



B.04 Clinical Governance Policy

REVIEWED: SEPTEMBER 2019

B.4 Clinical Governance

1. PURPOSE

Mercy Services is committed to developing and implementing a clinical governance framework that ensures the provision of safe, effective, high quality, consistent and client-centred clinical care for residents and clients.

Mercy Services will strive to include clients, residents, clinicians, clinical review, training, risk management, workforce management and continuous improvement in its clinical governance framework. The purpose of this policy is to ensure that everyone is accountable to clients, residents and the community for delivering good clinical outcomes and meeting clinical indicators. Where are the clinical indicators?

2. WHO DOES THIS POLICY APPLY TO

3. POLICY

In order to achieve the goal of providing safe and high-quality, person-centred care, Mercy Services Clinical Governance Policy includes the following elements:

- Roles and responsibilities of clients, residents, Board, Clinical Advisory Council, Risk & Continuous Improvement (RCI) Committee, clinical leaders/managers and health service staff;
- The importance of culture in establishing good clinical governance;
- Client partnerships;
- Workforce procedures;
- Processes that identify and manage clinical risk, safety and quality; and
- Clinical practice procedures.

4. PROCEDURE

Communication of this policy

Head of Home & Community Care, Clinical Manager and Quality Clinical & Safety Adviser is responsible for ensuring that members of the clinical workforce understand the organisation's approach to, as well as their own responsibility for, delivering safe and high quality healthcare.

Roles and Responsibilities:

Clients & Residents or their representatives should:

- Participate in their own healthcare to the extent that they wish;
- Participate in all aspects of quality and safety improvement;
- Provide feedback to drive organisational change.

Mercy Services Board will:

- Be held accountable for the quality and safety of care provided by Mercy Services
- Foster an organisational culture of safety and quality, and satisfy itself that this culture exists within the organisation;
- Ensure the organisation has a clear strategic direction, policies and procedures which promote safety and quality care;
- Ensure the governing body has access to the necessary training, skills and resources required to undertake its duties and promote safety and quality care;
- Understand and mitigate any potential risks to safety and quality care; and
- Actively monitor and evaluate the organisational culture and identifies areas of improvements.

Mercy Services RCI Committee and Clinical Advisory Council will:

- Assist in the delivery of the Board's strategic direction and vision to provide quality care;
- Support the development of workers to become leaders in championing safe and quality care for all clients and residents using services;
- Assist the Board with monitoring by ensuring accurate reporting and analysis occurs regularly;
- Be aware of key areas of potential risk and act responsibly when the safety of a client, resident or worker is compromised; and
- Developing an operational policy and procedures framework which addresses:
 - Risk management
 - Quality improvement
 - Incident management
 - Open disclosure
 - Feedback and complaints; and
- Determine the effectiveness of clinical governance systems through continuous evaluation.

Clinical leaders/managers are responsible for:

- Supporting clinicians through a culture of safety, transparency, accountability, teamwork and collaboration;
- Developing effective working partnerships with other health service organisations, clinical groups, clinicians, clients and residents;
- Providing useful performance data and feedback to clinicians;
- Identifying and mitigating areas of potential risk, and reporting to this through the appropriate notification processes Board/RCI any incidents where safety has been compromised; and
- Ensuring staff understand their roles and responsibilities and are held accountable for the care they provide.

All health service staff are responsible for:

- Providing the highest quality of clinical care possible within the parameters of the clinical governance framework;

- Providing feedback if they are harbouring concerns over anything related to clinical care and the delivery of safe services;
- Educating themselves and frequently refining their skills to ensure they are providing the best care possible;
- Complying with relevant care standards, protocols and procedures; and
- Contributing to an organisational culture of delivering high-quality care, safety, teamwork, collaboration and transparency.

Governance, Leadership and Culture

Mercy Services understands the importance of workplace culture in ensuring both patients and clients receive safe and high-quality care. We will endeavour to create an organisational culture with:

- Strong and effective strategic and cultural leadership of clinical services;
- Clear responsibilities for managing safety and quality of care;
- Reliable monitoring systems to ensure delivery of care is effective;
- Data and information that are used to monitor and report on performance; and
- Systems in place for identifying and managing clinical risk.

Partnering with clients & residents

Client and resident partnerships will be promoted across Mercy Services in planning, policy development, guidelines, training and care delivery.

Systems are in place to ensure:

- Delivering client/resident-centred care is a key priority;
- Clients and residents are encouraged to give feedback on the care they receive;
- All workers within the health care system establish respectful and transparent lines of communication with clients;
- The diverse needs, including communication needs, of clients, residents and the community are met;
- Feedback on clinical care from clients and residents is acted upon to make improvements;
- The rights and responsibilities of clients and residents are respected and promoted, as required by the *Australian Charter of Aged Care Rights*; and
- Note: (We must use the Charter of Aged Care Rights in residential)
- Client and resident complaints are responded to in a timely way and competently, and are used to improve care and services.

Clinical performance and effectiveness

Mercy Services is committed to providing a physically and emotionally safe workplace. Staff and volunteers at all levels of the organisation will undergo training and receive information on improvement tools and methods. The People & Culture team will ensure staff feel supported to develop and consolidate their skills.

Mercy Services will strive to provide a physically and psychologically safe workplace by ensuring:

- Procedures are in place to ensure suitable workers are hired based on their qualification and prior experience, to deliver the highest standard of client-centred care;
- Procedures are in place to foster a safe, respectful and collaborative working environment;
- Workers and volunteers are clear on their responsibilities and workplace expectations, and are held accountable for meeting these expectations;
- Workers and volunteers strive to improve their own practice and organisational processes through continuous learning; and
- An effective complaints management system is in place and regularly reviewed.

Safe environment for the delivery of care (risk management)

Mercy Services will ensure safety and quality improvement systems are central to creating a safe working environment and support clinicians to deliver the highest standard of safe and quality care for clients.

Mercy Services will create a safe environment for the delivery of care by:

- Implementing effective quality improvement processes;
- Identifying opportunities to improve the safety and quality of the working environment; and
- Ensuring appropriate resources, facilities, staff, training tools and equipment are available to satisfy the highest standard of care delivery.

Client & Resident Safety and quality improvement systems

To strive for the highest level of clinical practice, Mercy Services will ensure that:

- Research and evidence-based clinical care forms the basis for clinical practice;
- Clinicians endeavour to inform clients on the care they receive, and are transparent and open in their communication;
- Clinicians receive the support they need to work safely and effectively, through training, skills and technology;
- Clinicians strive to improve their peers' and their own clinical care and actively participate in the review of clinical systems and processes;
- Data is collected on clinical care to ensure that there is organisational accountability and continuous improvement; and
- When new procedures for clinical practice and methods are introduced, they are safeguarded and potential risks are managed.

Mercy Services will implement an effective risk management system which:

- Identifies and documents organisational risk in an effective risk register (see Risk Register Template);
- Uses data collection to support risk assessments;

- Acts to reduce risks by ensuring clinical incidents are investigated and reported to address root causes;
- Reviews and attempts to improve the effectiveness of the risk management system;
- Reports on risks to the workforce and clients;
- Plans for, and manages, internal and external emergencies and disasters; and
- Complies with and adheres to risk-related legislation and relevant National standards.

Report, review and respond to performance

Clinical Advisory Council is responsible for monitoring and reporting on the clinical outcomes and performance of the clinical governance framework.

Reports will be used to inform review and improvement of the organisation's clinical governance and clinical risk systems.

Procedures for review of this policy

This policy will be reviewed and updated biannually until June 2021, by Clinical Advisory Council and any changes made will be approved by the RCI Committee.

5. DEFINITIONS

Clinical governance – the set of relationships established by a health service organisation between its relevant stakeholders to ensure the best possible clinical outcomes.

Risk management – the development and implementation of a program which makes every attempt to identify and mitigate potential risks to workers, clients and residents.

Quality improvement – the collaborative efforts of all workers, clinicians, clients, residents and planners to strive for continuous improvements to achieve better outcomes and the highest possible standard of care.

6. VERSION CONTROL AND CHANGE HISTORY

Version	Date Reviewed	Amendments
1.0		Initial Draft.

Author	C Routh	Date Created	11/09/2019
Endorsed By	RCI Committee	Review Due	11/09/2022
Status	Current		