

02 OCT 2007

on Safety and Quality
in Health Care

National Safety and Quality Accreditation Review
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To Whom It May Concern

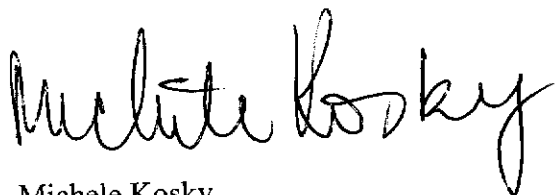
Please find enclosed feedback from Health Consumers' Council WA on
An Alternative Model for Safety and Quality Accreditation in Healthcare.

The Health Consumers' Council is an independent community based organisation, representing the consumers' 'voice' in health policy, planning, research and service delivery. The Council advocates on behalf of consumers to government, doctors, other health professionals, hospitals and the wider health system. Funded by the Department of Health WA, the Council provides a state wide service. To find out more you can check our website www.hcc-wa.global.net.au.

Generally, we believe that the inclusion of consumers as suggested by this document is tokenistic. Some consumers who read the document reported that the 'benefits/effects on consumers of some of the proposals draw a long bow'.

The reporting of accreditation outcomes to the community is applauded and a national common language is essential.

In addition, the consistency of survey/assessment, inter-assessor reliability is a must especially if survey outcomes are being used to identify trends, develop policies and allocate resources.



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NATIONAL SAFETY AND QUALITY ACCREDITATION OF HEALTH CARE

Comments on Alternative Model for Safety and Quality Accreditation of Health Care

Need greater clarity for consumers on what an accredited health service is

1 Separation of safety assurance and quality improvement assessment processes

If safety and quality are separated how will consumers be involved in quality improvement? While consumer participation in safety is acknowledged, quality improvement is seen as more of an organisational issue.

2 Separation between safety standards development and assessment of health services

Agree that there should be a national safety standards framework.

Separation of standards setting and accreditation assessment should occur to provide transparency and remove potential for conflict of interest.

National standards should be adopted.

Essential that consumers continue to be involved in standard development, standard setting bodies and assessment of health services.

3 Accreditation of all settings of care where services are provided by registered health professionals

All health services provided by registered health professionals should comply with minimum safety standards.

4 Development of national minimum safety standards that apply across all (similar) settings of care

Essential that there are national minimum safety standards for all health services providing health care. Consumers should be reassured that all health services meet at least minimum safety standards. Health care settings where there is any risk of harm to patients should have to meet minimum safety standards regardless of whether the health professionals are registered or not.

Agree that unaccredited services pose an unacceptable risk to patients.

5 Assessment of non-clinical and technical compliance

Support external assessments being recognised so there is no duplication of assessment, reporting or compliance effort.



NATIONAL SAFETY AND QUALITY ACCREDITATION OF HEALTH CARE

While meeting minimum safety standards is critical to patient welfare, it needs to be balanced with acknowledgement of the impact on providers especially small ones.

6 Development of national framework for quality improvement

Would provide increased consistency of quality improvement across health services. Value in having a centralised system that provides best practice and consumer focus in quality improvement planning and processes.

7 Establishment of a national body to lead and coordinate change

National body needs to be established to provide coordinated consistent approach to accreditation.

8 Review of surveyor training

Training of surveyors critical to the effectiveness of accreditation. Consideration needs to be given to the training of consumer surveyors as well.

9 Associated reforms

Unannounced surveys – while this seems to be a good idea it needs to be piloted to determine what impact this will have on health services.

Piloting of tracer methodology has merit – certainly need to look at accreditation from a patient's perspective and how the care is received not just about how it is administered.

Developing a process for mutual recognition of accreditation processes and outcomes – reduce the stress on services as much as possible.

Definitely should be a consumer centred system.

Implementation of the alternative model

The implementation of an alternative model should be introduced with as little impact as possible on health services because at the end of the day stresses on health service result in reduced health care for patients. While accreditation is a useful tool for ensuring that health services are safe and offer quality care to patients it is important that the patient remains as the focus of the health care.