Canberra Health Services The Foundation for Exceptional Care

Clinical Governance Framework 2020–2023

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ACKNOWLEDGMENT OF COUNTRY

Canberra Health Services acknowledges the Traditional Custodians of the land, the Ngunnawal people. Canberra Health Services respects their continuing culture and connections to the land and the unique contributions they make to the life of this area. Canberra Health Services also acknowledges and welcomes Aboriginal and Torres Strait Islander peoples who are part of the community we serve.

ACCESSIBILITY



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The foundation for exceptional care.

Canberra Health Services



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Why?

Our Consumers' Experience of Exceptional Care

Canberra Health Services (CHS) exists to provide health care. At CHS, we want the health care we provide to be exceptional. Every member of our CHS team has a role to play in providing exceptional care to our consumers.

Our Vision is 'Creating Exceptional Healthcare together'.

This means:

Together we are a caring team.

We will be successful when:

- people say, every day, "I trust you to look after me when I am at my most vulnerable"
- carers and family members say, every day, "I feel safe to leave my loved one in your care"
- staff and healthcare partners say, every day,
 "I have pride in my work, and I want to help us all improve".

We celebrate our successes as one community, and we create a world where people flourish in their best health.

This is our promise to each other, our consumers, their families and carers and our community.

Our vision of exceptional care that is Personal, Effective, Connected and Accessible, Safe and Well-Led will be pursued across CHS by everyone, every day, for every consumer, every time.

To receive exceptional care, it is important to our consumers that their care is:



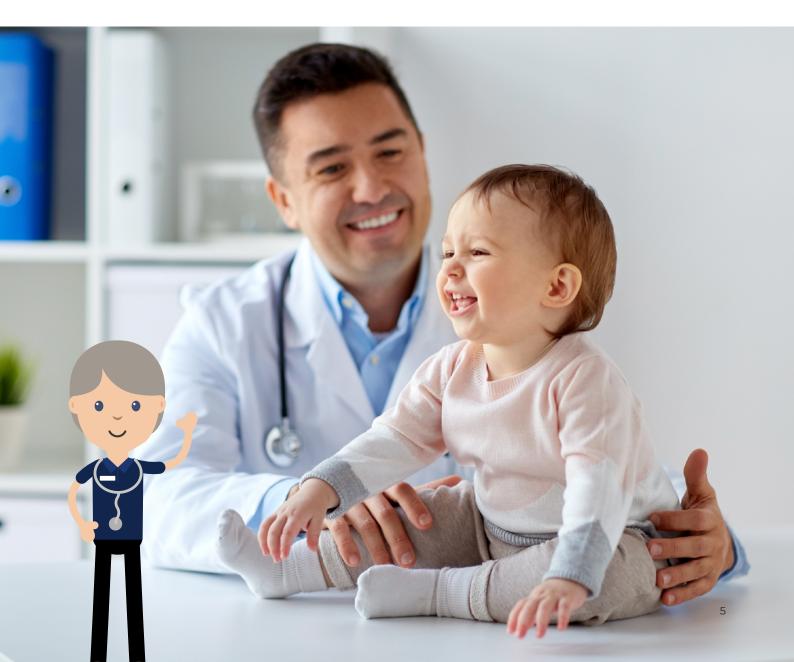
Our Clinical Governance Framework

Clinical governance is the foundation for exceptional care; it is vital to ensuring that you, your team members and people who access our services are safe. Clinical Governance is also a fundamental element of providing quality care, ensuring we meet our responsibility for continuous improvement and achieve our vision of 'creating exceptional health care together'.

This CHS Clinical Governance Framework supports the implementation of our Exceptional Care Framework which defines what we mean by exceptional health care, how we will deliver it, and what your role is in achieving our vision.

This framework defines what clinical governance is, the critical components and how it is implemented across CHS. It also describes why it is important and what your role and responsibilities are in ensuring clinical governance works across CHS. It describes:

- 'Why' clinical governance is vital for CHS to achieve our vision of creating exceptional care together
- **'What'** clinical governance is and the critical components
- 'How' we implement clinical governance effectively at all levels across the organisation
- **'Who'** plays a critical role and what our responsibilities are in ensuring effective clinical governance.



What?

Our Clinical Governance Goal

Our goal is to ensure that:

- Effective clinical governance is embedded across the organisation to enable us to deliver on our vision of 'creating exceptional health care together', and our role 'to be a health service that is trusted by our community'.
- Our workforce understands and actively perform their clearly defined roles and responsibilities for safety and quality.
- Team members operate within our clinical governance framework to improve the safety and quality of our care for our patients.
- We are continuously measuring and improving our systems and processes.

Our Clinical Governance Principles

Clear principles provide a shared understanding of what is required from all team members for effective clinical governance to be successfully performed across CHS, in line with our organisational values and public sector standards.

Principle		Description
Strong leadership and engagement are critical	>	Accountability and engagement at all levels and roles at CHS, ownership of the care provided is promoted and practised by all team members.
We work in partnerships	>	We are committed to working closely with our partners to deliver the best outcomes for our population, for our consumers and their carers and for our teams. Consumer and carer engagement and input is actively sought and facilitated; care delivery is centered on consumers.
We value analytics, transparency and accuracy of data and information	>	We are an insight driven organisation where all team members have a clear understanding of performance drivers as well as opportunities to improve. Robust data is reviewed and used to inform decision making and improvement: reporting, review and decision making is underpinned by transparency and accuracy.
Continuous innovation and improvement underpin all we do	>	Rigorous management of performance and progress is benchmarked and used to manage risk and drive improvement; the status quo is challenged.
Technology is an enabler for the future	>	We will continue to explore opportunities to enable better care through technology.
Sustainability is considered in decision making	>	We will ensure our priorities are financially and environmentally sustainable.

How?

Foundational Pillars of Clinical Governance

CHS Clinical Governance Framework is structured on five key pillars of clinical governance. These pillars are integrated across the organisation and encompass each part of our definition of exceptional care:





GOVERNANCE, LEADERSHIP AND CULTURE

Exceptional care is well-led



Organisational culture which emphasises quality as a shared value central to clinical work is a major enabler that underlies all aspects of our organisation's activities.

We are committed to creating a culture where every member provides exceptional care for every person, every time. CHS Strategic Plan clearly defines strategic priorities to enable CHS to deliver on this vision.

To support a culture of safety, we identify activities that may be at risk for errors or incidents. Team members need to be supported to freely communicate their concerns, in identifying a risk or uncovering an error and have clear mechanisms to escalate risks and errors appropriately.

Integral to the delivery of exceptional health care is the development of a respectful, transparent and just culture within which health care providers and others can report safety incidents without fear of blame. CHS adopts the Australian Open Disclosure Framework to communicate with consumers when things go wrong. Our organisational culture needs to encourage and support reflective practice, learning from experience, use and dissemination of knowledge, partnerships with stakeholders and effective leadership in order to enable systematic improvement in service quality.

PARTNERING WITH CONSUMERS AND CARERS

Exceptional care is personal, accessible and connected



CHS is committed to a person-centred approach at all levels of the organisation. This includes a focus on shared decision making to ensure that consumers are involved in their own care.

A consumer or carer perspective brings different and important dimensions to what constitutes safe and quality health care.

Working alongside consumers and carers and listening to and learning from their experience allows health services to truly appreciate what constitutes safe, quality health care.

CHS supports the second edition of the Australian Charter of Healthcare Rights and consumers and carers are actively encouraged to provide feedback on their experiences. This information is used for driving improvements within the organisation.

PATIENT SAFETY AND QUALITY IMPROVEMENT SYSTEMS

Exceptional care is safe



CHS has safety and quality systems integrated with governance processes to actively manage and improve health outcomes for our consumers.

Safety and quality systems, such as policies and guidance documents, incident management systems, risk management and quality improvement processes, involve all members of the clinical workforce with clearly defined roles and responsibilities and regular review of performance.

Safety and quality systems are embedded within a system of measurement and continuous improvement and innovation, so we know how we are performing and track our improvement progress.

Accreditation is independent recognition that an organisation, service, program or activity meets the requirements of defined criteria or standards. Accreditation provides quality and performance assurance for owners, managers, team members, funding bodies and consumers. In addition to the National Safety and Quality Health Service Standards (National Standards) (see Attachment A) accreditation process, clinical areas and services participate in specialty accreditation systems and are required as a measure of the safety and quality of care.

CLINICAL PERFORMANCE AND EFFECTIVENESS

Exceptional care is effective



Clinical performance and effectiveness relate to processes to ensure that the workforce has the right qualifications, skills and supervision to deliver exceptional health care.

High level clinical performance and effectiveness is achieved through implementing robust organisational systems to regularly review system and individual performance.

This includes credentialing and defining scope of clinical practice, clinical education and training, performance monitoring and management, clinical supervision, and systematic monitoring of safety and quality performance across the organisation.

SAFE ENVIRONMENT FOR THE DELIVERY OF CARE

Exceptional care is safe



The provision of exceptional health care for consumers is achieved through coordination and planning, along with appropriate allocation of resources to ensure the safety and security of consumers and team members.

The workforce is an integral part of a safe environment for the delivery of care. Clinicians are engaged in planning and development activities, encouraged to be vigilant and identify opportunities for improvement. Team members are supported to raise and report these appropriately through clearly identified pathways.

Consumers and carers play an important role in a safe environment for the delivery of care. Feedback about their experiences of the health service environment identify opportunities for improvement and potential safety and quality risks.

Putting it all Together - Safety and Quality Systems

Critical to the implementation of effective clinical governance at CHS is how the key pillars are integrated into our work every day and that our workforce understands their roles and responsibilities.

We achieve this understanding across our organisation in several ways, including through:



STRUCTURE AND FRAMEWORKS



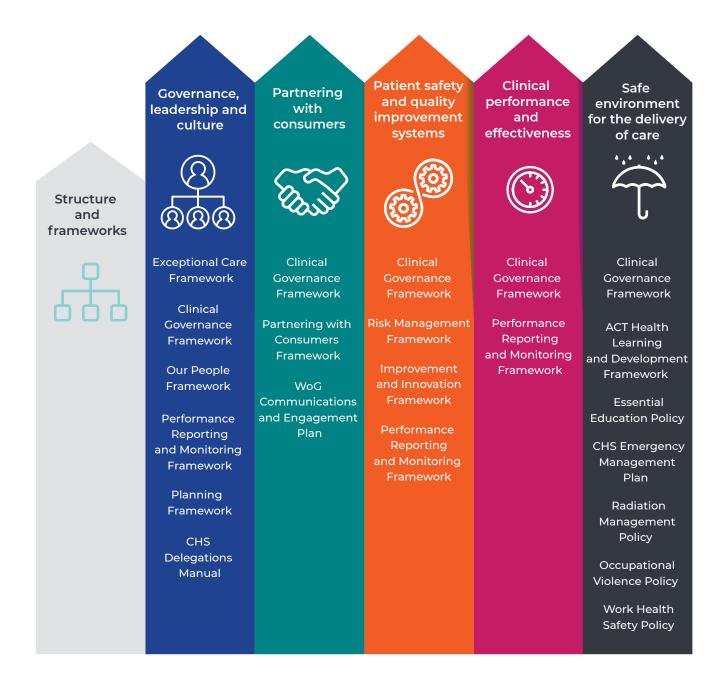
Our organisational structure (see Attachment B) defines our governance approach and ensures that all levels of the organisation participate in all aspects of governance, including our clinical governance quality and safety committees. Our CEO has overall accountability for both clinical and corporate governance and is responsible for overseeing progress against strategic objectives supported by the CHS Governance Committee. CEO reports to the ACT Minister for Health and the ACT Minister for Mental Health.

The Clinical Governance Framework is a part of our overarching approach to creating exceptional care. It is an integral part of a suite of frameworks that define and articulate our agreed governance processes. These documents provide guidance, and information on the structures and processes within which our organisation operates:

- > Creating Exceptional Care Together Our Exceptional Care Framework
- > Partnering for Exceptional Care Our Partnering with Consumers Framework
- > Managing Risk for Exceptional Care Our Risk Management Framework
- > Capability for Exceptional Care Our People Framework
- Planning for Exceptional Healthcare Our Planning Framework
- > Supporting Exceptional Care Our Resource Management Framework
- > Measuring Exceptional Care Our Performance Reporting and Monitoring Framework
- > Innovating for Exceptional Care Our Improvement and Innovation Framework

These frameworks articulate our approach to key critical elements of our exceptional care approach for all team members and all parts of our organisation. They ensure strong governance and integrate and support operational excellence, quality, safety and our consumers' experience.

Our frameworks inter-link and provide an agreed and unified approach which helps us to create exceptional care by being clear that we are delivering on our CHS Strategic Plan, confidence that we are managing risk, meeting our legislative obligations, and governing the organisation well.



SYSTEMS AND PLANS



Our Plans articulate our organisational priorities and align our strategy, corporate goals and operational improvement focus to ensure that our safety and quality priorities are clearly identified and communicated to our workforce, consumers, and community partners.

Our systems are developed to support our workforce to perform their roles to maximise the quality and safety of our care. The way we plan helps to coordinate and implement systems of care, and analyse and improve services, to establish and maintain organisational performance and accountability, at all levels of the organisation.



PROCESSES

Our processes are a critical part of our clinical governance approach. These ensure the way we provide our services, supports the quality and safety of our care. Processes are designed with our consumers, workforce and community to ensure our pillars of clinical governance are articulated at the point of care.

Governance, leadership and culture



Processes

Clinical Governance Policy

Credentialing and Defining the Scope of Practice for Allied Health Professionals Procedure

Credentialing and Defining the **Scope of Practice** for Senior Medical and Dental Practitioners Procedure

> Nursing and Midwifery Continuing Competence Procedure

Accreditation Policy

Clinical Records Management Policy and Procedure

Audit and Risk Management Committee

Health Records Advisory Committee

Accreditations -National Safety and Quality Health Service Standards, Commonwealth, College, other specialty accreditations

Staff Cultural Mapping Survey Partnering with consumers



Informed Consent (Clinical) Policy

Australian Charter of Healthcare Rights (2019)

Person Centred Toolkit

C.A.R.E Program

Cultural Awareness Program

Patient safety and quality improvement systems



Incident Management Procedure

> Open Disclosure Procedure

Management of **Recalls**, Alerts and Product Corrections Procedure

Clinical Review

Morbidity and Mortality Exceptional Care

Clinical performance and effectiveness

Safe environment for the delivery of care

Environmental

Audit

Corporate

Orientation

Workplace

Induction

Pathway

Training and

Education

modules – Staff

Development

Unit

Emergency/



Performance reporting: **Hospital Acquired** Complication, and Quality and Safety Dashboard, Patient Safety and Quality

Health Round Table reporting and benchmarking

Clinical Audit Program

Conversations



Report

Disaster Management Plans

> Health Technology Advisory Committee

Cultural Competence education

Working with Aboriginal and Torres Strait Islander Patients and Clients training

MONITORING AND REVIEW

Monitoring and review are a critical part of our Clinical Governance Framework and support our ability to measure and report on the quality and safety of our care. Our approach to monitoring and review is defined and articulated in our Performance and Reporting Framework.

It identifies:

- what we measure
- how we measure
- who needs to monitor each aspect of our care and performance
- how information is best presented and how frequently it should be updated
- the extent to which managers should support the Executive and Governance committee in understanding the information they are given.

Our Performance Reporting and Monitoring Framework is a critical component of our clinical governance approach and integrates the processes identified in the table below. It describes our system to monitor variation in practice, provide feedback to clinicians, review our performance against external measures, support clinicians in the review of their practice and performance, and use information to inform improvements in our safety and quality systems. It is also a critical part of our Risk Management Framework and identifying the effectiveness of our risk controls.





Measuring Our Progress

Measures that use valid and reliable data will monitor our progress in achieving effective clinical governance. Our results inform the improvement activity we need to undertake.

Safety and quality data are regularly reported to relevant working groups and committees at all levels in the organisation from our CHS Governance Committee to ward level quality and safety committees. This information guides our decisions and actions to ensure the delivery of safe quality care.

The Clinical Governance Framework is supported by our CHS Strategic Plan 2020-2023. The Plan sets a clear path forward, operationalises our vision and outlines our priority areas for achieving our goals over a three-year period. Our annual Corporate Plan includes key deliverables to ensure we are meeting our goals. Performance against the Strategic and Corporate Plans are reviewed by the Corporate Plan Review Committee at every meeting. Our Executive team report on each divisions progress once a month.

This Clinical Governance Framework will be reviewed every three years. Annual maturity self-assessments will be completed, and action plans developed to ensure we are continually improving how this Strategy is embedded across the organisation.

Who?

Your Role - Clinical Governance

Everyone has a role to play to support safety and quality of care and embed our clinical governance approach into our daily work. It is the ultimate responsibility of a governing body to set up a sound clinical governance system and be accountable for performance and outcomes. However, effective implementation depends on the contribution of all team members at all levels of the organisation, including consumers, their carers, family members and representatives.

TO FEEL CONFIDENT IN THE CARE I RECEIVE...

It is important to me, my carers and family that:

- \cdot I am seen and treated as a respected person
- $\cdot\,$ I participate in decision making about my care, to the extent that I choose
- The people I choose, including family, friends and carers, are respected as partners in my care
- \cdot I work in partnership with healthcare providers
- I know the people caring for me are well trained and continue to learn
- I know how to and feel safe to provide feedback on my care experience and suggest improvements to services
- I am supported to raise concerns about the safety or effectiveness of my care
- I am valued and have input into how care is designed and delivered
- $\cdot\,$ The way care is provided is clear and easy to understand
- Consumer and carer representatives support decision makers to keep us at the forefront when planning services, developing models of care, or measuring, evaluating and improving systems of care
- Consumer and carer representatives actively fulfil their pivotal partnership role in decision making at all levels of governance.





TO PROVIDE SAFE QUALITY CARE....

It is important that:

- I provide information and create opportunities for shared decision making to empower consumer involvement in their own care
- $\boldsymbol{\cdot}$ I respect the role of family and carers and include them as a partner in care
- · I am competent in what I do and continue to learn and develop my skills
- I am credentialled and work within my scope of clinical practice
- I participate in care evaluation and measurement
- I actively identify and participate in opportunities to improve care for every consumer

I know the systems and processes I must follow to provide safe care

- I work to provide a safe environment and keep myself and others from harm
- I identify if something is unsafe or places anyone at risk of harm and tell an appropriate person.

TO SUPPORT SAFE QUALITY CARE....

It is important that:

- · I am active in providing support to team members interacting with consumers everyday
- I am competent in what I do and motivated to support the delivery of the best care and services possible
- I am an active team player and look for ways to do things better
- I work to provide a safe environment and keep myself and others from harm
- I identify if something is unsafe or places anyone at risk of harm and tell an appropriate person.

TO LEAD SAFE QUALITY CARE

It is important that:

- · I support consumers, carers and their care teams to have input into feedback systems
- I guide, engage and support team members to provide or support best clinical care
 - I ensure team members are appropriately trained, credentialled and are working within their scope of clinical practice
 - I promote a culture of safety and learning and look for ways to support staff to work efficiently and as part of a team
 - I ensure a high-quality service by the continual development and review of practice according to research evidence and national standards
 - I perform a leadership role in the implementation of all quality and safety systems and processes, ensuring reporting, monitoring and action of data
 - I ensure quality and safety governance committees are in place and effective in my area
 - I set clear expectations for team members, support them and hold them accountable for their role
 - I role model responsibility for effective clinical governance, risk management and the implementation of continuous improvement
 - I ensure risk management systems and processes are in place and communicated to all staff
 - I identify, report and manage risk and support all team members to do so.

TO LEAD AND GOVERN EXCEPTIONAL CARE....

It is important that:

- I define, resource, implement and lead safe, quality care through robust governance and system supports
- · I model exceptional care behaviour and set expectations that others will do so
- · I ensure all aspects of clinical governance are in place and effective
- I ensure quality, safe care is effectively communicated, reported, monitored and actioned
- I oversee the development, implementation and ongoing improvement of organisational -wide systems supporting clinical governance
- I take a leadership role in organisational governance committees and ensure each division has effective governance committees in place
- I support staff to extend their knowledge and skills and to speak up about issues of concern
- I actively participate in strategic planning processes and ensure all stakeholders are supported to provide input
- I meet external expectations and legislative and compliance requirements.







Attachment A - National Safety and Quality Health Service Standards

The National Safety and Quality Health Service (NSQHS) Standards were developed by the the Australian Commission on Safety and Quality in Health Care (the Commission) with the Australian Government, state and territory partners, consumers and the private sector.

The primary aim of the Standards is to protect the public from harm and improve the quality of health care. They describe the level of care that should be provided by health service organisations and the systems that are needed to deliver such care. Delivery of the eight Standards is an implicit part of delivering quality care and is integral to our core business as a health system. The eight Standards are:



1. Clinical Governance which describes the quality framework required for health service organisations to implement safe systems. This, together with the Partnering with Consumers standard underpins all of the other standards.



2. Partnering with Consumers which describes the systems and strategies to create a consumer-centred health system by including consumers in the development and design of quality health care. This, together with the Clinical Governance standard underpins all of the other standards.



3. Preventing and Controlling Healthcare Associated Infections which describes the systems and strategies to prevent infection of patients within the healthcare system and to manage infections effectively when they occur to minimise the consequences.



4. Medication Safety which describes the systems and strategies to ensure clinicians safely prescribe, dispense and administer appropriate medicines to informed patients.



5. Comprehensive Care which describes the systems and strategies to identify patients and correctly match their identity with the correct treatment.



6. Communicating for Safety which describes the systems and strategies for effective clinical communication whenever accountability and responsibility for a patient's care is transferred.



7. Blood Management which describes the systems and strategies for the safe, effective and appropriate management of blood and blood products so the patients receiving blood are safe.

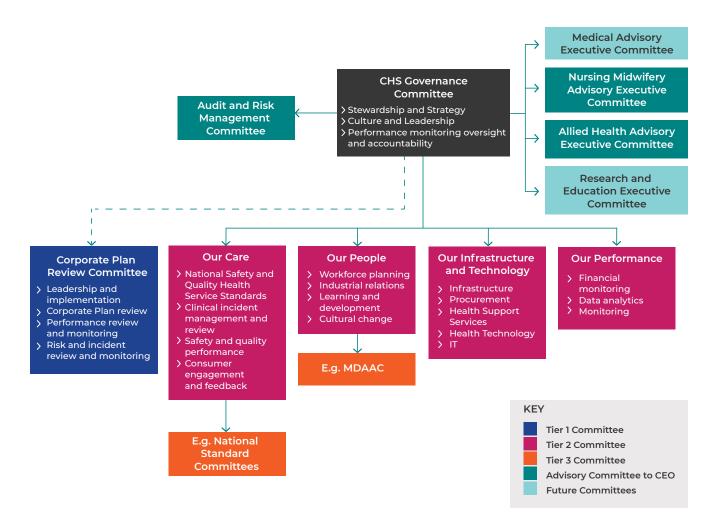


8. Recognising and Responding Acute Deterioration which describes the systems and processes to be implemented by health service organisations to respond effectively to patients when their clinical condition deteriorates.

Further information: > Canberra Health Services National Standards Page
 > Australian Commission on Safety and Quality in Health Care

Attachment B – Our Committee Structure

Overarching CHS Committees are outlined below. This structure does not extend to all business as usual management and team meetings.



CANBERRA HEALTH SERVICES GOVERNANCE CHART



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