

Clinical Governance Policy Kirkvoe Medical

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Policy Owner / Author:	Dr Zoe Shepherd

1. Reason for Policy / Purpose of Policy

Clinical governance is the framework through which organisations are accountable for continually improving the quality of their services and safeguarding high standards of care. This is achieved by creating an environment in which excellence in clinical care will flourish.

There are three key attributes to clinical governance:

- Recognisably high standards of care
- Transparent responsibility and accountability for those standards
- An ethos of continuous improvement

Clinical governance refers to the structures, processes and systems in place in an organisation to manage the quality of service provision. This framework needs to be appropriate to each organisation, and this policy sets out the Kirkvoe Medical approach. There are seven key elements to clinical governance as outlined below.

CLINICAL EFFECTIVENESS & RESEARCH

Clinical effectiveness means ensuring that everything you do is designed to provide the best outcomes for patients i.e. that you do "the right thing to the right person at the right time in the right place". In practice, it means:

- Adopting an evidence-based approach in the management of patients - achieved through ongoing CPD and accreditation by Dr Zoe Shepherd
 - Changing your practice, developing new protocols or guidelines based on experience and evidence if current practice is shown inadequate - the practice will ensure it's clinical actions are consistent with best practice.
- Implementing NICE guidelines, National Service Frameworks, and other national standards to

AUDIT The aim of the audit process is to ensure that clinical practice is continuously monitored and that deficiencies in relation to set standards of care are remedied. The care given by Kirkvoe medical will be audited by Dr Zoe Shepherd at regular intervals as a requirement for revalidation of her medical registration.

RISK MANAGEMENT

Risk Management involves having robust systems in place to understand, monitor and minimise the risks to patients and staff and to learn from mistakes. When things go wrong in the delivery of care, doctors and other clinical staff should feel safe admitting it and be able to learn and share what they have learnt. This includes:

- Complying with protocols (hand washing, discarding sharps, identifying patients correctly etc)
- Learning from mistakes and near-misses (informally for small issues, formally for the bigger events)
- Identifying and acting on any significant adverse events including looking closely at complaints to ensure they are not repeated- see Kirkvoe medical complaints policy.

- Assessing the risks identified for their probability of occurrence and the impact they could have if an incident did occur. Implementing processes to reduce the risk and its impact (the level of implementation will often depend on the budget available and the seriousness of the risk)

- Promoting a blame-free culture to encourage identification of mistakes or poor care

EDUCATION AND TRAINING

This entails providing appropriate support available to enable staff to be competent in doing their jobs and to develop their skills so that they are up to date. Professional development needs to continue through lifelong learning. In practice, for Kirkvoe Medical, this involves:

- Attending courses and conferences (commonly referred to as CPD - Continuous Professional Development)
- Appraisals (which are a means of identifying and discussing weaknesses, and opportunities for personal development)

PATIENT AND PUBLIC INVOLVEMENT (PPI)

PPI is about ensuring that the services provided suit patients, that patient and public feedback is used to improve services into day-to-day practice to ensure an increased level of quality and suitability, and that patients and the public are involved in the development of services and the monitoring of treatment outcomes. This is being implemented through a number of initiatives, including:

- Local patient feedback questionnaires as part of Dr Shepherd's appraisal
- Feedback received from email contact
 - Formal patient feedback requested every 5 years via patient surveys

USING INFORMATION & IT

This aspect of clinical governance is about ensuring that:

- Patient data is accurate and up-to-date
- Confidentiality of patient data is respected
- Full and appropriate use of the data is made to measure quality of outcomes (e.g. through audits) and to develop services tailored to local needs.

STAFFING & STAFF MANAGEMENT

- This relates to need for appropriate recruitment and management of staff, ensuring that underperformance is identified and addressed.
 - Encouraging staff retention by motivating and developing staff
- Providing good working conditions

Kirkvoe medical is a single practitioner practice so the specifics of this do not apply, however the overall aims of ensuring a good working environment do apply.

This policy has been informed by:

NHS Health Education North West Clinical Governance [Clinical Governance.pdf](#)
(nwpghmd.nhs.uk)

Chew medical practice <https://www.chewmedicalpractice.co.uk/website/L81072/files/ClinicalGovernancePolicy-Jan2016.pdf>