

## **Connecting the Docs**



# Governance Model





Connecting the Docs acknowledges First Nations Peoples as the Traditional Owners and Custodians of the land on which we meet.

We pay our respects to their Elders—past, present, and emerging.

## **Connecting the Docs**

## **About Us**

Connecting the Docs (CTD) is an innovative partnering program designed to address medical workforce shortages impacting rural and regional hospitals, community health services and primary care clinic providers.

#### **Our Vision**

Supporting Doctors to make a difference in rural and regional communities.

#### **Our Purpose**

Empowering rural and regional partners to shape the future of Victoria's medical workforce by placing and retaining the right doctors in the right communities at the right time through innovation, collaboration, and purposeful career development.

#### **Our Values**

#### Courage

We boldly connect doctors to the communities that need them most—standing alongside them to navigate challenges, shape long-term careers, and pursue innovative solutions to achieve the best outcomes for both doctors and communities.

## **Teamwork**

Together with our healthcare partners, we match the right doctors to the right communities—creating lasting connections through shared goals and strong collaboration.

## **Dependable**

We follow through on our promise—placing doctors where they're needed most and providing the ongoing support, career pathways, and stability that help them stay and thrive.



### **Governance Overview**

Central to Connecting the Docs is the collaboration between the founding member organisations consisting of regional and community health organisations, with the collaboration defined through a structured, but non-binding collaborative partnership agreement.

The scope of the collaborative partnership agreement between parties is summarised as follows:

- **Independent but Cooperative:** Each party retains control over its operations and IP, but agrees to work together in good faith.
- **Governance:** A Steering Committee, with one representative per party, oversees the collaboration. Parties will work to ensure that decisions are made with unanimous consent, with consent not being unreasonably withheld.
- **Lead Agency:** Echuca Regional Health is the primary agency who holds the regulatory and contractual obligations (such as employment of staff and funding agreements) associated with operations and finances.
- **Member Agencies** make a financial contribution to the Lead Agency (reviewed annually) in recognition of base costs, and are members of the CTD Steering Committee.
- Intellectual Property: Background IP remains with each party; new IP is jointly owned based on contributions.
- **Risk and Liability:** Parties share liabilities and must hold insurance. Confidentiality and data use are strictly controlled.

### **Steering Committee**





## **CTD Steering Committee**



The Steering Committee is made up of founding members with key levels of expertise, comprising of Directors of Medical Services and Chief Executive Officers of the the key health services.

#### **Primary Purpose**

The Steering Committee provides strategic oversight and leadership of the Connecting the Docs program. Its primary purpose is to guide the implementation and ongoing development of the program by monitoring performance, managing risks, and ensuring alignment with regional healthcare priorities, budgets, and timelines.

#### Responsibilities

#### **Strategic Oversight and Program Governance**

- Provide overarching strategic direction and governance for the Connecting the Docs program, ensuring alignment with regional healthcare workforce goals and regulatory requirements.
- Execution of Strategic Plan and key performance indicators make key decisions on priorities, milestones, and policy development.

#### **Operational Decision-Making and Issue Resolution**

• Identify and resolve major operational issues, and make decisions—by consensus or unanimity, as required—that may significantly impact the program's trajectory.

#### **Budget and Financial Oversight**

• Approve major program expenditures, oversee financial performance against budget, and ensure funding accountability and sustainability.

#### Risk, Quality, and Compliance Management

Monitor and manage program risks, clinical governance risks, third party risks and compliance
with relevant laws and funding requirements, ensuring consistent reporting and escalation
where necessary.

#### **Stakeholder Engagement and Policy Direction**

- Develop and approve collaboration policies, oversee integration with key stakeholders (including advisory groups), and support the program's visibility and effectiveness across regional Victoria.
- Collaborate with industry partners to design or co-design innovative initiatives.



## **CTD Steering Committee**



#### **Role of the Committee Chair**

The work of the Chair is to continually support the Steering Committee work processes, performance and expertise. The Chair must be the primary contact of a member agency. The Chair is appointed by the CTD Steering Committee. The tenure is reviewed every three years.

#### The Chair will:

- Work with the Project Lead to convene and manage the work of the Committee.
- Collaborate with all Steering Committee members to support optimal participation and clarity of current and emerging priorities of the Committee.
- Support an environment where all member agencies contribute their expertise and to participate in open, robust and constructive discussions.
- Call additional meetings as required
- Progress urgent matters via out-of-session resolution, if required.

#### **Meeting Cadence**

Monthly 1.5 hour meeting with a bi-annual in-person review and planning day inclusive of all CTD Steering Committee members.

Position	Name	Organisaiton and Role	
Project Lead/ Program Director	Lauren Byrne	CTD Leadership	
Executive Director Medical Services & Chief Medical Officer	Dr Annemarie Newth	Echuca Regional Health- Executive Sponsor and Program Fundholder (Founding Member)	
Chief Executive Officer	Kellie Byron-Gray	Kerang District Health (Chair) (Founding Member)	
Chief Executive Officer	Trevor Adem	East Wimmera Healthcare (Founding Member)	
Chief Executive Officer	Perlin Simon	Mallee District Aboriginal Service (Founding Member)	
Executive Director Medical Services / Chief Medical Officer	Dr Nabrees Sinnalebbe	Mildura Base Public Hospital (Founding Member)	
Chief Executive Officer	Penny Wilkinson	Northern District Community Health (Founding Member)	
Executive Director Medical Services / Chief Medical Officer	TBC / Interim	Swan Hill District Health and Kerang District Health (Founding Member)	

## **Delegation of Authority**

A Delegation of Authority (DOA) supports the CTD Steering Committee to make timely, transparent, and accountable decisions aligned with the program's strategic goals and funding obligations. It will be reviewed annually by the Steering Committee.

Program Area	Lead Agency	Steering Committee	Employed Staff	Notes
Strategic Direction	Ensures strategy is aligned with all contracts and funding obligations	Co-develops and approves overall strategic direction and material changes	Executes approved strategy; reports milestones	Based on CTD Strategic Plan and Collaboration Agreement
Budget & Finance	Oversees planning and ensures compliance. Final approval of EOFY budget and sign off.	Approves annual budget and reallocations	Manages day-to-day spend within approved budget	Alignment with funding agreements
Recruitment & Staffing	Recruits and appoints within agreed roles. Embeds induction, orientation and ongoing management within HR systems and practices of Lead Agency	Endorses Chair appointment and major structural changes	Manages daily resourcing and contracts under \$5K	Role clarity in Collaboration Agreement clauses 3–5
Contracting & Procurement	Signs off contracts ≤\$50K aligned to ERH Instrument of Delegation policy	Approves contracts over \$50K or strategic partnerships	Conducts vendor selection and prepares submissions	Follows procurement policy; transparent processes advised
Clinical Governance / Risk	Oversees risk register, escalates major risks	Approves risk framework, major mitigations	Maintains risk logs and applies controls	Escalation per clinical incidents & workforce risks
Compliance & Regulation	Approves audit reports and compliance updates as required as part of contractual and funding obligations	Ensures program complies with legal and funding conditions	Maintains internal records, staff training logs	Based on NDCH audit standards and CTD legal clauses
Sector Engagement	Provides ongoing support and escalation for CTD employees as required	Leads sector-wide relationship management and development	Executes events, liaises with key stakeholders across the sector.	Critical to cultural integration and regional attraction outcomes
Technology & Data	Provides and manages the data systems and IT support in line with privacy and data governance standards	Overview and mitigation of data governance and privacy risks.	Manages systems, data inputs, vendor interactions	GDPR, Privacy Act, OAIC compliance expected
Fundraising / Grants	Reviews applications, signs off for submission	Approves funding strategies and grant applications	Drafts proposals, submits reports and milestone updates	Works with Lead Agency on shared funding outcomes





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## Contact us

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