

National Safety and Quality Health Service Standard, Second Edition

Standard 1
Clinical Governance for Health Service
Organisations Standard



SA Health Accreditation Resource to support Health Services



Government of South Australia
SA Health



CLINICAL GOVERNANCE FOR HEALTH SERVICE ORGANISATIONS STANDARD

Leaders of a health service organisation are accountable to the community for continuously improving the safety and quality of their services, and ensuring that they are patient centred, safe and effective.

Criteria

Governance and strategic leadership

Integrated corporate and clinical governance systems are established, and used to improve the safety and quality of health care for patients.

Patient safety and quality systems

Safety and quality systems are integrated with governance processes to enable organisations to actively manage and improve the safety and quality of health care for patients.

Clinical performance and effectiveness

The workforce has the right qualifications, skills and supervision to provide safe, high-quality care to patients.

Safe environment for the delivery of care

The environment promotes safe and high-quality health care for patients.

The SA Health Accreditation Resource is designed to be used in addition to the Australian Commission on Safety and Quality in Health Care's resources when implementing the second edition of the National Safety and Quality Health Service Standards. It contains a combination of resources (policies, guides and tools) developed by SA Health and assists health services in identifying examples of evidence to demonstrate how to meet individual actions.

These resources are working documents that can be used by health services in their planning for assessment against the National Safety and Quality Health Service Standards.

Further information is available in the Australian Commission in Safety and Quality in Health Care [National Safety and Quality Health Service Standards Accreditation Resources](#).

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Governance and strategic leadership

Integrated corporate and clinical governance systems are established, and used to improve the safety and quality of health care for patients.

Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.1</p> <p>Governance, leadership and culture</p>	<p>The governing body:</p> <ul style="list-style-type: none"> a. provides leadership to develop a culture of safety and quality improvement, and satisfies itself that this culture exists within the organisation b. provides leadership to ensure partnering with patients, carers and consumers c. sets priorities and strategic directions for safe and high-quality clinical care, and ensures that these are communicated effectively to the workforce and the community d. endorses the organisation's clinical governance framework e. ensures that roles and responsibilities are clearly defined for the governing body, management, clinicians and the workforce f. monitors the action taken that result from the analyses of clinical incidents g. review reports and monitors the organisation's progress on safety and quality performance. 	<ul style="list-style-type: none"> • SA Health Safety and Quality Strategic Governance Committee • SA Health Safety and Quality Operational Governance Committee • SA Health Partnering with Consumers and Community Advisory Group • LHN Consumer and Community Advisory Committees / Groups • Health Advisory Councils • Collaboration with consumer and community organisations • ACSQHC resources including Open Disclosure • Protocol for the exchange of information between SA Health and DCS for the treatment, care or rehabilitation of a prisoner 2015 • Model of Care for Aboriginal Prisoner Health and Wellbeing for South Australia • South Australian Prisoner Blood Borne Virus Prevention Action Plan 2017-2020 	<p>SA Health Strategic Plan 2017-2020</p> <p>Early Actions</p> <p>SA Health Policy Governance Framework</p> <p>SA Health Safety and Quality Work Plan 2017-2019</p> <p>Key SA Health Safety and Quality Policy Frameworks and toolkits</p> <p>SA Health Safety and Quality Programs</p> <p>SA Health Safety and Quality Reports</p> <p>Consumer and Community Engagement Governance model</p> <p>Patient Incident Management and Open Disclosure Policy Directive</p>
<p>1.2</p> <p>Governance, leadership and culture</p>	<p>The governing body ensures that the organisation's safety and quality priorities address the specific health needs of Aboriginal and Torres Strait Islander people.</p>	<p>Every proposal approved by SA Health at the executive level must include a completed Aboriginal Health Impact Statement of three questions.</p> <p>WCHN has an Aboriginal Health Plan 2018-2022</p>	<p>Aboriginal Health Care Plan 2010-16</p> <p>A Framework for Comprehensive Primary Health Care Services for Aboriginal People</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
1.3 Organisational leadership	The health service organisation establishes and maintains a clinical governance framework, and uses the processes within the framework to drive improvements in safety and quality.	<ul style="list-style-type: none"> • Relevant documentation of committee structures and roles that oversee policy, procedure and protocol development • Ensure the appropriate induction of governing committees • Safety and quality information and data is presented to the executive and documentation of committees and minutes include information on safety and quality indicators and data • Annual report which includes information on safety and quality performance • ACSQHC resources including National Model Clinical Governance Framework and Guide for Governing bodies 	SA Health Safety and Quality Work Plan 2017-2019 SA Health Safety and Quality Programs Key SA Health Safety and Quality Policy Frameworks and toolkits
1.4 Organisational leadership	The health service organisation implements and monitors strategies to meet the organisation's safety and quality priorities for Aboriginal and Torres Strait Islander people.	<ul style="list-style-type: none"> • Updated Aboriginal Health Care due for release in late 2018, setting out the five year plan for achieving health priorities • The Quality Information Performance (QIP) hub makes it possible for authorised clinicians to view safety and quality data at LHN and hospital level, and specific for patients who have identified as Aboriginal and Torres Strait Islander people 	Aboriginal Health Care Plan 2010-16 SA Health Aboriginal Cultural Respect Framework Policy Directive
1.5 Organisational leadership	The health service organisation considers the safety and quality of health care for patients in its business decision making.	<ul style="list-style-type: none"> • Organisational strategic and business plans explicitly incorporate Safety and Quality • There is a published organisational structure identifying Safety and Quality • Minutes of strategic and decision making committees' document discussions about safety and quality • Relevant documentation from committees and meetings such as finance and audit committees and strategic planning committees demonstrate safety and quality of health care is considered in business decision making • Results of audits including policy and legislative compliance, clinical records and clinical practice 	SA Health Framework for Active Partnership with Consumers and the Community Health literacy toolkit Consumer and Community Engagement Governance model
1.6 Clinical Leadership	Clinical leaders support clinicians to: <ol style="list-style-type: none"> a. understand and perform their delegated safety and quality roles and responsibilities. b. operate within the clinical governance framework to improve the safety and quality of health care for patients. 	<ul style="list-style-type: none"> • Roles and responsibilities are outlined in all SA Health policies and guidelines. • Safety and Quality roles and responsibilities to be included in all job and person specifications 	SA Health Policy Governance Framework

Comments



Patient safety and quality systems

Safety and quality systems are integrated with governance processes to enable organisations to actively manage and improve the safety and quality of health care for patients.

Item	Action required	Examples of Evidence	SA Health Policy / Guideline
1.7 Policies and procedures	The health service organisation uses a risk management approach to: <ol style="list-style-type: none"> set out, review and maintain the currency and effectiveness of policies, procedures and protocols monitor and take action to improve adherence to policies, procedures and protocols review compliance with legislation, regulation and jurisdictional requirements. 	<ul style="list-style-type: none"> Register of safety and quality risks and actions taken Results of audits including policy and legislative compliance, clinical records and clinical practice Quality improvement plan that includes actions to address identified issues 	SA Health Policy Governance Framework Key SA Health Safety and Quality Policy Frameworks and toolkits SA Health Risk Management Policy Directive Legislative Compliance Directive
1.8 Measurement and quality improvement	The health service organisation uses organisation-wide quality improvement systems that: <ol style="list-style-type: none"> identify safety and quality measures, and monitor and report performance and outcomes identify areas for improvement in safety and quality implement and monitor safety and quality improvements strategies involve consumers and the workforce in the review of safety and quality performance and systems 	Safety and Quality Reports are circulated and discussed at: <ul style="list-style-type: none"> SA Health Partnering with Consumers and Community Advisory Group LHN Consumer and Community Advisory Committees / Groups (CACAC/CAGs) Health Advisory Councils (HACs) SA Health Consumer and Community Advisory Committee / Group (CACAC / GAG) Guideline and Toolkit released August 2015 QIP Hub Quality improvement registers at LHN level	SA Health Safety and Quality Reports (monthly) SA Health Safety Learning System (SLS) SLS Patient Incident Management module SLS Consumer Feedback module



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.9</p> <p>Measurement and quality improvement</p>	<p>The health service organisation ensures that timely reports on safety and quality systems and performance are provided to:</p> <ol style="list-style-type: none"> the governing body the workforce consumers and the local community other relevant health service organisations. 	<p>SA Health Patient Safety Report</p> <p>SA Health Patient Safety Report for Consumers and Community</p> <p>Patient Safety Report is circulated:</p> <ul style="list-style-type: none"> SA Health Executive Local Health Network CEO's Health and Community Services Complaints Commissioner <p>Patient Safety Report for Consumers and Community is circulated</p> <ul style="list-style-type: none"> SA Health Consumer and Community Governance model Consumer and community organisations. Local Health Networks 	<p>SA Health Patient Safety Report</p> <p>SA Health Patient Safety Report for consumers and the community</p> <p>SA Health Safety and Quality Reports – LHNs</p>
<p>1.10</p> <p>Risk Management</p>	<p>The health service organisations:</p> <ol style="list-style-type: none"> identifies and documents organisational risks uses clinical and other data collections to support risk assessments acts to reduce risks regularly reviews and acts to improve the effectiveness of the risk management system reports on risks to the workforce and consumers plans for, and manages, internal and external emergencies and disasters 	<ul style="list-style-type: none"> All SA Health job and person specifications state: <ul style="list-style-type: none"> staff apply principles of SA Government's Risk Management Policy to work as appropriate staff may be required to participate in counter disaster activities Evidence that induction and orientation content and processes are reviewed 	<p>SA Health Risk Management Policy Directive</p> <p>Worker incidents module in Safety Learning System</p> <p>Security incidents in Safety Learning System</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.11</p> <p>Incident management systems and open disclosure</p>	<p>The health service organisation has organisation-wide incident management and investigation systems and:</p> <ol style="list-style-type: none"> supports the workforce to recognise and report incidents supports patients, carers and families to communicate concerns or incidents involves the workforce and consumers in the review of incidents provides timely feedback on the analysis of incidents to the governing body, the workforce and consumers uses the information from the analysis of incidents to improve safety and quality incorporates risks identified in the analysis of incidents into the risk management system regularly reviews and takes action to improve the effectiveness of the incident management and investigation systems. 	<p>SA Health Patient Incident Management and Open Disclosure Policy Directive and toolkit released in September 2016 include:</p> <ul style="list-style-type: none"> Patient incident management and open disclosure Root Cause Analysis Lookback review <p>SA Health Safety Learning System and e-Learning course</p>	<p>SA Health Patient Incident Management and Open Disclosure Policy Directive and Toolkit</p> <p>SA Health Safety Learning System</p> <p>There are a suite of SLS How to Guides, Topic Guides, Factsheets and Notices</p> <ul style="list-style-type: none"> Tool 1 – SLS (Safety Learning System) guide – How to report a patient incident Tool 3 – SLS (Safety Learning System) guide – How to manage a patient incident Answers to frequently asked questions (FAQs) about reporting patient incidents are available. Patient incident management in SLS Consumer feedback Worker incidents in SLS Security incidents in SLS Notifications in SLS <p>There are a set of standard reports within the SLS system, including reports about the completion of the investigation after an incident. LARS and QIP Hub also have standard reports available.</p> <p>Coronial Process and the Coroners Act 2003 Policy Directive</p>
<p>1.12</p> <p>Incident management systems and open disclosure</p>	<p>The health service organisation:</p> <ol style="list-style-type: none"> uses an open disclosure program that is consistent with the Australian Open Disclosure Framework monitors and acts to improve the effectiveness of open disclosure processes. 	<p>Open disclosure information for staff</p> <p>Open disclosure information for consumers page is available on the SA Health website under Health Topics.</p> <p>SA Health Open Disclosure resources for clinicians include:</p> <ul style="list-style-type: none"> Quick guide Saying sorry guide Comprehensive Guide for clinical leads / facilitators Tools – checklists / flowcharts 	<p>See 1.11</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.13</p> <p>Feedback and complaints management</p>	<p>The health service organisation:</p> <ol style="list-style-type: none"> has processes to seek regular feedback from patients, carers and families about their experiences and outcomes of care has processes to regularly seek feedback from the workforce on their understanding and use of the safety and quality systems uses this information to improve safety and quality systems. 	<ul style="list-style-type: none"> QIP Hub Consumer Feedback and Consumer Experience Measuring Consumer Experience Strategic Action Plans Measuring Consumer Experience Computer Assisted Patient / Personal Interview Program (MCE CAPI) SA Health Patient Safety Report Patient Safety Report for Consumers and Community SA Consumer and Community Safety and Quality Report Consumer feedback process and contacts for health sites information available on SA Health website Resources are also available from the Health and Community Services Complaints Commissioner 	<p>SA Health Consumer Feedback and Complaints Management Strategy</p> <p>SA Health Consumer Management Feedback Policy Directive</p> <p>SA Health Consumer Feedback Guideline and toolkit</p>
<p>1.14</p> <p>Feedback and complaints management</p>	<p>The health service organisation has an organisation-wide complaints management system and:</p> <ol style="list-style-type: none"> encourages and supports patients, carers and families and the workforce to report complaints involves the workforce and consumers in the review of complaints resolves complaints in a timely way provides timely feedback to the governing body, the workforce and consumers on the analysis of complaints and actions taken uses information from the analysis of complaints to inform improvements in safety and quality systems records the risks identified from the analysis of complaints in the risk management system regularly reviews and acts to improve the effectiveness of the complaints management system. 	<ul style="list-style-type: none"> Review Consumer feedback and complaints management policy, guideline and toolkit Establish standardised SLS Consumer Feedback reports Partnering with Consumers eLearning module released in November 2015 See also evidence listed in item 1.13 	<p>As above in 1.13</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.15</p> <p>Diversity and high risk groups</p>	<p>The health service organisation:</p> <ol style="list-style-type: none"> identifies the diversity of the consumers using its services identifies groups of patients using its services who are at higher risk of harm incorporates information on the diversity of its consumers and higher-risk groups into the planning and delivery of care. 	<p>Culturally and Linguistically Diverse (CALD) Communities</p> <ul style="list-style-type: none"> SA Health collaboration with Multicultural Communities Council SA (MCCSA) SA Health CALD Consumer Experience Work Group SA Health CALD resources (posters / wallet cards / guides / interpreter signage) SA Health Culturally and Linguistically Diverse (CALD) profile (see above) CALD Analysis SA Consumer Experience Surveillance System (SACCESS) CALD resources including: <ul style="list-style-type: none"> Charter of Rights Your rights and responsibilities booklets Your feedback is important (in development) Falls information <p>Aboriginal and Torres Strait Islander (ATSI) Communities</p> <ul style="list-style-type: none"> SA Health collaboration with Aboriginal Health Council SA (AHCSA) SA Health collaboration with SAHMRI Aboriginal Chronic Disease Consortium Aboriginal and Torres Strait Islander (ATSI) profile SA Health Aboriginal Cultural Learning Framework SA Health Cultural Respect Framework Policy Directive SA Health Aboriginal Cultural Learning eLearning module (Digital Media) SA Health Guide for Engaging with Aboriginal People Country Health SA LHN Aboriginal Community and Consumer Engagement Strategy 	<p>SA Health Demographic data reports - currently being developed including country of Birth, age, gender, ethnicity.</p> <p>SA Health Equity and Access in Health Care Policy Directive (draft currently in development by Legal and Legislative Policy Unit)</p> <p>SA Health Languages Provision Guidelines (to be updated)</p> <p>SA Health Interpreter and Translator Services Panel Contract (July 2018)</p> <p>SA Health Partnering with Consumers and Community eLearning module (videos including CALD and ATSI consumer experiences)</p> <p>SA Health Culturally and Linguistically Diverse (CALD) Annual Profiles</p> <p>Partnering with Culturally and Linguistically Diverse (CALD) Consumers website</p> <p>SA Health Guide to engaging with Aboriginal people</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
1.16 Healthcare records	The health service organisation has healthcare record systems that: <ol style="list-style-type: none"> make the healthcare record available to clinicians at the point of care support the workforce to maintain accurate and complete healthcare records comply with security and privacy regulations support systemic audit of clinical information integrate multiple information systems, where they are used. 	<ul style="list-style-type: none"> ACSQHC Safety in e-Health resources Clinical Handover / Patient Identification Policy Directives and Surgical Team Checklist will be combined to a new policy entitled Clinical Communication and Patient Identification. SA Health has a brochure: "A guide to maintaining confidentiality in the public health system" Information Sharing Guidelines for Promoting the Safety and Wellbeing of Children, Young People and their Families SA Health follows the state record disposal schedule SA Health follows the Code of Fair Information Practice and the Freedom of Information (FOI) Act which is mentioned within documentation for CALHN sites including RAH, SA Dental Service 	Health Record Management Policy Directive SA Client Identification Data Standards Draft Clinical Communication and Patient Identification Policy Directive Breaches of privacy are included in the Health Record Management Policy Directive Information requirements are included in the Prisoners Care and Treatment in SA Health Services Policy Directive Privacy Policy Directive
1.17 Healthcare records	The health service organisation works towards implementing systems that can provide clinical information into the My Health Record system that: <ol style="list-style-type: none"> are designed to optimise the safety and quality of health care for patients use national patient and provider identifiers use standard national terminologies. 	EPAS discharge summaries are sent in compliance with: <ul style="list-style-type: none"> My Health Records Act 2012 My Health Records Rule 2016 My Health Records Regulations 2012 ACSQHC Safety in e-Health resources 	As above in 1.16
1.18 Healthcare records	The health service organisation providing clinical information into the My Health Record system has processes that: <ol style="list-style-type: none"> describe access to the system by the workforce, to comply with legislative requirements maintain the accuracy and completeness of the clinical information the organisation uploads to the system. 		As above in 1.16

Comments



Clinical performance and effectiveness

The workforce has the right qualifications, skills and supervision to provide safe, high-quality care to patients.

Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.19</p> <p>Safety and quality training</p>	<p>The health service provides orientation to the organisation that describes roles and responsibilities for safety and quality for:</p> <ol style="list-style-type: none"> Members of the governing body Clinicians and any other employed, contracted, locum, agency, student or volunteer members of the organisation. 	<p>Safety and Quality e-Learning modules</p> <ul style="list-style-type: none"> What is Safety and Quality? Partnering with Consumers and Community <p>National Model Clinical Governance Framework fact sheets:</p> <ul style="list-style-type: none"> Clinical governance for doctors Clinical governance for managers and clinician managers Clinical governance for nurses and midwives 	<p>All policies describe roles and responsibilities</p> <p>Induction and Orientation Policy Directive and associated procedure and checklist for employees.</p>
<p>1.20</p> <p>Safety and quality training</p>	<p>The health service organisation uses its training systems to:</p> <ol style="list-style-type: none"> assess the competency and training needs of its workforce implement a mandatory training program to meet its requirements arising from these standards provide access to training to meet its safety and quality training needs monitor the workforce's participation in training. 	<p>Safety and Quality online e-Learning courses include:</p> <ul style="list-style-type: none"> What is safety and quality? Aseptic technique Basic life support Challenging behaviour – an introduction to preventing and responding Clinical handover Infection Control Falls Prevention High Risk Medicines: <ul style="list-style-type: none"> An introduction Anticoagulants Insulin Labelling for safety – injectables medicines, fluids and lines Minimising restrictive practices Partnering with Consumers and Community Patient Incident Management and Open Disclosure Perinatal Emergency Education <ul style="list-style-type: none"> K2 fetal monitoring Newborn life support Newborn Advanced Life Support (NALS) Resuscitation Planning – 7 Step Pathway Safety Use of Personal Protective Equipment (PPE) TeamSTEPPS <ul style="list-style-type: none"> Why do we have training about teamwork? Skills to improve teamwork Refresher – Coaching Master Trainer – Observation 	<p>SLS has a range of education resources.</p> <ul style="list-style-type: none"> Education and training frameworks are provided for many policies Policies have accompanying toolkits that include materials such as Fact Sheets, How to guides, FAQs that can be used for staff training e-Learning modules are available for most Standards . Review planned to update in alignment with second edition NSQHSS <p>Induction and Orientation Policy Directive and associated procedure and checklist for employees.</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
1.21 Safety and quality training	The health service organisation has strategies to improve the cultural awareness and cultural competency of the workforce to meet the needs of its Aboriginal and Torres Strait Islander patients.	<ul style="list-style-type: none"> SA Health Aboriginal Cultural Learning online course. Data can be reported about the completion rates of this training across SA Health sites. NAIDOC and Reconciliation events take place at SA Health sites and are promoted to all staff. DASSA induction process requires staff to complete mandatory online training in cultural awareness and promotes Aboriginal and Torres Strait Islander specific conferences and workshops as CPD activity. CHSA has a three phase cultural competency learning and development program, has worked with a socially conscious theatre group (ACT NOW) to address racial issues for senior staff and managers in all six CHSALHN regions. CHSA has developed an Aboriginal Health Experts by Experience Registry. WCHN has an Aboriginal Workforce Strategy 2018-2022. 	SA Health Aboriginal Cultural Respect Framework Policy Directive Model of Care for Aboriginal Prisoner Health and Wellbeing for South Australia
1.22 Performance management	The health service organisation has valid and reliable performance review processes that: <ol style="list-style-type: none"> require members of the workforce to regularly take part in a review of their performance identify needs for training and development in safety and quality incorporate information on training requirements into the organisation's training system. 	<ul style="list-style-type: none"> Audit of clinical workforce with completed performance reviews Relevant documentation from committees and meetings regarding performance review and credentialing of clinicians Mentoring or peer review reports Individual performance reviews documented for the clinical workforce Workforce training and competency records consistent with organisational policies and credential requirements Workforce development plans that document training needs identified through individual performance reviews 	SA Health Performance Review and Development Policy Directive



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.23</p> <p>Credentialing and scope of practice</p>	<p>The health service organisation has processes to:</p> <ol style="list-style-type: none"> define the scope of clinical practice for clinicians, considering the clinical service capacity of the organisation and clinical services plan monitor clinician's practice to ensure that they are operating within their designated scope of clinical practice review the scope of clinical practice of clinicians periodically and whenever a new clinical service, procedure or technology is introduced or significantly altered. 	<ul style="list-style-type: none"> Strategic plan that outlines the organisations overall objectives and services provided Register of workforce qualifications suitable for clinical service roles of the organisation Evaluation of the safety and quality of clinical services and programs Policies that provide direction on defining scope of practice for health practitioners working within SA Health Relevant documentation from committees and meetings that include information on roles, responsibilities, accountabilities and scope of practice for the clinical workforce Audit of position descriptions, duty statements and employment contracts against the requirements and recommendations of clinical practice and professional guidelines Workforce performance appraisal and feedback records show a review of the scope of practice for clinical workforce Policy and Procedural Guidelines for the Introduction of New Health Technology into the South Australian Public Health System Planning documents to introduce new services Defined competency standards for new services, procedures and technology Communication to the workforce that defines the scope of practice for new clinical services, procedures and technologies 	<p>Credentialling and scope of clinical practice</p> <p>Credentialling and Scope of Clinical Practice System for Health Practitioners</p> <p>Governance Framework for Advanced Scope of Practice Roles and Extended Scope of Practice Roles in SA Health Policy Directive</p> <p>Authenticating Allied Health Professionals including access appointment Policy Directive</p> <p>Credentialling and defining the scope of clinical practice for Medical and Dental practitioners Policy Directive</p> <p>Registration, credentialling and professional associations in allied health</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.24</p> <p>Credentialing and scope of practice</p>	<p>The health service organisation:</p> <ol style="list-style-type: none"> conducts processes to ensure that clinicians are credentialed, where relevant monitors and improves the effectiveness of the credentialing process. 	<ul style="list-style-type: none"> The SA Health Credentialing and Scope of Clinical Practice System web application is available through SAH applications. Register of workforce qualifications and areas of credentialed practice. Audit of compliance with policies, procedures and protocols. Audit of clinical workforce who have a documented performance appraisal. Register of workforce qualifications and areas of credentialed practice. Register of the clinical workforce Healthcare Provider Identifiers and Prescription, Provider Numbers. Documented review of qualifications and competencies for clinical workforce. Individual performance reviews documented for the entire clinical workforce. 	<p>As above in item 1.23</p>
<p>1.25</p> <p>Safety and quality roles and responsibilities</p>	<p>The health service organisation has processes to:</p> <ol style="list-style-type: none"> support the workforce to understand and perform their roles and responsibilities for safety and quality assign safety and quality roles and responsibilities to the workforce, including locums and agency staff. 	<ul style="list-style-type: none"> What is Safety and Quality? e-Learning module Positions descriptions, duty statements and employment contracts describe safety and quality roles, responsibilities and accountabilities General education and induction around Safety and Quality at a local level is provided and training records are maintained Education and Induction is also provided for specific roles that support the Safety and Quality portfolio and training records are maintained Evidence that induction and orientation content and processes are reviewed Results of workforce surveys or feedback regarding their safety and quality roles and responsibilities Policies, procedures and protocols that outline the delegated safety and quality roles and responsibilities of the workforce Communication to the workforce on their safety and quality roles and responsibilities 	<p>SLS has a range of education resources:</p> <ul style="list-style-type: none"> Tool 1 – SLS (Safety Learning System) guide – How to report a patient incident Tool 3 – SLS (Safety Learning System) guide – How to manage a patient incident SLS FAQ Reporting patient incidents <p>Education and training frameworks are provided for many policies, with toolkits that include Fact Sheets, How to guides, FAQs that can be used for staff training</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.26</p> <p>Safety and quality roles and responsibilities</p>	<p>The health service organisation provides supervision for clinicians to ensure that they can safely fulfil their designated roles, including access to after-hours advice, where appropriate.</p>		
<p>1.27</p> <p>Evidence-based care</p>	<p>The health service organisation has processes to:</p> <ol style="list-style-type: none"> provide clinicians with ready access to best-practice guidelines, integrated care pathways, clinical pathways and decision-support tools relevant to their clinical practice. support clinicians to use the best available evidence, including relevant Clinical Care Standards developed by the Australian Commission on Safety and Quality in Health Care. 	<ul style="list-style-type: none"> SA Prison Health Service and Intermediate Care Service utilises: <ul style="list-style-type: none"> RACGP Standards for Health Services in Australian Prisons 2011 Royal Australian Standards for General Practices 5th Edition Australian Medicines Handbook eTG (Electronic Therapeutic Guidelines) Best Practice Guidelines Diabetes Australia 	<p>SA Health Clinical Directives and Guidelines</p> <p>SA Health Clinical Practice Guidelines</p> <p>Infection Control</p> <p>Neonatal Medication Guidelines</p> <p>Paediatric Clinical Practice Guidelines</p> <p>Perinatal Practice Guidelines (SAPPG)</p> <p>Medicines and prescribing: policies and guidelines</p>
<p>1.28</p> <p>Variation in clinical practice and health outcomes</p>	<p>The health service organisation has systems to:</p> <ol style="list-style-type: none"> monitor variation in practice and expected health outcomes provide feedback to clinicians on variation in practice and health outcomes review performance against external measures support clinicians to practice clinical review of their practice use information on unwarranted clinical variation to inform improvements in safety and quality systems and practice record the risks identified from unwarranted clinical variation in the risk management system. 	<ul style="list-style-type: none"> National Clinical Care Standards that have been developed include: <ul style="list-style-type: none"> Acute coronary syndromes Antimicrobial stewardship Stroke Delirium Hip fracture care Osteoarthritis including knee pain Heavy menstrual bleeding Cataracts Australian Institute of Health and Welfare” The Health of Australia’s Prisoners 2015 (produced every 3 years) National Prison Entrants Bloodborne Virus Survey (NPEBBVS) UNSW/The Kirby Institute (every 3 years) Medication Safety Self-Assessment Tools (NSW Clinical Excellence Commission) 	<p>Strategies to address clinical variation, including planning care to meet National Clinical Care Standards and developing clinical indicators</p> <p>Clinical data strategy (includes development of QIP Hub) includes measures of variation in practice and expected health outcomes</p>

Comments



Safe environment for the delivery of care

The environment promotes safe and high-quality health care for patients.

Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.29</p> <p>Safe environment</p>	<p>The health service organisation maximises safety and quality of care:</p> <ol style="list-style-type: none"> through the design of the environment by maintaining buildings, plant, equipment, utilities, devices and other infrastructure that are fit for purpose. 	<p>Staff and Consumer information on respecting patients' privacy and dignity with patient centred care principles</p> <p>Workfit assessments</p>	<p>Same Gender Accommodation Policy Directive / Guideline and Toolkit</p> <p>Patient and Consumer Centred Care Principles</p> <p>By-laws for Incorporated Hospitals</p> <p>Safe environments are described in the Falls and Fall Injury Prevention and Management Policy Directive.</p> <p>Procurement and System Management Policy Directive</p> <p>Emergency Management Policy Directive</p> <p>Business Continuity Management Framework Policy Guideline</p> <p>Construction and Renovation at Existing Health Care Facilities: Infection Prevention and Control Policy Guideline</p>
<p>1.30</p> <p>Safe environment</p>	<p>The health service organisation:</p> <ol style="list-style-type: none"> identifies service areas where there is a high risk of unpredictable behaviours and develops strategies to minimise the risks of harm for patients, carers, families, consumers and the workforce Provides access to a calm and quiet environment when it is clinically required. 	<p>Tool 2 – Hazard identification and risk assessment for challenging behaviour assists with the identification of hazards and risk of the work environment including but not limited to, the consideration of workplace design and settings which may increase the potential risk of challenging behaviour.</p> <p>Australian Health Facility Guidelines, Part B - Health Facility Briefing and Planning;</p> <ul style="list-style-type: none"> 0131 Mental Health – Overarching Guideline, Revision 1.0, 14 March 2018 0132 Child and Adolescent Mental Health Unit, Revision 7.0 21 December 2016 0133 – Psychiatric Emergency Care Centre, Revision 6.0 21 December 2016 0134 - Adult Acute Mental Health Inpatient Unit, Revision 6.0, 01 March 2016 0135 – Older Persons Acute Mental Health Unit; Revision 2.0 01 March 2016 0136 – Non acute inpatient MH Unit, Revision 2.0 01 March 2016 0137 - Mental Health Intensive Care Unit, Revision 2.0 01 March 2016. 	<p>Challenging Behaviour Policy Framework including Tool 2 – Hazard identification and risk assessment for challenging behaviour</p> <p>Restraint and Seclusion in mental health services Policy Guideline toolkit</p> <p>Same Gender Accommodation Policy Directive / Guideline and Toolkit</p> <p>The Mental Health Act 2009 s96 (1), 97(1) and 97A(1) – approved treatment centres</p>



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
1.31 Safe environment	The health service organisation facilitates access to services and facilities by using signage and directions that are clear and fit for purpose.	<ul style="list-style-type: none"> • Working group with LHN reps and consumers to be convened in July 2018 to review SA Health Signage Standards • Observation of the use of universal signage to enable wayfinding for people from culturally and linguistically diverse backgrounds • Audit results that show whether signs are clearly visible to people with disability • Location maps that are displayed at entrances and in areas of high visual impact • Facility map that is available in multiple languages • Observation of the use of volunteers in reception areas to assist consumers with directions. 	
1.32 Safe environment	The health service organisation admitting patients overnight has processes that allow flexible visiting arrangements to meet the patients' needs, when it is safe to do so.	Palliative care, Advance Care and Resuscitation Planning 7 Step Pathway Policy Directives include visitor access as an item.	Local Health Network's Visiting Arrangements procedure Prisoners Care and Treatment in SA Health Services Policy Directive section 4.2 describes how prisoners are managed within acute facilities including prisoner movement, phone calls, visitors and photography



Item	Action required	Examples of Evidence	SA Health Policy / Guideline
<p>1.33</p> <p>Safe environment</p>	<p>The health service organisation demonstrates a welcoming environment that recognises the importance of the cultural beliefs and practices of Aboriginal and Torres Strait Islander people.</p>	<ul style="list-style-type: none"> • Each LHN develops a Reconciliation Action Plan and identifies site specific actions • Statement of Reconciliation and acknowledgement of Traditional Custodians on display in SA Health sites. • Aboriginal advisory committee formed during the construction of RAH and assessed the cultural significance of the site in relation to Kurna people • Across CHSA network, Aboriginal and Torres Strait Islander flags are displayed and 'Welcome to Country' integrated in their work • DASSA established community partnership program, encourages Aboriginal members on their community advisory council, displays Aboriginal flags at entry points and Kurna statements in metro buildings and has an art selection panel to choose artwork representing local Aboriginal artists across SA • RAH is designed to be physically inclusive and openly welcoming design with displays of Aboriginal art, decals, Kurna basket weaving in high traffic areas such as the Emergency Department • FMC and SALHN have developed welcome packs and culturally appropriate booklets for staff caring for Aboriginal patients, and commissioned art work for display in areas that have identified a need to improve their culturally appropriate care • Watto Purrunga (Kurna term for the branch of life) Aboriginal Primary Health Care Service is free comprehensive program of culturally sensitive services across four sites in Adelaide's northern and central regions • Country Health SA LHN Aboriginal Community and Consumer Engagement Strategy • WCHN has a Reconciliation Action Plan 2017-2020 	<p>Refer to Standard 1.2</p> <p>SA Health Aboriginal Culture and History Handbook</p> <p>SA Health Guide to engaging with Aboriginal people</p> <p>A Framework for Comprehensive Primary Health Care Services for Aboriginal People</p> <p>Model of Care for Aboriginal Prisoner Health and Wellbeing for South Australia</p>

Comments

Useful links

Australian Commission on Safety and Quality in Health Care resources:

[Improving the safety and quality of health care for the Aboriginal and Torres Strait Islander community](#)

<https://www.safetyandquality.gov.au/our-work/assessment-to-the-nsqhs-standards/improving-care-for-aboriginal-and-torres-strait-islander-people/>

[National Safety and Quality Health Service Standards User Guide for Aboriginal and Torres Strait Islander Health \(PDF 2MB\)](#)

[Overview: Guide to better care for Aboriginal and Torres Strait Islander Consumers \(Word 503KB\)](#)

[1. Setting safety and quality goals for Aboriginal and Torres Strait Islander people in health service organisations \(Word 576KB\)](#)

[2. Cultural competence in caring for Aboriginal and Torres Strait Islander consumers \(Word 421KB\)](#)

[3. Improving identification rates of Aboriginal and Torres Strait Islander consumers \(Word 397KB\)](#)

[4. Creating safe and welcoming environments for Aboriginal and Torres Strait Islander consumers \(Word 408KB\)](#)

[5. Effective and safe communication with Aboriginal and Torres Strait Islander consumers \(Word 417KB\)](#)

[6. Comprehensive care for Aboriginal and Torres Strait Islander consumers \(Word 419KB\)](#)

For more information

Safety and Quality Unit
Department for Health and Wellbeing
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Public - I1-A1



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