



WA HEALTH COMPLIANCE MANAGEMENT POLICY

Version control information

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Title: WA HEALTH COMPLIANCE MANAGEMENT POLICY

1. Background

Compliance is an outcome of an organisation meeting its obligations and is made sustainable by embedding it in the culture of the organisation and in the behaviour and attitude of people working for it (Australian Standard AS ISO 19600:2015).

Effective compliance and regulatory programs, systems and processes are essential components of good governance and contribute to the achievement of broad public sector and individual agency goals and outcomes (Public Sector Commission *Reviewing Compliance Obligations – A Good Practice Approach*).

Compliance obligations can take a number of forms, including:

- acts of Parliament and subsidiary legislation
- Premier's Circulars
- Public Sector Wages Policy
- Commissioner's Instructions
- Public Sector Commissioner's Circulars
- Treasurer's Instructions
- other sector wide policies
- other sector wide guidelines
- Policy Frameworks, Policies and minimum standards
- Directives
- Standards

Some compliance obligations are mandatory while others are recommended, although it is generally expected that these are to be complied with (*PSC Reviewing Compliance Obligations – A Good Practice Approach*).

Compliance with this policy is mandatory to enhance governance and ensure that WA health system compliance obligations are identified and met.

2. Scope

This policy applies to all Health Service Providers under the *Health Service Act 2016* Including:

- North Metropolitan Health Service and its Board
- South Metropolitan Health Service and its Board
- East Metropolitan Health Service and its Board
- Child & Adolescent Health Service and its Board
- WA Country Health Service and its Board
- Health Support Services

- Quadriplegic Centre and its Board

3. Policy statement

The WA health system is committed to the management and monitoring of its compliance obligations.

This includes actively identifying and communicating compliance obligations, providing appropriate support and resources and managing the risks of non-compliance.

Suitable compliance management systems, frameworks and practices are to be established and are to be consistent with:

- Australian Standard AS ISO 19600:2015 *Compliance Management Systems – Guidelines*
- Public Sector Commission *Reviewing Compliance Obligations – A Good Practice Approach*
- WA Health Risk Management Policy
- [WA Health Integrated Corporate & Clinical Risk Analysis Tables and Evaluation Criteria 2009 \(as amended 2011\)](#) and as may be amended from time to time.

4. Definitions ^{1,2}

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| Compliance | Meeting all the organisation's compliance obligations. |
| Compliance risk | Effect of uncertainty on compliance objectives. Compliance risk can be characterised by the likelihood of occurrence and the consequences of non-compliance with the organisation's compliance obligations. |
| Compliance management policy | The statement of the overall intentions and direction of an organisation related to compliance management. |
| Compliance management framework | The set of components that provide the foundations and organisational arrangements for designing, implementing, monitoring, reviewing and continually improving compliance management throughout the organisation. |
| Compliance risk management plan | The scheme within the risk management framework specifying the approach, the management components and the resources to be supplied to the management of compliance risk. |
| Risk | The effect of uncertainty on objectives |

5. Roles and responsibilities

The System Manager (Department of Health Chief Executive Officer)

- The System Manager being responsible for the overall management of the WA health system is to:
 - manage and monitor compliance obligations associated with system manager services and functions
 - specify system compliance assurance and reporting requirements
 - ensure the WA health system meets its compliance obligations
 - monitor compliance with this policy.

Health Service Providers (HSP's)

- Boards

Boards are ultimately responsible for HSP compliance. Boards are to:

- oversee the HSP compliance management system and framework and ensure it is sound

- provide compliance assurance to the System Manager.
- Chief Executives (CE's)
 - HSP CE's are to:
 - design and implement the HSP compliance management system and framework and ensure that the HSP operates within it
 - ensure compliance with this policy
 - develop local compliance management policies consistent with this policy, plans and guidelines and ensure that sufficient resource is applied to the management and monitoring of compliance.
- All Executive and Management Positions
 - identify and manage compliance obligations within their areas of responsibility and authority.
- All Employees
 - all employees are required to work within this policy and participate in compliance management processes as may be required.

6. Compliance

Failure to comply with this policy may lead to disciplinary action.

7. Evaluation

The Department CEO is to review the operation of the Policy every two years beginning in July 2018 and may direct audits to assess the efficiency and effectiveness of the arrangements, as well as to assess compliance with the requirements outlined in the Policy.

The Auditor General may undertake an assurance role in monitoring compliance with the requirements outlined in the Policy.

8. References

¹ Australian Standard AS/NZS 31000:2009 *Risk Management – Principles and Guidelines*

² Australian Standard AS ISO 19600:2015 – *Compliance Management Systems – Guidelines*

9. Relevant legislation

Health Services Act 2016

Financial Management Act 2006

10. Related documents

Risk, Compliance and Audit Policy Framework

[WA Health Integrated Corporate & Clinical Risk Analysis Tables and Evaluation Criteria 2009 \(as amended 2011\)](#)

11. Authority

The Department CEO may issue policy frameworks to ensure consistent approaches - *Health Services Act 2016*, Part 3, Division 2, Policy frameworks (section 26).

The overall management of the WA health system is the responsibility of the Department CEO - *Health Services Act 2016*, Part 3, Division 1, Role of Department CEO

The Department CEO may investigate, inspect or audit health service provider - *Health Services Act 2016*, Part 13

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