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| Health Services Governance Model Conduct Charter A model charter for conduct of Board members of Public Health Services and Public Hospitals |
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Department of Health

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# Guidance Note

## Overview

All Boards in Victoria’s health sector should have in place a Conduct Charter to ensure compliance with the Code of Conduct for Directors of Public Entities (the Directors’ Code of Conduct). A Conduct Charter encourages and requires conduct by the directors that will enhance the leadership and governance of the health service, for the benefit of the health service’s patients, staff, stakeholders and communities.

Ideally, the Conduct Charter that applies to a health Board and its individual directors is:

* a consolidated statement of the key standards of conduct, accountabilities and responsibilities that apply to the directors’ role, as well as relevant organisational principles and values
* based on the Directors’ Code of Conduct issued by Victoria’s Public Sector Commissioner
* consistent with the Victorian Public Sector Values, and the values of the Department of Health and Human Services
* agreed to, and complied with, by all Directors and all attendees of Board meetings
	+ applied to all Board members in the reviews of their individual performance
	+ aligned with the health services code of conduct and values that apply to employees of the health service.

The Department of Health and Human Services provides a model Conduct Charter for health-sector Boards to adapt and introduce.

This document is not designed to be a governance handbook or manual, it is a tool for use and adaption by boards to address and manage the behaviour of a member of the organisations board.

## Adapting the Model Conduct Charter for your Board

The model Conduct Charter can be adapted to take into account the nature and functions of your organisation, including the organisation’s establishing legislation.

Alternatively, health Boards can have an equivalent Conduct Charter in place that is consistent with the key principles of the model Conduct Charter.

The model Charter uses generic terms. Your Board may substitute its own terms, for example: ‘Board’ - committee, council, panel, etc.; ‘Board member’ - director, committee member, council member, panel member, etc.

## Directors’ Governance Obligations

The model Conduct Charter is based on governance obligations that are binding on most Victorian public sector agencies, for example:

* Public Health Services, public hospitals and multi-purpose services are public entities, which are subject to the *Public Administration Act 2004* (Vic) (‘PAA’) and related codes, such as the Directors’ Code of Conduct.
	+ Public entities should all fulfil the best practice requirements outlined in sections 79 to 85 of the PAA, which includes the requirement to have a code of conduct (such as this Conduct Charter) in place for Board members: s.81(1)(e)
	+ By-laws of the agency (e.g. the public hospital).

Even if these obligations are not legally binding on your health service, it is recommended that your Board’s Charter be consistent with them. They are fundamental to the good governance of all Victorian public agencies.

## The Importance of Board Culture

An important part of your role as a Board member is to contribute to and support a professional and respectful culture at Board level. Board directors are leaders of the organisation. The way directors conduct themselves inside the Boardroom, within the organisation and with employees, volunteers and other stakeholders of the organisation is a strong influence on the culture and values of the organisation as a whole.

Public sector boards like public health services and public hospitals have a particular challenge to their board culture that private sector boards don't have to manage. Public health service and hospital board members are appointed by the Governor on the recommendation of the Minister for Health. Similarly, these board members can only be removed by the Governor on the recommendation of the Minister. This means that while the boards have input as to who is appointed, the board will not have the final say. All board members go through an appropriate vetting process, however, a board member can be appointed that the board did not select or recommend. New and existing board members need to be cognisant of this challenge to board culture and the need to work cooperatively together in the best interests of the organisation as a collective.

Board members’ conduct outside the boardroom also reflects on the values and impacts the reputation of the health service. Board members must conduct themselves professionally at all times in their conduct with the organisation’s partners and stakeholders, including the community, other community services, Primary Health Networks, the Department of Health and Human Services and the media.

Directors of health services are encouraged to engage in discussion about their leadership styles and the culture of their Board, and include these things in their annual performance reviews.

## Your Role as a Board Member

It is recommended that, in your role as a Board member, you ensure that:

* your Board has an appropriate and strong Conduct Charter in place
* you support each other to comply with the Conduct Charter, and constructively and expeditiously engage in the resolution of any behaviour in the Boardroom that is potentially inconsistent with the Conduct Charter or that is hampering the work of the Board
* unprofessional behaviour by directors is not ‘normalised’ or ignored
* the Conduct Charter is reviewed and reaffirmed by the Board annually
* you and your colleagues all contribute to a culture that supports the implementation of the Conduct Charter
	+ you personally comply with the Conduct Charter and Directors’ Code of Conduct at all times.

## Further Information

The ‘Health Service Boards and Governance’ website (https://www2.health.vic.gov.au/hospitals-and-health-services/Boards-and-governance) contains useful information, resources, guidance notes, templates and sample documents. These resources cover a range of key governance topics, including:

* Induction for new directors and Board education;
* Complying with the Victorian Government’s Financial Management Compliance Framework;
* Monitoring and assessing Board performance;
* Risk management; and
	+ Handling conflicts of interest.

Other areas that are the subject of health service governance and operational policies include: gifts, gratuities, benefits and hospitality; reasonable expenses power of delegation; fraud; and corruption.

Remember that each Board director has a personal and individual responsibility to conduct themselves to the high standards expected by their peers, by the Minister and by the community. Appointment to a Board is an honour and privilege, and health service directors serve the people of Victoria.

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# Acronyms and Abbreviations

Charter This model conduct charter

DHHS Department of Health and Human Services

Health service board A board of a public health service, public hospital, multi purpose service, Health Purchasing Victoria, Ambulance Victoria, or Victorian Institute of Forensic Mental Health (Forensicare)

HSA Health Services Act 1988 (Vic)

IBAC Independent Broad-based Anti-corruption Commission

MPS Multi Purpose Service

PAA Public Administration Act 2004 (Vic)

The Code The Code of Conduct for Directors of Public Entities (also referred to as the Directors’ Code of Conduct) developed by the Victorian Public Sector Commission

VPSC Victorian Public Sector Commission

# Model Conduct Charter for use by Boards of Health Services in Victoria

### [insert name of health service]

## Conduct Charter

## 1. Scope

This is the Conduct Charter for the Board of [insert name of health service] and applies to each of its individual directors and the Board as a collective. This Conduct Charter applies to all Board members at all times in the performance of their duties.

## 2. Key principles

* + 1. **Obligations**: The Board acts in accordance with its obligations, applicable laws and good governance practice.
		2. **Public Interest**: The Board acts in the public interest, collectively and individually.
		3. **Individual Responsibility**: Each director is individually accountable for his or her own conduct and compliance with the required standards.
		4. **Governance Principles**: Board members adhere to the governance principles in the *Public Administration Act 2004* (Vic) (‘PAA’) and related codes, in particular, the Directors’ Code of Conduct.
		5. **Consolidated Statement**: This Conduct Charter is a consolidated statement of the key standards of conduct, accountabilities and responsibilities that apply to all Board members.
		6. **Improvement**: The Board will address any performance issues, potential breaches of this Conduct Charter and interpersonal conflicts.
		7. **Leadership**: As leaders of the organisation, Directors play a key role in fostering a healthy and values-driven culture of the organisation.

## 3. Obligations and Good Public Sector Governance Practice

The Board will act in accordance with, and all directors agree that they will comply with, good public sector governance practice and obligations including:

* the establishing legislation (or its equivalent) for the health service, being [insert];
* the public sector values in section 7 of the PAA;
* this Conduct Charter;
* the Directors’ Code of Conduct;
* the PAA, including section 79 and the public sector employment principles and related Standards;
* government policy;
* any directions, guidelines and/or statements of obligation or expectation issued by the Minister;
* the public sector employment principles in section 8 of the PAA and related Standards;
* occupational health and safety legislation;
* human rights and equal opportunity legislation; and
	+ all other laws and obligations that bind the organisation and Directors.

# 4 Conduct requirements of individual and collective members of the board

## 4.1 Directors’ Code of Conduct

The Directors’ Code of Conduct is based on the Victorian public sector values and sets the standard of behaviour expected of Directors and statutory office holders from the date of their appointment.

As a board, the directors agree that they will always act in a manner compliant with the Directors’ Code of Conduct:

### 4.1.1 Leadership and Stewardship

Directors will demonstrate leadership and stewardship. Directors will:

* By leadership and example, promote and support the application of the Victorian public sector values (Refer Appendix 1) and the values of the Department of Health and Human Services (refer Appendix 2), and act in accordance with this Charter.
* Promote a professional, healthy and ethical culture at Board level.
* Always act in a way that secures and preserves public confidence in the office of a Board member of the health service.
	+ Role model, as the leaders of the organisation, the public sector values and conduct expected of employees.

### 4.1.2 Board Authority and Delegation

The Board ensures that matters reserved for the Board are clearly identified. Directors will:

* Ensure that necessary delegations are in place.
* Only make decisions within its power.
* Ensure the Department, Secretary or Minister is consulted prior to all decisions that require input from the Department, Secretary or Minister (for example, recruitment of the CEO).
	+ Raise any matter with the department or Minister for consideration, if that matter is, in the view of the Board something not authorised under the public entity’s establishing legislation, but in the public interest or consistent with the objectives of the public entity.

### 4.1.3 Best Interests of the Public Entity

Directors will act in good faith in the best interests of the public entity. Directors will:

* Exercise your powers and carry out your duties for a proper purpose and in good faith; demonstrate accountability for your actions; accept responsibility for your decisions.
* Not engage in activities that may bring you or the public entity into disrepute or harm its reputation.
* Ensure priority attention to Quality and Safety in delivery of services for patients.
* Ensure due process is observed and dignity afforded in the recruitment or exit of the CEO or other senior staff.
	+ Have regard to the need to ensure that the resources of the Victorian public hospital sector are used effectively and efficiently.

### 4.1.4 Risk Management and Financial Responsibility

Directors will act in a financially responsible manner and oversee the management of risks faced by the entity. Directors will:

* Understand financial reports, audit reports and other financial material that comes before the Board; actively inquire into this material.
* Understand and actively inquire into any quality and safety issues that are brought to the Board, including clinical reports and occupational health and safety.
* Actively ensure we are each personally satisfied with the quality and safety of clinical services delivered by the agency.
* Endeavour to ensure that the health service’s resources are used prudently and solely in the health service’s interest; responsibly oversee the management of risks faced by the health service.
* Exercise care in relation to public funds and assets in compliance with the Standing Directions of the Minister for Finance and the rules of the Financial Management Compliance Framework.
* Inform the portfolio department and Minister of known major risks to the effective operation of the public entity and of the processes in place to address those risks.
* Ensure there are adequate controls in place to prevent fraudulent behaviour.
	+ Promote a culture of risk minimisation and regulatory compliance.

### 4.1.5 Conflicts of Interest and Duty

Directors will avoid, declare and manage conflicts of interest. Directors will:

* Where possible, avoid conflicts between your duties as a member of the health service’s Board and your personal interests and obligations.
* Avoid perceived or potential conflicts of interest.
* Disclose all actual, perceived or potential conflicts of interests at an early stage.
* Work cooperatively with the Board to manage any conflicts of interest.
	+ Ensure that you decline gifts or favours that may cast doubt on your ability to apply independent judgement as a director of the public entity.

### 4.1.6 Care, Diligence and Skill

Directors will exercise due care, diligence and skill. Directors will:

* Engage thoroughly with all papers presented to the Board, in relation to performance monitoring, strategy, risk and compliance.
* Ascertain all relevant information; make reasonable enquiries; understand the financial, strategic and other implications (particularly quality and safety implications) of decisions.
* Submit yourself to the scrutiny that is appropriate to our office.
	+ Pay particular attention to matters clinical governance to ensure that each individual director puts their mind to ensuring delivery of safe clinical services and ensuring appropriate response to any incident or near miss that arises.

### 4.1.7 Proper Use of Position

Directors will use their position appropriately. Directors will:

* Not use their position as a director to seek an undue advantage for themselves, family members or associates, or to cause detriment to the public entity and its staff and stakeholders.
	+ Not use the resources of the entity to provide some advantage or benefit for themselves, family members or associates.

### 4.1.8 Proper Use of Information

Directors will use information appropriately. Directors will:

* Ensure information gained as a director is only applied to proper purposes and is kept confidential.
	+ Not seek access to patient or staff records.

### 4.1.9 Fairness and Impartiality

Directors will act fairly and impartially. Directors will:

* Exercise your responsibilities impartially in the best interests of the health service.
	+ Avoid bias, discrimination, caprice or self-interest; demonstrate respect for others by acting in a professional and courteous manner.

### 4.1.10 Honesty and Integrity

Directors will act with honesty and integrity at all times.

* Be open and transparent in your dealings; use power responsibly; avoid making misleading or false statements.
	+ Strive to earn and sustain public trust of a high level.

In addition to complying with the Directors’ Code of Conduct, Directors will:

### 4.1.11 Act with respect and courtesy.

Directors will treat all persons with respect and courtesy; have due regard to the opinions, beliefs, rights and responsibilities of other members of the Board, staff and other persons.

\*For more information about conduct required of health service directors, refer to the Directors’ Code of Conduct available on the VPSC website.

## 4.2 Standing for Election to Parliament

The directors agree that they will comply with the PAA, including section 79. In addition to the conduct requirements which are mirrored in the Directors’ Code of Conduct, a Board member who is standing for election to parliament (federal, state, or territory) or local council will notify the Board and will not use any resources of the organisation in connection with his/her candidature.

The Board member’s candidature will be recorded in the Board’s minutes.

Should the Board member resign to stand for election to parliament, in accordance with section 3 of Schedule 1 of the PAA, there is no right to reinstatement.

## 4.3 Conduct Requirements in the Establishing Act

The directors agree that they will comply with any conduct requirements that are specified in the establishing Act (or in any related legal instrument or establishing document).

Directors are required to comply with the policies and procedures of their public entity including those relating to:

* assessing the Board’s performance;
* assessing the performance of individual Directors;
* dealing with poor performance by Directors;
* resolving disputes between Directors;
* dealing with conflicts of interest including the offer of gifts; and
	+ conducting meetings, making decisions and keeping appropriate records

[If the establishing Act currently specifies any conduct standards, cite the relevant section and set it out OR for conflict of interest standards, cite the relevant section and note that: ‘for details see the Board’s Conflict of Interest policy’.]

## 4.4 Conduct Requirements Determined by the Board (‘Own Motion’)

The directors agree that they will comply with any conduct requirements imposed by the Board of its own motion. This includes any decision by the Board in relation to an actual or potential breach of this Charter.

[If relevant, insert the organisation’s vision / values that the Board commits to]

[If the Board has already determined additional requirements of its own motion, set these out here OR if these standards are already set out in a Board charter, complete the above wording with: 'including those set out in Part XXX of the Board Charter'.]

## 4.5 Health Service’s Rules and Policies

The directors acknowledge that, as members of the [insert name of health service]’s Board, they are bound by all relevant rules and policies of the health service, as made from time to time.

## 4.6 Duties of the Chairperson

The Directors’ Code of Conduct requires that the Chairperson preside at meetings of the public entity Board. The Chairperson gives Directors ready access to up-to-date copies of relevant legislation, policies and procedures. The policies and procedures are tailored to the public entity’s operating environment and support application of the Directors’ Code of Conduct.

Further to the Director’s Code of Conduct, the Chairperson, as the leader of the Board, represents the Board as a collective to the entity, its CEO and other bodies, such as the Department and the Minister.

The Chairperson is responsible for holding directors to account:

* Individually through performance management, calling out inappropriate behaviour, issuing guidance to the Board, and
	+ As a collective, ensuring the right skills, capabilities and diversity is represented on the Board.

The Chairperson leads the Board’s involvement in recruitment processes for Board members (except where the Chairperson’s term is expiring and an alternative Board member must be appointed by the Board for this purpose). The Chairperson should identify, with the Board, succession planning for future board members, particularly in areas where there are gaps, such as skill gaps, diversity or local needs.

## 4.7 Gifts, benefits, hospitality and expenses

Directors will be mindful of the importance of prudence in their use of public money, including to enable their own work on the Board. This includes reasonableness, cost-consciousness, efficiency, and good sense in their claiming of expenses, receipt of gifts, hospitality of themselves and others, and other use of public resources.

Directors will also be mindful of potential future judgment of their financial decisions by members of the public, given that public spending can be scrutinised by auditors, the media, IBAC and others.

Under the *Health Services Act 1988*, directors of Public Health Service boards are entitled to be paid reasonable expenses incurred in holding office as a director of the board. This may include meals, travel expenses and accommodation costs, where required and reasonably priced.

Consistent with the Victorian Public Sector Commission’s minimum accountabilities for the management of gifts, benefits and hospitality, Directors are required to ensure that any hospitality costs incurred by the health service in relation to Board Directors’ activities are provided for a business purpose, are proportionate to the benefits obtained for the State, and would be considered reasonable in terms of community expectations.

Directors acknowledge that while it can be reasonable for a Victorian public sector organisation to occasionally provide modestly catered activities for its Board, staff and stakeholders, particularly as a mean of celebrating achievements, recognising service milestones or promoting events, they are expected to:

* ensure the hospitality has a clear business benefit to the organisation; and
	+ balance positive benefits of public recognition with community expectations in relation to modest and prudent expenditure by public officials.

If alcohol is to be served at an event, Directors must ensure that that an appropriate person (the Chairperson if it is the Board, or CEO if it is a staff function) manages the additional risks involved (including occupational health and safety, and reputational risk).

Directors will ensure that the health service has appropriate policies regarding provision or receipt of gifts, benefits or hospitality to staff and Directors. Directors will ensure that they comply with the relevant policies and that their decisions are not compromised or conflicted (or seen to be compromised or conflicted). All Directors commit to follow these policies.

For more information about gifts, benefits and hospitality rules, visit the VPSC website.

[Note: This should also be reflected in conflict of interest policies. Boards can refer to the VPSC Guidelines and Directors’ Code of Conduct, if they wish to include more detail in this section.]

## 4.8 Privacy and Confidentiality

Board meetings, papers and the content of Board discussions are strictly confidential. They often contain information that the organisation, and individual Board members, are legally obliged to keep in the strictest of confidence, including highly personal, sensitive and private information of staff and patients.

Board directors will comply with the applicable privacy laws at all times.

Board directors will apply a high level of confidentiality to all information to which they are privy and:

* Will not disclose or discuss matters raised in Board meetings outside of Board meetings;
* Will only access, use or disclose access information held by the health service for a legitimate purpose, namely to fulfil the responsibilities of a Board member;
* Will not access, use or disclose information (such as patient information) for any improper purpose; and
	+ Will not speak to the media or any other stakeholder about Board matters unless explicitly authorised to do so by the Board in advance.

Sub-committees of the Board should be afforded the same privacy and confidentiality treatment as Board meetings.

As a group, the Board can elect to release Board minutes to the public. If or when this is done, due consideration ought be given to matters of privacy. This is particularly the case where the minutes might detail personal information (e.g. patient and staff details), commercial in confidence matters or information that is or reasonably will be subject to legal proceedings. It may be appropriate to seek legal advice prior to release of Board papers. This should not, however, discourage the Board from releasing information within their purview for transparency reasons.

For more information about conflict of interest, visit the VPSC website. http://vpsc.vic.gov.au/resources/conflicts-of-interest-and-duty/

# 5. Collective Accountabilities and Responsibilities

The Board will comply with its collective accountabilities and responsibilities, in particular:

#### Accountability to Minister

The Board will act in accordance with its collective accountability to the Minister for [insert portfolio(s) here e.g. Health / Mental Health / Ambulance Services].

#### Functions and Objectives

The Board will ensure that all its actions and decisions are consistent with the functions and objectives in the establishing Act and with the organisation’s strategic plans, business plans, and related documents.

#### Major Risks

The Board will inform the Minister for [insert portfolio(s) here e.g. Health / Mental Health / Ambulance Services] and the Secretary of DHHS of all known major risks (existing and emerging) to the effective operation of the organisation and of the management systems that are in place to address those risks.

The Board will routinely:

* Consider the organisation’s risk appetite;
* Identify and assess any risk that could have a material impact on the organisation; and
	+ Ensure that management has designed and implemented a sound risk management framework and internal control system to identify and manage the organisation’s material risks, including quality, safety, clinical, occupational health and safety, financial and strategic risks.

#### Information to Minister

Unless prohibited by law, the Board will provide any information relating to the organisation or its operations that the Minister for [insert portfolio(s) here e.g. Health / Mental Health / Ambulance Services] (or DHHS) requests.

#### Accountability to Each Other

In addition to each director having individual responsibilities, the Board is collectively responsible to meet its obligations set out in this Conduct Charter.

[If these accountabilities and responsibilities are already set out in a Board charter, the above wording may be replaced with: ‘The Board will comply with the collective accountabilities and responsibilities set out in Part XXX of the Board Charter'.]

# 7. Relationships

As members of the health service’s Board, the directors:

* recognise the importance of professional, respectful, appropriate and productive relationships, and will strive to support and maintain these relationships as we work co-operatively to achieve the health service’s goals;
* will maintain a unified stance outside the Board room, even if the decision was not unanimous and there was disagreement prior to the decision being made;
* recognise our responsibility to ensure our interactions with other members of the Board, health service staff, or others associated with the health service meet all statutory requirements;
* acknowledge that the health service’s administration is accountable to health service’s Board through the Chief Executive Officer, who is responsible for the management and day-to-day administration of the health service;
* acknowledge that their conduct outside the boardroom reflects on the values and can impact on the reputation of the health service; and
	+ will conduct themselves professionally at all times in their conduct with the organisation’s partners and stakeholders, including other community services, Primary Health Networks, the Department of Health and Human Services and the media.

The Board recognises the importance of its relationship with the CEO. Board members will:

* work with the CEO effectively and within the boundaries of its governance role;
* not interfere with the operational management of the health service, which is the CEO’s responsibility;
* set key performance indicators for CEO performance;
* provide active oversight of the CEO’s performance and hold the CEO accountable;
* support a relationship with the CEO that is respectful, robust and professional;
* communicate clearly and fairly, always avoiding aggressive or unreasonable language; and
	+ manage the CEO’s employment with respect for his or her professional reputation and dignity.

# 8. Managing Performance, Breach and Conflicts

## Review of Board and Directors’ Performance

The Board will review its own performance, including their individual and collective adherence to this Conduct Charter, at least every 12 months.

The performance review will encourage all directors to reflect on what the Board has accomplished, its goals and how it functions, and to contribute to setting goals and priorities of the Board.

## Potential Breach of the Conduct Charter

The Board as a whole will work together to consider and address any potential breach by an individual director or by the Board of this Conduct Charter. The process will be led by the Chair (unless the Chair has potentially engaged in a breach). The process will be fair and transparent, and allow the director who has potentially engaged in a breach to consider and respond to the Board’s concerns.

The Board may make a formal request of the director to remedy a breach, such as the proposed management of a conflict of interest or an improvement in the level of respect demonstrated towards other Board members. Directors agree that they will abide by any such request that the Board makes of them, and any conduct requirements imposed by the Board of its own motion.

The Chair can address an incidence of potential misconduct directly with the Board member concerned and on an individual basis, without involving the rest of the Board, so long as the Board member’s potential misconduct has not led to a consequence which warrants the attention of the full Board (such as, an impact on the reputation of the health service, or the creation of a financial or legal risk).

The Chair should advise the Board of the potential misconduct and the actions he or she took to address the potential misconduct. This is about ensuring accountability back to the Board as a collective.

## Dispute Resolution

If any of the directors are unable to resolve potential breaches of the Conduct Charter, disagreements or interpersonal conflicts that could adversely affect the operations of the Board, the parties to the dispute and the Chair agree to:

* work together constructively, promptly and expeditiously to try to resolve the dispute;
* keep in mind the interests of the health service at all times;
* act in a manner proportionate to the seriousness of the breach, disagreement or conflict;
* attempt to address the matter directly and informally in the first instance, with the support of the Chair or the Company Secretary where appropriate;
* if the dispute remains unresolved for ten working days, consider agreeing to the appointment of a mediator nominated by the Chair, or if the Chair is a party to the dispute by the Company secretary; and
* abide any agreement reached in mediation and also by the ultimate decision of the Board (not including the Board members in dispute or who have potentially engaged in a breach) about the outcome.

The Chair will record in his or her own records the nature and outcome of the potential breach, disagreement or conflict. If appropriate, and applying the appropriate confidentiality, the Company Secretary will also record in the matter in the minutes of the Board meeting.

# 9. Review of Conduct Charter

The Board will review this Conduct Charter on an annual basis, or more frequently if required to keep up-to-date with changes to laws, government policy and standards.

# 10. Related policies

[insert as applicable, such as:]

* Conflict of Interest
* Gifts, Benefits and Hospitality
* Meetings and Decision-Making

# Appendix 1: Public Sector Values - section 7(1) of the PAA

* + 1. **Responsiveness** — public officials should demonstrate responsiveness by—
			1. providing frank, impartial and timely advice to the Government; and
			2. providing high quality services to the Victorian community; and
			3. identifying and promoting best practice;
		2. **Integrity** — public officials should demonstrate integrity by—
			1. being honest, open and transparent in their dealings; and
			2. using powers responsibly; and
			3. reporting improper conduct; and
			4. avoiding any real or apparent conflicts of interest; and
			5. striving to earn and sustain public trust of a high level;
		3. **Impartiality** — public officials should demonstrate impartiality by—
			1. making decisions and providing advice on merit and without bias, caprice, favouritism or self-interest; and
			2. acting fairly by objectively considering all relevant facts and fair criteria; and
			3. implementing Government policies and programs equitably;
		4. **Accountability** — public officials should demonstrate accountability by—
			1. working to clear objectives in a transparent manner; and
			2. accepting responsibility for their decisions and actions; and
			3. seeking to achieve best use of resources; and
			4. submitting themselves to appropriate scrutiny;
		5. **Respect** — public officials should demonstrate respect for colleagues, other public officials and members of the Victorian community by—
			1. treating them fairly and objectively; and
			2. ensuring freedom from discrimination, harassment and bullying; and
			3. using their views to improve outcomes on an ongoing basis;
		6. **Leadership** — public officials should demonstrate leadership by actively implementing, promoting and supporting these values;
		7. **Human rights** — public officials should respect and promote the human rights set out in the Charter of Human Rights and Responsibilities by—
			1. making decisions and providing advice consistent with human rights; and
			2. actively implementing, promoting and supporting human rights.

# Appendix 2: Values of the Department of Health and Human Services

## Our vision

Our vision is to support and enhance the wellbeing of all Victorians. We aspire to be an organisation where everyone is committed to achieving our vision and demonstrates our values in all that they do.

## Our values

**We are respectful**

* We treat people with fairness, objectivity and courtesy.
* We listen and communicate honestly and clearly.
* We seek to understand others’ perspectives, experiences and contributions.
* We recognise and value people’s diversity, equality and human rights.

**We have integrity**

* We are trustworthy, and we do what we say we will do.
* We are professional in all our dealings with others.
* We stay true to our values when it’s easy and when it’s difficult.

**We collaborate**

* We help each other as colleagues.
* We generously share our knowledge, expertise and skills.
* We work in partnership with people and organisations to find the best approach.
* We are inclusive and seek people’s input and involvement.

**We care for people, families and communities**

* We involve people in decisions that affect their lives.
* We value our colleagues, and we develop and support them to be resilient and effective.
* We have empathy for people and seek to understand their perspectives.
* We support and empower people through our work.

**We are accountable**

* We each take ownership of the quality and demonstrable impacts of our work.
* We ensure that our decisions and actions are evidence based and outcomes-focused.
* We are careful about and transparent in how we use public resources.

**We are innovative**

* We are flexible, creative and responsive to changing needs.
* We have the courage to take informed risks and try something new.
* We are reflective and seek feedback to inform and shape our work.