National Safety and Quality Health Service Standards

Roles and responsibilities of governing bodies

Introduction

This fact sheet is designed to assist members of a governing body to fulfil their role in meeting the National Safety and Quality Health Service Standards (NSQHS).

The NSQHS Standards were developed by the Australian Commission on Safety and Quality in Health Care (the Commission) in collaboration with the Australian Government, states and territories, the private sector, clinical experts, patients and carers. The primary aims of the NSQHS Standards are to protect the public from harm and to improve the quality of health care. They provide a quality assurance mechanism that tests whether relevant systems are in place to ensure that expected standards of safety and quality are met.

What is the role of the governing body?

A governing body is an individual or group that has ultimate responsibility for strategic and operational decisions affecting safety and quality in a health service organisation. It may be a board, chief executive officer, organisation owner, partnership or other highest level of governance.

In carrying out its responsibilities, the governing body needs to comply with the legislative requirements and the legal framework of the state or territory in which it operates.

The governing body is responsible for oversight of the organisation and strategic decision-making for safety and quality. It delegates implementation to individuals and groups within the organisation.

The governing body oversees the actions the organisation implements.

The NSQHS Standards require governing bodies to:

- Provide leadership on safety and quality for the organisation
- Ensure that adequate resources, expertise and effort are allocated to safety and quality by the organisation and that evidence is available to support this
- Endorse high level plans, policies and structures, as well as safety and quality improvement activities within the organisation
- Monitor organisational safety and quality performance and the performance of the governing body itself and direct that action be taken when required
- Support its members to understand, actively engage in, and meet the requirements of their governance roles.

ACTIONS 1.1 AND 1.2

The first two actions in the Clinical Governance Standard are explicitly the responsibility of the governing body. These actions set the strategic direction and architecture for the organisation's safety and quality systems. Other actions across the NSQHS Standards also include responsibilities for the governing body, but appear as actions for health service organisations or clinicians.
Clinical Governance Standard

The Clinical Governance Standard requires organisations to implement a clinical governance framework. The intent of this framework is to ensure patients and consumers receive safe and high-quality health care. While the context in which each health service organisation operates might vary, each organisation needs to implement strategies for clinical governance to meet the requirements set out in the NSQHS Standards.

Role of a governing body

Provide leadership to:

■ Set the organisation’s safety and quality culture
■ Set the organisation’s expectations for partnering with consumers
■ Define the vision, mission and values of the organisation, with emphasis on person-centred care principles and practices
■ Develop and review the organisation’s safety and quality strategic plans
■ Take ultimate responsibility for the safety and quality performance of the health service organisation
■ Participate in developing the organisation’s definition of safe and high-quality care
■ Foster an organisational culture that values open, just, fair and accountable behaviours, and that encourages the workforce to proactively manage risk and maximise clinical safety
■ Champion the values, principles, and safety and quality priorities set by the governing body to drive improvements in cultural competency and cultural awareness
■ Participate in, and champion, cultural training and awareness and cultural competency
■ Champion the introduction of flexible visiting arrangements
■ Champion partnership with Aboriginal and Torres Strait Islander communities to identify strategies to increase trust in the health service organisation and create a welcoming environment.

Ensure that:

■ There is time on the governing bodies’ meeting agenda for safety and quality and for analysis and response to reports on the organisation’s progress against the requirements of the NSQHS Standards
■ Roles and responsibilities of the governing body, management, clinicians and the workforce are clear, defined and communicated
■ The organisation’s processes are being used to meet the requirements of the NSQHS Standards in regard to organisational policies, risk, data collection and reporting, and compliance with credentialing, legal, regulatory, statutory and jurisdictional requirements
■ There is timely access to information for monitoring performance and decision-making
■ A strategic plan, monitoring systems and resource allocation to meet the clinical needs of at-risk consumer groups are in place
■ The organisation’s education, training and orientation processes adequately cover the needs of the organisation and specifically the requirements in the NSQHS Standards
■ The education and training system includes training for clinicians in partnering with consumers
■ Systems to collect and report data, respond to trends, incidents, feedback, complaints and open disclosure processes, and implement improvements are effective, accessible, and consistent with best-practice principles
■ Sufficient resources are provided for complaint or incident investigation, audit activities, education and training, and other requirements necessary for successful implementation of the NSQHS Standards and other quality improvement activities.
Endorse:

- A clinical governance framework that describes the roles and responsibilities for managing safety and quality, and delegates authority to manage safety and quality
- The organisation's Aboriginal and Torres Strait Islander health plan or similar
- The system for policy development and review
- The quality improvement framework for the organisation
- The approach to measuring and monitoring safety and quality and reporting framework for safety and quality metrics
- Capital and equipment maintenance and replacement plans to ensure patient safety and quality matters are addressed.

Monitor:

- Reports that accurately reflect the organisation’s progress against the requirements of the Clinical Governance Standard
- Reports on compliance with organisational policy, legal, regulatory, statutory and jurisdictional requirements
- The governing body's performance and strategic planning, and participation in these processes.

Support its membership by ensuring that:

- New members of the governing body have the skills to perform their role, and understand the importance of safety and quality and partnering with consumers
- Directors of the governing body have a high-level understanding and current knowledge of clinical governance
- Members of the governing body are orientated to their roles and assessed to address any identified training needs, and maintains their skills in assessing and evaluating safety and quality.
Partnering with Consumers

Standard

The intention of this standard is to create an organisation in which there are mutually beneficial outcomes by having:

- Consumers as partners in planning, design, delivery, measurement and evaluation of systems and services
- Patients as partners in their own care, to the extent that they choose.

Role of a governing body

Provide leadership to:

- Champion consumer partnerships and shared decision making with consumers, carers, families and substitute decision-makers in the planning and delivery of care
- Champion the importance of clear communication and health literacy across the organisation's operations
- Champion a culture of consumer engagement through strategic statements, and stated vision, mission and values
- Champion the development of effective partnerships with Aboriginal and Torres Strait Islander communities
- Champion the involvement of consumers in the training and education of the workforce, including members of the governing body.

Ensure that:

- The Australian Charter of Healthcare Rights or consistent charter is adopted
- There are processes to support clinicians and patients to be partners in care that meet best-practice and legal requirements
- There are mechanisms supporting the workforce to communicate effectively with consumers from diverse backgrounds
- There are processes to consult with patients, consumers and consumer groups when the organisation develops information for patients
- There are processes to promote community and consumer partnerships

- Resources are allocated to support, orientate and train consumers
- Resources and time are allocated to developing sustainable partnerships with Aboriginal and Torres Strait Islander communities
- Partnerships are involved in prioritising improvement strategies for Aboriginal and Torres Strait Islander patients.

Endorse:

- Quality improvement and clinical practice initiatives that support improved partnerships with consumers.

Monitor:

- Reports that accurately reflect the organisations progress against the Partnering with Consumer Standard
- Reports on the effectiveness of and compliance with informed consent processes
- Reports on the effectiveness of consumer involvement in the governance, design, measurement and evaluation of health care
- Reports on partnerships with Aboriginal and Torres Strait Islander communities.

Support its membership by ensuring that:

Members of governing bodies have the necessary skills and training to actively engage in, build, and support consumer partnerships.
Driving improvement in clinical safety and quality

The governing body is responsible and accountable for ensuring that management has systems and processes in place to support clinicians to provide safe, high-quality care. Both the governing body and management have a responsibility to monitor the effectiveness of such systems and processes.

There are six clinically based NSQHS Standards:
- Preventing and Controlling Healthcare-associated Infection Standard
- Medication Safety Standard
- Comprehensive Care Standard
- Communicating for Safety Standard
- Blood Management Standard
- Recognising and Responding to Acute Deterioration Standard.

Role of a governing body

Provide leadership to:
- Champion the development and implementation of systems to provide effective comprehensive care.

Ensure that:
- There are systems in place that facilitate coordinated implementation, monitoring, reporting and improvement of the required processes outlined in the six clinical NSQHS Standards
- There are processes to regularly review current and future risks, report and act on incidents, and to measure compliance rates, surveillance data and patient outcomes in relation to each of the six clinical NSQHS Standards
- Resources are allocated to ensure clinical and other systems meet the requirements of accreditation against the NSQHS Standards.

Endorse:
- Quality improvement and clinical improvement initiatives that support the delivery of care that meets and exceeds the requirements of the NSQHS Standards.

Monitor:
- Reports that accurately reflect the organisations progress against each of the six clinically-based NSQHS Standards.

Support its membership by ensuring that:
- Members have the necessary skills and training to accurately analyse reports on the effectiveness of each of the six clinically-based NSQHS Standards.

Links to relevant additional information and documents mentioned in the text:
- NSQHS Standards (second edition)
- National model clinical governance framework
- NSQHS Standards user guide for governing bodies
- Australian Charter of Healthcare Rights

Questions?

For more information, please visit: safetyandquality.gov.au/standards/nsqhs-standards
You can also email the NSQHS Standards Advice Centre at: accreditation@safetyandquality.gov.au or call 1800 304 056.