

Corporate Governance Attestation Statement

BUREAU OF HEALTH INFORMATION

1 July 2021 to 30 June 2022

**CORPORATE GOVERNANCE ATTESTATION STATEMENT
BUREAU OF HEALTH INFORMATION**

The following corporate governance attestation statement was reviewed by the Audit and Risk Management Committee and endorsed by a resolution of the Board of the Bureau of Health Information (BHI) at its meeting on 28 July 2022.

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 organisation for the 2021-22 financial year.

A signed copy of this statement is provided as required to the Ministry of Health by 31 August 2022.

Signed:



Professor Carol Pollock AO
Chair

Date 28 July 2022



Dr Diane Watson
Chief Executive

Date 28 July 2022

STANDARD 1: ESTABLISH ROBUST GOVERNANCE AND OVERSIGHT FRAMEWORKS

Role and function of the Board

The Board carries out their functions, responsibilities and obligations in accordance with the *Health Services Act 1997*, *Government Sector Employment Act 2013*, and the determination of function for the organisation as approved by the Minister for Health.

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

- Ensuring corporate governance responsibilities are clearly allocated and understood
- Setting the strategic direction for the organisation and its services
- Monitoring financial and service delivery performance
- Maintaining high standards of professional and ethical conduct
- Involving stakeholders in decisions that affect them
- Establishing sound audit and risk management practices.

Board Meetings

For the 2021-22 financial year the Board consisted of six members until 31 August 2021, and then seven members from 29 November 2022 including the Chair. Six members were appointed by the Minister for Health, and the seventh member being the Chief Executive is an ex-officio member.

The following Board members concluded their tenure during the period:

Professor Louisa Jorm on 31 August 2021

Associate Professor Megan Passey on 31 August 2021

Professor Adam Elshaug on 31 August 2021

New appointments were made by the Minister as follows:

Katherine Boiciuc from 18 October 2021

Professor Sallie Pearson from 18 October 2021

Dr Karen Luxford from 18 October 2021

Professor Adam Elshaug from 29 November 2021

The Board held four meetings during this period and meeting attendance is summarised below.

| Board Member | Position | 30/08/2021 | 3/12/2021 | 18/02/2022 | 26/05/2022 |
|----------------------------|--------------|------------|-----------|------------|------------|
| Professor Carol Pollock AO | Board Chair | Y | Y | Y | Y |
| Mr Ian Gillespie | Board member | Y | Y | Y | Y |
| Professor Adam Elshaug | Board member | Y | Y | Y | Y |
| Associate Professor Louisa | Deputy Chair | Y | N/A | N/A | N/A |

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|----------------------------------|----------------|-----|-----|-----|-----|
| Jorm | | | | | |
| Associate Professor Megan Passey | Board member | Y | N/A | N/A | N/A |
| Dr Karen Luxford | Board member | N/A | Y | Y | Y |
| Professor Sallie Pearson | Board member | N/A | Y | Y | Y |
| Katherine Boiciuc | Board member | N/A | Y | Y | Y |
| Dr Diane Watson | Ex officio, CE | Y | Y | Y | Y |

Authority and role of senior management

All financial and administrative authorities that have been delegated by a formal resolution of the Board and are formally documented within the organisation's Delegations Manual.

The roles and responsibilities of the Chief Executive and other senior management 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 across the organisation , including statutory reporting requirements.

The Board also has a mechanism in place to gain reasonable assurance that BHI 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.

STANDARD 2: ENSURING CLINICAL RESPONSIBILITIES ARE CLEARLY ALLOCATED AND UNDERSTOOD

The Bureau of Health Information does not provide clinical services.

STANDARD 3: SETTING THE STRATEGIC DIRECTION FOR THE ORGANISATION 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 organisation. This process includes setting a strategic direction in a 3- to 5-year strategic plan for both the organisation and the services it provides within the overarching goals of the 2021/22 NSW Health Strategic Priorities.

Entity-wide planning processes and documentation is also in place, covering:

- Detailed plans linked to the Strategic Plan for the following:
 - Reports and Surveys
 - Information management and technology – including data governance and digital strategy implementation
 - Workforce management – through a Workforce Action Plan focused on supporting and developing our workforce
- Corporate Governance Plan

STANDARD 4: 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 the Finance and Performance Committee and the Ministry of Health are accurate and that relevant internal controls are in place.

To this end, the Board certifies that:

- The financial reports submitted to the Finance & Performance Committee and the Ministry of Health represent a true and fair view, in all material respects, of BHI'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 units and cost centres
- Overall financial performance is monitored and reported to the Finance and Performance Committee
- 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
- Write-offs of debtors have been approved by duly authorised delegated officers.

Service and Performance

A written Performance Agreement was in place during the financial year between the Board, the Chief Executive and the Secretary, NSW Health, and the Board is aware there is a performance agreement between the Chair and the Chief Executive which incorporates advice from all Board members. In turn, the Chief Executive has performance agreements between herself and her senior management team.

The Board has mechanisms in place to monitor the progress of matters contained within the Performance Agreement and to regularly review performance against agreements between the Secretary of NSW Health, 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 to ensure that the operating funds, capital works funds, resource utilisation and service outputs are being managed in an appropriate and efficient manner.

The Finance and Performance Committee receives regular reports that include:

- Financial performance of each major cost centre
- Subsidy availability
- The position of Restricted Financial Asset and Trust Funds if relevant
- Activity performance against indicators and targets in the organisation's performance agreement
- Advice on the achievement of strategic priorities identified in the organisation's performance agreement

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- Year to date and end of year projections on capital works and private sector initiatives.

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

During the 2021-22 financial year, the Finance and Performance Committee met on five occasions and membership comprised of:

- Mr Ian Gillespie, Chair
- Professor Louisa Jorm (to 28 August 2021)
- Associate Professor Megan Passey (to 28 August 2021)
- Professor Sallie Pearson (from 18 October 2021)
- Professor Adam Elshaug (from 29 November 2021)
- Dr Diane Watson, Chief Executive

The Chief Executive, Chief Audit Executive and Director of Finance attended all meetings of the Finance and Performance Committee except where on approved leave.

STANDARD 5: MAINTAINING HIGH STANDARDS OF PROFESSIONAL AND ETHICAL CONDUCT

BHI has adopted the NSW Health Code of Conduct to guide all staff and contractors in professional conduct and ethical behaviour.

The Code of Conduct is distributed to, and signed by, 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 organisation's learning and development strategy.

BHI has implemented models of good practice that provide culturally safe work environments and health services through a continuous quality improvement model.

There are systems and processes in place and staff are aware of their obligations to protect vulnerable patients and clients – for example, children and those with a mental illness.

The Chief Executive, as the Principal Officer, has reported all instances of corruption to the Independent Commission Against Corruption where there was a reasonable suspicion that corrupt conduct had, or may have, occurred, and provided a copy of those reports to the Ministry of Health.

During the 2021-22 financial year, there were no cases reported to the Independent Commission Against Corruption.

Policies and procedures are in place to facilitate the reporting and management of public interest disclosures within the organisation in accordance with state policy and legislation, including establishing reporting channels and evaluating the management of disclosures.

During the 2021-22 financial year, there were no public interest disclosures reported.

The Board attests that BHI has a fraud and corruption prevention program in place.

STANDARD 6: INVOLVING STAKEHOLDERS IN DECISIONS THAT AFFECT THEM

The Board is responsible for ensuring that the rights and interests of the organisation's key stakeholders are incorporated into the plans of the organisation and that they are provided access to balanced and understandable information about the organisation and its proposals.

BHI's Strategic Plan: 2019-22 identifies 'alignment and responsiveness' as a strategic priority, stating that:

- We will strengthen engagement processes and relationships to ensure our reports and interactive information products respond to need and better align with the priorities of consumer, healthcare and policy audiences.

Our strategy also commits us to 'strengthen engagement, marketing and communications for the NSW Patient Survey Program', stating that:

- We will make effective use of engagement, marketing and communications to encourage survey participation, ensure we measure what matters to each of our audiences and promote the use of our survey results.

A report on strategic engagement and collaboration activity is provided to each Board meeting. An external stakeholder survey is conducted on an annual basis, enabling stakeholder engagement performance to be monitored, including against key performance indicators set out in the annual *Performance Agreement: 2021-22* and the *Strategic Plan: 2019-2022*.

Information on the key policies, plans and initiatives of the organisation and information on how to participate in their development are available to staff and to the public at www.bhi.nsw.gov.au.

The organisation has the following in place:

- A stakeholder engagement plan to facilitate broad input into the strategic policies and plans.
- Mechanisms to ensure privacy of personal and health information.
- An effective complaint management system.

STANDARD 7: 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 organisation and its units, including the system of internal control. The Board receives and considers all reports of the External and Internal Auditors, and the Audit and Risk Management Committee ensures that audit recommendations and recommendations from related external review bodies are implemented.

BHI has a current Risk Management Plan that identifies how risks are managed, recorded, monitored and addressed. It includes processes to escalate and report on risk to the Chief Executive, Audit and Risk Committee, the Board and the Ministry of Health.

The Plan covers all known risk areas including:

- Leadership and management
- Health of population
- Finance (including fraud prevention)
- Communication and information
- Workforce
- Environmental
- Legal
- Security
- Facilities and assets
- Emergency management
- Community expectations
- Work health and safety

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 organisation'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 BHI's financial reporting, safeguarding of assets, and compliance with BHI's responsibilities, regulatory requirements, policies and procedures
- to oversee and enhance the quality and effectiveness of BHI'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 BHI'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 BHI.

BHI completed and submitted an Internal Audit and Risk Management Attestation Statement for the 12-month period ending 30 June 2022 to the Ministry without exception.

The Audit and Risk Management Committee comprises two Independent Members and a third member who is a Board member. All three members are appointed from the NSW Government's Prequalification Scheme for Audit and Risk Committee Independent Chairs and Members, as required. During the 2021-22 year the ARMC met on six occasions and one member retired with a new member taking their place. The membership was comprised as follows

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- Mr Robert Lagaida PSC, Independent Chair
- Mr Michael Silk, Independent Member (to 22 March 2022)
- Julie Newman PSC, Independent Member (from 22 March 2022)
- Mr Ian Gillespie, Board Member