Making Clinical Governance Work

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Corporate Governance

The definition of corporate governance most widely used is "the system by which companies are directed and controlled" (Cadbury Committee, 1992).

Corporate governance is a term that refers broadly to the rules, processes, or laws by which businesses are operated, regulated, and controlled.

A well-defined and enforced corporate governance provides a structure that, at least in theory, works for the benefit of everyone concerned by ensuring that the enterprise adheres to accepted ethical standards and best practices as well as to formal laws.

Definition from Whatis.com
Five Golden Rules of best corporate governance practice

- **Ethics**: a clearly ethical basis to the business
- **Align Business Goals**: appropriate goals, arrived at through the creation of a suitable stakeholder decision making model
- **Strategic management**: an effective strategy process which incorporates stakeholder value
- **Organisation**: an organisation suitably structured to effect good corporate governance
- **Reporting**: reporting systems structured to provide transparency and accountability

*From www.applied-corporate-governance.com*
Public healthcare is not about making money!
Definition of clinical governance

- regarded as a means for healthcare organization to achieve quality improvement
Why we need clinical governance?

- Changing healthcare policies
- Rising patients’ expectations and involvement
- Trends towards greater access to healthcare information
- Aging population leads to increasing dependency
- Advances in technology
- The society becomes increasing litigatory
- Lack of public confidence in healthcare
key components of clinical governance

- **Performance management**
  - Complaints
  - Critical incidents
  - Staff support, sensitive handing
  - Trusting relationships

- **Risk management**
  - Policies and procedures
  - Systems

- **Quality Improvement programme**
  - Continuing professional development
  - Audit
  - Evidence based practice
  - NICE and Healthcare Commission

- **Accountability**
  - Chief executive accountable
  - Senior clinician responsible for ensuring systems are in place to monitor effectiveness
  - Regular report to boards

- **Information**
  - Clinical information systems
  - Outcomes
  - Comparative data
  - Benchmarking
the route to clinical excellence

- Clinical risk management
- Clinical audit
- Continuing practice and professional development
- Research and development

Evidence-based practice

Clinical excellence

Continuing quality improvements
Knock down the barriers to implementation

Clinical governance

1. Culture
2. Management
3. Leadership
4. Communication
5. Education and training
6. Knowledge
7. Support
Core-value of surgery
Don’t turn a blind eye to errors
Reasons behind...........

- ? Manpower crisis
- ? Long working hour
- ? Lack of promotion prospect
- ? The HA is trying to employ overseas doctors without licensing examination
- ? It is somebody’s fault......
Accountability for our behavior
Safe practice would reduce the risk of unnecessary harm to an acceptable minimum.
Surgical audit
Surgical Outcomes Monitoring & Improvement Program (SOMIP) Report

Volume Three
July 2010 – June 2011

Co-ordinating Committee in Surgery
Clinical Effectiveness & Technology Management Department
Quality & Safety Division
Hawthorne effects

FUTURE OF WORK TIMELINE

1932

Workers in Western Electric’s Hawthorne Works plant in Cicero, Ill., perform better when lighting and other working conditions are tinkered with—regardless of what the change is. Researchers realize that the workers are simply responding positively to attention from managers. This becomes known as the “Hawthorne Effect.”
Post-procedure Complication Monitoring Programme
2010 vs. 2011 Overall Complication Distribution by Magnitudes
Post-procedure Complication Monitoring Programme

2010 vs. 2011 Overall Complication count and Complication rate
Post-procedure Complication Monitoring Programme

2010 vs. 2011 Top 10 Complications
Introducing clinical governance into clinical departments

- Department
- Clinical Team
- Individual
“Better is a masterpiece, a series of stories set inside the four walls of a hospital that end up telling us something unforgettable about the world outside.”

—MALCOLM GLADWELL, author of BLINK

“……. such vigilance over the details of their own performance ……. offered the only chance to do better.”
Culture of patient-centered care
- Aims and objectives
- Goals
- Actions required
- Time-scales
- Responsible individual(s)
Hand hygiene station for Year 3 Surgery and Surgery Final OSCE

It is something we wish to push starting from the most junior rank of colleagues – medical students. If students can deliver, there is no reason we surgeons cannot.
Surgeons are role models of the healthcare team. The whole team will go down the drain if senior surgeons are not behaving.
Zero Tolerance Program for Hospital-Acquired Methicillin-Resistant Staphylococcus aureus (HA-MRSA) in Burns Centre of Prince of Wales Hospital

MRSA infections are potentially fatal to patients and community at large. The Burns Centre of PWH has implemented the Zero Tolerance Program (ZTP) for Hospital Infection Control (HIC) which has successfully reduced the HA-MRSA rate. A zero HA-MRSA rate was achieved in 2003 and sustained for 15 months. Despite relapse in 2010, zero HA-MRSA rate was regained in February 2011. There is good evidence that the Program has significantly reduced the occurrence of HA-MRSA in the Burns Centre, hastened recovery of patients, shortened length of stay and helped contain treatment costs.

Infection Control Care Bundle (6 steps)
1. Active surveillance of MRSA with admission screening and weekly wound swabs monitoring
2. Designated primary nurse and equipment
3. Pathogen-reduction measures e.g. stringent wound care, bathing procedures and strict contact precautions
4. Prompt intervention by multidisciplinary team
   - Promote team spirit by engaging everyone to join hand hygiene campaigns
   - Engage “Hand Hygiene Ambassadors” to remind colleagues to maintain hand hygiene
   - Provide easily accessible hand hygiene equipment to facilitate compliance
5. Conduct immediate investigations with remedial measures when appropriate once MRSA is detected in patients (including community-acquired and colonized cases)
6. Unit-specific infection control training e.g. Organize Cleansing–Stainless Steel-Commission Program, where cleansing procedures are videotaped and shown to new cleaning staff
7. Engagement of Patients and Relatives: Educate patients and relatives on how to prevent wound contamination and remind carers of proper hand hygiene

Key Success Factors
Sustainable actions by multidisciplinary team members
Patient participation and engagement
Practical protocols on HA-MRSA surveillance, prevention and intervention
Tailor made staff training
On-going awareness
System in place for regular review of the results, incidents and tools

We have the ability to achieve!
MRSA cases reported by NHS Trusts

Surgical Safety : Safe Surgery @ PWH

- Sense of belonging of users in PWH theatre
- Culture of safe surgery, ownership and team-spirit
- To remind one and others to stay vigilant in OT
- To alert new-comers the idea and meanings of the checklist “123 Surgical Safety 123”
Whether an individual would take ownership of patient care
We need “buy-in” from everybody!

- What clinical governance structures are?
- How they function?
- What benefits would they bring to patients and staff?
On patient ownership......

- Jesus said: “A good shepherd lays down his life for the sheep. A hired man, who is not a shepherd and whose sheep are not his own, sees a wolf coming and leaves the sheep and runs away, and the wolf catches and scatters them. This is because he works for pay and has no concerns for the sheep.”

John 10:11
Just Culture is about:

- Creating an open, fair, and just culture
- Creating a learning culture
- Designing safe systems
- Managing behavioral choices
be prepared for the unexpected...

An event is a surprise and has a major impact.

After the fact, the event is rationalized by hindsight.
natural disasters
natural and human disasters combined
no one would have expected that...
We need drills ..... & resource for the drills
Recipe for making clinical governance work

• Leadership

• Support and Resource

• Culture
Who would benefit?

Patients

Healthcare Professionals