



Commencing short notice assessments

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AUSTRALIAN COMMISSION
ON **SAFETY** AND **QUALITY** IN **HEALTH CARE**

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Short notice assessments

Commencing from 1 July 2023

12+ month transition

Specified time

- Occur at least once in a three-year accreditation cycle
- Commence at least four months before the current accreditation expiry date
- Be completed before the current accreditation cycle expires
- Be conducted more than six months after the last assessment
- Occur no more than four years apart.



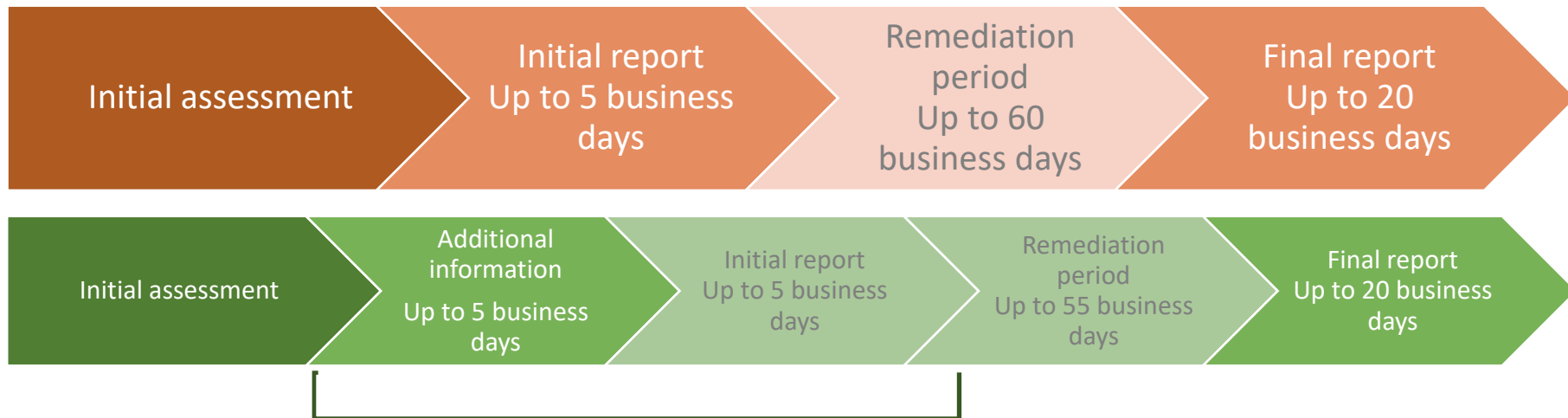
Short notice assessments – how it works in practice

Accrediting agencies regular (annual or more frequently) information exchange with health service organisations to include:

- Assessor teams to identify possible conflicts of interest
- Changes in scope of services, relocation of facilities, change in role
- Updated risk register
- Confirm sites, facilities and services to be assessed
- Updated self-assessment documentation
- Application for not applicable actions
- Contact name and location for notifying organisation of upcoming assessment
- Confirm compliance with Advisories

Short notice assessments – how it works in practice

Assessment cycle



Available if additional interviews with key personnel or consumers is required and not available at initial assessment

Short notice assessments – how it works in practice

Assessment cycle

- Initial assessment
- Up to **5 business days** for additional information – to conduct interviews with personnel or consumers, unavailable on the day and key information
- Up to **5 business days** for summary report on assessment outcomes
- Up to **55 business days** for remediation
- Final assessment
- Up to **20 business days** (30 for large complex organisations) for final report

Short notice assessments – notification of assessment



Notification of health service organisation of assessment

- Organisation contact by phone and follow up email
- Email include cc to regulator using [website contacts](#) details and Commission nsqhsstandards@safetyandquality.gov.au
- Day procedure services to be asked to confirm it is operational on planned assessment days



Short notice assessments – notification of assessment

Email confirmation

- Assessment team, lead assessor, bios if not previously provided
- Confirm time, contact person and location for initial entry of the facility
- Specifies expectation of the agency for the assessment team to be chaperoned
- May seek additional information pre assessment, such as:
 - Risk register
 - Report on mandatory training information
 - Structure of governance committee and organisation chart
 - Board makeup
 - Plans – strategic, operational, quality and RAP
 - Previous assessment reports
 - Reports from external reviews – regulator reviews, audits
 - Number and location of clinical trials sites



INFORMATION

Short notice assessments – notification of assessment

Follow up email confirmation

- Seek information pre assessment, including
 - Key organisational contacts during the assessment
 - Map of the facility
 - Name and service provided for each of the clinical and operational area
 - COVID restrictions for entry
 - Confirm scope of assessment, including clinical trial sites
 - Requests for transport, catering, meeting room and safe storage of assessor equipment
- Confirm assessors expect to speak with consumers
- Flag the need to speak with key staff, such as medical practitioners, chair MAC, members of the governing body

Short notice assessments – pre assessment

Assessor may choose to go to organisations website to review

- Annual report
- Published reports
- Scope of reported services
- Key personnel
- Other reports
- Information on clinical trials

Lead assessor to develop assessment timetable

- Allocating assessors to standards
- Incorporating 75% of time in operational areas
- Identifying not applicable actions to be verified
- Ensuring flexibility to accommodate availability of key personnel
- Plan for sampling of clinical trials sites

Short notice assessments – entry to the service

- Assessors are to
 - Provide the organisation with identification, such as photograph ID, letter of introduction, accrediting agencies official ID
 - Confirm key contacts within the organisation for the duration of the assessment
 - Confirm the availability of key personnel
 - Provide organisation with the timetable of assessment
 - Confirm times for key activities, such as:
 - Handover, story board discussions, huddles
 - Operating theatre list times
 - Clinic or ambulatory service operating times
 - Agree process for accessing additional information during the assessment



Short notice assessments – how it works in practice

- Time in operational areas – 75%
 - Operation area – includes clinical wards, sterilising units, areas where key clinical governance processes are managed
- Remaining time – 25%
 - Assessor collaboration and triangulation evidence, travelling, summation meetings, meals, review of medical records, performance data
 - Not intended to be used to convene meetings to collect or verify evidence



Short notice assessments – standards assessments

Process changes as:

- Less or different upfront information
- No presentations
- Starting assessment at the clinical level and tracing processes through the system
- Context not initially provided by senior management on commencement

Focus on:

- Information from consumers
- Safety and quality data used by clinicians, available to consumers
- High risk processes and areas
- Staff assessment and application of risk

Short notice assessments – standards assessments

Issues to be aware of:

- Organisation safety and quality initiatives/issues not evident at local level
- Directives or activities that are undertaken at network or district level
- Evidence is likely to come from multiple sources



Short notice assessments – exit

Ensure timetable includes dedicated time for assessors to debrief and agree on assessment recommendations

Feedback to senior management

- Specific and detailed information on recommendations for ratings
- If additional information is required and will be accepted by assessors
- What happens next and timeframes
- Likelihood and process for mandatory reassessment, given recommended ratings

Summation with staff

- At the discretion of the accrediting agency / assessment team
- Assessors to provide balanced information – accurately describe areas of good practice, areas requiring improvement

Short notice assessments – additional information provided post assessment

Includes:

- Interviews with absent key personnel, consumers
- Key reports completed, but not available at assessment

Excludes:

- Policies, minutes, patient records, forms
- Data generated following the assessment



Short notice assessments – assessors

What is expected of lead assessor:

- Timetabling skills
- Knowledge of clinical trials
- Reiterate to management evidence required should be available from the care of patients and management of the service

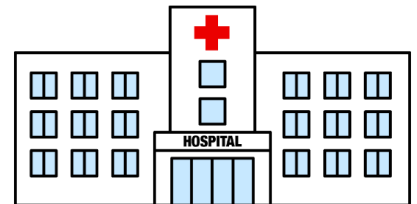
What is expected of assessors:

- IT skills to access information
- Printed materials should not longer be available or requested
- Effective regulation of their own time, given timetable more flexible

Short notice assessments – health service organisations

What is expected :

- Evidence required to demonstrate compliance with actions is generated from patient care and systems management
- Printed evidence specifically for assessors should not be required
- Assessors will require IT access, either through generic accounts, with the support of a staff member or with their own log-in
- Security access to the facility could start with letters of authorisation
- No presentations, flexible timetable
- Reviewing the collection, reporting and action taken on safety and quality data is a key part of assessments



Short notice assessments – accrediting agencies

- Upfront planning and regular contact will be key to the assessment running efficiently
- Review contractual requirements to
 - Access to facilities to conduct short notice assessment
 - Confirm not applicable actions
 - Require organisations to report on material changes in organisational structure/scope/risks
 - Ensure no conflicts with assessors
 - Set requirements for communication between organisations and agencies
 - Describe data organisations provided to the accrediting agency, timeframes and format

Short notice assessments – the Commission

- Help is available from:
 - Resources online
 - Advice centre
 - Mediation service
- Will be evaluating implementation
 - Reports back from the system
 - Observation visits
 - Post assessment survey

**AUSTRALIAN
COMMISSION
ON SAFETY AND
QUALITY IN
HEALTH CARE**

WHY?
WHEN?
WHERE?
WHAT?
HOW?
WHO?
WHICH?
WHOSE?

A large, colorful word cloud shaped like a staircase. The words are arranged in a descending spiral pattern. The largest word is "WHAT?" in the center. Other prominent words include "HOW?", "WHO?", "WHERE?", "WHY?", and "WHICH?". The colors used are primarily shades of pink, orange, green, and blue.

WHERE?
HOW?
WHO?
WHAT?
HOW?
WHY?

A smaller version of the word cloud staircase, featuring the same arrangement of interrogative words and color palette.

info



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