Clinical governance domains



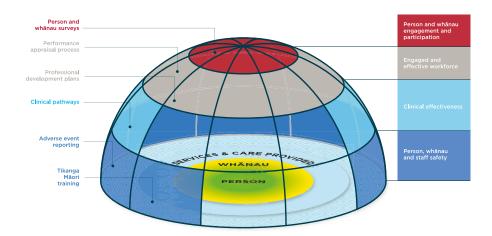
Purpose

These templates have been designed to help you answer the following questions:

- What do your existing systems and processes cover in terms of the clinical governance domains?
- How 'joined-up' is your existing coverage?

Suggestions for use of the templates

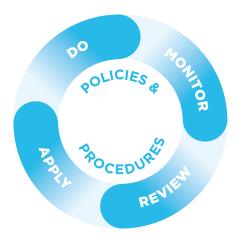
- Use the templates in a group activity, or as individuals
- Use in electronic copy or print out and use in hard-copy
- Record your organisation's existing systems and processes against the domain(s) that each addresses.
- Consider the distinct aspects of each domain, and record which aspect(s) each
 process addresses. This will allow you to identify the coverage of each domain.
- Consider the Do>Monitor>Review>Apply cycle, and record which phase of the cycle each process sits in. This will allow you to identify whether all phases of the cycle are covered
- Identify any links between the systems and processes. Do they inform or feed into another?



Notes about the contents of the templates

'Domain aspects: Each clinical governance domain contains two or three distinct aspects, as well as the Do>Monitor>Review>Apply cycle. For example, the *person*, whānau and staff safety domain contains person and whānau safety and staff safety. The distinct aspects might be addressed by different processes within a clinical governance framework. Each template identifies the distinct aspects of each domain so that you can record which aspect a particular process addresses.

Phase: Refers to the Do>Monitor>Review>Apply cycle.



Person, whānau and staff safety

There is an ongoing, organisation-wide commitment to person, whānau and staff safety. This involves:

- proactively and reactively identifying and managing risks (including clinical, cultural, psychological, other)
- · monitoring, reporting and evaluating performance of risk identification and management, and
- using this evaluation to inform improvements.

Existing Processes: policies, procedures, activities	¹Domain	aspects	² Phase		
	Person and whānau safety	Staff safety	O	Links to other processes	Standard reference

Clinical effectiveness

There is an ongoing, organisation-wide commitment to clinical effectiveness, in order that the 'right care' is provided to the 'right patient' at the 'right time' by the 'right clinician' in the 'right way'. This involves:

- using evidence-based practice (informed by person and whānau preference) to achieve the best possible care and outcomes for people
- monitoring, reporting on, and evaluating clinical and other health outcomes, and the use of evidence-based practice and guidelines, clinical pathways and models of care, and
- using these evaluations to inform improvements in service and care delivery.

Existing Processes: policies, procedures, activities	¹Domain	aspects	² Phase		Standard reference
	Practice	Outcomes	O	Links to other processes	

Engaged and effective workforce

All staff have the appropriate expertise and qualifications for their roles, and are supported to maintain the roles by the organisation. All staff are aware of their roles and responsibilities regarding clinical governance, and actively participate in associated activities; i.e., everyone plays their role in clinical governance.

Existing Processes: policies, procedures, activities	¹Domai	n aspects	² Phase		
	Staff expertise	Clinical governance	O	Links to other processes	Standard reference

Person and whānau engagement and participation

The organisation engages with people and whānau in culturally appropriate ways, and monitors, reports on and evaluates their experiences of care, and uses these evaluations to inform improvements. The organisation actively seeks opportunities to understand the views, needs and perspectives of tangata whenua and the community it serves. These insights are used to inform service design, delivery, and evaluation, and where possible, design and evaluation processes are conducted in such a way as to enable and empower people, whānau and tangata whenua participation.

Existing Processes: policies, procedures, activities		¹ Domain aspects		² Phase	Links to other processes	Standard reference
	Experience of care	Consultation	Collaboration	O		