Metro North Mental Health

Message from the Director, Clinical Governance and Informatics

Joanne Wild

Good morning all,

Thank you for continuing to navigate this significant period of change, particularly the reviews undertaken and the challenges that have arisen throughout this work, alongside the ongoing changes to our governance practices and processes.

These shifts have required considerable adjustment, reflection, and persistence, especially as we adopt to the new world of Clinical Governance and Informatics in MNMH. We recognise the pressure this has placed across the service, and we as a team have greatly appreciated the resilience, professionalism, and commitment shown throughout this period. Much of this important work happens behind the scenes, yet its impact is felt across every part of our service.

The Clinical Governance and Informatics business case for change is in its final stages of implementation. Once it is all finalised, we will provide an update of who is who in the team for your visibility.

As we continue to strengthen Clinical Governance and Informatics across MNMH, your adaptability, collaboration, and dedication remain essential. Your ongoing commitment and teamwork are deeply appreciated, and we encourage open communication—please reach out to us directly with any questions, concerns, or suggestions as we move forward together.

For any questions, please contact MNMH-Clinicalgovernance@health.qld.gov.au.

Kind regards,
Jo

Joanne Wild
Director Clinical Governance & Informatics

MNMH Informatics update

MNMH Informatics Update

This week we have welcomed Bonnie Eiser into the Assistant Director Informatics for MNMH. This much awaiting position will be completing a review of all things informatics within the service.

Some of the key focus areas into the future will be enhancement of our MNMH Digital Committee, QHEPs review, eMHJB, our continued journey with ieMR, digital quality improvement processes and data governance within the directorate.

We also welcome a whole host of new positions in this space with the BCFC implementation roll out.

Please contact MNMH-informatics@health.qld.gov.au with any queries.

Metro North Audit Program

As we commence the final month of the first quarter of 2026, I firstly would like to thank those of you who have registered and completed audits within the MARs Clinical Audit Platform.

The audits for this period of time include:

- Aseptic Technique
- Medication Storage and Refrigerator Monitoring – the timeframe for this audit has been extended now until the 31st March 2026
- Labelling of Injectable Medicines, Fluids, and Lines, and Medication Safety Infusion Software.

From April the below audits will be available within the system:

Metro North Audits	Sample Size	Frequency	April	May	June
Standard 3 Preventing and Controlling Healthcare-associated Infection					
Aseptic Technique (AT)	As per risk matrix	Quarterly audit period	April to June		
Transmission-Based Precautions	5 per unit in scope	Biannually		●	
Standard 4 Medication Safety					
Schedule 8 & Designated Schedule 4 Medicine Register	10 administrations per unit in scope	Annually			●
Standard 6 Communicating for Safety					
Surgical Safety Checklist Suite	2-3% of surgical cases per facility	Quarterly	April to June		
Standard 8 Recognising and Responding to Acute Deterioration					
Responding to Medical Emergency	5% of medical emergency responses per facility	Biannually	●		

MNMH clinical units are required to complete these audits, in addition to the schedule for your clinical area.

For any questions, please contact to MNMH-Clinicalgovernance@health.qld.gov.au.

Procedures update

MNMH Clinical Governance has commenced a review of the current systems for procedures. This review includes our processes to ensure alignment with the Metro North Procedures' policy/procedure.

We have many procedures across MNMH that outlines the same or similar information but for a different facility or location. This is causing increasing confusion about the correct process across the whole of MNMH. Therefore, as procedures come due for review, we will be considering the following:

- Is there a Metro North Procedure/Policy/Work Instruction that could replace this MNMH document?
- Is this procedure/work instruction still required for MNMH?
- Does MNMH already have a procedure/work instruction at another facility that could be reviewed and implemented for the whole of MNMH?

New

- [Medical Emergency within Mental Health Services](#)
- [ADIS Suicide Prevention and Risk Management Work Instruction](#)
- [Needle and Syringe Program](#)

Currently out for broad consultation

- [Suicide Risk Assessment and Management – Fill in form](#)
- [Gymnasium Safety – Use of Gym and Exercise Equipment in Mental Health Facilities – Fill in form](#)

While we work through this process, we are actively seeking feedback on this topic from across the Directorate particularly frontline clinicians. If you have any feedback on procedures or procedure management for MNMH, please contact MNMH-procedures@health.qld.gov.au

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Clinical Incident Management team update

As you may be aware, our Patient Safety Team has now transitioned to a Clinical Incident Management Team model. This new approach is designed to strengthen the support we provide across the directorate by offering a more coordinated and comprehensive service. The team will aim to operate as a one-stop shop for all aspects of clinical incident management, ensuring streamlined processes, improved communication, and consistent guidance to help teams respond effectively to incidents and enhance overall patient safety.

We would also like to extend our sincere thanks for your support and cooperation as we work through and develop the new processes together.

Line manager support

The CIMT team have now delivered two of our new fortnightly virtual drop-in sessions. Questions so far have related to use of RiskMan or RiskMan fields or processes related to clinical incident management.

We encourage all frontline leaders (NUMS and Team Leaders) to join these fortnightly sessions if you have a burning question or need some technical support. The next session is held Thursday 12th of March at 12pm. If you do not have the invitation, please notify MNMH-PSO@health.qld.gov.au

Education

The first monthly CIMT delivered education session was held on 27th February on Clinician Disclosure. The session has been recorded and if you would like access to the education session for your own team, please email MNMH-PSO@health.qld.gov.au.

There are a number of statewide resources available to support clinician disclosure and we encourage accessing the Patient Safety Queensland STARS tool (reference in our Disclosure Management procedure) for guidance.

The next monthly education session will be on 'Documentation in RiskMan' and will be presented by a Senior Lawyer from our Metro North Legal Services. This session will endeavour to help frontline managers to ensure documentation within RiskMan clinical incident reports is factual, de-identified and avoids speculation. We hope you can join us on March 27th at 11.30hrs for this virtual session. It will be recorded.

If you have a topic that you would like presented, please complete the following link: Clinical Incident Management Team Feedback – Fill in form

Quick reference guides (QRGs)

The CIMT are working on developing Quick Reference Guides (QRG) that support MNMH to operationalise the Metro North Clinical Incident Management procedures.

The first QRG is the closure process for SAC 2 clinical incident analysis. Further QRGs are being developed (e.g. recommendation/lessons learnt processes), but please use the feedback form if you have a specific request.

Morbidity and Mortality CNC

Our new M&M CNC has been in contact with all M&M Chairs and has started attending M&Ms across the directorate. The M&M Coordinator will be working on MNMH processes and/or procedures across Death Review, Morbidity and Mortality, Coronial Matters and Child Death and Injury Review.

If you have feedback for the M&M CNC please use the following link: M&M Feedback Survey – Fill in form, the M&M Chairs will be the point of contact for our M&M CNC for all M&M Committee matters.

Non-confirmed incidents

Thank you to all MNMH for the hard work in the clinical incident management space, particularly working on outstanding SAC 2 incidents.

We ask all local line managers to please jump into RiskMan and check that all incidents allocated to you and your service have had a preliminary review and the SAC rating has been confirmed (within 3 days).
If you need any support, please come along to a virtual drop-in session!

Patient Safety Queensland (PSQ) resources

For your information PSQ have also developed new fact sheets:

- Root Cause Analysis and Clinical Review Overview - Factsheet
- Conducting Open Disclosure in the Virtual Environment Guide

Is your Fit Testing compliance up to date?

Fit testing is currently available to all MNMH staff regardless of site through TPCH and COH directorates, please use the links below to access these appointments.

- COH booking link
    - Brighton – [Brighton Health Campus - COH Fit Testing Bookings](#)
    - North Lakes – [North Lakes Health Precinct - COH Fit Testing Bookings](#)
- TPCH booking link - [TPCH Fit Testing](#)

If you have any questions, please reach out to your line manager or contact MNMH-Infectioncontrol@health.qld.gov.au.

We uphold our commitment to health equity through our Values in Action
Respect | Integrity | Compassion | High Performance | Teamwork

VALUES IN ACTION

Metro North Health acknowledges the Traditional Custodians of the Land upon which we live, work and walk, and we pay our respects to Elders both past and present.

Metro North Health's vision
Creating healthier futures together—where innovation and research meets compassionate care and community voices shape our services.

Queensland Government