

Terms of Reference

Concord Repatriation General Hospital Communication for Safety Committee Terms of Reference

GOVERNANCE	<ul style="list-style-type: none"> Clinical Council
ROLE	<ul style="list-style-type: none"> To ensure that Concord Repatriation General Hospital has systems and processes in place for effective and coordinated communication that supports the delivery of continuous and safe care for patients.
OBJECTIVES	<p>To provide oversight of communication processes in the delivery of safe patient care and promoting/ developing systems that encourage effective communication in settings such as:</p> <ul style="list-style-type: none"> transition of care (clinical handover), when critical information about a patient's care emerges or changes (eg deteriorating patient) ensuring that a patient is correctly identified and matched to their intended care. Encouraging and ensuring participation of patients / family in their care Contribute to quality improvement systems to promote best practices in communication for patient safety
NATIONAL STANDARDS – SECOND EDITION	<p>Standard 6: Communicating for Safety Standard</p> <p>Items:</p> <p>Integrating clinical governance – Action 6.1</p> <p>Applying quality improvement systems – Action 6.2</p> <p>Partnering with consumers – Action 6.3</p> <p>Organisational processes to support effective communication – Action 6.4</p> <p>Correct identification and procedure matching – Actions 6.5, 6.6</p> <p>Clinical handover – Actions 6.7, 6.8</p> <p>Communicating critical information – Actions 6.9, 6.10</p>
MEMBERS	<p>Chair - Senior Clinician (Currently Staff Specialist in Urology)</p> <p>Director of Medical Services, or delegate</p> <p>Director of Nursing, or delegate</p> <p>Nurse Manager, Health Informatics</p> <p>Manager, Patient Services and Information</p> <p>Emergency Medicine Representative</p> <p>Clinical Governance Unit Representative</p> <p>Medical Superintendent</p> <p>Surgical Superintendent</p> <p>Director of Prevocational Education and Training, or delegate</p> <p>NUM Representative</p>

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	<p>Allied Health Representative Division of Medicine Representative Division of Surgery Representative Intensive Care Representative Department of Anaesthesia Representative Director of Pharmacy, or delegate Prevocational trainee (PGY 1 or 2) JMO Quality Committee representative GP Representative Consumer Representative By Invitation : Clinical Nurse Consultant After Hours. Director of National Safety & Quality Standards SLHD</p>
KEY PERFORMANCE INDICATORS	<ul style="list-style-type: none"> • Development and implementation of strategies to reduce incidents relating to communication reported in the Incident Information Management System • Processes are monitored and evaluated, including periodic audit activities as determined by the committee such as shift to shift to shift handover, transfers between critical care areas to the wards/departments and inter facility transfers • Monitoring systems used to communicate critical information and evaluate/ address risks as they emerge or change to ensure safe patient care • Gaps and variations in care/ practices are addressed by collaborating with the workforce to develop or adapt structures and processes to support effective clinical communication • Systems that correctly identify the patient throughout their care are used to ensure that the patient receives the care intended for them • Identify and escalate risks in relation to implementation, education and ongoing evaluation of eMR to ensure safe patient care
CHAIRPERSONS	Senior Clinician
QUORUM	A minimum (50% +1)
MEETING FREQUENCY	Monthly
MINUTES	Meeting agenda and minutes will be circulated at least three days prior to each meeting.
SECRETARIAT	Clinical Governance Unit
DUE FOR REVIEW	July 2020
APPROVED	

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	Chair Signature: _____ Date: _____
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