Directors, Directors of Nursing and the Professors of Nursing and Midwifery and Allied Health. Meetings are held monthly to consider matters of strategic importance and cross-divisional impact. In this forum, members of the executive provide information and advice to the Chief Executive and their colleagues to enable planning review and analysis. Each member holds responsibility for their divisional, financial, operational and clinical performance.

Clinical Governance Committee

The Clinical Governance Committee provides strategic direction and oversight of patient safety and quality systems to maintain and improve the reliability and quality of patient care, as well as improve patient outcomes. The committee is responsible for overseeing and setting standards of clinical governance within Gold Coast Health.

The committee monitors, evaluates and improves performance in clinical practice to ensure optimal patient safety and high care quality. This committee reports to the Board's Safety, Quality and Clinical Engagement Committee and has membership comprised of senior clinicians and managers across a number of disciplines including allied health, medicine, nursing and clinical governance.

Digital Portfolio Committee

The Digital Portfolio Committee adopts a strategic view of planning, performance and benefits realisation of Information Communication Technology (ICT) systems across Gold Coast Health. This committee has oversight of key strategic ICT risks and is responsible for ensuring that capacity, capability and solutions are planned, procured, designed, implemented and evaluated. The committee makes recommendations to the Health Service Chief Executive about investment decisions, including current systems and those planned as part of future expansion.

Work Health and Safety Management Committee

The Work Health and Safety Committee meets quarterly and provides a forum for multi-divisional consultation and dissemination of all safety and wellness related information. The committee monitors performance and make recommendations based on identified work health and safety risks to staff, patients and visitors.

Clinician Engagement

Clinical Council

Clinical Council is the peak clinical leadership forum within Gold Coast Health, empowered by the Board and Chief Executive. The objective of the Clinical Council is to facilitate authentic engagement of clinicians in health service planning, strategy development and other issues of clinical importance. The council provides advice to the Chief Executive and an opportunity to embed clinician feedback in governance, strategy and cultural development initiatives.

Research Council

The Research Council is the peak communication body for aligning and supporting long term collaborations in research across all clinical directorates and research active services. Members include representative of all Gold Coast Health divisions and workforce elements.

Important initiatives organised by the Research Council (in conjunction with the Office for Research Governance and Development) include research network evenings, the Research Showcase and the Research Grants Scheme.

Strategic Research Advisory Committee

Until early 2018, the Strategic Research Advisory Committee (SRAC) was a peak advisory body responsible for developing a sustainable research strategy that grows research capacity with local, national and international academic and corporate partnerships to build long lasting relationships. Members included experienced Gold Coast Health research staff, representatives from partnering universities and the Primary Health Network. The SRAC was instrumental in developing a submission to the NHMRC for an Advanced Health and Research Translation Centre and developed the first iteration of the Gold Coast Health Research Strategy.

Risk management and accountability

Gold Coast Health uses AS/NZS ISO 31000:2018 Risk Management Principles and Guidelines to guide and influence its approach to the management of risk.

Within a three lines-of-defence model, the health service's Risk Management Team utilises a four-pillar philosophy that guides the understanding that all risks:

- have multiple perspectives that should be considered as a part of their ongoing management
- are an opportunity to prevent adverse outcomes or encourage beneficial outcomes
- are identified from a logical connection to an objective, and
- require consistent and transparent communication for effective management.

The application of this philosophy is, and will be, seen through the implementation of the health service's Risk Management Framework, the content and delivery of risk management training and presentations, and through the day-to-day organisational efforts to improve and embed risk management as a central pillar of organisational culture.

Risk management is integral to effective strategic planning and decision making, in order for Gold Coast Health to achieve its vision of recognition as a 'centre of excellence for world class health care'.

To achieve this, the Board is committed to ensuring that Gold Coast Health:

- consistently strives for improvement in its risk management maturity, and seeks to adopt world's best practice management of risk
- takes a consistent approach to managing risks across the hospital and health service
- clearly defines roles and responsibilities
- provides all employees with the necessary training to allow them to undertake their risk management responsibilities
- holds management accountable for risk mitigation
- assigns necessary resources to support the risk management function
- promotes and encourages communication with our stakeholder community in relation to the identification and management of risks
- maintains honesty with ourselves and with others in relation to risk exposures and challenges faced with delivery of our service.

The identification of areas of significant risk is a key challenge for all organisations. Going forward,

Gold Coast Health will be utilising Key Risk Indicator reporting against its strategic risks, a program of systematic risk control self-assessments, together with existing periodic risk reviews and divisional level risk identification procedures to facilitate effective risk identification across the health service.

In addition, the Risk Management Team will undertake quarterly environmental reviews to identify any emerging risks that may affect the organisation.

Risk management activities and significant changes are regularly monitored and reported to the Board through the Audit and Risk Committee.

External scrutiny

In 2017-18, Parliamentary reports tabled by the Auditor-General which broadly considered the performance of Gold Coast Health included:

Report to Parliament 7: Health: 2016–17 results of financial audits.

The objective of this audit report was to summarise the results of the financial audits of the 16 hospital and health services which included timeliness and quality of financial reporting as well as financial performance and sustainability.

Report to Parliament 14: The National Disability Insurance Scheme

The objective of this audit was to assess how effectively the Queensland Government is managing the transition to the National Disability Insurance Scheme and how well prepared it is to oversee services after the transition. The audit included a focus on hospital and health service discharge processes for patients with a disability.

The recommendations contained in these reports to Parliament were considered and action was undertaken to address the issues and recommendations raised, where relevant and appropriate.

Maternity Services: The Office of the Health Ombudsman (OHO) Maternity Services Investigation Report was received in March 2018.

Beginning in 2014, the Office of the Health Ombudsman conducted a review into the quality of the Maternity Services provided at the Gold Coast University Hospital and its predecessor, the Gold Coast Hospital. The review included birthing outcomes, as well as clinical reviews undertaken in response to clinical incidents and the outcomes and recommendations undertaken to evaluate and improve maternity services.

Risk management and accountability (continued)

The OHO investigation undertook a benchmarking exercise of GCH Maternity Services against its Queensland Health peer Level 6 maternity services. From this benchmarking exercise it detailed that GCUH is performing strongly against the clinical indicators used to measure the safety and quality of a maternity service and that the GCUH not only has a safe maternity service but the best perinatal mortality in Queensland.

Accreditation

Glaring accreditation report for health service

Gold Coast Health received a glowing accreditation report from the National Safety and Quality Health Service Standards, EQUIP National Standards and National Standards Mental Health.

The organisation-wide survey was conducted in November 2017, involving 10 surveyors spending a week inspecting Gold Coast Health facilities.

Gold Coast Health achieved three 'met with merit' ratings for the following:

- quality improvement activities undertaken to prevent falls and minimise patient harm
- the management of patient-centred nutritional care
- the Organ and Tissue Donation service.

The report noted Gold Coast Health was balancing performance improvement to become a world class health service, while meeting extraordinary increased service demands. It stated that there is evidence of a strong culture of improvement at Gold Coast Health.

Internal audit

Gold Coast Health has established an internal audit function in accordance with section 29 of the *Financial and Performance Management Standard 2009*.

The organisation's internal audit unit, staffed by the Director, Assurance and Advisory Services and an assurance officer, co-sources its internal audit activity with numerous professional services firms and subject matter experts.

The internal audit function provides the Audit and Risk Committee and the Board with independent and objective assurance on the adequacy and effectiveness of systems of risk management, internal control and governance in key risk areas by:

- reviewing and appraising the adequacy and effectiveness of financial and operational controls
- ascertaining compliance with established policies, procedures and statutory requirements
- ascertaining that assets are accounted for and safeguarded from loss
- identifying opportunities to improve business processes and recommending improvements to existing systems of internal control
- conducting investigations and special reviews requested by management and/or the Audit and Risk Committee.

The internal audit function operates within the Institute of Internal Auditors Professional Practice Framework and as such is independent of management under a charter approved by the Gold Coast Hospital and Health Board's Audit and Risk Committee.

The focus areas for audits conducted in earlier years were patient safety, financial controls, record management controls, workplace health and safety, mental health legislative changes.

In 2017-2018, the internal audit function achieved the following:

- enhanced the linkages to other governance, risk and compliance (GRC) functions to improve the overall assurance provided to the board
- the finalisation of 12 audits in key risk and control areas and the provision of recommendations for improvement to address these risks impacting the health service's ability to achieve its objectives and meet its obligations
- enhanced the identification, detection and management of fraud risk within the Hospital and Health Service
- enhanced the assurance map developed from the prior year to better link with other GRC functions; and
- the internal audit function was externally assessed by the Institute of Internal Auditors and was recognised as a high performing and optimised audit service.

Core strategies of information systems and record keeping

The health service continues to make significant strides on its journey towards becoming a world class digital healthcare provider with an emphasis on patient safety and experience. In 2017–18, the health service launched a new five-year digital strategy with four key focus areas. These include:

- Leveraging digital solutions and capabilities to provide patient focused, reliable and integrated healthcare
- Investing in digital solutions and technologies to support innovation, research and learning
- Developing and supporting a digitally-enabled workforce
- Establishing digital information and technology foundations to support delivery and achievement of digital priorities.

Digital, information and cyber strategies continue to be refreshed and/or created to align with standards and practices at a state, federal and global level.

Achievements in 2017–18 included:

- Developing and launching a new five-year digital strategy for the Gold Coast Health
- Establishing a clinical informatics directorate to support clinicians adopt and use digital technologies within their clinical workflow
- Establishing a digital engagement function to support clinical teams develop and implement innovative digital solutions
- Reforming ICT governance processes to support delivery of the digital transformation agenda
- Funding and launching the Digital Healthcare Program to implement a new Integrated Electronic Medical Record and other technologies across all campuses in 2018.

Hospital and Health Board Act 2011 disclosures

In accordance with section 160 of the *Hospital and Health Boards Act 2011*, Gold Coast Health is required to include a statement in its Annual Report detailing the disclosure of confidential information in the public interest. There were no disclosures under this provision during 2017–18.

Public interest disclosure

Statutory Compliance and Conduct

Statutory Compliance and Conduct (SCC) is integrated into the Human Resource Services Department within Gold Coast Health and is the central point for receiving, assessing, reporting and managing allegations of suspected corrupt conduct as defined under the *Crime and Corruption Act 2001* and public interest disclosures as defined under the *Public Interest Disclosure Act 2010*.

SCC enables the Chief Executive of the health service to fulfil a statutory obligation to report public interest disclosures to the Queensland Ombudsman and allegations of suspected corrupt conduct to the Crime and Corruption Commission. Allegations referred back to Gold Coast Health by the commission are managed or monitored by the Statutory Compliance and Conduct Officer.

SCC productivity outputs for the 2017–18 review periods include:

- assessed, managed and reported a total of 140 complaint matters with multiple allegations. Of these complaints 65 were assessed as suspected corrupt conduct and reported or managed on behalf of the Crime and Corruption Commission. The other 75 complaints were assessed as possible Code of Conduct breaches.
- assessed and managed 68 public interest disclosure (PID) matters and reported 45 of these PID matters to the Queensland Ombudsman Office.
- delivered 2 specialised coaching sessions to staff encompassing Orientation, Ethics, Integrity and Accountability, Corrupt Conduct, Public Interest Disclosures and Fraud Awareness.

Digital Healthcare Program

Gold Coast Health embraces the implementation of digital care solutions to promote patient focused, reliable and integrated healthcare. Many initiatives have been adopted in 2017-18 under the Digital Healthcare Program.

Integrated Electronic Medical Record (ieMR)

The Board has approved the Health Service's inclusion in the statewide implementation of the integrated electronic medical record (ieMR), as initiated by eHealth Queensland. This digital hospital solution will be the key technology platform to improve patient focused and integrated healthcare. In April 2019, this \$40 million program of work will be implemented across Gold Coast University Hospital, Robina Hospital, Varsity Day Hospital, and community health centres.

Building on the existing electronic medical record, the ieMR supports a patient-centric model of care through improved access and sharing of accurate and timely patient information between treating teams across multiple clinical settings. Decision support tools such as order sets, prompts and alerts will support clinicians to determine the best care needed at the most appropriate time.

The implementation of ieMR aligns with:

- Australia's National Digital Health Strategy
- Keeping Queenslanders Healthy (Our Future State: Advancing Queensland's Priorities)
- Digital Health Strategic Vision for Queensland 2026
- Gold Coast Health Strategic Plan (2016-2020)
- Gold Coast Health Digital Strategy (2018-2021)

Integrated medical devices will also be rolled out, allowing automatic upload of patient vital signs, observations and clinical measurements to the patient's electronic medical record.

The advanced capabilities available in the ieMR will benefit patients, families, staff, and medical partners.

Rapid Access Workstation Service (RAWS)

There are numerous clinical systems that support the coordination of care, often requiring multiple logins for clinical staff to access patient records. The RAWS project has introduced tap-on technology supporting single sign-on to clinical systems. This streamlined login process enables clinicians to access patient information almost instantly from multiple workstations across the hospital, increasing productivity and allowing more time for patient care.

The health service has welcomed the addition of the RAWS into their daily workings, with over 80 per cent of hospital staff utilising the single sign-on option (as at June 2018).

Clinical records will continue to be effectively managed in accordance with the *Health Sector (Clinical Records) Retention and Disposal Schedule 2012* and other relevant legislation, policies and procedures.

Future Focus 2018-2019

The Digital Healthcare Program will continue to prepare for ieMR implementation during 2018-2019, focusing on:

- developing safe and quality-centric patient workflows
- uplifting infrastructure and devices to host increased digital recording
- training and educating staff to be proficient in the new functionality
- ensuring successful transition to business as usual operations.

Ensuring an ethical culture

Ethical decision-making in the Queensland Public Sector (QPS) affects everyone, across a wide range of positions and roles. Gold Coast Health employees, administrative procedures and management practices must comply with the Code of Conduct for the Queensland Public Service. The Code articulates the standard of conduct expected of staff when dealing with patients, consumers and colleagues in the workplace. It also helps to ensure that decision making is consistent with the principles of *Public Sector Ethics Act 1994 (Qld)*. These consist of:

- Integrity and impartiality
- Promoting the public good
- Commitment to the system of government
- Accountability and transparency.

Our values are included for new staff at induction and embedded within employee role descriptions and performance reviews for current staff. The Code of Conduct is available to all existing staff through the Gold Coast Health intranet site. An online learning system allows staff to independently access mandatory training, including training on ethics, integrity, accountability, fraud control awareness and public interest disclosure.

“I thought the wall art was beautiful and it made me happy and I felt really comfortable. It’s great that the hospital has an understanding of Aboriginal culture.”

– Quandamooka woman and Gold Coast mum Emily Webb, the first Aboriginal woman to use the culturally appropriate birth suite when she gave birth to her son Ned on 8 July 2017.

Open data

The Queensland Government’s Open Data Initiative aims to make a range of public service data available for members of the public to access through www.qld.gov.au/data

The open data website publishes data on:

- expenditure on consultancies
- expenditure on staff overseas travel and the reasons for travel
- use of interpreter services available under the Queensland Language Services Policy.