

Information Sheet



12 Clinical Governance Essentials for General Practice

May 2023

This information sheet outlines practical steps practice staff and clinicians can take to strengthen patient safety and promote patient focussed quality care in a general medical practice. The information sheet draws on published guidelines from the Australian Council of Safety and Quality in Healthcare and the Royal Australian College of General Practitioners.

Overview

Clinical governance is variously described as the set of relationships, responsibilities and structures adopted within a health service organisation to ensure good clinical outcomes for patients. It is framed on the organisation’s culture, leadership behaviours, policies and procedures, and planning, monitoring and improvement mechanisms. Ethics, risk management, compliance and administration are all elements of good governance.

Clinical governance ensures the community can be confident that systems are in place to deliver safe and high-quality care through their local practice. It ensures everyone – from frontline clinicians to managers and members of governing bodies - is accountable for assuring the delivery of health services that are safe, effective, integrated, high quality and continuously improving¹.

Clinical governance forms an integral part of an organisation’s corporate governance system accountabilities and responsibilities and intersects with risk, finance and other internal control frameworks (HR policy, legal etc).

These concepts and elements are the same for all entities providing clinical services, with measures taken scaled to reflect the nature, size and complexity of the organisation and its services.



¹ Australian Council on Safety and Quality in Healthcare National Model Clinical Governance Framework www.safetyandquality.gov.au/our-work/clinical-governance

Although accredited under separate and specific standards², HHS operated general practices remain subject to HHS-wide clinical governance policies and arrangements and practice staff should ensure a close working relationship is developed with the clinical governance/patient safety unit.

This document outlines a number of practical actions a general practice team can take to promote better patient care and clinical outcomes and are framed on six key elements of clinical governance:

- Leadership and culture
- Organisational systems
- Clinical effectiveness
- Risk management
- Patient engagement
- Workforce capability

1. Leadership and culture

- The Practice Manual should contain a clear commitment from management to safety and quality care through everyday actions and full implementation of the principles and requirements of the standards for general practice.
- Management's commitment to great clinical outcomes should be evident in the practice's business plan and budget.
- Role descriptions and recruitment processes should establish requirements for, and commitment to, safe and effective care through clinical practice in full adoption of the standards for general practice.
- Team meetings should regularly share and reflect on practice clinical outcomes, improvement actions, root cause of any major clinical incidents and an understanding of patient feedback.
- The practice should not need a separate clinical governance committee but should report to and actively engage with the HHS clinical governance or patient safety committee.

2. Organisational systems

- The practice should have plans to ensure continuing adherence with the RACGP Standards for General Practice (practice accreditation). Records must be kept of corrective actions, improvements and the results of clinical audits.
- The practice should have fully documented policies and procedures for its services and operations in its Practice Manual. All staff should have ready access to the Manual.

² Royal Australian College of General Practitioners Standards for General Practice 5th Edition
www.racgp.org.au/running-a-practice/practice-standards/standards-5th-edition

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- Roles, responsibilities and accountabilities should be clearly detailed in role descriptions for practice staff.
 - All staff should be orientated into the practice to ensure they are aware of the practice's policies, procedures and organisational arrangements, particularly those relating to clinical escalation, clinical incidents and handling patient feedback.

3. Clinical effectiveness

- Establish procedures to ensure patient demographic and care episodes are fully documented in the practice software and performance audits to identify incomplete or conflicting information.
- Monitor and evaluate practice performance with reference to relevant care metrics and with reference to the PIP Quality Improvement Program measures. Highlight variances or trends of concern and study these to understand possible causes.
- Encourage a no-blame culture for clinical incident reporting – a full data set, including near misses, provides the best opportunity to understand causes.
- Monitor and review the handling of clinical incidents and trends. Participate in investigations and/or root cause analysis of more significant incidents with HHS patient safety or clinical governance units. Incorporate improvements in operational procedures and training.

4. Risk management

- Ensure the practice has a risk management procedure and has documented clinical and non-clinical risks in a risk register. Risk reduction actions should be included in practice plans, be regularly discussed at practice meetings and have budgets assigned if needed.
- Identify and investigate possible risk red flags such as: unexpected staff turnover, trends for incidents, patient complaints and preventable hospitalisations, poor benchmark results, clinical audit findings, repeating 'not-met' accreditation results.
- Ensure responsibility for risk action is clearly allocated and progress is monitored.

5. Patient engagement

- Ensure arrangements exist that easily enables patient feedback and complaints. Consider alternate languages or formats. Consider an online feedback channel.
- Always treat patient feedback with the seriousness and respect it deserves.
- Ensure a process exists to monitor and review patient feedback – what action was taken – was it satisfactory to the patient?

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- Invite or provide opportunities for practice patients to contribute to practice improvements.
 - The practice should have a procedure relating to the release of patient information and patient access to their clinical records.
 - One or more clinicians should be trained in open disclosure procedures.

6. Workforce capability

- In addition to usual pre-employment checks³, recruitment and selection processes must confirm practitioner registration and qualification/s with the appropriate registration authority in Australia and involve reference checks and internet searches to establish the integrity and clinical capability of its new employees.
- Ensure practitioners have a current Medicare Provider Number.
- Ensure clinicians are credentialed (as required) through the HHS credentialing committee.
- Ensure mandatory training requirements are known and completion is monitored.
- Ensure the practice has a policy and process to support staff ongoing professional development to maintain skills and competencies.
- Ensure each employee and clinician has undertaken orientation, has an understanding of their role and responsibilities, receives regular feedback and participates in formal performance and development reviews.

³ Queensland Health HR Policy B1: Recruitment and selection policy.
<https://qheps.health.qld.gov.au/hr/policies-agreements-directives/policy-index/b-resourcing/recruitment-and-selection>