



Riverview
Lutheran Rest Home Inc



Clinical Governance Framework

Riverview Lutheran Rest Home Inc
Excellence in Clinical Care

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Part 1: Introduction

Clinical governance is described by the Aged Care Quality and Safety Commission (2019) as "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"

Our Commitment:

The Board and Management of Riverview Lutheran Rest Home Inc is committed to delivering safe and quality clinical care and providing the highest possible levels of resident/consumer health, safety and wellbeing.

The purpose of this framework is to inform and guide good clinical governance by setting out the key structures, systems and processes that enable whole of organisation accountability for the delivery of safe and quality clinical care that is based on the needs, goals and preferences of the person receiving the care.

For the purpose of this framework, excellent quality clinical care is defined as:

Safe: where avoidable harm during care delivery is eliminated.

Effective: appropriate and integrated care is delivered in the right way at the right time, with the right outcomes for each resident/consumer.

Person-centred: care that is tailored to each individuals' needs and delivered in accordance with the resident/consumers' needs, goals and preferences, to optimise health and well-being.

Best practice: care delivered using relevant national best practice guidance where available

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.

Policy Statement

Riverview Lutheran Rest Home Inc is committed to delivering safe and quality clinical care and providing the highest possible levels of resident/consumer health, safety and wellbeing.

We understand that everyone, including our Board, Chief Executive Officer, Clinical Care Management, our workforce, health practitioners and residents/consumers and their representatives, all have important roles to play in ensuring the delivery of safe, quality clinical care.

Our Board, Quality Care Advisory Body, Operational Risk Management Committee, and Operational Clinical Governance Committee all play important roles in the development, implementation, and monitoring of clinical governance systems and processes and their effectiveness at Riverview.

Our Clinical Governance Framework underpins the clinical governance, and safety and quality systems that maintain and improve the reliability, safety and quality of clinical care, and improve outcomes for residents/consumers at Riverview. The framework is supported by Clinical Policies and procedures that guide the delivery of clinical quality and safety, are easily accessible to staff, and are regularly reviewed in line with best practice standards

We pride ourselves on delivering safe quality clinical care, that incorporates Antimicrobial Stewardship, whilst minimising the use of restrictive practice, and being open and transparent if planned resident/consumer care is not achieved.

In order to support the delivery of safe, quality clinical care, we at Riverview are committed to implementing the six core elements that enable a strong clinical governance framework to our delivery of care. Guided by resident/consumer needs, goals and preferences, and directed towards optimising their wellbeing and quality of life. Operating with an understand of Leadership and Culture, Consumer partnerships, Organisational systems, Monitoring and reporting, Effective workforce, and Communication and relationships, will facilitate the implementation of quality, safe clinical care through continuous improvement activities to ensure ongoing care improvements.

Mission, Vision and Values

Our Mission

To provide care, services and accommodation to enrich the lives of older people and strengthen the Riverland community and other communities in which we operate.

Our Vision

To be a vibrant, innovative leader, and the best partner to support people to live their best life.

Our Values

Our Christian values are embedded in everything we do, and reflected in the everyday life of Riverview:

Care: for our residents, staff and families, caring is at the heart of our existence

Respect: we recognise each individual's worth, dignity and choices

Kindness: is the genuine warmth behind our relationships

Compassion: we are sympathetic to and accepting of the circumstances and viewpoints of others

Quality: choosing the best people to deliver the best outcomes, and always challenging ourselves to improve

Love: we show love for one another as God has loved us

Patience: we calmly accept that change and improvement take time and effort

Integrity: our guiding principles of trust, honesty, morals, fairness and ethical behaviour

Part 2: Roles and Responsibilities

Everyone Working for us, or with us

The purpose of this section is to set out the roles, responsibilities and accountabilities for clinical care, of everyone working in our organisation, or with us to provide care to our residents/consumers.

Everyone working to provide care services including Board Members, Chief Executive Officer, Clinical Care Management, our workforce; including team leaders, personal care staff and other staff who have an indirect role in providing care or services, and health practitioners, are all accountable for their contribution to clinical quality and safety.

It is therefore important that everyone is aware of their roles and responsibilities, and are both supported, and held accountable for meeting these expectations. They must also demonstrate commitment to partnering with residents/consumers in the ongoing assessment, planning and delivery of person-centred care that is individualised, and optimises health and wellbeing, with regular evaluation of performance undertaken to identify areas for improvement.



Riverview Board

The intention of the Strengthened Aged Care Quality Standards, Aged Care Act 2024 and the Aged Care Rules rules 2025 is to hold governing bodies responsible for their organisation and the delivery of safe and quality care and services that meet the Strengthened Aged Care Quality Standards. The Riverview Lutheran Rest Home Inc Board is accountable for clinical quality and safety and the clinical governance arrangements of our organisation. Key responsibilities of the board are to:

- Set a clear vision, strategic direction and strong organisational culture that drives consistently safe, quality clinical care
- Lead an organisational culture that is open and transparent by communicating the service's values and being engaged, visible and accessible to the workforce
- Ensure clinical governance expertise within the board
- Ensure robust clinical governance arrangements are implemented to effectively support and empower the workforce and visiting practitioners to provide safe, quality clinical care
- Understand key clinical risks for the organisation and ensure that controls and mitigation strategies are in place to address them and are reviewed regularly to ensure they remain effective
- Delegate responsibility to senior executive and relevant committees for the implementation, monitoring and evaluation of the service's clinical governance arrangements and the provision of safe and quality clinical care

- Monitor and evaluate all aspects of clinical care through regular and rigorous reviews of clinical quality and safety performance data

Chief Executive Officer

The Chief Executive officer has delegated responsibility for the overall operational management of the organisation. This includes responsibilities to:

- Provide visible leadership and commitment in delivering and supporting the strategic direction and culture set by the board regarding the quality and safety of clinical care
- Determine the best approach to planning, implementing, evaluating and improving clinical quality and safety
- Prioritise and focus on the key clinical quality and safety issues and risk areas for Riverview
- Ensure adequate support, education, information and opportunities are provided to the workforce to enable them to fulfil their roles in providing safe and quality clinical care
- Ensure adequate resources are directed towards ensuring consistently safe, quality care
- Ensure appropriate Organisational Clinical Policies are in place
- Present analysis and discussion of clinical quality and safety data to the board including feedback from residents/consumers, accreditation reports, quality indicators, incidents, compliments and complaints
- Monitor implementation progress of clinical governance activities and other action to improve clinical quality and safety, and take further action as needed
- Appoint appropriately qualified and experienced Clinical Care Management for day to day oversight of clinical quality and safety

Clinical Care Management

The Clinical Care Manager has day to day oversight of clinical quality and safety at Riverview. This includes responsibilities to:

- Operationalise the Clinical Governance Framework and lead action for clinical quality and safety
- Provide a safe and respectful environment for residents/consumers, the workforce and visiting practitioners, that supports and encourages positive partnerships, and encourages residents/consumers and the workforce to identify and raise concerns about clinical quality and safety
- Understand the challenges and complexity of providing consistently safe, quality clinical care and support the workforce and visiting practitioners through a culture of respect, safety, transparency, accountability, teamwork and collaboration
- Actively identify, monitor and manage areas of clinical risk for Riverview and individual residents/consumers and lead appropriate escalation and response where there are concerns about the clinical outcomes or wellbeing of residents/consumers
- Ensure clinical care is provided in accordance with evidence-based best practice, organisational policy, legislation and standards
- Ensure the workforce is clear about its roles and responsibilities; is supported with resources, standards, systems, knowledge and skills development; and is held to account for the quality and safety of the clinical care provided, supervised or directed
- Coordinate and report on internal audit processes, quality indicators, incidents, feedback, compliments and complaints, and quality improvement activities

- Encourage reporting of incidents and clinical safety issues using risk and incident management systems and respond positively to incidents to support continuous improvement
- Provide data about clinical quality and safety performance to the workforce
- Ensure appropriate organisational Clinical procedures are in place, are best practice and reviewed as required

The Workforce

The Workforce comprises all personnel who are employed, contracted, or engaged by Riverview Lutheran Rest Home Inc, including health practitioners, staff who provide personal care, and staff who have an indirect role in providing care to residents/consumers. All members of the workforce are responsible for working within the provisions of the clinical governance framework to support clinical quality and safety. This includes responsibilities to:

- Prioritise the provision of safe, quality care and services to residents/consumers every time
- Provide care and services in accordance with evidence-based policies, procedures, protocols and standards
- Engage in ongoing learning, development and performance reviews to develop and maintain skills and competence to be able to perform roles and responsibilities for clinical quality and safety
- Speak up and raise concerns, including reporting incidents and risks relating to clinical quality and safety
- Work to improve the quality and safety of clinical care, participate in improvement activities and contribute to a culture of respect, safety, transparency, accountability, teamwork and collaboration

Health Practitioners

All health practitioners, whether they are employed, contracted, engaged or visiting, are accountable for delivering clinical care that meets relevant professional standards. Health practitioners have responsibilities to:

- Deliver clinical care within the provisions of the clinical governance framework
- Maintain their professional registration, accreditation or membership
- Work within their defined scope of practice
- Practise in accordance with relevant legislation, professional standards and codes of conduct
- Be aware of the clinical governance framework of the aged care service and be willing to practise within it
- Provide clinical care that aligns with evidence-based best practice and agreed and documented clinical guidelines, pathways and standards
- Work with the aged care provider to ensure that the service environment supports them to provide clinical care in accordance with relevant professional standards

Residents/Consumers and their representatives

Clinical governance is based on partnerships, and residents/consumers and their representatives also have an important role in supporting the quality and safety of clinical care, particularly as they are increasingly shaping choices about the aged care services they receive.

Roles for residents/consumers and their representatives in clinical governance and clinical quality and safety can include:

- Communicating their preferences about clinical care
- Providing information for the assessment and planning of clinical care
- Asking questions about their clinical care
- Making or sharing decisions about clinical care
- Communicating changes in their condition to care providers
- Providing feedback about their experiences of care delivered by us
- Participating in co-design processes with us

Committees to support good Clinical Governance

Quality Care Advisory Body

The Quality Care Advisory Body plays a very important role in ensuring that Riverview Lutheran Rest Home Inc 's care and services are safe and of a high quality.

The Quality Care Advisory Body is to support and inform the governing body, help with problem-solving and suggest improvements. The Quality Care Advisory Body provides advice to our governing body on matters relating to the quality of care our organisation delivers.

The Board considers the reports or feedback from the Quality Care Advisory body when making decisions in relation to the quality of aged care provided and advises the quality care advisory body in writing how they have considered the report or feedback.

Operational Risk Management Committee

The Operational Risk Management Committee is an operational management committee that reviews clinical and organisational incident audits and reports on a monthly basis, ensuring appropriate action has been taken to mitigate risk, whilst providing feedback to the operational Clinical Governance Committee.

Reviews the organisations clinical risk register, makes recommendations as deemed appropriate to the board. Submits reports on clinical and organisational incidents to the board.

Ensures organisational policy and procedure is appropriate to mitigate clinical and other organisational risks.

Operational Clinical Governance Committee

The Operational Clinical Governance Committee consists of Riverview's care management team, who meet monthly to analyse the organisations clinical activities by analysing clinical incidents and data, and reviewing clinical trends to identify and address systemic/possible systemic issues, to identify and implement continuous improvements, and review and evaluate their effectiveness to ensure that excellent quality clinical care is provided in line with Riverview policy and procedure.

Submits monthly clinical incident reports to the Operational Risk Management Committee.

Riverview Board

Responsibility for the delivery of safe and quality clinical care and services. Request, receive and review information

Quality Care Advisory Body

Supports, informs and provides recommendations to board on Clinical matters relating to the quality of care

Operational Risk Management Committee

Review reports action taken evaluation, policy, procedure, report to board

Operational Clinical Governance Committee

Review, analyse, identify, action, evaluate, report

Clinical Care Management, Workforce, Health Practitioners

Delivery and Documentation of Clinical Care, follow policy & procedure

Hierarchy of the flow of Clinical Care Delivery, Documentation, Review and Reporting to support clinical quality and safety

Part 3: Clinical Care, Quality and Safety

Safe Quality Clinical Care

Riverview Lutheran Rest Home Inc is committed to providing best practice care that is safe, and right for each consumer/resident, and that meets their needs, goals and preferences. It is our goal that:

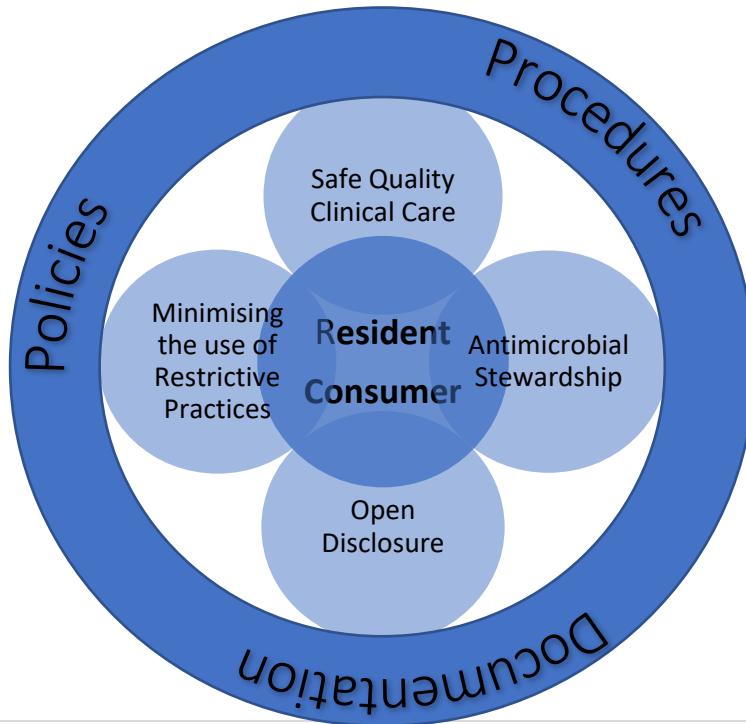
“All residents/consumers who need clinical care receive care that is safe, coordinated, effective and personal. This care is guided by their needs, goals and preferences and is directed towards optimising their wellbeing and quality of life”

At Riverview we provide a range a clinical care services for residents/consumers and continuously aim to improve our care services by encouraging and seeking feedback from residents/consumers, educating our staff on clinical best practice, and actively identifying and managing potential high-impact or high- prevalence risks associated with the care of residents/consumers.

We work with our residents/consumers and/or their representatives to tailor care to their needs, goals and preferences, and regularly review and make changes to ensure delivery of the best possible care. We provide support and information to assist with informed decision making.

Our Clinical Governance Framework underpins the clinical governance and safety and quality systems that maintain and improve the reliability, safety and quality of clinical care, and improve outcomes for residents/consumers at Riverview. The framework is supported by Clinical policies and procedures that guide the delivery of clinical quality and safety, are easily accessible to staff, and are regularly reviewed in line with best practice standards.

In addition to providing clinical services that address each individuals' increasingly complex health care needs, we also acknowledge that systems to support Antimicrobial Stewardship, Minimising the use of restrictive practice and Open Disclosure, are vitally important in ensuring that Riverview provides excellence in clinical quality and safety.



Antimicrobial Stewardship

Riverview Lutheran Rest Home Inc acknowledges that antibiotic resistance is posing a significant threat to worldwide public health, and inappropriate use of antibiotics has increased the development of antibiotic-resistant bacteria, not only in aged care facilities and healthcare services, but also in the community.

At Riverview Lutheran Rest Home Inc we are committed to playing our part in contributing to the broader world-wide Antimicrobial Stewardship effort, and improving outcomes for our residents/consumers, by educating our staff on Antimicrobial Stewardship and infection control; ensuring systems are in place for clinical care staff to take samples for microbiology testing in a timely manner where symptoms exist, before starting antibiotic therapy; preventing, managing and controlling infections; and by awaiting pathological outcomes to ensure that a resident/consumer with a bacterial infection receives the right antibiotic to treat their condition, the right dose, by the right route, at the right time and for the right duration based on accurate assessment and timely review.

We also share information with residents/consumers and their representatives as to why it is important to wait for pathological outcomes prior to prescribing and administering antibiotics to treat infection.

Minimising the use of Restrictive Practices

Under the Aged Care Act 2024, restrictive practice in relation to a resident/consumer is any intervention limiting an aged care resident/consumer's rights or freedom of movement.

At Riverview, we believe all residents/consumers are entitled to respect and protection of their basic rights and freedoms regardless of where they live, and therefore have adopted a person centred restrictive practice free approach environment where the use of any restrictive practice is used only as a last resort to prevent harm, after consideration of the likely impact of its use, after exhausting all best practice alternative strategies and documenting, used only to the extent necessary and in proportion to the risk of harm, used in the least restrictive form, and for the shortest time necessary to prevent harm, with the informed consent of the care recipient or their restrictive practice substitute decision maker, and is compliant with any relevant provisions of the care and services plan and Behaviour Support Plan, and is monitored and reviewed.

Our staff support each other, and our organisation supports our staff to deliver the best possible safe care services, that are right for each person. We work proactively together with residents/consumers and their representatives to prevent situations that may lead to a perceived need for restrictive practice. Residents/Consumers and their representatives are provided with restrictive practice free options to ensure their safety. Staff are provided with information on restrictive practice free alternative strategies and options to ensure resident/consumer and staff safety. Our Care Management team regularly review, monitor, and work with Residents/Consumers and GPs in striving to reduce the use of chemical, environmental, mechanical, seclusion and physical restrictive practices in our service.

Riverview utilises the Australian Government best practice guidelines to support a restrictive practice free environment in Aged Care to ensure our practices regarding restrictive practice comply with the Strengthened Aged Care Quality Standards, are not inconsistent with the Statement of Rights and meet the requirements of Commonwealth and State legislation.

Open Disclosure

“Open Disclosure is the open discussion that an aged Care Provider has with consumers when something goes wrong that has harmed or had the potential to cause harm to a consumer.” Aged Care Quality and Safety Commission, Open disclosure framework and guidance 2019

Riverview Lutheran Rest Home Inc is committed to creating a positive culture of trusted and productive communication between residents/consumers, representatives and the workforce, in which open disclosure is standard practice.

If an event occurs that has caused harm or had the potential to cause harm to a resident/consumer, we will communicate openly in an honest and timely manner, with residents/consumers, and/or their representative and ensure that communication with, and support for all affected residents/consumers and staff, occurs in a supportive and timely manner.

We will offer an apology, a factual explanation of what happened, an opportunity for the resident/consumer to share their experience, a discussion of the potential consequences; and an explanation of the steps being taken to manage the incident and to prevent recurrence.

Open disclosure is underpinned by recognising each resident/consumer's right to be treated with:

- Dignity and respect,
- Privacy and confidentiality,
- Transparency,

and each resident/consumer's right to know that Riverview has; reflected and debriefed the incident, developed an action plan reflecting continuous improvement opportunities; identified the unplanned outcomes, understood why – through active enquiry – understood any systemic causes, and taken positive steps to prevent such an event from happening again.

To assist with Open Disclosure, Riverview Lutheran Rest Home Inc has an Open Disclosure Policy and follows the Australian Government, Aged Care Quality and Safety Commission Open Disclosure Framework and Guidance, and Better Practice Guide to Complaint Handling in Aged Care Services.

Part 4: How do we achieve this: Core elements of effective Clinical Governance

In order to support the delivery of safe, coordinated, effective and personal clinical care, that is guided by resident/consumer needs, goals and preferences, and is directed towards optimising their wellbeing and quality of life, the following 6 core elements of enabling strong clinical governance have been identified by the Australian Aged Care Quality & Safety Commission:

- *Leadership and Culture*
- *Consumer partnerships*
- *Organisational systems*
- *Monitoring and reporting*
- *Effective workforce*
- *Communication and relationships*

To ensure the provision of safe, quality clinical care, everyone needs to understand what quality and safety of clinical care under these 6 core elements looks like at Riverview, how it is implemented and how we will measure its success. Our care should always be personal and provided with kindness and compassion, it should respond to the holistic needs of each resident/consumer and aim to improve their wellbeing and quality of life. Our care should be smoothly coordinated when care is provided by us, visiting practitioners and allied health professionals. We always strive for our care to be effective by providing the right care to meet each residents/consumers desired clinical outcomes, whilst keeping them safe from preventable harm.



Enablers of Strong Clinical Governance

Leadership and Culture

What this looks like at Riverview

Our leaders, including Board and Management, actively pursue a culture that aims to ensure safe, quality, person centred clinical care for each of our residents/consumers'. Our leaders continuously strive to build a culture that supports and promotes consistent clinical quality and safety and integrates clinical governance into corporate governance.

Our Board acknowledge and accept accountability for the clinical quality and safety performance of our organisation and sets the strategic direction for clinical quality and safety, understands the risks associated with the quality and safety of clinical care, monitors performance and drives improvement.

Our Board in partnership with our Management team, and health practitioners, lead action on clinical governance to promote and improve clinical quality and safety at Riverview. Our leaders foster a culture of openness, partnership, learning and continuous improvement.

We believe a strong organisational culture that supports our workforce to deliver their best is essential in ensuring the delivery of consistently safe, quality clinical care. Our leaders set the tone for the way we operate and are crucial in both establishing and maintaining an organisational culture that is committed to clinical quality and safety.

Implementation

- Clear vision and goal for the clinical quality and safety we want our residents/consumers to experience that is communicated by our board and management in our strategic plan, policies and procedures and is acted on by our workforce
- Ongoing focus on creating and maintaining an organisational culture that supports and encourages the delivery of consistently safe, quality clinical care, based on openness, partnerships, learning and continuous improvement
- Management provide regular reports on clinical quality and safety performance to the board
- Our board has the skills to effectively monitor and improve clinical quality and safety, with at least one board member with clinical care experience
- Continuous improvement plan is in place to provide safe, quality clinical care for all consumers, and to improve care when performance monitoring identifies gaps; and that the plan is implemented and regularly reported on
- Board, management and other leaders regularly review clinical quality and safety performance and take action for improvement
- Roles, responsibilities and accountabilities for clinical quality and safety are clearly defined

Measures of success

- Strategic priorities and values are shared with Staff and residents/consumers
- The board and executive lead in line with the strategic goals and priorities, in delivering safe effective, and person-centred care
- Policies and procedures align with best practice guidelines, are easily accessible by staff and are followed
- Staff report that a 'just' culture exists – in a just culture after an incident the question is asked 'what went wrong?' rather than 'who caused the problem?' it is the opposite of blame
- Management conduct regular walkarounds and speak with residents/consumers and staff about the effectiveness and person centredness of the care being delivered and experienced
- Committee and reporting structures effectively monitoring and improving clinical safety and quality
- Evidence of regular reports on clinical quality and safety performance to the board
- Board includes actively contributing appropriate clinical skills
- Continuous improvement activities improve the quality of care and services at Riverview
- Staff are aware of and act in a manner consistent with Job and Person Specifications and duties lists that clearly define responsibilities and accountabilities

Consumer Partnerships

What this looks like at Riverview

The needs, goals and preferences of residents/consumers guide the delivery of clinical care at Riverview. We have a culture of partnership, where our residents/consumers are encouraged and supported to express their wishes and make decisions about their clinical care.

We have processes to ensure informed consent occurs, and that supported and substitute decision making occur when needed. The way we provide clinical care encompasses an understanding of the concept of dignity of risk, and the need to balance this with the Duty of Care that we have for each individual.

We ensure that the needs of residents/consumers who do not have family or other representatives are recognised and acted on. We have a co-design approach where residents/consumers are involved in planning, decision making and reviewing of clinical quality and safety here at Riverview.

We recognise that effective partnerships with our residents/consumers, their families, carers and other representatives are essential for ensuring clinical quality and safety and achieving good clinical outcomes and wellbeing, therefore our Clinical Governance, is built on a foundation of partnerships, where we encourage and support joint planning and decision making.

Consumer/resident feedback provides an important perspective about the way our service operates and is viewed as positive, critical and a valuable resource that is used to improve our service for everyone.

Implementation

- Our organisational culture, policies and procedures should ensure the individual needs, goals and preferences of residents/consumers are identified, communicated, recorded and used to guide clinical care
- Our organisational culture supports clear, open and respectful communication and partnership between residents/consumers and our staff
- Information is provided to residents/consumers and/or representatives to inform decision making and support safe, quality clinical care whilst respecting dignity and informed risk
- Processes ensure informed consent occurs
- We invite and support residents/consumers to provide feedback on their experiences of clinical care, review this information and use it for improvement
- We will provide residents/consumers with the opportunity and support to fully participate in organisational processes for planning, monitoring and improving the delivery of clinical care at Riverview.
- We promote and respect the rights and choices of residents/consumers
- Complaints are welcome and responded to compassionately competently and in a timely fashion, with the arising issue analysed reported and used to improve care services

Measures of success

- Identifiable changes made in response to complaints or feedback from residents/consumers
- Positive resident/consumer feedback, particularly on questions relating to information and involvement
- Our residents/consumers say they have been listened to, and their care is planned around what is important to them
- Our staff can describe how they work collaboratively with our residents/consumers
- Shared understanding of established resident/consumer needs, goals and preferences
- The clinical needs, goals and preferences of residents/consumers are recorded in their care plans and regularly updated
- Residents/consumers and their representatives report positively about their experience of involvement in their own clinical care and in-service improvements
- Residents feel empowered and supported to make informed decisions that support dignity and risk.
- Aged Care workers understand and respect the Statement of Rights

Organisational Systems

What this looks like at Riverview

Riverview policies, procedures and systems actively manage, guide and improve clinical quality and safety in line with best practice that is embedded in our broader organisational governance arrangements. Risks are identified and managed proactively. Incidents are recorded and acted on.

We have policies and procedures that cover clinical risk areas such as infection control, medication management, and restrictive practices; clinical practice areas such as assessment, diagnosis, planning, treatment and review; and processes that support the effective delivery and continuity of safe clinical care. Our care plans developed in partnership with residents/consumers are documented, as is the care delivered, as we deliver it.

Our policies and procedures are based on evidence and best practice, are reviewed and updated as needed, and ensure that we meet our legislative and compliance requirements. Our workforce is aware of, have access to and understand our policies, procedures and systems and use them to provide safe and quality clinical care.

Our structured and systematic approach to understanding and addressing the risks associated with clinical quality and safety aids in embedding clinical governance at Riverview and in supporting our workforce to consistently deliver safe, quality clinical care.

Ensuring the quality and safety of clinical care, and good outcomes for residents/consumers requires a multifocal approach based on best practice that encompasses actions across a range of areas, and by a range of people both in our service and working with us.

Our policies, procedures and systems are the mechanisms that set out requirements and expectations for action for the many processes that contribute to clinical quality and safety and address the risks that exist for our residents/consumers and our organisation.

Implementation

- We take a planned, proactive, systematic and ongoing evidence-based approach to clinical quality and safety for our residents/consumers and our workforce
- We understand the risks associated with the provision of clinical care for our residents/consumers and our organisation,
- Policies and procedures explain the organisations systems, so that outcomes of assessment and planning are fully documented and are available where care and services are delivered, which are promoted and readily available so that our workforce understand and use them to provide safe, quality care
- There are organisational systems that proactively identify and manage risks to clinical quality and safety
- An incident management system is in place with the capacity to record, manage and review resident clinical incidents and workforce

incidents that contribute to continuous improvement

Measures of success

- Key clinical risk areas are known and addressed in policies and procedures
- Our workforce is aware of key policies and procedures for clinical quality and safety and operate within them
- Audits identify that staff are following policy and procedure and documenting clinical care as provided
- Our workforce say policies and procedures are easy to locate and understand
- Terms of reference, minutes, reports, audits, and continuous improvements show that systems and process are in place and working from care and service level through to governing body level
- Best practice guides are accessible to staff

Monitoring and Reporting

What this looks like at Riverview

Providing consistently safe, quality care requires ongoing review of clinical quality and safety performance. Our ongoing monitoring and review processes help us to; understand the outcomes and experiences of our residents/consumers, gauge the effectiveness of our approaches for delivering clinical care, identify areas of risk, and inform continuous improvement.

At Riverview the quality and safety of our clinical care is monitored using a range of data sources. Information is collected from residents/consumers and their representatives about their experiences. Documentation of the care we deliver supports the delivery of clinical care and enables internal audits and review of clinical care processes and clinical outcomes.

Information from complaints and incidents is consolidated and reviewed to inform continuous improvement. Processes are in place to ensure rapid monitoring and review of clinical quality and safety for high-risk issues. The review of clinical quality and safety performance is a key part of continuous improvement at Riverview.

Riverview's clinical quality and safety information is collated and analysed for improvements by our clinical management team, reported to executive management for review, reviewed and discussed by our Quality Care Advisory Body and regularly reported to the Board, enabling the Board to fulfill its functions. Information about clinical safety performance is also provided to our workforce to assist in driving the delivery of the best possible safe clinical care.

Our service participates in the National Aged Care Mandatory Quality Indicator Program and uses this information for improvement. We also identify and act on other opportunities for improvement, and where possible compare our performance with our peers.

Implementation

- Our clinical management team identify the measures we use to assess clinical quality and safety performance, encompassing the experience of residents/consumers, clinical outcomes and processes of clinical practice.
- Our Board requests the information required to make informed decisions and ensure our organisation meets its commitment to safe, quality care and services.
- Our electronic resident/consumer care management system, and point of care documentation allows us to undertake ongoing collection and collation of clinical safety data
- We have a program of regular and routine reporting of clinical quality and safety information to the Board, Management, our staff and our residents/consumers
- Our electronic real time incident management systems enable a rapid review of clinical quality and safety concerns of high-risk issues
- We regularly review clinical quality and safety information to identify trends, emerging issues or risks, areas of excellence, opportunities for improvement, and the impact of actions

Measures of success

- Clinical quality and safety are measured and monitored, and reviewed
- Trending analysis of data is conducted
- Operational and Board Reports about clinical quality and safety demonstrate the flow of clinical care information from the floor to the board.
- Information about clinical quality and safety performance is used by Management and the Board to make decisions about improvements
- Regular monitoring and reporting of clinical issues and areas of high risk clinical
- National Aged Care Mandatory Quality Indicator Program benchmarking
- Review of clinical data by the Quality Care Advisory Body with opportunity to provide direct recommendation and feedback to the board

Effective Workforce

What this looks like at Riverview

At Riverview we take a strategic approach to the planning, recruitment, training and ongoing development of our workforce that supports the provision of safe, quality clinical care.

All members of the Riverview workforce and visiting practitioners understand their roles and responsibilities for clinical quality and safety and work within an environment that supports them to provide safe and quality clinical care.

Our workforce uses best practice evidence to support clinical quality and safety. The provision of clinical care is typically part of a holistic approach to the delivery of all care to optimise the wellbeing of residents/consumers.

Some components of clinical care may be delegated to personal care staff; if this occurs, they are trained and supervised by health practitioners, or work under their direction.

All visiting practitioners are appropriately qualified and provide care that meets professional and other standards. Our workforce is actively involved in planning, implementing and monitoring improvements to clinical care.

Mandatory reporting requirements are complied with if there are concerns about the professional conduct of the workforce or a health practitioner.

Implementation

- Planning, allocation and management of our workforce provides the appropriate personnel and skills to deliver high-quality safe care and to meet changing resident/consumer needs and preferences
- We clearly communicate our expectations of roles and responsibilities, and standards of performance to our staff
- We ensure that employed and visiting health practitioners have appropriate qualifications and experience to provide safe quality clinical care
- We check the registration status of our health professionals using the Australian Health Practitioner Regulation Agency Registration of Practitioners
- Our workforce is supported to provide safe and quality clinical care by basing care processes on best practice evidence when it is available
- We have a performance management system that includes the provision of clinical care where relevant
- We work with visiting health practitioners to develop agreements and protocols about the provision of clinical care in our service, including communication processes
- We have systems in place to ensure clinical quality and safety and support appropriate supervision or direction by health practitioners if personal care staff provide clinical care under delegation

Measures of success

- Training and development are a budget priority and funds budgeted are utilised
- Staff orientation and induction includes clear communication on quality and safety issues and performance expectations regarding the delivery of safe, quality clinical care
- Our workforce can describe the professional development and training they undertake
- Staff are confident in performing their clinical roles
- Training and development records show our staff are appropriately skilled
- Staff feel supported with appropriate training to undertake their clinical roles
- Resources, planning and staff allocation provides for effective staffing that meets resident/consumer clinical care needs
- Our residents/consumers say that our staff know what they are doing
- Staff performance is regularly assessed, monitored and reviewed

Communication and Relationships

What this looks like at Riverview

At Riverview we have good open communication about clinical quality and safety with both our residents/consumers and our staff.

If an adverse event occurs, Open Disclosure processes are used to communicate with consumers and their representatives. Our workforce is encouraged and supported to raise concerns about quality and safety.

Information about the clinical needs, goals and preferences of residents/consumers is recorded, updated regularly, and easily accessible by our workforce and visiting practitioners.

There are policies and procedures that support effective communication with visiting practitioners, including standing orders for individual residents/consumers, and protocols for contact after hours and in emergency situations.

We are aware of and have effective relationships with external health providers, including local hospitals, South Australian Ambulance Service, our local pharmacy, local general practitioners, dentists, medical and nursing specialists and allied health professionals.

There are reliable processes for communicating about the clinical situation of residents/consumers when they are transferred to other services or healthcare providers, including when there are emerging risks and changing care needs.

We recognise that poor communication is one of the main contributors to poor clinical outcomes and harm for residents/consumers, and that many people in our organisation have a role in ensuring that residents/consumers receive safe, quality clinical care. There are risks to residents/consumers if information about clinical needs and plans is not easily available and communicated when required, therefore good open communication and effective relationships are of high importance here at Riverview.

Implementation

- We have good record keeping systems where information can be shared and is accessible by those who require it to support clinical quality and safety
- We work with visiting health practitioners to support clinical quality and safety when they provide care, including in areas such as documentation and communication with our workforce, residents/consumers and their representatives
- At Riverview there are open disclosure processes in place that are used to communicate with residents/consumers and their representatives if things go wrong.
- We use structured processes and forms to communicate when residents/consumers are transferred to or from external healthcare providers
- We have good established relationships with external health practitioners and healthcare organisations from which residents/consumers regularly receive care

Measures of success

- Information about a resident/consumer's clinical needs, goals and preferences and care is easily available to the workforce and is used to guide care delivery
- Visiting Health Practitioners have access to the information required to support clinical quality and safety
- Communication between visiting providers, the resident/consumer and our workforce are open and transparent
- Consumers/Residents say they were well informed if something went wrong

Part 5: Clinical Governance Framework Review

The Riverview Lutheran Rest Home Inc Clinical Governance Framework should be reviewed at least every three years, or more frequently as required in response to changes in legislation, guidance from the Aged Care Quality & Safety Commission, our services or resident/consumer profile, or as risks change or emerge.

Review should also occur when there are changes in the leadership of Riverview, or other significant staffing arrangement changes.

Suggested considerations when undertaking Clinical Governance Framework Reviews:

- How the Clinical Governance Framework has been introduced, explained and promoted within the organisation
- Whether staff are aware of the Clinical Governance Framework and operate within it when providing clinical care
- Whether the actions specified in the framework are undertaken
- Whether the actions in the Clinical Governance Framework are fit for purpose or need to be reviewed
- Changes in clinical practice, clinical quality and safety, clinical outcomes, and achievement of goals for clinical quality and safety
- External changes that may have an impact on the provision of safe, quality clinical care at Riverview

Part 6: Related Documents and References

The following related documents and references have been used in the development of this framework:

Australian Commission on Safety and Quality in Health Care. Antimicrobial Stewardship Clinical Care Standard. Sydney: ACSQHC, 2014. Updated 2020

<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/antimicrobial-stewardship-clinical-care-standard-2020>

Australian Government Department of Health, Disability and Ageing, Restrictive practices in aged care – a last resort

<https://www.health.gov.au/topics/aged-care/providing-aged-care-services/training-and-guidance/restrictive-practices-in-aged-care-a-last-resort?language=en> (January 2025)

Australian Government Aged Care Quality and Safety Commission. Open disclosure Framework and Guidance 2019

https://www.agedcarequality.gov.au/sites/default/files/media/ACQSC_Open_Disclosure.pdf

Australian Government, Aged Care Quality and Safety Commission. Better Practice Guide to Complaints Handling in Aged Care Services

https://www.agedcarequality.gov.au/sites/default/files/media/better_practice_guide_to_complaints_handling_in_aged_care_services_v4.pdf

Australian Government, Aged Care Quality and Safety Commission.

[Fact sheet 1 Introduction to clinical governance.pdf](https://www.agedcarequality.gov.au/sites/default/files/media/Fact_sheet_1_Introduction_to_clinical_governance.pdf) (937.97 KB)

[Fact sheet 3 Core elements of clinical governance.pdf](https://www.agedcarequality.gov.au/sites/default/files/media/Fact_sheet_3_Core_elements_of_clinical_governance.pdf) (716.42 KB)

[Fact sheet 4 Roles and responsibilities for clinical governance.pdf](https://www.agedcarequality.gov.au/sites/default/files/media/Fact_sheet_4_Roles_and_responsibilities_for_clinical_governance.pdf) (694.51 KB)

[Developing_and_implementing_a_clinical_governance_framework.pdf](https://www.agedcarequality.gov.au/sites/default/files/media/Developing_and_implementing_a_clinical_governance_framework.pdf) (425.49 KB)

[Clinical_governance_framework_guide.pdf](https://www.agedcarequality.gov.au/sites/default/files/media/Clinical_governance_framework_guide.pdf) (488.69 KB)

<https://www.agedcarequality.gov.au/resources/clinical-governance>

Calvary Clinical Governance Framework. Performance and Accountability May 2017

Victoria State Government, Delivering high-quality healthcare, Victorian clinical governance framework, June 2017

Australian Government, Strengthened Aged Care Quality Standards, (applicable from 1 November 2025)

<https://www.agedcarequality.gov.au/providers/quality-standards/strengthened-aged-care-quality-standards>

Riverview Lutheran Rest Home Inc. Strategic Plan 2025-2028

https://riverviewresthome.com.au/application/files/2717/3750/2488/Riverview_Rest_Home_Strategic_Plan_2025-2028_1.pdf

