	DOCUMENT NAME	DOCUMENT NUMBER
	CLINICAL MANAGEMENT SYSTEMS	

VERSION	**1**	
COMPILED BY		**DATE**
AUTHORIZED BY		**07/2025**
NEXT REVISION DATE		**07/2027**

1. Purpose

To ensure consistent, high-quality clinical care in alignment with national health priorities, policies, and evidence-based guidelines, as required by the National Health Act and other regulatory frameworks.

2. Scope

Applies to all healthcare personnel within the practice, including doctors, nurses, allied health professionals, and administrative staff involved in patient care.

3. Definitions

- **Clinical Management Systems:** Coordinated processes and tools that guide diagnosis, treatment, follow-up, and quality assurance.
- **National Policies & Guidelines:** Official health directives issued by the National Department of Health (NDoH) or professional councils (e.g., HPCSA, SAPC).

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4. Key Components of Clinical Management Systems

4.1 Availability of Clinical Guidelines

- Ensure updated national clinical guidelines (e.g., Standard Treatment Guidelines, Primary Health Care Manual, EML) are accessible in **all consultation rooms**.
- Guidelines must be available in **printed or digital format** and reviewed annually for updates.

4.2 Standardised Patient Care Procedures

- All care must follow documented clinical pathways for priority conditions (e.g., TB, HIV, hypertension, diabetes).
- Include triage protocols, emergency care guidelines, and referral procedures.

4.3 Recordkeeping and Audit

- All patient interactions must be documented in line with **HPCSA Booklet 9** and **section 13 of the National Health Act**.
- Conduct quarterly **clinical record audits** to ensure compliance and identify areas for improvement.

4.4 Staff Training

- Provide **in-service training** on national guidelines, updates, and clinical protocols at least **bi-annually**.
- Maintain training records and attendance registers.

4.5 Clinical Governance Structure

- Appoint a **Clinical Governance Lead** responsible for ensuring adherence to clinical guidelines and overseeing quality improvement initiatives.
- Establish a monthly **clinical meeting** to discuss case reviews, policy updates, adverse event reporting, and outcomes monitoring.

4.6 Quality Improvement Activities

- Implement at least one **clinical quality improvement project** per year (e.g., improving hypertension control or reducing missed TB diagnoses).
- Use a **Plan-Do-Study-Act (PDSA)** cycle to manage these initiatives.

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5. Documentation and Review

- All procedures, policies, and clinical protocols must be documented, signed, dated, and reviewed **every 2 years** or sooner if national guidelines change.
- Maintain a **Clinical Guidelines Register** listing all current guidelines in use.

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6. Monitoring and Evaluation

- Use KPIs such as:
    - % of patients managed according to national guidelines
    - Number of adverse clinical events reviewed
    - Staff compliance with documentation standards
- Annual review of the effectiveness of the clinical management system with corrective actions implemented where needed.

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7. References

- National Health Act (Act 61 of 2003)
- HPCSA Ethical Guidelines (Booklet 9)
- Department of Health Clinical Guidelines (e.g., EML, PHC Manual)

ATTACHMENT

✅ Availability of Clinical Guidelines in Consultation Rooms

Clinical guidelines can be made available in consultation rooms through various means:

- **Printed Copies**: Hard copies of the latest clinical guidelines can be displayed or stored in consultation rooms for easy access by healthcare providers.
- **Electronic Access**: Guidelines can be made available electronically through:
    - **Computers or Tablets**: Devices in consultation rooms can provide access to electronic versions of the guidelines.
    - **Clinical Decision Support Systems (CDSS)**: Integrated systems that provide real-time access to guidelines during patient consultations.
    - **Mobile Applications**: Healthcare personnel can access guidelines via mobile apps on their devices.

It's essential that these guidelines are regularly updated and easily accessible to ensure adherence to national standards and best practices.

📝 Documentation and Communication

To ensure that clinical guidelines are effectively communicated:

- **Staff Training**: Regular training sessions should be conducted to familiarize healthcare personnel with the guidelines and their application.
- **Internal Communication**: Use of newsletters, emails, or meetings to disseminate updates or changes to the guidelines.
- **Feedback Mechanisms**: Establish channels for staff to provide feedback on the guidelines and suggest improvements.

📋 Checklist for Compliance

Requirement	Status	Notes
Printed copies of clinical guidelines available in consultation rooms	[ ] Yes [ ] No	
Electronic access to guidelines via devices or applications	[ ] Yes [ ] No	
Regular updates to guidelines	[ ] Yes [ ] No	
Staff training on guidelines	[ ] Yes [ ] No	
Internal communication of guideline updates	[ ] Yes [ ] No	
Feedback mechanisms in place	[ ] Yes [ ] No	

By ensuring the availability and communication of clinical guidelines, your health establishment will align with national policies and provide high-quality care to users.

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Receipt Acknowledgement for this SOP

I have read and been informed about the content, requirements, and expectations of this policy for this practice. I understand that if I have questions, at any time, regarding this policy, I will consult with my immediate supervisor or my Human Resources staff members. Please read the policy/procedure carefully to ensure that you understand the policy/procedure before signing this document.

Employee Signature	Employee Printed Name	DATE	Employee Signature	Employee Printed Name	DATE