

GOVERNANCE STANDARDS FOR SPECIALIST NURSING AND MIDWIFERY ORGANISATIONS

A report by NNO Working Group for the National Nursing and Nursing Education Taskforce (N³ET)

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governance standards for specialist nursing and midwifery organisations working group report

	contents	page
Foreword		iii
Executive summary		v
Working group membership		vii
Acknowledgements		vii
Part 1	Working Group Report	1
	Project overview	1
	Background	2
Part 2	Review and Development of Standards	4
2.1	Introduction	4
2.2	Consultation process	12
2.3	Background to Standards	14
2.4	Summary of Standards	15
2.5	Standards	17
2.6	Discussion	23
Part 3	Mapping Process	24
3.1	Background to mapping process	24
3.2	Mapping methodology	25
3.3	Mapping results	26
3.4	Discussion	41
Part 4	Glossary	44
	References	48
Part 5	Appendices	50
A1	Summary of key Standards	50
A2	Standards and underlying principles	51
A3	Organisations targeted for consultation	58
A4	Survey	67
A5	Documents to share with other organisations	79

Foreword

In March 2006 the National Nursing Organisations (NNO) secretariat and chair, the Australian Nursing Federation (ANF) and Royal College of Nursing, Australia (RCNA) respectively, announced a collaborative partnership with the National Nursing and Nursing Education Taskforce (N³ET) to develop a governance framework for specialist nursing and midwifery organisations.

This report presents as part of that governance framework:

- a proposed set of governance standards; and
- the results of a self-assessment process of the current governance practice of specialist nursing and midwifery organisations against the proposed standards.

The standards are the product of collaboration. It recognises that stakeholders and the wider community should be considered in governance processes. The criteria for the standards represent an effort to be deliberately inclusive of people who receive specialist nursing and midwifery care and the wider community. The standards also recognise that a collaborative approach between board/governing body members, an organisation's staff/volunteers, and the membership is essential to effectively govern any organisation.

Until now there has been no dedicated governance standards for specialist nursing and midwifery organisations. The framework that has been developed therefore represents Australia's first attempt to establish a comprehensive set of standards to support sound governance for these groups. As such this is a landmark document. The commitment of the NNO and other specialist nursing and midwifery groups in developing this framework, is acknowledged and appreciated.

Executive summary

In March 2006, the National Nursing Organisations (NNO) accepted an invitation from the National Nursing and Nursing Education Taskforce (N³ET) to conduct a project to investigate and develop sound governance standards for specialist nursing and midwifery organisations. In conducting this project, the NNO also undertook a mapping process to assess the current governance practices of National Nursing Organisations and other specialist nursing and midwifery organisations against the proposed standards.

The National Nursing Organisations (NNO) is a coalition of more than fifty Australian national nursing organisations. By definition, member organisations must have members in four or more states/territories. The purpose of the NNO is to provide a forum for discussion, consultation, and development of future directions in nursing; and to act as a lobby group at a national level.

The National Nursing and Nursing Education Taskforce was established in 2003 by State, Territory and Australian Government Ministers for Education and Health to progress the recommendations of the National Review of Nursing Education (2002) *Our Duty of Care* report.

This project and the activities undertaken to inform it were funded by the N³ET. The Working Group, comprising a sub-group of NNO members, conducted and directed the project.

Increasingly the governance of professional organisations is being subject to new levels of public accountability and scrutiny. In this environment, it is timely and appropriate that nursing and midwifery organisations consider their governance practices, and take steps to ensure sound governance and demonstrate accountability for their governance to the wider community.

The term governance as used in this document refers to the way in which a board or governing body directs and oversees the business of an organisation. Governance refers to the mechanisms in place to ensure: the mission of the organisation is fulfilled; that its processes are legally compliant; and assists in the management of conflicts of interest and the prevention of fraud and other improper or unlawful behaviour. Governance encompasses the organisation's structures, culture, policies, processes and accountability mechanisms; the way business is conducted; decisions are made; and stakeholder relationships are managed.

The vision that underpins this governance framework is that nursing and midwifery organisations use sound governance practices to minimise risks; strive to improve their performance; consider all available and current evidence to make informed decisions; and deliver a consistently high service to the membership, stakeholders and the wider community.

The governance standards presented in this framework provide guidance with regard to sound organisational management structures; strategic and business planning; performance management; risk management; compliance and controls; auditing; and values and code of ethics. To support these standards, a set of underlying principles has been articulated. These principles are: accountability, transparency, leadership, integrity, legality, stewardship, efficiency and social responsibility. These principles are linked to specific standards to highlight their importance in ensuring sound governance.

Executive summary

The Working Group established for the project deliberately aimed to develop standards that would be broad, and that would encompass the wide range of organisational structures, purposes and functions of different Australian nursing and midwifery specialist organisations.

In measuring respondents performance against each of the standards, analysis was conducted with respect to whether the organisation/ group was developing or were planning to develop standards, competencies or guidelines for specialty practice; respondents' attitudes to governance; types of governance processes already in place; the respondent's attitudes with regard to the responsibilities of their organisational boards or governing bodies; the practices of organisations with respect to engaging with external stakeholders; risk management; challenges or impediments to the implementation of governance practices; and future directions and planning with respect to governance.

The results of the survey demonstrate that there is significant emphasis placed on sound governance practice by organisations representing the interests of nurses and midwives. The results suggest the bulk of respondents are cognisant of the importance of focusing on the organisation's purpose; and there are substantial efforts made to demonstrate accountability, however this does not always extend to engaging with the community. There is generally an expectation that governance is driven by a sound value system, but this is not always documented. There was high achievement in demonstrating and meeting compliance with legal obligations, but lower performance in risk management. Respondents overwhelmingly indicated that developing the capacity and capability of the board/governing body was either essential or preferable for sound governance, however many respondents also indicated a difficulty in preparing nurses for these roles.

The survey identified a number of barriers to the implementation of sound governance by participants. These include a lack of understanding about governance issues; a lack of education and training available to nurses and midwives to prepare them for executive positions as members of boards or governing bodies; a lack of financial resources; a lack of awareness about the implications of failing to address some key governance issues, i.e. risk management; and the limited time available to executive members due to the voluntary nature of many of these organisations. Organisations vary in terms of their organisational structure, their function and purpose.

The Working Group acknowledges the views expressed by participants that utilisation of this framework and its accompanying self assessment survey were useful tools to guide governance practice. Respondents to the survey expressed the view that involvement in this project has heightened their awareness and understanding of governance issues, and ongoing access to these standards and supporting documentation would provide a useful guide to assist them to implement sound governance processes.

Acknowledgements

A range of people and organisations contributed to the Governance Standards Project for specialist nursing and midwifery organisations.

The contribution of individuals and support of the groups they represent are gratefully acknowledged.

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working group membership

1.1 Project overview

The set of governance standards developed through this project are intended to be used by nursing and midwifery specialist organisations as a guide to sound governance practice. To assist in using these standards, self-assessment criteria and supporting documents have also been developed, which together with the standards, provide a comprehensive governance framework.

The criteria for inclusion in this project were that nursing and midwifery organisations that were engaged in developing specialist nursing and midwifery guidelines, standards, and competencies. A mapping process was undertaken to identify those organisations and groups who met the above criteria and they were invited to participate in both the consultation and self-assessment phases of the project.

The Working Group then established the principles to support the governance framework, and conducted a literature review to gather information from a range of sources to guide the development of a set of sound governance standards.

The set of standards developed in this project have been adapted from the Good Governance Standards for Public Services (Good Independent Commission for Good Governance in Public Services 2004).

The process for developing the framework has involved the following stages:

1. Conducting a literature review
2. Identification of target organisations who were not NNO members
3. Development of draft principles, standards and criteria for sound governance for NNO and other nursing and midwifery groups
4. Wide consultation with the NNO and other organisations targeted for consultation
5. Development of a survey tool based on the principles, standards and criteria to determine how these criteria are currently being applied by NNO and other nursing and midwifery organisations
6. A self-assessment process by the target organisations using the survey tool
7. Analysis of the survey results
8. Development of a final report to the N³ET

Mapping of current governance practices of the NNO and other specialist nursing and midwifery organisations against the proposed standards was undertaken through a web-based survey that was placed on the N³ET website. The results of this survey have been detailed in Part 3 of this report.

1.2 Report

This report is structured in five parts:

Part 1: contains the executive summary, background, and overview of the project.

Part 2: presents a review of governance literature, an outline of the consultation process and the standards.

Part 3: documents the mapping process, outcomes of the survey and the discussion.

Part 4: contains the Glossary and References.

Part 5: contains the Appendices.

Background

An increasing national focus on the importance of workforce planning, including the coherent development of nursing specialties, prompted the referral of work from the Australian Health Ministers Advisory Council (AHMAC) to N³ET. Part of the work to do with nursing specialisation was specifically to develop a framework for the governance of specialist nursing and midwifery organisations in Australia. N³ET have responded by commissioning and funding this project, undertaken by the national coalition of organisations representing specialist nurses, the National Nursing Organisations, to develop a set of governance standards for specialist nursing and midwifery organisations.

National Nursing Organisations (NNO)

The National Nursing Organisations (NNO) are a coalition of more than fifty Australian national nursing organisations. (The national representative for midwifery, the Australian College of Midwives Inc (ACMI), withdrew from the membership of the NNO in April 2006. However as ACMI was a member at the commencement of this project, and therefore included for the duration of the project, the term NNO in this report should be taken to include to both nursing and midwifery members).

The NNO was formed in 1991, following a conference on the orderly development of nursing specialties in Australia, which was sponsored by the Australian Nursing Federation (ANF). The NNO meet biannually, and these meetings are now supported with funding from the Australian Government Department of Health and Ageing. The ANF provides the secretariat for the NNO,* and acts as a budget holder for this funding, which under the terms of the agreement is to 'enable the coalition to meet twice yearly providing a forum of discussion, consultation, and development of future directions in nursing'.

(*Under the terms of this agreement, the ANF provides the Department with a twice yearly report on the outcomes of each of the biannual meetings; any proposed initiatives and policies; a list of attending representatives; financial statements detailing expenditure; as well as an audited financial statement for the previous year).

The criteria for membership of the NNO are that members must be either: all enrolled and/or registered nurses; the nursing section of a multidisciplinary group; or a clear network of enrolled or registered nurses within such groups who can ensure a nurse representative and feedback to nurses in the practice area.

National Nursing Organisations (NNO)

continued

By definition, member organisations must have members in four or more states or Territories. The purpose of the NNO is to provide a forum for discussion, consultation, and development of future directions in nursing; and to act as a lobby group at a national level. The Terms of Reference for the group are: to identify areas of common interest or concern to the national nursing organisations; to provide a forum for discussion and consultation on matters of importance to the nursing profession; to achieve consensus between the nursing organisations on identified issues or concerns; to effectively contribute to public discussion on matters of importance to the nursing profession; to plan steps for united action in areas of interest or concern; and to lobby key stakeholders to ensure that they are aware of the views and priorities of the National Nursing Organisations.

The National Nursing Organisations represent a diverse group of nursing organisations. At the commencement of this project, there were 53 national nursing organisations, each focusing on a different area of specialist nursing or midwifery practice. The coalition includes groups of diverse organisational structures: organisations are variously titled as colleges, associations, universities; societies, councils, confederations, a federation, congress, networks, institutes and the nursing division of a federal government department. Some are incorporated but many are not. They vary in size - some are very small, and may have as few as 20 members, while the largest represents 150,000 members - over half the nursing workforce. Some are set up to be principally networks for dissemination of information; others indicate a broader range of functions and purposes including: to promote and/or provide education; promote the profession and specifically their individual specialty through professional representation; promote scholarship; advance knowledge; provide a forum for collegial support; maintenance and improvement of professional standards; initiate and support research; communicate with colleagues; provide leadership; promote public confidence and professional recognition; provide advice; participate in policy development; develop and promote new health care initiatives; advocate for members; enhance clinical expertise; develop and publish educational materials; develop partnerships and strategic alliances; provide and facilitate professional development; consult with government; and raise community awareness.

Previous NNO initiatives include: submissions to inquiries/reviews (for submission to the National Review of Nursing Education see www.dest.gov.au/archive/highered/nursing/sub/108.pdf); publications (the Criteria for Specialties in Australia and Principles of Credentialing, reviewed in 2004, describes and defines terms generally adopted for nursing practice in Australia); and the development of Consensus Statements (see www.anf.org.au/nno).

NNO meetings are held twice every year. A meeting is held in Sydney in May and in Melbourne in October. A chairperson is selected by the NNOs every four years and that person is a representative of one of the National Nursing Organisations. The current chairperson is Rosemary Bryant, the executive director of Royal College of Nursing, Australia. The NNOs aim to include all member organisations in the processes leading to decisions and have a consensus process for achieving outcomes. Organisations not meeting the membership criteria may apply to attend NNO meetings as observers.

2.1 Introduction

Nursing and midwifery constitutes the greatest proportion of health care professionals who are responsible for providing direct patient/client care.¹ Together they are large, complex professions that have a significant impact on the quality and safety of patient/client care and the outcomes of that care.

As with all professions, nursing and midwifery are in constant evolution and this means that the environment in which nurses and midwives practice and develop is complex and ever changing. This is due to these professions being part of a health system that is both labour and technology intensive, geographically dispersed, and focused on trying to meet the community's diverse health care needs. In line with the rapid growth in specialised knowledge in all health disciplines, there has been a rise in the number of non-government special interest groups, organisations and colleges representing the health professions.^{2,3}

In 2005 the National Nursing and Nursing Education Taskforce (N3^{ET}) identified that increasingly, specialist nursing and midwifery practice standards (such as competency statements and specialist advanced practice standards) were being developed from within the nursing and midwifery disciplines rather than by regulatory authorities.

Nurses and midwives are expected by the community to be competent to provide health care safely. At the same time widely publicised adverse events have occurred within the health sector, which have resulted in greater scrutiny by the public. This trend is evident in the areas of professional regulation, practice and education.^{4,5} Against this expectation, there is evidence that the governance of professional organisations is also subject to new levels of public accountability and scrutiny. For example, a recent review of specialist medical colleges in Australia found varying levels of compliance with a framework based on principles of transparency and accountability, procedural fairness and stakeholder participation.⁶

Professional and political debates and the accompanying media scrutiny regarding governance of organisations representing the interests of professionals in Australia have at least four drivers:⁷

1. A dramatic rise in the number of non-government special interest groups, organisations and colleges;^{8,9}
2. A shift where governments are conceding a number of roles to these special interest groups, organisations and colleges;¹⁰
3. A number of major corporate failures in several countries including Australia;¹¹ and
4. An increasing expectation from the community that the internal processes used by specialist groups to develop and maintain standards are open to review and scrutiny by other professional groups as well as by consumers.^{12,13}

In this environment, it is therefore timely and appropriate that nursing and midwifery organisations consider their governance practices, and take steps to demonstrate accountability for their governance to the wider community. Developing a framework for governance with an agreed set of 'sound governance' principles for nursing and midwifery specialist organisations is a strategy to ensure continued public confidence in these professions.

Defining governance

Governance is a general term for how the board/governing body directs and oversees the business of an organisation. Governance refers to the mechanisms in place to ensure: the mission of the organisation is fulfilled; legal compliance; and the management of conflict of interest and the prevention of fraud and other improper or unlawful behaviour. It encompasses the organisation's structures, culture, policies and processes and accountability mechanisms; the way business is conducted; decisions are made; and stakeholder relationships are managed.¹⁴

The aim, or the vision, is that an organisation practising sound governance will work to:

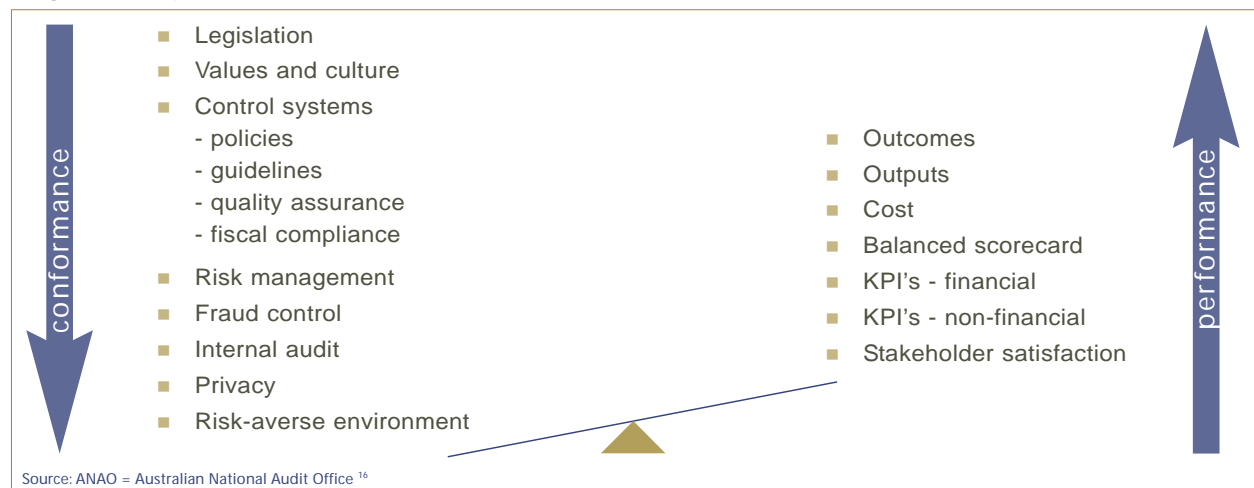
1. minimise risk,
2. improve quality,
3. benchmark,
4. make informed decisions, and
5. deliver a consistently high service to its membership, stakeholders and the wider community.¹⁵

According to Barrett (2005), there are two main governance requirements for organisations:

- **Performance** - whereby the organisation uses its governance arrangements to contribute to overall performance and the delivery of its goods, services or programs; and
- **Conformance** - whereby the organisation uses its governance arrangements to ensure it meets the requirements of the law, regulations, published standards and community expectations of probity, accountability and openness.

The role of the board/governing body is to ensure a balance between performance and conformance (See diagram 1).

Diagram 1: The performance / conformance nexus



These two requirements for governance are discussed further using the elements of sound governance as a framework.

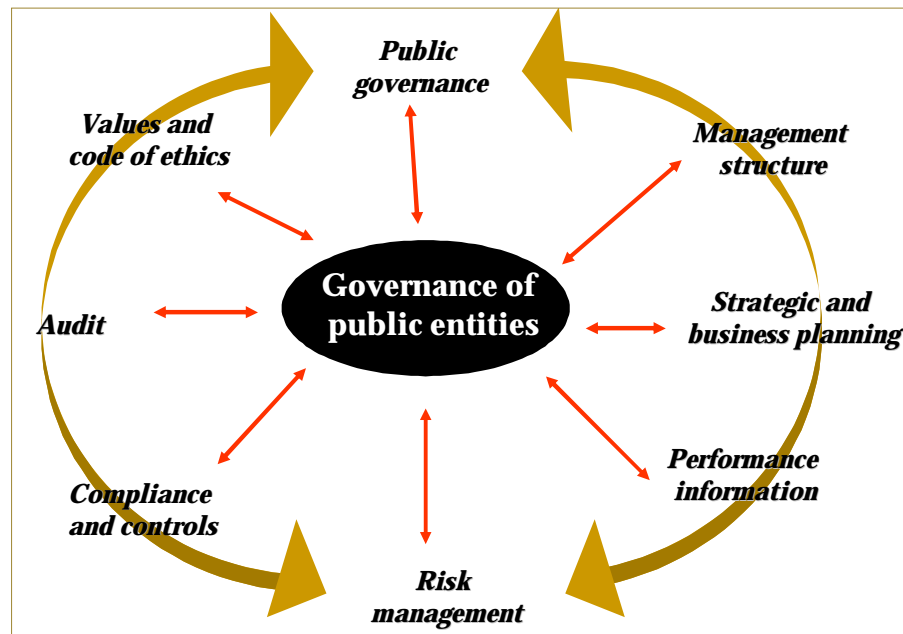
Elements of sound governance

The common elements for organisations practising sound governance are the existence of:

- a management structure;
- strategic and business planning;
- performance management;
- risk management;
- compliance and controls;
- auditing; and
- values and codes of ethics.¹⁷

The diagram below (diagram 2) illustrates the interaction of the common elements for sound governance.

Diagram 2: Elements of governance of public sector entities



Source: ANAO = Australian National Audit Office ¹⁸

On the following page is a description of each of the elements.

Management structure

Management structure is: 'Whoever governs exercises ultimate authority within organisations and is finally held accountable for overall organisational performance by stakeholders. In essence, those who govern authorise what organisations do. Executives manage organisations by virtue of the authority delegated to them by those who govern'.¹⁹

Strategic and business planning

An organisation's corporate plan sets the organisation's direction. Corporate plans articulate an organisation's vision, mission, objectives and values, as well as provide the framework for achieving these. To successfully plan, an organisation needs to set priorities, performance indicators and reporting requirements within this framework.²⁰

Performance management

Performance can be measured against the achievement of the stated goals and objectives. To this end, an evaluation and reporting framework of outcomes, outputs and resource requirements forms the basis for key performance indicators - KPIs.²¹

Risk management

An organisation may be prevented from achieving its business objectives due to an adverse event. Risk management is not a separate process but part of good management and is comprised of three principal steps: risk identification, risk analysis and risk mitigation. Effective risk management in the not-for profit sector means making decisions in accordance with legal requirements; consistent with sound values and ethics; and considering social, environmental and economic implications.²²

Effective systems of internal control involve an organisation's ability to respond quickly and appropriately to emerging risks. For example, any weaknesses in the system should be reported promptly and corrective action taken without delay.²³

Compliance and controls

A conformance and compliance framework however is just a means to an end and not a goal in itself. A robust compliance framework should ensure that the organisation is accountable for what it does, but be flexible enough to allow for the achievement of performance targets, as well as providing scope for innovation and quality improvement. The challenge for any organisation is to get the right balance between performance and conformance at any point in time.

Audit

A critical aspect of sound governance is undertaking audits. The literature highlights the importance of auditors remaining independent 'in fact and in perception' from the organisation to enable them to provide unbiased, true and credible audit opinions. Auditors should have the freedom to express their opinions without pressure or fear of personal consequences. The chair/chief executive and board/governing body of management (if applicable) are responsible for establishing control structures to ensure corporate resources are used effectively and appropriately toward achieving corporate goals and objectives. The establishment of an audit committee and the selection of internal and external auditors are central to discharging this responsibility.²⁴

Values and codes of ethics

Underpinning sound governance are sound values and ethics. In a robust and accountable organisation, ethics and integrity permeate all decision-making and action at all levels.²⁵ Sound governance is based on a clear code of ethics, and personal integrity exercised by the board/governing body, management and staff. The code of ethics needs to be communicated openly to the organisation's membership. Ethical structures need to be established to ensure that all levels of the organisation are aware of and comply with:

- codes of ethics and codes of conduct;
- processes for the performance of duties;
- rules for the management of resources;
- guidelines on the use of information;
- standards of behaviour; and
- procedures to deal with perceived or real conflicts of interest.²⁶

Principles of sound governance

A sound governance framework should possess an agreed set of 'sound governance' principles that are in turn underpinned by an agreed set of 'sound governance' standards that provide clarity and direction to ensure appropriate decision-making and behaviour. There are a number of common elements within the set principles underpinning sound governance.²⁷ Each sector to which governance applies: public, for-profit and not-for-profit, has unique drivers and needs. This influences what organisational governance model is adopted, the principles underpinning the model, and the way in which a board/governing body functions.

Barrett (2005) has mapped a range of principles across four sets of sound governance standards across all sectors (see table 1). A fifth standard, from Enterprise Care Consulting Group, has been included as part of this review as its needs and drivers are similar to those of the NNO and other nursing and midwifery organisations. The Australian Medical Specialty Colleges governance principles have also been included in table 1 due to their importance in the Australian context. The standard sets outlined below are described further in Appendix 2.

Table 1: Comparison of 'principles' of governance

ANAO (public)	King (South Africa) (for-profit)	Standards Australia (public and for-profit)	OECD	Enterprise Care (not-for-profit)	Medical Speciality Colleges Framework
Accountability	Accountability	Goodwill	Accountability	Accountability	Accountability
Transparency	Transparency	Transparency	Transparency	Transparency	Transparency
Integrity	Independence	Honesty	Fairness	Integrity	Integrity
Stewardship	Discipline	Legal	Responsibility	Legal	Fairness
Leadership	Fairness	Fairness and balance		Leadership	Stakeholder participation
Efficiency	Responsibility	Dignity		Efficiency	
	Social responsibility			Social responsibility	

Report on Corporate Governance in South Africa, 2002. Standards Australia, Australian Standard: Good Governance Principles, 2003. OECD, Corporate Governance Advisory Group, 2002. Enterprise Care Consulting Group. The not for profit Board and Management Guide, 2005. Australian Competition and Consumer Commission and Australian Health Workforce Officials' Committee, 2005.

From a comparison of the common governance principles across the different sectors, this project has identified eight sound governance principles as appropriate for underpinning a sound governance framework for NNO and other specialist nursing and midwifery groups. These principles are consistent across the three sectors that organisations exist (government, for-profit and not-for-profit).

review and development of standards - part two

part two

elements of sound governance

Guiding principles

Sound Governance Principles

- Accountability
- Transparency
- Integrity
- Legality
- Leadership
- Stewardship
- Efficiency
- Social Responsibility

Definitions of principles identified for this project

Accountability	Organisations and the individuals within them are responsible for their decisions and actions, and where they are subject to external scrutiny by obeying the law. ²⁸
Transparency	An organisation's management is effective at: <ul style="list-style-type: none">■ making necessary information available in a candid, accurate and timely manner,■ avoiding conflicts, which is necessary to ensure that stakeholders have confidence in the decisions and actions of organisations and the individuals within them.²⁹
Integrity	Having ethical values, based on honesty, objectivity and performance measurement; and high standards of propriety and probity underpinning stewardship of funds and resources. ³⁰
Legality	An organisation puts in place appropriate processes to ensure they are legally compliant and are preventing fraud and other improper or unlawful behaviour. ³¹
Leadership	Leaders within the organisation are responsible for ensuring implementation, evaluation and improvement of sound governance structures and processes; and enacting and influencing sound governance through their own performance and behaviours. ³²
Stewardship	Responsibility for taking proper care of resources entrusted to one. ³³ The conducting, supervising, or managing of something, especially the careful and responsible management of something entrusted to one's care. ³⁴
Efficiency	An organisation is effective and independent and makes the best use of its resources to achieve the goals of the organisation, and engages in risk management. ³⁵
Social Responsibility	An organisation places a high priority, when responding to social issues, on non-discriminatory, non-exploitative, and responsible ethical standards with regard to environmental and human rights issues. ³⁶

Summary

This review has considered the literature available in developing an agreed set of sound governance principles for organisations representing nursing and midwifery interests. Although eight different models of governance have been identified in theory, in practice there is agreement that organisations use combinations of these models.

In undertaking the review a range of sources were used including; reference works, journals and the internet. The databases used were CINAHL and the Google web search engine. To identify relevant literature the following search terms were used:

Good/Sound +/- Corporate +/- Governance Standards +/- Framework +/- Guidelines +/- Policy +/- Health +/- Not-for-profit +/- Public +/- Organisation. A number of definitions were also identified using Google. These were: *Audit, Corporate Governance, Performance Management, Risk management* and *Strategic*.

Six sets of governance standards have been reviewed for the principles of sound governance; from the Australian National Audit Office, King Report on Corporate Governance, Standards Australia, Organisation for Economic Co-Operation and Development, Enterprise Care and The Australian Medical Specialty Colleges.^{37,38,39,40,41,42}

The review has identified eight ethical principles as appropriate for NNO and other nursing and midwifery groups, and developed a set of standards based on: Accountability, Transparency, Integrity, Legality, Leadership, Stewardship, Efficiency, and Social Responsibility.

This section has reviewed the literature on governance. The next section will discuss a set of standards for the NNO and other specialist nursing and midwifery organisations.

2.2 Consultation process

Identifying key stakeholders

The NNO and N³ET recognise that not all specialist nursing and midwifery organisations are members of the NNO. The process to develop these standards has therefore also included identifying and consulting with non-NNO members. The resulting standards have been designed to guide NNO and other specialist nursing and midwifery groups in Australia, however are considered to be equally applicable to all nursing and midwifery organisations, or indeed any organisations representing health professionals.

Phase 1 of the project included identifying those nursing and midwifery organisations and groups who were not members of the NNO that met the criteria for inclusion. These were organisations involved in the development of professional standards, guidelines and competencies to guide the practice of speciality nurses and midwives (see Appendix 4 for NNO members and other organisations identified for consultation). At the commencement of this project there were 53 member NNOs and three additional groups who were actively involved in NNO activities. In addition, another 21 groups were identified following a web-based search.

To identify this group of other key stakeholders it was agreed to use a number of methods including an internet search using the following criteria:

specialty + nursing/midwifery + competencies + guidelines + best + practice + standards + Australian Capital Territory + New South Wales + Victoria + South Australia + Western Australian + Northern Territory + Queensland + Tasmania + NNO + N³ET

A total of 1151 items were identified to review for nursing and 321 for midwifery.

The large number of items identified and the limited time frame led to concerns about the value of searching for every potential stakeholder given the imperative to progress the project within the time frame. A review of the internet key word search indicated that, in addition to the NNO, other State-based specialist nursing and midwifery organisations were developing specialty nursing or midwifery standards, guidelines and competencies, as well as State and Territory health departments, university departments and regulatory authorities.

Following discussions with N³ET it was determined that the project consultation include the health departments, represented by the Chief Nursing Officers; and the Australian Nursing and Midwifery Council who would represent the nursing and midwifery regulatory authorities. The Council of Deans of Nursing and Midwifery (Australia and New Zealand), while they represent universities nursing schools on the NNO, were approached separately to encourage their participation in the project. Other State-based specialist organisations were also included.

In addition, RCNA also conducted an exhaustive analysis of the world wide web to identify other groups. The list of identified stakeholders is attached at Appendix 3.

Although it was agreed that other stakeholders who met the criteria for inclusion could be identified during the project (snowball sampling) this did not occur.

Also included in Phase 1 of the project was consultation with NNO members and other key organisations identified on draft governance standards and criteria. Feedback from this consultation was incorporated and resulted in the revised six standards and criteria.

Based on the mapping process, a list of self-assessment criteria was developed that were considered critical to sound governance. These criteria directly link to the survey tool and have been developed to assist individual organisations and groups to undertake self-assessment of their governance arrangements.

Feedback on Standards

Criteria to support
Standards

review and development of standards - part two

part two

background to standards

2.3 Background to standards

The structural approach to developing the standards involved defining a vision, identifying guiding principles, and developing a set of governance standards and accompanying criteria for self-assessment. The principles and vision provide the framework for the standards and articulate the requirements for sound governance, while the accompanying criteria provide a guide to assist organisations to focus their activities. In addition, the criteria are a tool for self-assessment, which can be used by organisations to determine how sound their governance arrangements are and how well they are achieving the vision.

The literature review identified no sound governance standards specifically developed for nursing and/or midwifery professional groups. However, six standards for sound governance from the Independent Commission for Good Governance in Public Services (2002) were identified as presenting an appropriate basis from which to work.

These standards were modified to meet the needs of the contemporary Australian landscape in which the practice of sound governance of professional organisations is increasingly expected by governments and the community, and against a background of increasing scrutiny with regard to the legal and fiduciary responsibilities of organisations representing the interests of professional groups. They are deliberately broad so that they can encompass the wide range of organisational structures, functions and purposes of these groups.

The vision

The vision provides a framework for NNO and other nursing and midwifery organisations and groups. This vision is that sound governance practices are used to minimise risks and improve performance while considering all available and current evidence to make informed decisions and deliver a consistently high service to the membership, stakeholders and the wider community.

The principles

Having considered the themes identified in the literature review and the unique drivers and needs of nursing and midwifery organisations, the Working Group identified a set of principles that could underpin a framework for the governance of nursing and midwifery specialist organisations. These principles are: accountability, transparency, leadership, integrity, legality, stewardship, efficiency and social responsibility. These principles are linked to specific standards to demonstrate how they are integral to ensuring sound governance.

The standards

The aim of sound governance standards is to provide guidance with regard to an organisation's management structure, strategic and business planning, performance management, risk management, compliance and controls, auditing and values and code of ethics.

The criteria

The criteria aimed to provide a useful guide to assist in developing and measuring processes identified in the review as important for sound governance practices. Before developing the self-assessment criteria, a link was made between each standard and the underlying principles. (see Appendix 2).

2.4 Summary of standards

Standard 1. Being clear about the organisation's purpose and outcomes to the membership, stakeholders and wider community

Standard 1 is achieved by:

1. formulating and disseminating documentation that demonstrates the organisation's purpose and its responsibility to its membership, stakeholders and the wider community.

Standard 2. Performing effectively and demonstrating accountability through clearly defined functions and roles

Standard 2 is achieved by:

1. being explicit about the functions of the board/governing body;
2. being clear about the responsibilities of the membership, and board/governing body members, and making sure that those responsibilities are carried out through internal and external auditing; and
3. being clear about relationships between board/governing body members, the membership, stakeholders and the wider community.

Standard 3. Promoting values for the whole organisation and demonstrating the principles of sound governance

Standard 3 is achieved by:

1. putting organisational values into practice;
2. the performance and actions of the chair/executive officer exemplifying effective governance; and
3. considering the wider social issues.

Standard 4. Taking lawful, informed, transparent decisions and managing risk

Standard 4 is achieved by:

1. being rigorous and transparent about processes and how decisions are taken;
2. having and using good quality information, advice and support;
3. making sure that an effective risk management system is in operation;
4. ensuring legislative compliance; and
5. having codes of conduct and by-laws.

2.4 Summary of standards

Standard 5. Developing the capacity and capability of the board/governing body to be effective

Standard 5 is achieved by:

1. ensuring that the appointed/elected chair/executive officer/s have, or have access to, the skills, knowledge and experience to perform effectively;
2. developing the capability of people with governance responsibilities and evaluating their performance, as individuals and as a group;
3. achieving a balance between continuity and renewal in the membership of the board/governing body; and
4. reviewing and actively encouraging enhanced board and management effectiveness.

Standard 6. Engaging the membership, stakeholders and wider community and making accountability real

Standard 6 is achieved by:

1. understanding formal and informal accountability relationships;
2. taking an active, planned and accountable approach to dialogue with the membership and wider community;
3. taking an active, planned approach to responsibility towards staff/volunteers; and
4. engaging effectively with the membership, stakeholders and the wider community.

2.5 Standards

Standard 1

Standard 2

Standard 1

Being clear about the organisation's purpose and outcomes to the membership, stakeholders and wider community

Standard 1 is achieved by formulating and disseminating documentation that demonstrates the organisation's purpose and its responsibility to its members, stakeholders and the wider community.

All principles underpin this standard and particularly:

Accountability	Transparency	Efficiency	Social Responsibility
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Criteria for Standard 1

The board/governing body:

- has a written Mission Statement and other documentation detailing the organisation's aims and purpose;
- has a written Constitution;
- has documentation relating to the organisation's responsibility to members and the broader community;
- has processes in place to check that members and stakeholders receive a high quality service;
- has an audit committee or uses audit tools to report on the quality of service provided to members; and
- publishes documents mentioned above in the public domain.

Standard 2

Performing effectively and demonstrating accountability through clearly defined functions and roles

Standard 2 is achieved by:

1. Being explicit about the functions of the board/governing body.

The primary functions are to:

- establish the organisation's strategic direction and aims through the constitution;
- ensure accountability to the membership and stakeholders for the organisation's performance; and
- ensure that the organisation is managed with probity and integrity.

review and development of standards - part two

part two

standard two | criteria for standard two

Standard 2 *continued*

Ways of achieving these primary functions include:

- ensuring that the interests of members, stakeholders and the wider community are considered during decision making; and
 - forging strategic partnerships with other organisations.
2. Standard 2 is also achieved by being clear about the responsibilities of the members and board/governing body members, and making sure that those responsibilities are carried out through internal and external auditing.

The members:

- contribute to strategy, bringing a range of perspectives to strategy development and decision making; and
 - hold the board/governing body members/executive to account for its performance in fulfilling those responsibilities, including through purposeful challenge and scrutiny.
3. Standard 2 is also achieved by being clear about relationships between board/governing body members, the membership, stakeholders and the wider community.

All principles underpin this standard and particularly:

Accountability	Leadership	Integrity
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Criteria for Standard 2

The board/governing body has:

- clearly defined functions;
- a clearly documented strategic direction and aims for the organisation;
- documented processes for:
 - decision making;
 - managing conflict of interest;
 - evaluating the performance of the organisation;
 - assessing its own performance; and
 - ensuring that the interests of members, stakeholders and the wider community are considered during decision making.

Members have:

- a clear understanding of the role and responsibilities of the board/governing body; and
- a clear idea of their roles and responsibilities.

Standard 3

Standard 3

Promoting values for the whole organisation and demonstrating the principles of sound governance.

Standard 3 is achieved by:

1. putting organisational values into practice;
2. performance and the actions of the chair/executive officer exemplifying effective governance; and
3. considering the wider social issues.

All principles underpin this standard and particularly:

Accountability	Leadership	Integrity	Social Responsibility
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Criteria for Standard 3

The board/governing body has:

- a clear set of values documented for the organisation;
- a written set of values, ethical standards and/or code of conduct, for example equal opportunity and anti-discrimination policies; and
- documented expectations of the role and behaviour that the Chair/Executive Officer must uphold and the ways that individuals uphold and exemplify the values of the organisation.

Standard 4

Standard 4

Taking lawful, informed, transparent decisions and managing risk.

Standard 4 is achieved by:

1. being rigorous and transparent about processes and how decisions are taken;
2. having and using good quality information, advice and support;
3. making sure that an effective risk management system is in operation;
5. ensuring legislative compliance; and
6. having codes of conduct and by-laws.

A risk management system should consider the full range of the organisation's activities and responsibilities, and continuously check that various good management processes are in place, including that:

- strategies and policies meet the organisation's values and are regularly reviewed;
- strategies and policies are put into practice;

review and development of standards - part two

part two

criteria for standard four

Standard 4 *continued*

- strategies, policies, guidelines, standards, and competencies are developed using the best available evidence;
- performance is regularly and rigorously monitored and effective measures are put in place to manage performance issues;
- laws and regulations are complied with;
- information used is relevant, accurate, up-to-date and timely and financial statements and other information published by the organisation are accurate and reliable;
- financial resources are managed efficiently and effectively and are safeguarded; and
- human and other resources are appropriately managed and safeguarded.

All principles underpin this standard and particularly:

Accountability	Stewardship	Integrity	Legality	Social Responsibility
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Criteria for Standard 4

The board/governing body:

- has a documented:
 - transparent process about how decisions are made;
 - approach to resource allocation;
 - risk management system in operation;
 - process to ensure high quality services are delivered effectively and efficiently;
 - process by which performance of members of the executive/governing body is monitored;
 - process to regularly review policies and procedures; and
 - approach to managing performance issues.
- have processes to ensure that:
 - good quality information, advice and support is used in making decisions;
 - organisational policies and procedures are documented and in place;
 - financial statements are published by the organisation; and
 - financial resources are managed efficiently.
- have established:
 - processes for developing, validating and reviewing guidelines and standards through the evaluation and utilisation of best available evidence; and
 - documented processes to ensure human and other resources are appropriately managed.

Standard 5

Standard 5

Developing the capacity and capability of the board/governing body to be effective.

Standard 5 is achieved by:

1. ensuring that the chair/executive officer/s have, or have access to, the skills, knowledge and experience to perform effectively;
2. developing the capabilities of people with governance responsibilities and evaluating their performance as individuals and as a group;
3. balancing between continuity and renewal in the membership of the board/governing body; and
4. reviewing and actively encouraging enhanced board and management effectiveness.

All principles underpin this standard and particularly:

Legality	Efficiency	Stewardship	Social Responsibility
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Criteria for Standard 5

The board/governing body:

- has documented processes that:
 - oversees the appointment of board/governing body members; and
 - makes sure that the appointed and elected chair/executive officers have the skills, knowledge and experience they need to perform well, or have access to these skills.
- has a documented process of induction for new board/governing body members;
- has a documented process by which board/governing body members can further develop their skills and update their knowledge throughout their period of membership;
- holds its members to account for their contribution by conducting regular performance reviews;
- has processes to support forming and maintaining relationships with other organisations;
- has a documented review process to monitor its performance as a whole; and
- has a documented process for the renewal and removal of its own members.

Standard 6

Standard 6

Engaging the membership, stakeholders and wider community and making accountability real.

Standard 6 is achieved by:

1. understanding formal and informal accountability relationships;
2. taking an active, planned and accountable approach to dialogue with the membership and wider community;
3. is achieved by taking an active, planned approach to responsibility of staff and volunteers; and
4. is achieved by engaging effectively with the membership, stakeholders and the wider community.

All principles underpin this standard and particularly:

Legality	Efficiency	Stewardship	Social Responsibility
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Criteria for Standard 6

The board/governing body:

- has a documented:
 - systematic approach to ensure accountability i.e. a process for the independent verification of financial functions, reports and business rules for all financial transactions;
 - process by which it seeks the views of stakeholders e.g. a policy on consultation processes to inform decision-making;
 - process to ensure that it responds quickly and responsibly to comment from the organisation's members;
 - communication strategy with stakeholders and the wider community;
 - strategy to ensure accountability to the organisation's members;
 - strategy to ensure accountability to the wider community;
 - strategy to outline the organisation's responsibility to staff;
 - strategy to engage effectively with the organisation's members; and
 - plans to review its governance arrangements in the next 12 months.
- annually publishes:
 - the organisation's purpose, strategy, plans and financial statements; and
 - information about the organisation's outcomes and performance.

The above Standards have been adapted from the following source: The Independent Commission for Good Governance in Public Services Good Governance Standard for Public Services Standards, 2004

2.6 Discussion

The standards, principles and supporting criteria outlined above were developed to encompass the wide range of needs of organisations and groups that form the NNO and other stakeholders.

The response to the draft documentation during the initial consultation phase was generally positive, however as only 12.5% of the target group responded during the consultation phase, caution must be used when assessing how well supported the documents are by the target groups, or how applicable they are to the organisations who could potentially use them.

Various strategies were implemented to ensure as high a response rate as possible. The NNO and stakeholders were emailed at weekly intervals during the project to make sure they were aware of the process and timeframe and asked to nominate specific personnel to participate in the review phase. These measures were undertaken as an acknowledgement of the fact that many NNO offices are staffed only periodically by volunteers and several days or even weeks may pass in some cases before emails are checked.

Possible reasons for the low response rate were the tight time frame for stakeholders to comment on the draft documents (five working days), that the consultation phase also coincided with the Easter holiday period and the particular circumstances of most stakeholders which limited their capacity to respond promptly.

In summary, Part 2 of this project reviewed the current literature on governance and described a consultation process with key stakeholders which developed a set of standards and criteria based on eight sound governance principles.

Part 3 of this project will describe the process of mapping the principles against the current governance practices of NNO and other nursing and midwifery organisations identified as stakeholders in this project.

3.1 Background

The second objective of this project was to assess the current governance arrangements of NNO members and other key nursing and midwifery bodies. This was achieved by using a self-assessment survey tool to evaluate current governance practice against the standards.

This section presents methods used for organisations to self-assess individual governance practice against the six governance standards. In particular, it describes the development of the self-assessment tool, the inclusion criteria which identified the organisations invited to participate and the data collection. It outlines the process of data analysis, presents the results, and concludes with a discussion of the findings.

3.2 Mapping methodology

The method used to map current stakeholders governance arrangements was an online multi-choice and open-ended question self-assessment and feedback survey. The survey tool assisted respondents to measure performance of their organisations against each of the six standards and the accompanying criteria.

The survey asked questions specific to each of the criteria identified in each of the governance standards, resulting in a total of 69 questions that collected information regarding current governance practice.

The survey also collected demographic data, respondents' views on sound governance; transparency of decision-making processes; any future plans regarding governance practices; and any barriers to the implementation of the standards.

The set of questions were devised to allow respondents to measure the performance of their organisation against each of the proposed standards. An example of the type of questions used to allow self-assessment against the standards is provided (Box 1). Response options for these questions were 'Yes,' 'No,' and 'Don't know,' with respondents given the opportunity to provide additional written comments regarding each set of questions.

Box 1. A sample of some of the questions used in the survey tool to allow self-assessment against Standard 2.

Standard 2 Performing effectively and demonstrating accountability through clearly defined functions and roles

Survey Questions

Does the board/governing body as a whole have its own clearly defined functions?

Does the board/governing body have documented processes for decision making?

Are there processes to provide members of the board/governing body with a clear idea of their roles and responsibilities?

3.2 Survey tool development

Analysis

The survey also assessed respondents' attitudes toward sound governance by asking how important it is for a board/governing body to perform specific functions, such as 'to be accountable to stakeholders?' Respondents were required to indicate how important they considered the functions to be using four options - 'essential,' 'preferable,' 'sometimes necessary' and 'not necessary.' In addition, the survey collected background information from respondents about their organisation and whether or not it is involved in the development of guidelines, competencies or standards for specialist practice.

Open-ended questions were used to examine challenges and barriers to the implementation of sound governance, as well as strategies that were used to overcome such challenges.

Finally an opportunity was provided for organisations/groups to share documents and information to assist others in strengthening their governance processes.

The survey was made available as an on-line tool, whilst also distributed as an email attachment during the mapping phase as a number of potential respondents experienced difficulties in accessing the website. A communication strategy was implemented to encourage organisations to consider participation in the project, which included reminder emails and attempts were made to contact every stakeholder by telephone to increase the response rate.

De-identification of participants and pooling of comments and responses maintained confidentiality. Electronic data was placed in a restricted access database.

All data from the web-based survey was downloaded into an Excel spreadsheet and the emailed survey responses were manually entered into the database. A random crosscheck was not possible with the web-based submissions; however, the emailed survey responses were manually cross checked to ensure the accuracy of data entered. This was conducted to avoid errors that might have occurred in manual transcription.

Descriptive statistics and frequencies were calculated for all demographics. Further analysis was conducted with respect to whether the organisation/group was developing or were planning to develop standards; competencies or guidelines for specialty practice; respondents' attitudes to governance; types of governance processes already in place; the respondent's attitudes with regard to the responsibilities of their organisational boards or governing bodies; the practices of organisations with respect to engaging with external stakeholders; risk management; challenges or impediments to the implementation of governance practices; and future directions and planning with respect to governance.

An overall summary of compliance level was calculated for each of the 6 standards by adding the 'Yes' proportions within each table and then dividing this by the total possible number of yes responses. However, given the low response rate these results need to be considered cautiously.

Access to the electronic database was restricted to the project team. In order to maintain confidentiality, only de-identified comments and pooled data will be presented in this report.

mapping process - part three

part three

population and sample | self assessment against the standards

3.3 Mapping results

At the commencement of this project there were 53 member NNO and three additional groups who were actively involved in NNO activities. In addition, another 21 groups were identified across Australia as potentially being engaged in the development of standards, competencies and/or guidelines for specialist practice. These organisations/groups were representative of all the domains of nursing and midwifery practice and were not restricted to clinical specialties.

Population and sample

Twenty-four (31%) of potential respondents submitted a response to the survey.

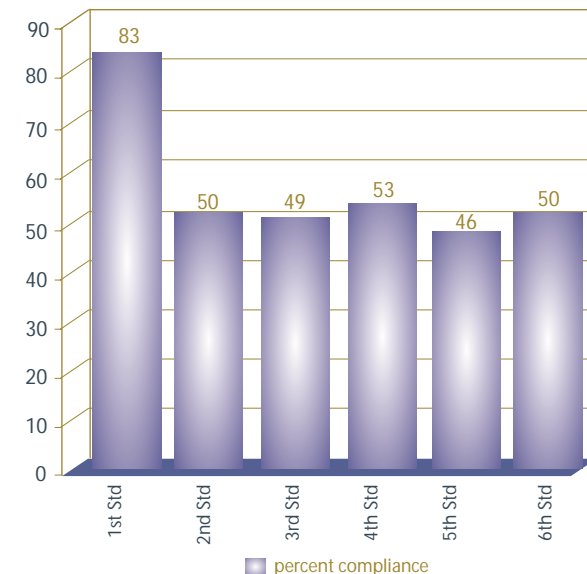
The background information revealed that the responding stakeholder organisations ranged in size from a membership of 30 to 150,000, with a median of 615 members and a mean number of 7,212 members. It should be noted however, that these results reflect a disproportionate response rate from larger organisations, as many NNO members are much smaller than these figures suggest. A total of 20 (83%) of the 24 organisations operated at the national level, with 3 (13%) operating primarily at a State level, while one (4%) organisation indicated that it operates across both levels. The length of time that organisations had been in existence varied considerably, ranging from 3 to 81 years, with a median of 15 years. The majority of organisations were incorporated (n=18, 75%), with five (21%) organisations being limited and one respondent being unaware of their organisation's status.

A total of 20 (83%) organisations reported they were currently involved in the development of guidelines, competencies or standards for specialist practice, an additional two (8.5%) organisations indicated their board/governing body intended to undertake such a process. The remaining two (8.5%) organisations indicated that they were not involved in the development of guidelines, competencies or standards for specialist practice.

A summary of the outcome of mapping process against each of the six standards is presented in graph 1

Overall, organisations are performing well against Standard 1 with 83% indicating that they have relevant processes in place.

Performance by organisations against the other five standards is less favorably demonstrated by this graph, however, within each standard, organisations reported performing well against some of the specific criteria. For this reason, the relatively crude overall summary results in graph 1 should be considered with caution and with consideration to the more detailed information presented below and in the subsequent discussion.



Self assessment against the standards

For ease of reporting, responses to the set of questions relating to each of the six standards are presented in the following tables (tables 1-6).

As shown in table 1, the majority of organisations were performing well against Standard 1. All (100%) of the organisations reported that their board or governing body had a clear understanding of the organisation's purpose, a written Mission Statement or similar document, a written Constitution and documented processes to deal with internal matters such as the conduct of general meetings, appointment of directors, accounts and audits. The majority of organisations (76%) also had protocols relating to the rights and duties of members and a set of documents relating to the organisation's responsibilities to members and the broader community. However, only one-third of organisations (33%, n=8) reported having processes in place to determine whether or not the membership receives a high quality of service.

Table 1

Results of the self assessment against Standard 1: *Being clear about the organisation's purpose and outcomes to the membership, stakeholders and wider community*

	Yes % (n)	No % (n)	Don't know % (n)	No response % (n)
In general, does the board/governing body have a clear understanding of the organisation's purpose?	100% (24)	0	0	0
Does the board/governing body have a written Mission Statement or other documents detailing the organisation's aims and purpose?	100% (24)	0	0	0
Does the board/governing body have a written constitution?	100% (24)	0	0	0
Does the board/governing body have protocols relating to the rights and duties of its members?	76% (18)	16% (4)	8% (2)	0
Does the board/governing body have articulated processes to deal with internal matters such as the conduct of general meetings, appointment of directors, accounts and audits?	100% (24)	0	0	0
Does the board/governing body have a written set of documentation relating to the organisation's responsibility to membership and the broader community?	76% (18)	16% (4)	8% (2)	0
If yes, are these available to members?	71% (17)	4% (1)	4% (1)	21% (5)
Does the board/governing body have processes in place to determine if the membership receives a high quality of service (i.e. an audit committee)?	33% (8)	59% (14)	8% (2)	0

Self assessment against the standards

Standard 1

Being clear about the organisation's purpose and outcomes to the membership, stakeholders and wider community

mapping process - part three

part three

standard two

Standard 2

Performing effectively and demonstrating accountability through clearly defined functions and roles

Performance against Standard 2 was not as strong (see table 2). While the majority of organisations (74%, n=17) indicated that the board/governing body had its own clearly defined functions, only 58% (n=14) had documented processes for decision-making. Only 33% (n=8) had documented processes for managing conflicts of interest; 25% (n=6) had documented processes to evaluate the performance of the organisation and as few as 12% (n=3) used external processes to assess the board's performance. However 67% indicated there were processes to provide members of the board with a clear idea of their roles and responsibilities; and 50% (n=12) had processes to ensure that the interests of members and stakeholders and the wider community were considered during decision-making.

Table 2

Results of the self assessment against Standard 2: *Performing effectively and demonstrating accountability through clearly defined functions and roles*

	Yes % (n)	No % (n)	Don't know % (n)	Comment / no response % (n)
Does the board/governing body as a whole have its own clearly defined functions?	74% (17)	22% (5)	4% (1)	4% (1)
Is one of the primary functions of the board/governing body to establish the organisation's strategic direction and aims?	84% (20)	8% (2)	8% (2)	0
Does the board/governing body have documented processes for decision making?	58% (14)	25% (6)	17% (4)	0
Does the board/governing body have documented processes for managing conflicts of interest?	33% (8)	46% (11)	17% (4)	4% (1)
Does the board/governing body have documented processes to evaluate the performance of the organisation?	25% (6)	63% (15)	12% (3)	0
Does the board/governing body use external processes to assess its own performance?	12% (3)	84% (20)	4% (1)	0
Are there processes to provide members of the board/governing body with a clear idea of their roles and responsibilities?	67% (16)	25% (6)	8% (2)	0
Are there processes to ensure that the interests of members, stakeholders and the wider community are considered during decision making?	50% (12)	38% (9)	12% (3)	0

Standard 3

Promoting values for the whole organisation and demonstrating the values of sound governance

As shown in table 3 which presents the data from Standard 3, 63% (n=15) of respondents indicated that their organisation had 'a documented set of values' while only 19% (n=4) had a documented code of ethics or conduct.

With regard to the conduct of the chair/executive officer, around two thirds of organisations (67% n=16) have expectations that the chair/executive officer must behave in ways that uphold and exemplify the values of the organisation. However, actual performance may be higher as some respondents indicated that while this was an expectation, it was not documented. One organisation indicated that they had an executive director job description and their new Charter will consider the expectations of the chair. One respondent indicated that the process of nomination to the board from members is 'seen as unbiased'.

Sixty-three percent of respondents indicated they did not have a documented code of ethics or code of conduct, however another twelve percent (n=3) indicated theirs was under review. One respondent noted that their organisation abides by the specialist code of ethics and the Australian Nursing and Midwifery Council code of conduct and could '*see no need to have additional ones that are more than those which we have stipulated in a comprehensive constitution.*' Another respondent stated that their organisation broadly addressed a set of values and a code of conduct, however, their policy and procedure manual probably did not address these individually.

Table 3

Results of the self assessment against Standard 3: *Promoting values for the whole organisation and demonstrating the values of sound governance*

	Yes % (n)	No % (n)	Don't know % (n)	Comment / no response % (n)
Does the board/governing body have a documented set of values for the organisation?	63% (15)	33% (8)	4% (1)	0
Does the board/governing body have a documented code of ethics or conduct?	17% (4)	63% (15)	8% (2)	12% (3) ♦
Does the organisation have expectations that the chair/executive officer must behave in ways that uphold and exemplify the values of the organisation?	67% (16)	21% (5)	12% (3)	0

♦ Indicated that their code of ethics is under review

mapping process - part three

part three

standard four

Standard 4

Taking lawful, informed,
transparent decisions and
managing risks

When assessing against Standard 4, table 4 shows that just over half (58%, n=14) of the respondents have a documented and transparent process about how decisions are taken. Respondents reported higher compliance with meeting and demonstrating their legal obligations (79%, n=19) and possessing documentation outlining how the organisation's resources are allocated (88%, n=21).

Sixty-seven percent (n=16) of respondents consider their organisation uses good quality information, advice and support in making decisions. Only 12% (n=3) of respondents reported that their organisations have a documented risk management plan. Fifty-eight percent (n=14) consider that the board/governing body ensures organisational policies and procedures are upheld, while 54% (n=13) have a documented process to regularly review policies and procedures.

One-third (n=8) of respondents reported that their board/governing body has documented processes to ensure the quality of services to members, or that these services are delivered effectively and efficiently (n=7). Only 17% (n=4) of organisations have a documented process by which the performance of members of the executive/governing body is monitored.

Organisations reported having measures in place to 'manage performance issues' in only twenty-five percent (n=6) of cases.

The majority of organisations ensure that financial statements published by the organisation are accurate and reliable (84%) and other information (for example reports or papers) they publish are also accurate and reliable (80%).

With regard to ensuring that financial resources are managed efficiently, again the majority (80%) reported doing so. However, only 54% (n=13) assessed whether human and other resources are appropriately managed, while 76% of respondents reported they did not have a documented risk management system in operation.

Finally, two-thirds of organisations (63%) reported having established processes for developing, validating and reviewing guidelines and standards through the evaluation and utilisation of best available evidence.

In the overall comments, one respondent indicated that 'such requirements are untenable for such a small organisation'. Another felt that some of these processes were not applicable, one reported they had parts and were in the process of developing a full risk management plan and another reported they focused on financial processes and needed to work on the other areas.

Standard 4

Taking lawful, informed, transparent decisions and managing risks

Table 4

Results of the self assessment against Standard 4: *Taking lawful, informed, transparent decisions and managing risks*

	Yes % (n)	No % (n)	Don't know % (n)	Comment / no response % (n)
Does the board/governing body have a documented and transparent process about how decisions are taken?	58% (14)	30% (7)	8% (2)	4% (1) ♦
Does the organisation meet and demonstrate compliance with its legal obligations (e.g. Companies Act, articles etc)?	79% (19)	12% (3)	9% (2)	0
Does the board/governing body document how the organisations' resources are allocated?	88% (21)	12% (3)	0	0
Does the board/governing body use good quality information, advice and support in making decisions?	67% (16)	12% (3)	17% (4)	4% (1) ♦
Does the board/governing body have a documented risk management system in operation?	12% (3)	76% (18)	12% (3)	0
Does the board/governing body ensure organisational policies and procedures are upheld?	58% (14)	30% (7)	12% (3)	0
Does the board/governing body have a documented process to regularly review policies and procedures?	54% (13)	38% (9)	8% (2)	0
Does the board/governing body have documented processes to ensure the quality of services?	34% (8)	58% (14)	8% (2)	0
Does the board/governing body have documented processes to ensure that services are delivered effectively and efficiently?	30% (7)	54% (13)	8% (2)	8% (2) ♦
Is there a documented process by which the performance of members of the executive/ governing body is monitored?	17% (4)	75% (18)	8% (2)	0
Are there measures in place to manage performance issues?	25% (6)	67% (16)	8% (2)	0
Does the board/governing body ensure that financial statements published by the organisation are accurate and reliable?	84% (20)	12% (3)	4% (1)	0
Does the board/governing body ensure that other information (for example reports or papers) published by the organisation is accurate and reliable?	80% (19)	12% (3)	8% (2)	0
Does the board/governing body ensure that financial resources are managed efficiently?	80% (19)	8% (2)	8% (2)	4% (1) ♦
Does the board/governing body ensure that human and other resources are appropriately managed?	54% (13)	25% (6)	17% (4)	4% (1) ♦
Does the organisation have established processes for developing, validating and reviewing guidelines and standards through the evaluation and utilisation of best available evidence?	63% (15)	17% (4)	17% (4)	4% (1) ♦

♦ Indicated partial documentation present ♦ Left blank

Standard 5

Developing the capacity and capability of the board/governing body to be effective.

As shown in table 5, organisations report that they perform well in some aspects, but not in all, in developing the capacity and capability of the board/governing body to be effective. The majority of organisations have documented processes that oversee the appointment of board/governing body members. Over ninety percent reported possessing documented processes for the appointment of board members, but only half (54% n=13) made sure that appointed and elected chairs have, or have access to, information to acquire knowledge and skills required to perform their role.

There was less formal induction support for new board members (21% n=5) and only 38% (n=9) have a process by which board/governing body members could develop further skills and update their knowledge throughout their period of membership. Sixty-seven percent (n=16) reported a documented process for the renewal and removal of its board/governing body.

The majority of organisations (88%) also did not report holding board/governing body members to account for their contribution through regular performance reviews and only twenty-five percent (n=6) of respondents reported that their board/governing body had a documented review process to monitor its performance as a whole.

Seventy-one percent of respondents (n=17) reported that board/governing body members take the lead in forming and maintaining relationships with other organisations, have protocols relating to the rights and duties of the board/governing body's members and a set of documents relating to the organisation's responsibilities to its membership and the broader community. Only 25% responded that their board/governing body had a documented review process to monitor its performance as a whole and of those only twenty-one percent (n=5) have action plans developed to put in place any necessary improvements.

In further comments on this standard, one respondent indicated that being a volunteer run organisation with no paid employees presented a significant barrier to developing the capacity and capability of their board/governing body to be effective.

Table 5

Results of the self assessment against Standard 5: *Developing the capacity and capability of the board/governing body to be effective*

	Yes % (n)	No % (n)	Don't know % (n)	No response % (n)
Does the board/governing body have documented processes that oversee the appointment of board/governing body members?	92% (22)	4% (1)	4% (1)	0
Does the board/governing body make sure that appointed and elected chair/executive officer has the skills, knowledge and experience they need to perform well - or has access to these skills?	54% (13)	33% (8)	13% (3)	0
Is there a documented process of induction for new board/governing body members?	21% (5)	71% (17)	8% (2)	0
Is there a process by which board/governing body members can develop further skills and update their knowledge throughout their period of membership?	38% (9)	50% (12)	12% (3)	0
Are board/governing body members held to account for their contribution through regular performance reviews?	0	88% (21)	8% (2)	4% (1)
Do board/governing body members take the lead in forming and maintaining relationships with other organisations?	71% (17)	21% (5)	8% (2)	0
Does the board/governing body have a documented review process to monitor its performance as a whole?	25% (6)	67% (16)	8% (2)	0
If yes, are action plans then developed to put in place any necessary improvements?	21% (5)	12% (3)	8% (2)	59% (14)
Does the board/governing body have a documented process for the renewal and removal of its own members?	67% (16)	21% (5)	12% (3)	0

Standard 5

Developing the capacity and capability of the board/governing body to be effective

Standard 6

Engaging the membership, stakeholders and the wider community and making accountability real

Making accountability real is a genuine aim of nursing and midwifery organisations, with around three quarters of respondents indicating that their board/governing body has a systematic approach to ensure accountability (71%, n=17). However around a third (38%, n=9) of organisations have a documented process by which they seek the views of stakeholders while only half (50%) have a documented process by which they seek the views of the organisation's members.

Forty-six percent (n=11) of organisations have a documented process to ensure that the organisation responds promptly and responsibly to comment from its members and 29% (n=7) have a documented strategy for communication with the wider community.

Only half of the respondent organisations have a documented strategy to ensure accountability to the organisation's members and 17% (n=4) have a documented strategy to ensure accountability to stakeholders and the wider community.

The majority of organisations (84% n=20) reported that they effectively engage and communicate with the organisation's members. Seventy-five percent (n=18) publish the organisation's purpose, strategy, plans and financial statements annually and 71% (n=17) publish information about their outcomes annually.

Despite the reliance of most responding organisations on volunteers, most organisations (63%) did not report the existence of any document outlining the responsibility of the board/governing body toward volunteers.

Half of the organisations (50%) have plans to review their governance arrangements in the next 12 months.

In the overall comments, one organisation stated '*as a private membership-based and funded organisation there is no compulsion to seek the views of stakeholders*'. Another indicated that their Constitution could be considered to cover these issues, while one group indicated they have not addressed accountability so far and a final comment was that with regard to accountability, the organisation has an annual general meeting and publishes minutes and financial statements for members.

Table 6

Results of the self assessment against Standard 6: *Engaging the membership, stakeholders and the wider community and making accountability real*

	Yes % (n)	No % (n)	Don't know % (n)	No response % (n)
Does the board/governing body have a systematic approach to ensure accountability? (i.e. a process for the independent verification of financial reports and functions; business rules for all financial transactions)	71% (17)	13% (3)	8% (2)	8% (2)
Does the board/governing body have a documented process by which they seek the views of stakeholders? (i.e. a policy on consultation process to inform decision-making)	38% (9)	54% (13)	4% (1)	4% (1)
Does the board/governing body have a documented process by which they seek the views of the organisation's members?	50% (12)	42% (10)	4% (1)	4% (1)
Does the board/governing body have a documented process to ensure that it responds promptly and responsibly to comment from the organisation's members?	46% (11)	46% (11)	4% (1)	4% (1)
Does the board/governing body have a documented strategy for communication with the wider community?	29% (7)	63% (15)	4% (1)	4% (1)
Does the board/governing body have a documented strategy to ensure accountability to the organisation's members?	50% (12)	42% (10)	4% (1)	4% (1)
Does the board/governing body have a documented strategy to ensure accountability to stakeholders and the wider community?	17% (4)	71% (17)	8% (2)	4% (1)
Does the board/governing body have a documented strategy outlining its responsibility to staff/volunteers?	25% (6)	63% (15)	8% (2)	4% (1)
Does the board/governing body effectively engage and communicate with the organisation's members?	84% (20)	8% (2)	4% (1)	4% (1)
Does the board/governing body annually publish the organisation's purpose, strategy, plans and financial statements?	75% (18)	21% (5)	0	4% (1)
Does the board/governing body annually publish information about the organisation's outcomes and performance?	71% (17)	25% (6)	0	4% (1)
Does your organisation have plans to review its governance arrangements in the next 12 months?	50% (12)	29% (7)	17% (4)	4% (1)

Standard 6

Engaging the membership, stakeholders and the wider community and making accountability real

Attitudes to governance

When asked about certain aspects of sound governance, table 7 shows that all (100%) of the respondents felt that it was essential or preferable for the board/governing body to:

- focus on the organisation's purpose;
- perform effectively in clearly defined functions and roles;
- promote values for the whole organisation;
- demonstrate the values of sound governance through behaviour;
- make informed, transparent decisions; and
- engage the membership.

Ninety-two percent of respondents (n=23) felt that it was essential or preferable for organisations to consider outcomes for the membership and wider community, while only 4% (one) felt that it was sometimes important to do so.

The board/governing body developing or having a risk management strategy was considered essential by 67% (n=16) of respondents, preferable for 21% (n=5), sometimes necessary for 4% (n=1) and not necessary for 8% (n=2).

Seventy-one percent of respondents (n=17) indicated that it was essential for a board/governing body to develop the capacity and capability of the board/governing body to be effective, while 25% (n=6) felt it was preferable and 4% (n=1) felt it was sometimes necessary.

Finally, three quarters (75%, n=18) felt the board/governing body should be accountable to stakeholders, 17% (n=4) said it was preferable and 8% (n=2) said it was sometimes necessary.

Attitudes to governance

Table 7

Self rating of how important the following aspects of governance are for the provision of sound governance

	Essential	Preferable)	Sometimes necessary	Not necessary
How important is it for a board/governing body to focus on the organisation's purpose?	96% (23)	4% (1)	0	0
How important is it for a board/governing body to consider outcomes for the membership and wider community?	79% (19)	17% (4)	4% (1)	0
How important is it for a board/governing body to perform effectively in clearly defined functions and roles?	88% (21)	12% (3)	0	0
How important is it for a board/governing body to promote values for the whole organisation?	96% (23)	4% (1)	0	0
How important is it for a board/governing body to demonstrate the values of sound governance through behaviour?	79% (19)	21% (5)	0	0
How important is it for a board/governing body to take informed, transparent decisions?	79% (19)	21% (5)	0	0
How important is it for a board/governing body to manage risk?	67% (16)	21% (5)	4% (1)	8% (2)
How important is it for a board/governing body to develop the capacity and capability of the board/governing body to be effective?	71% (17)	25% (6)	4% (1)	0
How important is it for a board/governing body to engage the membership?	92% (22)	8% (2)	0	0
How important is it for a board/governing body to be accountable to stakeholders?	75% (18)	17% (4)	8% (2)	0

External transparency

The majority of organisations indicated that their Mission Statement (92% n=22), Constitution (92% n=22), roles and responsibilities of board/governing body members (83% n=20) and annual report (88% n=21) are made available to members. Less available to members were the Code of Values (46% n=11) and Code of Ethics (38% n=9).

The following documents were generally also available, albeit in some cases to a lesser extent to stakeholders: the Mission Statement (75% n=18), Constitution (83% n=20), roles and responsibilities of board/governing body members (54% n=13) and annual report (88% n=21). Less available to stakeholders were the Code of Values (42% n=10) and Code of Ethics (29% n=7).

The following documents were less available to the wider community: the Mission Statement (67% n=16), Constitution (67%), roles and responsibilities of board/governing body members (17% n=4), annual report (46% n=11), the Code of Values (38% n=9) and Code of Ethics (25% n=6). Sixteen percent of respondents indicated that they had just completed or were planning to review their governance practices in the next 12 months and one respondent indicated that a set of standards would assist in this process.

External transparency

Table 8

Self rating of external transparency

Please indicate whether the following documents are available and to whom:	Yes % (n)	No % (n)	Don't know % (n)	No response % (n)
Mission Statement to:				
a) board/governing body members	92% (22)	0	4% (1)	4% (1)
b) stakeholders	75% (18)	13% (3)	8% (2)	4% (1)
c) wider community	67% (16)	25% (6)	4% (1)	4% (1)
Constitution to:				
a) board/governing body members	92% (22)	0	0	8% (2)
b) stakeholders	83% (20)	8% (2)	4% (1)	4% (1)
c) wider community	67% (16)	25% (6)	4% (1)	4% (1)
Code of Values to:				
a) board/governing body members	46% (11)	25% (6)	13% (3)	16% (4)
b) stakeholders	42% (10)	29% (7)	13% (3)	16% (4)
c) wider community	38% (9)	33% (8)	13% (3)	16% (4)
Code of Ethics to:				
a) board/governing body members	38% (9)	33% (8)	4% (1)	25% (6)
b) stakeholders	29% (7)	38% (9)	8% (2)	25% (6)
c) wider community	25% (6)	42% (10)	8% (2)	25% (6)
Role and responsibilities of board/governing body members to:				
a) board/governing body members	83% (20)	13% (3)	4% (1)	0
b) stakeholders	54% (13)	38% (9)	4% (1)	4% (1)
c) wider community	17% (4)	58% (14)	4% (1)	21% (5)
Annual report to:				
a) board/governing body members	88% (21)	4% (1)	4% (1)	4% (1)
b) stakeholders	88% (21)	8% (2)	0	4% (1)
c) wider community	46% (11)	38% (9)	4% (1)	12% (3)

External transparency

In response to the question about other documents being made easily available to board/governing body members, stakeholders and/or the wider community, respondents identified the following documents: position statements, media releases, strategic plans, promotional material, policy submissions, membership information and key personnel in the organisation including board/governing body members.

When asked if organisations had plans to modify their governance processes in the next 12 months, just under half (46%, n=11) indicated that they did.

A number of respondents expressed a desire to develop more defined governance systems, with specific mention made of plans to: develop a 'survival kit' for executive positions; update the policy and procedure manual; and move 'towards a better understanding of governance issues'.

When asked if there were any specific challenges that organisations have with regard to governance, respondents indicated they wished to:

- clarify the role of the board/governing body (i.e. should it be strategic or operational);
- develop governance practices appropriate to each organisation and its size and scale;
- ensure clear role delineation and systems for decision-making;
- move from a committee to a board focus;
- have a comprehensive Constitution;
- provide formal education for board members and have a clear orientation process for each new term; and
- get a facilitator to assist in developing a vision and clarifying roles and responsibilities.

Finally, when asked if respondents could see any major barriers to the implementation of sound governance standards in their organisation the barriers identified were: small size of some organisations; informal culture; limited available time to implement processes; the reality of a volunteer workforce; limited resources; a lack of an understanding about what 'governance' is; and the financial cost of implementing some aspects of sound governance, e.g. funding for governance education and training.

Four organisations/groups agreed to provide examples of governance documents to share with other organisations (Appendix 5).

These were:

1. The College of Emergency Nursing Australia Guidelines for the conduct of meetings held by electronic mail;
2. Australian Practice Nurses Association Sponsorship Policy;
3. The Constitution of the Australian Women's Health Nurse Association Inc; and
4. The Australian Faith Community Nurses Association Incorporated Constitution.

3.4 Discussion

Thirty-one percent (n=24) of the potential respondents submitted a response to the survey, which evaluated current stakeholders governance arrangements using a set of questions devised to allow respondents to measure their organisation's performance against each of the six governance standards.

These results suggest a reasonable proportion of respondents are cognisant of the importance of focusing on the organisation's purpose and endeavour to do so by ensuring the development of important guiding documentation, such as a Constitution and/or Mission Statement. The practices revealed by responses to Q.63 with respect to the availability of documentation, suggests a high level of importance is placed on the development and circulation of this kind of documentation, at least to the organisation's membership, if not the wider community, although the latter appears to be less common.

Practices or processes to document the quality of organisational performance, as assessed by the membership, were less commonly reported by respondents. This suggests that this is a less well understood aspect of governance. At least one-third (n=7) of respondents do endeavour to do so, indicating a range of mechanisms such as surveys, benchmark reviews, website feedback and feedback collected at events was used to assess outcomes for their members.

Demonstrating accountability through clearly defined functions and roles was strong, with organisations ensuring there were clearly defined functions for their board/governing body. The roles of the board/governing body were broad and were considered to include the responsibility to: convene meetings; provide budget oversight; provide strategic oversight and direction; promote education; 'manage affairs'; develop the professional profile and status of the relevant specialist nurses; and develop strategic partnerships. However as indicated above, there was less evidence of processes to ensure that the interests of members, stakeholders and the wider community were considered during decision-making. There is however, evidence of efforts being made to involve the wider membership in decision-making and to incorporate a community perspective. At least half of respondents indicated they already had processes in place to do so, such as seeking members' input to decisions about major projects, policies and position statements; inviting members to attend management meetings; including members on panels and committees and conducting membership surveys. There was one report where the organisation included a community member on a board.

Promoting the organisation's values and demonstrating the principles of sound governance were considered essential by 96% of respondents. However, just 63% of respondents indicated they had a documented Code of Conduct and only 19% (n=4) had a documented Code of Ethics or Conduct. In addition, while all respondents felt that the conduct of the chair/executive officer was important, only 67% of organisations had documented expectations that the chair/executive officer must behave in ways that uphold and exemplify the values of the organisation. These responses suggest that while there is generally an expectation that the behaviour of the organisation's board and governing body is driven by a sound value system, this is not always well documented. The fact that there were a number of responses indicating that this was preferable rather than essential may indicate a degree of uncertainty among existing board members about their ability to exemplify the organisation's values. This is possibly due to the limited availability of training or induction procedures for new board members in many organisations (see mapping results against Standard 5).

Discussion

While there was high achievement in demonstrating and meeting compliance with legal obligations (79%, n=19) and possessing documentation on how the organisation's resources are allocated (88%, n=21), there is much lower performance in risk management. Transparency with regard to decision-making was also less evident, although it was not clear whether this was related to a lack of processes or a lack of documentation of those processes. Given that all respondents reported that this was either essential or preferable for an organisation, it appears most likely to be the latter.

The results with regard to risk management suggest there is less understanding about the importance of risk management than other governance processes, and this could again be linked to the knowledge, experience and skills many respondents feel they lack with respect to their ability to perform well as board/governing body members. There was a high level of performance in recording the allocation of resources and use of quality information, advice and support. Respondents indicated that the use of external auditing, financial and legal advice informed much of their decision-making.

The survey results suggest there is room for improvement for organisations to develop the capacity and capability of the board/governing body's effectiveness. The finding that just over 20% of organisations report possessing documented processes for the induction of board/governing body members suggests there is limited capacity in many organisations to provide this. Since 96% of respondents indicated that developing the capacity and capability of the board/governing body to be effective was either essential or preferable, it is likely that this is related to a limited awareness of, or a lack of availability of, relevant or appropriate resources within the health sector that could improve nurses' preparedness for these roles.

In terms of relationships with other organisations, the results indicate an enthusiasm among most respondents for establishing such links and a number of responses indicate that combining expertise to work on shared projects and sharing of information is commonplace for professional nursing and midwifery groups.

The results of the self assessment with regard to engaging the membership, stakeholders and wider community and making accountability real reinforce earlier results with regard to systematic approaches to ensuring accountability through the publication of specific documents, while there is a lesser focus on external transparency. These results suggest that an appreciation of the importance of external accountability among nursing and midwifery organisations is only just emerging and is an area in which further governance education would be beneficial.

With regard to the development of standards, the majority of respondents indicated they were either already involved, or were considering developing standards. Given the criteria for inclusion was that each organisation should either be currently, or intending to, develop standards, this is not surprising. Two organisations responded in the negative to this question, which suggests the definition of what constitutes standards may itself not always be well understood. The types of standards that were reported as being within the purview of respondents' professional publications were described variously as: Competencies; Evidence-based Guidelines; Competency Standards; Policy and Procedure Manuals; Standards of Practice; Clinical Practice Guidelines; Protocols and Procedures; Position Statements; Advanced Life Support Curriculum Guidelines; Guidelines for Obtaining Sponsorship; Guidelines for Developing Post-Graduate Programs; and Standards for Specialist Practice. Those organisations who were not currently developing standards but were intending to do so, indicated that they had either established sub-committees to develop standards or that their intentions had been documented in their organisations' strategic plans.

Discussion

While there is significant emphasis placed on sound governance practice by organisations representing the interests of professional nurses and midwives, a number of barriers have been identified. These include limited understanding about governance issues; a lack of education and training available to nurses and midwives to prepare them for executive positions as members of boards or governing bodies; insufficient financial resources to provide the above; a lack of awareness about the implications of failing to address some key governance issues (i.e. risk management); and the limited time available to executive members due to the voluntary nature of many of these organisations. Organisations vary in terms of their organisational structure, function and purpose.

It appears there are significant efforts to achieve sound governance by the majority of respondents to this survey. It should be noted however that while performance is strong in many aspects of sound governance practice, the limitations described above may be preventing organisations from implementing some of the criteria described in the project standards. The short time frame available to conduct this phase of the project (four working days) and difficulties experienced by some respondents in accessing the website survey are considered to have potentially impacted on the response rate for the survey. The majority of responses to this survey included many of the larger organisations that constitute the NNO, and it is considered possible that those organisations with well developed governance systems were perhaps more likely to respond. It should therefore be considered that there may be an even greater need among smaller organisations for resources to support and encourage sound governance. As many respondents indicated, the utilisation of the standards and survey tool developed for this project could assist many organisations to improve governance, as well as providing an important guide for emerging organisations. All organisations however could benefit from the development of further resources to assist them in achieving sound governance.

A number of responses to this survey and during the consultation phase for standards development indicated that the utilisation of both the standards and the survey tool during this project provided an important opportunity for nursing and midwifery organisations to consider their governance practice and reflect on their needs and priorities in this area. Some respondents indicated the standards provided an opportunity to review their practice and have subsequently decided to make some changes to their practice. Others noted with satisfaction that the standards included criteria that their organisations have had in place for many years, while some others indicated a desire to use the standards and survey tool to guide future practice. It is the view of the Working Group that the standards represent an important guide to governance as well as a tool that should continue to be utilised and refined by NNO in their pursuit of sound governance practice. Feedback from a process of regular review could be used to ensure that the standards continue to meet the needs of the NNO. It is anticipated that the standards could be used not only by NNO but also by other health professional organisations who wish to undertake a review of their governance practices. As indicated previously, there have been a number of expressions of interest among members of NNO to continue to explore mechanisms for improving governance practice among member organisations. In the event that the suggestion is supported by NNO membership, the Working Group proposes the establishment of a mentor-style program where less established nursing and/or midwifery organisations are paired with established nursing and/or midwifery organisations to offer advice and support in an effort to assist each other develop sound governance practice. Finally, this survey has highlighted not only achievements in governance practice, but also some areas for improvement among nursing and midwifery organisations. Consideration should be given to the development of additional resources (i.e. web-based resources; a handbook, or guide to governance; as well as tools that could be used to improve processes) to assist nursing and midwifery organisations develop sound governance processes. These resources could help to ensure that the current enthusiasm for improving governance among nursing and midwifery organisations continues and flourishes.

glossary and references - part four

part four

glossary and references

Glossary

Accountability	Accountability is where organisations and the individuals within them are responsible for their decisions and actions, and where they are subject to external scrutiny by obeying the law. ⁴³
Audit	An audit is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control, and governance processes. ⁴³
Company	<p>Registered as limited by guarantee. Limited by guarantee means the liability of the company's members is limited to the amount the members undertake to contribute to the property of the company if it is wound up. Registration of a company creates a legal entity separate from its members. The company can hold property and can sue and be sued.</p> <p>Companies are registered under the Corporations Act 2001, which is Commonwealth legislation administered by the Australian Securities and Investment Commission (ASIC). A company's registration is recognised Australia wide.⁴⁵</p>
Competence	'The combination of skills, knowledge, attitudes, values and abilities that underpin effective performance in a profession/occupational area'. ⁴⁶
Competency Standards	Competency standards are core standards that describe the current practice of nurses. These standards can be developed at the standard expected of those completing their education (e.g. ANMC National Competency Standards for the Registered Nurse and the Enrolled Nurse) or they can reflect standards beyond that minimum level (e.g. Competency Standards for the Advanced Nurse). ⁴⁷
Efficiency	Efficiency is where an organisation is effective and independent and makes the best use of its resources to achieve its goals and engages in risk management. ⁴⁸
Integrity	Integrity is about ethical values, which are based on honesty, objectivity and performance measurement. High standards of propriety and probity underpin stewardship of funds and resources. ⁴⁹

Glossary

Incorporation

Associations are incorporated under State and Territory Associations Incorporation legislation, which is not administered by the Australian Securities and Investment Commission (ASIC), but by the various State authorities. An incorporated association is also a legal entity separate from its individual members that can hold property, sue and be sued. An incorporated association may become registered under the Corporations Act 2001, to enable it to carry on business in other states or territories outside of its home jurisdiction without the need to register as a company.⁵⁰

Leadership

Leadership is where leaders of the organisation are responsible for ensuring the implementation, evaluation and improvement of sound governance structures and processes; and enacting and influencing sound governance through their own performance and behaviour.⁵¹

Legal

Meeting the requirements under law.

Legality

Legality, when referring to these standards is ensured when an organisation puts in place appropriate processes to ensure they are legally compliant. This includes the prevention of conflicts of interest, fraud and other improper or unlawful behaviour.⁵²

National Nursing
Organisations (NNO)

See next page for definition

Glossary

National Nursing Organisations (NNO)

- The NNO are a coalition of organisations that represent the nursing profession. They aim to include all member organisations in the processes leading to decisions and have a consensus process for achieving outcomes.

Membership requires that a national nursing organisation has members in four or more States or Territories and that they are either:

- all enrolled and/or registered nurses;
- the nursing section of a multidisciplinary group; or
- a clear network of nurses within such groups who can ensure a nurse representative and feedback to nurses in the practice area.

Risk management

Risk management is not a separate process but part of good management and is comprised of three principal steps: risk identification, risk analysis and risk mitigation. Effective risk management in the not-for profit sector means making decisions in accordance with legal requirements, consistent with sound values and ethics, and considering social, environmental and economic implications. In short, it is more important to make the right decision, rather than the quick decision.

Specialisation

Implies a level of knowledge and skill in a particular aspect of nursing which is greater than that acquired during basic nursing education.

Specialist

A nurse or midwife who practices in a particular specialty.

Specialty

The following are the ten criteria agreed by the NNO as defining a specialty in nursing in Australia:

- Criterion 1** The specialty defines itself as nursing and subscribes to the overall purposes, functions and ethical standards of nursing.
- Criterion 2** The specialty is a defined area of nursing practice which requires application of specially focused knowledge and skills.
- Criterion 3** There is both a need and a demand for the specialty area.
- Criterion 4** The focus of a specialty is a defined population or a defined area of activity which provides a major support service within the discipline and practice of nursing.

Glossary

Specialty *continued*

- Criterion 5** The specialty is based on a core body of nursing knowledge which is being continually expanded and refined by research. Mechanisms exist for supporting, reviewing and disseminating research.
- Criterion 6** The specialty subscribes to, or has established practice standards commensurate with those of the nursing profession.
- Criterion 7** The specialty adheres to the Australian requirements for nurse registration.
- Criterion 8** Specialty expertise is gained through various combinations of formal education programs, experience in the practice area and continuing education. Educational program preparation and administration must include appropriate nursing representation.
- Criterion 9** Where a specialty is developing a credentialing process then it is consistent with the Australian credentialing framework for nurses (see credentialing principles). Human and financial resources are available to support this process.
- Criterion 10** Specialty nurses are organised and represented within a specialty association.

Social responsibility

Social responsibility is where an organisation places a high priority, when responding to social issues, on non-discriminatory, non-exploitative, and responsible ethical standards with regard to environmental and human rights issues.⁵³

NNO stakeholders

In relation to this report, all those people who receive specialty nursing and midwifery care.

Stewardship

Stewardship is about responsibility for taking good care of resources entrusted to one.⁵⁴ The conducting, supervising, or managing of something; especially the careful and responsible management of something entrusted to one's care.⁵⁵

Transparency

Transparency is when an organisation's management is effective at:

- Making necessary information available in a candid, accurate and timely manner;
- Avoiding conflicts, which is necessary to ensure that stakeholders have confidence in the decisions and actions of organisations and the individuals within them.⁵⁶

References

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A.1 Summary of key Standards

For the purpose of this literature review, six sets of standards of governance (two international, four Australian including one that is specifically developed for not-for-profit organisations) and another that specifically relates to a health profession have been considered:

1. Australian National Audit Office (ANAO)
[http://www.anao.gov.au/WebSite.nsf/0/39e5ae748f6f9749ca25706f000689fc/\\$FILE/Public%20Sector%20Governance%20Vol%201.pdf](http://www.anao.gov.au/WebSite.nsf/0/39e5ae748f6f9749ca25706f000689fc/$FILE/Public%20Sector%20Governance%20Vol%201.pdf).
2. King Report on Corporate Governance <http://www.cliffedekker.co.za/literature/corpgov/index.htm>
3. Standards Australia
4. Organisation for Economic Co-Operation and Development (OECD)
http://www.valuebasedmanagement.net/articles_oecd_corporate_governance_principles_2004.html
5. Enterprise Care's Not for Profit Governance Model© <http://www.enterprisecare.com.au/>.
6. The Australian Specialist Medical Colleges Framework <http://www.health.nsw.gov.au/amwac/ahwoc/reports.html>

The ANAO corporate governance standards cover key areas of business continuity management within the corporate risk management framework and provide a workbook to assist in the development of a comprehensive business continuity plan. The ANAO Guide aims to provide a useful step by step guide to business continuity management which can be applied to both public and private sector organisations.

Another set of sound governance principles, the King Report on Corporate Governance was published by the King Committee on Corporate Governance, and incorporated a Code of Corporate Practices and Conduct. This was the first of its kind in South Africa and was aimed at promoting the highest standards of corporate governance.

Over and above the financial and regulatory aspects of corporate governance, King advocated an integrated approach to the good governance in the interests of a wide range of stakeholders. Although considered groundbreaking at the time, the evolving global economic environment together with legislative developments, resulted in an update in 2002 called the King Report on Corporate Governance for South Africa, 2002.

In 1999 the OECD Council, in conjunction with national government, other relevant international organisations and the private sector developed an agreed set of corporate governance standards and guidelines. In 2002 the Council then agreed to survey developments in OECD countries to assess the principles in light of developments in corporate governance. This review of the principles involved comprehensive consultation with a wide range of stakeholders, including professional groups, and in 2004 the updated set of principles were agreed.

A.1 Summary of key Standards *continued*

A fourth set of governance standards by Standards Australia, was developed by a Committee of experts and key organisations representing many different perspectives. The purpose of these standards is to:

- provide the mechanisms for an organisation to establish and maintain an ethical culture through a committed, self regulatory approach; and
- provide a framework for an effective Corporate Social Responsibility Program, the performance of which can be monitored and assessed.

There are five parts to the Australian Standard standards:

Part 1 - Good Governance Principles - outlines how to implement a corporate governance framework which would include the development of a governance policy outlining; Board Charter, Board Protocol, a statement of matters reserved for the Board, Board delegations of authority, letters of appointments for Board members and code of conduct.

Part 2 - Fraud and corruption control - outlines the processes for implementing a fraud and corruption control plan and advocates the appointment of a Fraud Control Officer to develop detection systems.

Part 3 - Organisational Codes of Conduct - outlines the process for developing an organisational code of conduct, which calls for the establishment of an Ethics Committee chaired by an independent director and a statement of commitment to adhere to applicable laws and standards. It should also address issues such as conflict of interest, improper use of company information, insider trading, gifts and entertainment, and equal employment opportunities.

Part 4 - Corporate Social Responsibility - sets out the essential elements for establishing, implementing and managing an effective Corporate Social Responsibility Program. The program should consider issues such as profitability, ethics, employment, health and safety, environmental impacts, impacts on a host community, regulatory compliance systems and stakeholder communication. The standards also call for effective internal and external reporting and third party verification.

Part 5 - Whistleblowing Systems for Organisations - calls for the development of a whistleblowing policy, the establishment of a hotline, and the implementation of a Whistleblowing Protection Officer to maintain the confidentiality of the Whistleblower.

Finally, Enterprise Care's 'Not for Profit Governance Model' has been specifically developed for the requirements of the Australian not for profit sector. Established in 1988 to assist organisations, particularly not for profit organisations, to achieve positive outcomes in their development and delivery of services, Enterprise Care sells a set of sound governance standards. In addition to this, Enterprise Care has developed a Good Governance Self-Appraisal Tool which provides not for profit organisations with both a benchmark for good governance practices and a guideline for the further development of good governance.

The Australian Specialist Medical Colleges developed a Framework for analysis of college processes with four principles: transparency; accountability; procedural fairness and stakeholder participation.

A.2 Standard 1

An illustration of the link between standards, principles and criteria is provided below.

Standard 1	Accountability	Transparency	Efficiency	Social Responsibility
Is about being clear about the organisation's purpose and outcomes to the membership, stakeholders and wider community	<ul style="list-style-type: none"> ■ Act in accordance with all published documents outlined in Standards 1 and 2 ■ Develop and publish documents supporting Standard 1 including: <ul style="list-style-type: none"> ■ An Annual Report, Business Plan, Strategic Plan and Financial status and objectives ■ Core legal requirements ■ External and internal reporting requirements ■ Mechanisms and processes to identify and deal with conflicts of interest 	<ul style="list-style-type: none"> ■ Make timely and balanced disclosure of all material matters concerning the organisation, particularly those identified specifically for accountability in Standard 1 ■ Table reports to all board/governing body members that are used to base decisions ■ Establish process for the development and validation of guidelines, standards, and/or competencies 	<p>Establish structures within the board to add value:</p> <ul style="list-style-type: none"> ■ Have a board/governing body of an effective composition and size to adequately discharge its responsibilities and duties ■ Identify and manage risk through a documented system of risk oversight, management and internal control ■ Have processes to monitor performance (service delivery) through Key Performance Indicators 	<ul style="list-style-type: none"> ■ Develop and publish documents identifying the responsibility to membership and stakeholders ■ Develop and publish documents identifying the responsibility to membership and stakeholders

Link standards, principles and criteria

Standard 2

Standard 2	Accountability	Leadership	Integrity
Is about performing effectively and demonstrating accountability through clearly defined functions and roles	<p>Document:</p> <ul style="list-style-type: none"> ■ Clearly defined functions, roles, responsibilities and relationships for Standard 2 ■ Pay particular attention to constitutional criteria (e.g. rules for voting membership, roles and responsibilities of the executive, organisational policies and procedures such as amending the constitution, board appointment, length of service/tenure, any contractual arrangements) ■ External and internal reporting requirements (where appropriate) to the board/ governing body, members and stakeholders 	<p>Demonstrate leadership by complying with and documenting:</p> <ul style="list-style-type: none"> ■ The role and function of the chairs/executive officer, board/governing body members and the wider membership ■ How and why approaches are developed for each function 	<p>Have processes in place which consider integrity when:</p> <ul style="list-style-type: none"> ■ Developing/reviewing documents outlined in Standard 1 ■ Defining functions and roles identified in Standard 2 ■ Ensuring probity (as per Standard 3) ■ Ensuring resource allocation is documented and monitored (as per Standard 4) ■ Ensuring that the performance of the organisation and board members are assessed (as per Standard 5) ■ Ensuring that the membership receives a high quality service (as per Standard 6)

Standard 3

Link standards with principles

Standard 3	Accountability	Integrity	Leadership	Social Responsibility
Is about promoting values for the whole organisation and demonstrating the principles of sound governance	<ul style="list-style-type: none"> Have processes in place that identify and manage risk using a documented system of risk oversight, management and internal control and reporting (see Standards 4 and 6) 	Act in accordance with: <ul style="list-style-type: none"> Documents identified in Standard 1 Documented organisational values incorporating equal opportunity and anti-discrimination An appropriate risk management system (see Standard 4) Sound governance principles when communicating with membership and stakeholders 	<ul style="list-style-type: none"> Have processes to monitor performance utilising Key Performance Indicators Establish structures within the board/governing body to add value by having a board/governing body of an effective composition and size to adequately discharge its responsibilities and duties 	<ul style="list-style-type: none"> Act ethically by considering broader membership and community issues

Standard 4

Link standards, principles and criteria

Standard 4	Transparency	Integrity	Legality	Stewardship	Social responsibility
Is about taking lawful, informed, transparent decisions and managing risk	<p>Ensure transparency by setting out processes and mechanisms outlined in Standard 1 and include information about the board/governing body:</p> <ul style="list-style-type: none"> ■ Composition ■ Election processes such as Annual General Meetings, voting roles for members, policies and procedures for the appointment, removal, orientation, responsibilities, removal and powers of the organisation's officers ■ Achieving financial goals and objectives ■ Tabling reports that are used as the foundation of decisions ensuring free and timely access to all board/governing body members ■ Establish audit processes that report on the efficiency and accuracy of processes 	<ul style="list-style-type: none"> ■ Ensuring rigorous analyses of comprehensive background information and evidence and of the options for action during decision taking ■ Have insurance cover (where appropriate) ■ Have processes in place that identify potential areas of concern and where possible, develop strategies to manage risk 	<p>Monitoring and reviewing strategies and policies regularly to ensure:</p> <ul style="list-style-type: none"> ■ Information published by the organisation for Standard 1 and 2 is accurate and reliable ■ Laws and regulations are complied with ■ Financial resources are managed efficiently and effectively and are safeguarded <p>Be explicit regarding core legal requirements of the board through:</p> <ul style="list-style-type: none"> ■ Documenting by-laws and codes of conduct that support the principle of accountability ■ Possessing business rules for all financial transactions 	<p>Have a system in place to:</p> <ul style="list-style-type: none"> ■ Manage risks which consider the full range of the organisational activities and responsibilities ■ Review and evaluate management practices to ensure all resources are utilised efficiently and effectively ■ Monitor performance rigorously and regularly ■ Manage poor performance 	<ul style="list-style-type: none"> ■ Manage and safeguard financial, human and other resources appropriately ■ Have effective system to protect the rights of the membership and staff/volunteers

Standard 5

Link standards, principles and criteria

Standard 5	Legality	Stewardship	Efficiency	Social Responsibility
Is about developing the capacity and capability of the board/governing body to be effective	<ul style="list-style-type: none"> Board/governing body members are held to account for their contribution through regular performance reviews 	<p>Provide new board/ governing body members with:</p> <ul style="list-style-type: none"> A thorough induction that is tailored to their role Opportunities to develop further skills and update their knowledge throughout their period of membership Processes that identify and address individual development needs Assess the skills that board /governing body members need to fulfil their functions and appoint those who have these skills, using an open process Commitment to ongoing professional development Leadership development 	<ul style="list-style-type: none"> Regularly review performance of the board/governing body as a whole and agree on any action plan developed to put in place any necessary improvements Have a process and policy to ensure the necessary balance between continuity in knowledge and relationships on the one hand and renewal of thinking on the other Ensure the board is appropriate for the size and complexity of the organisation Complaints are handled and resolved, and processes are productively utilised 	<p>The board/governing body:</p> <ul style="list-style-type: none"> Takes the lead in forming and maintaining relationships with the leaders of other organisations, as a foundation for effective working relationships

Link standards, principles and criteria

Standard 6

Standard 6	Accountability	Transparency	Integrity	Legality	Leadership	Stewardship	Efficiency	Social Responsibility
Is about	<ul style="list-style-type: none"> Have a systematic approach to and explicit documentation to ensure accountability as outlined in Standard 1, 2 and 3 Have a structure to independently verify and safeguard the integrity of the organisation's functions and reports - financial and performance 	<ul style="list-style-type: none"> Each year publish documents and information relating to Standards 1 and 2 Ensure communication processes are in place to keep members and stakeholders informed Comply with Standard 4 	<ul style="list-style-type: none"> Comply with Standards 1 to 5 Ensure that the organisation hears the views of the membership 	<ul style="list-style-type: none"> Policies and procedures relating to health and safety, environment, financial and employment responsibilities Communicate the organisation's values and lawful conduct to members and stake holders 	<ul style="list-style-type: none"> Have a clear policy on when and how the organisation consults during decision taking Have documented succession planning processes 	<ul style="list-style-type: none"> A board/ governing body should commit itself to developing the skills that it has decided its members need so that they can carry out their roles more effectively 	<ul style="list-style-type: none"> Use efficient methods to communicate with members and stake holders Have processes in place to assess the services provided meet the needs of members and stake holders 	<p>The board/ governing body:</p> <ul style="list-style-type: none"> Regularly communicates with its members and where appropriate stakeholders and the wider community Makes it clear that the organisation as a whole seeks and welcomes feedback, and ensure that it responds quickly and responsibly to comment

appendices - part five

member organisations

national nursing organisations targeted for consultation

A.3 National Nursing Organisations targeted for consultation

Association for Australian Rural Nurses (AARN)
PO Box 327, DEAKIN WEST ACT 2600
Tel: 02 6162 0340 | Fax: 02 6162 0740
Email: info@aarn.asn.au
Website: www.aarn.asn.au

Wendy Armstrong

Email: wendy@aarn.asn.au

Liz Drew

Blue Care, IPSWICH QLD 4305
Tel: 07 3377 3345 | Fax: 07 3813 3893
Email: l.drew@bluecare.org.au

Australasian Neuroscience Nurses' Association (ANNA)

Website: www.anna.asn.au

Rochelle Mc Knight, Secretary

PO Box 6, ARTARMON NSW 1570
Tel: 02 9926 7527 | Fax: 02 9439 9029
Email: annaexecutive@bigpond.com

Maureen Edgetton

3/299 Burns Bay Rd, LANE COVE NSW 2066
Tel: 02 9828 3627 | Fax: 02 9828 3551
Email: winningedge3@optusnet.com.au

Australasian Rehabilitation Nurses Association

Website: www.arna.com.au

Julie Pryor

PO Box 3149, PUTNEY NSW 2112
Tel: 02 9809 0796 | Fax: 02 9809 0796
Email: arna@idx.com.au

Australasian Sexual Health Nurses Association

Website: www.ashna.com.au

Joanne Perks

PO Box 240, LEICHHARDT NSW 2040
Tel: 02 9560 3011 | Fax: 02 9569 5098
Email: jo@lwchc.org.au

Australasian Urological Nurses Society

Yvette Sullivan

Mater Health Services, Raymond Terrace, SOUTH BRISBANE
QLD 4101

Tel: 07 3840 8111 | Fax: 07 3840 8265

Email: yasullivan@optusnet.com.au

Website: www.auns.org

Australian and NZ College of Mental Health Nurses Inc. (ANZCMHN Inc)

PO Box 126, GREENACRES SA 5086

Tel: 1300 667 079 | Fax: 02 62852166

Website: www.anzcmhn.org

Kim Ryan - 1st contact

Tel: 0417 289 189, 02 6285 1078

Email: executive@anzcmhn.org

Stephen Elsom - President

Tel: 0438 758 670

Email: president@anzcmhn.org

Australian Association of Maternal Child and Family Health Nurses

Marie Shepherd

25 Longwood Avenue, NEWSTEAD TAS 7250

Tel: 03 6336 4422

Email: marie.shepherd@ddhs.tas.gov.au

Jill McCarthy

29 Henry Street, LATROBE TAS 7307

Tel: 03 6421 7800 | Fax: 03 6241 7848

Email: Jill_McCarthy@bigpond.com

Australian Association of Stomal Therapy Nurses Inc (AASTN)

Cynthia Smyth

Education Committee, 38 Riverview Drive, CALLIOPE QLD 4680

Tel: 07 4976 3135 (w) | 07 4975 7897 (h) | Fax: 07 4972 5435 (w)

Email: cynandken@bigpond.com

Website: www.stomaltherapy.com

A.3 National Nursing Organisations targeted for consultation *continued*

Australian College of Critical Care Nurses Ltd (ACCCN Ltd)
PO Box 219, CARLTON SOUTH VIC 3053
Tel: 03 9347 8577 | 1800 357 968
Fax: 03 9347 8522
Email: acccn@acccn.com.au
Website: www.acccn.com.au

Australian College of Holistic Nurses Inc
PO Box 70, BULIMBA QLD 4171
Tel: 07 3399 5516
Email: achnpres@achn.org.au
Website: www.achn.org.au

Louise Coghill
PO Box 219, GRAFTON NSW 2460
Tel: 02 6649 3527 | Fax: 02 6649 3527
Email: achn@achn.org.au

Australian College of Midwives Inc. (ACMI)
Barbara Vernon, CEO
GPO Box 666, CANBERRA ACT 2601
Tel: 1300 360 480
02 6230 7333 | Fax: 02 6230 6033
Email: acmi@acmi.org.au
Website: www.acmi.org.au

Australian College of Neonatal Nurses (ACNN)
Linda Johnston
GPO Box 2063, CANBERRA ACT 2601
Tel: 02 8344 0768 | Fax: 03 9347 4172
Email: acnn@acnn.org.au
Website: www.acnn.org.au

Australian College of Occupational Health Nurses (ACOHN)
Liz Teuma
PO Box 1205, TULLAMARINE VIC 3043
Tel: 03 9335 2577 | Fax: 03 9335 3454
Email: admin@acohn.com.au
Website: www.acohn.com.au

Australian College of Operating Room Nurses (ACORN)
Jane Waldron, Honorary Secretary
111a Main South Road, O'HALLORAN HILL SA 5158
Tel: 08 8387 9666 | Fax: 08 8322 2999
Email: acorncompany@senet.com.au

Kim Hepper, President
Tel: 08 8222 4302
Email: president@acorn.org.au
Website: www.acorn.org.au

Australian Confederation of Paediatric & Child Health Nurses (ACPCHN)
PO Box 127, CHIDLOW WA 6556
Tel: 02 9424 5814
Email: bcava@doh.health.nsw.gov.au
Website: www.acpchn.org.au

Marie Land
42 Aralia ST, NIGHTCLIFF NT 0810
Tel: 08 89854978
Email: nnoellan@bigpond.net.au (h) marie.land@nt.gov.au (w)

Australian Council of Community Nursing Services (ACCNS)
GPO Box 934, CANBERRA ACT 2601
Email: accns@bigpond.com.au
Website: www.accns.com.au

Lyndie Spurr, President
31 Alma Road, ST KILDA VIC 3182
Tel: 03 9536 5267 | Fax: 03 9537 0287
Email: lspurr@rdns.com.au

appendices - part five

appendices

national nursing organisations targeted for consultation

A.3 National Nursing Organisations targeted for consultation *continued*

Australian Council of Community Nursing Services (ACCNS)

Mark Smith, NNO Rep

31 Alma Road, ST KILDA VIC 3182
Tel: 03 9536 5382 | Fax: 03 9536 5300
Email: mcsmith@rdns.com.au

Australian Diabetes Educators Association (ADEA)

PO Box 3570, WESTON ACT 2611
Tel: 02 6287 4822 | Fax: 02 6287 4877
Email: inquiries@adea.com.au
Website: www.adea.com.au

Jan Alford

Diabetes Centre, St Vincent's Hospital, 372 Victoria St, DAR-LINGHURST NSW 2010
Tel: 02 8382 2622 | Fax: 02 9331 6626
Email: j.alford@garvan.unsw.edu.au

Coral Shankley

110 Grandview Drive
NEWPORT NSW 2106
Tel: 02 9767 6979 | Fax: 02 9767 6434
Email: shankleyc@email.cs.nsw.gov.au

Australian Infection Control Association (AICA)

PO Box 4442, EIGHT MILE PLAINS QLD 4113
Tel: 07 3423 0764 | Fax: 07 3219 7780
Email: aica@ozemail.com.au
Website: www.aica.org.au

Barbara Tollenaere

Email: vicbarb@powerup.com.au

Rachel Thomson, President

Tel: 03 6278 5161 | Fax: 03 6278 5536
Email: r.thomson@calvarytas.com.au

Australian Nurse Practitioners Association

Website: www.nursepractitioners.org.au

Jane O'Connell, President

C/- locked bag 3030, BURWOOD NSW 1805
Tel: 0414 842 199
Email: Joconnel@doh.health.nsw.gov.au

Australian Nurse Teachers Society Inc

Locked Bag 3030, BURWOOD NSW 1805
Tel: 02 9745 7525 | Fax: 02 9745 7502
Website: www.ants.org.au

Mary Bridgid Naylor, President

Tel: 02 9840 3626
Email: mary-bridgid_naylor@wsahs.nsw.gov.au

Australian Nurses for Continence

Sharon Homberg

South West Healthcare, Ryot Street, WARRNAMBOOL VIC 3280
Tel: 03 5563 1491 | Fax: 03 5563 1669
Email: shomberg@swh.net.au

Australian Nursing Federation

Jill Iliffe

PO Box 4239, KINGSTON ACT 2604
Tel: 02 6232 6533 | Fax: 02 6232 6610
Email: anfcanberra@anf.org.au
Website: www.anf.org.au

Australian Ophthalmic Nurses Association Inc.

Jill Grasso

PO Box 3292, SYDNEY NSW 2001
Tel: 02 9382 7111 | Fax: 02 9745 7501
Email: jilliang@sesahs.nsw.gov.au

Australian Orthopaedic Nurses Association

Robyn Manning

PO Box 534, GLEBE NSW 2037
Tel: 02 9745 7581 (w) | Fax: 02 9745 7504
Email: tosmund@nursing.aust.edu.au

A.3 National Nursing Organisations targeted for consultation *continued*

Australian Practice Nurses Association

Lynne Walker

1 Palmerston Cres, SOUTH MELBOURNE VIC 3205
Tel: 1300 303 184, 0409 936 310 | Fax: 03 9564 7833
Email: service@apna.asn.au

Paul Geyer CEO

Tel: 03 9682 3820, 0419 393 054 | Fax: 03 9682 1276
Email: paul.geyer@apna.asn.au
Website: www.apna.asn.au

Australian Women's Health Nurses Association

PO Box 254, DULWICH HILL NSW 2203

Karen Bedford

Tel: 02 9515 9286 | Fax: 02 9515 9540
Email: kbedf@email.cs.nsw.gov.au

Lorna Scott

Tel: 02 4931 2006 | Fax: 02 4931 2002
Email: lorna.scott@hnehealth.nsw.gov.au
Website: www.womenshealthnurses.asn.au

Australian Wound Management Association

C/- Wound Management Association of Victoria
Tel: 08 8449 3901 | Email: awma@ozemail.com.au

Jill Parke

PO Box 621, WODEN ACT 2606
Tel: 02 6205 1650 | Fax: 02 6244 4020
Email: jill.parke@act.gov.au

Caroline Weller

22 Wellington St, ST KILDA VIC 3182
Tel: 03 9479 5916 | Fax: 03 9479 5988
Email: cweller@latrobe.edu.au
Website: www.awma.com.au

Cancer Nurses Society of Australia (CNSA)

GPO Box 4708, SYDNEY NSW 2001
Email: info@cnsa.org.au
Website: www.cnsa.org.au

Kate Cameron, Chair

PO Box 339, KENSINGTON PARK SA 5068
Tel: 0437 627 100 | Fax: 02 9036 3101
Email: kate.cameron@adelaide.edu.au

Cardiac Nurses' Network of Australia & NZ

Ross Proctor, President

PO Box 758, RANDWICK NSW 2031
Tel: 02 9382 8011 | Website: www.cnnanz.com
Email: cnnanz@cnnanz.com, president@cnnanz.com

Sophie Drake, Vice President

Email: vicepresident@cnnanz.com

Cheryl Dickson, Secretary

Email: secretary@cnnanz.com

College of Emergency Nursing Australasia Ltd (CENA)

Toni McCallum Pardey, Director

Locked Bag 3030, BURWOOD NSW 1805
Tel: 02 4394 8176 w, 0412 439 024 | Fax: 02 4943 9153 h
Email: ToniMcCallum@bigpond.com.au
Website: www.cena.org.au

Community Nurse Audiometrists Association Inc

Denise Newton

Springwood Community Health Centre, Macquarie Road,
SPRINGWOOD NSW 2777
Tel: 02 4751 0100 | Fax: 02 4751 0188
Email: jahden@tpg.com.au

appendices - part five

appendices

national nursing organisations targeted for consultation

A.3 National Nursing Organisations targeted for consultation *continued*

Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN)
14 Cassia Avenue, Banksia Beach, BRIBIE ISLAND QLD 4507
Tel: 07 3410 7236 | Fax: 07 3408 8199

Sally Goold

Tel: 07 3408 7892(h), 0438 808 739
Email: ssgoold@netspace.net.au
Website: www.indiginet.com.au/catsin

Council of Deans of Nursing & Midwifery (Australia & New Zealand)

Jennifer Martin

School of Nursing, Deakin University, 221 Burwood Highway,
BURWOOD VIC 3125
Tel: 03 9244 6111 | Fax: 03 9244 6159
Email: jmartin@deakin.edu.au

Professor Denise Dignam

Faculty of Nursing, Midwifery & Health, University of Technology
Sydney, PO Box 222, LINDFIELD NSW 2070
Tel: 02 9514 5712 | Fax: 02 9514 5049
Email: denise.dignam@uts.edu.au

Professor John Daly

School of Nursing, College of Health & Science, UWS, Locked Bag
179, PENRITH DC NSW 1797
Tel: 02 9685 9113 | Fax: 02 9685 9343
Email: j.daly@uws.edu.au
Website: www.cdnm.edu.au

Council of Remote Area Nurses of Australia Inc.

Rod Wyber-Hughes, Director

PMB 203, ALICE SPRINGS NT 0872
Tel: 08 8953 5244, 0408 839 723 | Fax: 08 8953 5245
Email: director@crana.org.au
Website: www.crana.org.au

Defence Health Services Division

Col Beverley Wright

CP2-7-004 Campbell Park Offices CANBERRA
Tel: 02 6266 3894, 0416 178 163 | Fax: 02 62663784
Email: beverley.wright@defence.gov.au

Department of Defence *continued*

WGCDR Dayle Thomas

Tel: 02 6266 3919 | Email: dayle.thomas@defence.gov.au
Website: www.defence.gov.au

Endocrine Nurses Society of Australia

Irene Mitchelhill

Clinical Nurse Consultant, Department of Endocrinology,
Sydney Children's Hospital, RANDWICK NSW 2031
Email: mitchelhilli@sesahs.nsw.gov.au

Fertility Nurses of Australasia

Donna Close, Chairperson

QFG Gold Coast, Suite 6, Level 1 Pindara Place, 13 Carrara Street,
BENOWA QLD 4217
Email: goldcoast@qfg.com.au
Website: www.fsa.au.com/about/si_nurses.htm

Flight Nurses Australia Inc (FNA)

PO Box 346, ROCKDALE NSW 2216

Judith Whitehead, President

Email: judy.whitehead@rfdns.gov.au continues to bounce back

Kay Melmeth

Tel: 02 9667 2098 | Fax: 02 9317 5164
Email: KMelmeth@ambulance.nsw.gov.au

Gastroenterological Nurses College of Australia (GENCA)

Anne Wilson, Executive Officer

PO Box 483, BORONIA VIC 3155
Tel: 03 9801 6352 | Fax: 03 9801 6352
Email: admin@genca.org

Michelle Muir, President

Email: president@genca.org

Geriaction Inc.

Kate Hurrell

45 Robert Street, HARBORD NSW 2096
Tel: 02 9938 6656, 0411 889 220 | Fax: 02 9938 5686
Email: katehurrell@pacific.net.au

A.3 National Nursing Organisations targeted for consultation *continued*

Geriaction Inc. *continued*

Kim Davies

PO Box 371, POMONA QLD 4568
Tel: 07 5485 1116, 0400 742 539 | Fax: 07 5485 1116
Email: KimDavies@rslcare.com.au

Hyperbaric Nurses and Technicians Association (HTNA)

Hyperbaric Unit, North Terrace, Royal Adelaide Hospital,
ADELAIDE SA 5000
Tel: 08 8222 5771 | Fax: 08 8232 4207
Email: Cmucha@mail.rah.sa.gov.au

Institute of Nursing Executives

Tel: 02 9351 0614
Email: ine@nursing.aust.edu.au
Website: www.ine.org.au

Jeanne O'Neill

Tel: 02 6058 4427
Email: jeanne.Oneill@swsahs.nsw.gov.au

Medical Imaging Nurses Association (MINA)

Lisa Barbieri, National Liaison Officer

321 Humffray Street North, BALLARAT VIC 3350
Tel: 03 5320 4479 | Fax: 03 5333 4128
Email: lisa.barbieri@petermac.org

National Enrolled Nurse Association (NENA)

Maryanne Craker, Secretary

PO Box 1236, ST ALBANS VIC 3021
Tel: 03 9919 2225 03 9364 2242 (h) 0429 050 983
Fax: 03 9919 2406
Email: Maryanne.Craker@vu.edu.au
Website: www.anf.org.au/nena

Robyn Bean

PO Box 216, MILTON NSW 2538
Tel: 02 4455 1333 | Fax: 02 44551908
Email: beanr@iash.nsw.gov.au

Nurses in Independent Practice (NIP)

Bernadette Keane, President

PO Box 113, NORTH CARLTON VIC 3054
Tel: 03 9380 6788 | Fax: 03 9387 6086
Email: bkeane@ausmed.com.au

Nursing Informatics Australia

Dr Evelyn Hovenga

12 Sleipner Street, ROCKHAMPTON QLD 4701
Tel: 07 4930 9839 | Fax: 07 4930 9729
Email: e.hovenga@cqu.edu.au

Palliative Care Nurses Australia

C/- Palliative Care Australia, PO Box 24, DEAKIN ACT 2600
Tel: 02 6232 4433 | Fax: 02 6232 4434
Email: pcna@pallcare.org.au
Website: www.pallcare.org.au

Margaret O'Connor

PO Box 527, FRANKSTON VIC 3199
Tel: 03 9904 4053 | Fax: 03 9904 4402
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Cathie Piggott

Education Department, Peter MacCallum Cancer Institute
Tel: 03 9656 1111
Email: Cathie.Piggott@petermac.org

Renal Society of Australasia (RSA)

Kristy Musgrove, Federal Secretary

PO Box 155, HEIDELBERG VIC 3084
Email: rsaboard@renalsociety.org

Royal College of Nursing, Australia (RCNA)

Rosemary Bryant, Executive Director

PO Box 219, DEAKIN WEST ACT 2600
Tel: 02 6283 3400 | Fax: 02 6282 3565
Email: Rosemary@rcna.org.au
Website: www.rcna.org.au

appendices - part five

appendices

national nursing organisations targeted for consultation

A.3 National Nursing Organisations targeted for consultation *continued*

The Association of Discharge Planning Nurses Inc

Leanne McLaughlin, President

Tel: 02 4320 2066

Email: lmclaughlin@doh.health.nsw.gov.au

The College of Nursing (incorporating the NSW College of Nursing)

Tracey Osmond

Locked Bag 3030, BURWOOD NSW 1805

Tel: 02 9745 7500 | Fax: 02 9745 7502

Email: tosmond@nursing.aust.edu.au

Thoracic Society of Australia and New Zealand

Respiratory Nurses Sig, C/O TSANZ 145 Macquarie Street,
SYDNEY NSW 2000

Tel: 02 9256 5457 | Fax: 02 9241 4162

Email: bpearlman@thoracic.org.au

Website: www.thoracic.org.au

Jane Civitico

Respiratory Medicine, RPAH Missendon Road, CAMPERDOWN
NSW 2000

Tel: 02 9515 8627 | Fax: 02 9515 8196

Email: jane@email.cs.nsw.gov.au

Transplant Nurses Association Inc

Narelle Sommerfeld

PO Box 1276, STAFFORD QLD 4053

Tel: 07 3350 8898 | Fax: 07 3350 8659

Email: NSommerfeld@bigpond.com

Groups actively involved in the NNO'S

Association of Clinical Nurse Consultants of Australia Inc (ACNCA)

Sue Monaro

PO Box 173, CONCORD WEST NSW 2138

Tel: 02 9767 5000

Email: MonaroS@email.cs.nsw.gov.au

K. So

Email: kso@email.cs.nsw.gov.au

Australian Nurses Acupuncture Association

Professor Yuri Sawenko, President

Tel: 03 8504 3617 | Fax: 03 9557 9033

Email: managhosp@mcmedia.com.au

NSW Intravenous Nurses Society (Inc)

Fiona Stewart

PO Box 52, Westmead Hospital NSW 2145

Tel: 02 9845 7399 / 7769 | Fax: 02 9845 5000

Email: Fiona_stewart@wsahs.nsw.gov.au

Other non-NNO nursing and midwifery organisations

Australian Nursing and Midwifery Council
Karen Cook, Chief Executive Officer
 PO Box 873, DICKSON ACT 2602
 Tel: 02 6257 7960 | Fax: 02 6257 7955
 Email: kcook@anmc.org.au
 Website: www.anmc.org.au

Australia and New Zealand Council of Chief Nurses (ANZ-CCN)
Adj Prof Debra Thoms, Chief Nursing Officer
 New South Wales Health
 Locked Bag 961, NORTH SYDNEY, NSW 2059
 Tel: 02 9391 9518 | Fax: 02 9391 9468
 Email: detho@doh.health.nsw.gov.au

Community Health Nurses Western Australia (CHNWA) Inc.
<http://www.chnwa.org.au/>
 Email: marie.tyrrell-clark@health.wa.gov.au

West Australian Neonatal Nurses Association
 Email: pippadavis@optusnet.com.au or wanna@acnn.com.au
 Website: <http://www.anna.org.au/wanna.php>

Association of Neonatal Nurses of South Australia
 Email: annsa@acnn.org.au
 Website: <http://www.anna.org.au/annsa.php>

Tasmanian Neonatal Nurses Association (TNNA)
 Email: tnna@acnn.org.au
 Website: <http://www.anna.org.au/tnna.php>

Neonatal Nurses' Association, Queensland
 Email: nnaq@acnn.org.au
 Website: <http://www.anna.org.au/nnaq.php>

Association of Neonatal Nurses of NSW (Inc)
 Email: ann@acnn.org.au

Victorian Association of Neonatal Nurses
 Email: vann@acnn.org.au

Australian Faith Community Nurses Association Inc.
 Website: <http://www.afcna.org.au>

NT Child and Family Health Nurses Association
 Email: nnoellan@bigpond.net.au
 Website: <http://www.nt.acpchn.org.au>

Professional Association of Nurses in Developmental Disability Areas
 PO Box 3633
 PARRAMATTA NSW 2124
 Telephone: (02) 8855 3600
 Nursing Unit Managers Society of NSW
 Email via their website
 Website: <http://www.numociety.org.au>

Nursing Unit Managers Society of NSW
 Email: via their website
 Website: <http://www.numociety.org.au>

Orthopaedic Nurses Association of WA
 Email: president@ona.asn.au or education@ona.asn.au
 Website: <http://www.ona.asn.au>

Australian Society of Post Anaesthesia & Anaesthesia Nurses
 Email: janeanth@bigpond.com or c_mmills@yahoo.com.au
 Website: <http://www.aspaan.org.au>

Drug and Alcohol Nurses of Australasia Inc
 Email: president@danaonline.org or secretary@danaonline.org
 Website: <http://www.danaonline.org>

appendices - part five

appendices

other non-NNO midwifery organisations

Other non-NNO nursing and midwifery organisations *continued*

South Australian Perioperative Nurses Association

Email: lyell@sapna.org.au

Website: <http://www.sapna.org.au>

Australian Ophthalmic Nurses' Association Qld Incorporated

Email: president@aona.org.au or secretary@aona.org.au

Website: <http://www.aona.org.au>

Home Midwifery Association

Email: via website

Website: <http://www.homebirth.org.au>

Maternity Coalition

Email: nationalpresident@maternitycoalition.org.au or

inquiries@maternitycoalition.org.au

Community Midwifery WA (Inc)

Email: enquiries@communitymidwiferywa.org.au

Website: <http://www.communitymidwives.org.au>

Details correct at time of publication

A.4 Survey

A collaborative partnership between the National Nursing and Nursing Education Taskforce (N³ET) and the National Nursing Organisations is currently underway to develop a governance framework for specialist nursing and midwifery organisations. Funded by N³ET, the project is developing a set of sound governance standards to guide the practice of organisations representing the interests of nursing and midwifery.

This will provide a basis for sound governance when specialty organisations/groups representing the interests of nursing and midwifery develop competencies, guidelines or standards.

In doing so, the project is seeking input from members of the National Nursing Organisations and other interested specialist nursing and midwifery organisations across Australia that are engaged in the development of standards, competencies and/or guidelines for specialty practice, including all the domains of nursing and midwifery practice, and not restricted to clinical specialties.

This phase of the project involves mapping current governance practice against the proposed standards, which means conducting a self assessment of your organisations' governance practices and providing feedback.

By taking the time to complete this survey, you and your organisation will be providing important information to the profession about current governance practice within nursing and midwifery organisations. Please note that your responses to this survey are confidential and will be de-identified and pooled in any comments made in the final report - unless prior consent has been given by your organisation.

Instructions

There are no right or wrong answers to the following questions. Please answer openly and honestly. Do not take too long considering each question, as usually your first response is most accurate.

First, we need to collect some background information about yourself and the organisation for which you are completing this survey.

Identifying information will be kept **strictly** confidential and will be used for data collection purposes only. No identifiable information will be used in any reports or publications arising from this survey, only pooled data will be used.

survey - part five

survey

governance standards - survey

A.4 Survey *continued*

1. What is the name of the organisation or group for which you are completing this survey? *(please print)*

2. Approximately how many members does the organisation have?

3. At what level does the organisation primarily operate? *(please circle the most suitable option)*

- a. Local
- b. State
- c. National

4. How long has this organisation been in existence? *(please print)*

5. What is your own role within the organisation? *(please print)*

6. Is the organisation incorporated or limited? *(please print)*

7. Does your organisation develop guidelines, competencies or standards for specialty practice?

- a. Yes

If so, what are they? *(please list)*

- b. No

- i. Does the board/governing body intend to develop standards, competencies or guidelines for specialty practice?

1. Yes

If yes, then what steps has your organisation taken towards their development to date? *(please circle as many as apply)*

- a. Plan to develop standards is included in strategic plans
- b. A sub-committee to develop standards has been established
- c. Other *(please specify)*

2. No intention to do so
If no, what is the main focus of your organisation?
- Education
 - Networking
 - Communication forum
 - Other (*please specify*)

A.4 Survey *continued*

These questions related to Standard 1. Sound governance means focusing on the organisation's purpose and on outcomes for the membership and wider community. Please indicate your response by circling the number that best corresponds to your answer.

	Yes	No	Don't know
8. In general, does the board/governing body have a clear understanding of the organisation's purpose?	1	2	3
9. Does the board/governing body have a written mission statement or other documents detailing the organisation's aims and purpose?	1	2	3
10. Does the board/governing body have a written constitution?	1	2	3
11. Does the board/governing body have protocols relating to the rights and duties of its members?	1	2	3
12. Does the board/governing body have articulated processes to deal with internal matters such as the conducting of general meetings, appointment of directors, accounts and audits?	1	2	3
13. Does the board/governing body have a written set of documentation relating to the organisation's responsibility to membership and the broader community?	1	2	3
a. If yes, are these readily available to members?	1	2	3
14. Does the board/governing body have processes in place to determine if the membership receives a high quality of service .e. an audit committee or audit tools (for example asking a short list of questions at the end of each meeting such as: Did it run on time?; Did everyone have a say? Were issues effectively managed)?	1	2	3

If you have any further comments relating to questions 8 to 14, please make note of them in the space provided below.

survey - part five

survey

governance standards - survey

A.4 Survey *continued*

These questions related to Standard 2. Sound governance means performing effectively and demonstrating accountability in clearly defined functions and roles.

	Yes	No	Don't know
15. Does the board/governing body as a whole have its own clearly defined functions?	1	2	3
a. If yes, can you please list what you consider to be the primary functions of the board/governing body (list as many as you wish)			
16. Is one of the primary functions of the board/governing body to establish the organisation's strategic direction and aims?	1	2	3
17. Does the board/governing body have documented processes for decision making?	1	2	3
18. Does the board/governing body have documented processes for managing conflicts of interest?	1	2	3
19. Does the board/governing body have documented processes to evaluate the performance of the organisation?	1	2	3
20. Does the board/governing body use external processes to assess its own performance?	1	2	3
21. Are there processes to provide members of the board/governing body with a clear idea of their roles and responsibilities?	1	2	3
22. Are there processes to ensure that the interests of members, stakeholders and the wider community are considered during decision making?	1	2	3
a. If yes, what are they?			

If you have any further comments relating to questions 15 to 22, please make note of them in the space provided below.

These questions related to Standard 3. Sound governance means promoting values for the whole organisation and demonstrating the values of sound governance through behaviour

	Yes	No	Don't know
23. Does the board/governing body have a documented set of values for the organisation?	1	2	3
24. Does the board/governing body have a documented code of ethics or conduct?	1	2	3
25. Does the organisation have expectations that the Chair/Executive Officer must behave in ways that uphold and exemplify the values of the organisation?	1	2	3

If you have any further comments relating to questions 23 to 25, please make note of them in the space provided below.

These questions related to Standard 4. Sound governance means taking informed, transparent decisions and managing risk

	Yes	No	Don't know
26. Does the board/governing body have a documented and transparent process about how decisions are taken?	1	2	3
27. Does the organisation meets and demonstrate compliance with its legal obligations (e.g. Companies act articles etc)?	1	2	3
28. Does the board/governing body document how the organisations resources are allocated?	1	2	3
29. Does the board/governing body use good quality information, advice and support in making decisions?	1	2	3

a. If yes, please detail how the board/governing body obtains such information, advice or support.

A.4 Survey continued

survey - part five

survey

governance standards - survey

A.4 Survey *continued*

	Yes	No	Don't know
30. Does the board/governing body have a documented risk management system in operation?	1	2	3
31. Does the board/governing body ensure organisational policies and procedures are upheld?	1	2	3
32. Does the board/governing body have a documented process to regularly review policies and procedures?	1	2	3
33. Does the board/governing body have documented processes to ensure the quality of services?	1	2	3
34. Does the board/governing body have documented processes to ensure that services are delivered effectively and efficiently?	1	2	3
35. Is there a documented process by which the performance of members of the executive/governing body is monitored?	1	2	3
36. Are there measures in place to manage performance issues?	1	2	3
37. Does the board/governing body ensure that financial statements published by the organisation are accurate and reliable?	1	2	3
38. Does the board/governing body ensure that other information (for example reports or papers) published by the organisation is accurate and reliable?	1	2	3
39. Does the board/governing body ensure that financial resources are managed efficiently?	1	2	3
40. Does the board/governing body ensure that human and other resources are appropriately managed?	1	2	3
41. Does the organisation have established processes for developing, validating and reviewing guidelines and standards through the evaluation and utilisation of best available evidence?	1	2	3

If you have any further comments relating to questions 26 to 41 please make note of them in the space provided below.

A.4 Survey *continued*

These questions related to Standard 5. Sound governance means developing the capacity and capability of the board/governing body to be effective

	Yes	No	Don't know
42. Does the board/governing body have documented processes that oversee the appointment of board/governing body members?	1	2	3
43. Does the board/governing body make sure that appointed and elected chair/executive officer has the skills, knowledge and experience they need to perform well - or has access to these skills?	1	2	3
44. Is there a documented process of induction for new board/governing body members?	1	2	3
45. Is there a process by which board/governing body members can develop further skills and update their knowledge throughout their period of membership?	1	2	3
46. Are board/governing body members held to account for their contribution through regular performance reviews?	1	2	3
47. Do board/governing body members take the lead in forming and maintaining relationships with other organisations?	1	2	3
a. If yes, please detail how the board/governing body members do so.			
48. Does the board/governing body have a documented review process to monitor its performance as a whole?	1	2	3
a. If yes, are action plans then developed to put in place any necessary improvements?	1	2	3
49. Does the board/governing body have a documented process for the renewal and removal of its own members?	1	2	3

If you have any further comments relating to questions 42 to 49, please make note of them in the space provided below.

survey - part five

survey

governance standards - survey

A.4 Survey *continued*

These questions related to Standard 6. Sound governance means engaging the membership and the wider community and making accountability real

	Yes	No	Don't know
50. Does the board/governing body have a systematic approach to ensure accountability? (i.e. a process for the independent verification of financial reports and functions; business rules for all financial transactions)	1	2	3
51. Does the board/governing body have a documented process by which they seek the views of stakeholders? (i.e. a policy on consultation process to inform decision-making)	1	2	3
52. Does the board/governing body have a documented process by which they seek the views of the organisation's members?	1	2	3
53. Does the board/governing body have a documented process to ensure that it responds promptly and responsibly to comment from the organisation's members?	1	2	3
54. Does the board/governing body have a documented strategy for communication with the wider community?	1	2	3
55. Does the board/governing body have a documented strategy to ensure accountability to the organisation's members?	1	2	3
56. Does the board/governing body have a documented strategy to ensure accountability to stakeholders and the wider community?	1	2	3
57. Does the board/governing body have a documented strategy outlining its responsibility to staff/volunteers?	1	2	3
58. Does the board/governing body effectively engage and communicate with the organisation's members?	1	2	3
59. Does the board/governing body annually publish the organisation's purpose, strategy, plans and financial statements?	1	2	3
60. Does the board/governing body annually publish information about the organisation's outcomes and performance?	1	2	3
61. Does your organisation have plans to review its governance arrangements in the next 12 months?	1	2	3

If you have any further comments relating to questions 50 to 61, please make note of them in the space provided below.

A.4 Survey *continued*

62. Please indicate on the following scale (by circling the number that best corresponds to your answer) how important you feel the following aspects of governance are for the provision of sound governance.

How important is it for a board/governing body to...	Essential	Preferable	Sometimes necessary	Not necessary
1. Focus on the organisation's purpose?	1	2	3	4
2. Consider outcomes for the membership and wider community?	1	2	3	4
3. Perform effectively in clearly defined functions and roles?	1	2	3	4
4. Promote values for the whole organisation?	1	2	3	4
5. Demonstrate the values of sound governance through behaviour?	1	2	3	4
6. Take informed, transparent decisions?	1	2	3	4
7. Manage risk?	1	2	3	4
8. Develop the capacity and capability of the board/governing body to be effective?	1	2	3	4
9. Engage the membership?	1	2	3	4
10. Be accountable to stakeholders?	1	2	3	4

survey - part five

survey

governance standards - survey

A.4 Survey *continued*

63. Part of sound governance is about the need to ensure external transparency.

Please indicate whether the following documents are available and to whom:

	Yes	No	Don't know
1. Mission Statement to:			
a. board/governing body members	1	2	3
b. stakeholders	1	2	3
c. wider community	1	2	3
2. Constitution to :			
a. board/governing body members	1	2	3
b. stakeholders	1	2	3
c. wider community	1	2	3
3. Code of Values to:			
a. board/governing body members	1	2	3
b. stakeholders	1	2	3
c. wider community	1	2	3
4. Code of Ethics to:			
a. board/governing body members	1	2	3
b. stakeholders	1	2	3
c. wider community	1	2	3
5. Role and responsibilities of board/governing body members to:			
a. board/governing body members	1	2	3
b. stakeholders	1	2	3
c. wider community	1	2	3
6. Annual Report to:			
a. board/governing body members	1	2	3
b. stakeholders	1	2	3
c. wider community	1	2	3

Do you have any other documents that you think should also be made easily available to board/governing body members, stakeholders and/or the wider community? If so, what are they?

64. Do you have any other comments you would like to make about the governance systems currently in practice within your organisation or any plans you may have to modify your processes in the next 12 months?

65. Does your organisation have any governance systems in place that work well that you would like to share? (e.g. for policies on stakeholder consultation; procedures for demonstrating accountability)? If so, please attach an example below as part of your feedback.

66. Are there specific challenges in relation to governance that your organisation has overcome or hints that you feel would help other organisations who are just starting out?

67. Do you see any major barriers to the implementation of sound governance standards in your organisation?

A.4 Survey *continued*

survey - part five

survey

governance standards - survey

A.4 Survey *continued*

To finish:

68. Do you have any comments about this survey?

69. If we have any follow-up questions regarding your organisation and its governance, would you be willing for us to contact you again in the future?
(please circle the most suitable option)

a. Yes

b. No

Your name

Contact No.

If you would like a copy of your response emailed back to you please provide your email address here:

Thank you for taking the time to complete this survey.

A.5 Documents to share with other organisations

An email meeting will be initiated by an email from the Chair outlining the reason for the meeting and the proposed agenda.

Some CENA Committees, Subcommittees and Working Parties may conduct their regular meetings via email. In this case a meeting schedule shall be produced which specifies the time periods for each meeting. A meeting may open on the 1st day of the month and close on the last day of the following month i.e. a two monthly meeting.

The Chair is responsible for ensuring that meetings are conducted using the guidelines for the Conduct of Meetings Held by Electronic Mail. These guidelines shall outline the process for the chair and committee/subcommittee/working party members to conduct meeting business and for the chair to record minutes and report to the Board.

To be listed as present for the meeting a member must email the meeting's distribution list at least once during the meeting period (out of office or automated replies are excluded). If a member fails to send an email to the list during the time period of a meeting they shall be listed as absent from the meeting. A quorum is achieved with the presence of more than 50% of members. If a meeting does not attain its required quorum, the Chair is responsible for presenting the results of the meeting for ratification to all those eligible to have been present at the meeting.

Apologies for a meeting may be sent directly to the Chair specifying the exact time period the member will be unavailable. Failure to participate (excluding individuals who have submitted apologies) in two (2) consecutive meetings shall result in removal from the Committee/subcommittee/working party and the Chair shall notify the relevant branch management committee of this action and its reason.

It is essential that all messages that contribute to the discussion must be addressed to the distribution list or that the 'Reply to All' function is utilised when adding to an ongoing discussion. Comments of general agreement or 'Me Too's' do not add to the discussion and should be refrained from. In the event that a participant deems it necessary then the message should only be sent to the Chair.

The Chair may specify a date at which time the discussion on a specific topic will close. A member may only revisit a completed discussion if significant new information can be added and only with the Chair's prior permission. In this instance an email shall be sent to the Chair requesting the discussion be re-opened and setting out the new information. If the Chair grants permission to reopen the discussion the Chair shall then forward the new information to the remainder of the committee/subcommittee/working party in a message stating that on request from the specific member the discussion has been reopened and a revised date for closure of the discussion must be specified.

The Chair will determine when a discussion has progressed sufficiently to achieve its goals and will announce either a vote or that a consensus has been reached. Determination of this point is at the Chair's discretion, as no single formula will be applicable to each meeting.

When a point is raised which needs to be addressed by the meeting, if participants do not respond within a predetermined period (to be determined by the Chair for each individual case) it is taken that they are in agreement with the point raised.

A.5 Documents to share with other organisations *continued*

When specific decisions must be made regarding an issue/item then a vote on a motion may be called for by the Chair. The Chair will open the Vote with an email containing the motion to be voted on, any background information, if required, and a specified closing time and date for the vote. Members shall cast their vote by either emailing the Chair directly or the distribution list. A valid vote is achieved by a quorum and is carried or rescinded by a simple majority. If a vote has not been received from a participant deemed to be present at the meeting, that person will be understood to have abstained from the vote. It is possible for subsequent matters on an agenda to be discussed independently during the period in which a vote is being taken.

A meeting may request that an invitation to join the meeting be extended to an individual whom the meeting feels may add value to the item under discussion. The request should be made to the Chair, and only the Chair may extend an invitation to any other individual. Guests shall have no voting rights.

The Chair may transfer the role of person chairing the meeting to any other member, for a specified period.

Participants in the meeting will need to maintain discipline and keep on-topic. Decisions as to whether a matter is on-topic will be at the Chair's discretion. When a matter is ruled off-topic, it must be abandoned immediately. An appeal by private email to the Chair, in the case of disagreement, is permissible and the Chair will answer by private email as to their reason(s) for so ruling, if they have not already done so. The Chair's decision on an appeal is final.

Messages during a discussion must be clearly labelled in the Subject line to facilitate ease of message management by recipients. Subject lines shall commence with the abbreviated name of the committee/subcommittee/working party followed by the topic. To facilitate automatic sorting of mail messages, enable appropriate archiving of messages, and the production of minutes at the end of the meeting period it is important that participants do not change the subject line of a message when making a reply.

When a new topic for discussion is reached, it is the Chair's responsibility to initiate the matter for discussion and start a new subject line. A new topic can be initiated by emailing the Chair with a request to start a new discussion specifying the content to be included in the initial message. The Chair shall decide if the subject is appropriate for inclusion in the meeting and if appropriate shall create a message containing a new subject line and paste the content acknowledging the member who requested the new discussion.

The Chair shall keep strict control of discussion in the meeting to ensure it moves towards an outcome. The Chair will summarise progress at the end of each specified meeting time period in Minutes and an Action Log.

Meeting participants may query or object to the minutes within seven days of the minutes being posted if they feel it has left out something important or skewed the arguments presented. This is done by emailing the distribution list requesting the minutes be amended and specifying the exact section which requires amendment. The proposed amendment must contain the exact wording to be substituted. This amendment shall be deemed as accepted by the meeting if no objection to the proposed amendment is lodged via the distribution list within seven days of the posting of the proposed amendment.

A.5 Documents to share with other organisations *continued*

If the meeting is a subcommittee or working party meeting, the subcommittee or working party Chair is responsible for reporting the outcomes of the meeting to the parent group for subsequent discussion or ratification.

Copies of all meeting schedules, minutes, action logs or any other documents produced by the meeting must be forwarded to the Executive Assistant for archiving.

Comments

Good chairing is the key to effective email meetings.

Meeting participants should not inject too much 'personality' into the messages, but should seek to remain courteous. Remember that many of the signals such as tone of voice on which we rely when communicating face to face are lost in communication by email.

Participants should discuss the points raised on issues objectively and evidentially where possible.

The preparation of meeting minutes and action logs may be delegated by the Chair, but it is the Chair's responsibility to ensure that they are produced and circulated to members.

Created: March 2006

Endorsed: April 2006

A.5 Documents to share with other organisations *continued*

Constitution of Association

Association

- 1 The name of the Association is 'Australian Faith Community Nurses Association Inc.' ('the Association').

Interpretation

- 2 In this constitution unless the contrary intention appears:
 - 2.1 'the Act' means the Associations Incorporation Act 1985 as amended from time to time;
 - 2.2 a 'faith community' is a group of Christian people who have a common spiritual faith which links them together for aims and objectives that reflect the values of the shared faith;
 - 2.3 a 'denomination' is a recognised Christian group in Australia;
 - 2.4 a 'registered nurse' is a person registered as a nurse in an Australian State or Territory in accordance with the legislation of the State or Territory;
 - 2.5 a 'group member' means an affiliate or organisation which has applied for membership to the Association, has paid membership fees and which has been accepted as a member and which thereafter maintains membership;
 - 2.6 'individual member' means a person who has applied for membership of the Association, has paid membership fees and who has been accepted as a member and who thereafter maintains membership;
 - 2.7 'the Board' means the Board of Management of the Association;
 - 2.8 any reference to a member shall include individual members and group members;
 - 2.9 any reference to a resolution shall mean a resolution passed by a majority of those members present and entitled to vote, unless another majority is expressly provided for;
 - 2.10 words importing the singular number shall include the plural and words importing one gender shall include other genders and words importing any person shall include affiliate groups or organisations.

Interpretation

- 3 The Association is a charitable non-profit institution that exists for the public benefit to promote health, prevent disease and manage illness in human beings via faith community nurses. The Association provides networking and educational opportunities for faith community nurses to fulfil this role.

A.5 Documents to share with other organisations *continued*

The Association provides:

- 3.1 the community with information, education and resources that promote and sustain charitable health care through the agency of registered nurses and ancillary support persons working on behalf of faith communities;
- 3.2 support for faith communities that offer charitable health services that meet the physical, mental and spiritual needs of individuals and families in the wider community without distinction, via registered nurses and ancillary support persons;
- 3.3 the public with information, education, resources, research, publications to raise community awareness of common diseases and health related issues such as asthma, arthritis, AIDS, brain conditions, bowel disease, cancers, diabetes, heart disease, kidney conditions, mental illness etc. via registered nurses and ancillary support persons working on behalf of faith communities;
- 3.4 faith community nurses with education, resources and publications to support them in their role of promoting holistic health, preventing disease, facilitating the social preconditions for health and assisting people in self-management and disease control to alleviate the suffering and distress associated with disease;
- 3.5 faith community nurses and the faith communities that appoint them with professional practice standards and codes, and curriculum standards relevant to their practice;
- 3.6 faith communities with consultancy, resources and education to support them in commencing, nurturing and sustaining viable charitable health services;
- 3.7 liaison with comparable professional bodies locally, nationally and internationally on behalf of faith community nurses and their employing bodies.

Membership

4.1 There shall be four categories of membership of the Association being:

- a) individual full membership;
- b) individual associate membership;
- c) group (affiliate) membership; and
- d) life membership.

The provisions of subclauses 4.3 to 4.11 inclusive of this Constitution do not apply to life members.

4.2 To be eligible for membership:

- a) individuals must have an affiliation with a faith community;
- b) individual associates must be full time students, or of another category at the discretion of the Board;

A.5 Documents to share with other organisations *continued*

- c) groups must be affiliated with the Association pursuant to a formal affiliation agreement approved by the Board; and
 - d) life members shall be individuals qualified for membership as individual members of the Association and either be appointed by the Board in recognition of distinguished service, or assistance, to the Association, or eligible by reason of payment of the fee prescribed by the Board from time to time.
- 4.3 Any application for membership shall be made in writing signed by the applicant and shall be in such form as prescribed from time to time. Upon acceptance of an application by the Board and upon payment of the prescribed membership fee, the applicant shall become a member of the Association.
- 4.4 The Board may make rules from time to time as to the procedure to be followed in applying for membership, including the information to be supplied in the members application.
- 4.5 Where the rules require any application to be accompanied by payment on account of prescribed membership fee, such fee shall be held in trust by the Association until the application has been determined by the Board. If the application is accepted, the payment shall then be applied as membership fee, but where the application is not accepted for any reason, then payment shall be returned as soon as practicable to the unsuccessful applicant.
- 4.6 Annual membership fees for individual members and group members shall be as determined from time to time by the members at the Annual General Meetings, having regard to any recommendations of the Board.
- 4.7 For the purposes associated with this Constitution, a group member must be represented by a natural person as its nominee. Unless written notification of the nominee's appointment (whether original or a substitute from time to time) is lodged with the Secretary prior to the commencement of any meeting which the group member is entitled to attend, any such nominee may be present at a meeting but may not speak to, or vote upon, any motion.
- 4.8 The Board shall have the right to refuse membership to any prospective group or individual member if the purposes of the group or individual are contrary to those of the Association or for any other reason that the Board thinks fit, provided that the Board gives the prospective member an opportunity to be heard at a meeting of the Board or to make a written submission to the Board prior to the final decision being made. The group or individual so refused shall be given the right to appeal against the refusal, within two weeks which appeal shall be determined at the next general meeting of the Association. The Secretary shall ensure that notice of such meeting is given to the group or individual concerned at the same time as notice is given to the members.
- 4.9 The Board shall have the power to terminate membership of any group or individual, even where the annual fees are paid, where it is demonstrated that the purposes of the group or individual are contrary to the purpose of the Association or the conduct of the member is deemed by the Board to be detrimental to the interests of the association.

A.5 Documents to share with other organisations *continued*

- 4.10 The right of the Board to terminate the membership of either group or individual members shall be subject to the Board giving the member the details of the basis upon which it seeks to terminate the membership at least one month before the Board meeting at which meeting the matter will be decided and the member given an opportunity to be heard at the meeting or to make a written submission to the Board prior to that meeting. The group or individual shall be given the right to appeal within two weeks of receipt of notification of a decision to terminate membership which appeal shall be determined at the next general meeting.
- 4.11 A termination of membership of the Association shall take effect on:
- a) resignation in writing addressed to the Chairperson delivered to the Association or sent by prepaid post to its postal address;
 - b) non renewal of membership through non payment of annual subscriptions by any group or individual member within three months of the date of expiry of the time specified for payment but the Board may reinstate membership upon payment of the late subscription upon such terms and conditions as it thinks fit;
 - c) termination by the Board in accordance with clause 4.9 provided that in any case where the member appeals against the decision, membership shall cease upon ratification of the decision by the general meeting.

Board of Management

- 5.1 The affairs of the Association shall be managed and controlled exclusively by the Board which in addition to any powers and authorities conferred by the Constitution may exercise all such powers and do all such things as are within the purposes of this Constitution and are not by the Act or by this Constitution required to be done by the Association in general meeting.
- 5.2 The Board shall consist of seven individual members of the Association comprising:
- a) the chairperson
 - b) the secretary
 - c) the treasurer
 - d) four additional members who shall be elected at Annual General Meetings.
- 5.3 No more than three of the Board members shall be from the same denomination or the same faith community.
- 5.4 A minimum of four of the Board members shall be registered nurses with a current practising certificate.
- 5.5 Elected members of the Board shall hold office for a period of 2 years and be eligible for re-election.

A.5 Documents to share with other organisations *continued*

- 5.6 Notice of persons nominated to stand for election to the Board shall be given to all members of the Association with a notice calling the Annual General Meeting at which the election is to take place. Nominations may also be accepted at the Annual General Meeting.
- 5.7 If only the required number of persons are nominated to fill existing vacancies, the Chairperson shall declare such persons duly elected as Board members.
- 5.9 In the event of a vacancy occurring on the Board, the Board shall appoint a member to fill the casual vacancy and such person shall hold office until the next Annual General Meeting of the Association.

Expulsion from the Board

- 6.1 The Board shall have the power to expel a member of the Board from office if it is demonstrated that the objectives and purposes of the member are contrary to those of the Association or the conduct of the member of the Board is detrimental to the interests of the Association.
- 6.2 The right of the Board to expel a member of the Board from office shall be subject to the Board giving the member the details of the basis upon which it seeks to remove the member from the Board at least one month before the Board meeting at which the matter will be decided and giving to the member an opportunity to be heard at the meeting or to make a written submission to the Board prior to that meeting. The member shall be given the right to appeal within two weeks of receipt of notification of a decision against any expulsion which appeal shall be determined at the next general meeting.

Duties of the Board

- 7.1 A minute record shall be kept and proper entries made of all business transacted at every meeting of the Board and of any committee and the same shall if purporting to be signed by the Chairperson of the meeting or, of the next succeeding meeting of the same body be received as prima facie evidence of the matters stated therein.
- 7.2 Subject to the provisions of the Constitution, the Board shall have the power to determine the procedure at their meetings and the mode of convening the same.
- 7.3 The Board may make, alter, suspend, and repeal such rules, standing orders, and regulations as they may think fit for regulating generally the affairs of the Association provided always that no such rule, standing order, or regulation shall be contrary to the provision of the Constitution.
- 7.4 The Board may appoint a committee or committees for the purpose of dealing with any subject and may delegate to such powers subject to such conditions as it thinks fit.
- 7.5 The Board shall identify and pursue sources of financial support for the work of the Association.

A.5 Documents to share with other organisations *continued*

Meetings of the Board

- 8.1 The Chairperson shall be responsible for calling meetings of the Board at least every three months.
- 8.2 Meetings shall be called by the Chairperson following a request of at least three members of the Board.
- 8.3 Decisions of the Board shall be by majority vote of the members present. Where there is a tied vote, the Chairperson shall have a casting vote to decide the issue.
- 8.4 A minimum of four members of the Board shall constitute a quorum.

General Meetings

- 9.1 Following the first full financial year of Incorporation, the Annual General Meetings of members of the Association shall be held each year between the months of August and October. A report of the work done during the preceding year shall be presented by the Board and a full audited account of the receipts and expenditure of the Association for the past year, together with a balance sheet, shall be presented to the meeting.
- 9.2 Special General Meetings of the members may be convened:
 - a) whenever the Board considers it necessary;
 - b) on written requisition of not less than five members, specifying the object of the meeting and at any Special General Meeting convened on such requisition, no business shall be transacted other than that specified in the requisition.
- 9.3
 - a) At all general meetings of the members a resolution put to the vote of the meeting shall be decided by a show of hands, unless the Chairperson of the meeting shall direct that the matter be decided on a poll which shall be taken in such manner that the Chairperson directs.
 - b) Both on a show of hands and on a poll, each member shall be entitled to one vote.
 - c) The vote to which the member is entitled may be exercised by the member personally, by the properly appointed proxy of the member, or by the representative of the member in the case of a group member.
- 9.4 A minute record shall be kept and proper entries made of all business transacted at every general meeting of the members. For this purpose, a minute secretary is to be appointed by the general meeting.
- 9.5 Normally the Board's Chairperson shall be chairperson of the general meetings.
- 9.6 Nine members of the Association present in person at a general meeting shall constitute a quorum.

A.5 Documents to share with other organisations *continued*

Treasurer

- 10 The Treasurer shall cause to be kept a complete account of the income and expenditure of the Association and shall also ensure that:
- 10.1 a proper record is kept of all receipts, expenditures, and other financial transactions and these records shall be available for inspection by any member of the Board from time to time;
 - 10.2 that all monies owing by the Association are duly paid, with payments being as petty cash or by cheque by two authorised signatories of whom there shall be no more than four appointed by the Board;
 - 10.3. major expenditures, which shall be defined by the Board from time to time, shall be authorised by the Board;
 - 10.4 all monies received are regularly deposited into the account authorised by the Association and that receipts shall be in every case taken for any monies paid on account of the Association;
 - 10.5 all receipts and other documents shall be carefully filed and preserved for inspection by the Auditor;
 - 10.6 the Annual General Meeting is provided with a report of the financial activities of the Association for the previous financial year together with a duly audited balance sheet and accounts of income and expenditure of the Association for the previous financial year.

Gift Fund

- 11 The Association will maintain a separate gift fund called the 'Australian Faith Community Nurses Association Gift Fund' ('Gift Fund').
- 11.1 Funds are only for the principal purposes of the Association.
 - 11.2 The Treasurer shall cause to be kept a complete account of all gifts of money and property credited to the Gift Fund and income and expenditure of the Gift Fund and shall also ensure that:
 - 11.3 all monies received by the Association as gifts including testamentary gifts, and gifts that are not tax deductible for the donor, distributions from charities, and property, will be regularly credited into the separate Gift Fund account authorised by the Association;
 - 11.4 all amounts received that are not gifts are not credited to the Gift Fund;
 - 11.5 and that proper records are kept specifically identifying all gifts received and receipts will be issued in every case for any monies received and paid on account of the Association that state the name of the fund, the Association's ABN, the fact the receipt is for a gift and a description of that gift, the amount of money donated, and the date of the gift;
 - 11.6 these records shall be available for inspection by any member of the Board from time to time;
 - 11.7 all receipts and other documents shall be carefully filed and preserved for inspection by the Auditor;

A.5 Documents to share with other organisations *continued*

- 11.8 the Annual General Meeting is provided with a report of the financial activities of the Gift Fund of the Association for the previous financial year together with a duly audited balance sheet and accounts of income and expenditure of the Association Gift Fund for the previous financial year;
- 11.9 if the gift fund is wound up or if endorsement (if any) of the organisation as a deductible gift recipient is revoked, any surplus assets of the Gift Fund remaining after payment of liabilities attributable to it, shall be transferred to a fund, authority or institution to which income tax deductible gifts can be made;
- 11.10 all members of the Association may apply to the gift fund for funding for specific projects that serve the principal purpose of the Association using specific procedures outlined by the Association.

Secretary

- 12 The Secretary shall perform duties as prescribed by the Board from time to time.

Auditor

- 13 There shall be a qualified accountant appointed by the Annual General Meeting as Auditor who shall:
 - 13.1 audit the accounts and books of the Association for the period ending the thirtieth day of June each year and if correct the Auditor shall certify accordingly;
 - 13.2 have the power at any time to call for the production of all books, accounts and other documents relating to the affairs of the Association;
 - 13.3 report to the Board if and when required.

Financial Year

- 14 The financial year of the Association shall commence on the first day of July in one year and end on the thirtieth day of June in the following year.

Public Officer

- 15 The Board shall appoint a Public Officer of the Association and in the absence of such appointment, the Chairperson shall be the Public Officer of the Association.

A.5 Documents to share with other organisations *continued*

Branches

- 16 The association may from time to time establish Branches in various regions of Australia where there are at least five members.
- 16.1 A Coordinator shall be nominated by each Branch of the Association and elected at the Annual General Meeting of the Association.
- 16.2 Branches shall be accountable to the Association and shall seek to serve the needs of the Association as outlined in the Constitution and By-Laws.

Common Seal

- 17.1 The Board shall provide for the safe custody of the Common Seal of the Association which shall not be affixed to any instrument except in the presence of one member of the Board and the Secretary and in pursuance of a resolution of the Board.
- 17.2 A Seal book shall be kept in which the Secretary shall enter the date of each occasion on which the Common Seal of the Association is affixed and the nature of the instrument.

Alteration to the Constitution

- 18 Alterations to the Constitution may be at the Annual General Meeting or at a Special General Meeting of the members by a majority of not less than three-quarters of the votes of the members present at the meeting providing that such rule changes have been listed on the Agenda and the proposed amendments circulated to all members not less than 21 days prior to the meeting. Such alteration, amendment or addition made to the Constitution shall when made, become effectual.

Non-Profit

- 19 The assets and income of the Association shall be applied solely in furtherance of its objects and no portion shall be distributed directly or indirectly to its members except as bona fide compensation for services rendered or expenses incurred on behalf of the Association.

Dissolution of Association

- 20 On dissolution all property whether real or personal remaining after payment of all debts and legal liabilities shall be transferred to:-
- 20.1 such other organisation or association having similar objects to those of the Association and which has rules prohibiting the distribution of assets and income to members or
- 20.2 (if no organisation similar to the association can be located) to a faith community or to faith communities which are nurturing and sustaining viable health ministries and which have rules prohibiting the distribution of assets and income to members.

By-Laws

21. The Board may make and prescribe such rules and conditions and by-laws governing
 - 21.1 the affairs of the constitution,
 - 21.2 the establishment and regulation of branches,
 - 21.3 the fees and other financial obligations of members,
 - 21.4 the standards of practice and standards of curriculum development recommended for faith community nurses,
 - 21.5 all administration matters concerning the Association and its branches
 - 21.6 the use and sharing of resources facilities and technical support and information, and
 - 21.7 such other matters as the Board thinks fit.

By-Laws (Re: Branches)

- 1 The Association may from time to time establish Branches in various regions of Australia where there are at least five members.
- 1.2 To maintain its status a branch must meet at least twice a year.
- 1.3 The Branches of the Association shall:
 - a) provide opportunity for networking, fellowship and support among members of the Association and other interested persons;
 - b) provide members in local area with professional development and mentoring as requested;
 - c) promote the purposes of the Associations at the local level;
 - d) seek to bring new members into the Association;
 - e) be a local forum for consideration of issues affecting members of the Branch or of the Association as a whole, or on which the Association is seeking feedback.
- 1.4 In addition to a Coordinator, who shall be nominated by the Branch members and elected at the Annual General Meeting of the Association, Branches may appoint such other officers as they may from time to time determine.
- 1.5 Branch Coordinators shall submit a report of all Branch activities, including an audited financial statement to the Annual General Meeting of the Association.

A.5 Documents to share with other organisations *continued*

A.5 Documents to share
with other
organisations *continued*

- 2. Branches may submit an annual budget to the Board of the Association to acquire annual funding to further the Association's purpose at the Branch level.
- 2.1 Branches may request non budgeted funding from the Board to fund specific projects that further the Association's purpose at the Branch level.
- 2.2 In states where no Branch exists a member may request non budgeted funding from the Board to further the Association's purpose.

A.5 Documents to share with other organisations *continued*

Background

As the APNA is reliant on member subscriptions and other sources of funding for its operational costs, building and maintaining good relationships with pharmaceutical companies is important.

The APNA has over 700 members and provides companies with a range of exposure options from events, communications and products.

Policy

The APNA shall seek sponsorship from pharmaceutical companies in order to assist member support activities and events, provide member benefits, develop resources and provide awards for recognition of best practice. This sponsorship may be in the form of financial assistance or in-kind support which increases APNA capacity to provide member support. Currently the home page of the website is not open for sponsorship as APNA seeks to retain its 'impartiality'.

Company Selection

Companies shall be selected based on the following criteria:

- Supportive of practice nurse role in general practice in its own right, not just as a conduit to the GP
- Company adheres to Medicines Australia Code of Conduct where applicable
- Products they are promoting are
 - What practice nurses want to have information about
 - Relate to practice nursing everyday work
 - Excellent quality and represent best practice in clinical care
- Company staff are ethical and do not place undue pressure on APNA to promote their product

APNA Commitment

APNA will commit to the following

- If more than one company is sponsoring a particular event or resource, each sponsor will be informed of the names of ALL sponsors involved.
- Ensuring that individual company sponsorship is not compromised by cross promotion of other like companies in situations where the sponsorship is significant.

A.5 Documents to share with other organisations *continued*

- Represent the company in a positive light at all times
- Respect the Medicines Australia Code of Conduct for companies bound by this

Entering into an Agreement

The APNA and the relevant company will enter into a joint agreement. This may be the APNA template or the company's own agreement providing it complies with APNA's sponsorship policy. The agreement will specify the amount of funding and nature of in-kind support being supplied by the company, what APNA will provide for the company, the contact personnel, timelines and dates, and an end date for the agreement. The agreement is to be signed by both a company representative and APNA EO, with copies to be made available to both parties.

- Determine which companies supply products that have relevance to the proposed activity.
- Contact the organisation and seek out whether they sponsor activities like the one proposed.
- Ascertain whether the company would be interested in sponsoring the particular event.
- Explain what the Division can do for them in return (e.g. air time to promote product etc.)
- If they are possibly interested, fax information concerning the activity to them.
- Follow this up a few days later with a phone call.
- If a company agrees verbally to sponsor or part-sponsor an activity, arrange for the sponsorship agreement to be signed by both parties
- Unless otherwise negotiated, the Whitehorse Division of General Practice maintains ownership of products created.
- Whitehorse Division maintains the right to control implementation details of programs, including marketing to all GPs, structure and content of programs, speakers etc.
- GPs should be canvassed for their approval before their name only is provided to a CPD sponsors. This is required for privacy purposes.

A.5 Documents to share with other organisations *continued*

1. Name

The name of the Association shall be the Australian Women's Health Nurse Association Incorporated (referred to in this Constitution as the 'Association').

2. Definitions

'Committee' - means the Office Bearers and up to ten other members of the Association, which may consist from time to time of one representative from each State or Territory and two Associate members elected by the Associate members of the Association.

'Office Bearers' shall be a President, Vice President, Secretary and Treasurer.

3. Aims and Objectives

- To develop the professional profile and status of womens' health nurses as a unified body with an established standard of practice.
- To provide peer support for womens' health nurses working in geographical isolation and in urban locations.
- To monitor standards of womens' health nurse clinical practice by evaluating service delivery and the development and implementation of quality assurance programmes.
- To monitor the theoretical and clinical education available to nurses in order to practice as a womens' health nurse.
- To ensure that appropriate inservice education opportunities are made available to provide for the professional development of womens' health nurses.
- To make representations on industrial issues pertinent to womens' health nurses.
- To provide a forum for discussion and dissemination of information for nurses working in the area of women's health.
- To increase the level of awareness in women and the general community of the specific physical, emotional and social health issues affecting women.
- To encourage women to take responsibility for their own health through the provision of information which will enable them to make informed decisions as health care consumers.
- To monitor and make recommendations regarding the provision of health care services to women.
- To be a consultant to other health and welfare workers and agencies to increase the options and improve the standards of women's health care.
- To work towards nurse practitioner status for womens' health nurses, in co-operation with other professional specialist nursing associations.

constitution of the australian women's health nurse association inc - part five

constitution

documents to share with other organisations

A.5 Documents to share with other organisations *continued*

4. Membership

Subject to these rules, the members of the Association shall be the members of the Association immediately prior to incorporation, together with such other people and organisations as the Committee admits to membership.

Membership of the Association shall be divided into three categories, being that of full membership, associate membership and affiliate membership.

Full membership is for registered nurses who have specific education and/or experience as approved by the Committee from time to time, which allows them to practice as a womens' health nurse. Full members are voting members of the Association.

Associate membership is for nurses (registered or enrolled) who are without specific education and/or experience in women's health nursing, but who are currently working in the area of women's health or who have a specific interest in women's health e.g. midwives, nurse continence advisors, women's health educators. Associate members are non-voting members of the Association.

Affiliate membership is for organisations with similar aims and objectives. Affiliate members are non-voting members of the Association.

Individuals and organisations wishing to become members of the Association shall apply to the Committee in writing for membership.

The Committee shall determine whether or not to accept an application for membership. The category of membership which is granted to a member shall be determined by the Committee. The Committee is not required to supply reasons for accepting or rejecting an application for membership.

Where the Committee approves a nomination for membership, the Secretary shall notify the nominee of the approval and request the nominee to pay the fees due within 28 days.

The Secretary shall enter the nominees name in the register of members after receipt of the payment. Where membership is approved within the last six months of a financial year, one half of the annual subscription fee shall apply.

Members shall pay such fees as are determined by the Association at a general meeting.

The Secretary of the Association shall establish and maintain a register of members of the Association, specifying the name and address of each person who is a member and the date on which they became a member.

Membership shall cease upon resignation, death, expulsion or failure to pay outstanding membership fees within six months of the due date.

A.5 Documents to share with other organisations *continued*

Membership fees shall fall due on the first day of each financial year of the Association. The financial year of the Association shall run from January 1 to December 31 or such other period as is determined by the Committee.

A member of the Association who has paid all amounts due to the Association in respect of that member's membership, may resign from the Association by giving two weeks notice in writing to the Secretary. Upon receipt of such notice, the member ceases to be a member of the Association. The Secretary shall make an appropriate entry in the register of members recording the date on which the member ceased to be a member.

Where the Committee is of the opinion that a member of the Association:

- has persistently refused or neglected to comply with a provision of these rules or
- has persistently and willfully acted in a manner prejudicial to the interests of the Association,

The Committee may, by resolution:

- expel the member from the Association or,
- suspend the member from the membership for a specified time.

The Secretary shall, as soon as practicable, cause a notice in writing to be served on the member setting out the resolution of the Committee and the grounds on which it is based. Anyone who wishes to appeal against a decision refusing membership, expelling them from membership or otherwise disciplining them, may do so at the next general meeting of the Association.

The Committee may waive or reduce the annual fee for any financial year in respect of any member who the Committee, in its absolute discretion, believes to be in circumstances of financial hardship.

Liability of members and the Committee to contribute towards the payment of debts and liabilities of the Association or the costs, charges and expenses of the winding up of the Association shall be limited to the amount of any unpaid membership fees.

5. The Committee

The Association shall have its affairs controlled and managed by the office bearers and other members known as the Committee.

The office bearers shall be a President, Vice President, Secretary and Treasurer. Office bearers shall all be full members of the Association. There shall be up to ten other members of the Committee. These shall be one representative from time to time from each State or Territory. Such representatives shall be full members of the Association. The Associate members of the Association shall elect two Associate members to the Committee. These Associate members shall be voting members of the Committee. Each State or Territory may elect to send one delegate per State or Territory to attend Committee meetings on behalf of their elected representative in order to facilitate information dissemination and fair representation of member issues. Such delegates shall be non-voting members of the Committee.

constitution of the australian women's health nurse association inc - part five

constitution

documents to share with other organisations

A.5 Documents to share with other organisations *continued*

The office bearers and other members of the Committee shall be elected at each Annual General Meeting. Nominations of candidates for election as office bearers or other Committee members may be made at the Annual General Meeting or in such other ways as may be determined by the Association at a general meeting. Any casual vacancy occurring in the Committee may be filled by a member appointed by a Committee.

Each member of the Committee shall hold office from the date of their election or appointment until the next Annual General Meeting.

Retiring Committee members are eligible for re-election.

The Committee shall meet as often as necessary to conduct the business of the Association.

The quorum for meetings of the Committee shall be one half the number of Committee members elected at the previous Annual General Meeting.

Notice of Committee meetings shall be given at the previous Committee meetings or by such other means as the Committee may decide upon.

A member of the Committee shall cease to hold office upon resignation in writing, removal as a member of the Association or absence from three successive Committee meetings without approval by the Committee.

The Committee may function validly provided its number is not reduced below the quorum. Should Committee numbers fall below the quorum, the remaining Committee members may act only to appoint new Committee members.

Questions arising at any meeting of the Committee shall be decided by the majority of votes of those present. In case of an equality of votes, the person appointed to chair the meeting shall have a second or casting vote.

If within half an hour of the time appointed for a Committee meeting, a quorum is not present, the meeting shall be dissolved.

Additional meetings of the Committee may be convened by the President or any two members of the Committee.

The Committee may delegate to one or more sub-committees specific tasks to be undertaken. The sub-committee may meet and adjourn as it thinks proper.

6. Office Bearers

The President or, in the President's absence, the Vice-President shall act as chairperson at each general meeting and Committee meeting of the Association.

If the President and the Vice-President are absent from a meeting or unwilling to act, the members present at the meeting shall elect one of their number to act as chairperson.

A.5 Documents to share with other organisations *continued*

The President, or in the President's absence, the Vice-President shall represent the Association as its principal officer when required to do so by the Association.

The Secretary shall ensure that records of the business of the Association including the rules, register of members, minutes of all general and Committee meetings and a file of correspondence are kept. These records shall be available for inspection by any financial member and shall be held in the custody of the Secretary.

The Treasurer shall ensure that all money received by the Association is paid into an account in the Association's name. Payments shall be made by cheque signed by two signatories authorised by the Committee.

The Treasurer shall ensure that correct books and accounts are kept showing the financial affairs of the Association. These records shall be available for inspection by any financial member and shall be held in the custody of the Treasurer.

The Treasurer shall prepare and present the Treasurer's report at each general meeting and the Annual General Meeting of the Association.

6.4 Each State or Territory representative shall represent members in their constituency by placing items on the agenda for the Committee meetings or general meetings, and shall disseminate information from such meetings back to the members of their constituency.

6.5 Associate member representatives shall present to each Committee meeting and general meeting the views and concerns of Associate members.

7. Meetings

7.1 An Annual General Meeting of the Association shall be held each year, within six months from the end of the financial year of the Association. The date and place of the Annual General Meeting is to be determined by the membership.

7.2 At the Annual General Meeting the following business shall be transacted:

- confirmation of the minutes of the previous Annual General Meeting
- receipt of the Committee's report on the activities of the Association in the last financial year
- election of Office Bearers and other members of the Committee
- receipt and consideration of the Treasurer's report

7.3 There shall be six general meetings of the Association held in each year, one of which being the Annual General Meeting.

constitution of the australian women's health nurse association inc - part five

constitution

documents to share with other organisations

A.5 Documents to share with other organisations *continued*

- 7.4 Written notice of all general meetings shall be given to members either personally or by post. In the case of general meetings where a special resolution is to be proposed, a notice of the resolution shall be given to members at least 21 days before the meeting.
- 7.5 The committee may, whenever it thinks fit, convene a special general meeting of the Association. A special general meeting must be convened by the Committee within two months of receiving a written request to do so from at least five percent of the membership of the Association.
- 7.6 The quorum for a general meeting shall be give members present in person. If within half an hour of the time appointed for a general meeting a quorum is not present, the meeting shall be dissolved.
- 7.7 Voting at general meetings shall be by a show of hands unless a secret ballot is demanded. Decisions shall be made by a simple majority vote except for those matters which must be decided by special resolution where a three quarter majority is required.
- 7.8 In the case of an equality of votes, the person appointed to the chair at the general meeting shall have a second or casting vote.
- 7.9 All votes shall be given personally or by proxy. Each member shall be entitled to appoint another member as proxy by notice given to the Secretary. No member may hold more than five proxies.

8. Special Resolutions

- 8.1 A special resolution must be passed by a general meeting of the Association to effect the following changes:
- a change in the Association's name
 - a change in the Association's constitution
 - an amalgamation with another incorporated association
 - to voluntarily wind up the Association and distribute its property
 - to apply for registration as a Company or a Co-operative.
- 8.2 A special resolution shall be passed in the following manner:
- a notice must be sent to all members advising that a general meeting is to be held to consider a special resolution
 - the notice must give details of the proposed special resolution and give at least 21 days notice of the meeting
 - a quorum must be present at the meeting
 - at least three-quarters of those present must vote in favour of the resolution
 - in situations where it is not possible or practicable for a resolution to be passed as described above, a request may be made to the Department of Fair Trading for permission to pass the resolution in some other way.

A.5 Documents to share with other organisations *continued*

9. Public Officer

- 9.1 The Committee shall ensure that a person is appointed as Public Officer.
- 9.2 The first Public Officer shall be the person who completed the application for Incorporation of the Association.
- 9.3 The committee may at any time remove the Public Officer and appoint a new Public Officer provided the person appointed is 18 years of age or older and a resident of New South Wales.
- 9.4 The Public Officer shall be deemed to have vacated their position in the following circumstances:
 - Death
 - Resignation
 - removal by the Committee or at a general meeting
 - bankruptcy or financial insolvency
 - mental illness
 - residency outside New South Wales.
- 9.5 When a vacancy occurs in the position of Public Officer, the Committee shall within 14 days notify the Department of Fair Trading by the prescribed form and appoint a new Public Officer.
- 9.6 The Public Officer is required to notify the Department of Fair Trading by the prescribed form in the following circumstances:
 - Appointment (within 14 days)
 - A change of residency address (within 14 days)
 - A change in the Association's Aims and Objectives or Constitution (within one month)
 - A change in the membership of the Committee (within 14 days)
 - A change in the Association's financial affairs (within one month after the Annual General Meeting)
 - A change in the Association's name (within one month).
- 9.7 The Public Officer may be an office bearer, Committee member, or any other person regarded as suitable for the position by the Committee.

A.5 Documents to share with other organisations *continued*

10. Common Seal

The Common Seal of the Association shall be kept in the custody of the Secretary and shall only be affixed to a document with the approval of the Committee. The stamping of the Common Seal shall be witnessed by the signatures of two members of the Committee.

11. Miscellaneous

The Association shall effect and maintain insurance as is required under the Associations Incorporation Act 1984 together with any other insurance which may be required by law or regarded as necessary by the Association.

The funds of the Association shall be derived from the fees of members, donations, grants and such other sources approved by the Association.

The Association may at any time pass a special resolution determining how any surplus property is to be distributed in the event that the Association should be wound up. The distribution of surplus property shall be in accordance with section 53 of the Associations Incorporation Act, 1984.

The income and property of the Association shall be used only for promotion of the objects of the Association and shall not be paid or transferred to members by way of dividend, bonus or profit.

Service of documents on the Association is effected by serving them on the Public Officer or by serving them personally on two members of the Committee.

Notices sent by post shall be deemed to have received two days after the date of posting.