

- ABOUT CHI
- NEWS RELEASES
- CONTACT CHI
- INVESTIGATIONS
- NATIONAL STUDIES
- CLINICAL GOVERNANCE REVIEWS
- COMMISSION MEETINGS
- REPORTS

CLINICAL GOVERNANCE REVIEWS



- HOME
- SITE INDEX
- SEARCH
- LINKS

◀ Clinical governance reviews

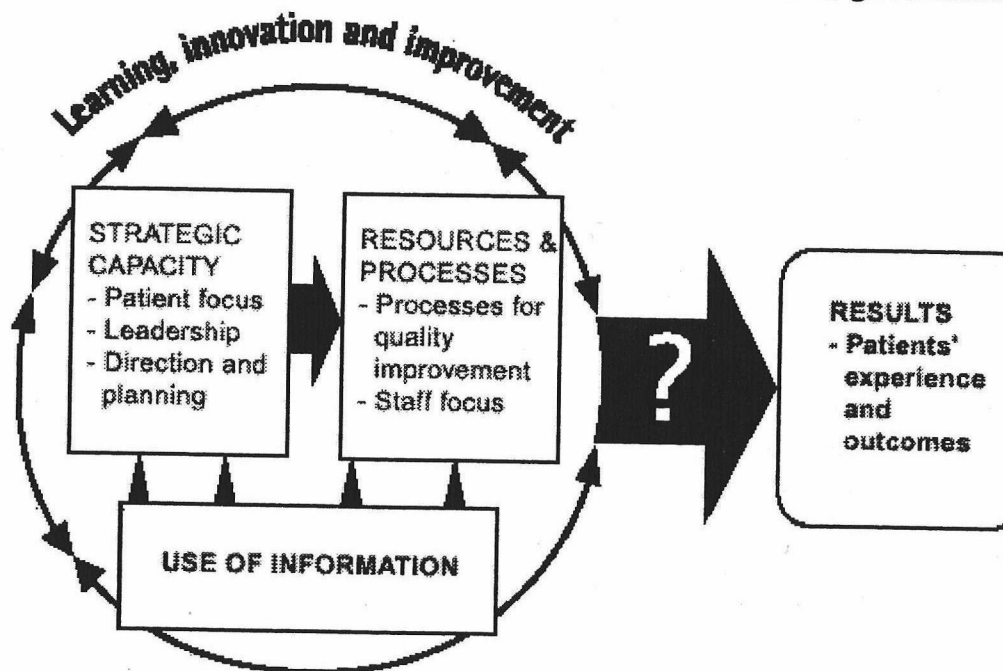
Assessing clinical governance

Download this document
 168kb (this version updated 20.09.01)

CHI is introducing a systematic framework for assessing clinical governance in trusts so that judgements made in reports of reviews are reliable, fair and consistent. The assessment framework is being developed with the NHS Clinic Governance Support Team in England and the Clinical Effectiveness Support Unit (CESU) in Wales (CESU closed at the end of March 2001). This will ensure that consistent messages are given to trusts about clinical governance.

CHI's model for clinical governance (Figure 1) illustrates its belief that effective clinical governance depends upon a culture of continuous learning, innovation and development and will improve patients' experience of care and treatment in hospital. Over time, CHI will use the information it accumulates from reviews to help determine which aspects of clinical governance are the most important for improving patients' experience and outcomes.

Figure 1: CHI's model for clinical governance



Work is in progress to identify the dimensions of the patients' experience and outcomes under the 'RESULTS' part of the model so that CHI can assess the information it collects about what it is like to be a patient and interpret information about clinical processes and care outcomes.

CHI evaluates clinical governance by exploring three key, interlinked areas identified in the mode

- strategic capacity: how far does the trust's leadership set a clear overall direction that focuses on patients? How well is it integrate throughout the trust?
- resources and processes: how robust are its processes for achieving quality improvement such as consultation and patient involvement and clinical audit? How effective are the trust's arrangements for staff management and development?
- use of information: what information is available on patients' experience, outcomes processes and resources, and how does the trust use it strategically and at the level of patient care?

Each of these areas comprises a number of components that CHI examines in every trust. CH has so far identified seven components of 'RESOURCES AND PROCESSES' and 'USE OF INFORMATION' (Figure 2). Work is being carried out to identify the components of 'STRATEGIC CAPACITY'.

Figure 2: Components of clinical governance resources and processes and use of information

	Component
Resources and processes	
(i) processes for quality improvement	Consultation and patient involvement
	Clinical audit
	Clinical risk management
	Research and effectiveness
(ii) staff focus	Staffing and staff management
	Education, training and continuing personal and professional development
Use of information	Use of information to support clinical governance and health care delivery

CHI's review teams assess how well clinical

governance is working throughout the trust by making enquiries about each of these seven components at corporate and directorate levels and in clinical teams. This involves collecting information systematically about review issues that have been defined for each component. CHI will introduce similar methods to assess information collected about components of 'STRATEGIC CAPACITY' in future rounds of reviews.

On the basis of the evidence collected, CHI's reviewers assess each component of clinical governance against a four-point scale:

- I. little or no progress at strategic and planning levels or at operational level
- II. worthwhile progress and development at strategic and planning levels or at operational level, but not at both
- III. good strategic grasp and substantial implementation. Alignment of activity and development across the strategic and planning levels and operational level of the trust
- IV. excellence – co-ordinated activity and development across the organisation and with partner organisations in the local health economy that is demonstrably leading to improvement. Clarity about the next stage of clinical governance development

There is wide variation within trusts in progress made developing the component parts of clinical governance. At this stage of development, CHI believes it is most useful to trusts to assess each component separately to help them prioritise their development of clinical governance. It will not make judgements to produce an overall rating for a trust.

[Top](#)

About CHI	News Releases	Contact CHI	Investigations
National Studies	Clinical Governance Reviews	Commission Meetings	Reports/Action Plans
Jobs at CHI	Site Index	Links	Home

This page last modified: November 23
 Copyright 2001: The Commission for Health Improvement
 Commission for Health Improvement Home
 Contact CHI: information@chi.nhs.uk
 Comments or queries about web site: webmaster@chi.nhs.uk