Position Description

Position:	Audit & Compliance Officer
Department:	Corporate Services / Quality, Safety & Risk
Location:	Omeo, Victoria (on-site or hybrid as approved)
Reports to:	Manager, Quality Safety and Risk
Enterprise Agreement:	Victorian Public Health Sector (Health and Allied Services, Managers & Administrative Workers) Single Interest Enterprise Agreement 2021 – 2025
Classification:	To be determined in accordance with the Enterprise Agreement

The Organisation

Omeo District Health (ODH) is a Small Rural Health Service that provides a broad range of health and support services to our local communities. These include urgent care, acute care, transition care, residential aged care, primary care, home-based care, and community-based/district nursing.

Located in the East Gippsland High Country, ODH serves the Omeo and District region as the gateway to Victoria's spectacular Alpine region. The area is surrounded by national parks, mountains, rivers, and lakes, offering year-round outdoor recreation. Omeo is home to the newly opened Omeo Mountain Bike Park and is situated just 55 kilometres from Hotham Alpine Resort.

Consistent with our purpose, we aim to promote and enhance the health and wellbeing of the people of the East Gippsland High Country.

We do so by:

- Reaching out to our local rural community in the planning and delivering of our services.
- Building a highly engaged and skilled team of health care professionals and volunteers with a commitment to creating a culture of achievement and service excellence.
- Developing sustainable health care service models and ensuring that we comply with our legislative, ethical and statutory obligations and,
- Investing in strategic partnerships and alliances that help achieve better service outcomes.

ODH is an equal opportunity employer and has adopted a common set of values and code of conduct that drive our everyday work:

C   Compassion
A   Accountability
R   Respect
E   Excellence

Our people are at the heart of our organisation – regardless of role. Every day, they make a meaningful difference in the lives of our consumers and their families, reflecting our deep commitment to care and community.

ODH believes that diversity, equity, and inclusion (DEI) are essential to building a thriving workplace and a stronger, more connected community. We are committed to fostering a culture where everyone – regardless of background, identity, or experience – is valued, respected, and empowered to contribute their best.

Department

The Quality, Safety and Risk Team within the Corporate Services Division ensures Omeo District Health maintains robust governance, compliance, risk management, and quality assurance systems to support the delivery of safe, high-quality, and person-centred care.

The team provides organisational oversight and assurance across legislative, regulatory, accreditation, and policy obligations, supporting the Executive and Board to effectively discharge their governance responsibilities.

The Audit & Compliance Officer sits within the Quality, Safety and Risk Team and works collaboratively with service managers, Executive, and Board Committees to coordinate clinical, quality, and safety-related audits, administer compliance frameworks, provide transparent and timely reporting, and support a strong culture of accountability, continuous improvement, and accreditation readiness across the organisation.

Audits relating to financial management, procurement, or other specialist corporate audit domains are outside the scope of this role and are managed through separate governance and assurance arrangements.

Position Summary

The Audit & Compliance Officer provides central coordination, assurance, and visibility of ODH's compliance, audit, and regulatory obligations relating to clinical, quality, and safety domains.

The role is critical to maintaining an accreditation-ready organisation and providing confidence to the Executive, Board, regulators, and external auditors that compliance risks are systematically identified, monitored, and managed across all applicable frameworks.

The Audit & Compliance Officer administers ODH's compliance management system (Comply Online), coordinates the annual internal audit schedule, and prepares timely and accurate compliance and audit reporting.

While the role coordinates and monitors organisational compliance and audit activities, accountability for operational compliance remains with relevant managers and service leads. The role functions as a second-line assurance and coordination function, supporting effective governance and continuous improvement.

Key Responsibilities

Compliance Coordination

- Administer and maintain ODH's compliance register (Comply Online), including assignment of obligations, risk ratings, and review cycles.
- Ensure legislative, regulatory, accreditation, and policy obligations are accurately captured, reviewed, and monitored.
- Monitor upcoming and overdue compliance tasks, escalating risks in accordance with governance requirements.
- Ensure compliance evidence is current, complete, and appropriately stored in Prompt.
- Maintain oversight of licences, registrations, and statutory obligations relevant to ODH operations.

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Audit Management (Clinical, Quality & Safety)

- Coordinate and maintain the annual clinical, quality, and safety audit schedule as endorsed by the Executive and relevant Board and Operational Committees.
- Track audit progress, completion status, and overdue audits, escalating risks where required.
- Undertake routine clinical, quality, and safety audits in accordance with the approved audit program and organisational priorities.
- Ensure audit tools, templates, and reports align with organisational, accreditation, and regulatory standards.
- Record audit outcomes and follow-up actions in the Continuous Improvement Plan and monitor actions to closure.

Risk, Quality & Accreditation Support

- Support accreditation preparation and ongoing readiness against accreditation standards applicable across ODH's services, including, but not limited to:
    - National Safety and Quality Health Service (NSQHS) Standards;
    - Strengthened Aged Care Quality Standards; and
    - NDIS Practice Standards.
- Identify systemic compliance risks and support corrective and preventive action planning.
- Support policy and procedure review cycles to ensure alignment with regulatory and best-practice requirements.
- Promote a proactive, accreditation-ready culture across the organisation.

Reporting, Education & Engagement

- Prepare clear, timely compliance and audit reports for Executive, Committees, and the Board.
- Provide advice and guidance to managers and staff regarding compliance and audit obligations.
- Deliver targeted compliance and audit education to support organisational capability and accountability.
- Contribute to and manage dashboards and reporting mechanisms to improve visibility of compliance status and trends.

Key Selection Criteria

Technical & Professional Expertise

- Demonstrated experience in compliance, audit, quality, or risk roles within healthcare or another regulated environment.
- Experience administering compliance management systems and audit frameworks.
- Demonstrated strong understanding and practical use of Microsoft Office 365 tools, including Microsoft Word, Microsoft Excel, and SharePoint, to support document control, reporting, dashboards, and governance processes.
- Sound understanding of governance, accreditation, and regulatory requirements applicable to health services.

Communication & Collaboration

- Strong written and verbal communication skills, including preparation of reports for Executive, Management and Board audiences.
- Demonstrated ability to manage confidential and sensitive information.
- Ability to work collaboratively with managers, clinicians, and corporate staff.

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Organisational & Analytical Skills

- Strong organisational and analytical skills, with the ability to synthesise audit and compliance information into clear, actionable insights.
- Strong attention to detail and accuracy.
- Ability to manage competing priorities and cyclical compliance and audit workloads.
- Proactive approach to problem-solving and continuous improvement.

Essential Qualifications & Experience

- Relevant experience in compliance, audit, quality, risk, or governance roles.

Desirable Qualifications & Experience

- Tertiary qualifications in compliance, quality management, risk management, health administration, or a related discipline.
- Experience in a healthcare, aged care, or NDIS-regulated environment.

Employment Conditions and Compliance Requirements

This position is conditional upon and subject to:

- Valid Australian work rights.
- Satisfactory National Police Check, Working with Children Check, and NDIS Worker Screening.
- Compliance with Victorian Department of Health immunisation requirements for public sector health employees, including annual influenza vaccination.
- Provision and ongoing maintenance of documented evidence of immunity or serology in accordance with ODH Infection Prevention and Control policies and applicable health guidelines, including (but not limited to) Hepatitis B, Measles, Mumps, Rubella, Varicella, and influenza.
- Annual completion of mandatory training requirements.
- Capacity to safely perform the inherent requirements of the role, including physical and psychological requirements.
- Provision of accurate and current information regarding qualifications, professional training, registrations, and licences relevant to the role.
- Holding and maintaining a valid driver's licence where required for the role, with an obligation to notify the Employer of any suspension, cancellation, or relevant driving offence.
- Ongoing satisfactory work performance.
- Any other lawful requirements necessary to meet the operational needs of the Employer.

Work Health & Safety, Privacy and Professional Conduct

The Audit & Compliance Officer is required to perform their duties in accordance with all applicable organisational policies, legislative requirements, and professional standards, and to act in a manner consistent with ODH's values and Code of Conduct.

Work Health & Safety

- Comply with ODH's Work Health & Safety (WHS) policies, procedures, and safe work practices.
- Take reasonable care for their own health and safety and that of others who may be affected by their actions or omissions.
- Identify, report, and where appropriate escalate hazards, incidents, and risks in accordance with organisational requirements.

- Contribute to a positive safety culture by promoting safe work practices and participating in WHS initiatives, training, and incident reviews as required.

Privacy, Dignity and Confidentiality

- Uphold the privacy, dignity, and confidentiality of all patients, residents, clients, staff, and stakeholders.
- Comply with applicable privacy legislation, information security requirements, and ODH's policies relating to the handling, storage, and disclosure of information.
- Ensure sensitive and confidential information is accessed, used, and shared only for legitimate business purposes and in accordance with approved systems and processes.

Professional Conduct

- Act in accordance with ODH's Code of Conduct, organisational values, and ethical standards.
- Maintain professional, respectful, and appropriate behaviour in all interactions with colleagues, consumers, external stakeholders, and regulators.
- Avoid conflicts of interest and declare any actual, potential, or perceived conflicts in accordance with organisational policy.
- Perform all duties with integrity, accountability, and impartiality, supporting a culture of trust, transparency, and continuous improvement.

Job Analysis: Identification and Physical and Psychosocial Hazards

While this role is primarily office-based and involves administrative and coordination responsibilities, it also includes exposure to a range of physical and psychosocial hazards common to professional roles within a healthcare environment.

The following identifies potential hazards associated with the role and outlines the general risk profile, to support appropriate workplace controls and safe work practices.

Physical Hazards Analysis

Hazard Type	Examples in Role	Potential Risks	Control Measures
Manual Handling	Moving files, documents, records, and setting up meeting materials.	Minor musculoskeletal strain, repetitive motion injuries.	Ergonomic workspace setup, safe manual handling techniques, use of trolleys or assistance where required.
Prolonged Sitting & Screen Use	Extended computer work, data entry, reporting, virtual meetings.	Eye strain, neck and back discomfort, musculoskeletal issues.	Ergonomic workstation, regular screen breaks, adjustable chairs and desks.
Workplace Ergonomics	Desk, chair, screen height, lighting.	Postural discomfort, headaches.	Ergonomic assessments, appropriate workstation adjustments.
Travel & Offsite Meetings	Attendance at internal meetings, audits, or site visits within ODH facilities.	Fatigue, minor travel-related risks.	Adherence to travel and fatigue management policies, scheduling breaks.

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Hazard Type	Examples in Role	Potential Risks	Control Measures
Slips, Trips & Falls	Moving through office areas, corridors, and clinical environments.	Minor injury from falls.	Appropriate footwear, hazard awareness, prompt reporting of hazards.
Infection Exposure	Occasional presence in clinical or aged care environments during audits or meetings.	Illness, exposure to infectious agents.	Compliance with infection prevention policies, vaccination requirements, hand hygiene, PPE where required.

Psychosocial Hazards Analysis

Hazard Type	Examples in Role	Potential Risks	Control Measures
Workload & Time Pressures	Managing cyclical audit schedules, accreditation preparation periods, reporting deadlines.	Work-related stress, fatigue.	Work planning, prioritisation, regular supervision, workload monitoring.
Role Clarity & Expectations	Managing evolving regulatory and accreditation requirements.	Uncertainty, inefficiency.	Clear role description, regular supervision, documented priorities and work plans.
Work Intensity During Peak Periods	Accreditation preparation or audit-heavy periods.	Increased stress, fatigue.	Forward planning, reasonable timeframes, escalation of capacity constraints.
Exposure to Sensitive Information	Reviewing incidents, audit findings, non-compliance, or adverse outcomes.	Emotional strain.	Access to EAP, supportive supervision, debriefing as required.
Workplace Relationships	Coordinating audits and compliance activities across multiple teams.	Interpersonal tension, frustration.	Clear communication, escalation pathways, managerial support.
Organisational Change	Changes to standards, legislation, or organisational priorities.	Uncertainty, disengagement.	Transparent communication, change support, supervision.

Performance Evaluation and Review

Performance will be reviewed at three months, six months (end of probation), and annually thereafter. Performance will be assessed against agreed objectives and the following Key Performance Indicators (KPIs):

Audit Governance & Timeliness

- ≥95% of clinical, quality, and safety audits completed in accordance with the Board-, Board Committee-, Operational Committee-, or Executive-approved annual audit schedule.
- 100% of clinical, quality, and safety audit tools are up-to-date and grounded in best practice and accreditation guidelines as approved by the Manager, Quality, Safety and Risk.
- No high-risk audits overdue without documented escalation and management response.

Compliance Management

- ≥95% of compliance obligations reviewed within scheduled timeframes.

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- Zero unplanned lapses in licences, registrations, statutory reporting, or mandatory returns.

Accreditation Readiness
- 100% of clinical, quality, and safety audit evidence, supporting documentation, and audit outcomes are organised, current, and recorded in accordance with applicable accreditation standards, including (but not limited to) the NSQHS Standards, Strengthened Aged Care Quality Standards, and NDIS Practice Standards.
- 100% of legislative, regulatory, and accreditation-related compliance obligations are registered, assigned, and maintained in assigned internal repository (e.g., ODH Quality SharePoint) and/or Comply Online (where applicable), with review cycles clearly defined and monitored.
- No critical governance-related non-compliances identified during external assessments without prior escalation to the Executive and documented management response.

Reporting & Assurance
- Compliance and audit reports delivered within agreed reporting cycles to Executive and relevant Board and Operational Committees.
- Reports demonstrate clear status, trends, and risks requiring escalation.

Continuous Improvement
- Audit and compliance findings tracked through to closure.
- Reduction in overdue or unmanaged compliance items year-on-year.

Professional Development
- 100% participation in performance review and development program annually, or more frequently as determined by the organisation.
- Maintain knowledge required for the performance of the position.
- 100% completion of and compliance with mandatory education / training as outlined in ODH's Mandatory Training Policy & Procedure.

Acknowledgement

I, ..., acknowledge that I have read and understood this Position Description and agree to perform the duties and responsibilities outlined, in accordance with all requirements of Omeo District Health's policies and procedures.

Signature: _____   Date: ....../....../.......

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