ABSTRACT

Introduction:

Clinical Governance Climate (CGC) is the shared perceptions of employees on strategies and internal processes of Clinical Governance (CG) which is one of the important pillars of healthcare governance. Studying CGC would assist understanding the favorable organizational climate supportive of implementing CG.

Objective:

To assess the Clinical Governance Climate in Base Hospitals and in the District General Hospital in Regional Director of Health Services area in Kandy

Methodology:

A descriptive cross-sectional study was conducted in District General Hospital (DGH) Nawalapitiya, Base Hospital (BH) Gampola and BH Theldeniya. Medical Officers, Nursing Officers, special grade and grade I officers of professions supplementary to Medicine who had at least three months service experience in hospitals were included. Proportionate stratified random sampling was executed to select the sample. Pretested self-administered Clinical Governance Climate Questionnaire (CGCQ) and a check list of Institutional Activities Supportive of Clinical Governance Climate (IASCGC) were used as study tools. CGCQ was a validated tool used for international studies and consisted of six factors (Planned and Integrated Quality Improvement, Proactive Risk Management, Climate of Blame and Punishment, Working with Colleagues, Training and Development and Organizational learning). Consensual validation was reached for Sri Lankan context through interviews with seven experts. Information on supportive institutional activities were gathered through the check list of IASCGC by the Principal Investigator. The responses to the items of CGCQ was rated from 1 to 5 and individual mean values were calculated to build a composite variable across all items of six factors. The CGC value was calculated for overall sample, for hospitals, for individuals and for each six factor. The CGC values were considered as supportive of CG when the score was more than 2.5. Comparison of values was done between factors and hospitals. Statistical analysis was performed to identify influential sociodemographic factors and Institutional factors.

Results and discussion:

There were 346 respondents and the response rate was 81.8 percent. Overall CGC value was 3.169 (95% CI 3.12-3.22). Values obtained by BH Theldeniya, BH Gampola and by DGH Nawalapitiya were 3.32, 3,15 and 3.11 respectively. The CGC values of 320 respondents (92.5 %) were supportive of CG. A Significant difference of CG was observed between hospitals (W.G=331B.G=2 =4.92, P=0.008). The six factors of CGC were significantly correlated to CGC. Supportive CGC was significantly high among females and among nursing officers.

Conclusions and Recommendations:

Overall CGC was supportive. The concepts of CG can be integrated to health care delivery system of similar hospitals. CGC of DGH Nawalapitiya was comparatively low. There is a requirement to strengthen the Quality improvement initiatives for employees of DGH Nawalapitiya. Activities related to clinical audits should be strengthened in all hospitals

Keywords- Clinical Governance Climate, Clinical Governance, Healthcare Governance