Clinical Governance Policy

Clinical governance is defined as:

A framework through which healthcare providers are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.

There are three key attributes to clinical governance:

• Recognisably high standards of care

• Transparent responsibility and accountability for those standards

• An ethos of continuous improvement

1. Clinical effectiveness and research
2. Audit
3. Risk management
4. Education and training
5. Patient and Public Involvement
6. Using information and IT
7. Staffing and staff management
8. Governance structure

1. Clinical effectiveness and research

Clinical effectiveness means ensuring that everything you do is designed to provide the best outcomes for patients i.e. that you do "the right thing to the right person at the right time in the right place".

In practice, it means:

• Adopting an evidence-based approach in the management of patients

• Changing your practice, developing new protocols or guidelines based on experience and evidence if current practice is shown inadequate.

• Implementing NICE guidelines, National Service Frameworks, and other national standards to ensure optimal care (when they are not superseded by more recent and more effective treatments)

• Conducting research to develop the body of evidence available and therefore

enhancing the level of care provided to patients in future.

2. Audit

The aim of the audit process is to ensure that clinical practice is continuously monitored and that deficiencies in relation to set standards of care are remedied.
This process is overseen by the lead sonographer, Karl Sturtridge, Louise Wilcox and the consultant radiologists, Dr. Tom Bean & Dr Angela Rogers
Reports and records available on request.

3. Risk management

Risk Management involves having robust systems in place to understand, monitor and minimise the risks to patients and staff and to learn from mistakes. When things go wrong in the delivery of care, clinical and other staff should feel safe admitting it and be able to learn and share what they have learnt.
This includes:

• Complying with protocols and risk assessments
• Reporting any significant adverse events via critical incidents forms, looking closely at complaints etc.
• Ensuring that the company risk register is up to date
• Promoting a blame-free culture to encourage everyone to report problems and mistakes

4. Education and training

It is the professional duty of all clinical staff to keep their knowledge and skills up to date, and they must therefore engage in regular continuing professional development (CPD).
All sonographers are registered with the HCPC or relevant council as a requirement of employment.
Mandatory training is set out for clinical and non-clinical staff via the e-learning for Health and monitored by the HR support team. Regular updates to training are scheduled for whole team meetings.
The company supports clinical staff to undertake additional training in the form of modules or further degrees to broaden their knowledge and experience and support is also given to RCHT hospital with their sonographer training programme.Yearly reviews with all staff are undertaken and serve to inform the clinical and operational aspects of the company.

5. Patient and Public Involvement

Korus values patient and public feedback to improve services into day-to-day practice.

This is implemented through our patient feedback forms monitored by our patient experience officer and also our robust compliments and complaints system.

6. Using information and IT

This aspect of clinical governance is about ensuring that:

• Patient data is accurate and up-to-date

• Confidentiality of patient data is respected

• See also Information Governance Policy

7. Staffing and staff management

This relates to need for appropriate recruitment (see recruitment policy) and management of staff, ensuring that underperformance is identified and addressed.

• Encouraging staff retention by listening to, motivating and developing staff

• Inviting feedback regarding working conditions through 1:1 discussions and yearly reviews

• Leigh-Ann Tyler is the Human Resources Manager for the company.

8. Governance structure

Korus Health has a board of directors consisting of a chair, financial, clinical and operational and human resources director.

The clinical director, Karl Sturtridge is supported by a lead sonographer, Scott Rogers and a consultant radiologist, Tom Bean.

Alongside the company governance, Korus Health is also registered and inspected by the Care and Quality Commission for which the last inspection received the rating of ‘good’.