SA Dental Clinical Governance Framework



Prepared by the Safety Quality Risk Unit for the SA Dental Executive Committee

November 2025





SA Dental Clinical Governance Framework

SA Dental has established a comprehensive system to ensure the delivery of safe high-quality dental care, patient safety, and continuous improvement. This framework encompasses various components, including policies, procedures, work practices, clinical practice guidelines and accountability mechanisms.

The following are integral components of the SA Dental Clinical Governance Framework to support the provision of safe, high-quality dental care.

1. Governance, Leadership and Culture

a. SA Dental Executive Committee

i. This Committee is the organisation's dedicated Clinical Governance Committee responsible for overseeing clinical governance within SA Dental. This committee is chaired by the Executive Director and has representation from all organisation streams and senior clinical leads, and the Safety Quality Risk Unit.

b. Clinical Governance Leaders

i. The organisation has a Chief Dental Officer for each of the clinical streams. Each of the Chief Dental Officers has established roles and responsibilities to provide strategic leadership to organisation clinicians. The Chief Dental Officers also have responsibility for coordinating clinical governance activities and initiatives and reporting to senior management.

c. Accountability and Transparency

SA Dental:

- i. promotes a culture of accountability where all staff are responsible for adhering to clinical governance standards and guidelines.
- ii. promotes transparency in decision-making and communication with clients, staff, and stakeholders.

d. Risk Management

SA Dental:

- i. has mechanisms in place to identify issues and risks, inclusive of clinical and operational risks.
- ii. has process to profile and document organisation risks on the endorsed risk management platform.
- iii. SA Dental Executive Committee regularly monitors and reports risk mitigation strategies and escalates to the peak bodies where relevant.
- iv. staff are trained in risk management practices and encouraged to identify and report issues, risks and improvement initiatives utilising the SA Dental 'Help Us Be Better' process.

e. Research and Innovation

SA Dental:

- i. is committed to encouraging and supporting research and innovation in dental care.
- ii. collaborates with academic institutions and research organisations to stay at the forefront of dental research.
- iii. regularly reviews its processes and services to ensure they remain contemporary, and evidence based.

(2.) Partnering with Consumers

SA Dental:

- i. is committed to partnering with consumers and stakeholders in the development and evaluation of care, to ensure clients' perspectives are considered.
- ii. conducts regular surveys and engages with consumers through the Consumer Advisory Panel and the Consumer Representative Group to gather feedback on the quality of care, and clients' experiences which contribute to and influence the organisations' future directions.
- iii. is committed to engaging with consumers to ensure its facilities are culturally safe, respectful, and welcoming.

3. Client Safety and Quality Improvement Systems

SA Dental:

- i. has processes in place to ensure client safety issues are considered in the development and review of organisation instructional documents.
- ii. has a system for reporting and investigating adverse events and near-misses.
- iii. has implemented strategies to enhance client safety and utilises data from client incidents and client feedback to drive organisation wide improvements.
- iv. uses information from client incidents and feedback, and staff improvement notifications, to identify risks and issues, and to continuously improve services provision.
- v. is committed to a culture of continuous improvement by regularly reviewing and updating the clinical governance framework based on lessons learned and best practices.
- vi. has comprehensive mechanisms for collecting and analysing client incidents and feedback with a focus on using

4. Clinical Performance and Effectiveness

a. Quality Assurance, Clinical Standards of Care and Clinical Practice Guidelines

SA Dental:

- i. has established a system for ongoing quality assurance and continuous improvement which includes regular clinical service reviews and clinical quality assurance reviews.
- ii. contributes to and benchmarks services against agreed industry standards by undertaking accreditation against the Primary and Community Healthcare Standards and participating in the Australian Council on Healthcare Standards Oral Clinical Indicators.
- iii. engages in benchmarking activities to compare SA Dental's performance with similar organisations.
- iv. has developed and regularly updates Clinical Standards of Care and Clinical Practice Guidelines for dental procedures and services provided by SA Dental. Clinical Practice Guidelines are evidence-based and align with national and international best practices.
- v. is committed to ensuring all dental practitioners are aware of and trained in these standards and quidelines.
- vi. is committed to ensuring staff have the skills, qualifications, and experience to fulfil their roles and have processes for monitoring this and ensuring appropriate numbers of staff are in place.
- vii. is committed to providing opportunities for staff to receive and participate in appropriate education and training to ensure knowledge of contemporary practice relevant to public dental providers.
- viii. is committed to supporting clinician led education and training.
- ix. promotes a culture of continuous learning, mentoring, and professional development.

b. Performance Monitoring and Reporting

SA Dental:

- i. has established key performance indicators [KPIs] which relate to clinical governance, and these are regularly monitored and reported to the appropriate Clinical Division Management Committees and SA Dental Executive Committee.
- ii. has a range of clinical and business KPIs which are identified in a tiered approach relevant to the level of the organisation. These KPIs are monitored and reviewed regularly at the relevant levels of the organisation and further investigation and/or corrective action implemented as required.
- iii. has developed and embedded processes to standardise mechanisms for ensuring compliance with jurisdiction and regulatory bodies for clinical information documentation.
- iv. has comprehensive work practices and review processes embedded to ensure accurate and comprehensive client records and clinical documentation.
- v. is committed to continuous enhancement of the organisation's electronic health record to facilitate easy access to client information and to improve record keeping.
- vi. uses results from clinical audit to drive improvements in clinical documentation ensuring the standards of clinical documentation meets industry standards.
- vii. incorporates relevant information into the Data Governance Framework to provide guidance to support meeting reporting requirements of relevant industry standards.

5. Safe Environment for Delivery of Care

SA Dental:

- i. is committed to ensuring the working environment is safe for staff, clients, and visitors.
- ii. has processes in place to ensure workplace issues and risks are identified, reported, audited for compliance with legislative requirements and corrective actions implemented.
- iii. has systems in place to support referrals for clients to receive care in the appropriate setting for their needs
- iv. is committed to facility design and asset management which are contemporary and compliant.

The SA Dental Clinical Governance Framework is a dynamic document which will evolve to meet the changing needs of clients, the dental professional and the organisation.

Regular reviews and updates are essential to ensure SA Dental continues to provide safe, high-quality dental care to the South Australian eligible population.

Simon Porter
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Chair, SA Dental Executive Committee