

# Hospital Clinical Governance event review guidelines

The Hospital Clinical Medical Committee (HCMC) review process improves performance and contributes to organisational learning and improvement.

The Hospital Clinical Governance Committee (HCGC) review process is based on the concept of Morbidity and Mortality Meeting Review and is intended to improve performance and contribute to organisational learning and improvement.

The purpose of HCGC review is to provide a standardised process for:

- HCGC and Infection Prevention and Control Committee (IPC) monitoring and review of clinically eventful cases and significant near misses
- National Clinical Governance Committee (NCMC) and National Infection Prevention Control Committee (NIPCC) oversight and management and
- Reporting to the Board Clinical Risk Committee (BCRC)

Read the [Hospital Clinical Governance Committee Charter](#).

## What cases should be reviewed at HCGC?

All cases that meet the following criteria must be reviewed at the HCGC meeting:

- Patient death - unexpected
- Return to theatre - unplanned
- Re-admission to hospital - unplanned
- Transfer of patient to another hospital - unplanned
- Significant infections (often referred from IPC or SQR Committee); refer to infection definitions
- Significant clinical events and Near Misses e.g. Sac 1 and 2 (or potential SAC 1 or 2 events)
- Pulmonary Embolism diagnoses
- 'Always report and review' events

Additional cases that are relevant or are nominated for discussion should also be reviewed at HCGC including but not limited to:

- significant trends
- clusters
- post-operative complications
- consent matters
- medication/fluid therapy errors – where harm has been caused or there was potential for significant harm

## Eventful for review of cases at HCGC

Eventful cases for review at HCGC are prepared and coordinated prior to the meeting so that all required information is available for the Committee review. Coordination of the information is the responsibility of the General Manager (this task may be delegated to the Quality Manager). This includes:

**Eventful case review:** a summary of the review of hospital and nursing processes to establish any contributory factors – including additional specialty worksheet findings (see Phase three – review). The level of review will be aligned to the SAC rating of the event and may be in the form of:

- [HCGC eventful case template](#)
- [Comprehensive report template](#)

Both templates can also be found in SafeHub.

The hospital review details should also include the patient/family/whānau story or perspective.

Surgeon and anaesthetist feedback on event (as appropriate). See [letter to Medical Specialist template](#)

Patient clinical record (as applicable), and any other relevant information to the case/s.

Surgeons and anaesthetists who have an extreme or high risk eventful case may be requested by the General Manager to attend the appropriate HCGC meeting if they can.

During the HCG meeting cases are discussed (the General Manager or other appropriate manager may present the case if doctor is not present), the focus being on continuous improvement and learning if there are any systems and process changes that could be made at the hospital to prevent a repeat of such an event.

Outcomes are discussed with the medical specialists during the meeting. The Hospital Manager or a medical member of HCGC may liaise where appropriate with those unable to attend.

If the HCGC is concerned that there may be competence issues, then an appropriate HCGC member (usually from the same specialty) is nominated to look into the case further and any issues of competence are then referred by HCGC or the Hospital Manager to NCGC.

In certain situations, a serious event investigation may be approved by the CEO. This will involve the undertaking of a root cause analysis.

Minutes of the HCGC meeting should reflect the discussions held and contain a record of all events reviewed, the minutes of events should reflect the HCGC case report layout and include all appropriate headings.



**Hospital Clinical Governance Committee eventful case template**





## Hospital Clinical Governance Committee agenda and minutes template

A copy of the event report, including the committee outcomes, the minutes of the meeting and any additional information is forwarded to NCGC via [OHHCMCMinutes@schl.co.nz](mailto:OHHCMCMinutes@schl.co.nz)

### Privacy and confidentiality

The HCGC records should reflect the medical specialists' identification, patient identification number and type of case only; identifiable information should not be recorded in documents that could lead to a breach of privacy. Where a patient name is included, these minutes must have strictly confidential circulation to maintain privacy.

### Learning and improvement

Where M&M and/or peer review meetings are held in forums outside of the Southern Cross Hospital the General Manager will seek information and feedback to enable learning and systems and process improvements to be implemented.

The implementation of quality improvement initiatives is monitored to completion and signed off by the Hospital Manager and HCGC (where appropriate). Systems and process improvements may be reported through to the Southern Cross Hospital network via Open book learnings to ensure shared learning leads to quality improvements.

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