

Purpose	<p>The purpose of the ACT CSGC is to provide governance, insights, recommendations and advice from a clinical perspective to the ACT health system and to ensure safe, effective, person-centred health care is consistently delivered across the whole of the ACT healthcare system.</p> <p>The CSGC will be the ACT health system's peak clinical committee to provide independent guidance, expert advice, recommendations and insights to services that provide clinical health care across the ACT, the ACT Health Directorate and Ministers for Health, Mental Health, Justice Health, and Emergency Services Agency Commissioner.</p>
Role	<p>Clinical Governance is the integrated systems, processes, leadership and culture that is the foundation of which we will build upon to see the improvement of safety and quality of public health care, reduce harm, improve patient experience and ensure the care that the community receives is evidence based and reliable.</p> <p>The role of the CSGC is to strengthen clinical system governance and monitor trends in clinical outcomes in relation to strategic direction, service development and collaboration across the ACT public health system; and to provide advice on options for system performance improvement.</p>
Values an Behaviours	<p>This committee will provide expert clinical leadership to the ACT health system. The advice provided by this committee is to be seen to be the most influential clinical advice within the ACT health system. It is important that the significance of this responsibility and accountability is reflected in the advice provided.</p> <p>Participation and engagement in the CSGC will reflect public sector values and the commitment to collaborate within strong governance frameworks.</p> <p>Members will act in the best interests of consumers and the wider ACT region.</p> <p>Members will demonstrate the values and behaviours of the ACT Health Directorate:</p> <p>Respect</p> <ul style="list-style-type: none"> Members will engage in genuine and respectful dialogue with colleagues across the ACT Public Service, the Health System, and the community. <p>Integrity</p> <ul style="list-style-type: none"> Members should consider their view and responses from a system – wide perspective while aiming towards being solutions-focused in addressing systems issues. Ensure accountable, evidenced-based and transparent decision-making. <p>Collaboration</p> <ul style="list-style-type: none"> Members will promote open sharing of information to improve the delivery of services, to enable good governance, quality and accurate reporting, and the development of evidence-based policies and programs. <p>Innovation</p> <ul style="list-style-type: none"> Members will be committed to innovative improvement of systems and

	services to achieve safe and effective person and family-centred care.
Functions	<p>The ACT CSGC functions to facilitate the domains of Clinical System Governance, which include the key principles that support the clinical governance framework.</p> <p>These include:</p> <ul style="list-style-type: none"> ○ Leadership, engagement and coordination on issues of system wide clinical governance ○ Leadership and oversight of system wide clinical networks ○ Promotion of a positive culture of knowledge and information sharing ○ Demonstrate partnership working with the whole system including consumers and carers. ○ Reviewing trend data and shared knowledge from across the system to identify unwarranted variation in care and great practice. ○ Provide insights to Government or the system as to actions to be taken to reduce safety risks and improve quality of care. ○ To contribute to health care reform thinking such as the development of ACT model for Value Based Healthcare, Patient Reported Outcome Measures, Patient Reported Experience Measures and in response to requests from the ACT Health System Partnership or ACTHD. ○ Convene all stakeholders through bi-annual Health Forums ○ Communicate with the system about activities of the Committee. ○ The development of a forward agenda and work plan to maximise efficiency and effectiveness that promotes best practice governance.
Reporting	The CSGC will report to the ACT Health Director General.
Agenda requests	<p>The Secretariat is to receive requests for agenda items two weeks before the meeting unless otherwise advised.</p> <p>Papers are to be distributed one week before the meeting.</p>
Meeting Frequency	<p>To be determined</p> <ul style="list-style-type: none"> ○ Monthly for the first 3 months ○ Meeting frequency will be reviewed after 3 months and annually thereafter by the committee with the view to considering optimal meeting frequency moving forward.
Secretariat	<p>A representative from the Office of Chief Medical Officer provides secretariat support by:</p> <ul style="list-style-type: none"> ○ supporting the committee by developing the agenda, preparing and distributing meeting packs, and recording and preparing minutes of CSGC meetings. ○ update, manage or log any potential conflicts of interest. ○ ensure decisions or recommendations are accurately documented. ○ prepare briefing papers or reports on behalf of the committee.
Out-of-sessions resolutions	When an issue arises that, in the opinion of the Chair, requires resolution before the next scheduled meeting, the Chair may seek an out-of-session resolution.
Quorum	<p>The quorum at meetings is attendance by 75% of members.</p> <p>In the event of a quorum is not achieved, a decision to continue with the meeting will be made by the Chair. The meeting may proceed with resolutions held over until a quorum is achieved.</p> <p>Alternates, excluding persons formally acting in positions that attract Committee membership, are to be considered and approved by the Chair prior to a meeting.</p> <p>The Chair will be informed of the substitution at least two working days prior to the scheduled nominated meeting. In the case of unexpected absences,</p>

	<p>notification is to be provided to the Chair as soon as practicable.</p> <p>The nominated alternate shall exercise the authority of the member while present. It is the responsibility of the member to brief the alternate prior to the meeting, and the responsibility of the alternate to brief the member afterwards. Any position provided by the alternate will be taken to be the position of the substantive member.</p> <p>All substantive members must nominate an alternate/proxy.</p>
Confidentiality	<p>All members are required to sign a confidentiality agreement on commencement of their term of appointment.</p> <p>Members are not to reveal any confidential or proprietary information entrusted during their membership of this committee. The role of the CSGC does not include sharing confidential information received in their capacity as CSGC members (including points of discussion, supporting documents or drafts), with the sector on behalf of ACT Health or government.</p> <p>Unless stated, all papers and discussions/presentations are confidential.</p>
Conflict of Interest	<p>A conflict of interest will arise if a person's personal interest (actual or perceived) conflict with their duties as a CSGC member such that the person may not be independent, objective and impartial in relation to their duties. All conflicts of interest will be declared as part of the membership documentation, and where appropriate for additional circumstances in any given meeting.</p> <p>Where a potential conflict of interest has been declared, the member will be guided by the Chair on how best to proceed (including member removing themselves for discussion on specific items) and advise the meeting accordingly. A formal declaration will be completed and signed along with documented action taken by the Chair.</p> <p>The CSGC is politically neutral, and its members cannot endorse politically focused advocacy.</p>
Remuneration	<p>Consumer, community members and clinicians not employed in any capacity by health services and agencies will be eligible for remuneration for attending CSGC and working group meetings.</p> <p>The Chair will review and approve all remuneration requests in line with appropriate government policy.</p>
TOR Review Frequency	The first review will occur within the first 9 months, then annually thereafter.
Approved	July 2023