Clinical Governance: Implementing Systems and Processes

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Overview

The session will overview the following key areas

• Defining the concept of Clinical Governance
• Risk and Clinical Governance
• Exploring the Clinical Indicator concept
• Defining the role of Clinical Leadership in the Clinical Governance
• Understanding the key Quality Improvement concepts
• Explore the relationship between Clinical Risk Management and Quality Improvement
What is Clinical Governance?

“A framework of responsibility and accountability that continuously measures, monitors and improves the safety and quality of all clinical services, and promotes optimal client/customer/resident health outcomes and clinical excellence”.

Domains of Clinical Governance

Clinical Governance domains support, influence and sustain strategies to enhance the delivery of clinical care and ensure its effectiveness and adaptability long term.

- Clinical Effectiveness, Performance and Evaluation
- Strategic Planning and Leadership
- Clinical Risk Mitigation
- Building an Effective Workforce
- Incorporating Consumer Values
Clinical Governance Structures

- Independent Advisory Panel
- Board
- Central Clinical Governance Steering Committee
- Central Risk Committee
- Local Clinical Governance Committee

As Required; Advisory
Hard Reporting Line
Clinical Leadership

• It is imperative that clinicians are afforded the opportunity for professional development, and supported to develop clinical leadership skills and attributes to achieve clinical excellence and high quality service provision.

• The organisation should adopt an approach where clinicians are supported to be clinical leaders, accountable for their practice and contributing towards sustainable organisational improvement.
Quality Assurance Responsibilities

In order to achieve appropriate clinical governance and assurance, it is expected that organisations:

• Conduct **regular clinical governance and quality meetings**, with a pre-defined terms of reference
• Produce clinical governance and quality **reports**
• Have appropriate **organisational support structures**
• Have **benchmarking** and **quality indicator** programs
• Have a clinical governance **audit program**
• Develop a **professional development program**
• Have organisational **quality goals**.
Managing Clinical Information

An important component of any clinical governance system is the ability to monitor clinical information in order to improve and manage performance and track progress on outcomes. The following are examples of clinical management information systems:

- Reporting key clinical indicators
- Quality Management System
- Collation and Analysis of Information
- Information Governance Systems
- Complaints and Incident Management
- Assurance through External Bodies.
Clinical Risk Management

• Successful **clinical risk management** is founded upon a culture of transparency and safety consciousness within organisations.

• The organisation’s approach to risk should be captured within the system of **governance**, which is supported by **risk management policy** - to reduce risk and enhance clinical quality outcomes
Risk Management process

The **first process of risk management** is to

- identify

- capture current and emerging risks that may impact the organisation’s ability to achieve objectives, or daily activities in a manner consistent with legal, regulatory and customer expectations.

- risks have to be categorised and captured within formal risk registers.
Risk and Clinical Governance

5 top risk factors that often result in non compliance:

1. Medication Management
2. Pain management
3. Nutrition and hydration
4. Behaviour management
5. Specialised Nursing Care – Include wound management
Clinical Indicators

• **Performance measures** that enable the organisation to benchmark and compare itself against its own performance, and other organisations within the industry.

• Clinical Indicators **identify gaps in practice** and facilitate **opportunities** for quality improvement across an entire system.
Clinical Governance Audit

In order to confirm clinical assurance activity, it is critical to have an appropriate clinical audit program. Suggested audit criteria may include:

- Accountability
- Policy & Strategy
- Organisational Structure
- Resource Allocation
- Risk Management
- Communication
- Measuring Effectiveness
- Quality Improvement
- Customer Focus
- Education & Professional Development
- External Review
Continuous Quality Improvement & Innovation

The cycle of CQI is a comprehensive management philosophy that focuses on continuous improvement by applying scientific methods to gain knowledge and control over variation in work processes.

Quality Improvement processes encourage:

• **Clear planning and support** for a continuous cycle of review and improvements in services
• **Strong leadership** and **commitment** to quality improvement
• **Understanding** among staff as to **how** the quality improvement process works
• **Teamwork** across professional and organisational boundaries
• **Appropriate data collection and use of data** to inform clinical decision making
• Review of outcomes or performance against **specific measures**
Communicating Clinical Governance

The key aims of communication are to:

• **Raise awareness** both internally and externally

• **Highlight programs** across the business that **shape** and **influence** the delivery of care

• Utilise all available **approaches to engage** with stakeholders

• **Promote and inform people** working within the organisation of existing services that are delivering on the vision

• **Equip and support** people working in the business with information about how they can shape the business to deliver clinical excellence.
Inspire staff and the public to appreciate and understand the quality strategy and vision.
Monitoring Compliance

• Achieving appropriate clinical governance requires the organisation to have appropriate compliance monitoring in place.

• It is recommended that this be coordinated through a central function within the organisation. This central function should be responsible for monitoring clinical governance policy and strategy implementation, as well as the effectiveness and compliance with regulatory and organisational standards.

• This information should be used to inform external bodies and provide assurance to the board.
Aligning systems and processes

There will need to be action at all levels for the business to succeed. The approach to clinical governance implementation should be designed to be:

- **Person-centred** – reflect the experiences of residents/clients and their relatives enabling them to share their stories to enhance healthcare services

- **Staff-based** – enabling people working in the organisation to use their skills, further improving staff experience, engagement and build capacity. Providing support and making the right thing the easiest thing to do.

- **Systems-based** – simplify the policy and procedures landscape, aligning and re-enforcing the organisation’s shared priorities. Providing the balance between performance management and continuous improvement.
Key points to consider

- Clinical **Effectiveness**, Performance and Evaluation (performance indicators and benchmarks)
- Strategic **Planning** and **Leadership** (professional development and support)
- Clinical Risk Mitigation (integration / transparency safety focus)
- Building an Effective **Workforce** (developing and inspiring staff / maintaining effective communication)
- Incorporating Consumer **Values** (increasing awareness and understanding of the consumer perspective)
- Continuous **Quality** Improvement (Measurement > Intervention > Evaluation – implementing evidence-based best practice)
- Monitoring **Compliance** (Assigned responsibility)
- Aligning **systems** and **processes** (resident/ Client Centred, Staff and Systems Based)
- Final Tip -

CSS Clinical Governance Checklist
Questions?

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