

# AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE



## ADVISORY

<b>TITLE</b>	<b>Comprehensive Care Standard: Screening and assessment for risk of harm</b>
Advisory number	AS18/14
Version number	2.0
TRIM number	D20-17989
Publication date	July 2020
Replaces	AS18/14 version 1.0 published December 2018
Compliance with this advisory	It is mandatory for approved accrediting agencies to implement this Advisory
Information in this advisory applies to	All approved accrediting agencies All health service organisations
Key relationship	Comprehensive Care Standard
Attachment	n/a
Notes	Updated timelines for compliance
Responsible officer	Herbert Down Director, Partnering with Consumers Phone: 1800 304 056 Email: <a href="mailto:accreditation@safetyandquality.gov.au">accreditation@safetyandquality.gov.au</a>
To be reviewed	December 2020



# ADVISORY

## **AS18/14: Comprehensive Care Standard: Screening and assessment for risk of harm**

### **PURPOSE:**

This advisory describes the minimum requirements for Actions 5.7 and 5.10 for health service organisations to demonstrate work towards establishing systems for screening and assessment for risk of harm.

### **ISSUE:**

The Comprehensive Care Standard requires the use of screening and assessment processes with patients, families, carers and other support people as a means of identifying potential risk of harm and to inform comprehensive care planning.

The subjects of this advisory are Actions 5.7 and 5.10 which state:

Action 5.7: The health service organisation has processes relevant to the patients using the service and the services provided:

- a. For integrated and timely screening and assessment
- b. That identify the risks of harm in the 'Minimising patient harm' criterion.

Action 5.10: Clinicians use relevant screening processes:

- a. On presentation, during clinical examination and history taking, and when required during care
- b. To identify cognitive, behavioural, mental and physical conditions, issues, and risks of harm
- c. To identify social and other circumstances that may compound these risks.

These actions build on actions from the first edition of the NSQHS Standards and have been expanded beyond screening and assessment to identify risk of harm from falls and pressure injury to include the requirement to screen and assess for other risks of harm relevant to a patient.

In addition to the general screening and assessment processes required under Actions 5.7 and 5.10, the Standard also highlights the need to identify specific risks of harm in the areas of falls, pressure injuries, cognitive impairment, malnutrition, self-harm and suicide, violence and aggression, and seclusion and restraint.

The Commission has developed guidance to support health service organisations with approaches to person-centred risk screening which can be found at [Essential elements for comprehensive care delivery](#). The scope of the strategies implemented should reflect the risks to patients and the context and type of services provided.

#### **REQUIREMENTS:**

To comply with Action 5.7 and 5.10, health service organisations must consider the risk of patient harm relevant to their context and:

- By 31 December 2019, complete a gap analysis identifying:
  - Common risks of harm to patients as identified by local data
  - Relevant policies and procedures relating to risk screening
  - Relevant guidelines relating to the implementation and use of risk screening processes
  - Tools currently used for risk screening
  - Roles, responsibilities and accountability for screening and assessment within the organisation
  - Any gaps in policies, processes, or responsibilities related to risk screening.
- By 31 December 2020, commence developing, or refining, organisation-wide policies and processes for risk screening including:
  - Develop an agreed screening approach within the organisation that individualises the care and interventions to the person
  - Endorse core assessment tools for use within the organisation
  - Develop models of care that mitigate commonly identified risks within specified clinical areas, service areas or populations
  - Provide access to orientation training or education for the workforce on screening and assessment processes.
- By 31 December 2022, complete the development of an organisation-wide approach to risk screening including:
  - Use of screening processes endorsed by the organisation
  - Implementation of models of care that mitigate commonly experienced risks of harm
  - Provision of orientation education or training on the organisation's approach to risk screening
  - Establishment of a system to monitor and evaluate the outcomes of Action 5.10.

Accrediting agencies are required to:

- Review evidence that:
  - By 1 January 2020, the organisation has completed the gap analysis and is developing an organisation-wide approach to risk screening
  - By 1 January 2021, the organisation has developed, or refined, organisation-wide policies and processes for risk screening describing organisation endorsed tools, models of care to mitigate commonly experienced risks of harm, orientation education or training for the organisation's risk screening approach, and a system for the ongoing monitoring and evaluation of the outcomes of Action 5.10.
  - By 1 January 2023 the organisation has implemented an organisation-wide approach to risk screening including use of organisation endorsed tools, implementing models of care to mitigate identified commonly experienced risks of harm, providing orientation education or training on the approach to risk screening and a system for ongoing monitoring and evaluation of the outcomes of Action 5.10.
- Rate Actions 5.7 and 5.10 as met only if the organisation demonstrates progress against the specific requirements in the expected timeframe.