

RWAV CLINICAL GOVERNANCE FRAMEWORK



Rural Workforce Agency Victoria (RWAV) acknowledges the
Traditional Owners of Country throughout Victoria.
We pay our respects to Elders, past, present and emerging.

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RWAV AND CLINICAL GOVERNANCE

Rural Workforce Agency Victoria (RWAV) is a not-for-profit, government-funded organisation that works to improve access to health care for rural, regional and First Nations' communities across Victoria.

RWAV undertakes a range of activities and provides support to improve the recruitment and retention of health professionals in rural and regional Victoria.

Our Vision

Health equity for rural, regional and First Nations' Victorians.

Our Mission

To apply contemporary workforce development strategies that advance rural, regional and First Nations' Victorians access to quality health care.

We draw on trusted relationships, data and best practices to establish health service models that are capable, connected and tailored to the communities we serve.

RWAV CLINICAL GOVERNANCE FRAMEWORK

RWAV Clinical Governance Framework ensures there are policies, processes and procedures in place so we provide high-quality consumer-focused and, safe services to the organisations and health care providers with whom we engage in our everyday activities.

RWAV recruits health professionals to enable us to meet our obligations for the following Commonwealth and State Government funded programs:

- RWAV specialist GP Locum Program
- Victorian rural outreach services
- General practitioner (GP), allied health and nursing recruitment programs

RWAV considers the clinical governance framework when undertaking the following:

Sourcing health professionals

RWAV assists healthcare organisations by providing clinicians registered under the National Registration Scheme. These clinicians are sourced either through a direct employment relationship with RWAV, or through a brokering arrangement in which RWAV recruits clinicians as locums. RWAV does not provide direct clinical services.

Facilitating outreach programs

RWAV facilitates access to a range of specialist and allied health practitioners through a number of outreach programs. These clinicians travel to communities that do not have local access to the type of care provided. The arrangements can be on-going to support continuity of health care.

Administering general practice 3GA health workforce programs

RWAV administers health workforce programs including non-specialist general practice 3GA programs, such as the More Doctors for Rural Australia Program (MDRAP) and the Rural Locum Relief Program (RLRP). These programs seek to align the skills and experience of doctors with the attributes of practices, and enable non-vocationally registered doctors to access Medicare rebates prior to joining a GP college fellowship pathway.

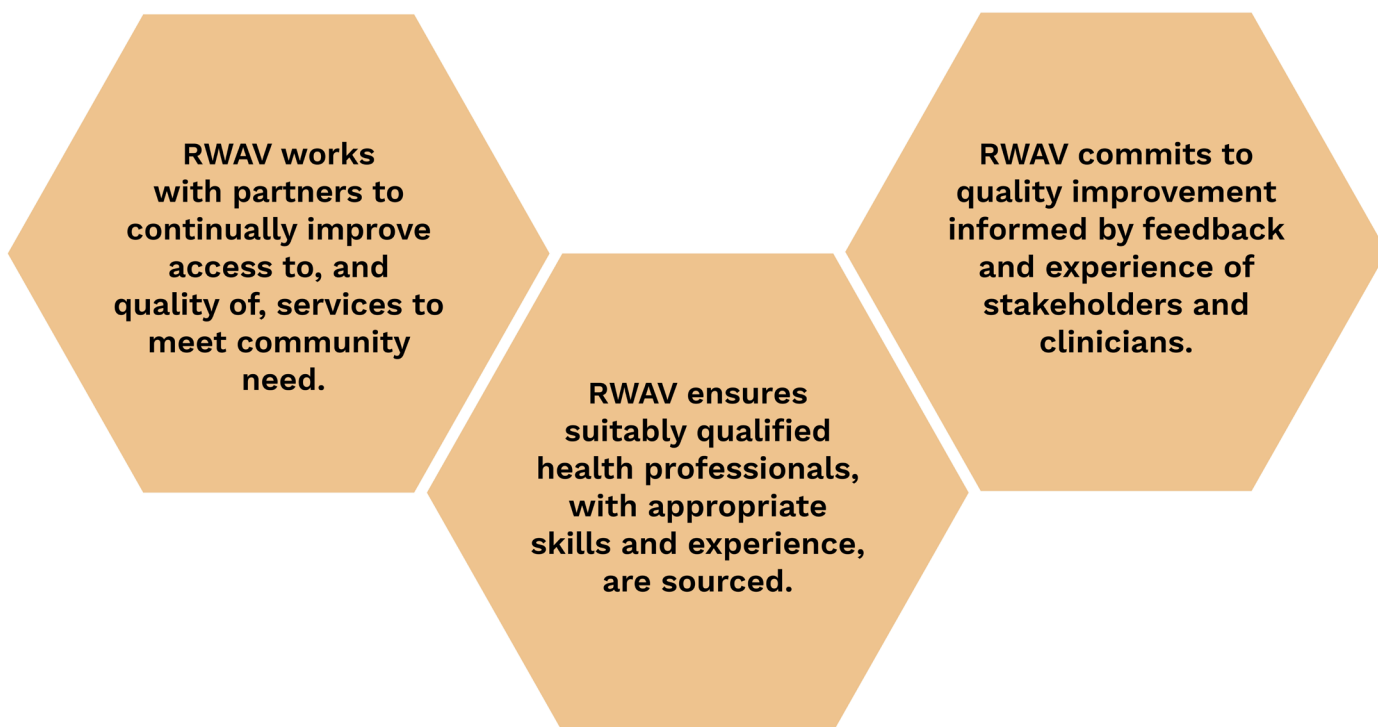
RWAV APPROACH TO CLINICAL GOVERNANCE

At RWAV, we believe people living in rural Victoria have a right to access safe healthcare services. This Clinical Governance Framework (the Framework) articulates the systems and processes RWAV has in place to deliver on this vision.

The Framework describes the roles and responsibilities of RWAV, the agencies and the health professionals contracted to provide services. It outlines the principles we practise to ensure quality and safety within health services.

CLINICAL GOVERNANCE PRINCIPLES

The main purpose of the Clinical Governance Framework is to guide RWAV's commitment to facilitating health services that are client-centred and safe.



Inter-related systems and practices are required to support safe, effective, person-centred care for every consumer, every time they access health services.

The RWAV Clinical Governance Framework has been informed by the principles of national clinical governance frameworks. These include the National Model Clinical Governance Framework and the National Safety Primary and Community Healthcare Framework Standards.

RWAV CLINICAL GOVERNANCE FRAMEWORK COMPONENTS



Governance, leadership and culture

RWAV works to ensure:

- Standards are set and performance is regularly reviewed.
- Strategic risk is monitored.
- Organisational performance is monitored for quality and safety.
- Quality culture is responsive, informed by evidence, reliable and comprehensive.
- Recruitment processes engage a high-functioning team that demonstrates a commitment to quality health care.



Clinical performance and effectiveness

RWAV works to ensure:

- Clinician skill sets are carefully matched to practice needs and client profile through rigorous screening and qualification checks.
- Contractual arrangements provide clear expectations for hosts and clinicians.
- Our approach is continually improved by responding to feedback from clinicians and host agencies.*
- Host agencies* work together with clinicians to provide leadership and a productive, supportive workplace.



Safe environment for the delivery of care

RWAV works to ensure:

- Workforce priorities are informed by listening to individual practice requirements.
- Productive working relationships are maintained with services to understand needs and inform service priorities.
- Systems and processes are in place to support quality and safety.

*Host agencies may include: GP practices, Aboriginal Community Controlled Organisations (ACCOs), urgent care centres, regional hospitals and allied health services.

RWAV CLINICAL GOVERNANCE FRAMEWORK COMPONENTS



Patient safety and quality improvement systems

RWAV works to ensure:

- Host agencies* are supported to use customer feedback to inform service improvements.
- Feedback is provided to hosts to enable improved practice.
- Feedback is provided to clinicians to allow improved practice.
- Staff working with Aboriginal and Torres Strait Islander Peoples undertake cultural safety training.
- Systems and processes are in place to support quality and safety of the programs being delivered.
- RWAV systematically monitors safety and quality healthcare systems and processes, to inform improvement.



Partnering with host agencies and clinicians to ensure safety for consumers

RWAV works to ensure:

- Incidents or reports of concern are managed appropriately.
- Clear expectations and requirements for clinical governance are provided in contracts.
- Host agency compliance with quality and safety requirements such as clinical supervision and minimum consultation lengths, are monitored and acted on.

*Host agencies may include: GP practices, Aboriginal Community Controlled Organisations (ACCOs), urgent care centres, regional hospitals and allied health services.

References

1. Australian Commission on Safety and Quality in Health Care. (2017). National Model Clinical Governance Framework. Sydney: ACSQHC. Accessed from: <https://www.safetyandquality.gov.au/sites/default/files/migrated/National-Safety-and-Quality-Health-Service-Standards-second-edition.pdf>.
2. Australian Commission on Safety and Quality in Health Care. (2021). National Safety and Quality Primary and Community Healthcare Standards. Sydney: ACSQHC. Accessed from: https://www.safetyandquality.gov.au/sites/default/files/2021-05/national_safety_and_quality_health_service_nsqhs_standards_second_edition_-_updated_may_2021.pdf.



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suggestions to info@rwav.com.au