



Clinical Review Committee

ANNUAL REPORT TO THE PUBLIC for 2018/2019

ON

QUALITY IMPROVEMENT ACTIVITIES UNDERTAKEN OR OVERSEEN

BY

**CLINICAL REVIEW COMMITTEE
THE MOUNT HOSPITAL
PERTH**

Please send completed reports to:
Quality Improvement and Change Management Unit
Department of Health
PO Box 8172
Perth Business Centre
Perth WA 6849
Or email to QICM@health.wa.gov.au

If you require any further information, or have any queries, please contact the Quality Improvement and Change Management Unit on 9222 4080.

Please note: The information you provide in this form must not identify, directly or by implication, any individual health care provider or receiver.

Contact details of person providing the report:

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Position: General Manager

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Signature:



1. Name of Committee

Mount Hospital Clinical Review Committee

2. Facility Contributing to the Committee

Mount Hospital, 150 Mounts Bay Road, Perth, Western Australia

3. Report Availability

The report will be available to the public on the Mount Hospital website in February/March 2019.

4. Clinical Review Committee Terms of Reference and Functions

a) Current Terms of Reference

The Clinical Review Committee at the Mount Hospital is the formal committee through which clinical outcomes and patient care issues are monitored and evaluated. The purpose of the committee is to facilitate open communication for to improving patient outcomes through identification of vulnerabilities in systems and processes. This is achieved through review of, and reference to, individual incidents or episodes of patient care.

Specific functions of the Committee include:

- Assessment and Evaluation: to assess and evaluate the quality of healthcare services, including the review of clinical practices
- Reporting and Recommending: to report and make recommendations to the governing body concerning health service delivery and clinical practice, and
- Monitoring and Implementation: to monitor and implement recommendations made as a result of assessment and evaluations undertaken by this committee.

The Terms of Reference for the Committee were reviewed in February 2019 and will be reviewed again in February 2020.

4. Activities undertaken by the Clinical Review Committee for which Qualified Privilege was required.

Examples of activities undertaken by the Clinical Review Committee during this period include:

Description	Action Taken	Outcome
Review of Clinical Practice Indicators	A review of cases notes and reported to CRC on, <ul style="list-style-type: none"> Unplanned readmission within 28 days Unplanned returns to theatre 	Ongoing monitoring to ensure that evidence based practice is in place. The Clinical Review Committee will again be analysing and reviewing these clinical practice indicators in 2019.
Review adverse clinical events	Adverse clinical incidents, resulting in severe harm or death (SAC 1) are reviewed. Qualified privilege allows for comprehensive investigation of any such incidents and lessons learnt enable the Mount Hospital to optimise the safety and quality of services provided to patients.	Effective monitoring and evaluation is in place to assist the hospital to ensure optimal patient outcomes.
Review clinical indicator data	Clinical Indicator (CI) data is reviewed and discussed. This data highlights areas where the organisation is statistically variable to other areas within the hospital as well as peer comparison groups. If any clinical indicator is found to be below target, rigorous investigation will take place to identify the reason.	These clinical indicators continue to be monitored closely and are reported to ACHS as well as Healthscope corporate on a quarterly basis. No obvious trends or issues were identified in this reporting period. This next reporting period will see another review of both unplanned returns to theatre as well as the addition of unplanned readmissions within 28 days to analyse and identify any trends, learnings and potential issues, and devise an action plan accordingly which will be overseen by the Clinical Review Committee.
Mortality Review	All deaths and serious morbidity are reviewed and classified according to WA Department of Health regulatory requirements	100% of deaths were reviewed and reported to the Patient Safety and Surveillance Unit as per WA Department of health Review of Death Policy.

5. Public Interest

The functions of the Clinical Review Committee of the Mount Hospital support the achievement of the following objectives in the course of its activity:

- Ensuring that the delivery of patient care at the Mount Hospital is maintained at an optimal level of quality and efficiency and all statutory requirements are met.
- Ensuring that the clinical review monitoring and assessment activities are appropriate for the hospital and comply with the philosophy and vision of the organisation.
- Making recommendations to the Medical Advisory Committee regarding ongoing management of clinical review processes
- Making recommendations to the Hospital Executive for the purposes of peer review relating to clinical practice, processes and systems as required.
- Reviewing and making recommendations in regard to transfers in and out of the hospital, special care units, and unexpected returns to theatre, SAC 1 incidents and sentinel events.
- Evaluating outcomes of all activities arising from, and pertaining to the Clinical Review Committee.

In order for the above objectives to be met it is appropriate that the Committee, and relevant clinicians who are invited to participate in the activities of the Committee are provided a forum to openly discuss and debate clinical practice in the knowledge that information is protected under the auspices of the Committee, and that the disclosure of information discussed and tabled at the Committee is not vulnerable to public disclosure and is afforded protection by the Act.