



Medical Leader	<input type="checkbox"/>
Medical Expert	
Communicator	•
Advocate	•
Scholar	
Professional	
Collaborator	
Manager	•

## Board Governance Of Safety And Quality

2014 Day 2 – Q2 (Compulsory)

You are advising the chief executive of a large health district with 1 tertiary hospital and 3 smaller secondary level facilities. The district board comprised of experienced corporate directors meets monthly. At your last meeting board members expressed serious concerns regarding their responsibilities in relation to quality of care and patient-safety issues and their inability to know where the real safety issues were in the health service. They sought your assurance as to how they could monitor that issues were being addressed appropriately. The Chair has recently read the report of a large UK inquiry that provided damning evidence of patient safety failures in a health service.

The Chair also points out that they are not alone in struggling with their responsibilities. Their concerns are similar to those in a recent report in the local newspaper of a study published in an international journal regarding public hospital boards and executives struggling to deal with quality of care and patient-safety issues despite the buck stopping with them if things go wrong.

The report on the study published in the journal *BMJ Quality and Safety* said although some of the boards were engaged in activities aimed at improving the quality of care, one chair of a hospital board said: "Major investigations in the health sector still come about through whistleblowers, not data."

Another chair of a regional hospital board said: "The finance consumes a lot of time because we run in deficit."

The article also reported that "Several board members said that when there is a big failure in their healthcare system, they will sometimes still find out about it by reading it on the front page of the newspaper. So even though they are getting volumes and volumes of board reports... they still don't feel like they're getting the right information".

The Chair of the Board asks you to prepare a briefing and presentation to the board on how the health service can address these concerns.



## Censor's Notes

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Guide to answer:

- wide variation in engagement with quality-of-care matters such as monitoring death and injury rates that might be caused by errors or systemic negligence
- ministerial appointments undermining the right mix of skills required on boards to govern hospitals
- political influences
- skills and expertise of board members
- appointment process for board members - merit and skills based."
- setting priorities, monitoring progress, holding staff to account, shaping culture
- barriers such as a lack of time, resources and training, as well as being preoccupied with their fiscal responsibilities
- difficulty in getting the right information at the right time to monitor their hospitals
- unhelpful regulation such as multiple levels of accreditation often took over
- national performance measures
- better training and refined data collection
- remuneration of members
- poor board oversight had been identified as a contributing factor to many high-profile failures in care including Britain's Mid-Staffordshire Hospital scandal. (Reference to Francis Report)
- <http://www.theage.com.au/victoria/public-hospital-boards-struggle-with-patient-care-and-safety-study-finds-20131220-2zoqz.html#ixzz2nzJKV2v5>