Framework for Safety and Quality 2020
(Clinical Governance Framework)
Introduction

Patients, consumers and the community of West Moreton trust our clinicians and our organisation to provide access to safe, high-quality health care. The environment for delivery of health care is complex, with rapidly evolving models of care and changing expectations of patients and consumers. This often results in a complex journey for patients as they move between various services, with safety and quality risks at many points of the journey. While the safety and quality of health care provided to each patient is highly dependent on the skills and performance of our dedicated clinicians, it is also an organisational responsibility, reliant on effective governance and management processes.

The safety and quality of care provided to our patients is also critically reliant on keeping our staff safe. Patient safety and worker safety must go together – one does not override the other.

The West Moreton Hospital and Health Board is committed to ensuring the provision of safe, high-quality health care to the community who have entrusted their care to us. The Board is ultimately responsible for oversight of the safety and quality governance arrangements of West Moreton Health and for the monitoring and improvement of health services delivered. The Board does this through the Board’s Safety and Quality Committee and through delegation to the Chief Executive.
This Framework for Safety and Quality sets out the way we govern safety and quality – how we define quality, the various roles and responsibilities for safety and quality across the organisation and the elements of our system that combine to assure the delivery of safe and continuously improving healthcare. It forms the basis for our Safety and Quality Improvement Strategy 2020-23, which sets out our improvement aspirations and how we will achieve them over the next three years.

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Chair, West Moreton Hospital and Health Board

Professor Gerald Holtmann
Chair, Safety and Quality Committee
West Moreton Hospital and Health Board

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Chief Executive
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What is Clinical Governance?

Clinical governance is the set of relationships and responsibilities established by a health service organisation between its state or territory department of health (for the public sector), governing body, executive, clinicians, patients, consumers and other stakeholders to ensure good clinical outcomes. It ensures that the community and health service organisations can be confident that systems are in place to deliver safe and high-quality health care, and continuously improve services.

Clinical governance is an integrated component of corporate governance of health service organisations. It ensures that everyone – from frontline clinicians to managers and members of governing bodies, such as boards – is accountable to patients and the community for assuring the delivery of health services that are safe, effective, integrated, high quality and continuously improving.


At West Moreton Health we use the term ‘governance for safety and quality’ synonymously with ‘clinical governance’. Whichever term you prefer, it is important to recognise that governance is concerned with the establishment of systems and processes. Management is concerned with doing – with implementing the systems as part of day-to-day operations.

The diagram on page 5 shows the components of clinical governance that combine to assure the delivery of safe and continuously improving healthcare at West Moreton.

West Moreton Health recognises that not all of health care can be or is provided by the hospital or their community services. West Moreton Health will work closely with all external support services to ensure the continuum of patient care is maintained. West Moreton Health values and is committed to ensuring patients remain at the centre of decision making relating to their care.

What is Quality Care?

At West Moreton we define quality of healthcare according to the internationally accepted framework first developed by the Institute of Medicine as the six domains of quality and since reframed as ‘STEEEP’ care, that is:

- **Safe**: Avoiding harm to patients from care that is intended to help them and keeping our staff safe to provide the best quality of care to patients.
- **Timely**: Reducing delays that have an impact on the smooth flow of care to the patient.
- **Effective**: Providing clinically effective evidence-based healthcare to those who could benefit and refraining from providing services to those who are not likely to benefit (avoiding underuse and overuse).
- **Equitable**: Providing care, including access to care, that does not vary in quality according to personal characteristics such as gender, income, ethnicity or location.
- **Efficient**: Using resources to achieve best value by reducing waste and reducing production and administration costs.
- **Patient-centred**: Providing care that is respectful and responsive to individual patient preferences, needs and values.

This definition of STEEP care leads us to a simply stated healthcare delivery goal of ensuring that for all patients the ‘right patient’, receives the ‘right care’, in the ‘right place’, at the ‘right time’ and in the ‘right way’.
Roles and Responsibilities for Safety and Quality

Everyone at West Moreton, including frontline clinicians, managers and the Board, is accountable for their contribution to the safety and quality of care delivered to patients and consumers. The various roles are described broadly below. Further details of safety and quality roles and responsibilities are described in individual role descriptions and various policies and procedures.

The West Moreton Hospital and Health Board is ultimately responsible for ensuring that the organisation is run well and delivers safe, high-quality care. It does this by establishing a strong safety culture through an effective clinical governance system, satisfying itself that this system operates effectively, and ensuring that there is an ongoing focus on quality improvement.

Managers (including clinical managers) advise and inform the governing body, and operate the organisation within the strategic and policy parameters endorsed by the governing body. They are primarily responsible for ensuring that the systems that support the delivery of care are well designed and perform well.

Patients and consumers participate as partners to the extent that they choose – in their own care, and in organisation design and governance.

Clinicians work within, and are supported by, well-designed clinical systems to deliver safe, high-quality clinical care. Clinicians are responsible for the safety and quality of their own professional practice in line with professional codes of conduct.
Framework for Safety and Quality

*Italics denotes new initiatives in the Patient Safety and Quality Improvement Strategy 2020 – 2023*

**Partnering with consumers**
- Australian Charter of Health Care Rights
- Human Rights Act
- Consumer Engagement Strategy
- Patient Experience Surveys

**Safe environment for the delivery of care**
- Work Health and Safety Management System
- Occupational Violence Strategy
- Fatigue Risk Management
- Infrastructure and Assets Committee

**Quality Care for the Community**

**Governance, leadership and culture**
- Accreditation
- Strategic Plan
- Board and Safety and Quality Committee oversight
- Integrated governance committee structure
- Clinical Services Capability Framework (CSCF)
- Clinician Engagement Strategy
- Care Excellence Framework
- Just Culture Policy
- #everyoneisaleader
- Speaking Up for Safety

**Clinical performance and effectiveness**
- Research and innovation
- Credentialing and Scope of Clinical Practice
- Audit
- Benchmarking
- Mandatory training
- 1:1 Conversations
- Safety and Quality Training Framework
- Choosing Wisely initiatives

**Patient safety and quality improvement systems**
- Policies and procedures
- Risk management
- Clinical incident reporting
- Open disclosure
- Consumer feedback
- Ryan’s Rule
- Quality Improvement register
- Patient Safety and Quality Improvement Strategy
Safety and Quality Committee Structure

Clinical Safety and Quality Council (Standard 1)

Research
- Human Research Ethics Committee
- Research Committee

Clinical Care (National Standards)
- Partnering with Consumers (Standard 2)
- Infection Prevention (Standard 3)
  - Antimicrobial Stewardship
- Medication Management (Standard 4)
  - Medication Safety
- Comprehensive Care (Standard 5)
  - Falls, Pressure Injuries and Nutrition
  - Behaviour and restrictive practices
  - Cognitive Impairment
  - End of Life
- Communicating for Safety (Standard 6)
- Blood Management (Standard 7)
- Resuscitation Standard 8

Credentiaing
- Medical
- Nursing
- Allied Health

Morbidity and Mortality
- Anaesthetics
- ED
- ENT
- General Medicine
- General Surgery
- Gynaecology
- ICU
- Mental Health
- Orthopaedics
- Paediatrics
- Perinatal
- Radiology
- Rural
- Urology

Links with Operational Safety and Quality Committees through membership representation and information exchange:
- Ipswich Hospital
- Mental Health and Specialised Services
- Community and Rural Services