CLINICAL GOVERNANCE PROGRAM

ANSWER BOOKLET
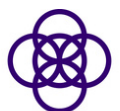
MODULE 1: INTRODUCTION AND STANDARDS OVERVIEW

Thinking about the service you work in, what processes are in place to stay informed about the Clinical Governance Standards that may impact your organisation? See the Worked Examples document if you need ideas to get started.

If you were to strengthen the connection between the Standards and your day-to-day operations, where might you begin?

MODULE 2:
WHAT IS CLINICAL GOVERNANCE?

Using the template provided on the following pages, self-assess your service's current clinical governance practices. Once you have completed the self-assessment, answer the following questions.

From the self-assessment, what are your service's two greatest strengths? These are the things you want to keep doing.

From the self-assessment, what are your service's two biggest areas for improvement? These are the areas you want to target first with your improvement activity.

This template can be used to self-assess your service against the actions described in the Primary and Community Healthcare Clinical Governance Standard. For ideas, see the Worked Examples document. Actions should be implemented where they are relevant to the delivery of safe and high quality health care for patients. Not all actions may be applicable to your service.

Governance, Leadership and Culture: Self-Assessment

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Governance, leadership and culture				
1.01 The healthcare service:				
a. Has a culture of safety and quality improvement	☐	☐	☐	☐
b. Partners with patients, carers and consumers	☐	☐	☐	☐
c. Sets priorities and strategic directions for safe and high-quality clinical care, and ensures that these are communicated effectively to the workforce	☐	☐	☐	☐
d. Establishes and maintains a clinical governance framework	☐	☐	☐	☐
e. Clearly defines the safety and quality roles, responsibilities and accountabilities of those governing the healthcare service, management, and the workforce	☐	☐	☐	☐
f. Monitors and reviews the safety and quality performance of the healthcare service	☐	☐	☐	☐
g. Considers the safety and quality of health care for patients in its business decision-making	☐	☐	☐	☐
h. Establishes and maintains systems for integrating care with other service providers involved in a patient's care Strategic, policy and corporate governance documents contain an explicit commitment to clinical quality and safety	☐	☐	☐	☐

Governance, Leadership and Culture: Review

Observations	Opportunities for improvement

Patient Safety and Quality Systems: Self-Assessment

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Policies and procedures				
1.02 The healthcare service uses a risk management approach to:				
a. Establish and maintain policies, procedures and protocols	☐	☐	☐	☐
b. Make policies, procedures and protocols easily available to the workforce	☐	☐	☐	☐
c. Monitor and take action to improve adherence to policies, procedures and protocols	☐	☐	☐	☐
d. Ensure compliance with relevant safety and quality legislation, regulation and jurisdictional requirements	☐	☐	☐	☐
Measurement and Quality Improvement				
1.03 The healthcare service uses a range of data to:				
a. Identify priorities for safety and quality improvement	☐	☐	☐	☐
b. Implement and monitor safety and quality improvement activities	☐	☐	☐	☐
c. Measure changes in safety and quality outcomes	☐	☐	☐	☐
d. Provide timely information on safety and quality performance to patients, carers and families and the workforce	☐	☐	☐	☐
Risk Management				
1.04 The healthcare service:				
a. Supports the workforce to identify, mitigate and manage safety and quality risks	☐	☐	☐	☐

Patient Safety and Quality Systems: Self-Assessment (continued)

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
b. Documents and routinely monitors safety and quality risks	☐	☐	☐	☐
c. Plans for, and manages, ongoing service provision during internal and external emergencies and disasters	☐	☐	☐	☐
Incident management and open disclosure				
1.05 The healthcare service has an incident management system that:				
a. Supports the workforce to recognise and report incidents	☐	☐	☐	☐
b. Supports patients, carers and families to communicate concerns or report incidents	☐	☐	☐	☐
c. Involves the workforce in the review of incidents	☐	☐	☐	☐
d. Provides timely feedback on the analysis of incidents to the workforce and patients, carers and families who have communicated concerns or incidents	☐	☐	☐	☐
e. Uses the information from the analysis of incidents to improve safety and quality	☐	☐	☐	☐
f. Incorporates risks identified in the analysis of incidents into the risk management system	☐	☐	☐	☐
g. Regularly reviews and acts to improve the effectiveness of the incident management and investigation systems	☐	☐	☐	☐
1.06 The healthcare service uses the Australian Open Disclosure Framework when a patient is harmed through the delivery of health care	☐	☐	☐	☐

Patient Safety and Quality Systems: Self-Assessment (continued)

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Feedback and complaints management				
1.07 The healthcare service:				
a. Seeks feedback from patients, carers and families about their experiences and outcomes of health care	☐	☐	☐	☐
b. Has processes to regularly seek feedback from the workforce on their understanding and use of the safety and quality system	☐	☐	☐	☐
c. Uses feedback to improve safety and quality	☐	☐	☐	☐
1.08 The healthcare service:				
a. Provides opportunities for its patients to report complaints	☐	☐	☐	☐
b. Has processes to address complaints in a timely way	☐	☐	☐	☐
c. Uses information from the analysis of complaints to improve safety and quality	☐	☐	☐	☐
Patient populations and social determinants of health				
1.09 The healthcare service identifies patient populations using its service at greater risk of avoidable differences in health outcomes, including:				
a. People of Aboriginal and Torres Strait Islander origin	☐	☐	☐	☐
b. People with disability	☐	☐	☐	☐
c. People with diverse backgrounds	☐	☐	☐	☐
1.10 The healthcare service uses information on its patient populations to inform planning and delivery of health care for patients	☐	☐	☐	☐

Patient Safety and Quality Systems: Self-Assessment (continued)

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Healthcare records				
1.11 The healthcare service has a healthcare record system that:				
a. Makes the healthcare record available to healthcare providers at the point of care	☐	☐	☐	☐
b. Supports healthcare providers to maintain accurate and complete healthcare records	☐	☐	☐	☐
c. Complies with privacy and security regulations	☐	☐	☐	☐
d. Supports audits of healthcare records	☐	☐	☐	☐
e. Facilitates a patient's access to their healthcare record	☐	☐	☐	☐
1.12 The healthcare service has processes to:				
a. Receive and review reports on patients	☐	☐	☐	☐
b. Recall patients and communicate about reports and health care options	☐	☐	☐	☐
c. Take action on reports in a timely manner	☐	☐	☐	☐
d. Document reports in a patient's healthcare record	☐	☐	☐	☐
1.13 The healthcare service using My Health Record has processes to:				
a. Use national healthcare identifiers for patients and healthcare providers	☐	☐	☐	☐
b. Use standard national terminologies	☐	☐	☐	☐
c. Support healthcare providers to use My Health Record to optimise the safety and quality of health care for patients	☐	☐	☐	☐

Patient Safety and Quality Systems: Self-Assessment (continued)

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
1.14 The healthcare service providing clinical information to the My Health Record system has processes to:				
a. Comply with legislative requirements	☐	☐	☐	☐
b. Ensure the accuracy and completeness of information uploaded	☐	☐	☐	☐

Patient Safety and Quality Systems: Review

Observations	Opportunities for improvement

Clinical Performance and Effectiveness: Self-Assessment

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Safety and Quality Training				
1.15 The healthcare service:				
a. Provides its workforce with orientation and training to their safety and quality roles on commencement with the service, when safety and quality responsibilities change and when new healthcare services are introduced	☐	☐	☐	☐
b. Identifies the training needs of its workforce to meet the requirements of these standards	☐	☐	☐	☐
c. Ensures its workforce completes training to meet its safety and quality training needs	☐	☐	☐	☐
1.16 The healthcare service supports its workforce to provide culturally safe services to meet the needs of its Aboriginal and Torres Strait Islander patients	☐	☐	☐	☐
Safety and quality roles and responsibilities				
1.17 The healthcare service has processes to support its workforce to understand and fulfil their assigned safety and quality roles and responsibilities	☐	☐	☐	☐
Evaluating performance				
1.18 The healthcare service has valid and reliable review processes for the workforce that:				
a. Are used to regularly review their performance	☐	☐	☐	☐
b. Identify needs for training and development of safety and quality	☐	☐	☐	☐

Clinical Performance and Effectiveness: Self-Assessment (continued)

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Scope of clinical practice				
1.19 The healthcare service has processes to ensure that healthcare providers have the qualifications, knowledge and skills required to perform their role by:				
a. Describing the scope of clinical practice for healthcare providers practising in the healthcare service	☐	☐	☐	☐
b. Monitoring healthcare providers' practices to ensure they are operating within their designated scope of clinical practice	☐	☐	☐	☐
c. Reviewing healthcare providers' scope of clinical practice when a clinical service, procedure or technology is introduced or substantially altered	☐	☐	☐	☐
Evidence-based care				
1.20 The healthcare service:				
a. Provides its healthcare providers with ready access to best practice guidelines and available evidence, clinical care standards developed by the Australian Commission on Safety and Quality in Health Care and decision support tools relevant to their clinical practice	☐	☐	☐	☐
b. Supports its healthcare providers to use best practice guidelines and available evidence, clinical care standards developed by the Australian Commission on Safety and Quality in Health Care and decision support tools relevant to their clinical practice to deliver best practice care	☐	☐	☐	☐

Clinical Performance and Effectiveness: Self-Assessment (continued)

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Variation in care delivered and health outcomes				
1.21 The healthcare service supports its healthcare providers to:				
a. Monitor and review care delivered against relevant best practice care	☐	☐	☐	☐
b. Explores reasons for variation of health care from best practice	☐	☐	☐	☐
c. Uses information on unwarranted variation from best practice to improve health care	☐	☐	☐	☐

Clinical Performance and Effectiveness: Review

Observations	Opportunities for improvement

Safe Environment for the Delivery of Care: Self-Assessment

Action	Planning in progress	Currently implementing	Established	N/A or Unsure
Safe environment				
1.22 The healthcare service maximises safety and quality of health care:				
a. Through the design of the environment and management of the location where health care is provided	☐	☐	☐	☐
b. By providing access to an environment, devices and equipment that are fit for purpose and well maintained	☐	☐	☐	☐
c. By ensuring patients' privacy when health care is provided	☐	☐	☐	☐
1.23 The healthcare service identifies areas that have a high risk of unpredictable behaviours and develops strategies to minimise the risks of harm to patients, carers, families, consumers and the workforce	☐	☐	☐	☐
1.24 The healthcare service supports patients to access health care, including patients from diverse backgrounds and patients with disability	☐	☐	☐	☐
1.25 The healthcare service provides a culturally safe environment that recognises the importance of the cultural beliefs and practices of Aboriginal and Torres Strait Islander people	☐	☐	☐	☐

Safe Environment for the Delivery of Care: Review

Observations	Opportunities for improvement

MODULE 3: DEVELOPING A CLINICAL GOVERNANCE VISION

Using the template provided, develop a clinical governance vision for your organisation. If your organisation already has a clinical governance vision, use the template provided to strengthen this vision.

This is one example to help you get started if you need some ideas. If you have a different approach that you would prefer to use, that is perfectly fine as well.

Service name:	Date:

1. Identify your stakeholders

- Ensure you have representation from patients and consumers, potentially their families if appropriate, your front-line staff, clinicians and administrative staff, and the leadership team.
- Decide whether you will meet with everyone individually or complete this as a group activity.

2. Warm up your stakeholders

- If it is a group session, you may want structured slides to present what has happened in the clinical governance space within your organisation and what the Primary and Community Healthcare Standards are.
- If it is a one-on-one chat, you might give a verbal summary version so people have some background.
- Ensure you explain why their views are important.
- Arrange post-it notes and markers as you will need them for the activity.

3. The Miracle Question

- This question asks people to consider what an alternate reality might look like - in which things are different, better, and challenges are resolved.
- Pause and let people reflect on the question that you have asked.
- Ask, "What is it that has changed?"
- Write one idea on each post-it note.

4. Group the answers and ideas

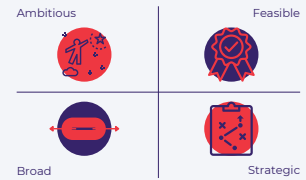- Assemble and group your post-it notes together in ways which make sense.

5. Describe your service once the improvements are in place

- Look at the improvements, and consider how you might describe your service when they are in place.
- This description is your vision.
- The ideas - if they are supported by your leadership team - will also help inform your improvement program.
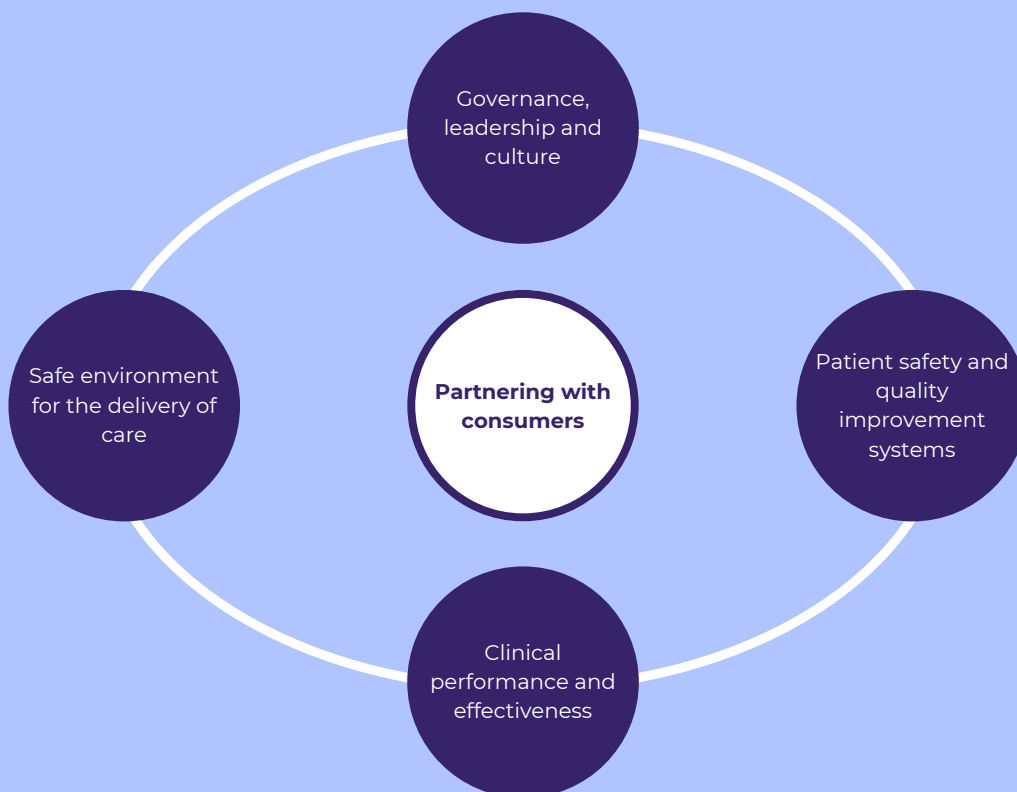
6. Sense check your vision against the characteristics of a vision

- Is it ambitious?
- Is it feasible?
- Is it broad?
- Is it strategic?
- Refine your vision as required to meet the characteristics of a vision.

Ambitious	Feasible
Broad	Strategic

Consider the Clinical Governance Framework when developing your vision.

Governance, leadership and culture

Safe environment for the delivery of care

Partnering with consumers

Patient safety and quality improvement systems

Clinical performance and effectiveness

MODULE 4:
PLANNING A CLINICAL GOVERNANCE IMPROVEMENT PROGRAM

Using the template provided, develop a twelve-month clinical governance improvement goal (bringing the thinking part to life) to address your biggest weakness in clinical governance. Use the self-assessment from Module 2 to inform this goal. If you need some ideas to get started, refer to the Worked Examples document.
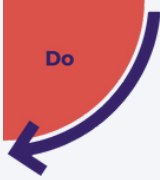
The Thinking Part

The three fundamental questions:

Service name:	Date:

1. What are we trying to accomplish?

The Goal

2. How will we know that a change is an improvement?

The Measure

3. What changes can we make that will results in an improvement?

The Idea

Using the template provided, develop a three-month progress goal (bringing the PLAN of the doing part to life) to support achievement of the twelve-month goal.

The Doing Part

Plan, Do, Study, Act

You will have noted your idea/s for testing when you answered the third Fundamental Question. Use this template to test an idea.

Idea:	
PLAN	**Plan what we will do as a small test of change**
- What are we going to do? - When are we going to do it? - Who will do it? - Where will it be done? - What is our prediction of the idea/test to be carried out? - What data will we collect and how? Plan	

Use the rest of the template to capture your findings, once you have executed your plan.

DO	Carry out our plan

- Document the measurable findings
- Collect data for analysis
- Document feedback from relevant staff and/or consumers

Do

STUDY	Compare data from DO stage to predictions from PLAN stage

- Was the plan executed successfully?
- Has the test resulted in an improvement? If not, what exactly needs to be changed?
- Can this concept be tested on a larger scale next?
- What did we learn?

Study

ACT	Act on the results

- What changes do we need to make next?
- When will we carry out our next PDSA cycle?

Act

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