



# Fact Sheet 6

# **Short notice assessments**

This fact sheet describes the operation of short notice assessments as part of the Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme (the Scheme).

# **NSQHS Standards**

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. Short notice assessments described in this fact sheet are assessed using the NSQHS Standards.

# **Short notice assessments**

From January 2019, health service organisations can choose to undertake either announced or short notice assessments. Short notice assessments are a separate assessment pathway under the AHSSQA Scheme, with specific rules associated with its application.

Participation in short notice assessments is voluntary for health service organisations, unless directed by their relevant regulator. The short notice assessment process requires health service organisations to fully comply with the requirements of the NSQHS Standards and have in place processes to demonstrate compliance at any time. Organisations contemplating short notice assessments should ensure their safety and quality systems are well embedded, that self-assessments and gap analysis are conducted regularly and there are processes to routinely monitor their safety and quality performance against the NSQHS Standards.

# Process for the short notice assessment pathway

Health service organisations are eligible to undergo short notice assessments if they hold accreditation to the NSQHS Standards, either first or second edition.

All eight NSQHS Standards must be assessed during a three year accreditation cycle\* There will be three assessment cycles within a three year accreditation period, consisting of two assessments of three NSQHS Standards and one assessment of four NSQHS Standards. This will mean that health service organisations will not be able to easily determine which of the NSQHS Standards will be assessed at any one visit (see Table 1: Process for short notice assessments).



# Table 1: Process for short notice assessments

# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



Accreditation cycle	Mandatory Assessment		No mandatory assessment		Mandatory re assessment, six months after the completion of the assessment cycle via an announced assessment
	Assessment cycle 3	Final assessment after 60 business days	No final assessment	Not met actions and actions rated met with Recommendations from assessment 3	otice visit that
		Initial assessment	Three or four Standards assessed plus actions rated met with recommendations from assessment 2		ssments in a short no ent is an announced v tial assessment ail
	Assessment cycle 2	Final assessment after 60 business days	No final assessment	Not met actions and actions rated met with Recommendations from assessment 2	ix months after any of the three assess tare met. The mandatory reassessmen ommendations or not met at the initia service organisations for more detail
		Initial assessment	Three or four standards assessed plus actions rated met with recommendations from assessment 1		essed six months after ssment are met. The n ith recommendations health service organi
	Assessment cycle 1	Final assessment after 60 business days	No final assessment	Not met actions and actions rated met with recommendations from assessment 1	A health service organisation can be reassessed six months after any of the three assessments in a short notice accreditation cycle if the criteria for reassessment are met. The mandatory reassessment is an announced visit that reviews all actions that were rated met with recommendations or not met at the initial assessment.  See Fact sheet 3: Repeat assessment of health service organisations for more detail
		Initial assessment	Three or Four Standards assessed in any order		A health service orga accreditation cycle if reviews all actions tl See <b>Fact sheet 3: Re</b>
			A. No not met actions	B. Some not met actions	C. 16% or more of all actions assessed not met OR 8 or more actions from the Clinical Governance Standard not met



There are to be no more than two assessments in any one year. At each assessment, there is an initial assessment; and if actions are not met, a final assessment after a 60 business day remediation period; followed by a report on the assessment generally within 20 business days. Following initial assessment, accrediting agencies are required to inform the heath service organisation if there is evidence that they are likely to meet the criteria for mandatory reassessment. For more information on mandatory reassessment, see Fact sheet 3: Repeat assessment of health service organisations. The health service organisation will continue to be recognised as accredited whilst they satisfactorily meet the requirements of the short notice assessment pathway. This includes participation in all required assessment events and keeping current their documentation required by the accrediting agency.

# Prior to short notices assessments commencing:

- Health service organisations should discuss short notice assessments with their regulator, if required and notify their accrediting agency they wish to commence short notice assessments
- Accrediting agencies will prepare a comprehensive list of all assessors that could participate in assessments for review and comment by the health service organisation. This reduces potential conflicts of interest associated with assessment team member
- Accrediting agencies will have policies, processes and protocols to conduct short notice assessments, along with training for assessors in short notice assessments.

# The process of conducing a short notice assessments will involve accrediting agencies:

- Providing health service organisations with 48-hour notice of an assessment commencing and specifying which standards will be assessed
- Assessing all actions in the three or four NSQHS Standards selected at an initial assessment, with the exception of actions that have been confirmed as not applicable by the accrediting agency
- Reviewing actions that were rated not met or met with recommendations at the previous assessment
- Providing a remediation period of 60 business days when there are not met actions at initial assessment
- Allocating 20 business days from the conclusion of the initial assessment for the health service

- organisation to provide any additional information unavailable at assessment. These 20 business days are included in, not additional to, the 60 business days allowed for remediation
- Allowing health service organisations to nominate up to 20 business days per year when assessments are not to be conducted or 'blackout' days
- Using the PICMoRS structured assessment process.
   See Fact Sheet 12: Assessment framework for safety and quality systems for more information on PICMoRS assessments.
- Ensuring health service organisations submit an attestation statements annually. More information on attestation statements is available from <u>Fact</u> sheet 7: Governing body attestation statement.

Health service organisations undergoing interim accreditation are not permitted to participate in the short notice assessment pathway until they have completed the interim accreditation process

# Transferring between the announced and short notice assessment pathways

# Transferring from 'announced' to 'short notice' assessment pathway

Health service organisations transferring to short notice assessments may do so at any point during their accreditation cycle, but no later than twelve months before their current accreditation cycle expires. The first short notice assessment cycle should occur more than 12 months before the current accreditation to the NSQHS Standards (either first or second edition) expires.

The three years short notice accreditation cycle ends with the expiry date of the current accreditation cycle. All three assessment cycles must be completed within the three-year period, and before the accreditation expiry date.





# Transferring from 'short notice' to 'announced' assessment pathway

Health service organisations can transfer to an announced pathway, with requirements determined based on their progress in the short notice assessment pathway as follows:

Where the health service organisation has completed all three required short notice assessments—the next assessment visit will be announced and all eight NSQHS Standards will be assessed. This assessment must be completed before the current accreditation cycle expires.

Where the health service organisation has completed two short notice assessments and all applicable actions in the eight NSQHS Standards have been assessed—the next assessment visit will be announced and all eight NSQHS Standards will be assessed. This assessment must be completed before the current accreditation cycle expires.

Where a health service organisation has completed one or two short notice assessments but all applicable actions from the eight NSQHS Standards have not been assessed—the health service organisation must commence an assessment to all eight NSQHS Standards with sufficient time to complete the assessment cycle before the current accreditation expires.

# Roles and responsibilities

To ensure the short notice assessment pathway operates effectively and efficiently, the roles and responsibilities for each of the groups involved are outlined below.

## **Accrediting agency**

- Establish the processes and procedures for conducting short notice assessments
- Schedule short notice assessments
- Train their assessors to undertake short notice assessments
- Work with the Commission to determine which NSQHS Standards will be assessed at each short notice assessment
- Comply with the conditions of approval relating to short notice assessments.

### **Assessors**

- Assess day to day practice, largely in clinical areas
- Use PICMoRS as the structured approach to assessment.

### Regulators

 Encourage and support health service organisations being assessed via the short notice assessment pathway.

# **Health service organisations**

- Ensure compliance with the NSQHS Standards and monitor and review ongoing safety and quality performance
- Develop processes to be implemented during short notice visits by assessors.

### The Commission

- Support health service organisations, regulators and accrediting agencies implementing short notice assessments
- Provide tools and resources to support the implementation of the NSQHS Standards and the introduction of short notice assessments
- Coordinate the ongoing evaluation of the short notice assessment pathway.

# **Evaluation of the short notice** assessment pathway

The introduction of short notice assessments is a departure from previous accreditation processes, and was not available for health service assessments to the first edition of the NSQHS Standards. To learn how and where this methodology can be most effective the introduction and application of short notice assessment is being monitored and evaluated by the Commission. Those undergoing short notice assessments are invited to participate in these processes.

Table 2 outlines the steps health service organisations and accrediting agencies should take when implementing short notice assessments.





**Table 2: Implementing short notice assessment** 

Health service	organisation	Accrediting agency			
Preparing for short notice assessment					
Commencing	Discuss short notice assessment with your regulator to determine if there are any requirements for commencing short notice assessment set by them  Undertake a gap analysis and ensure the organisation complies with the NSQHS	Provide information for health service organisations proposing to undergo short notice assessment  Register organisation on short notice assessment pathway  Finalise contractual requirements in relation to			
	Standards  Review the conditions in this fact sheet regarding the timing and requirements for short notice assessments	assessment via short notice assessment  Ensure the HSO has at least 12 months before their current to the NSQHS Standards accreditation expires			
	Contact your accrediting agency and notifying them of your move to short notice assessments  If relevant, apply for not applicable actions in	Develop policies, protocols and procedures for conducting short notice assessments			
	line with Advisory AS18/01  Review the list of assessors from your accrediting agency and identify any persons	Train the assessor workforce in requirements and assessment at short notice assessments  Convene a list of possible SNA assessors			
	that may have a conflict of interest	Provide advice to the HSO on requirements in relation to SNA, including finalising not applicable actions and agreeing 'blackout' days			
At enrolment	Provide feedback on the suitability and any potential conflicts of interest associated with list of assessors provided by accrediting agency	Identify assessors that could participate in assessments with specific organisations and seek their input on the suitability and potential conflicts of interest			
	Identify any 'not applicable' actions and seek exemptions from accrediting agency, if relevant	Review process the organisation's application for 'not applicable' of actions against Advisory AS18/01			





### **Health service organisation Accrediting agency Planning** Notify the workforce of assessment by short Schedule assessments dates and ensure there notice pathway are internal mechanisms to keep the schedule confidential Provide accrediting agency with dates for the 20 business days when assessments Train assessors in processes for short notice cannot occur assessment Select assessment sites, if multi-site health Establish governance structures for the implementation of Standards service Identify key officers to be contact when Draft assessment timetable for each standard accrediting agency gives 48 hour notification of covering the sites under assessment, with at assessment least 60% of the time spent in clinical areas Establish and maintain a self-assessment Collect routine data from health service against the NSQHS Standard organisations on: Submit Attestation Statements annually to Organisations included in assessment Accrediting Agency process Organisational structure for these Establish process for meeting assessment organisations team, including issuing security passes, providing access to IT system, identifying a Service profile meeting room and orientating assessors to

### Notification of assessment 48-hours before assessment

the facility

### Communication

Implement communication plan for notifying key officers in the organisation of the upcoming assessment

Notify the workforce of the assessment dates, duration, sites and that they can expect to see and speak with assessors during this time

Note assessment timetable (Table 1: Process for short notice assessment)

Notify health service organisations of:

Collect and record submission of Attestation

Date of assessment

Statements

- Standards to be assessed
- Assessment duration
- Sites to be assessed
- Name and contact details of the lead assessor
- Assessment team

Provide the schedule for the assessment visit

Specify on locations within an organisation to be assessed, if known

Review pre assessment documentation submitted by the organisation

Provide assessors with access to pre-assessment documentation





Health service	e organisation	Accrediting agency				
At initial assessment						
Assessment	Provide assessment team with brief orientation to the organisation, safety induction, IT access,	Participate in orientation to the organisation and safety induction				
	evacuation procedures	Obtain IT access				
	Provide information on the organisation's electronic filing system and file naming convention	Conduct assessment using PICMoRS structured assessment methodology				
	Participate in assessment processes, where required	Notify organisation of issues identified that may lead to not met or met with recommendation ratings				
	Notify the workforce of feedback from assessors at the conclusion of the assessment	Provide organisation advice on not met actions and likely dates for final assessment, if relevant				
		Provide findings and ratings for all actions assessed to the accrediting agency				
Post-initial asse	essment					
Reporting	Provide accrediting agency with any additional information or evidence to be considered	Provide organisation with a report on not met actions within 5 business days of assessment				
	within 20 business days  If one or more actions were rated not met,	If one or more actions were rated not met, confirm final assessment process and date				
	develop an action plan and provide accrediting agency with evidence of compliance with these	Conduct final assessment if required				
	action within 60 business days	Inform the heath service organisation if there is				
	Participate in final assessment if required	evidence that they are likely to meet the criteria for mandatory reassessment				
Post-assessmer	nt cycle					
Reporting	Review draft assessment report and provide feedback to accrediting agency if required	Provide the organisation with a final report, generally within 20 business days of assessment and up to 30 business days for large and complex organisations				
Mandatory rep	eat assessment					
Reassessment	Participate in a mandatory announced reassessment if directed by the Commission	Conduct a mandatory reassessment as an announcement assessment as per Fact sheet 3: Repeat assessment of health service organisations				

# **Questions?**

For more information, please visit: safetyandquality.gov.au/standards/nsqhs-standards

You can also email the NSQHS Standards Advice Centre at <a href="mailto:accreditation@safetyandquality.gov.au">accreditation@safetyandquality.gov.au</a> or call 1800 304 056.



