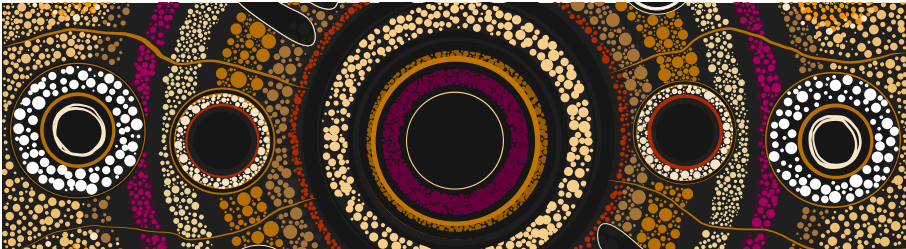


# ACT Clinical Governance Arrangements

September 2024





### **Acknowledgement of Country**

We acknowledge the Ngunnawal people as traditional custodians of the ACT and recognise any other people or families with connection to the lands of the ACT and region. We acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.

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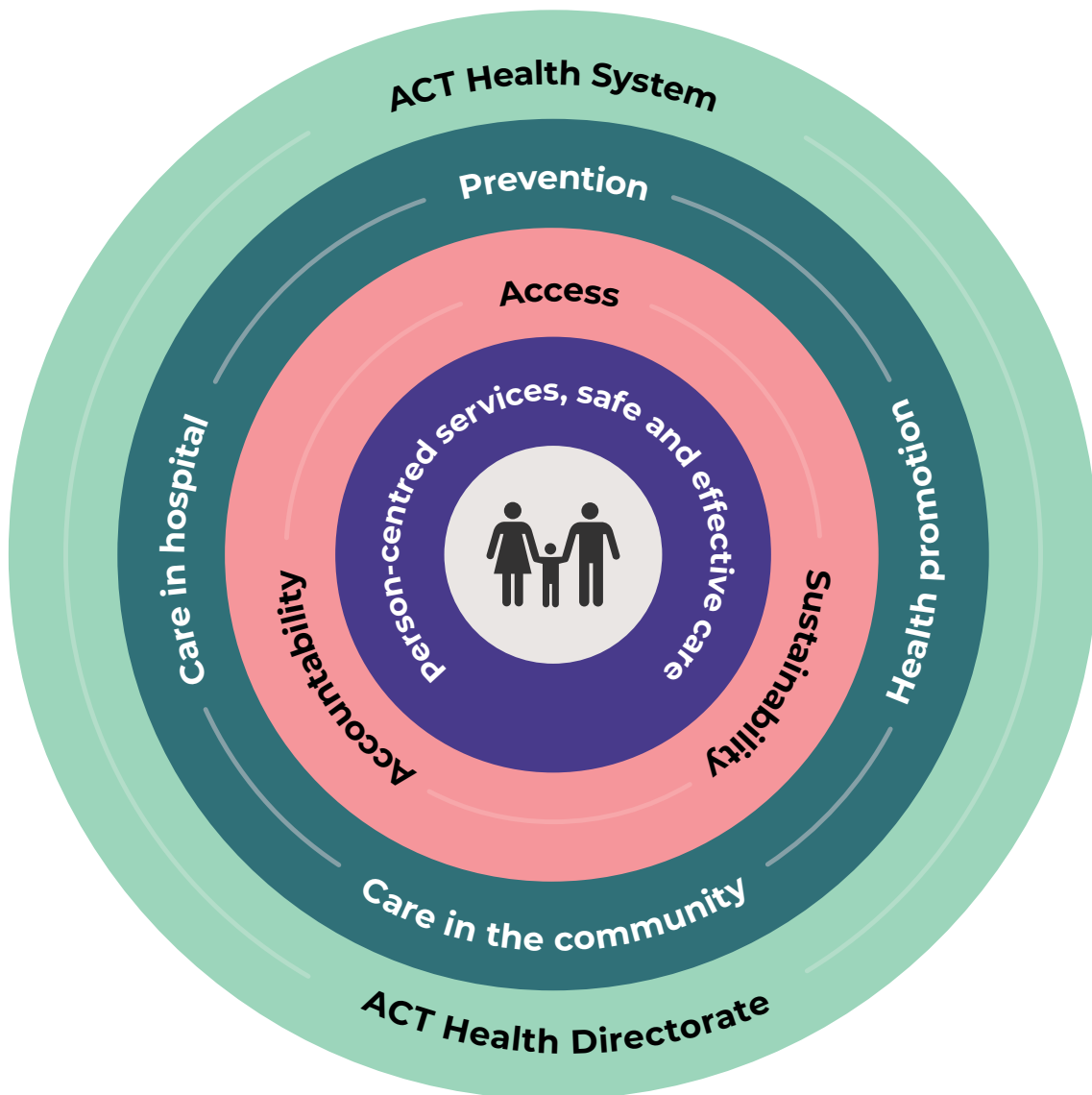
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# Introduction

ACT Clinical Governance Arrangements have been developed to ensure a focus on safety and quality of care provided in the ACT health system continues to be embedded at every level of the health care system.

ACT Clinical Governance Arrangements are informed by the Australian Commission on Safety and Quality in Health Care (ACSQHC) National Model Clinical Governance Framework (2017) and the National Safety and Quality Health Service (NSQHS) Standards (Second Edition). The document outlines how the ACT Health Directorate provides leadership and oversight of clinical quality and safety across the ACT and defines the roles and responsibilities for clinical governance to ensure that consumers receive person-centred care that is safe, effective, and delivered in health care systems that are accessible, accountable, and sustainable.



# The importance of partnering with the ACT community in clinical governance

Clinical governance is the structure, processes and culture set by the leadership and executives in a health care organisation. Clinical governance ensures that everyone, including clinicians, staff, managers, and executive members understand their accountabilities and have a responsibility to partner with consumers and the community for delivery of high-quality health care.

It is essential that healthcare consumers and their carers are equal partners in the provision of the safest possible person-centred health care and the design of the ACT health system. Person-centred care should be delivered at the right time, in the right place, in the right way.

Consumers and their carers expect to:

- » Receive person and family-centred health care that is responsive, timely, and accessible.
- » Receive equitable and accessible health care regardless of gender, ethnicity, and social background.
- » Be treated with dignity and respect in line with their beliefs and values.
- » Have their concerns heard and be confident that actions are taken to address these.
- » Share decision-making in their care and understand the risks and benefits of treatment.
- » Be told when something has gone wrong through a timely, respectful, and open conversation.
- » Receive information in a way that is accessible, culturally appropriate, and easy to understand.
- » Be able to provide feedback without fear of this affecting their care or treatment.

## Purpose

The ACT Health Directorate (ACTHD) is committed to ensuring the best possible health outcomes and consumer experiences for the ACT community through continually improving the care provided across the whole of the health care system. The ACT Health Directorate Strategic Plan 2020-25 outlines the vision, purpose, values, priorities, and goals of the Directorate.

Embedding robust clinical governance arrangements requires working collaboratively to strengthen the integration of all organisations providing health care. This includes patient-centric co-design and close partnerships with acute, aged care, ambulance services and primary care providers. In addition, having an awareness of other industries such as the disability, community, education and justice sectors and keeping informed of national and international improvements in healthcare allows the ACT to achieve optimal outcomes for all health care consumers.



# Roles and responsibilities

## ACT Health Directorate

The ACTHD provides centralised and coordinated oversight across the whole ACT health system and supports health care services and providers to work collaboratively with carers.

The ACTHD defines and maintains clear governance and accountability frameworks for the ACT health system. The ACTHD Strategic Plan 2020-25 outlines the following key clinical governance responsibilities:

- » Embedding a strong safety culture amongst all health care organisations that promotes safety and quality.
- » Exemplifying consumer engagement in the design, development, implementation, monitoring, and evaluation of integral clinical governance systems.
- » Providing strategic leadership, monitoring, and promoting continuous improvements in safety and quality.
- » Providing timely advice to the ACT Government in the development and implementation of system-wide planning.
- » Ensuring that ACT health care organisations have access to timely and accurate information to monitor and evaluate safety and quality, including benchmarked and trend data.
- » Proactively identify, assess, analyse and respond to emerging clinical quality and safety trends through horizon scanning, monitoring trends in health.
- » Sharing of information across the ACT health system.
- » In partnership with the people of the ACT, use and generate high value research to optimise health and wellbeing, through continuously improved healthcare policy, planning and delivery.
- » Monitoring and responding to clinical governance implementation and performance by continually reviewing key quality and safety indicators.



## Health care consumers and carers

Consumers and carers should be able to choose the extent to which they wish to participate in decision-making about health care. Consumers and carers have the right to escalate their concerns and experiences, have their concerns heard and acted upon, and understand the actions that will be taken to improve the system. Consumers and carers can partner with health care organisations and providers by:

- » advocating for acknowledgement and inclusion in decision-making
- » educating clinicians about how to be treated with dignity and respect in a way that is sensitive to their individual, cultural, linguistic and diversity needs
- » being involved in organisational system co-design and setting health system priorities
- » being involved in the review or development of clinical models of care and consumer/carer information
- » providing input into infrastructure or digital advancements
- » becoming representatives on governing committees to ensure consumer/carer perspectives are heard.

## Operational executive teams

The executive team within health care organisations across the ACT have ultimate accountability for ensuring the organisation delivers quality care. This is achieved by ensuring sufficient resources are available and robust quality and safety processes are in place to meet the accreditation requirements of the relevant National Safety and Quality Health Care Standards. The executive is also collectively accountable for ensuring appropriate transparency by reporting health outcomes according to national and ACT regulations. In addition, health services executive must annually attest that the systems, processes, and culture fully comply with actions in the National Safety and Quality Health Service Standards and the National Clinical Governance Framework.

## Directors, managers, and clinical leads

Directors, managers, and clinical leads are primarily responsible for ensuring that the systems that support the delivery of care are performing well and are designed to provide quality care support workers to carry out their roles. This core group of organisational leaders promote safety by empowering, encouraging, and supporting staff to use continuous improvement methods, to report issues of concern and to follow best practice policies to deliver the right care, in the right place and in the right way.

## Clinicians and other staff

Clinicians and other staff (including students, volunteers, observers, and contractors) will work within, contribute to, and are supported by evidence-based models to deliver quality care. Clinicians should be encouraged to report clinical issues and work within their full scope of practice as part of cohesive, multidisciplinary teams. All staff are accountable for the safety and quality of their own practice, and in their role to supervise trainees, in line with professional codes of conduct and in accordance with legislation, statutory obligations, and standards.

# Clinical governance components

It is essential that all health organisations in the ACT have systems in place that support quality care. ACT Health defines quality and safety in health care according to five components to support person-centred care that is safe, and effective.

These are:

1. Consumer and Carer Engagement
2. Leadership and Safety Culture
3. Health Care Sustainability
4. Risk Management
5. Quality Assurance and Effectiveness.

All five components of clinical governance are linked together with legislation, frameworks and committees that support improvements across the broader ACT health care system to provide confidence to the ACT community.





# 1. Consumer and Carer Engagement

Consumers and carers should be at the centre of effective clinical governance and are uniquely positioned to share lived experiences of the health care system.

Consumer involvement at all levels is vital to the continual improvement of healthcare outcomes. Consumers offer a unique perspective and bring a broad range of experience and expertise to care and service improvement. Partnering with consumers ensures healthcare providers and policymakers are actively working to ensure that health services meet their needs.

**Effective partnerships are fostered when consumers are treated with dignity and respect, when information is openly shared and when participation in healthcare is encouraged and supported. Health care organisations need to:**

- » Provide consumers with the ability to bring their unique perspective through the provision of feedback on health policy, critical incidents, initiatives, service design and infrastructure to ensure healthcare is reflective of the changing needs of the ACT community.
- » Continuously support the embedding of the principles of consumer engagement outlined in national frameworks such as the National Safety and Quality in Health Service Standards, the Australian Open Disclosure Framework and the Second Edition of the Australian Charter of Healthcare Rights. These principles ensure consumers are actively encouraged to participate in decision making regarding their healthcare, be made aware when something goes wrong and provide feedback on their experiences. This information should form part of the evidence-base for driving improvements within the system.

**Legislative requirements and frameworks/strategies supporting consumer engagement in clinical governance activities and the provision of healthcare include (but are not exclusive of):**

- » *ACT Carers Recognition Act 2021*
- » *ACT Human Rights Commission Act 2005*
- » *Medical Treatment (Health Directions) Act 2006*
- » National Safety and Quality Health Service Standards (Second Edition)
- » Australian Charter of Health Care Rights
- » The Australian Open Disclosure Framework
- » National Agreement on Closing the Gap
- » *ACT Aboriginal and Torres Strait Islander Agreement 2019-2028*
- » ACT Gender Equity Strategy
- » National Clinical Care Standards
- » Professional Codes of Conduct
- » Healthy Canberra: ACT Preventive Health Plan 2020–2025
- » Older Persons Mental Health and Wellbeing in the ACT Strategy 2022-2026
- » Regional Mental Health and Suicide Prevention Plan
- » Digital Health Strategy 2019–2029
- » Accessible, Accountable, Sustainable: A Framework for the ACT Public Health System 2020-2030
- » Maternity in Focus: The ACT Public Maternity System Plan 2022-2032.



## 2. Leadership and Safety Culture

The key to delivering value-based healthcare are structures, processes and culture which supports systems thinking.

Systems thinking empowers clinicians and consumers to identify and learn from data and evidence so that improvement can be made. Having experienced and enthusiastic leaders with a strong commitment to prioritising a patient safety culture is key to ensuring that behaviours of colleagues across the system are focused on quality improvement.

Integral to the delivery of healthcare is the modelling of key behaviours that foster a respectful, and transparent safety culture within all levels of clinical leadership so that all consumers and clinicians can report safety concerns or clinical incidents without fear of retribution or blame. Having a clear mission and communicating to all staff how they can aspire to the mission is important to ensuring the service has a direction for interacting with patients and between staff for the best healthcare outcomes.

**To achieve excellence in leadership, the following requirements will need to be in place across the health care system:**

- » A commitment to open disclosure by supporting staff to freely communicate they are sorry for an error occurring.
- » Celebrating areas of excellence and innovation.
- » Clear mechanisms to escalate risks and errors appropriately and to understand where staff believe the safety culture could use improvement.
- » Modeling from senior executives on openness and the ability to speak up within a just culture and commitment to procedural fairness. This requires addressing the underlying system causes of error in healthcare provision to reduce harm and improving system efficiencies, consumer experience and high value quality care.
- » The drive to support ongoing cultural change to build leadership capability through the provision of regular performance reviews, leadership programs and education opportunities.
- » Formal and informal mentoring/ clinical supervision of expert and emerging leaders.
- » Promotion of multidisciplinary teamwork as the basis for providing high quality care, where staff are supported to work to their full scope of practice.
- » Collaboration in research and innovation, including liaising with other health care systems, to embed a continuous learning health organisation through relevant clinical governance forums, panels, committees, clinical networks, and plenaries.
- » An expectation for all staff to actively promote raising and reporting of issues.

**Standards that guide and strengthen leadership and embed a safety culture in health care include (but are not exclusive of):**

- » National Safety and Quality Health Service Standards (Second Edition)
- » ACT Health Strategic Plan 2020-2025
- » ACT Health Services Plan 2022-2030
- » Strategic ACT-wide clinical system committees:
  - Health System Council
  - Clinical System Governance Committee
  - Quality and Safety Leadership Network
  - Clinical networks such as the ACT Infection Prevention and Control network
- » Strategic and operational executive leadership structures and committees within health services.
- » Culture Surveys
- » Health Forums
- » Canberra Health Annual Research Meeting (CHARM)
- » Towards a Safer Culture program
- » Safewards Program ACT
- » ACT Public Service Code of Conduct 2022
- » ACT Public Service Integrity Framework
- » ACT Public Service Code of Ethics





### 3. Health Care Sustainability

Sustainability is the ability to maintain systems and services at a certain rate or level to meet the needs of the present without compromising the future.

A sustainable ACT health system workforce is one that is highly trained and meets the changing needs of the ACT and surrounding New South Wales communities. To achieve sustainability requires strategic planning for recruiting, developing, engaging, and retaining staff.

It also calls for strong financial management and being accountable for the use of public money. This is important when considering new infrastructure, technology, or service provision. There should be regular consideration of areas for disinvestment when public funding is no longer delivering high quality care.

In addition, awareness of the impact that changing climate and environmental conditions have on health care and, conversely, of the impact health care has on the environment is essential to ensuring sustainability.

#### The following should be in place:

- » Staff have verified credentials to demonstrate the skills and experience required to fulfill their roles and responsibilities.
- » Appropriate supervision and access to relevant education and training programs (both mandatory and discretionary) to enhance skill sets.
- » Mentoring of positive leadership behaviours and skill development for clinical staff including collaborative and regular performance reviews.
- » A culture where professional development opportunities are actively promoted.
- » Opportunities are made available for staff to contribute to the design of systems for the delivery of person-centred care.
- » An expectation that concerns are taken seriously by leaders and managers.
- » A responsive working environment that is safe, free of discrimination, violence, and aggression and in which workplace hazards are identified, appropriately responded to, and remediated.
- » People and culture mechanisms in place that address workforce performance issues.
- » Mechanisms that ensure funds are used appropriately for delivering high quality care and staff are held accountable for their spending.
- » Cost-benefits analysis systems in place when considering implementing new models of care and technology or disinvesting in current models and technology.
- » Opportunities for staff to participate in emergency management and business continuity planning for health care emergencies arising from pandemics and climate change such as heat waves, bushfires, thunderstorms, and flooding.
- » Processes to monitor and reduce unnecessary waste from the provision of healthcare.
- » Focus on high-value care that reduces environmental impact.

**Legislation, strategies and frameworks supporting sustainability of the ACT health workforce and health care include (but are not exclusive of):**

- » ACT Health Workforce Strategy 2023-2032
- » Learning and Development Strategy 2023-2025
- » Health Practitioner Regulation National Law (ACT)
- » Quality improvement methodology
- » Mandatory and required workforce education
- » Orientation, preceptorship, coaching and mentoring
- » Staff wellbeing incentives
- » Staff vaccinations
- » Performance Frameworks
- » Credentialling and scope of practice frameworks and monitoring systems
- » Environmental Protection Act 1997
- » Clinical Waste Act 1990
- » The Waste Management and Resource Recovery Act 2016





## 4. Risk Management

Risk management involves identifying potential risks and near misses to implement strategies to minimize harm and prevent occurrence.

Clinical risk management is a part of the broader risk management system which integrates with the management of corporate services such as financial or information and communication technology, occupational health and safety, equipment, and consumer safety risks. Systematic

clinical risk management focuses on minimalising and safeguarding against preventable harm and poor consumer and/or carer experience impacting consumers.

A mature risk framework uses a structured approach to build staff awareness and proactively identifying hazards while managing risk. These are supported by systems to prioritise safety by responding appropriately to clinical risks.

**To achieve excellence in leadership, the following requirements will need to be in place across the health care system:**

- » Clinical quality registries, quality improvement programs, and clinical trials.
- » Clinical networks, working groups or advisory groups (such as Morbidity and Mortality Review group).
- » Health and innovation-focused forums (such as Grand Rounds and CHARM).
- » Clinical quality and safety data analysis through clinician and patient reported measures and national data sources.
- » Review of external reports and reviews into quality and safety and risk.
- » Notifiable clinical incident, clinical alerts and safety reporting.
- » Clinical discipline-specialty committees across the health system.
- » Clinical Audits.
- » Consumer feedback systems and processes.
- » Resource shortage management and recall management processes.

**Standards, strategies and frameworks in place that support clinical risk management include:**

- » ACT Health Risk Management Guide
- » ACT Health Enterprise Risk Management Framework and Plan
- » AS ISO 31000:2018 Risk Management Guidelines
- » ACT Health Work Health and Safety Policy
- » ACTPS Work Health and Safety and Wellbeing Strategy
- » ACT Health Work Health and Safety Performance Management Plan 2024-26
- » ACT Health Facilities Code of Practice 2021
- » Clinical incident management and review
- » Therapeutic Goods Administration (TGA)



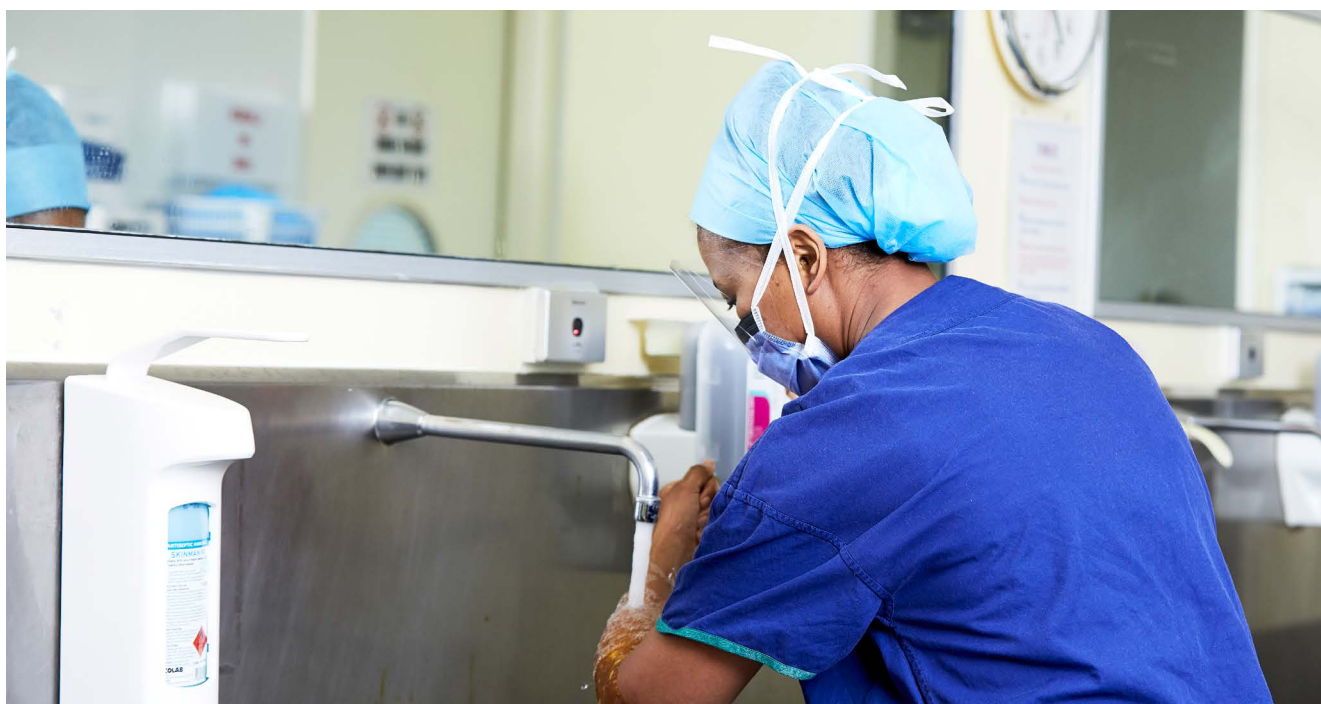
## 5. Quality Assurance and Effectiveness

Oversight of clinical outcomes, consumer experience, clinical research, and the implementation of evidence-based practice is essential for ensuring consistency in healthcare across the system.

The ability to monitor trends and unwarranted variations in care through quality assurance is necessary and expected. Health systems should actively respond to the findings to ensure high quality care is delivered across the health care system and equity of care is maintained.

**To achieve excellence in leadership, the following requirements that will need to be in place across the health care system:**

- » Maintaining accreditation of services, training programs and infrastructure.
- » Monitoring of clinical outcomes through data analysis, incident management and auditing processes to identify unwarranted variation in practice and adverse outcomes for consumers.
- » Using data to aid decision making.
- » Monitoring high risk, high-volume and high-cost services to ensure clinical safety, appropriateness, and efficiency.
- » Development of evidence-based, whole-of-system clinical policies to provide consistent provision of high-quality care to all consumers.
- » Development and implementation of clear processes to develop new procedures, therapies, technology, innovative practices, and models of care.
- » Regular monitoring of the implementation and effectiveness of clinical care frameworks, guidelines and procedures and practice pathways.
- » Actively disinvesting in out of date and low-value practices, processes, therapies, and technology.



**To provide assurance about the quality and safety of care health care services should monitor (but are not exclusive of):**

- » Patient Reported Experience Measures
- » Patient Reported Outcome Measures
- » Clinical research, including low risk research through to clinical trials
- » Clinical audits
- » Clinical quality registries
- » Hospital Acquired Complications dataset
- » ACT Budget Statement – quality and safety indicators (Patient Experience, SABS and hand hygiene)
- » National Hand Hygiene Initiative
- » Report on Government Services – Health: Public Hospital report
  - Emergency department wait times
  - Waiting time for admitted patient services
  - Elective surgery waiting times
  - Appropriateness of Care
  - Accreditation
  - Adverse events in hospital
  - Sentinel Events
  - Patient Satisfaction
  - Continuity of care
  - Unplanned readmission
- » National Antimicrobial Utilisation Surveillance Program (NAUSP)
- » Australian institute of Health and Welfare – Admitted Patients
- » Australian Institute of Health and Welfare – Australia’s mothers and babies
- » Australian Institute of Health and Welfare - Hospital safety and quality
- » Antimicrobial Resistance in Australia AURA
- » National Alert System on Critical Antimicrobial Resistances (CARAlert)
- » National Safety and Quality in Health Service Standards accreditation Report (ACSQHC)
- » Safety in Health Care web tool (ACSQHC)
- » National Health Reform Agreement (NHRA)



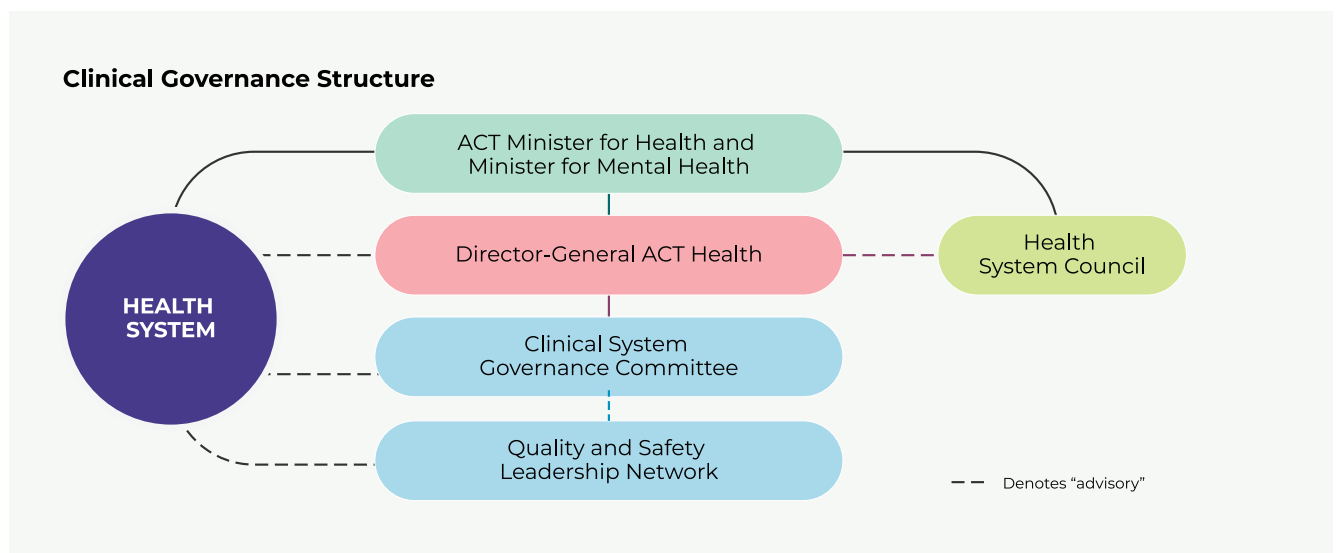
# ACT Health clinical governance structure

The role of the ACT Health Directorate is to provide strategic direction and leadership for the whole ACT health care system.

In line with the ACT Health Directorate's vision for a healthier Canberra, ACT Health's key functions include, but are not limited to:

- » Providing strategic leadership and policy advice regarding the whole of the ACT Health system, beyond just the acute public health system.
- » Administrating the ACT Government's legislative program on health matters.
- » Engaging with the Directorate's partners and stakeholders to ensure health workforce, healthcare outcomes and impacts are considered in whole-of-government policy and health services planning.
- » Representing the Territory at national forum to promote the best outcome for ACT Health and for Territorians.
- » Cross-border and inter-agency collaboration in policy and planning.
- » Supporting and enabling clinical excellence, safe high-quality care and research across the health system.
- » Conducting health system planning and evaluation for sustainable services, workforce and infrastructure that supports effective resource allocation, and innovation for person-centred care.
- » Commissioning value-based care that improves health outcomes.
- » Monitoring, evaluating and feedback on health system performance to ensure it meets community expectations and performance criteria.
- » Working across the whole public health system to strategically plan and design new health facilities and upgrades to existing health facilities to meet the community's needs, and support the territory's health system through asset, leasing and facilities management.

The Directorate's governance structure provides a foundation for corporate activity and supports transparent and accountable decision-making that reflects the Directorate's values. The Directorate's Executive Board, as the Directorate's peak committee, is supported by several committees led by senior executives comprising a cross-section of representation and subject matter expertise.



## **ACT Health Executive Board**

The Executive Board is chaired by the Director-General and is the peak governance committee for the Directorate. The Board oversees:

- » high level strategic direction
- » performance against its strategic objectives
- » progress towards addressing government commitments
- » strategic risk management; strategic financial management
- » organisational culture and the management of our people
- » governance systems and accountability arrangements.

In monitoring of the functions, the ACTHD has broadened the corporate and clinical governance structure to ensure health care is person-centred regardless of the service that delivers the health care. In 2023 ACT Health formalised the Clinical Governance structure by establishing the following peak committees.

## **ACT Health System Council**

The ACT Health System Council provides advice on matters referred by the ACT Minister for Health, the ACT Minister for Mental Health, the ACTHD and Canberra Health Services. The Council advises on services planning, redesign, and integration, as well as workforce optimisation and safety and quality in healthcare. Membership includes representatives from the community sector, industrial representatives, and health system experts from Australia and internationally.

## **Clinical System Governance Committee**

As an advisory committee, its role is to hear from consumers and clinicians about their experiences of the ACT health system and to support continuous improvement in consumer outcomes across public, private and community settings. Membership of the committee include consumers and multidisciplinary expert clinicians from across the public and private sector, primary health, health protection services and Southern NSW. The CSGC provides advice and recommendations to the ACTHD Director-General to advocate areas where system-wide change should occur.

## **Quality and Safety Leadership Network**

The purpose of the Quality and Safety Leadership Network (QSLN) is to support knowledge sharing, collaboration, and discussions on quality and safety systems with the aim to strengthen partnerships and address focus areas for improvement. The Network provides health care staff with an escalation point to raise patient safety issues and identified variation in clinical outcomes. Members include quality and safety leads from across the public and private sector, aged care, ambulance service, primary health, health protection services and Southern NSW currently sitting in a clinical governance role along with consumer and carer representatives. The QSLN reports to the CSGC.

# Research, innovation and improvement

For the ACTHD to successfully deliver the fundamentals of this document depends on the ability of staff to engage with improvement methodology and techniques, and to test and implement the changes recognised to achieve and measure system-wide improvements.

Building organisational capacity for safety and quality improvement is a crucial element in building a sustainable infrastructure and realising the aims of the ACTHD's strategic goals.

As part of continuous improvement, ACTHD is hosting regular Health Forums. The purpose of the Health Forums is to bring together the ACT Health community to learn, share and to commit to action for the benefit of the health outcomes for the region's population.

As part of embedding research into change within the health system, the ACTHD also hosts the Canberra Health Annual Research Meeting (CHARM), in collaboration with Canberra Health Services, Australian National University, University of Canberra, UNSW Canberra, Australian Catholic University and Health Care Consumers Association. CHARM is the opportunity for researchers, students, clinicians, policy makers, consumers, carers, and other leaders and partners across the ACT health system to network and share their research and hear from national and international multidisciplinary experts.



# Measuring our success

Monitoring of quality and safety systems to identify areas for improvement will occur by the Clinical System Governance Committee through:

Periodic review of National Safety and Quality Health Services Standards (Second Edition) re-accreditation assessment outcomes.

Monitoring of key quality and safety performance indicators trends and themes.

What we hear from consumers about their experiences of care at a system level.

Progress towards implementation of new or amended frameworks and advisories as outlined by the Australian Commission on Safety and Quality of Health Care workplan 2024-2027.

This document will be reviewed every two years by the Clinical System Governance Committee to ensure that relevant quality and safety governance structure, processes, and culture of each component of clinical governance are assessed and are reflective of the rapidly maturing ACT health system with recommendations made to the ACTHD Director-General, where jurisdictional-level action is required.

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