RAAFA

Care and Clinical Governance

About RAAFA

RAAFA is one of WA's largest and most trusted not-for-profit retirement living and residential care providers and has been caring for people in WA since 1929.

On ANZAC Day in 1929 a group of Australian Flying Corps (AFC) veterans came together to maintain their comradeship and recreate the spirit of solidarity and values they experienced as members of the AFC.

The Australian Flying Corp Association evolved into the Royal Australian Air Force Association Inc, which recently changed its name to Air Force Association (Western Australian Division) Incorported, trading as RAAFA.

RAAFA is open to all and proud to offer WA communities a diverse range of services including:

- Residential Care
- In-home care and services (RAAFA Connect)
- Retirement Living
- Community and philanthropic activities (Clear Skies)
- Aviation Heritage Museum

Background

RAAFA's purpose, values and approach underpin everything we do and as an authentic and selfless organisation, we express our purpose simply without grand statement.

We believe that our positive culture ensures we make a lasting and meaningful difference to the lives we touch, and this is reflected in how we support Older Australians through our clinical governance framework to live the best life they can.

Our **Purpose**
Pursuing excellence in care and heritage

Our **Values**
Respect
Care
Honesty

Our **Vision**
Creating RAAFA communities open to all

THE **RAAFA** WAY

What is Clinical Governance

Clinical governance is the set of relationships and responsibilities that an organisation develops between its governing body, executive management team, and workforce to ensure high quality and safe clinical outcomes are achieved for people receiving health care services.

RAAFA's governing body, the Division Council, is accountable for clinical governance within the organisation.

Good clinical governance ensures that both the community and the organisation can be confident systems are in place to deliver safe and high-quality care and to promote the organisation to continuously improve services.

This framework is designed to ensure that everyone – from the frontline staff, senior managers, executive team, and board members, understand their responsibilities and accountability in the delivery of quality, safe and effective care.

Clinical governance at RAAFA forms part of a wider organisational governance framework.

Principles of Clinical Governance

Our clinical governance framework provides oversight and assurance to our Division Council and Older Australians receiving our services, that we are delivering safe and effective care through:

- Maintaining a structured and integrated approach to quality and safety that identifies and manages risk;

- Ensuring the organisation has robust ways to regularly monitor, measure, analyse and report on our performance, and that information collected is used to inform decision making;

- Being transparent and practising open disclosure with all relevant parties, when something goes wrong;

- Fostering an organisational culture that seeks to learn from mistakes and continuously strives to measure and benchmark performance to drive improvements;

- Providing a framework to support the organisation to meet legislative and compliance requirements;

- Having effective strategies and resources in place to build workforce capability, ensuring staff have the knowledge and skills to deliver quality and safe care;

- Maintaining a robust feedback system so that Older Australians, or their representative/s and staff, feel safe to speak up about quality and safety concerns; and

- Ensuring managers and leaders promote a culture where Older Australians and staff are engaged to participate and contribute to service design and outcomes.

Policy Statement

RAAFA strives to achieve excellence in care delivery and is committed to always delivering high quality and safe care to Older Australians receiving our services.

We understand that working in partnership with Older Australians will ensure a positive experience for the people in our care.

Our commitment to clinical safety and quality is based on a robust foundation of systems and processes that support organisational wide accountability for the delivery of high-quality safe care.

RAAFA's Care Model

To support older Australians who receive our services to live their best life, RAAFA has developed a model of care, we call the R.E.A.L Care Experience.

R·E·A·L care experience

R.E.A.L is a person-centred care model, where people's human rights are respected and care services are developed in partnership with each person, are inclusive and value a person's individual and diverse needs.

R.E.A.L stands for:

Respect – Getting to know the person; recognise their values and beliefs and recognise each person as an expert in determining their own health and care needs.

Enable – Do WITH rather than do for; and provide opportunity for each person to enhance their quality of life.

Active – Offer meaningful activities so that people can continue to engage in interests and activities that are important to them.

Lifestyle – Focus on what each person CAN or WANTS to do; making every day a meaningful day.

RAAFA is proud of our model of care and the recognition we receive from the community, for our compassionate, high quality, safe and inclusive care that focuses on the needs of individuals and their loved ones.
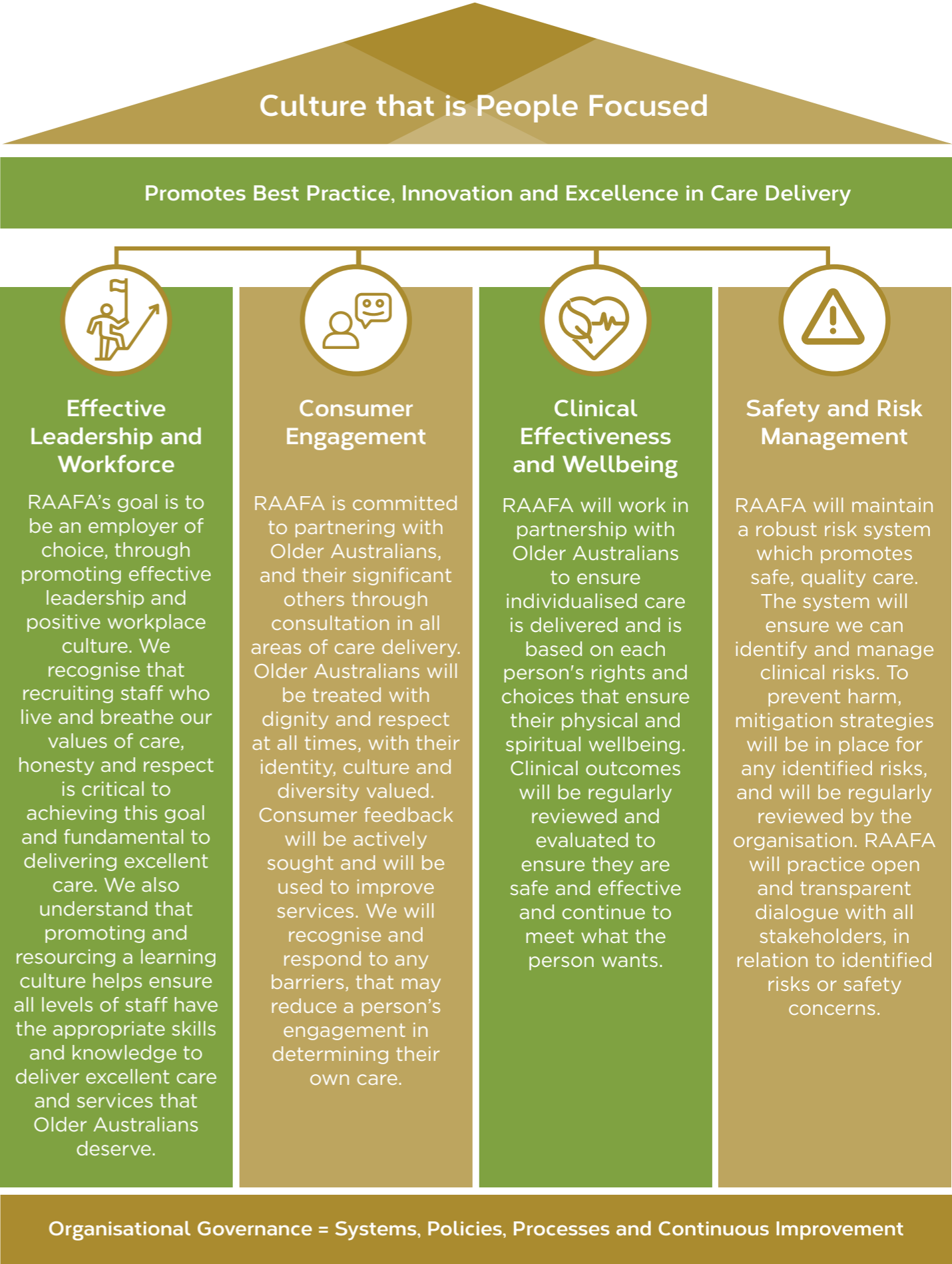
Framework

All the components of our framework contribute to the quality and safety of care regardless of whether care is delivered in the community or a residential care setting.

Our framework aligns to legislative and regulatory compliance obligations, including aged care accreditation.

Supporting the premise of ensuring the person is the centre of everything we do, RAAFA is committed to promoting evidence based best practice and innovation to drive excellence in care delivery. This is achieved through the integration of the four key components of the governance framework that foster a high performing organisation and include:

1. Effective Leadership and Workforce
2. Consumer Engagement
3. Clinical Effectiveness and Wellbeing
4. Safety and Risk Management

Culture that is People Focused

Promotes Best Practice, Innovation and Excellence in Care Delivery

Effective Leadership and Workforce

RAAFA's goal is to be an employer of choice, through promoting effective leadership and positive workplace culture. We recognise that recruiting staff who live and breathe our values of care, honesty and respect is critical to achieving this goal and fundamental to delivering excellent care. We also understand that promoting and resourcing a learning culture helps ensure all levels of staff have the appropriate skills and knowledge to deliver excellent care and services that Older Australians deserve.

Consumer Engagement

RAAFA is committed to partnering with Older Australians, and their significant others through consultation in all areas of care delivery. Older Australians will be treated with dignity and respect at all times, with their identity, culture and diversity valued. Consumer feedback will be actively sought and will be used to improve services. We will recognise and respond to any barriers, that may reduce a person's engagement in determining their own care.

Clinical Effectiveness and Wellbeing

RAAFA will work in partnership with Older Australians to ensure individualised care is delivered and is based on each person's rights and choices that ensure their physical and spiritual wellbeing. Clinical outcomes will be regularly reviewed and evaluated to ensure they are safe and effective and continue to meet what the person wants.

Safety and Risk Management

RAAFA will maintain a robust risk system which promotes safe, quality care. The system will ensure we can identify and manage clinical risks. To prevent harm, mitigation strategies will be in place for any identified risks, and will be regularly reviewed by the organisation. RAAFA will practice open and transparent dialogue with all stakeholders, in relation to identified risks or safety concerns.

Organisational Governance = Systems, Policies, Processes and Continuous Improvement

1. Effective Leadership and Workforce

Effective leadership is fostered at all levels of the organisation through values driven decision making, robust systems, processes and feedback channels, which enable the effective delivery of care and services to Older Australians.

All levels of staff have the appropriate skills and knowledge to undertake their role. Delivering effective clinical practice ensures the right care is provided to the right person who feels informed and involved in their care.

The workforce is recruited, trained, equipped and supported to enable the delivery and management of safe, quality, consumer centred care and services. There is an ongoing process of monitoring performance, offering training and provision of development opportunities to ensure optimum clinical practice and service is delivered.

Irrespective of their position or role, all staff are expected to lead by example and to identify opportunities for improvement across the service. An effective workforce is one that embraces the RAAFA purpose, values and approach and delivers exceptional experiences for Older Australians.

Systems in place to ensure:

- Recruitment, on boarding and credentialing, scope of practice and performance review are fair, equitable and free from discrimination.

- To promote a culture of continuous learning, safe and effective practice is supported by professional development and supervision and includes: leadership and management training for key personnel; mandatory and role specific training; clinical portfolios; position descriptions; duty statements; appraisals; and contracts.

- External service providers such as General Practitioners and Allied Health staff must be clear in their roles and responsibilities and achieve compliance requirements relevant to their roles.

- The electronic health record system contains information that is integrated, accurate, accessible, and confidential. The system promotes effective communication and safe quality and continuity of care. Each Older Australian is assured that confidentiality is a vital component in the development of a trusting relationship between the person and the professional.

2. Consumer Engagement

RAAFA believes that engaging with Older Australians and their families is fundamental to the delivery of quality services and seeks to provide meaningful opportunities that allows people to directly participate in care and treatment planning; decision making; service planning; service development; and, where appropriate, service delivery.

Systems in place to ensure:

- Older Australians and their families are consulted and involved in the decision making for their care. They are invited to contribute to systems and processes to improve RAAFA services through collaboration, experiential feedback, surveys, audits meetings and training/ information sessions.

- The Charter of Aged Care Rights and open disclosure approach underpin the delivery of care and services.

- RAAFA supports Older Australians to live the best life they can and recognises that they have the right to "do the things they want to do" and support "the dignity of risk". RAAFA has a decision-making framework regarding consumer's risk that aims to balance the advantages and disadvantages (inclusive of medical, psychological wellbeing, social, ethical, spiritual and cultural factors). RAAFA assesses and documents any person's request to undertake activities of their choice that may pose a risk and communicates their findings to the person. In the event the person is unable to provide informed consent, RAAFA will refer to the person's representative, as per the Government of Western Australia's Hierarchy of Treatment Decision Making Framework.

3. Clinical Effectiveness and Wellbeing

RAAFA undertakes initial and ongoing assessment and planning for care and services in partnership with each person or their representative with a focus on optimising health and wellbeing in accordance with the person's needs, goals and preferences.

Staff explore peoples' spiritual and emotional needs in the assessment and planning process, and where possible, support Older Australians to access resources that promote spiritual comfort and development such as audio-visual resources, churches, other faith based meeting places, groups and other contacts.

The process for developing and updating clinical information, advice and processes and clinical decision mechanisms is documented and auditable. In addition to regular review, the outcome of incident investigation and feedback triggers review of clinical decision guidelines and information.

Accountability for clinical governance and clinical effectiveness at all levels of RAAFA is fundamental to creating a quality RAAFA experience for every person.

All staff are required to understand and perform their role in providing safe, quality care and will be supported through effective policies, committee structures and systems and processes that empower staff in key decision making.

Systems in place to ensure:

- Care and services are regularly audited for effectiveness or when incidents impact on the needs, goals, preferences or safety of the person.

- Policy, procedures, clinical pathways and protocols support best practice and safe, quality care in compliance with legislation and quality standards and are reviewed regularly. Staff are regularly trained in our policies and procedures and expected to follow them at all times.

- Clinical and Quality indicator reporting and benchmarking (both internally and across Australia).

- Accreditation via Australian Aged Care Quality and Safety Commission.

4. Safety and Risk Management

General safety and work practices are designed to ensure the safety of all. Effective risk management is integral to the way decisions are made and is part of RAAFA's underlying culture.

Our risk management system ensures that the safety of Older Australians remains our highest priority and that effective systems are in place to minimise and mitigate clinical risks. These include managing high-impact or high prevalence risks associated with the care of Older Australians; identifying and responding to abuse and neglect of Older Australians; supporting Older Australians to live the best life they can.

Systems in place to ensure:

- RAAFA routinely collects, collates and analyses information provided by each service as part of its performance, monitoring through audit and quality assurance processes.
- Based on best practice, RAAFA maintains a specialised clinical equipment product list to ensure the safety of our staff and wellbeing of our residents. There is a planned preventative maintenance schedule in place to ensure maintenance of all RAAFA equipment, properties and living environments is to a high standard.

- As per legislation, RAAFA participates in the National Quarterly Mandatory Clinical Indicator system, submitting key clinical and quality data to the relevant Australian Government service. This information is benchmarked nationally against other aged care providers.
- Information received through audit, feedback and evaluations is used to identify areas of concern/risk, inform practice and initiate change where needed.
- RAAFA has a robust approach to infection prevention and control which is regularly monitored.
- Staff are trained to apply a risk-based approach to decision making. Risk management is standardised, integrated into all processes and is applied across the whole of our business. RAAFA supports the rights of Older Australians to undertake high risk activities and will assess and document any resident/client's request to undertake activities of their choice that may pose a risk and communicate their findings to the resident/client.

- RAAFA clinical risk management system encourages staff input and supports the reporting of incidents and near misses and engages managers and staff in a proactive approach to creating a safe environment for residents/clients and staff.
- RAAFA complies with legislative requirements in relation to Serious Incident reporting to the Government and ensures that clinicians and staff are trained in reporting all incidents in line with legislation.
- A register is maintained to record and monitor significant clinical events e.g. Coronial enquiries; Serious Incident reporting; and external complaints. Evaluation of this data at monthly quality meetings is used to identify, minimise and control identified clinical risks. The system is managed by the Quality and Clinical Governance Manager.
- Clinical incidents are monitored to identify trends which are used to inform service improvements across the organisation. Clinical incidents are reported to the Care and Clinical Governance Committee on a quarterly basis.

- RAAFA welcomes and values feedback about it's care and services and that feeback is handled in a competent, respectful and timely manner. RAAFA recognises that all Older Australians, members of staff, and members of the public have the right to make a complaint regarding the care and services provided and to have their complaint investigated objectively and without discrimination. RAAFA uses the Aged Care Open Disclosure Framework to support it's management of complaints ensuring an open disclosure approach is taken.
- RAAFA reports quarterly (or immediately if required) to our Division Council on clinical incidents, Serious Incident reporting, National Quarterly Mandatory Clinical Indicator bench marking, feedback including complaints, high prevalence, high risk activities, and Coronial enquiries, identifying any trends or areas of concerns and actions taken to reduce or mitigate risk.

Roles and Accountability

Older Australians (and their representatives)	• Partner in delivery of care • Partner in decision making • Provide feedback • Participate in service design or improvement opportunities • Ensure individual needs, goals and preferences are documented • Understand user rights and responsibilities
Division Council	• Set a vision, strategic direction and organisational culture • Understand and respond to key risks and controls • Delegate accountability to Executive • Stay engaged, visible and accessible • Ensure robust governance structures and systems are effective • Monitor and evaluate effectiveness of services through regular reporting
Leadership Team (Executive, General Managers and Quality and Clinical Governance Team)	• Provide visible leadership and a commitment to safe, high quality care and a continuous improvement culture • Establish strategic and policy frameworks • Oversee onsite management performance (including quality and safety of care) • Promote a safe and open culture that empowers staff to speak up about quality and safety issues • Seek qualitative and quantitative data to understand the quality of service delivery • Ensure appropriate resources are directed to services • Regularly report to board and sub-committees on organisational performance
Facility and Clinical Care Managers	• Provide a safe environment for Older Australians and staff • Ensure staff and volunteers understand their roles and responsibilities • Ensure care delivery is consistent with legislation, policy and procedures • Lead and coordinate the workforce • Proactively identify and manage risks and incidents • Promote a culture of continuous improvement and drive quality activities • Support staff to understand quality indicators • Ensure onsite clinical governance requirements are in place and operating effectively
Staff and visiting practitioners	• Complete onboarding, orientation and mandatory training • Follow policy, procedures and guidelines • Maintain skills and knowledge to provide care excellence • Maintain appropriate credentials • Speak up and raise concerns related to risk and safety • Contribute to the review of services and continuous improvement activities

Committees

The Division Council has overall accountability for clinical governance at RAAFA. The obligations of the Division Council include:

- Ensure an appropriate clinical governance committee structure is in place;
- Clinical governance committee members are appropriately qualified, skilled and knowledgeable;
- Roles and responsibilities within the clinical governance committee are clearly defined and understood; and
- Ensure systems are in place to support quality and safety outcomes.

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Quality Care          Division Council          Consumer
Advisory Body    <-->                    <-->   Advisory Body

                 Care Safety and
                 People Committee

                 Care and Clinical            Medication
                 Governance          <-->     Advisory
                 Committee                    Committee

Care Leaders    Site Quality    Clinical Care    Infection
Meeting         Meeting         Managers         Prevention and
                                Meeting          Control Meeting
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Care Safety and People Committee	• Is a sub-committee of the Division Council • Chaired by a member of the Division Council and reports to the wider Division Council • Oversees the development and implementation of clinical and care governance across RAAFA to ensure legislative, regulatory and operational responsibilities are met • Establishes a strong safety culture through an effective clinical governance system, satisfying itself that this system operates effectively, and ensuring that there is an ongoing focus on quality improvement • Is accountable for, and required to respond to feedback and input from RAAFA's Consumer Advisory Bodies
Executive Leadership (ELT) Team	• Provides strategic leadership in the implementation of the framework ensuring the establishment and maintenance of effective clinical and care governance • Develops the strategic quality and safety goals and plans for RAAFA • Ensures performance monitoring systems are in place and improvements actioned • Ensures management structures and processes are in place to enable good clinical and care governance and support for staff in providing high quality care
Care and Clinical Governance Committee	• Reports to the Care Safety and People Committee • The committee will monitor and report on the effectiveness of the clinical and care governance framework, monitor compliance with legislative and regulatory obligations, industry standards and adoption of best practice • Service Delivery representatives will provide evidence of ongoing analysis in relation to incident data
Service Level / Department Leadership Committees	• Oversees the establishment and maintenance of effective clinical and care governance across RAAFA • Establishes and monitors clinical and care policies and supporting documentation • Identifies clinical risks and escalate concerns to ELT. Ensures that the systems that support the delivery of care and support are well designed and perform well, ensuring the concepts of the framework are communicated to all employees • Ensures staff maintain relevant credentials • Monitors quality indicators relevant to the service • Undertakes regular review to ensure the framework meets the needs of our clients • Responds to opportunities for improvement identified through the implementation of this framework
Quality and Clinical Governance Team	• Assists services in identifying clinical risks and share lessons learnt from clinical and care reviews and incident investigations and escalate concerns to ELT and maintains risk registers • Monitors performance against the framework through audit and survey results, examination of monthly incident reports, review of client compliments and complaints and identification of risk controls • Monitors progress of improvements and supports services to action • Supports a strong safety culture through an ongoing focus on quality improvement

References

• Aged Care Quality and Safety Commission – Clinical Governance in Aged Care, 2019

• Aged Care Quality and Safety Commission – Developing and Implementing a Clinical Governance Framework

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• Agency for Healthcare Research and Quality, 2017

• Australian Aged Care Quality Agency. Guidance and Resources for Providers to support the new Aged Care Quality Standards. Australian Government. Canberra, 2018

• Australian Commission on Safety and Quality in Health Care. National Model Clinical Governance Framework. ACSQHC. Sydney, 2017

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