



CAHS Board

Finance Committee

Terms of Reference



Compassion

Excellence

Collaboration

Accountability

Equity

Respect

Change control register

Version	Author	Reviewed by	Approved by	Changes
1	Kathleen Bozanic	Finance Committee of the CAHS Board	CAHS Board, as at 13 October 2016	NA
2	Kathleen Bozanic	Finance Committee of the CAHS Board	CAHS Board, as at 15 March 2018	NA
3	Kathleen Bozanic	Finance Committee of the CAHS Board	CAHS Board, as at 26 April 2019	Minor amendments
4	Kathleen Bozanic	Finance Committee of the CAHS Board	CAHS Board, as at 7 May 2020	Minor amendments
5	Jane Connor A/Board Support Officer	Draft for review by Finance Committee	CAHS Board, as at March 2022	Minor amendments

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CAHS Vision, Values and Objectives

Our vision

Healthy kids, healthy communities

Our values

Compassion

I treat others with empathy and kindness.

Collaboration

I work together with others to learn and continuously improve our service.

Equity

I am inclusive, respect diversity and aim to overcome disadvantage.

Excellence

I take pride in what I do, strive to learn and ensure exceptional service every time.

Respect

I value others and treat others as I wish to be treated.

Accountability

I take responsibility for my actions and do what I say I will.

Our strategic objectives



Care for children, young people and families



Value and respect our people



Provide high-value healthcare



Promote teaching, training and research



Collaborate with our key support partners

- (i) the Audit and Risk Committee;
 - (ii) the Finance Committee; and
 - (iii) the People, Capability and Culture Committee.
- (p) “**Policy Framework**” means a policy framework issued by the Department CEO pursuant to section 27 of the *Health Services Act*;
- (q) “**System Manager**” means the Department CEO undertaking the role as provided for in Part 3 of the *Health Services Act*.
- 1.10 In these Terms of Reference any term not specifically defined shall have the same meaning as in the *Health Services Act* unless the context otherwise requires.
- 1.11 In these Terms of Reference any reference to:
- (a) a Policy Framework, Department CEO Direction, laws and instruments binding upon CAHS includes any amendments thereto or replacements thereof;
 - (b) a document, instrument or agreement other than an item within clause 1.11(a) above do not include any amendments or replacements where they materially affect the operation and discharge by the Committee of its functions and responsibilities under these Terms of Reference until such time as the Board has approved the consequential changes to these Terms of Reference necessary to address any such amendments or replacements.
- 1.12 These Terms of Reference are effective on and supersede all prior Terms of Reference applicable to the Committee from *March 2022 in accordance with a resolution of the Board made on 3 March 2022*.

2. Purpose

- 2.1 The Committee is non-executive and its role is to provide support, assistance, advice and recommendations to the Board in connection with:
- (a) The implementation of and adherence to the Financial Management Policy Framework and the financial aspects of other Policy Frameworks;
 - (b) The implementation of and adherence to the *Financial Management Act 2006*, *Government Financial Responsibility Act 2000*, Treasurer’s Instructions and the financial aspects of any other written law that applies to the CAHS;
 - (c) The CAHS annual budget
 - (d) Commercial matters;
 - (e) Overseeing CAHS Executive’s monitoring of the development and implementation of appropriate systems of internal control, risk management, governance in respect of financial and commercial matters;

- (f) The external audit of CAHS Annual Financial Statements;
 - (g) Oversee CAHS's financial performance against the key performance indicators linked to CAHS budgets and forecasts, service agreements, Annual Financial Statements, CAHS strategic plan and CAHS business plan;
 - (h) Oversee the CAHS financial performance of Service Level Agreements with stakeholders including any high risk or high value contracts; and
 - (i) Formulating strategies for improving CAHS's financial position, including but not limited to the approval and monitoring of the CAHS budget process, special initiatives and budget outcomes.
- 2.2 The Committee is directly responsible and accountable to the Board for the exercise of its functions and responsibilities.
- 2.3 The Committee must at all times recognise day-to-day responsibility for the management of CAHS rests with the Chief Executive.
- 2.4 At all times, the Finance Committee must ensure the impact on patient safety and quality, and on staff and organisational safety, is concerned in all decision making.

3. Responsibilities of the Finance Committee

3.1 Budget and Service Agreements

The budget and service agreement functions of the Committee are to:

- (a) Review and make recommendations to the Board in respect of the CAHS's annual budget and reforecasts to the budget (including the mid-year review) taking into consideration service agreements, CAHS strategic plan, CAHS business plan and system-wide priorities; and
- (b) Review and make recommendations to the Board regarding the CAHS's annual service agreement and any review of service agreements where the service agreement is considered significant or material in accordance with the Board approved authorisations and delegations schedule for Procurement or in the opinion of the Committee or the Board from time to time.

3.2 Compliance

The compliance functions of the Committee are to:

- (a) Review and make recommendations to the Board in respect of CAHS and CAHS Executive's arrangements for ensuring that CAHS complies with its obligations with respect to:

- the *Financial Management Act 2006* (“**FMA**”), Treasurer’s Instructions and any other written law that applies to the CAHS to the extent it is within the responsibilities of the Committee’s Terms of Reference; and
 - Finance Management Policy Framework and the financial aspects of other Policy Frameworks, including but not limited to the Procurement Policy Framework, Purchasing and Resource Allocation Policy Framework and Infrastructure (Asset Management) Policy Framework; and
 - Part 7 of the *Health Services Act* which sets out the accountability and financial provisions for Health Service Providers.
- (b) Recommend to the Board if a notice of financial difficulty should be made by the Board to the Director General. The *Health Services Act* states that if the Board of a Health Service Provider is unable to, or will be unlikely to be able to, satisfy any of its financial obligations from the financial resources available, or likely to be available to it, at the time the financial obligation is due the Board must notify the System Manager.

3.3 Risk Management

The risk management functions of the Committee are to:

- (a) Notify the Board of newly identified financial risks where the risk rating is assessed as being high or extreme;
- (b) Review and make recommendations to the Board on CAHS Executive’s report as to all financial risks:
 - (i) where the level of risk or residual risk (or risk rating) is assessed as being high or extreme, including the appropriateness of mitigations;
 - (ii) where the level of risk (or risk rating) is assessed to have increased so as to become high or extreme or decreased so as to no longer be high or extreme;
 - (iii) where CAHS Executive considers the risk treatment, control or risk management plan (or mitigation) is assessed as not being adequate or excellent for the corresponding risk, where the level of risk (or risk rating) is assessed as being high or extreme; and
 - (iv) proposed to be removed from the risk register where the level of risk (or risk rating) was assessed as being high or extreme;
- (c) Review and make recommendations to the Board on CAHS Executive’s report as to significant financial opportunities (based on a value to be determined by the Board from time to time and using the Board approved authorisations and delegations schedule for Procurement as a guide) and those other financial opportunities considered significant or material in the opinion of the Committee; and
- (d) Review and make recommendations to the Board on CAHS Executive’s report as to implementation plans related to significant financial opportunities (based on a value to be determined by the Board from time to time and using the Board approved authorisations and delegations schedule for Procurement as a guide) and those other financial opportunities considered significant or material in the opinion of the Committee.

3.4 Commercial

The commercial functions of the Committee are to review and make recommendations to the Board on:

- (a) resource decisions;
- (b) commercial and business arrangements; and
- (c) any contract or procurement;

that will have a significant impact on future years or have a significant financial impact at a whole of CAHS level in accordance with the Board approved authorisations and delegations schedule for Procurement.

3.5 External Audit

The external audit functions of the Committee are to:

- (a) Review and recommend to the Board the annual external audit plan presented by the external auditor in respect of the annual financial statements, comprising the income statement, statement of financial position, statement of cash flows and related notes ("**Annual Financial Statements and KPI's included in the Annual Report**");
- (b) Meet with the external auditor (including without the presence of any member of CAHS Executive) and report to the Board on any feedback from the external auditor in respect of matters related to the Annual Financial Statements;
- (c) Review and recommend to the Board the approval of CAHS's Annual Financial Statements and the Financial KPI's included in the Annual Report, including providing input and feedback to the Board on CAHS Executive and the external auditors assessment of:
 - (i) key financial statement risks;
 - (ii) compliance with Accounting Standards and applicable laws and regulations;
 - (iii) changes to accounting policies that have a significant impact on the Annual Financial Statements; and
 - (iv) internal controls and risk management related to the preparation of the Annual Financial Statements;
- (d) Review annually and make recommendations to the Board on the quality, effectiveness, delivery and independence of the external audit function and services for the previous year in respect of the Annual Financial Statements; and
- (e) Review and make recommendations to the Board on CAHS Executive's plans for, progress on and actions taken in implementation of external audit outcomes, findings and recommendations (including satisfactory progress to mitigate risks associated with any findings) related to the Annual Financial Statements.

3.6 Internal Audit and Related Internal Control Functions

The internal audit and related internal control functions of the Committee are to:

- (a) Recommend to the Board internal audits related to key financial risks, internal controls related to financial matters (including, but not limited to the Annual Financial Statements) and other matters determined by the Committee should be included in the annual plan for Internal Audit and any amendments there to;
- (b) In respect of any Internal Audit related to financial matters identified in 3.6(a) above review and make recommendations to the Board on the recommendations made by the Audit and Risk Committee on:
 - (i) open Internal Audit items identified by the Internal Auditor where the level of risk (or risk rating) is assessed as being high or extreme or the item is otherwise considered to be material by the Committee, including CAHS Executive's plans for, progress on and actions taken in response to such open Internal Audit items;
 - (ii) an item being closed or removed from the CAHS log or register for Internal Audit where the level of risk (or risk rating) is assessed as being high or extreme or the item is otherwise considered to be material by the Committee.

3.7 Financial Reporting

The financial reporting functions of the Committee are to review and make recommendations to the Board in respect of:

- (a) CAHS's financial performance against key performance indicators linked to CAHS budgets and forecasts, service agreements, Annual Financial Statements, CAHS strategic plan and CAHS business plan;
- (b) CAHS monthly report on the financial operation provided by the CAHS Executive; and
- (c) the financial impact of any matter that is specifically referred by the Board to the Committee.

4. Powers of the Committee

- 4.1 The Committee will hold the powers delegated to it by the Board. The Committee will conform to any directions and financial limits within which it is required to operate as imposed on it by the Board.
- 4.2 In discharging its functions and responsibilities, the Committee has the power and authority to:
 - (a) Require reviews be conducted by CAHS Executive into matters within the scope of the Committee's functions and responsibilities as set out in these Terms of Reference;

- (b) Require the provision of reports by CAHS Executive on matters within the scope of the Committee's functions and responsibilities as set out in these Terms of Reference;
- (c) Recommend to the Board that reviews or further reviews be conducted into financial matters within or related to CAHS, whether those investigations be by the Board, CAHS Executive, the Committee, Internal Audit, or any other person or entity (inside or outside of CAHS);
- (d) Access information, records, CAHS Personnel and other parties in connection with matters within the scope of the Committee's functions and responsibilities as set out in these Terms of Reference;
- (e) Request attendance of any CAHS Personnel and other parties, at Committee meetings;
- (f) Conduct meetings with external auditors, any Internal Auditor and Other Board Committees as necessary (including without the presence of any member of CAHS Executive);
- (g) Recommend to the Board that reviews or further reviews be conducted into matters within or related to CAHS, whether those investigations be by the Board, CAHS Executive, the Committee, the internal audit function, or any other person or entity (inside or outside of CAHS);
- (h) With the approval of the Board:
 - (i) obtain legal advice in accordance with the Legal Policy Framework; and
 - (ii) obtain independent professional advice of any person or entity outside of CAHS with relevant experience and expertise if considered necessary by the Committee;
- (i) Conduct meetings jointly with any one or more other Board Committees where the respective Chairs of each such Board Committee agree that it is appropriate; and
- (j) Undertake such other tasks the Board authorises or delegates to the Committee.

4.3 The Committee Chair, with the approval of the Board, has the authority to request and obtain access to information or records of any person or entity outside of CAHS where otherwise permitted by law where such information or records may relate to any matter within the scope of the Committee's functions and responsibilities as set out in these Terms of Reference.

4.4 The Committee Chair has the authority to meet formally and informally with:

- (a) The Chief Executive of CAHS and/or any member of CAHS Executive;
- (b) The Chairs of other Board Committees;
- (c) The Chairs of Finance Committees of other health services providers, with the approval of the Board Chairs of those health service providers (including jointly with or in the presence of the Chairs of other Board Committees and/or the Chairs of any other committees of other health service providers); and
- (d) Such other persons or entities as the Board may approve from time to time.

- 4.5 The Committee does not have the authority to enter into contracts or agreements independently of the Board.

5. Delegation of authority to a sub-committee

- 5.1 The Committee does not have the authority to create sub-committees.
- 5.2 Neither the Committee nor the Committee Chair has authority to delegate any powers, functions or responsibilities contained in these Terms of Reference or as delegated by the Board from time to time.

6. Structure and composition

6.1 Membership and appointment

- (a) Membership of the Committee is to be determined by the Board from time to time.
- (b) The Committee must have at least four members. The Committee may include persons who are not members of the CAHS Board but must include at least two members of the Board. Any Committee member who ceases to be a member of the Board shall at the same time cease to be a member of the Committee.
- (c) A person who is a staff member (as defined in section 6 of the *Health Service Act*) of CAHS is not eligible to be a member of the Committee.
- (d) All members of the Committee must be able to demonstrate a significant relevant understanding of financial management and financial control.
- (e) At least one member of the Committee must be a suitably qualified professional. Suitably qualified means having current membership of either:
 - (i) CPA Australia as a CPA; or
 - (ii) Chartered Accountants Australia and New Zealand as a Chartered Accountant; or
 - (iii) Institute of Public Accountants as a Member of the Institute of Public Accountants; or
 - (iv) appropriate membership of an overseas accounting body that is approved in writing by any two of the above mentioned bodies as having requirements for membership equivalent to those of the approving body.

6.2 Committee Chair

- (a) The Committee Chair shall be a member of the Board as nominated by the Board from time to time.

- (b) The Board Chair cannot act in the capacity as Committee Chair.
- (c) If the Committee Chair is absent from a meeting or vacates the Chair at a meeting, the Committee Chair must appoint another member to act as the Committee Chair on a temporary basis. When the Committee Chair is unavailable to or does not otherwise appoint another member to act on a temporary basis as the Chair then the Committee shall elect a temporary Chair from those members of the Committee present at any such meeting.

6.3 Standing invitees

- (a) Holders of the following positions (or equivalent positions) at CAHS:
 - (i) may not be members of the Committee;
 - (ii) may not vote on Committee decisions; and
 - (iii) are not included in determining a quorum for a meeting of the Committee, however, they may be invited to attend from time to time meetings of the Committee by the Committee Chair:
 - (iv) Chief Executive;
 - (v) any one or more of the CAHS Executive;
 - (vi) any Internal Auditor; and
 - (vii) External Auditors.
- (b) Holders of the following positions shall be standing invitees to and shall be given notice of all meetings of the Committee (although any such member of the Board or CAHS Executive not expressly appointed to the Committee shall not become a member of the Committee by virtue of such attendance, may not vote on Committee decisions and are not included in determining a quorum for a meeting of the Committee):
 - (i) The Executive Director of Corporate Services, also known as Chief Financial Officer (or other member of the CAHS Executive responsible for financial management);
 - (ii) The Board Chair; and
 - (iii) The Chair of any other Board Committees.
- (c) The Committee may from time to time resolve that the holders of certain positions (or equivalent positions) at CAHS and/or Board shall be standing invitees to all meetings of the Committee (although such persons shall not be members of the Committee, may not vote on Committee decisions and are not included in determining a quorum for a meeting of the Committee).
- (d) Any Board Member may attend Committee meetings (although any such Board Member not expressly appointed to the Committee shall not become a member of the Committee by virtue of such attendance, may not vote on Committee decisions and are not included in determining a quorum for a meeting of the Committee).

6.4 Other participants

The Chair may request CAHS Executives, System Manager Executives, Mental Health Commission, employees, the Chair of the Consumer Advisory Council (CAC) or their nominee, or external parties to attend a meeting of the Committee. However, such persons do not assume membership or participate in any decision-making processes of the Committee and are not included in determining a quorum for a meeting of the Committee.

6.5 Secretariat

- (a) Secretariat support will be provided to the Committee by the CAHS Board Secretariat.
- (b) All records, including the agenda, minutes and any reports or recommendations will be prepared and kept by CAHS in accordance with the *State Records Act 2000* and in the same manner as the requirements of the Statutory Board Governance Policy – Health Service Provider Boards.
- (c) Individuals who are not members of the Board shall only have access to the minutes, reports, recommendations or documents of the Committee with the prior approval of the Committee Chair, or the Board Chair where the Committee Chair considers it appropriate to refer the matter to the Board Chair for approval. Any person permitted to access such materials will observe the confidentiality obligations as imposed upon a Board Member and such obligations shall apply *mutatis mutandis* to all such persons.

7. Meetings

7.1 Meeting schedule

- (a) The Committee will meet at least once every two months. Meetings should be programmed to coincide with key dates in the reporting cycle with consideration given to the Board meeting cycle.
- (b) The Committee Chair will convene meetings of the Committee whether pursuant to any schedule or timetable or from time to time.
- (c) The Committee Chair will call a meeting of the Committee if so requested by any member of the Committee or the Board Chair within a reasonable period of such request.
- (d) Notwithstanding any existing meeting date, schedule or timetable having been set, the Committee Chair may call additional meetings of the Committee to consider any items that are:
 - (i) unable to be accommodated within any existing meeting schedule or timetable; or
 - (ii) of such urgency that it requires consideration prior to the next scheduled meeting.

7.2 Quorum

- (a) A quorum for a meeting of the Committee is at least half the members of the Committee and must include not less than one Board Member.
- (b) At the discretion of the Committee Chair the Committee Members may attend meetings of the Committee in any manner (including by video or tele-conference) by which Board Members may attend meetings of the Board.

7.3 Voting

- (a) The majority of affirmative votes of a quorum at a meeting of the Committee are sufficient to pass a resolution.
- (b) Each Committee Member's vote has equal weight.
- (c) In the case of an equal number of votes, the Committee Chair shall have a casting vote in addition to their deliberative (i.e. normal) vote as a Committee Member.

7.4 Agenda, Papers, Minutes, Actions and Summary

- (a) The Committee meetings will abide by normal meeting procedure and will be minuted. An agenda and supporting papers will be distributed not less than 5 working days prior to the meeting. Draft minutes will be circulated not more than 7 days after each meeting.
- (b) The Committee will receive the following reports (in the form and style as requested by the Committee from time to time) from CAHS Executive as standing items:
 - (i) Status of matters relating to the Internal Audit regarding financial matters;
 - (ii) Status of matters relating to financial risks and opportunities; and
 - (iii) Monthly reports on:
 - the financial operations and performance of CAHS;
 - resource decisions;
 - commercial and business operations; and
 - contracts and procurement.
- (c) The Committee will also receive those further reports (whether as standing items, on a periodic or ad hoc basis) as specified by the Committee Chair or the Board from time to time.

7.5 Out-of-session matters

- (a) Urgent matters can be progressed out-of-session with the agreement of the Committee Chair.

- (b) Matters progressed out-of-session and out-of-session votes may occur in the same manner as an out-of-session matter or vote with respect to the Board. A reasonable time must be given to vote. A quorum of Committee Members must vote for a resolution or decision to stand.
- (c) Confirmation of those matters progressed out-of-session and the outcome of any out-of-session vote shall be included in the meeting agenda for the next Committee meeting and confirmation of the outcome of any out-of-session vote recorded in the minutes of the next meeting of the Committee.

7.6 Virtual Attendance

Members may attend meetings by video or teleconference at the discretion of the Board Chair, and as permitted by the *Health Services Act* under section 89. The preferred method of virtual attendance for the WA Health Service is Microsoft Teams.

8. Formal mechanisms for reporting key decisions

8.1 Making recommendations

- (a) The Committee may make recommendations to the Board on items within its Terms of Reference.
- (b) Recommendations of the Committee will be regarded as its collective decision or advice unless there is material dissension. When there exists a material dissension both the majority and minority view will be recorded in the minutes of the meeting.
- (c) If consensus cannot be reached, the Committee Chair reserves the right to escalate the matter to the Board. Both the majority and minority view will be recorded in the minutes of the meeting and placed before the Board.
- (d) Where a matter for consideration is not solely within the scope of the Committee and falls within the scope of another Board Committee, the matter shall also be referred to that other Board Committee for consideration.
- (e) Where a matter for consideration is beyond the scope of the Committee it shall be recorded in the minutes of the Committee and the matter shall be referred to:
 - (i) another Board Committee if considered to fall within the scope of another Board Committee; and
 - (ii) If not within the scope of another Board Committee, or when relevant then in addition to, the Board.

8.2 Reporting key decisions

- (a) The Committee will develop two-way communications through formal and ad hoc reporting to both the Board and the Board Chair.
- (b) The Committee reports directly to the Board.
- (c) The minutes of meetings of the Committee (whether then in draft or approved) shall be included in the papers for the next Board meeting.
- (d) Once finalised and approved the minutes of each Committee meeting shall be made available to all Board Members whether through a central data repository or other medium accessible by all Board Members.

9. Ethical Practices

- 9.1 Committee Members must at all times comply with the relevant WA health system Policy Framework mandatory requirements.
- 9.2 In accordance with section 79(1)(2) of the *Health Services Act* all Committee Members must act impartially and in the public interest in the exercise of the member's functions. Accordingly, a Committee Member must put the public interest before the interest of CAHS, the personal interests of the Committee Member or any Board Member.
- 9.3 Committee Members will at all times in the discharge of their duties and responsibilities, exercise honesty, objectivity, independence and not engage knowingly in acts or activities that have the potential to discredit CAHS, the Board, the Committee and/or individual Board Members or Committee Members.
- 9.4 Committee Members will refrain from entering into any activity that may prejudice their ability to carry out their duties and responsibilities objectively and will, at all times, act in a proper and prudent manner in the use of information acquired in the course of their duties.
- 9.5 Committee Members will not use CAHS's information for personal gain or in any manner that would be contrary to law, or detrimental to the welfare and goodwill of another person, the Committee, the Board, CAHS or the WA health system.
- 9.6 Committee Members must not publicly comment on matters related to activities of the Committee, the Board and/or CAHS other than as authorised by the Board.
- 9.7 The Board Secretariat will maintain the following registers in accordance with the *Health Service Provider Board Governance Policy*:
 - (a) A register of personal interests of all Committee Members and any standing invitees to the Committee meetings, together with any management plan regarding such personal interest;
 - (b) A register of all declarations of personal interest and/or actual, potential or perceived conflict of interest declared by members of the Committee or any attendees at a meeting of the Committee, together with any management plan regarding such conflict of interest; and

- (c) A register of gifts where from time to time gifts will be offered to the Board and Committee Members during the course of or incidental to their appointment. The Committee must ensure Members declare to the Committee the offer that was made and this must be recorded in the gifts register. The Committee must determine if the gift should be accepted or declined. The Committee should not allow Members to accept unauthorised gifts. In all offers of gifts the Committee must assess the possibility for an actual, perceived or potential conflict of interest before the gift can be accepted.
- 9.8 Committee Members must declare all material personal interests, and any actual, potential or perceived conflicts of interest or duty. Actual, potential or perceived, conflicts of interest should be managed pursuant to the *Health Service Provider Board Governance Policy*.
- 9.9 A Committee Member who has a material personal interest or in respect of whom there exists an actual, potential or perceived conflict of interest in a matter being considered or about to be considered by the Committee must, as soon as possible after the relevant facts have come to the Committee Member's knowledge, disclose the nature of such personal interest or any actual, potential or perceived conflict of interest first to the Committee Chair and then at the Committee meeting.
- 9.10 Subject to clause 9.11, Committee Members and any other person otherwise in attendance at a Committee Meeting must not be present while a matter is being considered, participate in discussions and must not vote on any issues in respect of which there is a material personal interest or where there exists an actual, potential or perceived conflict of interest.
- 9.11 A Committee Member may be present while a matter is being considered, participate in discussions and/or vote on the matter where the Committee has passed a resolution that specifies the Committee Member has a material personal interest or actual, potential or perceived conflict of interest but the Committee considers the interest or conflict:
 - (a) As so trivial or insignificant as to be unlikely to influence the disclosing Committee Member's conduct; and
 - (b) They should not be disqualified from considering or voting on the matter in question (section 82 of the *Health Services Act*).

10. Confidentiality

- (a) Committee Members may from time-to-time be in receipt of information that is regarded as confidential. Committee Members acknowledge their responsibility to maintain confidentiality of all information that is not in the public domain.
- (b) Committee Members and any other invitee to or attendee at a Committee meeting in receipt of Committee papers will maintain the Committee papers in a confidential manner separate from any other business or responsibilities of the Committee Member other than the business or responsibilities of the Committee Member as a Board Member.

- (c) Committee Members and any other invitee to or attendee at a Committee meeting in receipt of Committee papers or otherwise privy to information will observe the confidentiality obligations as imposed upon a Board Member and such obligations shall apply *mutatis mutandis* to all such persons.

11. Code of Ethics and Code of Conduct

Committee Members and any other invitee to or attendee at a Committee meeting will observe the obligations with respect to the code of ethics and code of conduct as imposed upon a Board Member and such obligations shall apply *mutatis mutandis* to all such persons.

The CAHS Board Living Our Values: Code of Conduct holds the CAHS values of compassion, collaboration, accountability, respect, equity and excellence as fundamental and the code describes how these values translate into action. The Code applies to all Board members, with the Chair and Deputy Chair having special responsibility to support all Board members to achieve these standards. The Board Chair also has a duty to investigate where allegations of breaches of the Code of Conduct are raised.

The WA Public Sector Code of Ethics specifies the minimum standard of conduct and integrity required of all public sector bodies and employees. Under section 9 of the *Public Sector Management Act*, all public sector bodies and employees must comply with the Code of Ethics standards of personal integrity; relationships with others; and accountability.

The Committee should refer any breaches of Code of Ethics or Code of Conduct to the Board Chair in the first instance.

12. Evaluation

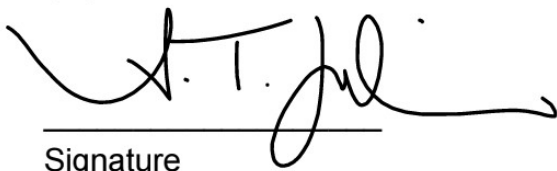
- (a) The Committee will undertake an annual self-assessment of its performance to ensure that the Committee remains fit for purpose and to identify and action any areas in which the effectiveness of the Committee could be improved.
- (b) The Committee will provide a report on the annual review of performance and achievements to the Board.
- (c) The Committee's annual self-assessment must be aligned with the Board's evaluation framework and be provided to the Board in advance of the Board's annual self-assessment.

13. Review Date

This document will be reviewed on an annual basis, no later than one year from the date of the last approval.

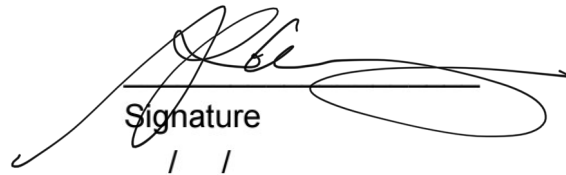
14. Endorsement

Finance Committee
Chair



Signature
21 /4 /23

Child and Adolescent Health Service
Board Chair



Signature
/ /