

**FACT SHEET**  
for CMO mental health  
service providers

# National Safety and Quality Mental Health Standards for Community Managed Organisations assessment process

The National Safety and Quality Mental Health Standards for Community Managed Organisations (NSQMHC MO Standards) aim to improve the quality of mental health service provision, and to protect consumers, families and carers from harm. The three NSQMHC MO Standards include 82 actions. They describe the level of care and the safeguards that a mental health service should provide.

This fact sheet outlines the process for service providers seeking accreditation.

The Australian Commission on Safety and Quality in Health Care (the Commission) is responsible for writing and coordinating the accreditation scheme. This is known as the [Australian Health Service Safety and Quality Accreditation \(AHSSQA\) Scheme](#).

The Commission has developed an accreditation process for the NSQMHC MO Standards, which will operate under the AHSSQA Scheme.

To become accredited, community managed service providers must pass an assessment to show they have met the NSQMHC MO Standards. Accreditation assessments are conducted by independent accrediting agencies, approved by the Commission.

Approved accrediting agencies are listed in a [register](#) on the Commission's website.

## Self-assessment

Prior to an assessment taking place, service providers are encouraged to undertake a self-assessment of their safety and quality systems, using the Commission's [self-assessment tool](#). By conducting a self-assessment, providers can identify both areas where their organisation meets the standards and areas where improvement is required.

## Formal assessment

The formal assessment process follows 11 steps:

1. **Application** – Service providers complete an application for an assessment with an approved accrediting agency.
2. **Schedule** – Service providers work with their accrediting agency to clarify dates, requirements and arrangements for an assessment. The accrediting agency must provide at least four weeks' notice of the date for commencement of the initial assessment.

3. **Application for not applicable actions** – Where relevant, a service provider may apply to their accrediting agency for relevant actions to be rated 'not applicable' at assessment.
4. **Initial assessment** – The accrediting agency conducts an initial on-site assessment. A qualified lead assessor from the agency will lead the assessment team, manage and coordinate the accreditation assessment process. The lead assessor will have a sound understanding of community based mental health services within Australia.
5. **Exceptions report** – Within five business days of the initial assessment, the accrediting agency provides an exceptions report to the service provider outlining the outcome of the initial assessment including specifying actions that are rated 'not met' or 'met with recommendations', and the reasons for these ratings.
6. **Remediation period** – Where required, a period of 60 business days is allowed for a service provider to address any areas where the service provider does not meet the requirements in the NSQMHCMO Standards.
7. **Final assessment** – Accrediting agencies schedule and conduct a final accreditation assessment for actions that were 'not met' and 'met with recommendations' at initial assessment stage.
8. **Outcome and final report** – The accrediting agency determines the accreditation outcome based on the final assessment. The agency will deliver a final assessment report within 30 days of completion of the final accreditation assessment detailing findings for each action assessed, including suggestions for improvement, and requirements to achieve the actions that are rated 'met with recommendations'.
9. **Submission of data** – The Commission receives data on assessment outcomes from accrediting agency by the tenth day of the month.
10. **Registration** – Service providers who are 'Accredited' will be published on the Commission's website as a register of assessed community-managed mental health service organisations and/or mental health service provider.
11. **Ongoing monitoring** – Service providers continue their monitoring and quality improvement process to continue to achieve the NSQMHCMO Standards throughout the three-year accreditation cycle.

## What happens at an assessment?

Assessors from an approved accrediting agency will conduct assessments of the systems and processes in place to assure the safety and quality of community-managed mental health service providers. It is recommended that assessors use [PICMoRS](#) (Process, Improvement, Consumer participation, Monitoring, Reporting, Systems) to systematically undertake the assessment.

### On-site assessment

This stage will test safety and quality systems and processes are working in practice. It will include interviews with the service provider, members of the workforce, consumers and carers.

Assessors will provide feedback following the review. Assessors will also list the areas that they want to review during the assessment, including [not-applicable actions](#) that have been nominated by the service provider. Detailed pre-planning will help to ensure a positive assessment experience.

During the on-site assessment, assessors will familiarise themselves with the service provider's mental health services. They will interview a range of people, including the service provider's governing body and members of the workforce. Where possible, they will also seek to engage with service users and their support people.

Where the service provider is given one or more ratings of 'Not met' or 'Met with recommendations' from the on-site assessment, a period of up to 60 business days is allowed for remediation activity to occur before a final assessment is conducted.

## Assessment outcome

To be awarded accreditation, a service provider needs to have achieved a rating of 'met' or 'met with recommendations' for all applicable actions.

### Rating scale for assessment

#### Met

All requirements are satisfied.

#### Met with recommendations

The requirements of an action are largely being implemented by the service provider, with the exception of a minor part of the action, where additional implementation is required.

'Met with recommendations' may not be awarded at two consecutive assessments where the recommendation is made about the same service provider and the same action. In this case an action should be rated as 'not met'.

#### Not met

Part or all of the requirements of the action have not been implemented.

#### Not applicable

The action is not relevant in the service context being assessed. The Commission's guidance relating to [not-applicable actions](#) need to be taken into consideration when awarding a not applicable rating and assessors must confirm the action is not relevant in the service context during the assessment visit.

## Accreditation cycle

Service providers assessed as 'Accredited' will be awarded this outcome for a period of three years.

Early reassessment may be triggered when one or more of the following criteria are met:

- Significant change to the governance of the service provider
- Significant change to the mental health services provided.

## Further information

Further information on the NSQMHC MO Standards and accreditation can be found at:

[www.safetyandquality.gov.au/mh-cmos](http://www.safetyandquality.gov.au/mh-cmos)

Email: [Advice.Centre@safetyandquality.gov.au](mailto:Advice.Centre@safetyandquality.gov.au)

Phone: 1800 304 056.

[safetyandquality.gov.au](http://safetyandquality.gov.au)



© Australian Commission on Safety and Quality in Health Care 2025