



Clinical governance in aged care

Fact sheet 2:

Clinical governance and the Aged Care Quality Standards

This is part of a series of fact sheets about clinical governance in aged care that aim to help aged care providers meet their responsibilities for ensuring the quality and safety of clinical care.

This fact sheet is for members of governing bodies, executives and managers of residential, home care and flexible care services; as well as those Commonwealth Home Support Program services that deliver clinical care.¹

It describes the links between clinical governance and the Aged Care Quality Standards, and discusses the quality assessment and compliance monitoring processes as they relate to clinical governance and clinical quality and safety.



Why do you need to read this fact sheet?

All aged care providers must comply with the Aged Care Quality Standards. An approach to meeting the Quality Standards that is based on clinical governance will support the achievement of good clinical outcomes for your consumers.

This fact sheet will help you understand how clinical governance is fundamental to all the Quality Standards, and why taking an approach to meeting the Quality Standards that is based on clinical governance will bring benefits to your service and your consumers. It will also help you understand how the Aged Care Quality and Safety Commission will examine clinical governance in quality assessment and monitoring processes.

Clinical governance is an integrated set of leadership behaviours, policies, procedures, responsibilities, relationships, planning, monitoring and improvement mechanisms that are implemented to support safe, quality clinical care and good clinical outcomes for each consumer.

The **purpose** of clinical governance is to support the workforce and visiting practitioners in your service to provide safe, quality clinical care as part of an holistic approach to aged care that is based on the needs, goals and preferences of consumers.

A **clinical governance framework** describes the organisational approach for ensuring the quality and safety of clinical care for consumers.

Clinical care is health care that encompasses the prevention, treatment and management of illness or injury, as well as the maintenance of psychosocial, mental and physical wellbeing.

- 1 Clinical governance should be included in the broader corporate governance arrangements of providers of residential care, home care, short-term restorative care, transition care, as well as Multi-Purpose Service Program services and National Aboriginal and Torres Strait Islander Flexible Aged Care Program services. Commonwealth Home Support Program services that deliver clinical care should also include clinical governance in their corporate governance arrangements. Commonwealth Home Support Program services that do not deliver clinical care do not need to have a clinical governance framework.

Aged Care Quality Standards

The framework for safety and quality in aged care, including clinical care, is set by the Aged Care Quality Standards. The eight Quality Standards are:

1. Consumer dignity and choice
2. Ongoing assessment and planning with consumers
3. Personal care and clinical care
4. Services and supports for daily living
5. Organisation's service environment
6. Feedback and complaints
7. Human resources
8. Organisational governance.

Each of the Quality Standards is expressed in three ways:

- A statement of outcome for the consumer
- A statement of expectation for the organisation
- Organisational requirements to demonstrate that the standard has been met.

The Quality Standards apply differently to different kinds of aged care services, depending on the type of care and services they provide.

Guidance material has been prepared by the Aged Care Quality and Safety Commission to help aged care services implement and maintain compliance with the Quality Standards. The guidance material describes the intent of the Quality Standards and expectations of performance, and provides supporting information and examples of evidence of compliance. It is available from: agedcarequality.gov.au/providers/standards

Aged Care Quality Standards, clinical care and clinical governance

The Quality Standards specify outcomes for consumers that relate to their health and wellbeing, including the provision of safe, quality clinical care.

Standard 3 is concerned with the delivery of clinical care and identifies specific areas that aged care services need to address in the provision of clinical care. A clinical governance framework is required under Standard 8; this standard also requires organisational systems that are integral to effective clinical governance, including continuous improvement and risk management. However clinical governance is not only relevant for these standards; there are links between each of the eight Quality Standards and clinical care that should be reflected in your clinical governance arrangements (see table).

Links between the Aged Care Quality Standards, clinical care and clinical governance

Standard	Link to clinical care	Examples of elements that can be included in your clinical governance arrangements
1. Consumer dignity and choice	The needs, goals and preferences of consumers should guide clinical care	Consumer dignity and choice, including reference to the Charter of Aged Care Rights Informed consent, privacy, and understanding and acting on the preferences and choices of consumers
2. Ongoing assessment and planning with consumers	Assessment and planning should include identifying a consumer's needs for clinical care and planning for the delivery of that care	Assessment and planning of clinical care, including involvement of consumers and their representatives Documentation and communication of outcomes of assessment of planning Monitoring and regular review
3. Personal care and clinical care	This standard is focussed on the delivery of safe and effective clinical and personal care	Provision of care that is safe, best practice, tailored to the needs of consumers and optimises their health and wellbeing Strategies to address clinical care issues identified in Standard 3, including: <ul style="list-style-type: none"> • Management of high-impact and high-prevalence risks • End-of-life care • Deterioration in mental, cognitive or physical health • Minimising restraint • Minimising infection Links between clinical care and personal care

Standard	Link to clinical care	Examples of elements that can be included in your clinical governance arrangements
4. Services and supports for daily living	Services and supports for daily living can intersect with clinical care. For example, people with some clinical conditions (such as diabetes) can have specific nutritional needs that can be reflected in their meals	Links between clinical care and services and supports for daily living Enabling the workforce who provide services and support for daily living to escalate care when needed
5. Organisation's service environment	In residential aged care, the environment can have an impact on the quality and safety of clinical care. For example, effective cleaning is an important element of preventing infection	Links between the organisation's service environment and clinical care Environmental design that supports clinical quality and safety, including design to support minimising the use of restraint
6. Feedback and complaints	Learning from feedback and complaints is an important way of continuously improving clinical quality and safety	Learning from feedback and managing complaints Open disclosure
7. Human resources	The knowledge and skills of personal care staff, health practitioners who are employed or contracted, and visiting practitioners is an important factor in ensuring the quality and safety of clinical care	Roles and responsibilities of the workforce and visiting practitioners Enabling the workforce to provide clinical care that is in accordance with best-practice, policy, legislation and standards Assessment, monitoring and review of performance
8. Organisational governance	Ensuring that safe, quality care is consistently delivered requires a coordinated and cohesive approach across an aged care service	Consumer engagement Organisational culture Antimicrobial stewardship, minimising the use of restraint, and open disclosure Risk management Continuous improvement

Standard 8 Requirement (3)(e)

Standard 8 requires that, when clinical care is provided, services need to demonstrate use of a clinical governance framework that includes, but is not limited to antimicrobial stewardship, minimising the use of restraint and open disclosure.

A clinical governance framework is not just required to meet the Quality Standards; it is an essential part of the operations of an aged care service that delivers clinical care and describes the overall approach of an organisation for ensuring the quality and safety of clinical care for consumers. As such, it needs to include reference to the range of activities that are required to ensure clinical quality and safety across the areas of leadership and culture, consumer partnerships, organisational systems, monitoring and reporting, effective workforce and communication and relationships. These core areas are described in more detail in **Fact sheet 3: Core elements of clinical governance**.

Standard 8 Requirement (3)(e) sets out three specific issues that are important for ensuring clinical quality and safety that need to be reflected in your clinical governance framework. Information and links to relevant resources about these issues are included in the **Guidance and resources for providers to support the new Aged Care Quality Standards**. Key clinical governance considerations for each issue, and how they could be reflected in your clinical governance framework are as follows:

Antimicrobial stewardship

Antimicrobial stewardship relates to efforts to improve use of antimicrobial medicines, such as antibiotics, and is associated with better outcomes for consumers. One of the key clinical governance issues for antimicrobial stewardship relates to the knowledge, experience and understanding of the workforce² and visiting practitioners about when and how antimicrobials should be prescribed. Prescribers need to use best-practice evidence when prescribing antimicrobials, caring for people with multiple conditions, and in the management of infections. A key action in your clinical governance framework should be the implementation of an antimicrobial stewardship program to support the workforce. You could also note the responsibilities of visiting practitioners who prescribe antimicrobials to do so in accordance with best-practice guidelines.

More information about antimicrobial stewardship in aged care is available from: **amr.gov.au/what-you-can-do/aged-care/antibiotic-stewardship**

2 In this fact sheet the term 'workforce' applies to all personnel who are employed or contracted by an aged care service. This includes health practitioners, staff who provide personal care, and staff who have an indirect role in providing care to consumers.

Minimising the use of restraint

Restraint is any practice that interferes with a consumer's ability to make a decision or restricts their free movement. Restraint should not be used unless and until other alternatives have been fully explored. Issues regarding the use of restraint cut across many of the core elements of clinical governance, including the culture of the aged care service; partnerships with consumers and their representatives, particularly regarding informed consent; monitoring, recording and reporting the use of restraint; and the knowledge and skills of the workforce about use of medicines and alternatives to restraint. Guidance about the use of restraint in aged care has existed for some time, and there are now specific legislative requirements about restraint and the responsibilities of aged care services and health practitioners. If chemical (pharmacological) or physical restraint is used in your service, a key action in your clinical governance framework should be to follow guidance about restraint, and ensure that your practices regarding restraint meet the requirements of Commonwealth and relevant state and territory legislation. You could also note the responsibilities of managers, health practitioners (both employed or contracted, and visiting) and personal care staff. Reducing the use of restraint in your service should be one of your measures of success.

Resources about supporting a restraint-free environment are available from:

agedcare.health.gov.au/publications-articles/resources-learning-training/decision-making-tool-supporting-a-restraint-free-environment

Open disclosure

Open disclosure is the open discussion that occurs with the affected consumer when something goes wrong that has harmed, or has the potential to harm them. Open disclosure is a core part of clinical governance. It supports partnerships with consumers, good communication and an organisational culture that is based on openness, partnership, learning and continuous improvement. There are resources about open disclosure in aged care that you can use to develop your own policy or framework that should guide action when things go wrong in your service. Your clinical governance framework should refer to your open disclosure policy or framework. You could also note that the culture of your service promotes openness and learning, and the responsibilities of everyone in your service to support good communication with consumers, including when things go wrong.

Resources about open disclosure are available from: **agedcarequality.gov.au/resources/open-disclosure**

Quality assessment

The Quality Standards require your service to demonstrate that it has a clinical governance framework in place. The quality assessment and compliance monitoring processes of the Aged Care Quality and Safety Commission will consider the experiences of consumers, the delivery of clinical care, and use of a clinical governance framework to support clinical quality and safety.

When a site visit occurs, assessment of clinical quality and safety under the Quality Standards is primarily based on evidence collected from observations, interviews and documentation.

The Commission's quality assessment process starts with the experiences of consumers and their representatives, including their perceptions of whether they are receiving care that is safe and right for them, and whether their needs, goals and preferences are guiding their clinical care. When talking to, and observing the actions of personal care staff and health practitioners, quality assessors may focus on the clinical care provided to individual consumers, looking at aspects such as the identification of needs, management of risks, delivery of care and monitoring of outcomes. When talking to the person in charge of the service, quality assessors may explore how care is escalated when a consumer deteriorates, communication processes with any visiting practitioners, how the workforce is supported to provide safe, quality clinical care, and how quality and safety performance information is reported to the governing body³ and used for improvement.

A clinical governance framework is necessary to meet Standard 8 Requirement (3)(e). In assessing this requirement, the Commission will also examine how aged care services understand and manage their clinical risks, and whether they review their clinical governance arrangements, take steps to address any gaps, and have an ongoing focus on clinical quality and safety.

If Standard 8 Requirement (3)(e) is found to be not met, the resulting timetable for improvement provides an opportunity for a service to gain a good understanding of their key clinical risk areas, the clinical quality and safety needs of their consumers, to ensure these are addressed through their clinical governance arrangements, and to put in place a clinical governance framework that will lead to better clinical outcomes and improved wellbeing for their consumers.

Problems with the delivery of clinical care can occur. Where there are poor clinical experiences, practices or outcomes the Commission will examine the response of the aged care service. Aged care services that appear to be slow in responding to consumers when poor clinical care occurs, and those that cannot demonstrate how they have learned from such events, will be subject to greater scrutiny from the regulator.

The Commission will escalate its regulatory response if a finding of failure to meet one or more of the requirements of the Quality Standards has placed or may place a consumer at serious risk to their safety, health or wellbeing.

For further information on how providers are assessed against the Aged Care Quality Standards visit agedcarequality.gov.au/providers/assessment-processes

3 The governing body is the individual or group of people with overall responsibility and ultimate accountability for the organisation. This includes responsibility for the strategic and operational decisions that affect the quality and safety of care and services.



Actions you can take after reading this fact sheet

- Discuss with senior executives the approach to meeting the Aged Care Quality Standards in your service and ensure it is comprehensive and based on clinical governance
- Use self-assessment tools to understand the clinical governance arrangements in your service, whether there are any gaps and how they relate to the Quality Standards
- Review the clinical care needs of your consumers and your clinical quality and safety performance to understand the clinical risks faced by your service
- Ensure there is a clinical governance framework in place that meets the requirements of the Quality Standards and includes action in all core areas of clinical governance

Resources

Clinical governance fact sheets

- Fact sheet 1: Introduction to clinical governance
- Fact sheet 3: Core elements of clinical governance
- Fact sheet 4: Roles and responsibilities for clinical governance

Clinical governance toolkit

- Developing a clinical governance framework
- Organisational self-assessment tool 1: Aged care service and consumers
- Organisational self-assessment tool 2: Clinical governance framework
- Clinical governance framework guide

Other resources

- Guidance and resources for providers to support the new Aged Care Quality Standards: agedcarequality.gov.au/providers/standards
- Assessment processes for the Aged Care Quality Standards: agedcarequality.gov.au/providers/assessment-processes
- Guidance about antimicrobial stewardship in aged care: amr.gov.au/what-you-can-do/aged-care/antibiotic-stewardship
- Resources to support a restraint-free environment: agedcare.health.gov.au/publications-articles/resources-learning-training/decision-making-tool-supporting-a-restraint-free-environment
- Resources about open disclosure: agedcarequality.gov.au/resources/open-disclosure



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