Clinical Governance

Clinical Risk Management Workshop

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The Tasks of a BoT

- Develop mission, strategy and policies;
- Manage the setting; and
- Being accountable to the people it represents
What Is Governance?

Governance is the action or manner of conducting the policy and affairs of (a state, organisation, or people)

Concise Oxford Dictionary
(10th Edition)
What Is
CLINICAL GOVERNANCE?
Clinical governance is a framework through which organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.

Clinical governance demands a major shift in the values, culture and leadership, to place greater focus on the quality of clinical care and to make it easier to bring about improvement and change in clinical practice.
# Quality Of Healthcare

## Quality of providers

### Quality Of Services

**Service** – consistently meeting and, at every opportunity, exceeding the needs of patients and other customers.

Good service depends on the ability of people to work well together.

### Quality Of Care

Quality management incorporate such activities as:

- Evidence-based management
- Risk management
- Clinical Audit
- Clinical guidelines
- Disease management
- Outcomes studies
- Best practice
- Patient education and grievances
- Quality improvement

### Quality of programmes
For CLINICAL GOVERNANCE to be successful, health organisations must demonstrate the following features:

- An open and participative culture
- A commitment to quality that is shared by staff and managers
- A comprehensive programme of quality improvement systems
• Regular board level discussions
• Clear policies aimed at managing risk
• A tradition of active working with patients, users, carers and the public
• An ethos of multi-disciplinary team working
• Good use of information
Quality Assurance

Defined as

“A programme that monitors and evaluates the quality and appropriateness of care and service provided and to pursue opportunities to continually improve the care and service”
Accreditation of Facilities

“Accreditation is a formal process by which a recognised body, usually a non-governmental organisation, assesses and recognises that a healthcare organisation meets applicable pre-determined and published standards”
Accreditation in Action

- Well established in South Africa e.g. COHSASA, ISO 9000 and other statutory bodies
- Could be used to address cost, reduce risks and to ensure quality
- Critical in contracting for capitation agreement and designated/preferred provider networks
Accreditation of Health Care Professionals

- Credentialing/Certification
  - Qualifications of providers.
  - Registration with HPCSA, etc.
  - Previous disciplinary actions.
  - Involvement with organisations, hospital privileges, etc.
  - Other professional qualifications.

- Re-credentialing/Re-certification
  - Ensures that professionals are up to date with new development in their fields
  - Done every five years through a compulsory CPD programme
Clinical Guidelines

Definition:
"Clinical practice guidelines are systematically developed statements to assist practitioner and patient decisions about appropriate health care for specific clinical circumstances"
Clinical Guidelines

Why do we need them?

- Variability of care
- Standardisation of patient management
- Incompetence, deliberate disregards to established knowledge and poor management
- Measurement of quality of care
- Cost-effectiveness and efficiency issues
- Litigations
Disease Management Programmes

“Disease management represents a comprehensive, ongoing, and coordinated approach to achieving desired outcomes for a population of patients. These outcomes include improving patients' clinical condition, reducing unnecessary healthcare costs and improving patients' quality of life”
Clinical Audit

“Clinical Audit is the *ongoing process* by which the desire of healthcare professionals, to provide *superior quality care* including the process of diagnosis and treatment, outcomes and quality of life of patients, and the utilisation of all resources are assessed, evaluated, discussed, improved and monitored”
Clinical Audit

Effective clinical audit:
• Is a character of the organization’s culture
• Is an on-going activity
• Uses evidence-based standards
• Is educational
• Protect confidentiality
• Multidisciplinary
• Relates to management
• Takes into consideration efficiency
Clinical Risk Management

“Risk management is the systematic process of identifying, evaluating and addressing actual risk through a well-designed programme that prevents, controls and minimises risk exposure”
Clinical Risk Management

Beneficial outcomes of risk management include:

- Reduced patient harm and dissatisfaction
- Preventing poor use of staff, time and money
- Protection from liability and litigation
- Protection from bad publicity
- Making staff aware that there is a spectrum of outcome
- Improves morale by making organisation more safety conscious
- Ranking of risks
- More explicit and justifiable decision making
The Clinical Governance Committee

Purpose:

“The custodian of the continuous quality improvement of clinical care”
The Clinical Governance Committee

Functions:
- To assist Board of Trustees in continuously evaluating clinical governance related issues
- Recommend to Board of Trustees the introduction of the necessary corrective measures
- Advise the Board on clinical Governance matters in all contractual agreements
The Clinical Governance Committee

Membership:

- Should be appointed by the Board
- At least five members of whom at least two should be members of the Board
- Avoid conflict of interest
The Clinical Governance Committee

Authorities:

- Access to relevant information
- Investigate any activity within the terms of reference
- Outside independent professional advice