

**ACSQHC Consultation - An alternative model for safety & quality accreditation of health care  
HCSCC SA response - August 2007 Consultation paper  
& 13 September 2007 Accreditation Forum SA**

1. The priority for health care accreditation should be evidence based, mandatory or minimum, safety standards & demonstrable evidence of compliance with them - structures, processes & outcomes
2. Mandatory, or minimum, safety standards & quality improvement standards still need to be linked to ensure that service providers are required to meet safety standards & to continuously improve towards meeting quality standards
3. Consumers & carers should be actively engaged in the new accreditation framework for the mandatory or minimum, safety standards
4. Consideration should be given to weighting the mandatory, or minimum, safety standards for example
  - those that involve high risk activities eg invasive procedures
  - those that involve low risk activities eg record systems
5. Mandatory, or minimum, safety standards should include systems to address serious near misses & serious adverse events - SAC 1 & 2 events
6. Incentives for meeting mandatory, or minimum, safety standards should be considered. Sanctions should apply for failure to meet mandatory, or minimum, safety standards. The focus should also be maintained on identifying areas for safety improvement with actions plans & timeframes. Incentives & sanctions should include funding, reimbursement, licensing conditions & the scope of clinical privileges.
7. Public reporting should include the achievement or failure to achieve mandatory, or minimum, safety standards
8. Funders should be responsible for providing resources to public health service providers to enable them to:
  - a. engage in the development of new framework
  - b. implement the new framework
  - c. meet the mandatory, or minimum, safety standards
  - d. take action on areas identified for safety improvements

Funders should also contribute resources to peak groups to improve the capacity of service providers to understand & work towards the mandatory, or minimum, safety standards
9. The national standard setting entity should determine the mechanisms for revising the mandatory, or minimum, safety standards & communicating changes to service & accreditation providers promptly
10. The new accreditation system needs to be flexible to:
  - a. enable service providers with different resources to engage in the new framework & to meet the mandatory or minimum safety standards
  - b. accommodate unique services that, if they were withdrawn, would leave either communities or specific groups of service users without services