

FACT SHEET 8: ACCREDITING AGENCY PERFORMANCE OVERSIGHT AND FEEDBACK

AHSSQA Scheme

The Commission is responsible under the National Health Reform Act 2011 for the formulation of standards relating to health care safety and quality matters and for formulating and coordinating the Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme (the Scheme).

The Commission has undertaken a comprehensive review of the Scheme and produced a series of fact sheets to outline the changes to accreditation processes for health service organisations.

NSQHS Standards (second edition)

The National Safety and Quality Health Service (NSQHS) Standards were developed by the Commission in collaboration with the Australian Government, states and territories, the private sector, clinical experts, patients and carers. The primary aims of the NSQHS Standards are to protect the public from harm and to improve the quality of health service provision. They provide a quality-assurance mechanism that tests whether relevant systems are in place to ensure expected standards of safety and quality are met.

Health service organisations will transition to the second edition of the NSQHS Standards from January 2019.

The Commission's processes of oversight and feedback are being expanded and enhanced with the introduction of the second edition of the NSQHS Standards and review of the AHSSQA Scheme.

These processes are designed to promote improvements in performance across all approved accrediting agencies, ensure consistent implementation of revisions to the AHSSQA Scheme, as well as ensuring assessments are rigorous and completed within agreed timeframes.

An accrediting agency has approval to assess health services organisations using the NSQHS Standards subject to conditions that are designed to ensure:

- Accrediting agencies have the systems and processes in place to effectively convene assessments and award accreditation certificates
- Assessors are skilled, experienced and well-trained in conducting assessments
- Data is provided to the Commission and regulators to monitor accreditation outcomes
- Assessment of the NSQHS Standards is consistent across all approved accrediting agencies.

Oversight and feedback processes conducted by the Commission consist of:

1. Post-assessment surveys

Following the completion of an accreditation assessment, the Commission invites each health service organisation to participate in a short online survey about their experience of the assessment process and their accrediting agency.

The survey includes questions about the assessors' skills and approach to the assessment and the accrediting agencies processes for organising and preparing for the assessment.

This information is used to measure compliance with approval by accrediting agencies and identify any specific issues with individual accrediting agencies.

2. Observation visits

A representative of the Commission attends at least one assessment visit each year for each approved accrediting agency, to observe assessor performance.

The observation visit provides first-hand information about how an assessment is conducted and insights into the skills of assessors. It also provides insights into the rigor of the assessment process.

This information is used to measure compliance with the conditions of approval by accrediting agencies and identify training requirements for assessors.

Observation visits are only conducted with prior agreement from the health service organisation. The observer does not influence the outcome of the assessment process.

3. Analysis of accreditation outcomes data

Accrediting agencies regularly submit accreditation outcomes data to the Commission for each assessment completed. The Commission analyses this information to determine if there are any anomalies or significant variation between accrediting agencies or across sectors.

The Commission has worked with regulators and accrediting agencies to describe the data elements and definitions that will be collected at each assessment against the NSQHS Standards (2nd ed.). An electronic portal is being developed for the submission of data, and unique identifiers are being allocated to each health service organisation. These mechanisms are expected to improve the data quality and accuracy.

4. Accrediting agency compliance reports

In addition to providing routine data on each health service organisation assessment, accrediting agencies also submit information to the Commission, including:

- Instances of any significant risks identified during an assessment. A significant risk is one where there is a high probability of a substantial and demonstrable adverse impact for patients. In each case, a significant risk will be sufficiently serious to warrant an immediate response to reduce the risk to patients. This may include interventions or changes to systems, the clinical care service environment, or clinical practice
- Health service organisations changing accrediting agency during an assessment or before an accreditation award is determined
- All actions that are awarded *not applicable* status at assessment
- Information on health service organisations that are not awarded accreditation
- Information on assessors, such as the number of assessment's they complete each year, and their participation in training.

This information is used both as a compliance measure for accrediting agencies against the terms and conditions of approval, and to identify health service organisations for which there is a potential for increased risk of harm.

5. Accrediting Agency Working Group

The Commission convenes a working group made up of approved accrediting agencies quarterly to support the ongoing implementation of the AHSSQA Scheme. This provides a forum to share information and address emerging issues as well as collaborate with approved accrediting agencies on strategies for improvement. Accrediting agencies are required to send a representative to these meetings.

6. Analysis of issues raised through the Advice Centre

The Commission operates an Advice Centre using a dedicated telephone line and email address which is available to anyone with queries about the NSQHS Standards and AHSSQA Scheme.

The Commission analyses information and issues from Advice Centre queries to determine trends and actions that may need to be taken. This information has been used to develop Advisories, incorporate into assessor training and inform changes to the AHSSQA Scheme.

7. Receipt of information from regulators

The Commission receives information from regulators (state and territory health departments) about their experience of accrediting agencies conducting assessments for health service organisations that they manage.

The Commission collates information from each of these sources in performance reports prepared annually for each accrediting agency. This information is discussed with agencies to determine how the Scheme and their performance in the Scheme can be improved.

Further information

The NSQHS Standards (2nd ed.) and supporting resources are available at <http://nationalstandards.safetyandquality.gov.au>

More information on the Commission is available from www.safetyandquality.gov.au

The Advice Centre provides support on implementing the NSQHS Standards for health service organisations, surveyors and accrediting agencies.

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