Clinical Governance

Effective clinical governance in general practice requires a systematic approach to address the structures and processes that assure safety and quality of clinical care.Areas of clinical governance include education and training, assessment of clinical competence, clinical audit, clinical effectiveness, staff management, a culture of openness and collaboration, patient involvement, research and development, and the management of risks to patients, practitioners and the organisation.

4th Edition RACGP Standards

3.1.3 *Our practice has clear lines of accountability and responsibility for encouraging improvement in safety and quality of clinical care.*

Assessment methods

- Staff Interviews

Surveyors will interview the GPs, other clinical team members and administrative staff to determine if there are structures in place to support (multidisciplinary) team structures, clinical leadership identification, and communication systems among staff.

- Document review of written policy

Surveyors will look for evidence of standardised requirements and procedures for managing clinical governance in the Practice's policies and procedures manual.

- Document review of Practice administration records

Surveyors will look for evidence in the Practice's schedules and in staff diaries of regular programmed team practice meetings, review clinical governance areas.

Meeting the standards

Clinical governance is a practical approach to producing quality care. It requires long term trust and open communication between all members of the clinical and administration teams. This includes having a shared goal of promoting an organisational culture that is focused on safety and quality improvement.

It is standard practice to appoint clinical leaders who have designated areas of responsibility for safety and quality improvement systems (e.g. having leaders in cold chain management, computer security, and infection control areas). In smaller practices, one person may be appointed the overall clinical leader, while in larger practices, a number of staff may each have specific areas of clinical responsibility, such as sterilisation procedures only. One responsibility of the clinical leaders is to monitor systems, and to educate, mentor and update other members of the practice team. All staff should be aware of the appointed leader in each area. The result is a team-based approach to care in which all team members are aware of their role and responsibilities for improving the clinical outcomes of patient