

Terms of Reference

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Safety and Quality Committee

Mackay Hospital and Health Board

1. Purpose

The purpose of the Board Safety and Quality Committee is to assist the Mackay Hospital and Health Board (Mackay HHB) in fulfilling its governance responsibilities for safety and quality by overseeing the adequacy and effectiveness of the health service's clinical governance framework, monitoring safety and quality performance and risk, and support the concept of the principles of 'High Reliability Organisations.'

In fulfilling its role, the Committee promotes a culture of openness, learning, improvement and just accountability, ensuring that safety and quality issues are identified early, understood in their operational context, addressed proportionately, and used to drive sustainable improvement in patient outcomes and experience.

2. Authority

The Safety and Quality Committee is a prescribed committee under Part 9, section 45 of the *Hospital and Health Boards Regulation 2023* (Qld) (HHBR).

3. Membership

The Mackay HHB shall appoint the members of the Safety and Quality Committee and review the composition of the Safety and Quality Committee from time to time. The Safety and Quality Committee will consist of at least three (3) Board Members. Where skills gaps exist, the Board may appoint an external clinician or subject matter expert.

The Mackay HHB shall appoint one of the Board Members as the chair of the Safety and Quality Committee. In the temporary absence of the Committee Chair, the Board Chair shall appoint the chair of that Safety and Quality Committee meeting. In the permanent absence of the Committee Chair, the Mackay HHB must nominate a new Committee Chair.

The Safety and Quality Committee Members are:

- Associate Professor Luke Lawton – Committee Chair
- Associate Professor Peter Malouf – Committee Member
- Ms Andrea Ranson – Committee Member
- Mrs Alana Moller – Committee Member
- Mr Ron Nightingale – Committee Member
- Ms Monica McKendry – Committee Member

Committee Members are not permitted to appoint a proxy to attend a meeting on their behalf.

The following positions will be invited to attend each meeting:

- Chief Executive
- Executive Director Nursing and Midwifery (Executive Sponsor)
- Chief Medical Officer

- Executive Director Allied Health
- Executive Director Public Health and Rural Services
- Executive Director Operations Mackay
- Executive Director Strategy and Governance
- Nursing Director, Safety, Quality and Governance

The Executive Sponsor, with the approval of the Committee Chair, may invite additional Mackay HHS staff to attend meetings.

4. Duties and Responsibilities

The duties and responsibilities of the Committee shall be as follows:

- a) Advising the Mackay HHB on matters relating to the safety and quality of health services provided by the Mackay Hospital and Health Service (Mackay HHS), including the Mackay HHS' strategies for the following:
 - i. minimising preventable patient harm.
 - ii. reducing unjustified variation in clinical care.
 - iii. improving the experience of patients and carers of the Mackay HHS in receiving health services; and
 - iv. complying with national and State strategies, policies, agreements, and standards relevant to promoting consultation with health consumers and members of the community about the provision of health services by the Mackay HHS.
- b) Monitoring the Mackay HHS' governance arrangements relating to the safety and quality of health services, including by monitoring compliance with the Mackay HHS' policies and plans about safety and quality.
- c) Promoting improvements in the safety and quality of health services provided by the Mackay HHS.
- d) Monitoring the safety and quality of health services being provided by the Mackay HHS using appropriate indicators developed by the Mackay HHS.
- e) Monitoring the workplace culture of Mackay HHS in relation to the safety and quality of health services provided by Mackay HHS.
- f) Collaborating with other safety and quality committees, the department and State-wide quality assurance committees in relation to the safety and quality of health services.
- g) Any other function given to the Safety and Quality Committee by the Mackay HHB, if the function is consistent with a function mentioned above.
- h) Include oversight of equity and cultural safety performance.
- i) Monitor accreditation readiness and lessons learnt from accreditation.
- j) Monitor workforce wellbeing and cultural indicators as they affect patient safety and quality.
- k) Escalate unresolved or high-risk and quality matters directly to the Board Chair.
- l) Collaborate with the Audit and Risk Committee to ensure joined-up risk governance.

5. Reporting Relationships

The Safety and Quality Committee reports directly to the Mackay HHB.

The Committee Chair may give a verbal or written report at any meeting of the Mackay HHB at the invitation of the Board Chair.

The Safety and Quality Committee can only endorse matters to the Mackay HHB for approval.

The Safety and Quality Committee is advisory in nature, and does not hold financial, procurement or any other form of delegation to approve matters on behalf of the Mackay HHB.

6. Meetings

The Safety and Quality Committee will meet at least bi-monthly. The Safety and Quality Committee Chair shall decide if any additional meetings are required to fulfil the Safety and Quality Committee's duties and responsibilities.

Exceptional circumstances aside, Committee Members will be provided with at least 48 hours' notice of meetings.

7. Quorum

A quorum for a meeting of the Safety and Quality Committee is one-half the number of its members, or if one-half is not a whole number, the next highest whole number.

8. Agenda

The agenda assists in focusing discussion. It helps to ensure that the Safety and Quality Committee's discussion progresses through the full list of items to be addressed and that time spent during meetings reflects the Safety and Quality Committee's priorities.

The Secretariat, in conjunction with the Committee Chair and the Executive Sponsor, is responsible for preparing the agenda for each Safety and Quality Committee meeting.

The Committee Chair is responsible for ensuring that items included on the agenda reflect matters that, according to this Terms of Reference, sit within the Safety and Quality Committee's duties and responsibilities.

Committee Members and Executive Leadership Team members may contribute to the agenda by submitting items for the Chief Executive and Committee Chair's consideration, directly to the Secretariat. Any such request should be made at least 10 business days prior to the Safety and Quality Committee meeting.

9. Meeting Briefs

The Secretariat is responsible for the collation and distribution of meeting briefs.

All meeting briefs must be approved by the relevant Executive Leadership Team member prior to submitting to the Secretariat for finalising and distribution.

The Secretariat retains electronic copies of all meeting briefs including copies of all briefs and documents tabled during the relevant meeting.

The treatment of any additional copies of meeting briefs distributed to individual Committee Members and their respective annotations and notes is the responsibility of each individual Committee Member taking into account (inter alia) their confidentiality obligations as well as the law with regards to the destruction of documents that may become relevant in present or potential or anticipated litigation or formal inquiries or investigations.

10. Minutes

The Safety and Quality Committee must keep minutes of its meetings and a record of any written resolutions made by it.

The Secretariat is responsible for taking the minutes. The minutes should be prepared by the Secretariat within five business days of the meeting and submitted to the Committee Chair for review and acceptance within three business days of receipt.

The minutes will be tabled at the subsequent Mackay HHB meeting for noting, and the next Safety and Quality Committee meeting for approval. Committee Members are responsible for ensuring minutes are accurate and reflect a true and correct record of the procedures and decisions of meetings.

11. Written Resolutions

The following procedure applies to a notice of a written resolution, pursuant to the requirements under HHBA, Schedule 1, section 6(6):

- a) a majority of the board members gives written agreement to the resolution; and
- b) Notice of the resolution is given under procedures approved by the board.

12. Work Plans

The Secretariat, in consultation with the Committee Chair and the Executive Sponsor, shall maintain an annual work plan for the Safety and Quality Committee (see **Appendix 1**). The annual work plan shall identify the key matters for consideration and actions required by the Safety and Quality Committee during the year and allocate those matters and actions to relevant meeting(s). The annual work plan enables the Safety and Quality Committee, and Executive Leadership Team to be aware of and plan for the year.

13. Disclosure of interests

Committee Members must act ethically and observe the highest standards of behaviour and accountability to support the continuation of public trust in the government.

Welcome Aboard: A guide for members of Queensland Government Boards, committees and statutory authorities outlines the obligations of members of government boards and those involved in the good corporate governance of government boards (<https://www.premiers.qld.gov.au/publications/categories/policies-and-codes/handbooks/welcome-aboard.aspx>). It states that:

'Members of Government Boards should avoid actual or potential conflicts between their duties to the Government Board and their personal interests or their duties to others. Members of Government Boards should also be aware of possible perceived conflicts of interest.'

Schedule 1, section 9 of the HHBA outlines the way in which the Safety and Quality Committee is to deal with disclosures of interests at meetings, in particular:

- A Committee Member must disclose if they have a direct or indirect interest in an issue being considered, or about to be considered, by the Safety and Quality Committee; and the interest could conflict with the proper performance of the Committee Member's duties about the consideration of the issue.
- This disclosure must be made as soon as practicable by the Committee Member.
- The Safety and Quality Committee will decide if the Committee Member must not be present when the Safety and Quality Committee considers the issue or take part in a decision of the Safety and Quality Committee about the issue.
- A disclosure of interest must be recorded in the meeting minutes.

A Committee Member must not have access to information of the Safety and Quality Committee in relation to a matter in which they have a conflict of interest, unless otherwise authorised by the Committee Chair (or Board Chair in circumstances where it is the Committee Chair that has the conflict of interest).

From time to time a Committee Member may also be an employee or other service provider of Mackay HHS ("Employee Member"). This may give rise to potential conflicts of interest which need to be managed carefully. If, prior to a meeting, information is to be provided to Committee Members that may have a direct impact on the status or obligations of an Employee Member, the Chief Executive must discuss with the Committee Chair (or Board Chair in circumstances where it is the Committee Chair that is an Employee Member) what information is to be withheld from the Employee Member until the Committee Chair/Board Chair expressly decides that the information is to be provided to the Employee Member. If, during a meeting, a potential conflict of interest of the Employee Member is raised, the Safety and Quality Committee will proceed in accordance with HHBA, Schedule 1, section 9.

14. Confidentiality

Committee Members must keep all Safety and Quality Committee discussions and deliberations confidential. Similarly, all confidential information received by a Committee Member because they are or have been a Committee Member must be kept confidential, and the Committee Member must not improperly use that information to gain an advantage for themselves or someone else or to cause detriment to Mackay HHS.

15. Secretariat

Secretariat support will be provided by the Board Secretary or another delegate.

The Secretariat will be responsible for the preparation and circulation of the meeting agenda as well as recording the minutes and passing resolutions at all Safety and Quality Committee meetings, in consultation with the Safety and Quality Committee Chair. The Secretariat must record any votes against a passing resolution in the minutes of the meeting.

The Secretariat will also be responsible for the timely tabling of all correspondence, reports, and other information relevant to the Safety and Quality Committee's activities.

16. Inconsistencies

In the event that this Terms of Reference is inconsistent with the Mackay Hospital and Health Board Charter, the Mackay Hospital and Health Board Charter will prevail

In the event that this Terms of Reference is inconsistent with the Hospital and Health Boards Act 2011 and Hospital and Health Boards Regulation 2023 prevail over the Terms of Reference and the Board Charter.

17. Publication

A copy of this Terms of Reference will be made available at <http://www.mackay.health.qld.gov.au/about-us/leadership/committees/>.

18. Review

The Terms of Reference will be reviewed annually.

19. Acceptance of Terms of Reference

This Terms of Reference was approved by the Mackay HHB on 23 April 2026. This version of the Terms of Reference comes into effect on 24 April 2026.

Associate Professor Luke Lawton
Safety and Quality Committee Chair
Mackay Hospital and Health Service
18/08/2026

Ms Monica McKendry
Board Chair
Mackay Hospital and Health Service
18/08/2026

The signed version is held and retained by the Board Secretary

20. Revision History

	Date	Amendment	Authorised by
1	20/01/12	Draft document preparation for Mackay Hospital and Health Board consideration	Board Chair
2	26/06/12	Updated with new name	Board Chair
3	19/09/12	Updated – wording	Board Chair
4	05/02/13	Formatting redone	Board Chair
5	18/06/13	Reformatting	Board Chair
6	24/09/13	Review and minor update	Board Chair
7	07/04/14	Updated the meeting schedule	Board Chair
8	12/06/14	Updated the vision, purpose, and values and the EDRS title	Board Chair
9	10/09/14	Update the title	Board Chair
10	28/05/15	Amended as part of Committee Structure review	Board Chair
11	25/08/16	Amended to insert new provisions	Board Chair
12	06/07/17	Amendments made to sections – Review and Acceptance of Terms of Reference	Board Chair
13	07/06/18	Significant changes to align with Mackay Hospital and Health Board Charter	Board Chair
14	05/09/19	Amendments made to sections – Membership, Meeting Briefs, Acceptance of Terms of Reference	Board Chair
15	04/06/20	Amendments made to sections – Membership, Acceptance of Terms of Reference	Board Chair
16	02/09/21	Amendments made to sections – Membership, Acceptance of Terms of Reference	Board Chair
17	07/09/23	Amendments made to sections - Membership, Acceptance of Terms of Reference; Inclusion of <i>Appendix 1 – Annual Work Plan</i>	Board Chair
18	09/05/24	Amendments made to sections - Membership, Acceptance of Terms of Reference, and Annual Work Plan	Board Chair
19	07/11/24	Amendments made to sections – Purpose, Membership, Duties and Responsibilities, Acceptance of Terms of Reference, and Annual Work Plan	Board Chair
20	28/02/26	Amendments made to sections – Membership, Meeting Briefs, Duties and Responsibilities, Acceptance of Terms of Reference, and Annual Workplan,	Board Chair

Appendix 1: Annual Work Plan

Deliverable	Owner	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Governance, Leadership and Culture													
1. Clinical Governance Framework	EDNM					X							
2. Clinical Trials Governance Framework	EDMS					X							
3. Terms of Reference	Chair					X							
4. Annual Work Plan	Chair					X							
Patient Safety and Quality													
5. Safety and Quality Performance Report, incorporating consumer feedback trending, accreditation survey report and the Health Round Table.	EDNM		X			X		X		X		X	
6. Consumer Feedback and Experience Report	EDNM											X	
7. Chief Health Officer Report	EDMS							X					
8. Junior Doctor Satisfaction Results	EDMS		X										
9. Clinical Risks and Emerging Issues Update	All EDs		X			X		X		X		X	
Accreditation													
10. National Safety and Quality Health Care Standards Attestation Statement	EDNM							X					
11. Implementation of NSQHS Standard (second edition)	EDNM		X			X		X		X		X	
12. National Safety and Quality Health Service (NSQHS) Standards	EDNM		X			X		X		X		X	
13. National Safety and Quality Health Service Standards – Multi Purpose Health Services – Aged Care Assurance and Clinical Trials Framework.	EDNM					X							
14. Training/College Accreditation Cycle	EDMS		X										
Workforce													
15. Patient Safety – Staff Survey Results Reporting	EDPC											X	