

**Psychological Medicine Clinical Care Unit (PsMCCU)
CLINICAL REVIEW COMMITTEE**

**ANNUAL REPORT TO THE PUBLIC
ON
QUALITY IMPROVEMENT ACTIVITIES UNDERTAKEN OR OVERSEEN
BY
(Psychological Medicine Clinical Care Unit (PsMCCU)
CLINICAL REVIEW COMMITTEE**

**Please send completed reports to:
Dr Simon Towler
Chief Medical Officer
Department of Health
PO Box 8172 Perth Business Centre
Western Australia 6849**

If you require any further information, or have any queries, please contact the Office of Safety and Quality in Health Care on 9222 4214.

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:

Name: ...Trudi Ruane

Tel: 9382 0730.....

Email: ...trudi.ruane@health.wa.gov.au.....

Signature:.....

1. Name of Committee.

Psychological Medicine Clinical Care Unit Clinical Review Committee

2. Name the health care facilities that contribute to this Committee.

Women's and Newborn Health Service, King Edward Memorial Hospital

Child and Adolescent Health Service, Princess Margaret Hospital

3. Give a brief description of the purpose of Qualified Privilege including the public interest in denying access to information for the purpose of encouraging participation by health care professionals in quality assurance.

Qualified privilege allows clinicians to engage in the process of quality improvement through detailed assessment of Psychological Medicine Clinical Care. The qualified privilege granted to Psychological Medicine Clinical Care Unit (PsMCCU) Clinical Review Committee creates a forum whereby issues regarding continued improvement of professional practice can be discussed in a non-adversarial, 'no blame' environment, with the objective of identifying system issues requiring improvement.

Periodically the information discussed within PsMCCU Clinical Review Committee meetings can be personal, frequently concerning staff and/or patient/client names and details. For that reason it is imperative that PsMCCU Clinical Review Committee provide protection regarding the disclosure of personal and sensitive information. Meeting discussions are minuted in a confidential manner and stored in a secure location ensuring privacy of personal details. The Qualified Privilege afforded to PsMCCU Clinical Review Committee has encouraged the reviewing of issues influencing the system as a whole, thereby providing an avenue for exploring the quality of service provided and determining methods for continued measurable improvement.

4. Describe the main functions of the Committee.

The main functions of the Committee involve assessment, review, evaluation and monitoring of the quality of health service provision within PsMCCU including the review of clinical practices and identification of system failures. For further information please refer to the Terms of Reference attached; specifically section 2.0 Purpose, and 3.0 Function and Responsibilities

5. Attach the Terms of Reference (TOR)

Please see attached Terms of Reference

6. Describe the categories of membership of the declared Committee.

Members of PsMCCU Clinical Review Committee are drawn from the spectrum of clinical staff members involved in providing care; that is psychiatrists; psychologists; mental health nurses; and social workers. For more detailed information please refer to the Terms of Reference attached; specifically section 8.0 Membership.

7. A brief description of issues, projects and/or activities undertaken by the Committee for which Qualified Privilege was required. For the selected items, please answer the following questions:

a) What services have been assessed and evaluated by the committee?

- Adverse incidents assessment, review, evaluation and monitoring
- Clinical guidelines and pathways assessment, review, evaluation and monitoring
- Audit; quality activities; assessment, review, evaluation and monitoring.
- Review of generic and clinical guidelines and processes.
- Clinical Indicators assessment, review, evaluation and monitoring.
- Safe workplace environment inspections are reviewed, and monitored.
- Consumer involvement, complaints and compliments; feedback evaluations are assessed, reviewed and monitoring.

b) What action has been taken as a result of the assessment and evaluation?

- Improved staff awareness of processes and procedures through review of all clinical pathways and guidelines as well as critical incidents and near misses.
- Modification of/or introduction of generic and clinical guidelines
- Improved professional practice through education and training.
- Improved quality and handling of records through the review and updating of processes, forms, assessments and documentation.
- Provision of safe clinical care environment for both staff and consumers through workplace inspections and emergency preparedness training techniques.
- Improved service provision and programming needs for the consumer through involvement and collaboration.

c) What were the results of the action and the lessons learnt?

Results of actions determined:

- Ongoing commitment to the promotion of both awareness and performance through education, and training.
- Continued focus on promoting consumer awareness and increasing consumer involvement.
- Improving techniques of handling and responding to aggression.
- Improving workplace and clinical care physical environments.
- Improving responses to critical incidents.
- Improving awareness and responses to emergency situations.
- Ongoing provision of safe and health promotion environments.

8. Attach a summary of the information management policy.

In accordance with the *Health Service (Quality Improvement) Act 1994* discussions, deliberations and decisions of the meeting shall not be conveyed to unauthorised persons. Divulging or communicating information acquired solely as a result of involvement in the activities of the Committee will only occur:

- for the purposes of the performance of the functions of the Clinical Review Committee;

- for the purposes of furnishing reports to relevant governing body;
- in accordance with any standards established by the Minister of Health;
- and with the written consent of the person to whom the information relates.

A person who is or has been previously a Committee member cannot be compelled to;

- produce a document that was created by, or at the request of, the Committee before a court or tribunal, board or person or;
- divulge or communicate to any court, tribunal, board or person any matter or thing that came to the person's attention through his or her membership of the Committee.

PsMCCU Clinical Review Committee members are aware of and comply with the requirements of the Health Service Quality Improvement Act 1994 regarding the disclosure of information. Reports provided to the Medical Advisory Committee's at PMH and KEMH contain de-identified information. For further information please refer to the attached Terms of Reference; specifically; section 6.0 Confidentiality.