



CLINICAL GOVERNANCE

PERFORMANCE REPORT 2022-2023



Australian Government
Australian Digital Health Agency

Australian Digital Health Agency

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MESSAGE FROM THE CHAIR

Dear Ms Cattermole PSM,

On behalf of the Clinical Governance Committee I am pleased to submit the second Clinical Governance Performance Report for the period 2022-23.

The Agency Board endorsed this report's content in October 2023.

The report captures an extraordinary year of activity that saw a significant refresh of the Clinical Governance Framework in Digital Health, underpinned by five principles to guide our work. Across the Agency we delivered projects that included the release of new APIs to support greater connections to My Health Record, the my health app and the Connecting Australian Healthcare - National Healthcare Interoperability Plan. These products and services were developed with the full participation of our clinical governance team and the Digital Health Adviser service, comprised of healthcare providers, consumers and carers from across Australia.

Now more than ever, Australians demand access to their health information in a way that suits them - on devices and at times and places that conventional practice does not always contemplate. The role of clinical governance and safety and quality improvement is critical to supporting delivery of products and services that are safe and effective. Sound clinical governance also supports the community's expectation of having high-quality consumer health information shared safely and securely to aid their efforts for maintaining or regaining better health outcomes.

As we work through the Australian Government's ambitious plans to deliver a better-connected Australian healthcare system, we must grow our clinical governance capabilities through a highly-skilled workforce supported by more clinicians. The Clinical Governance and Assurance Branch, brought together in the Agency in 2023, is well placed to lead the charge in achieving this and much more.



Dr Steven Hambleton AM

Chair

Clinical Governance Committee

15 February 2024



MESSAGE FROM THE CHIEF EXECUTIVE



Clinical governance, safety and quality improvement are at the heart of how we ensure the digital health products and services developed and managed by the Agency are safe and effective. The system of behaviours, relationships, monitoring and reporting that support the organisation are at the forefront of Australian digital health safety and quality. Our foundational document, the Clinical Governance Framework for Digital Health is used well beyond the boundaries of the Agency as an easy to access, evidence-based approach to developing a safety and quality approach appropriate to the digital health context.

The five principles that underpin the framework articulate the way that the Agency approaches design, development, monitoring and evaluating digital health products and services. When applied consistently, we have seen how these principles inform the development of person-centred products and services where the evidence base for the design and useability is clear. We leverage our partnerships across the health and technology sectors to inform national advice and guidance on digital health policy. We are systematic in our evaluation of product, service effectiveness and safety and take our monitoring responsibilities very seriously.

Those partnerships – and the extraordinary digital health clinical, industry and academic network – came together on a sunny day on 7 February 2023 to discuss clinical governance, safety and quality in the context of digital innovation and begin in earnest the next phase of the national conversation on this critical topic. Since that time the conversation has been further fanned by the Agency's commitment to supporting clinical governance in digital health across Australia.

I extend my thanks and gratitude to Dr Steve Hambleton, the Agency's Chief Clinical Adviser, for his role in developing this report and chairing the Agency's Clinical Governance Committee. I also extend my thanks to the outstanding Clinical Governance and Assurance team for their diligence in preparing this report, the Committee meeting agendas and papers, the February 2023 Clinical Governance Summit and their continued passion and commitment to a safer, better, more effective digitally enabled healthcare system.

A handwritten signature in black ink, appearing to read 'Amanda Cattermole'. The signature is stylized and fluid.

Amanda Cattermole PSM
Chief Executive Officer
Australian Digital Health Agency
6 March 2024

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SUMMARY AND HIGHLIGHTS

This report provides insight into clinical governance performance within the Agency. Its purpose is to demonstrate how the Agency has met its obligations under the [Public Governance, Performance and Accountability \(Establishing the Australian Digital Health Agency\) Rule 2016](#) (Cth) Part 2, 9(1)(d).

The Agency is accountable to the Australian community to improve health and care through the adoption and use of innovative digital health products and services. Clinical governance promotes clinical safety, quality and continuous improvement in the delivery of health and care, including through health technologies. It comprises a culture of safety and quality that is supported by health and care leadership, and a set of relationships and responsibilities established by our Agency, together with our partners, our workforce and our consumers.

Building on the 2021–22 Clinical Governance Performance Report, this report demonstrates how the Agency has increased its clinical governance maturity over the 2022–23 financial year. In 2022–23, the Agency demonstrated its leadership in clinical governance in digital health with the hosting of a Summit on Clinical Governance in Digital Health in February 2023, in partnership with the Australian Commission on Safety and Quality in Health Care (the Commission), the inaugural publication of the 2021–22 Clinical Governance Performance Report and the publication of a refreshed Clinical Governance Framework for Digital Health (the framework).

Following publication of the framework, effort commenced on embedding the five framework principles across the Agency, and this report provides insight into these activities up to and including 30 June 2023.



Figure 1: Clinical Governance Framework for Digital Health principles





In 2022–23, the Agency progressed significant activities to embed clinical governance across its programs, products and services, including the key achievements highlighted below.

Highlights for 2022–23

The highlights below are contributions to the Agency’s Corporate Plan key strategic objectives for 2022–23 aligned to the Agency’s clinical governance principles.

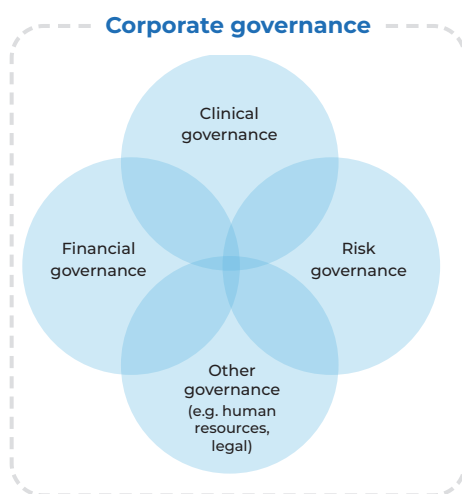
Highlights for 2022–23	
Corporate plan and clinical governance alignment	Achievements
 <p>Agency strategic priority 1: Design, deliver and manage infrastructure, solutions and initiatives that provide access to and promote adoption of secure digital health services.</p> <p>Clinical governance principles:</p> <ul style="list-style-type: none"> • System safety and quality improvement • Evidence-based practice • Partnership • Leading with our people • Person-centredness 	<ul style="list-style-type: none"> • The Clinical Safety team provided clinical safety assurance and reporting on 6 My Health Record system releases. Notable changes include immediate access to international normalised ratio (INR) and HbA1c pathology test results for consumers. • The Clinical Safety team and Agency digital health advisers (DHAs) were routinely embedded in project co-design teams, steering committees and programs of work. Clinical governance was engaged early, at ideation stage of the project life cycle through the Enterprise Portfolio Management Office (EPMO).
 <p>Agency strategic priority 2: Facilitate national digital health interoperability between healthcare providers and the systems they use to improve the visibility of health information, leading to better decisions and health outcomes for consumers.</p> <p>Clinical governance principles:</p> <ul style="list-style-type: none"> • System safety and quality improvement • Evidence-based practice • Partnership • Leading with our people • Person-centredness 	<ul style="list-style-type: none"> • Clinical governance has underpinned key pieces of Agency work designed to improve the sharing of information throughout the healthcare sector. This included the development of the National Healthcare Interoperability Plan 2023–28, which was released early in 2023 supported by the newly established Council for Connected Care, and work in the aged care sector and NSW local health districts.

Corporate plan and clinical governance alignment	Achievements
 <p>Agency strategic priority 3: Deliver digital health services, systems and products that are sustainable and cost-effective.</p> <p>Clinical governance principles:</p> <ul style="list-style-type: none"> • Leading with our people • Partnership • System safety and quality improvement • Evidence-based practice 	<p>The Clinical Governance and Clinical Safety teams initiated a significant program of work to integrate clinical governance and systems-safety thinking across the Agency. This has included:</p> <ul style="list-style-type: none"> • development of resources to support the rollout of the framework across the Agency • updating of policies, processes and procedures that support clinical safety management in the Agency • widespread use of DHAs across multiple Agency-led projects, including clinical risk assessment, medical terminologies, allied health engagement and aged care. Clinical governance was engaged early, at ideation stage of the project life cycle through the EPMO.
 <p>Agency strategic priority 4: Build an Agency culture and leadership strength that supports clear accountability, staff engagement, capability growth and staff satisfaction.</p> <p>Clinical governance principles:</p> <ul style="list-style-type: none"> • Leading with our people 	<ul style="list-style-type: none"> • The Clinical Governance Committee (CGC), comprising senior Agency staff and 2 external members, met 9 times in the period. • Teams presented 18 different pieces of work from the Agency’s 2022–23 workplan to demonstrate to the CGC how clinical governance is embedded across the Agency. • The Agency, in partnership with the Commission, held a successful Summit on Clinical Governance in Digital Health in February 2023 which was attended by over 900 people in-person and virtually. The summit was successful in enhancing networking and partnerships and met its primary aim to start a national conversation about clinical governance in digital health. • Clinical governance staff presented at national events to provide national leadership about implementing clinical governance in the digital health setting. • Clinical governance was explicitly included in the Agency Risk Management Framework and the Agency Corporate Plan 2022–23.

1. CLINICAL GOVERNANCE IN THE AUSTRALIAN DIGITAL HEALTH AGENCY

Clinical governance at our Agency is the interconnected responsibility of all our workforce and our partners. Our [Clinical Governance Framework for Digital Health](#) (the framework) supports a safety and quality culture that involves a complex collection of leadership behaviours, rules, procedures, monitoring and improvement methods aimed at ensuring better health outcomes.

Figure 2: Corporate governance¹



Clinical governance does not work in isolation but as an integrated component of corporate governance (Figure 2). Clinical governance at the Agency is of equal importance to financial, risk and other corporate governance responsibilities. It ensures that our entire workforce – from administration support officers, project managers, architects and technical engineers to managers and members of our executive committees and Agency Board – is accountable to the Australian community for ensuring the delivery of products and services that are accessible, clinically safe, person-centred, effective, of high quality and subject to continuous improvement.

Digital health services and technologies are rapidly changing how health and care are provided and experienced globally. Digital health presents possibilities for expanding the depth and scope of available information at point of care, enabling connected care and streamlining processes to minimise errors. Anticipated outcomes include improved health and care outcomes and experiences for the Australian community.

These opportunities also raise challenges that require active engagement to ensure that the anticipated outcomes for consumers and healthcare providers are met. This includes preventing or minimising potential clinical safety hazards and risks during a consumer's health and care journey.

¹ Source: Australian Commission on Safety and Quality in Health Care, [National Model Clinical Governance Framework](#), 2017.

Operating within health technologies demands continuous vigilance, upheld by clinical governance and a safety-oriented culture. Such measures are necessary to establish, implement and sustain oversight and management of clinical safety and quality improvements in digital health. These challenges go beyond technology and encompass the broader implications of digital enablement throughout the entire healthcare system. These efforts are supported by and align seamlessly with our framework principles.

1.1 Our purpose

The Agency has a responsibility to ensure clinical safety and quality improvement throughout the development of the products, services and infrastructure it manages, to support Australians through better connected care and providers of direct clinical care for the Australian community.

Part 2, 9(1)(d) of the Agency's establishing legislation, the [Public Governance, Performance and Accountability \(Establishing the Australian Digital Health Agency\) Rule 2016](#) (Cth) (PGPA Rule) states that a core function of the Agency is to:

... develop, implement and operate comprehensive and effective clinical governance, using a whole of system approach, to ensure clinical safety in the delivery of the national digital health work program.

We also have a responsibility under the [My Health Records Act 2012](#), Part 1, section 3 to reduce fragmentation, improve the availability and quality of health information and reduce adverse events – all of which are underpinned by clinical governance.

In 2022–23, the Clinical Governance section of the Agency was organisationally situated within the Digital Health Standards and Governance branch under the direction of the Agency's Chief Digital Officer. The section's responsibilities include:

- embedding clinical governance, through the framework and supported by the Clinical Governance Committee (CGC)
- delivering clinical governance leadership, education and advice on digital health initiatives to ensure systems and products are fit for purpose in health and care
- providing clinical safety analysis, advice and assurance in the design, build and implementation of systems and products to support the delivery of clinically safe products and services for consumers and healthcare providers
- oversight of the partnership agreement between the Agency and the Australian Commission on Safety and Quality in Health Care (the Commission)
- coordination of digital health advisers (DHAs) to facilitate consumer and healthcare provider collaboration and expertise into the design and development life cycles of our Agency products and services.

The Clinical Governance section supports the embedding of clinical governance at the Agency – at the core of everything we do – from product development to operations and incident management. The section also works in close collaboration with the Agency's Chief Clinical Adviser, who supports the Senior Executive Committee, Chief Executive Officer and DHAs and chairs the CGC to ensure the Agency delivers programs and projects that are high quality and clinically safe.

1.2. External assurance

Since 2012, the Commission has partnered with the Agency, making significant contributions in shaping My Health Record as well as other Agency products and services.

In 2022–23, through the current memorandum of understanding (MOU) between the Commission and the Agency, the partnership continued to embed the importance of both organisations' roles in promoting safety and quality in digital health and, ultimately, in supporting better health outcomes and experiences for Australians.

In 2022–23, in keeping with the requirements of the MOU:

- meetings between the chief executive officers of each agency were held biannually during the period
- partnership meetings between senior leaders of each agency were held monthly.

Collaboration occurred on the following to support the agencies' shared vision of effective clinical governance and clinical safety and quality of the national digital health work program:

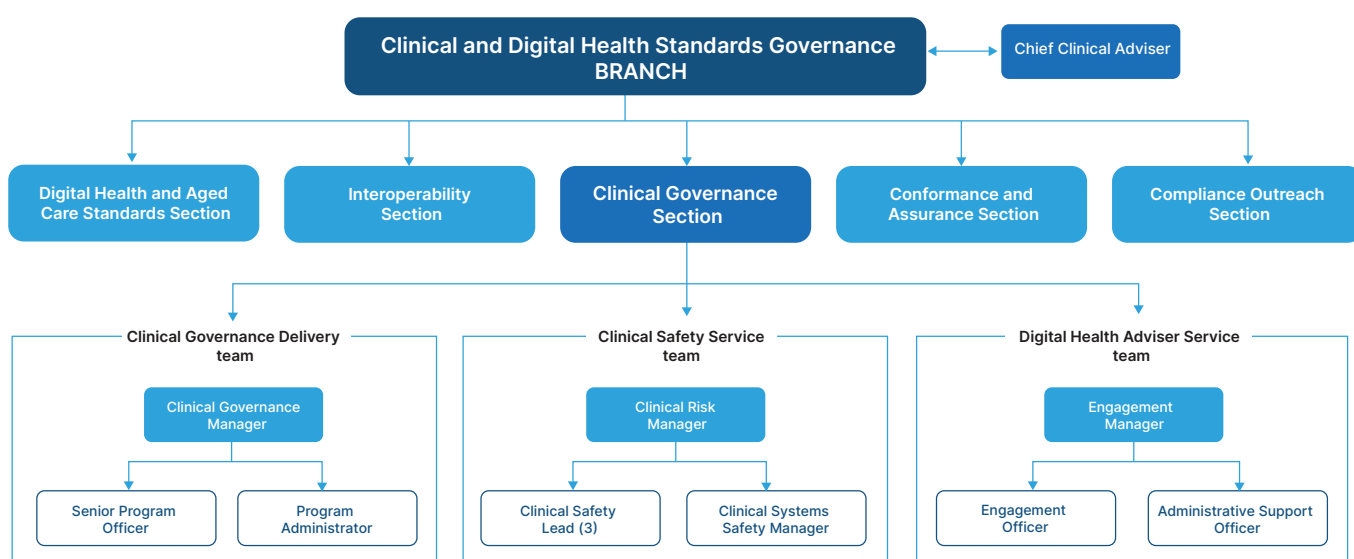
- Clinical Governance Committee
- Aged care program
- Interoperability project
- Partnerships, education and clinical use project
- Clinical terminology project
- Data quality in hospitals project
- Implementation resources for Clinical Governance Framework project
- Agency electronic prescribing incident package
- Unique health identifiers project.



2. CLINICAL GOVERNANCE 2022–23

The Agency provides clinical governance assurance to the Agency through its Clinical Governance section, which comprises healthcare providers, clinical governance specialists and clinical safety specialists who assess clinical risks and develop mitigation and management plans. The section is a single point of entry for the clinical safety service, the Agency’s digital health adviser service, the partnership with the Commission and general clinical governance and framework support and enquiries. The section provides operational oversight for and support to the CGC.

Figure 3: Structure of the Clinical Governance section for 2022–23



In June 2023, the Agency undertook a review of its organisational structure. A key outcome of this restructure was the formation of the Clinical Governance and Assurance branch within the Policy, Programs and Engagement branch. Further information about the restructure is included in section 4.1.

2.1. Embedding Clinical Governance in the Agency

With the publication of the framework in February 2023, the 5 principles have been implemented across the following areas:

- CGC submission template updated with the requirement to demonstrate alignment with the framework principles
- Corporate Plan updated to include clinical governance as a core capability
- Agency Risk Management Framework updated to include the Clinical Governance Framework principles.

Changes to processes included a change to the clinical safety approach. In 2022, the Agency engaged AMOG Consulting to review the Clinical Safety Management System (CSMS), ensuring it meets relevant standards and the Agency’s needs. Following completion of the AMOG review, the Clinical Governance section undertook several planning activities, culminating in an implementation schedule for 2023–24 designed to enhance the CSMS and ensure its effective application across the Agency, supplemented by training and support materials. The scheduled implementation activities were initiated with the support of the Agency’s DHAs who have expertise in safety and quality of health technologies.

By enhancing the CSMS, the underlying policies, processes and procedures will become more user friendly and consistently applied throughout the Agency. This ensures that the approach to clinical safety management within the Agency remains consistent, robust and well-maintained. As an Agency, we have a safety-first approach to the design and development of our products and services.

This process change supports the integration of clinical governance throughout the Agency to develop our clinical governance maturity and embed the framework more deeply.

2.2. Clinical Governance Committee

The CGC began operation in May 2021 and is responsible for ensuring clinical governance is observed in action, is measurable and underpins the Agency's safety, quality and performance agenda. The CGC also provides advice to decision-makers on clinical governance across the Agency.

The CGC is a key Agency advisory committee that supports the Chief Executive Officer in carrying out her functions under the PGPA Rule.

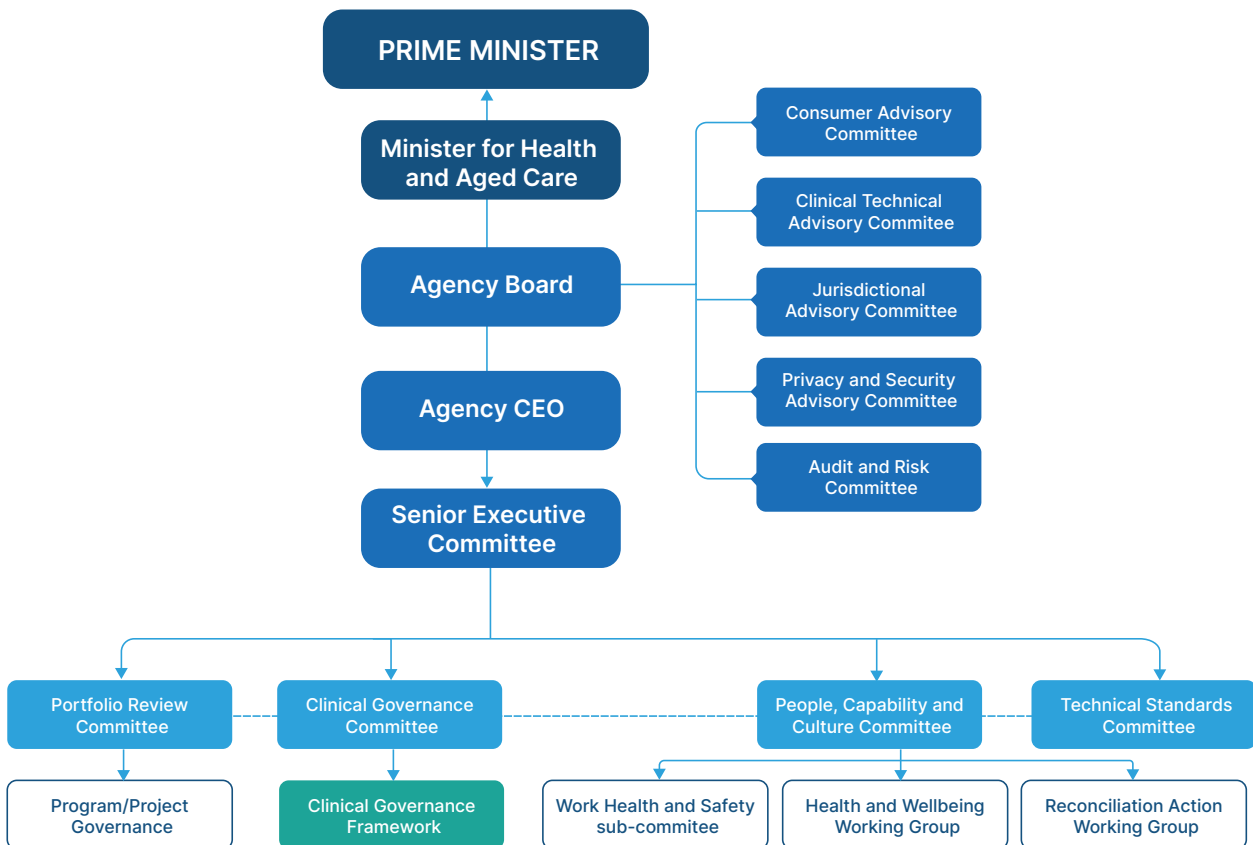
The committee is chaired by the Agency's Chief Clinical Adviser, Dr Steve Hambleton AM. Dr Hambleton is a Brisbane-based general practitioner who has extensive involvement with digital health at a national level. Membership of the CGC includes senior executives and leaders and external clinical experts. Towards the end of 2022, Associate Professor Carolyn Hullick, Emergency Physician and Acting Chief Medical Officer at the Commission, replaced Associate Professor Amanda Walker as an independent clinical member.

Table 1: Current CGC membership

Role	Member
Chief Clinical Adviser (Chair)	Dr Steve Hambleton
Independent clinical member #1	Dr Helen Almond
Independent clinical member #2	Dr Carolyn Hullick
Chief Program Officer	Paul Creech
Chief Digital Officer	Peter O'Halloran
A/g Chief Technology Officer	John Borchi
Branch manager – Enterprise Portfolio Management Office	Penny Lim
Branch manager – Clinical Governance & Assurance	Herbert Down
Branch manager – Strategy and Policy	Jessica Carew
Branch manager – National Program Delivery	Laura Toyne

The committee received reports from the Incident Management team, the Clinical Safety Service team and the Enterprise Portfolio Management Office (EPMO) at each meeting. These reports provide members with oversight of current clinical safety and quality risks and issues. Papers are also tabled from business areas across the Agency to demonstrate alignment to the 5 clinical governance principles. The CGC may also call on internal or external subject matter experts and guests to attend meetings to contribute and progress matters of importance such as progression of the National Digital Health Strategy. Figure 4 demonstrates the positioning of the CGC within the broader Agency governance structure.

Figure 4: Agency governance structure 2022–23



2.3. Clinical Governance team

The Clinical Governance team provides education, advice and support for clinical governance across the Agency. This team also supports the Agency's CGC (see section 2.2) and the Agency's Chief Clinical Adviser, Dr Steve Hambleton.

The team is responsible for:

- implementation of the revised framework and its principles
- providing education and advice to support Agency internal partners to embed clinical governance in their daily activities
- supporting the CGC through the provision of expertise and secretariat support
- supporting the partnership between the Agency and the Commission
- measuring and reporting on clinical governance achievements annually
- providing clinical governance leadership, both internally and externally.

2.4. Clinical safety service

The clinical safety service is delivered by a team of 5 with specialised roles. Staff in these roles have backgrounds in nursing and pharmacy and experience in digital health. This team actively contributes to the development, implementation and operation of Agency products and services through identifying and managing clinical safety and quality risks and issues. The team provides clinical safety advice in consultation with DHAs and Agency stakeholders, actively engaging in project working group meetings.

The Clinical Safety team provides advice and assurance for new and existing products and services by applying the CSMS, which contains policies, processes and procedures to prospectively apply clinical safety analysis to Agency products and services. This service primarily supports the principle of systems safety and quality improvement in the framework. The CSMS guides the identification and management of clinical safety risks in digital health such as:

- incorrect information, where health information in the electronic health record does not match the health and care recipient's medical history; this may be a potential consequence of misidentification, human error, data mapping issue or a system defect
- misleading or ambiguous information, where health information in the electronic health record may be misleading or ambiguous; this may be a potential consequence of human error, a system defect or errors in implementation
- incomplete, absent, hidden or loss of information, where health information intended for sharing may not be shared because of failures in meeting agreed standards, interoperability requirements, implementation issues, expired authentication, system outages or degradation
- context of health information is misunderstood, not understood, not easily understood, not maintained or is unable to be determined.

2.5. Digital health adviser service

The DHA service team manages the engagements, relationships and associated processes to integrate real-world healthcare provider expertise into the Agency's work. DHAs have experience from across the healthcare sector, with a mix of contemporary experience in clinical practice and expertise in digital health.

The Agency conducted a review and refresh of the DHA cohort via AusTender, and 50 DHAs provided contemporary, expert clinical advice in 2022–23 across the breadth of the Agency's work plan. Notably, strong use was seen across several national products, including work to support improvements to My Health Record.

The review of the DHA service demonstrated new opportunities to utilise DHAs' knowledge and clinical expertise in a strategic and systematic way. This included clearly articulating their role in supporting clinical governance and oversight activities to better inform the Agency's work.

2.6. Performance and outcomes

Clinical governance performance within the Clinical Governance section is reported as it aligned to the framework principles in 2022–23.

Leading with our people

The C3.0 Summit on Clinical Governance in Digital Health, a collaborative project between the Agency and the Commission, was held in Sydney on 7 February 2023. The event aimed to start a national conversation about clinical governance in digital health and was built around 3 key themes:

Connect – Connection of industry leaders in health technology and direct care delivery environments to focus on clinical governance in digital health

Care – Collaboration and shared responsibility to embed clinical governance in the development and use of digital health solutions to support safe, high-quality health and care services

Confidence – Building trust and confidence in digital health solutions to change the way health and care is provided and experienced worldwide through the creation of the right solutions.

The summit was attended by over 900 people, in-person and virtually, and attracted national and international expert speakers on a range of aspects of clinical governance, safety and quality in the digital health ecosystem. Importantly, the summit attracted attendees and speakers from Australian rural, remote, Aboriginal and Torres Strait Islander and cultural and linguistically diverse and disability communities, enabling perspectives from these groups to be heard.



Photographs were taken at the C3.0 summit 7th February 2023

Key recommendations from the summit evaluation to be progressed in 2023–24 include:

- exploring the establishment of clinical governance in digital health communities of practice internally and externally
- exploring ways to continue the national conversation that was initiated about clinical governance in digital health by, for example, hosting another summit.

In addition to the successful delivery of the summit, leadership and oversight of clinical governance across the Agency included the reviews initiated within the Clinical Governance section and supported by the CGC.

This included:

- publication of the inaugural 2021–22 Clinical Governance Performance Report in February 2023
- revised framework published in February 2023
- development of resources to support the rollout of the framework and further embed clinical governance across the Agency
- implementation of recommendations from the CSMS review.

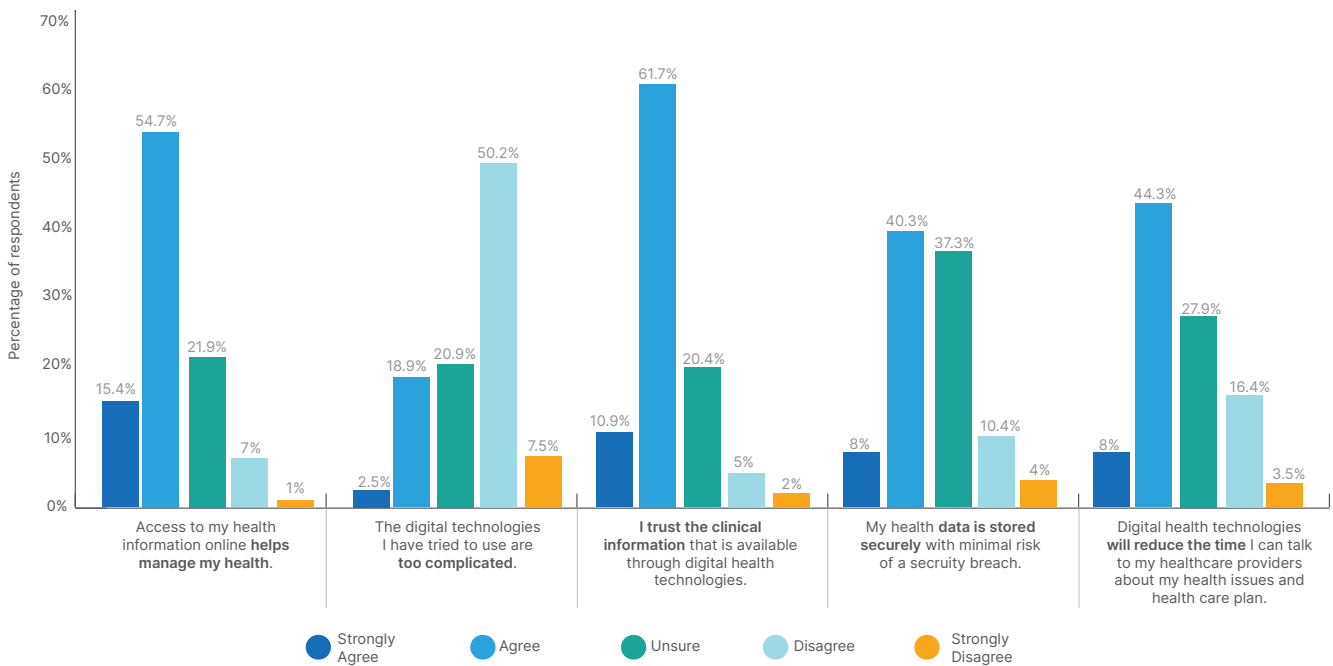
Person-centredness

The Agency put person-centredness in action at the summit. Personal health and care reflections at the start of the summit set the expectation that consumers must be at the centre of digital health and play a pivotal role in the design, implementation, evaluation and improvement of digital health products and services. A series of concurrent sessions followed. Participants heard from policy leaders, influencers and decision-makers about their experiences in procuring, implementing, developing and using digital health products and services. Lessons were shared about what to do when things go wrong and what should be done in the future to prevent potential harm.

In preparation for the summit, a survey was developed with 2 consumer advisers and sent to 201 members of the public to ascertain their attitudes to and use of various technological devices and digital health solutions. The results of a survey developed are shown in Figure 5. Respondents were familiar with and used health technologies, with over 70% reporting they used them every 3 months or more, of which 9% of respondents use them one or more times a week, and 33% using them once a month. However, less than 30% reported discussing their online health information with their healthcare provider. Almost 70% of respondents felt optimistic about the value of health technologies to aid them in managing their health and care outcomes and experiences. Figure 5 demonstrates outcomes to this survey related to attitudes to health technologies.

These findings informed summit panel discussions on the importance of person-centredness in health technologies.

Figure 5: Pre-summit survey responses on health technology and health information utilisation (n=201)



Attendees commented in the post-summit participation survey that they gained greater insight about the consumer perspective from the summit. Attendees also highlighted that they wanted to learn more about consumer participation, co-design and the experiences of diverse and marginalised communities at future events.

Partnership

The development of the Agency's work program and National Digital Health Strategy was supported by DHAs. This included contribution to product development and improvements to the My Health Record system. DHAs apply their individual expertise to inform product design and alignment to health and care workflows.

DHAs promote the adoption of digital health tools such as My Health Record and electronic prescriptions across their networks. They also contributed to education, peer-to-peer events and national healthcare conferences.

In addition, DHAs were involved in:

- My Health Record Registration – Aged Care Program (see section 3.2)
- the National Goals of Care Collaborative, an initiative jointly led by the Agency and WA Health research projects focused on primary care, aged care and My Health Record
- providing 24-hour on-call clinical incident management support
- internal and external committee representation, including:
 - Clinical Governance Committee
 - Provider Connect Australia Program Steering Committee
 - Aged Care Digital Advisory Group

System safety and quality improvement

During 2022–23, clinical safety and clinical governance engagements were built into program and project checkpoints to ensure clinical considerations are addressed as early as possible in the different stages of project planning and implementation.

Collaborative project and program planning sessions at the ideation stage involve Agency experts, including in clinical governance, to address any clinical requirements and identify clinical risks and dependencies.

The Clinical Safety team reports monthly to the CGC to outline clinical safety activities to assure the clinical safety of the Agency's portfolio of products and services.

During 2022–23, clinical safety reporting covered:

- Six My Health Record releases, including:
 - earlier consumer access to pathology test including International Normalised Ratio (INR) and haemoglobin A1C (HbA1C, a test for blood glucose)
 - introduction of clinical document subtyping
 - multiple other clinical safety system improvements
- transition to a new connecting gateway and APIs for the systems connected to My Health Record
- the **my health** app launch, including involvement and assurance in its development and roll out – both beta and public releases. Involvement further extended to providing assurance for **my health** app enhancements and releases, such as Healthdirect's weblinks and their "find and book a health service" feature implemented natively embedded within the product. Healthcare Information Provider Service (HIPS), including a new mobile viewer for healthcare providers

- medicines safety program initiatives, including electronic prescribing and real-time prescription monitoring functionality
- aged care program initiatives including the aged care transfer summary.

Other clinical safety activities included:

- a review of over 700 business requirements in the National Infrastructure Modernisation (NIM) program, with input from consumers, healthcare providers and others
- clinical safety assurance for all releases of the Health Application Programming Interface (API) Gateway project, as part of the NIM program, including the transition of all My Health Record connected clinical information systems to a new gateway
- release assurance, including testing of system connectivity, staged monitoring with clinical guidance from Agency DHAs and access to My Health Record being successfully maintained for healthcare providers
- establishing and providing a clinical safety service for the National Clinical Terminology Service (NCTS) with our partner, the Commonwealth Scientific and Industrial Research Organisation (CSIRO); the NCTS releases Australian clinical and medicines terminology that is integral for connected care
- provided clinical risk considerations for electronic requesting discovery project.

Monthly outcomes and risk updates, including clinical safety assurance reports, were presented to the CGC to provide visibility of identified clinical risks and demonstrate that Agency product releases are safe for consumers in health and care.

Evidence-based practice

The Clinical Governance team used an evidence-based approach to the summit evaluation that will inform the planning of future events. This includes:

- in-person and virtual attendee post-summit surveys
- presenter satisfaction survey
- internal Agency summit organisers lessons-learned workshop.

A significant program of work was initiated by the Clinical Governance section to integrate evidence and reflect best practice and systems-safety thinking across the Agency. This included:

- updating of policies, processes and procedures that support clinical safety management in the Agency
- widespread use of DHAs across multiple Agency-led projects, including clinical risk assessment, medical terminologies, allied health engagement and aged care.

3 ACTIVITIES SUMMARY 2022–23

The 2022–23 Agency Corporate Plan drove work plan priorities. Importantly, the CGC provided assurance over numerous projects and programs through its annual work plan. Projects focused on enhancing person-centredness and quality through a comprehensive approach to product and service delivery.

3.1. Infrastructure solutions and initiatives

Accurate, up-to-date consumer health information supports the delivery of high-quality health and care. The Agency is working to ensure that information can be shared easily between healthcare providers and consumers across platforms while aligning with clinical governance principles.

Next-generation mobile applications for consumers

The Agency launched the **my health** app to the Australian public on 28 February 2023. This app is a secure and convenient way for a person to access their My Health Record on a mobile device. The **my health** app enables consumers to view their health information uploaded to their My Health Record by healthcare providers or their authorised representatives. As of June 2023 111,782 people had linked their My Health Record and to **my health** app and there were 144,535 downloads.

Survey results about uptake of the **my health** app and its features are encouraging. The app is consistently rated above some of the other apps in this space.

Partnerships with the product owner, the Communications and Marketing team, Primary Health Networks (PHNs), clinical peaks and the Partnerships team led the development and delivery of education for healthcare providers and consumers about the **my health** app. These materials were co-designed with person-centredness at their core. A detailed plan and timeline supported the launch.

Education materials included dedicated peer reviewed eLearning modules for consumers, animated consumer and healthcare provider videos, instructional 'how-to' videos, newsletters, articles and interviews with clinical peak representatives. Live webinars were also delivered by combinations of consumers, healthcare providers and PHNs. Several train-the-trainer events were held across February and March 2023 in preparation for launch.

Pathology – My Health Record connections program

The Pathology Project task force, initiated in August 2021, transitioned into a formal project in 2022–23 with the goal of enhancing pathology report standardisation and use in My Health Record.

There was a strong emphasis on clinical governance for this project, which prioritised system safety and quality improvement. This included close collaboration with core design teams, clinical safety leads, DHAs and external stakeholders. Clinical safety leads were assigned to core design teams, reviewing design documents, conducting risk assessments and offering advice on clinical safety matters.

In 2022–23, the 7-day delay for consumer access to INR and HbA1c test results in My Health Record was removed. Further project work related to the upload of structured, machine-readable pathology reports to My Health Record is continuing in 2023–24. This project work supports the Federal Budget announcement in May of a new policy of upload by default into My Health Record, starting with pathology and diagnostic imaging reports. This mandate will be a key priority in 2023–24.

The removal of the 7-day delay for INR and HbA1c pathology reports was well received and initiated a broader discussion on a 7-day delay by exception and not by rule. A public consultation was conducted in late-2023 to inform policy development and any changes to the 7-day delay.

Digital health adviser service

The strategic importance of a visible and engaged group of health and care experts is critical to the Agency's workplan. DHAs are a flexible workforce appointed through open competition to support the Agency's projects and programs.

In October 2022, the term 'digital health adviser' was adopted following internal and external consultations in 2021-22 that showed that Agency staff and stakeholders did not connect with or understand the term 'clinical reference lead'. The CGC and Senior Executive Committee supported this change, which was aligned with the end of existing clinical reference lead contracts and the establishment of new DHA contracts via AusTender.

The DHA service demonstrates how the Agency can strategically leverage DHA knowledge and expertise, clarifying their role in enhancing clinical governance and informing the Agency's work.

Provider Connect Australia, including Vaccine Clinic Finder Connect Transition

After a successful pilot in late 2022, the Agency successfully rolled out Provider Connect Australia™. The period March to June 2023 saw the completion of stage 1, which transitioned users from Vaccine Clinic Finder Connect across to Provider Connect Australia™. Vaccine Clinic Finder Connect was a temporary solution established during the COVID-19 pandemic that has now been decommissioned.

Stage 2, starting July 2023, involves a nationwide rollout to include all healthcare organisations, with a strong emphasis on allied health.

Provider Connect Australia™ was designed and built by the Agency and is a good example of the Agency's maturing clinical governance capability. For example, Provider Connect Australia™ demonstrates alignment with the 2 following clinical governance principles:

- **Evidence-based practice:** Provider Connect Australia™ underwent a proof of concept and pilot before being launched. User testing and surveys are conducted at major milestones and used to inform product updates.
- **Person-centredness:** Research showed that Provider Connect Australia™ can reduce the number of incorrectly addressed messages that general practices receive, saving up to 45 minutes each day. This is time that can be given back to patient care, improving health and care outcomes for patients and reducing frustration for healthcare providers.

Clinical incident management

The clinical incident management service offers 24/7 support to manage clinical risks reported in the national infrastructure, prioritising consumer safety. It is focused on managing risks related to inaccurate, incomplete, unclear or misleading health information that can impact consumer health and care.

Monthly clinical incident reports are provided to the CGC, allowing them to identify emerging risks and system improvement opportunities.

3.2. Interoperability supporting connecting care

A priority for the Agency is to facilitate national digital health interoperability between healthcare providers and the systems they use to improve the visibility of health information, leading to better decisions and health outcomes for consumers.

Medicines safety program

In 2022–23, the Agency continued its efforts in the hospital sector to improve medicines information exchange during care transitions and to develop a stronger foundation for progressing the development of a structured pharmacist shared medicines list (PSML).

The PSML is a document type in My Health Record curated by registered pharmacists and is a current, consolidated list of all medicines. The PSML provides a detailed point-in-time source of medicines information additional to existing prescribed and dispensed medicine data in My Health Record. This safety initiative helps patients and healthcare providers reduce the risk of medicine-related mishaps.

In the past year, after successful PSML implementation in some public hospitals, PSML uploads to My Health Record increased by more than 108%, totalling 578,344 uploads to My Health Record by 30 June 2023. Three more hospital services in Victoria implemented PSML functionality during 2022–23, improving medicines information within the My Health Record system and improving interprofessional communication, especially during care transitions. Currently, public hospitals contribute to about 58% of PSML uploads, while community pharmacists account for the rest. Healthcare providers have viewed 2% of the uploaded PSMLs, and 10% have been accessed by consumers.

The project harnessed healthcare provider input and leadership through:

- consultations and engagement of hospital-based healthcare providers and DHAs with related industry expertise and experience
- regular engagement with and feedback from hospital sectors
- meetings with clinical peaks.

Electronic prescribing incident management

In May 2020, the Agency partnered with the Australian Department of Health and Aged Care and key stakeholders in the health and care industry to create a unique electronic prescribing system, enhancing consumer access to prescriptions.

As electronic prescriptions increase in Australia, so do related enquiries and incidents reported to the Agency by consumers, healthcare providers and the software industry. The complexity of the ecosystem, with its various software products and stakeholders, has resulted in some challenges. By 30 June 2023, the Agency had received a total of 84 incidents, averaging 9 per month.

Enquiries and incidents have revealed flaws in traditional paper-based medication management systems, offering a chance for enhancement. The Agency manages various levels of complexity in electronic prescribing incidents. The Incident Management team at the Agency partners with electronic prescribing stakeholders to investigate, support and oversee mitigation strategies from vendors, working in collaboration with internal teams and external stakeholders to resolve electronic prescribing incidents, including:

- prescription delivery service operators
- clinical information system and dispensing software vendors
- consumers
- healthcare providers
- government agencies and departments.

Complexity, inconsistency and diverse stakeholder interests challenged the Agency's incident management capabilities. To manage this, a sustainable national electronic prescribing incident management framework and automated workflows were implemented.

In 2022, the Agency commissioned the development of an electronic prescribing Incident Management Plan to enhance future incident management support.

The Agency's Medicines Safety Program team is streamlining incident management in line with the Agency Enterprise Incident Management Policy and Information Technology Infrastructure Library (ITIL) best practices. The Agency is enhancing digital applications and inter-Agency processes to ensure transparent and efficient incident management, promoting cross-sector collaboration and creating a sustainable national solution. As a preliminary measure, the Agency defined electronic prescribing incidents and the categorisation and classifying of them and updated the Agency's online reporting form. This was completed in May 2023 with a person-centred and consultative process involving Agency and external stakeholders.

Outcomes included:

- prioritised consumer safety and reduction of clinical harm
- streamlined notification, triage, escalation and communication pathways
- valuable insights to facilitate trend analysis, enhance reporting capabilities and perform proactive monitoring of electronic prescription incidents – eliminating inefficient and unsustainable manual processes
- maintained information security and consumer privacy
- helped protect healthcare providers from medico-legal risks
- continued high confidence in the electronic prescribing ecosystem.

This project revealed that electronic prescribing incidents are multifaceted, affecting various stakeholders and often involving complex clinical, technical, legislative, privacy and medico-legal aspects.

This emphasises the significance of stakeholder management in developing a robust, sustainable national incident management framework for electronic prescribing. The Agency plans to use this framework as a model for managing various types of digital health incidents.

My Health Record Registration – Aged Care Program

The My Health Record Registration project, as part of the Aged Care Program, aims to connect public and private sector residential aged care facilities (RACFs) and multipurpose services (MPSs) to My Health Record. This aligns with the government's response to the Aged Care Royal Commission final report Recommendation 68 on the universal adoption of digital technology and My Health Record by the aged care sector.

My Health Record enables secure sharing of important health and care information that can benefit over 3.2 million Australians aged 65+ by minimising duplication, enhancing safety and ensuring consistent, quality care across different health and care settings.

In January 2023, the project commenced a nationwide registration campaign for RACFs and MPSs. The campaign was rolled out in phases and provided registration support for My Health Record to state-run and Australian Government funded services across all jurisdictions. The campaign comprised targeted messaging through various communication channels, promoting the program's initiatives, providing education and training through the Agency's Education team and promoting the benefits of My Health Record and digital technology.

As of September 2023, an estimated 28% of targeted RACFs are registered to My Health Record.



3.3. Sustainable digital health services

The Agency has a responsibility to ensure digital health services, systems and products are sustainable and cost-effective. The Agency actively contributes to future-focused innovation. We do this by partnering with governments and industry to grow and test new ideas about digital transformation across the health sector. We also engage across the globe to learn about other world-leading health innovations and to tell Australia's story in an international context.

National Digital Health Strategy

The Agency is required by legislation to coordinate the development of a National Digital Health Strategy as directed by health ministers. The National Digital Health Strategy 2023–28 and its Delivery Roadmap outline an ambitious agenda for healthcare transformation and are the result of extensive consultation.

In February 2023, the CGC provided feedback on the draft strategy and roadmap. Recommendations from the CGC were actioned, including the focus on person-centred thinking and consideration of how the roadmap fits with the Australian Charter of Healthcare Rights. Safety and quality are central to the strategy and roadmap narrative.

The strategy and roadmap have been circulated for consultation with the Department of Health and Aged Care; Australian Government agencies; state and territory governments; and peak consumer, clinical and industry bodies. The strategy and roadmap will be released following endorsement and approval processes.

Communicating clinical governance to external stakeholders

In 2022–23, Agency staff presented at several events with the goal of highlighting the importance of and demonstrating our leadership of clinical governance in the digital health setting.

Some examples include:

- Digital Health Festival: June 2023 – Melbourne: The dark art of clinical governance
- Australian Digital Health Agency webinar: May 2023 – Introduction to clinical governance at the Agency [virtual]
- Amazon Web Services Healthcare Accelerator: March 2023 – Clinical governance and start-ups [virtual]
- Talking HealthTech Summit: February 2023 – Panel – Clinical governance in digital health [virtual].

4. FUTURE PLANS

The measures announced in May 2023 by the Australian Government that will deliver a more connected healthcare system for Australians highlight the importance of digital health products and services. Increasing uptake by healthcare providers and consumers is reliant on the ability to share consumer health information safely, securely and seamlessly within the health ecosystem. Rapid expansion of a connected healthcare system and the introduction of new technologies and services must be supported with robust and rigorous clinical governance, safety and continuous quality improvement.

From the early days of the Personally Controlled Electronic Health Record to now, the Agency's programs have incorporated clinical safety by design, with input from experienced staff and healthcare providers. Over time, the approach has matured from one focused solely on clinical safety to become a comprehensive clinical governance, assurance and leadership program, with a shift from a predominately inward focus to allow a more outward focus, influencing clinical governance in digital health across the health sector through engagement activities.

As the use of digital health services increases, this evolving multipronged approach to clinical governance will be increasingly central to the success and safety of technologically supported health services for all Australians. It is critical, not only for the Agency but also for the industry, to continue this evolution as we develop the new National Digital Health Strategy and further embed digital technologies within health service organisations.

As a core capability within the Agency 2023–24 Corporate Plan, clinical governance is recognised as critical to delivering on the ambitious agenda of building a healthier Australia through digitally connected care. Our philosophy is one of clinical safety, quality and continuous improvement, with ever-growing integration and use of real-world expertise so that all facets of the Agency's work embed person centred mindsets and a clinical governance focus.

4.1. Leading with our people

Establishment of the Clinical Governance and Assurance branch

In June 2023, the Agency reviewed its organisational structure and, in July 2023, it restructured its teams to better support the Strengthening Medicare agenda, with the key focus on consumer-centred, multidisciplinary, digitally enabled contemporary healthcare. The Clinical Governance and Compliance Outreach sections, previously in the Digital Health Standards and Governance branch, and the Clinical Incident Management team, previously in the Technology Branch, were brought together in a new Clinical Governance and Assurance branch in the Policy, Programs and Engagement Division (PPED).

The PPED is responsible for driving and coordinating the Agency's strategic narrative and working across jurisdictions to ensure the Agency's diverse programs of work are developed and implemented in alignment with national priorities to reduce administrative burden and improve health outcomes and the efficiency of the health system for all Australians. The division brings structure and coordination to the Agency's workplan, through governance arrangements, including the Portfolio Review Committee, supported by the EPMO, and the CGC, supported by the Clinical Governance and Assurance branch. The division manages the Agency's engagement with all external partners while driving digital program delivery, reporting and outcomes. This alignment makes clinical influence and use of clinical expertise in policy development easier across the Agency. Table 2 provides high-level responsibilities of the branch by section.

Table 2: New branch sections and responsibilities.

Section	Responsibilities
<p>Clinical Governance</p> <ul style="list-style-type: none"> • Clinical Governance implementation team • Clinical Safety Service team • Digital Health Adviser Service team 	<ul style="list-style-type: none"> • Stewarding the Clinical Governance Framework for Digital Health and embedding the 5 principles • Monitoring organisational performance through the CGC • Integrating clinical safety service and systems safety thinking • Working with partners to provide external assurance • Providing healthcare provider leadership through the DHAs
<p>Compliance Outreach</p>	<ul style="list-style-type: none"> • Supporting healthcare providers to use My Health Record appropriately • Monitoring use of emergency access by healthcare providers • Improving use of the Rule 42 security and access policies • Managing Section 75 data breach notification obligations • Providing subject matter expertise on the <i>My Health Records Act 2012</i> • Reviewing incidents reported to the Agency via the My Health Record helpline
<p>Clinical Incident Management</p>	<ul style="list-style-type: none"> • Managing clinical risk in reported and detected incidents • Coordinating health information related clinical risks • Coordinating electronic prescribing incident management • Preparing for and delivering real-time prescription monitoring incident coordination • Providing 24 hours on-call clinical incident management service aligned to the Clinical Safety Management System (CSMS)

Aligning the branch in PPED creates a powerful synergy across the Agency's project and program governance and delivery, stakeholder engagement and education activities and policy development. Closer alignment with Partnerships, Strategic Engagement, the EPMO and other sections in this division will enable further embedding of clinical governance and collaboration with key stakeholders. In particular, closer alignment of clinical teams provides a health and care perspective in all aspects of digital health policy creation and implementation of our products and services and is expected to be a critical success factor of the Agency's achievement of its strategic priorities in coming years.

These synergies are already delivering meaningful outcomes as the branch establishes its new clinical reference group for the faster access to pathology and diagnostic imaging reports in My Health Record project (the CRG). This has been established by the Agency and the Department of Health and Aged Care to provide strategic advice and clinical oversight to the project, guidance on safety and quality matters related to the introduction and implementation of this initiative, and to ensure that it is aligned with consumer needs and preferences and clinical workflows.

Embedding clinical governance across the Agency

Effective clinical governance at the Agency is led by our Board and delivered by our workforce. It is a structured, transparent and blame-free environment. This builds trust and confidence in our commitment to person-centred and evidence-based digital health solutions for our diverse consumer base. The Clinical Governance Framework for Digital Health ensures accountability and ongoing improvement in clinical safety and quality, aligning with the PGPA Rule, Part 2, 9(1)(d).

In 2023–24, implementing the framework will provide the following benefits:

- Enhanced clinical governance: The Agency's commitment to clinical governance will ensure accountability across our workforce, guaranteeing the delivery of accessible, clinically safe, person-centred, effective, integrated, high-quality, continuously improving and equitable care for consumers.
- Ensure a scalable approach: Our principles-based clinical governance approach will be vital as our range of products and services expands. It will be key to ensuring the successful implementation, clinical safety and quality of technologically supported health and care services for all Australians. This approach aligns with our strategic priorities, while ensuring clinical safety, quality and continuous improvement across all our products and services.

Measuring clinical governance maturity

A suite of implementation resources will support teams to integrate clinical governance principles into their daily work. These resources include task descriptions, best practice, reflective questions and improvement strategies.

The Clinical Governance team will lead the framework's implementation and socialise the 5 principles Agency-wide. This will inform our maturity assessment and provide opportunities for growth and improvements.

Figure 6 demonstrates the maturity scale proposed to be used to assess the Agency's maturity level (modified from data maturity model²).

Figure 6: Proposed maturity scale for measuring clinical governance at the Agency



Level 1: Performed — clinical governance activities are conducted in an ad hoc manner and not applied across business areas. Activities are primarily reactive and can depend on an individual or team to drive them.

Level 2: Managed — clinical governance activities are planned and implemented using agreed the framework and policies. Relevant stakeholders are involved. There is a growing awareness of the need for clinical governance.

Level 3: Defined — clinical governance activities are standardised in line with the framework, and the framework principles are embedded in relevant organisation-wide policies, frameworks and plans. Improvement initiatives are systematically implemented and monitored.

Level 4: Measured — clinical governance performance measures are captured, reported and used to improve quality across the Agency. Clinical governance processes are well-established and consistently applied across the organisation. Data-driven decision-making and continuous improvement are key aspects of clinical governance.

Level 5: Optimised — Clinical governance performance is proactively improved by analysing clinical governance metrics. Clinical governance is fully embedded in the organisation's culture and drives transformative change. The Agency is recognised as a leader in clinical governance in digital health.

Success will be measured through real-time feedback, thematic reviews of CGC meeting papers and business area self-assessment. The maturity level will be reported in the annual Clinical Governance Performance Report.

Progress will be reported quarterly to the branch manager and annually to the CGC, the Board and the Senior Executive Committee.

² DAMA International [2017] Data management book of knowledge, 2nd edition. Technics Publications, New Jersey, USA).

4.2. Person-centredness

Digital health adviser service

The Agency's strategic priorities are focused on supporting safe and efficient delivery of health and care through digital solutions. Our DHA service embodies all five framework principles ensuring safety, quality, clinical leadership and consumer engagement. With 50 DHAs with healthcare provider expertise and 12 with consumer or carer experience, we are committed to delivering clinically safe, high-quality and continuously improving digital health innovations.

4.3. Partnership

Strengthening our partnerships

As an Agency, we are focused on establishing successful partnerships across the health and technology sectors. The Agency's partnership with the [Australian Commission on Safety and Quality in Health Care](#) (the Commission) is governed by a memorandum of understanding (MOU) executed in 2021 and expiring on 8 December 2023. The MOU continued the strong commitment to the clinical governance, safety and quality of the My Health Record system and national digital health infrastructure over the last 5 years.

A new MOU will be established to continue this successful partnership and continue our shared commitment to clinical governance, safety and quality of My Health Record and the national digital health infrastructure.

4.4. System safety and quality improvement

Embedding clinical safety thinking across the Agency

As digital health technology and data exchange evolves rapidly, ensuring clinical safety is essential. We are expanding our products and services – such as the API Gateway, My Health Record and our medications management solutions including electronic prescribing and real-time prescription monitoring. Embedding clinical safety Agency-wide builds trust with healthcare providers and the public. With artificial intelligence and real-time data exchange, we face new challenges and opportunities.

We are committed to integrating clinical safety using insights from our internal and external engagement to create real-time safety cases and risk dashboards, providing a real-time data feed of clinical risks captured in projects through the EPMO processes. These tools will help the Agency gauge the clinical risks in our products and make informed decisions for enhancements and changes that make our products safer in health and care.

Clinical safety and clinical incident management processes and procedures continue to be updated to align with changes in our responsibilities and internal policies. For example, our increased focus on electronic prescribing expanded our clinical risk assessment to consider different healthcare considerations, aligned with the Agency's Risk Management Framework and incident management processes. We will continue to integrate and embed clinical safety in organisation processes, as has been achieved with EPMO and incident management processes, to ensure the Agency has a safety-first approach to the design and development of our products and services.

Other activities to embed clinical safety thinking across the Agency include clinical risk workshops at the commencement of programs and projects that involve clinical and consumer use of digital health products. These workshops collect inputs from program, project and product participants working across the organisation, as well as from our DHAs. The output is incorporated to program and project risk registers for ongoing monitoring and reporting. On go-live, these insights help us develop our responses to potential incidents before they even occur, promoting a proactive approach to clinical safety.

If incidents occur, they will be linked to identified clinical risks to help detect issues that require additional oversight and potential action. This will provide an evidence-based pathway for continuous quality improvement of our products and services.

Both the clinical safety and clinical incident management service will be run under a new Clinical Risk and Incident Management section with 3 primary functions:

- proactively identify clinical risks with focus on how to make products and services fit for health and care use
- deliver a responsive clinician-led service to proactively safeguard consumers from system and data issues, prioritising health and care insights from risk assessment and management of our products used in health and care settings by real-world healthcare providers
- maintain the Clinical Safety Management System (CSMS) and embed clinical safety in organisational processes and procedures.

These functions will support the Agency to meet its obligations under the PGPA Rule, Part 2, 9(1)(d), which states the Agency has 'to develop, implement and operate comprehensive and effective clinical governance, using a whole of system approach, to ensure clinical safety in the delivery of the national digital health work program'.

In addition, the recently published Intergovernmental Agreement on National Digital Health 2023–27 places responsibility on the Agency to provide 'leadership, coordination and delivery of a collaborative and innovative approach with other delivery partners to support and enhance a clinically safe and connected national health system to improve health service delivery and health outcomes for the Australian community'.

Providing national and international leadership

The summit in February 2023 was the beginning of a critical national conversation. The Clinical Governance and Assurance branch will continue to actively engage in national forums on clinical governance, clinical safety and compliance outreach.

In 2022–23, an International Digital Health Interest Group (DHIG) called Clinical Governance in Digital Health was established under the Global Digital Health Partnership. This DHIG will focus on implementing clinical governance principles in digital health. In 2023–24, the inaugural DHIG meeting will take place.

As a leader in clinical governance in digital health, the Agency supports the health technology sector to adopt and maintain clinical governance and safety systems. The Clinical Governance Framework for Digital Health was published in March 2023, and we are planning to also publish implementation resources on our website for transparency and guidance.

4.5. Evidence-based practice

The Agency's mission is to create a collaborative environment to accelerate adoption and use of innovative digital services and technologies, with clinical governance ensuring clinical safety, quality and continuous improvement of health and care delivery, including technology adoption, for the Australian community.

The Agency's clinical governance framework enables a culture of health and care excellence through leadership, rules, monitoring and improvement methods. Its success relies on an Agency-wide commitment to clinical safety and quality, involving clinical input and collaboration with our partners, our workforce and consumers.

A Clinical Governance Culture Assessment Survey is planned for 2023–24 and aims to provide a measure of Agency-wide clinical governance culture and awareness.

The survey provides the opportunity to:

- obtain a point-in-time measure of the Agency's clinical governance culture and awareness
- identify areas for improvement and focus during implementation of the revised framework during 2023–24
- produce data to inform the development of key performance indicators to demonstrate the effectiveness of quality improvement strategies annually.

This Clinical Governance Performance Report highlights our achievements in 2022–23 and demonstrates our commitment to maturing clinical governance across the Agency. The strategic initiatives outlined above are the building blocks for our continued success. As we continue to drive the momentum forward, supported through our new organisation alignment and structure, we can leverage our strengths and learn from our experiences to pursue even greater achievements in the coming year.

CLINICAL GOVERNANCE

PERFORMANCE REPORT 2022-2023

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