

Beyond compliance – executive accountability in clinical safety and risk

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“It is a truism that organisational culture is informed by the nature of its leadership”.

Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Executive Summary, February 2013



Beyond compliance...

... why does compliance not suffice?





Remember Oakden

- focus was on ensuring staff knew what to say during accreditation - rather than knowing how to provide high quality care
- culture of making periodic attempts to meet different accreditation standards, rather than a culture of continuous improvement
- even if accredited, an analysis of clinical performance would raise “very serious concerns” about whether the standards were *in fact* being met

The Oakden Report, SA Health Chief Psychiatrist, 2017

An important lesson...

“...reliance only on periodic reviews, such as accreditation, leads to a sense of comfort that may not be meritorious.”

The Oakden Report, SA Health Chief Psychiatrist, 2017



Mid- Staffordshire NHS Foundation Trust (UK)

“...organisations took inappropriate comfort from assurances given either by the Trust itself or from action taken by other regulatory organisations. As a result, organisations often failed to carry out sufficient scrutiny of information, instead treating these assurances as fulfilling their own, independent obligations.”

Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry,
Executive Summary, February 2013

Clinical governance and duty of care

Clinical governance enables you to regulate/direct/oversee/understand the way you deliver care and support.

Clinical governance is about **how we do what we do every day.**

Bacchus Marsh (Djerriwarrh Health Services)

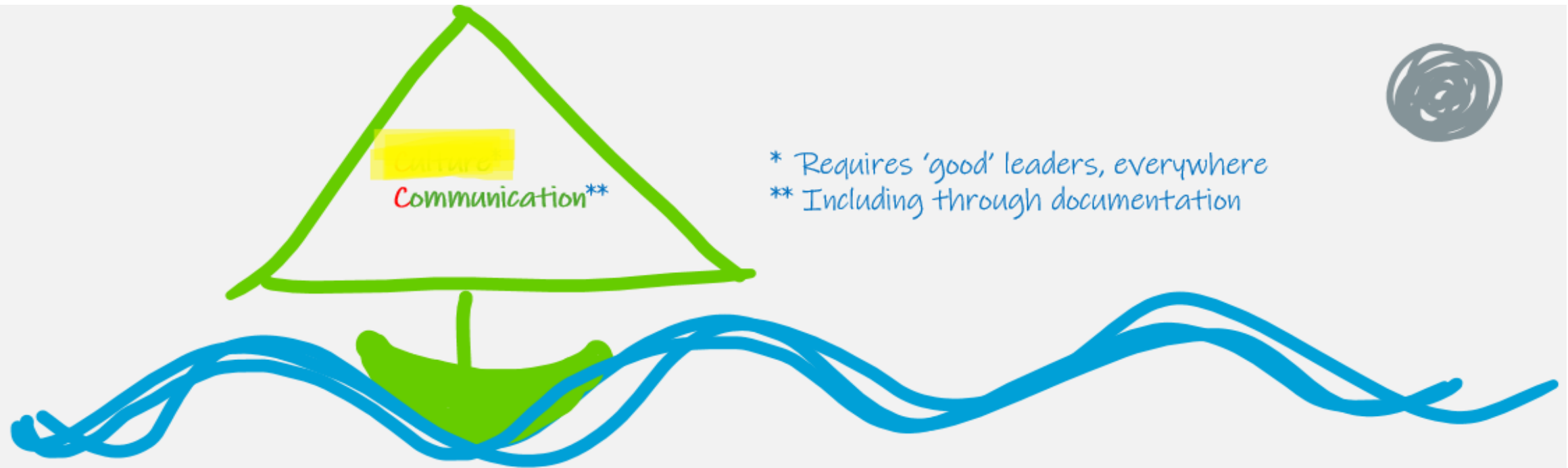
- Responsibility for the delivery of effective systems and processes rested with the executive management of the service – including the Director of Nursing (DON)
- The DON's role in clinical governance was to provide professional leadership – robust interrogation of events and formulation of recommendations
- It was incumbent on the DON, in partnership with the executive team and relevant Clinical Director, to review the implementation of the recommendations
- There was too much reliance on other Executives, including the Director of Clinical and Quality Support Services, the Medical Director, the Chief Executive and the Deputy Chief Executive, as well as medical staff

Yet...

“...Djerriwarrh received excellent performance assessment scores and was successfully accredited on two occasions over a period in which it had catastrophic failings in care and clinical governance.”

Targeting Zero: Supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care, Report of the Review of Hospital Safety and Quality Assurance in Victoria, 2016

So, moving beyond compliance...



Consumer-centredness - includes family/carers/community where appropriate

Collaboration - internally, externally, and with the 'Consumer' (for want of a better word – but it starts with 'c')

Clarity - in everything! Our values (Culture), Communication, documentation, goals, roles & responsibilities, etc etc

Continuous improvement - includes risk management, learning from incidents, feedback, innovation, etc etc

Context - clinical governance is not a one-size fits all, and also applies to individuals (ie. self-governance)

“Culture is important in any organisation. For better or worse, it determines the common and accepted ways of doing things among staff, and shapes the way they individually and collectively think about the organisation and their work.”



Safety culture

- **Is distinct** from WHS
- **Is not** just about incidents
- **Is** a mindset

Outcome 2.2a: Quality, safety and inclusion culture to support aged care workers to deliver quality care

Outcome statement:

“The governing body must lead a culture of quality, safety and inclusion that supports aged care workers to provide quality funded aged care services by focussing on continuous improvement, embracing diversity and prioritising the safety, health and wellbeing of aged care workers”

Strengthened Aged Care Quality Standards, February 2025 draft

Outcome 2.2b: Quality, safety and inclusion culture to support individuals

Outcome statement:

“The governing body must lead a culture of quality, safety and inclusion that supports individuals receiving quality funded aged care services by focussing on continuous improvement, embracing diversity and prioritising the safety, health and wellbeing of individuals.”

Strengthened Aged Care Quality Standards, February 2025 draft



This is how I think about safety culture...

Safety culture describes an authentic, deeply embedded organisational commitment to safety and quality as the #1 priority in care delivery that translates into how we do, what we do, everyday – whether you're at the Board, or the front line.

Victorian Safety Culture Guide

Safer Care Victoria, 2024

Safety culture:

- “prioritises creating an environment where safety is paramount, employees feel empowered to voice concerns, and continuous improvement is encouraged”
- “underpins effective clinical governance, ensuring accountability and quality improvement through strong systems and leadership”
- “is crucial for successful partnering in healthcare, building trust and fostering meaningful consumer engagement, aligning care with their needs and preferences”
- “transcends compliance and procedures, it embodies the fundamental right that consumers receive safe care.”

Safety culture not only minimises harm but enhances care quality.

Safety culture 'sub-cultures' (James Reason, 1997)



INFORMED



REPORTING



JUST



LEARNING



FLEXIBLE

How mature is your organisation's safety culture?

(Professor Patrick Hudson)

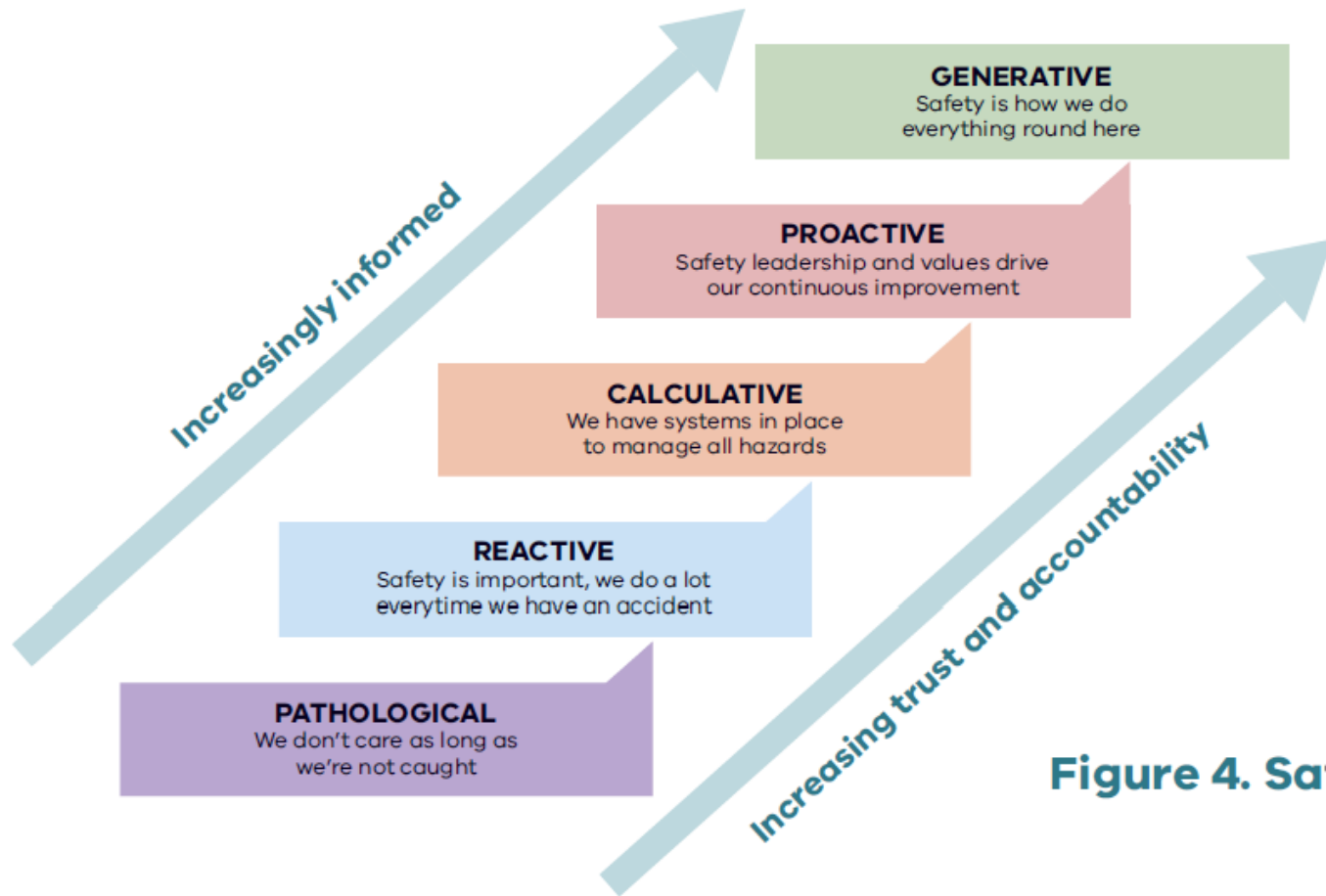


Figure 4. Safety culture maturity



We can always do better

Thank you for listening!

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