The following corporate governance attestation statement was endorsed by a resolution of the Bureau of Health Information Board at its meeting on 27 September 2013.

The Board is responsible for the corporate governance practices of the Bureau of Health Information. This statement sets out the main corporate governance practices in operation within the Bureau for the 2012–2013 financial year.

A signed copy of this statement has been provided to the NSW Ministry of Health.

Signed:

Professor Bruce Armstrong AM
Chairperson Date: 27 September 2013

Dr Jean-Frédéric Lévesque
Chief Executive Date: 27 September 2013
Establish robust governance and oversight frameworks

Role and function of the Board

The Board of the Bureau of Health Information (the Board) carries out its functions, responsibilities and obligations in accordance with the Health Services Act 1997 and the determination of function for the Bureau as approved by the Minister for Health.

Board has in place practices that ensure that the primary governing responsibilities of the Board are fulfilled in relation to:

A Ensuring clinical and corporate governance responsibilities are clearly allocated and understood

B Setting the strategic direction for the Bureau and its services

C Monitoring financial and service delivery performance

D Maintaining high standards of professional and ethical conduct

E Involving stakeholders in decisions that affect them

F Establishing sound audit and risk management practices.

Board meetings

For the 2012–2013 financial year, the Board consisted of a Chair and five members appointed by the Minister for Health, and the Chief Executive Officer as an ex-officio member. The Board met six times during this period.

Authority and role of senior management

All financial and administrative authorities have been delegated by a formal resolution of the Board and are formally documented within a Delegations Manual for the Bureau.

The roles and responsibilities of the Chief Executive and other senior management within the Bureau are also documented in written position descriptions.

Regulatory responsibilities and compliance

The Board is responsible for and has mechanisms in place to ensure that relevant legislation and regulations are adhered to within all facilities and units of the Bureau, including statutory reporting requirements.

The Board also has a mechanism in place to gain reasonable assurance that the Bureau complies with the requirements of all relevant government policies and NSW Health policy directives and policy and procedure manuals as issued by the Ministry of Health.
A Ensuring clinical and corporate governance responsibilities are clearly allocated and understood

This is not applicable to the Bureau as the organisation does not deliver health services, nor employs any registered health professional and as such does not report on any healthcare services or instances of healthcare professional misconduct.

B Setting the strategic direction for the Bureau and its services

The Board has in place strategic plans for the effective planning and delivery of its services to the communities and individuals served by the Bureau. This planning process includes setting strategic directions for the Bureau and for the services it provides.

Organisation-wide planning processes and documentation is also in place, with a three to five year horizon, covering:

- Asset management
- Information management and technology
- Research and teaching
- Workforce development.
Monitoring financial and service delivery performance

Role of the Board in relation to financial management and service delivery

The Board is responsible for ensuring compliance with the NSW Health Accounts and Audit Determination and the annual Ministry of Health budget allocation advice.

The Board is also responsible for ensuring that the financial and performance reports it receives and those submitted to its Finance and Performance Committee and the Ministry of Health are accurate and that relevant internal controls for the Bureau are in place. To this end, the Board certifies that:

• The financial reports submitted to the Finance and Performance Committee and the Ministry of Health represent a true and fair view, in all material respects, of the Bureau’s financial condition and the operational results are in accordance with the relevant accounting standards.

• The recurrent budget allocations in the Ministry of Health’s financial year advice reconcile to those allocations distributed to organisation units and cost centres.

• Overall financial performance is monitored and reported to the Finance and Performance Committee of the Bureau.

• Information reported in the Ministry of Health monthly reports reconciles to and is consistent with reports to the Finance and Performance Committee.

• All relevant financial controls are in place.

• Creditor levels comply with Ministry of Health requirements.

• Write-offs of debtors have been approved by duly authorised delegated officers.

• The Public Health Organisation General Fund has not exceeded the Ministry of Health approved net cost of services allocation.

• The Bureau did not incur any unfunded liabilities during the financial year.

• The Manager, Corporate Services and Chief Finance Officer have reviewed the internal liquidity management controls and practices and they comply with Ministry of Health requirements.

The Internal Auditor has reviewed the above during the financial year.
Service and performance agreements

A written service agreement in the form of a Service Compact was in place during the financial year between the Board and the Director-General, NSW Health, and performance agreements between the Board and the Chief Executive, and the Chief Executive and all Health Executive Service Members employed within the Bureau.

The Board has mechanisms in place to monitor the progress of matters contained within the Service Agreement and to regularly review performance against agreements between the Board and the Chief Executive.

The Finance and Performance Committee

The Board has established a Finance and Performance Committee to assist the Board and the Chief Executive ensure that the operating funds, capital works funds and service outputs required of the Bureau are being managed in an appropriate and efficient manner.

The Finance and Performance Committee is chaired by Professor Bruce Armstrong AM, Chairperson of the Board and comprises all members of the Board. The Chief Executive attends all meetings of the Finance and Performance Committee unless on approved leave.

The Finance and Performance Committee receives bi-monthly reports that include:

- Financial performance of each major cost centre
- Liquidity performance
- Activity performance against indicators and targets in the performance agreement for the Bureau
- Advice on the achievement of strategic priorities identified in the performance agreement for the Bureau

Letters to management from the Auditor-General, Minister for Health, and the NSW Ministry of Health relating to significant financial and performance matters are also tabled at the Finance and Performance Committee.
Maintaining high standards of professional and ethical conduct

The Bureau has adopted the NSW Health Code of Conduct to guide all staff and contractors in ethical conduct.

The Code of Conduct is distributed to all new staff and is included on the agenda of all staff induction programs. The Board has systems and processes in place to ensure the Code is periodically reinforced for all existing staff. Ethics education is also part of the Bureau's learning and development strategy.

The Chief Executive, as the principal officer for the Bureau, has reported all known cases of corrupt conduct, where there is a reasonable belief that corrupt conduct has occurred, to the Independent Commission Against Corruption, and has provided a copy of those reports to the Ministry of Health. In this period, there were no known cases.

Policies and procedures are in place to facilitate the reporting and management of public interest disclosures within the Bureau in accordance with state policy and legislation, including establishing reporting channels and evaluating the management of disclosures.
Involving stakeholders in decisions that affect them

The Bureau engages with stakeholders to ensure its work is informed, collaborative and accurate. Prior to the release of each report, the Bureau informs key stakeholders about the findings and estimated dates of release of the reports.

The community, including stakeholders, can readily access public information relating to the Bureau’s performance reports and activities including research on its website www.bhi.nsw.gov.au

Stakeholder activity in 2012-13 included:

- Reports – the Bureau receives comments from peer reviewers and data custodians, and incorporates feedback that it deems useful to improving relevance, accuracy, comparability and interpretability of its reports.

- Committees – the Bureau invites participation from Local Health Districts, the NSW Ministry of Health, Pillars and research institutions on its Strategic Advisory Committees and Implementation Advisory Committees. These groups are set up as needed to consult and support the Bureau’s reports and work plans. The Bureau also contributes expert advice to other organisations.

- Workshops – the Bureau held two workshops to understand the information needs and priorities of stakeholders regarding the NSW Patient Survey Program. The first workshop was attended by 70 healthcare professionals, clinicians, healthcare managers, consumers and health research institutes. This was followed by a workshop held specifically for consumers.

- Presentations and conferences – the Bureau’s staff, in particular the Chief Executive, presented to a wide variety of audiences in the healthcare sector, attending conferences, meetings and visits to Local Health Districts.

- Online and media – the Bureau ensures that all information is made publicly available. All reports and supporting material is available on the Bureau’s website. Interviews are proactively sought in print, radio and TV media to assist informing the community about the Bureau’s findings.

In 2012-13 the Bureau commenced a Stakeholder Analysis and Engagement Framework to further develop its relationships.
Establishing sound audit and risk management practices

Role of the Board in relation to audit and risk management

The Board is responsible for supervising and monitoring risk management by the Bureau and its facilities and units, including the Bureau’s system of internal control. The Board receives and considers all reports of the External and Internal Auditors for the Bureau and, through the Audit and Risk Management Committee, ensures that audit recommendations and recommendations from related external review bodies are implemented.

The Bureau has a current Risk Management Plan. The Plan covers all known risk areas including:

- Leadership and management
- Finance (including fraud prevention)
- Information Management
- Workforce
- Security and safety
- Facilities and asset management
- Emergency and disaster planning
- Community expectations.

Audit and Risk Management Committee

The Board has established an Audit and Risk Management Committee, with the following core responsibilities:

- To assess and enhance the Bureau’s corporate governance, including its systems of internal control, ethical conduct and probity, risk management, management information and internal audit
- To ensure that appropriate procedures and controls are in place to provide reliability in the Bureau’s financial reporting, safeguarding of assets, and compliance with the Bureau’s responsibilities, regulatory requirements, policies and procedures
- To oversee and enhance the quality and effectiveness of the Bureau’s internal audit function, providing a structured reporting line for the Internal Auditor and facilitating the maintenance of their independence
- Through the internal audit function, to assist the Board to deliver the Bureau’s outputs efficiently, effectively and economically, so as to obtain best value for money and to optimise organisational performance in terms of quality, quantity and timeliness; and
• To maintain a strong and candid relationship with external auditors, facilitating to the extent practicable, an integrated internal/external audit process that optimises benefits to the Bureau.

The Audit and Risk Management Committee comprises three members, including two persons who are not employees of, or contracted to, provide services to the Bureau.

The Chairperson of the Audit and Risk Management Committee in 2012-13 was Mr Allan Cook who is the independent chair of the committee. The other members of the committee were Ms Gerry Brus (independent member), Mrs Liz Rummery AM (Board member) and the Bureau’s Chief Executive Officer. The Audit and Risk Management Committee met on seven occasions during the financial year.

The Chairperson of the committee has right of access to the Director-General of the NSW Ministry of Health.