

Kiki Medical Centre Clinical Governance Policy and procedure - *sample only*

Definition

Clinical governance is a framework through which Kiki Medical Centre is accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.

The four core elements of clinical governance

- Patient engagement and participation
- Clinical effectiveness
- Quality improvement/patient safety/infection control
- An effective and engaged workforce.

Policy Statement

Kiki Medical Centre is committed to continuous quality improvement and safety and are guided by the Health Quality and Safety Commission Clinical Governance Framework (2017) to assure, improve and enhance quality of care.

The medical Centre will:

1. Take a leadership role in advocating for Māori health and the health of other marginalised populations
2. Collaborate with Māori and marginalised non-Māori representatives
3. Include health equity as its primary strategic objective.
4. Obtain patient feedback which will be regular and representative of the enrolled population. This will inform Kiki Medical Centre's improvement initiatives as well as the types of services delivered.
5. Team members will retain cultural safety and other core skills and be encouraged to continue professional development to improve their knowledge and skills. Clinicians are expected to maintain current awareness of best practice.

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6. Clinical effectiveness will be monitored in the areas of medicines reconciliation, auditing, policy development and KPI performance.
7. Best evidence-based care for the patient will be provided while making good use of available clinical resources. formularies, protocols and pathways where these have been developed for specific conditions.
8. Māori staff members and other staff members representing marginalised groups, will be supported to input into the clinical governance team and core activities.
9. The equity champion advocates for issues that address the root causes of health disparities
10. The Practice is committed to delivering medical care through a team of fully qualified and suitably experienced clinicians, supported by an adequate administrative and IT resource.

Procedure

1. The clinical governance team will include the following roles:
 - o Equity champion
 - o Clinical lead
 - o Quality improvement and patient safety lead
 - o Workforce lead
 - o Patient engagement lead
 - o The chair

NB: Role responsibilities are defined in the team members role descriptions in their HR files.

2. The team will meet 6 monthly or earlier if required.
3. Standing agenda will cover the core elements of clinical governance (including health, safety and wellness)
4. The team leader for each area (admin/nurses) will identify any items to be added to the clinical governance agenda.

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5. The chair is responsible for:
 - o Scheduling meetings
 - o Formulating the agenda in collaboration with clinical governance team members.
 - o Ensuring all documents is available for the meeting, for example, KPIs, patient feedback, patient incidents, policies to update.
 - o Minute taking and dissemination of information to the team as applicable.
 - o Updating any documentation as a s result of the meeting, for example, the quality plan /strategic plan/other documentation.
 - o Updating the actions register, with assigned responsibilities and timeframes

Resources

[HQSC: Health Equity](#)

[HQSC: Clinical Governance Guidance](#)

[The Ministry of Health’s He Korowai Oranga: Māori Health Strategy](#)

Related documented policies and procedures

- Clinical Governance Policy
- Infection Prevention and Control Policy
- Health and Safety Policy
- Patient collaboration and feedback Policy
- Improved health outcome strategies process
- Cultural safety policy
- Equity policy

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