



HSS REGISTERED

## Manager – Clinical Governance and Performance

### Position Details

Position Number: CG009366  
Classification: HSO G-10  
Agreement: Health Salaried Officers Agreement  
Directorate: North Metropolitan Health Service  
Department: Consumer Experience and Clinical Excellence  
Location: QEII Medical Centre, Nedlands

### Reporting relationships

This position reports to:

008359	Director, Safety, Quality and Consumer Experience	G-11
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Positions under direct supervision:

0008822 G-8 Coordinator, Clinical Risk and Governance  
0008821 G-8 Coordinator, Quality and Performance Analytics  
0009297 G-8 Senior Project Officer  
0006157 G-5 Program Officer

### Primary purpose of the role

Leads the NMHS clinical governance, clinical incident management, performance review and accreditation frameworks and activities to ensure the development, implementation, evaluation and maintenance of effective systems and processes across the Health Service. Ensures the development, implementation and maintenance of effective governance and coordination of accreditation readiness, quality systems and clinical risk and safety activities across the North Metropolitan Health Service. Fosters a patient safety culture that supports effective clinical governance and performance review.



### Vision

A trusted partner, delivering excellent healthcare for our people and our communities.



### Mission

To promote and improve the health of our people and our communities



### North Metropolitan Health Service

Established in 2016, North Metropolitan Health Service embraces best practice to deliver safe, high-quality care to patients and the community.

NMHS is one of the largest health services in WA, providing a comprehensive range of adult specialist medical, surgical, mental health and obstetric services across the following hospitals:

- Sir Charles Gairdner Hospital
- Osborne Park Hospital
- King Edward Memorial Hospital
- Graylands Hospital

Additionally, NMHS offers mental health, public health and dental services across the State as well as a range of state-wide, highly specialised multidisciplinary services from several hospital and clinic sites.

NMHS also oversees the provision of contracted public health services by Joondalup Public Hospital, which is operated under a public private partnership.

For more information see: [North Metropolitan Health Service](#)

### Our values

Please refer to [NMHS Values – Organisational/Individual Behaviours](#) for information on individual behaviours that reflect the organisation’s values.

### Our strategic priorities

We are focussing on six strategic priorities for the 2020-2025 period:

 <p><b>Enabling healthy communities</b> We build healthy and engaged communities</p>	 <p><b>People-centred care</b> We will place our consumers’ and their carers’ best interests and experience at the core of all we do</p>
 <p><b>Integration and connection</b> We will build strong connections and partnerships</p>	 <p><b>Innovation and adaptive models of care</b> We will use research and technology to improve outcomes</p>
 <p><b>Trusted, engaged and capable people</b> We will invest in our people and our culture</p>	 <p><b>Sustainable and reliable</b> We will reduce harm, waste and unwarranted variation</p>



## Key accountabilities

### 1. Leadership and management

- 1.1. Provide leadership and strategic advice in the areas of performance review, clinical governance, clinical incident management and accreditation preparedness and oversight.
- 1.2. Leads and manages the development, monitoring and evaluation of a consistent clinical governance framework across NMHS hospitals and the community setting.
- 1.3. Leads and manages the development, monitoring and evaluation of a NMHS performance reporting and review framework and guidelines.
- 1.4. Initiates and provides regular reports and briefing papers, including relevant analysis, pertaining to all clinical governance, performance, clinical incident management and accreditation preparedness activities to the Executive Director Consumer Experience and Clinical Excellence.
- 1.5. Working with the Manager Clinical Excellence, supports the development of education and training programs across the NMHS relevant to safety and quality and clinical governance.
- 1.6. Liaises and works closely with the NMHS Clinical Governance Committee, site Clinical Governance Committees and other relevant NMHS committees and working groups.
- 1.7. Represents NMHS at relevant internal and external meetings and committees.
- 1.8. Develops and maintains good working relationships with internal and external stakeholders, including the WA Health Licensing and Accreditation Regulatory Unit (LARU).

### 2. Governance

- 2.1 Initiates and implements strategies and activities to develop and foster a patient safety culture, which emphasises and supports effective clinical governance and performance evaluation.
- 2.2 Develops, implements and maintains the area level governance structures and committees, in alignment with the NMHS Clinical Governance Framework, to ensure accreditation readiness.
- 2.3 Oversees maintenance of the processes for the area level governance structures/ relevant committees to assess, track and manage accreditation requirements, including the maintenance of evidence.
- 2.4 Establishes and maintains processes for ensuring the North Executive Committee and NMHS Board Committees are provided with relevant information regarding accreditation readiness, including any risks or issues and action plans to address these.
- 2.5 Provides input into clinical and corporate governance and risk management processes, and hospital policies and procedures to ensure alignment with accreditation standards.
- 2.6 Identify and initiate accreditation related risks and ensure appropriate risk management plans are in place to manage the risks.
- 2.7 Oversees the program to ensure AS5369 compliance across the NMHS.
- 2.8 Develops and maintains structures and processes that enable the effective assessment, monitoring & review of clinical services, & which minimise risk & emphasise the delivery of safe high quality, consumer focused care.
- 2.9 Oversees the development of monitoring and evaluation of clinical governance structures, processes and performance measures.
- 2.10 Provides expert advice, support and resources to NMHS in understanding and meeting the organisation's requirements for clinical governance and performance review.
- 2.11 Leads the process that ensures procedures for clinical incident reporting, mortality and coronial review and risk management are integrated into organisational structures and actioned in accordance with DOH/NMHS/Hospital policies.



**3. Performance, Analysis and Evaluation**

- 3.1 Leads the processes for clinical incident and consumer feedback systems within the NMHS.
- 3.2 Oversees the monitoring and evaluation of clinical performance and safety and quality measures against state and national requirements.
- 3.3 Manages, plans and directs clinical performance audits and/ or reviews of NMHS activities/ systems to ensure safe high quality patient care.
- 3.4 Ensures the generation, dissemination and discussion of system reports that assist in the analysis of results and the identification of clinical risks and trends that direct and inform improvements to NMHS programs and services.
- 3.5 Provides advice on and develops clinical performance measures and indicators.

**4. NMHS Values: *Care, Respect, Innovation, Teamwork, Integrity***

- 4.1 Reflect the NMHS values in the way you work, behave and make decisions.

**5. NMHS Governance, Safety and Quality Requirements**

- 5.1 Ensures, as far as practicable, the provision of a safe working environment in consultation with staff under their supervision.
- 5.2 Participates in an annual performance development review and undertakes performance development review of staff under their supervision.
- 5.3 Supports the delivery of safe patient care and the consumers' experience including identifying, facilitating and participating in continuous safety and quality improvement activities, and ensuring services and practices align with the requirements of the National Safety and Quality Health Service Standards and other recognised health standards.
- 5.4 Completes mandatory training (including safety and quality training) as relevant to role.
- 5.5 Performs duties in accordance with Government, WA Health, North Metropolitan Health Service and Departmental / Program specific policies and procedures.
- 5.6 Abides by the WA Health Code of Conduct, Occupational Safety and Health legislation, the Disability Services Act and the Equal Opportunity Act.

**6. Undertakes other duties as directed.**



## Work related requirements

The following criteria should be considered in the context of the NMHS Vision, Mission and Values.

### Essential Selection Criteria

1. Demonstrated ability and record of achievement as a program leader/ senior manager in the areas of safety and quality, clinical governance and delivering patient focused outcomes in a large and complex health care environment.
2. Strong knowledge and demonstrated understanding of national standards, accreditation process and clinical incident management processes.
3. Demonstrated knowledge and understanding of risk management principles and clinical governance systems and processes.
4. Demonstrated abilities in the area of organisational change management.
5. Demonstrated extensive interpersonal, verbal and written communication skills with strengths in negotiation, relationship building report writing and presentation skills.

### Desirable Selection Criteria

1. Tertiary/ professional qualifications in a health-related discipline or extensive relevant experience accepted as professionally equivalent.
2. Current knowledge and commitment to Equal Opportunity in all aspects of employment and service delivery.

### Appointment prerequisites

Appointment is subject to:

- Provision of the minimum identity proofing requirements.
- Successful Criminal Record Screening Clearance.
- Successful Pre-Employment Integrity Check.
- Successful Pre-Employment Health Assessment.

## Certification

The details contained in this document are an accurate statement of the duties, responsibilities and other requirements of the position.

### Manager/Supervisor

Name:  
Signature/HE:  
Date:

### Dept./Division Head

Name:  
Signature:  
Date:

### Position occupant

Name:  
Signature:  
Date:

