

Guidance on out-of-cycle assessments

For accrediting agencies and health service organisations

This resource provides guidance to health service organisations accredited to the [National Safety and Quality Health Service Standards](#) on requirements for out-of-cycle assessments when there are material changes that could increase risks of patient harm.

Accreditation Cycle

Under the Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme, health service organisations are accredited and must be assessed at least once during the three-year accreditation cycle to retain accreditation.

Organisations undergo change for a variety of reasons including change in ownership, relocation, expansion of scope of practice or the commencement of new services. Some of these changes can present significant increased risks of harm to patients. When this occurs a review of compliance with standards may be warranted. Not all situations warrant an out-of-cycle assessment.

Managing Risk

Organisations are responsible for identifying and managing the risks associated with organisational change. **Box 1** identifies some of the situations that might be considered material change and may lead to increased risks of patient harm.

Box 1. Situations that might be considered material change and may increase risks of patient harm

- Change of ownership and governance of a private health service organisation
- Changes or prolonged gaps in key leadership or executive positions across a number of positions

- Significant increase in complexity of the scope of service provision
- Relocation of the health service organisation to new facilities
- Merger of one or more health service organisations

Guidance on out-of-cycle assessment

Requests for an out-of-cycle assessment will be considered by the Australian Commission on Safety and Quality in Health Care (the Commission) on a case-by-case basis with input from the [relevant state or territory regulator](#).

Requests should be made via the Commission's [Safety and Quality Advice Centre](#). Where an out-of-cycle assessment is indicated, the assessment will be announced, not at short notice.

Some out-of-cycle assessments, for example due to a facility name change, or relocation, may result in a new accreditation certificate being issued. This should be discussed with your [accrediting agency](#).

The types of changes that may require an out-of-cycle assessment are described at **Table 1**.

Table 1 Changes that may require an out-of-cycle assessment

| Change | Requirement for an out-of-cycle assessment | Type of assessment | Impact on current accreditation expiry date and accreditation certificate |
|--|---|---|--|
| Change in ownership of a health service organisation | Only required where there is a substantial change in the organisations governance policies and processes resulting from the change in ownership. This should be discussed with the regulator and the Commission. | Governance Assessment - of the Clinical Governance and Partnering with Consumers Standards. | This assessment does not change the existing accreditation expiry date. New accreditation certificate <i>may be</i> required if the organisation name has changed and a certificate is required as part of a regulatory process. |
| Changes to facility licensing due to increased scope or commencing new scope of services | Required at the direction of the relevant regulator | Governance Assessment - of the Clinical Governance and Partnering with Consumers Standards. Plus additional Standards or actions not previously assessed that become relevant due to the changes to licensing arrangements | The accreditation expiration date <i>may</i> change. This should be discussed with the regulator and Commission before being finalised. A new certificate <i>may be</i> required if expiry date has changed and a certificate is required as part of a regulatory process |

| Change | Requirement for an out-of-cycle assessment | Type of assessment | Impact on current accreditation expiry date and accreditation certificate |
|--|---|---|---|
| Change of key members of the leadership team and/or board, or as a result of multiple vacancies over an extended period. | <p>Generally not required.</p> <p>If all, or the majority of leadership positions are changed within a very short period of time, a review may be required. This should be discussed with the regulator and the Commission.</p> | Governance Assessment - of the Clinical Governance and Partnering with Consumers Standards. | <p>This assessment does not change the existing accreditation expiry date.</p> <p>New certificate not required.</p> |
| Expansion into new areas of service provision | <p>May be required with significant increase in the complexity and scope of services.</p> <p>This should be discussed with the regulator and the Commission.</p> | Clinical Assessment - of the Standards or Actions that align with the increase scope of services, if they were not assessed at the last assessment to the NSQHS Standards. | <p>This assessment does not change the existing accreditation expiry date.</p> <p>New certification <i>may be</i> required if actions or standards previously rated not applicable are assessed.</p> |
| Relocation of a health service organisation | | | |
| Relocation with changes to the physical address | <p>May be required.</p> <p>This should be discussed with the regulator and the Commission.</p> | Governance Assessment - of the Clinical Governance and Partnering with Consumers Standards as a minimum. | <p>This assessment does not change the existing accreditation expiry date.</p> <p>New accreditation certificate <i>may be</i> required if the address is changed.</p> |
| Relocation with no change in ownership, governance or services provision | Not required. | Not applicable. | <p>No change to the accreditation expiry date.</p> <p>Accreditation of the existing facility is transferred to the new facility.</p> <p>New accreditation certificate <i>may be</i> required if the address is changed.</p> |

| Change | Requirement for an out-of-cycle assessment | Type of assessment | Impact on current accreditation expiry date and accreditation certificate |
|---------------------------------------|--|--|---|
| Relocation with changes in governance | <p>Generally not required.</p> <p>Only required where there is a substantial change in the organisations governance policies and processes. Discuss with the regulator and the Commission.</p> | Governance Assessment - of the Clinical Governance and Partnering with Consumers Standards. | <p>This assessment does not change the existing accreditation expiry date.</p> <p>New accreditation certificate <i>may be</i> required if the address is changed.</p> |

Relocation or expansion to a new facility to allow for new areas or increased service provision not previously provided

Generally not required.

Only required where there is a substantial increase in the complexity and scope of services.

This should be discussed with the regulator and the Commission.

Clinical Assessment - of the Standards or actions not assessed at the last assessment to the NSQHS Standards and Clinical Governance and Partnering with Consumers Standards.

This assessment does not change the existing accreditation expiry date.

New certificate not required.

Merging of health service organisations

All merging organisations accredited to national safety and quality standards.

Not required.

Not required.

The expiry date will be the date of the organisation with the next / soonest accreditation expiry date.

New accreditation certificate *may be* required if the organisation name has changed.

Some of the organisations are currently accredited to national safety and quality standards

a) Not required if the primary/parent organisation in the merger is accredited.

Not required.

The expiry date will be the date of the organisation with the next / soonest accreditation expiry date.

New accreditation certificate *may be* required if the organisation name or address has changed.

| Change | Requirement for an out-of-cycle assessment | Type of assessment | Impact on current accreditation expiry date and accreditation certificate |
|---|---|--|--|
| Some of the organisations are currently accredited to national safety and quality standards | b) Assessment required if the primary /parent organisation in the merger is not accredited. | <p>Assessment at short notice to all relevant NSQHS Standards within 12 months of the merger occurring.</p> <p>Follows routine initial and final assessment with remediation period for any not met actions.</p> | <p>The expiry date remains the date of the organisation with the next / soonest accreditation expiry date</p> <p>New accreditation certificate <i>may be</i> required if the organisation name or address has changed.</p> |
| None of the organisations are currently accredited to national safety and quality standards | Assessment required. | Routine announced assessment to all relevant the NSQHS Standards. | None of the organisations are currently accredited to national safety and quality standards |

For more information

Contact the Safety and Quality Advice Centre AdviceCentre@safetyandquality.gov.au or call 1800 304 056.



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