

## **LOC Support Unit**

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## **Advice note**

# Clinical governance: a definition



LOC SUPPORT UNIT

ADVICE NOTE #2

Available on line at www.locsu.co.uk

Or call 020 7207 8156

#### **Advice note**

### Clinical Governance – a definition

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The concept of clinical governance in the NHS began in 1998 with the publication by the Department of Health of the document 'A First Class Service: Quality in the NHS', which provided the following and now widely used definition of clinical governance:

"A framework through which NHS organisations 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".

#### The message from the LOCSU

Do not fear clinical governance! Many aspects relate to activities that are either a legal requirement or are simply good, clinical practice. Most practices, without even realising it, are probably compliant with many of the requirements of clinical governance. So why does clinical governance raise hackles and cause confusion in equal measure? The answer lies in the tension between the lack of mention of clinical governance in the GOS contract and the responsibilities of Primary Care Trusts and Health Boards to ensure that their contractors adhere to the principles of clinical governance.

#### Clinical Governance - What is Mandatory?

What procedures are legal requirements and what are considered simply desirable or good practice? As usual, there are no straight answers. For example, it is a legal requirement to have a Freedom of Information Policy and it is a regulatory requirement in the GOS contract to have a Complaints Policy and to store patient records safely for a minimum period of time. On the other hand, items disinfected or disposed of in accordance with College of Optometrists' infection control advice would fall into the category of good practice.

#### **Clinical Governance is not part of GOS**

PCTs are quite entitled to take an interest in compliance with GOS contract issues but many issues do not fall within the GOS contract. Undoubtedly there may be spin-off benefits to cooperating on clinical governance maters, but that is a matter for local agreement. Until your professional bodies hear otherwise, the Department of Health statement, uttered by the Head of Dental and Ophthalmic Services in 2006, still stands "....There is no national clinical governance scheme for optometrists and nothing in the Terms of Service about this".



#### **Clinical Governance is part of Enhanced Services**

If optometrists want to deliver enhanced services, outside of GOS, then they do have to comply with clinical governance requirements. In order to be poised to provide such services, and in the general interest of aspiring to good standards and the delivery of quality eye care services, many practitioners are working towards introducing clinical governance procedures into their daily practice.

# Quality in Optometry – Toolkits for Clinical Governance in Optometric Practice (England and Wales)

The professional bodies (ABDO, AOP, College of Optometrists and FODO) have designed two separate toolkits for England and Wales entitled

'Quality in Optometry — A toolkit for clinical governance in optometric practice'. They explain what clinical governance means and its relevance to optometry. They are entirely web-based and will assist practitioners in meeting all aspects of clinical governance. These aspects are divided into four levels. Level 1 covers legal or mandatory requirements and level 2 covers good clinical practice. Both levels fall into the 'core standards' category of clinical governance. Levels 3 and 4 are aspirational and fall into the 'development standards' category.

#### **Clinical Governance Made Simple**

Your professional bodies have invested a great deal of time and effort in creating these clinical governance toolkits for England and Wales. They use the Department of Health's 'Standards for Better Health' (England) and 'Healthcare Standards for Wales' as a basis, so that Primary Care Trusts and Health Boards can adopt and incorporate them into their own internal systems for clinical governance. Practitioners can complete a checklist online and either fill it in to send to the PCT/Health Board, or part fill it in to complete at a later date. It provides links directly from the checklist to relevant help files, making it completely user-friendly. There are also pages on the site that explain clinical governance and refer to the source Department of Health documents. Visit the websites:

http://www.qualityinoptometry.co.uk/ http://www.qualityinoptometry.co.uk/?wp=1

## Monitoring Quality of Practice and Minimum Standards

The QiO standards have a broad range covering everything from regulatory requirements to high standards of practice. Any practitioner can use the checklist as a way of checking the quality of their practice and the minimum standards they should be reaching. Whether this information is provided to the local PCT or Health Board is up to the individual and a matter of negotiation between the PCT/Health Board and the Local or Regional Optometric Committee (LOC/ROC). Some PCTs/Health Boards are paying a fee to practitioners in return for receiving information on clinical

governance compliance. To our knowledge, no LOC or ROC has agreed to provide clinical governance information without adequate remuneration. The provision of such information is not a requirement of GOS and is not funded by GOS.

## Quality in Optometry – Your Clinical Governance Tool

If you are negotiating with your local PCT/Health Board for the provision of clinical governance information, it makes sense to focus it around the QiO standards and to utilise the questionnaires printed from the QiO website. This is likely to be the most acceptable method to practices as all the help to complete the checklist is available online with the checklist. Those practitioners with practices in several different areas find variations in standards especially difficult to deal with and they will appreciate the consistency of QiO. Results can be printed in levels order, which makes sense, or in standards order, which PCTs/ Health Boards may well prefer. For those who do not want to complete it online, a blank checklist can be printed. However it is done, remember that provision of clinical governance information is not a requirement of your GOS contract and is not funded by GOS. So, while it remains a good thing to do for your own practice, it does require remuneration if you are to provide information to others.

#### **Examples of Fees Paid for Clinical Governance**

If you want to know what arrangements other LOCs/ROCs have reached with their PCTs with regard to payment for clinical governance information, please contact the LOC Support Unit for information.

