

Clinical Manager vs CQI Assistant

Clinical Manager

Daily issues

Focus

Daily tasks and immediate needs (e.g. pain charts, daily vitals)

Scope

Distributes attention across all issues (wounds, weight, behaviours etc.)

Staffing

Completed by everyone (PCAs, nurses, CCCs)

Purpose

Clinical compliance and care delivery (e.g. completing required Braden Risk Assessment and Wound Chart)

Action

Monitor and document condition (charting weight, behaviours, movements)

Role

Primary source for daily operational issues

CQI Assistant

Ongoing issues (Weekly/monthly/yearly)

Focus

Long term trends and continuous improvement (e.g. rising number of wounds over 6 months plus)

Scope

Focuses on specific issues per quarter (relevant to facility data)

Staffing

Completed by select group (rotating quarterly team)

Purpose

Clinical education and improvement (e.g. providing tips like “the 30-degree tilt”, “hand check”, “5-second scan”)

Action

Prevent and treat issues (arranging specialised mattresses, position devices)

Role

Supplementary source for continuous improvement