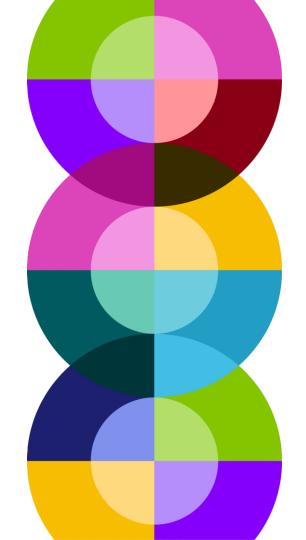




Consultation to develop the third edition

National Safety and Quality Health Service Standards



Acknowledgement of Country

The Australian Commission on Safety and Quality in Health Care pay respect to the Gadigal people as the Traditional Custodians of Country where the Commission's office is located. We extend that respect to all Aboriginal and Torres Strait Islander peoples, and their deep time connections to land, water and sky.

We recognise that knowledge about healthy Country, community and culture has been developed by Aboriginal and Torres Strait Islander peoples over tens of thousands of years and has been shared for generations. We are committed to partnering with and learning from Aboriginal and Torres Strait Islander peoples through the work that we do.



Housekeeping

- Please keep your cameras on and your microphone on mute, when others are speaking.
- We welcome your comments and feedback. Please raise your hand to speak or comment in the chat.
- We are recording this meeting for notetaking purposes. Recordings will be deleted once no longer needed.
- No comments will be attributed to an individual when the information is collated and reported
- We may use screenshots of attendees to post on our webpage and social media.
- Please let us know if you object to being recorded or having your image posted publicly.

National Safety and Quality Standards family

Standards developed by the Commission

NSQHS Standards

NSQPCH Standards

NSQDMH Standards

NSQMH Standards for CMO

NSQCS Standards and Module

National Safety and Quality
Modules

Integrated Health and Aged Care Module

National Clinical Trials Governance Framework

Environmental Sustainability and Climate Resilience Healthcare Module

Digital Mental Health Modules

Relationships



Why update the standards?

Standards lifespan generally 10 years, beyond that:

- Evidence base evolves
- Models of care change
- Context for delivery of services varies
- New issues emerge that need to be addressed

Less than 10 years imposes:

- Significant costs on health services realigning to new standards
- Difficulty keeping pace as standard development and implementation is approx. 4-5 years
- Training assessors required to review standards

Quality healthcare

Safe Effective Person-centred Accessible Integrated

Through the lens of quality, health care should also be:

Equitable

Quality care is provided regardless of person's abilities or social, economic, demographic and geographic characteristics

Efficient

Minimises cost and waste while providing quality care

Sustainable

Minimises environmental impact and reduces emissions while providing quality care

A framework perspective

Standards provide a structured framework for providing high-quality care. They address areas where there are:



The third edition is an opportunity

- 1. Shape the future of healthcare through targeted standards
- 2. Strengthen clinical governance
- 3. Improve quality of care
- 4. Prioritise patient safety
- 5. Drive data-based decision making
- 6. Build consumer trust and confidence
- 7. Incorporate new and emerging evidence-based practices
- 8. Maintain a focus on systems and processes but move beyond the minimum requirement towards evaluating outcomes and impact
- 9. Provide an overarching architecture for the standards family

Examples of emerging issues to consider

Information overload

Climate resilience and environmental sustainability Findings and recommendations from reports e.g. Royal Commissions

Digital health, digitally enabled care, cybersecurity, Al

Integration of the healthcare system

Discrimination against First Nations and other people

Increasing transactional nature of healthcare

Workforce wellbeing and safety culture

Policy and legislative changes

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Timeline

Year	Activities
2025	 First public consultation: Opportunities and information gathering on system needs First draft of the NSQHS Standards (3rd ed.) Commence scoping for Regulatory Impact Statement (RIS)
2026	 Second public consultation: feedback on the draft NSQHS Standards third edition Second draft of the NSQHS Standards (3rd ed.) Draft RIS and prepare for consultation
2027	 Pilot and evaluation of the NSQHS Standards third edition in select health service organisations Third draft of the NSQHS Standards (3rd ed.) Third public consultation: Seek feedback on RIS
2028	 Fourth draft of the NSQHS Standards (3rd ed.) Publish Decision-RIS Seek Ministerial approval for the NSQHS Standards third edition Launch NSQHS Standards third edition Fourth public consultation: development of NSQHS Standards third edition implementation resources
2029	Continued consultation, development and release of NSQHS Standards (3rd ed.) implementation resources
2030	Health service organisations commence assessment to the NSQHS Standards third edition

Specific questions

- Safety and quality risks: What existing and emerging safety and quality risks should the Commission be considering for the third edition?
- **Impact and integration:** How can the third edition have a greater impact on driving high performance and integration?
- Learning vs. compliance: How can the third edition prevent a compliance mindset and support a continuous learning approach and a focus on outcomes?
- Format and useability: What needs to change in the current format and structure of the standards for the third edition to be easier to understand and act on?
- Redundancies: Are there areas of duplication or redundancies that could be removed from the standards?

Have your say

- Provide your feedback:
 - o Complete the <u>health sector survey</u>
 - o Complete the consumer survey
 - Provide a <u>written submission</u>





Thank you

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