



health

Department of Health
NORTHERN CAPE

Policy on Hospital Boards, Community Health Care Centres and Clinic Committees

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G. MATLAPANE

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Vision, Mission and Values

Vision

Health Service Excellence for All

Mission

Working together, we are committed to provide quality health care services. We will promote a healthy society in which we care for one another and take responsibility for our own health. Our caring, multi-skilled professionals will integrate comprehensive services, using evidence-based care-strategies and partnerships to maximize efficiencies for the benefit of all.

Values

- Respect (towards colleagues and clients, rule of law and cultural diversity)
- Integrity (Honesty, Discipline, and Ethics)
- Excellence through effectiveness, efficiency, innovation and quality health care.
- Humanity (Caring Institution, Facility and Community)
- Empower our people (Employees and Community)

Policy Aim

1. It is the aim of the Northern Cape Department of Health to bring about a higher level of public accountability in our health establishments by establishing and maintaining Hospital Boards and Clinic/Community Health Centre Committees.

Policy Scope

2. This Policy applies to all public hospitals, community health centres and clinics in the Northern Cape, and their respective Boards and Committees.

Policy Statement

3. It is the policy of the Northern Cape Department of Health that all hospitals, clinics and community health centres will have a governance oversight structure, in the form of a Hospital Board, Community Health Centre and Clinic Committee, that will provide appropriate oversight to assure the quality, accountability and good management of business and clinical processes.

Roles and Responsibilities

4. The Member of the Executive Council is responsible for:

4.1. Establishing governance structures:

4.1.1. A Hospital Board in respect of every public hospital. This Board may be established for a single hospital or a cluster of hospitals.

4.1.2. A Clinic Committee or Community Health Centre Committee in respect of every clinic and community health centre. This Committee may be established for a single clinic or community health centre, or for any clustering of such establishments.

4.2. Placing a notice in the Provincial Gazette calling for nominations to the boards or committees, stating the criteria for nominations and the closing date. The selection criteria for prospective Board or Committee members are:

- 4.2.1. Be a South African citizen aged 18 years or older;
- 4.2.2. Be of sound mind and not certifiable as mentally ill (see Mental Health Act);
nor have a criminal record, unless a free pardon has been received or a period
of three years has expired since release from prison and certified as fully
rehabilitated by the Department of Correctional Services;
- 4.2.3. Demonstrate commitment to community service and support for the vision,
mission and values of the Department of Health;
- 4.2.4. Demonstrate a high level of personal integrity and honesty;
- 4.2.5. Able to think strategically and communicate effectively;
- 4.2.6. Demonstrate an understanding of the difference between the role of
management (this is the role of the establishment's management committee)
and governance (this is the role of the Hospital Board or Clinic/Community
Health Centre Committee).
- 4.3. Appointing members of the boards or committees for a period of three years at a
time – the term of office may be staggered.
- 4.4. Removing a member of the Hospital Board or a Clinic and/or Community Health
Centre Committee if he/she:
 - 4.4.1. Ceases to practice the profession in terms of which they were appointed;
 - 4.4.2. Fails to perform their duties effectively;
 - 4.4.3. Is absent from three consecutive standing meetings without prior notice;
 - 4.4.4. Ceases to be a South African Citizen;
 - 4.4.5. No longer acts in the public interest.
- 4.5. Designating one of the members of the Board or Committee as chairperson to
preside at meetings.

5. The Members of the Hospital Board, Clinic or Community Health Centre Committee provide oversight and guidance to the health establishment management structure through formal monthly meetings and ad hoc meetings, in order to:
 - 5.1. Ensure that the strategic direction, vision and values of the establishment aligns with the needs of the community;
 - 5.2. Ensure that patient and staff safety is properly managed;
 - 5.3. Ensure that risks are identified and managed;
 - 5.4. Ensure financial sustainability;
 - 5.5. Ensure the health human resources are effectively managed and developed;
 - 5.6. Monitor management performance and compliance with ethical business practice;
 - 5.7. Develop systems and processes for internal controls both operational and financial.
 - 5.8. Improve community participation by means of open meetings and open days;
 - 5.9. Ensure regular report back meetings and dissemination of information to the community through meetings and annual reports.
 - 5.10. Work through subcommittees in order to advise the Board or Committee in one or more of the following areas: standards, auditing, risk, asset and liability, strategic and operational policy, human resource, external relations and ethical matters.
6. The District Managers, Hospital Managers and Facility Managers are responsible for:
 - 6.1. Appointing, seconding or designating a person in its employ to provide administrative support to the Hospital Board, Clinic and/or Community Health Centre Committee.
 - 6.2. Availing resources to enable the Board / Committee to hold its meetings and perform its administrative functions.

7. The Director for Advocacy, Communication & Social Mobilisation is responsible for:
 - 7.1. Guiding the MEC and the Head of Department on the implementation and monitoring of this policy;
 - 7.2. Guiding hospital CEOs, Managers of Community Health Centres/ Clinics, and District Managers, on the implementation of this policy.
 - 7.3. Advertise on local print media calling for nominations to the boards or committees, stating the criteria for nominations and closing date.
 - 7.4. Ensure that the committee members are orientated and trained on their duties and responsibilities.
 - 7.5. Distribute the policy to all committee members.

Review and Distribution

8. The Director for Advocacy, Communication & Social Mobilisation is the responsible manager for this and for ensuring it is reviewed and updated.
9. This Policy will be reviewed after 12 months but before 18 months of the last publication date. If necessary an updated version will be issued, if not a formal cover letter will be issued to supplement the cover of this Policy (identifying a revised publication date).
10. The Director for Policy & Planning will distribute updated versions to:
 - 10.1. Member of the Executive Council for Health
 - 10.2. Head of Department of Health
 - 10.3. All Chief Directors, Directors and Deputy Directors (who will in turn distribute to their staff as appropriate.)
 - 10.4. The Chairperson(s) of all Hospital Boards and Clinic/Community Health Centre Committees.

Acknowledgements and Sources

11. National Health Act (No. 61 of 2003)
12. National Core Standards for Health Care Establishments in South Africa. Department of Health (2011)
13. Policy on the Management of Public Hospitals. National Department of Health (August 2012)