



# Quality and safety in Health Care

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# Senate update

- ▶ Thank you to retiring Senators
- ▶ Recommendations on homelessness and interpersonal violence
- ▶ Alumni news

# Aim 1 Clinical engagement on the Review

- ▶ Review of safety and quality in the WA health system
- ▶ Two presentations by Professor Mascie-Taylor
- ▶ Opportunity to ask questions
- ▶ Presentation on what matters to consumers in quality and safety

## Aim 2 A clinician voted set of clinical indicators

- ▶ Plenary debate where you have the opportunity to argue for or against particular indicators

Benchmarking – Yes  
But what to benchmark?



# Who selects the clinical indicators?

- ▶ Working groups in health departments or quality and safety offices
- ▶ Limited two way clinical engagement
- ▶ No publication of clinician voted indicators

# The list of indicators

- ▶ Collated from five data sets
- ▶ These are:
  - ▶ WA health
  - ▶ Victorian health
  - ▶ Private hospitals Australia
  - ▶ Australian Commission on Quality and Safety in Health Care; and
  - ▶ Prior WA Clinical Senate debates.

# The question

- ▶ *If you were responsible for the quality and safety of a major health service that included several hospitals and community facilities, and you asked management to generate a list of 20 indicators for your Board or Committee to review, which 20 indicators would you want to see?*



# Six domains of quality

- ▶ Safety
- ▶ Patient centeredness
- ▶ Efficiency
- ▶ Timeliness and accessibility
- ▶ Effectiveness and appropriateness
- ▶ Equity

# Other considerations

- ▶ Think beyond general medicine and surgery to include obstetrics and gynaecology, mental health, paediatrics, primary care and preventative or public health
- ▶ Consider indicators that cover both breadth and depth
- ▶ Consider indicators that address both quality and safety

# How the Clinical senate conducts business

- ▶ Work collaboratively
- ▶ State you opinions freely
- ▶ Feel empowered to influence others
- ▶ Play a leadership role