Governance and Quality Assurance Policy

SpiroSense - Independent Respiratory Diagnostics
Person responsible - Catherine Bridges
Date created - 04/02/26
Review date - 03/02/27

Purpose

This policy sets out how SpiroSense ensures effective governance, quality assurance, and continuous improvement in line with **Regulation 17: Good governance**.

The service is currently operated by a **single practitioner**, who is responsible for clinical delivery, governance, and quality assurance. Governance arrangements are therefore **proportionate to the size and nature of the service**.

Legal and Regulatory Framework

This policy complies with:

- Regulation 17: Good governance
- UK General Data Protection Regulation (UK GDPR)
- Data Protection Act 2018

It supports safe, effective, person-centred, and well-led care.

Company Structure and Accountability

Business Structure

SpiroSense is an independent respiratory diagnostics service operated by a single practitioner.

Roles and Responsibilities

The following roles are held by the same individual:

- **Provider**
- **Registered Manager**
- **Clinical Practitioner**
- **Governance Lead**
- **Data Controller**

This individual is accountable for:

- Clinical quality and safety
- Compliance with CQC regulations

- Governance systems
- Risk management
- Record keeping
- Information governance
- Continuous improvement

Accountability Arrangements

- Overall accountability rests with the **Provider / Registered Manager**
- Decisions relating to care delivery, governance, and improvement are documented
- External professional guidance is used where required (e.g. clinical guidance, regulatory advice)

Organisational Structure:

Provider / Registered Manager - Catherine Bridges

(Clinical & Governance Lead)

This structure is reviewed if the service expands or staff are employed.

Quality and Safety Management

Monitoring Quality and Safety

Quality and safety are monitored through:

- Review of clinical records
- Audit activity
- Review of incidents, complaints, and feedback
- Review of policies and procedures
- Professional reflection and learning

Monitoring is ongoing and proportionate to service activity.

Audit Processes

Audits are planned and carried out to assess compliance and quality. These may include:

- Record keeping audits
- Consent and Mental Capacity compliance
- Infection prevention and control
- Data protection and confidentiality

- Equipment checks and maintenance

Audits:

- Are scheduled annually or as required
- Are documented
- Result in action plans where improvements are identified

Continuous Improvement

The service is committed to continuous improvement by:

- Reviewing audit outcomes
- Learning from incidents and complaints
- Acting on feedback from service users
- Updating policies and procedures
- Maintaining professional development and training

Improvements are documented and reviewed to ensure actions are completed.

Risk Identification and Management

Identifying Risks

Risks are identified through:

- Daily practice
- Incident reporting
- Audit findings
- Complaints and feedback
- Changes in guidance or legislation

Examples of risks include:

- Clinical accuracy
- Equipment failure
- Infection control
- Data breaches
- Lone working risks

Managing and Learning from Risks

- Risks are recorded in a risk register
- Control measures are implemented

- Risks are reviewed regularly
- Learning is documented and used to improve practice

Where necessary, external advice or escalation procedures are followed.

Records Management

Service User Records

Records relating to people using the service include:

- Consent
- Clinical assessments
- Test results
- Correspondence with GPs
- Reasonable adjustments

These records are:

- Accurate and up to date
- Stored securely
- Accessed only by authorised individuals
- Retained in line with legal requirements

Staff Records

As the service is currently operated by a single practitioner:

- Professional registration
- Training
- DBS status
- Insurance documentation

are maintained and reviewed regularly.

Governance Records

Governance records include:

- Audit results
- Complaints logs
- Incident logs
- Risk registers
- Policy reviews

All governance records are stored securely and reviewed regularly.

Information Governance

Data Protection and Confidentiality

All personal data is processed in accordance with:

- UK GDPR
- Data Protection Act 2018

This includes:

- Lawful and transparent processing
- Data minimisation
- Secure storage
- Appropriate retention
- Controlled access

Information is shared only:

- With consent
- Where required for care delivery
- Where legally required (e.g. safeguarding)

Feedback Systems

Seeking Feedback

Feedback is actively encouraged through:

- Verbal feedback during or after appointments
- Written or electronic feedback
- Complaints procedures

Acting on Feedback

Feedback is:

- Recorded
- Reviewed
- Used to inform service improvements
- Considered alongside audits and incidents

Actions taken as a result of feedback are documented.

Review and Assurance

- Governance systems are reviewed regularly
- Policies are reviewed annually or sooner if required
- Legislation and guidance links are checked as part of policy review
- Governance arrangements are updated if the service changes or expands

SpiroSense
Independent Respiratory Diagnostics

Compliance With Regulation 17 – Good Governance

This policy demonstrates that SpiroSense:

- Maintains effective systems and processes
- Assesses, monitors, and improves quality and safety
- Maintains accurate records
- Identifies, manages, and mitigates risks
- Uses learning and feedback to improve services

Policy Review

This policy is reviewed annually or following changes to legislation or guidance. Legislation and guidance links are checked and updated as part of the annual policy review.

Last review date: 04/02/26
Next review date: 03/02/27

Relevant Legislation and Guidance

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
  Regulation 17 – Good governance
  https://www.legislation.gov.uk/uksi/2014/2936/regulation/17
- UK General Data Protection Regulation
  https://www.legislation.gov.uk/eur/2016/679/contents
- Data Protection Act 2018
  https://www.legislation.gov.uk/ukpga/2018/12/contents