NAKASERO HOSPITAL LIMITED

Quality Care With Compassion

PAMOJA KWA UBORA — TOGETHER FOR EXCELLENCE

Clinical Governance

The framework through which Nakasero Hospital Limited organises, monitors and continuously improves the quality and safety of care — bringing together leadership, clinical practice, patient safety, risk management, staff development, patient confidentiality, data protection and transparent accountability.

OPENING STATEMENT

Clinical Governance at Nakasero Hospital Limited

> **Pamoja kwa Ubora — Together for Excellence** is Nakasero Hospital's hospital-wide commitment to clinical quality, patient safety and continuous improvement.

At Nakasero Hospital Limited, clinical governance is the framework through which we organise, monitor, and continuously improve the quality and safety of care. It brings together leadership, clinical practice, patient safety, risk management, staff development, patient confidentiality, data protection, and transparent accountability so that every patient encounter is guided by safe systems, professional standards, and a commitment to continuous improvement.

Our approach supports a culture where teams learn, improve, and work together across departments to deliver care that is safe, ethical, evidence-informed, and responsive to the needs of patients and families.

What Clinical Governance Means at NHL

At NHL, clinical governance means that quality and safety are organised through clear systems, measurable priorities, and shared accountability. It includes:

- Patient safety systems that support incident reporting, learning, and prevention of avoidable harm.
- Clinical leadership and accountability through Board, Senior Management Team, clinical heads, quality leadership, and multidisciplinary teams.
- Evidence-informed practice supported by approved guidelines, protocols, and care pathways.
- Clinical audit, guideline adherence monitoring, and performance review across services.
- Continuing Professional Development through Ground Rounds, monthly seminars, ethics workshops, and competency development.
- Patient confidentiality and data protection compliance, including privacy protocols aligned with the Uganda Data Protection Act.
- International benchmarking against top-tier hospitals to strengthen continuous improvement and clinical excellence.

OUR GOVERNANCE PILLARS

Six Commitments That Guide Clinical Practice

These pillars translate governance into everyday behaviours, decision-making routines and measurable improvement across departments and clinical teams.

PILLAR 01
Patient Safety

Protecting patients from avoidable harm through risk identification, incident reporting, learning reviews, safer procedures and a culture where teams speak up early.

PILLAR 02
Quality Improvement

Turning data into better care by using audits, outcome reviews, service indicators and improvement projects to close gaps and sustain best practice.

PILLAR 03
Clinical Leadership

Clear accountability from the board to the bedside, with senior clinical oversight, multidisciplinary committees, and empowered departmental leads.

PILLAR 04
Professional Standards

Maintaining competent, ethical practice through credentialing, scope-of-practice review, continuing professional development and evidence-based protocols.

PILLAR 05
Infection Prevention

Reducing healthcare-associated infections with surveillance, hand hygiene, sterilisation standards, antimicrobial stewardship and environmental safety practices.

PILLAR 06
Patient Voice

Listening, responding, and improving through patient feedback, complaint learning, shared decision-making, and respectful communication at every touchpoint.

DETAILED GOVERNANCE APPROACH

How NHL Makes Quality Visible and Accountable

The following ten areas describe the detailed governance approach that underpins clinical practice at Nakasero Hospital Limited. Each area sets out the rationale, priorities, and specific commitments that shape day-to-day clinical work.

AREA 01

Patient Safety and Quality Improvement

Patient safety is central to clinical governance at NHL. We promote systems that help teams identify risks early, learn from incidents and near misses, and improve care processes. Quality improvement activities strengthen reliability, reduce avoidable harm, and support consistent patient-centred care across clinical services.

- Encouraging timely reporting and review of patient safety concerns.
- Using quality improvement methods to strengthen clinical processes.
- Promoting learning across departments while maintaining a just and supportive culture.
- Supporting mandatory incident reporting, root cause analysis, and annual staff training in patient safety culture.

AREA 02

Clinical Leadership and Accountability

Clinical governance depends on visible leadership and clear accountability. NHL's clinical and operational leaders work together to support safe practice, strengthen standards, and ensure that quality and patient safety remain part of everyday decision-making.

- Clarifying roles and responsibilities for quality and safety.
- Supporting multidisciplinary review of clinical priorities.
- Embedding governance conversations into leadership and service-level routines.
- Aligning clinical governance with NHL's 2026–2028 strategic pillars.

AREA 03

Evidence-Informed Clinical Practice

NHL promotes care that is guided by professional standards, clinical judgement, and current evidence. Clinical teams are encouraged to use agreed protocols, evidence-based guidelines, and pathways that support consistency while respecting each patient's individual needs.

- Using protocols and guidelines where appropriate.
- Reviewing clinical practice to identify improvement opportunities.
- Supporting responsible, patient-specific clinical decision-making.

AREA 04

Risk Management and Incident Learning

A strong governance system recognises that risks must be identified, reviewed, and managed proactively. NHL's clinical governance approach encourages staff to raise concerns, document incidents, and participate in learning processes that reduce the likelihood of recurrence.

- Strengthening risk identification and escalation.
- Reviewing incidents and near misses for learning.
- Turning lessons learned into practical service improvements.
- Connecting clinical governance to NHL's structured risk appetite, tolerance, mitigation, monitoring, and crisis preparedness framework.

AREA 05

Quality Improvement, Clinical Audit and Performance Review

Clinical audit and performance review help teams understand whether care is aligned with agreed standards. NHL uses review processes to support improvement, identify variation, and guide action where systems or outcomes can be strengthened.

- Reviewing selected clinical processes against agreed standards.
- Using findings to inform improvement plans.
- Encouraging departments to track progress and sustain gains.
- Tracking KPIs such as Net Promoter Score (NPS), Clinical Audit scores, and Customer Satisfaction Survey results.

AREA 06

Credentialing, Competence, Training and Professional Development

Safe care depends on competent, supported professionals. NHL's governance approach recognises the importance of ongoing training, supervision, teamwork, and professional development so that staff can maintain and strengthen the skills required for high-quality care.

- Promoting Continuous Professional Development through Ground Rounds and monthly seminars.
- Supporting orientation, mentorship, competency assessment, and clinical supervision where applicable.
- Conducting ethics workshops and clinical documentation training to strengthen professional practice.

AREA 07

Patient Experience, Communication and Feedback

Clinical governance includes listening to patients and families. Feedback, questions, and concerns provide important insight into how services are experienced and where improvements may be needed. NHL encourages respectful communication and responsive handling of patient feedback.

- Promoting clear communication with patients and families.
- Using patient feedback to identify improvement opportunities.
- Supporting respectful, compassionate, and responsive care.
- Using NPS and customer satisfaction results as governance indicators for improvement.

AREA 08

Ethics, Professional Standards, Confidentiality and Safeguarding

NHL's clinical governance approach is grounded in ethical practice, professionalism, confidentiality, data protection, and respect for patients. Governance structures support teams to uphold professional standards and act in ways that protect patient dignity, privacy, and wellbeing.

- Promoting ethical and professional conduct.
- Respecting confidentiality, consent, dignity, privacy, and patient data protection.
- Escalating concerns that may affect patient welfare or safe practice.
- Training and enforcing strict patient confidentiality and privacy protocols in line with the Uganda Data Protection Act.

AREA 09

Multidisciplinary Collaboration and Integrated Care

Quality and safety are strengthened when clinical teams work together. NHL encourages collaboration across departments and disciplines so that patient care is coordinated, information is shared appropriately, and decisions benefit from relevant expertise.

- Supporting coordinated care across services.
- Encouraging multidisciplinary discussion for complex care needs.
- Promoting handover and communication practices that support continuity of care.
- Strengthening chronic disease governance through coordinated multidisciplinary care pathways for Oncology, Cardiology, and Endocrinology.

AREA 10

Continuous Improvement and Organisational Learning

Clinical governance is not a one-time activity; it is a continuous commitment. NHL aims to learn from data, feedback, audits, incidents, benchmarking, and staff experience, translating those lessons into practical improvements that benefit patients, families, and clinical teams.

Our 2026–2028 Pamoja kwa Ubora strategy has set measurable improvement targets across all service lines, ensuring that our commitment to excellence is not only stated but tracked, reported and acted upon.

- Learning from multiple sources of insight.
- Turning improvement priorities into practical actions.
- Reviewing progress and sustaining improvements over time.
- Using targeted benchmarking visits to top-tier international hospitals to strengthen practice and learning.

SUMMARY

Clinical Governance — Overview

At Nakasero Hospital Limited, clinical governance guides how we maintain and improve the quality and safety of care. It brings together patient safety, clinical leadership, risk management, staff development, evidence-informed practice, patient confidentiality, data protection, and patient feedback to support safe, ethical, and continuously improving services.

Through this framework, our teams work across departments to identify risks, learn from experience, strengthen clinical processes, and keep patients and families at the centre of care — guided by our four strategic pillars and our Pamoja kwa Ubora (Together for Excellence) campaign.

- **Patient Safety:** We build systems that help teams identify, manage, and learn from risks to protect patients from avoidable harm.
- **Quality Improvement:** We use clinical audit, guideline monitoring, NPS, feedback, and improvement methods to strengthen care processes and support consistent standards.
- **Clinical Leadership:** We promote clear accountability and multidisciplinary leadership for quality, safety, and ethical care.
- **Evidence-Informed Practice:** We encourage the use of professional standards, evidence-based guidelines, evidence-based medicine oversight, and sound clinical judgement in patient care.
- **Staff Competence:** We support ongoing professional practice evaluation, continuous professional development, teamwork, supervision, and professional development for safe and effective practice.
- **Patient Voice:** We listen to patients and families so that NPS, satisfaction, and feedback insights inform improvements to services.

Pamoja kwa Ubora — Together for Excellence

Clinical governance helps NHL keep learning, improving and strengthening trust with every patient interaction. It is how we ensure that our commitment to excellence is not only stated but tracked, reported, and acted upon — every day, across every service.

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