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| Quality Clinical Innovation and Clinical Governance11026 |
| Outcome objective: Victorians are healthy and well  Output group: Acute Health Services  Output: Admitted Services |

**OFFICIAL**

## 1. Service objective

Clinical Quality Registries (CQRs) monitor the quality of health care within specific health domains by collecting, analysing and reporting aggregated patient information. The Department funds CQRs to provide it with a state-wide source of clinical data for linkage to administrative data, and to provide reports with patient outcomes data for identification of health care benchmarks, significant outcome variance and to inform quality improvement activities.

## 2. Description of the service

Victorian health services contribute data to 51 clinical registries across Australia. VAHI manages Victorian funding to eight clinical registries. Six are funded under the service agreement system.   
Data and reports received from the funded registry. The registry must provide various levels of reporting including PDF reports, portal access and a copy of the actual data collected. A data file is provided to the Department as part of the service agreements held with clinical registries.  
The data collected supports safety and quality improvement by informing outlier review and through hospital - based enquiry/ improvement committees. To enable this review, each registry must have an established outlier process and procedure in place to ensure outlier identification is communicated to the Department, Safer Care Victoria and to the contributing unit.

## 3. Client group

The client group this activity is targeted at is future patients receiving health care in Victorian hospitals who will benefit from health service improvements made using the registry data to identify variations in care that can be improved.

## 4. Obligations specific to this activity

In addition to the obligations listed in the Service Agreement, organisations funded to deliver this activity must comply with the following:

### 4a. Registration and Accreditation

N/A

### 4b. Program requirements and other policy guidelines

* [Better Safer Care – Delivering a world-leading healthcare system](https://www2.health.vic.gov.au/about/publications/factsheets/better-safer-care-delivering-a-world-leading-healthcare-system)

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* [Australian Commission on Safety and Quality in Health Care, Framework for Australian clinical quality registries](https://www.safetyandquality.gov.au/wp-content/uploads/2014/09/Framework-for-Australian-Clinical-Quality-Registries.pdf)

<https://www.safetyandquality.gov.au/wp-content/uploads/2014/09/Framework-for-Australian-Clinical-Quality-Registries.pdf>

* [Policy and Funding Guidelines](https://www.dhhs.vic.gov.au/policy-and-funding-guidelines-health-services)

<https://www.dhhs.vic.gov.au/policy-and-funding-guidelines-health-services>

* [Outlier policy to improve the utility of clinical quality registry data](https://www.bettersafercare.vic.gov.au/news-and-media/new-outlier-policy-to-improve-the-utility-of-clinical-quality-registry-data)

<https://www.bettersafercare.vic.gov.au/news-and-media/new-outlier-policy-to-improve-the-utility-of-clinical-quality-registry-data>

## 5. Performance

Funding is subject to achieving the performance targets specified in Schedule 2 of the Service Agreement.

Performance is measured as follows:

### Performance measure 1: Provide a report

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| **Aim/objective** | The aim of this performance measure is to monitor the data and reports received from the funded registry. The registry must provide various levels of reporting including PDF reports, portal access and a copy of the actual data collected. It is expected that meetings to discuss the reports and data with the Department and/ or Safer Care Victoria (SCV) will also be held. |
| **Target** | The performance measure target is provided in the Service Agreement. |
| **Type of count** | Cumulative |
| **Counting rule** | Count the number of new reports and data added quarterly and annually. 1. Routine reports, (PDF process of care reports), in an agreed format, to be provided to SCV and VAHI.  2. Risk Adjusted Outcomes reports (PDF) provided to clinical units and state level summary to be sent to VAHI and SCV. 3. Dynamic reporting via a single user interface - portal access 4. Raw Data transfer from the Organisation to the Department for the retention and development of an enduring dataset (annually) Meetings will not be counted. |
| **Data source(s) collection** | * Registry Reports |
| **Definition of terms** | A copy of the data is provided at least once a year for incorporation into the Integrated data resource in the Department’s Centre for Victorian Data Linkages. Data additions to the list of unlinked and linked datasets will be maintained by the Centre for Data Linkage.  A ‘report’ is defined as the PDF /xlsx report or access to tables and or insights through a portal or a copy of the data.  A meeting is defined as an event involving the Department or SCV and the registry and includes clinical lead advice that occurs to discuss the data collected in respect of any outliers of concern to the Department and /or Health Services. |

## 6. Data collection

The reporting requirements for this service are:

| **Data collection name** | **Data system** | **Data set** | **Reporting cycle** |
| --- | --- | --- | --- |
| Registry Reports | Manual Data Collection | List (Excel) of PDF or xlsx documents | Quarterly |

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