



Scheme Requirements

National Safety and Quality Primary and Community Healthcare Standards (NSQPCH)

Name of Scheme

The name of this scheme is Australian Health Service Safety and Quality Accreditation Scheme (AHSSQA). The standards are the National Safety and Quality Primary and Community Healthcare Standards – [NSQPCH].

The following is a summary of aspects of the NSQPCH assessment process as detailed in requirements set out in approved procedures. Further detail is available from HDAA on request.

HDAA Obligations

HDAA will co-operate with the Australian Commission on Safety and Quality in Health Care (The Commission) as a participant in the Scheme in ensuring the integrity and standing of the Scheme as a valuable tool of clinical governance for healthcare services, including participating in various fora, meetings, research, reviews, and other Commission activities relevant to the Scheme such as reporting on assessment activity and outcomes.

In conducting accreditations using the Scheme (including the relevant standards), HDAA must properly and effectively implement all provisions and components of the Scheme applying to accrediting agencies, including:

- The Commission's [policy on approval](#) under the scheme
- Conditions of approval as an accrediting agency
- The relevant applicable standards
- Any orientation or training programs required by the Commission to be undertaken by assessors
- Data specifications and processes for the scheme
- Membership and Terms of Reference of the Accrediting Agencies Working Group established by the Commission to consult on the ongoing design and application of the scheme and its associated activities.
- Commission Advisories and Fact Sheets in respect of any aspect of the Scheme, including but not limited to:
 - The Commission's Factsheet: [Accreditation to the National Safety and Quality Primary and Community Healthcare Standards](#)
 - The Commission's rating scale for accreditation assessments (refer to [Rating Scale for Assessment](#))
 - Notification of significant risk
 - Sampling for accreditation assessment
 - Annual declaration relating to conflict of interest (refer to [AS21/13](#))
 - Cultural safety training for assessors (refer to [AS22/04](#))

Preventing bias and managing conflicts of interest

HDAA will ensure that there is no real bias or apprehension of bias, on the part of HDAA or its assessors at any time in conducting accreditation assessments and awarding accreditation using the Scheme.

In accordance with the Commission's policy on [avoiding and managing conflicts of interest](#), HDAA will report any actual or perceived conflict of interest on the part of HDAA or its assessors that arises at any time in managing or conducting assessments or awarding of accreditation to the Commission as soon as practical after HDAA becomes aware of it. At this time HDAA will also advise the Commission how the conflict will be effectively managed.

Without limiting the circumstances in which an apprehension of bias on the part of HDAA may arise, involvement of a person for and on behalf of HDAA in an accreditation assessment of a healthcare

service, within less than 3 years of concluding employment, providing support or consultancy services with that healthcare service, constitutes an apprehension of bias on the part of HDAA.

For the avoidance of doubt, HDAA does not provide consultancy or other services to a healthcare service, which involves any advice or services to enable or assist the service:

- To achieve or maintain accreditation under the Scheme; or
- To achieve or maintain any standards to be used in an accreditation process under the Scheme.

HDAA will ensure it, and its assessors, always conduct themselves ethically and lawfully in respect of the conduct of assessments and the awarding of accreditation using the Scheme.

Obligations on the Healthcare service

As part of an accreditation assessment, the Healthcare service must:

- Disclose at the commencement of the assessment process any external consultant contracted or appointed by your healthcare service to provide services or support in respect of the accreditation of the service or any of its relevant facilities or services (whether of a preparatory nature in anticipation of an accreditation assessment or services and support during or following an accreditation assessment)
- Advise HDAA of the preferred Model of Assessment (refer Factsheet: [Accreditation to the National Safety and Quality Primary and Community Healthcare Standards](#))
- Where accreditation is required to satisfy regulatory, contractual or licensing requirements, ensure the relevant regulator has approved the chosen the model of assessment to be used,
- Enable HDAA assessors to routinely request and obtain information from the clinical and operational management, staff and others (including consumers) of the healthcare service, or any of its relevant facilities or services, in the course of an accreditation assessment
- Work with HDAA to ensure assessors do not engage or discuss with any such external consultant, or where applicable the consultant's personnel, in relation to any aspect of the accreditation assessment either before, during or after the process
- Provide an annual declaration to HDAA in relation to governance as directed by the Commission (utilising a Commission pro-forma)
- Provide a list of requested 'not applicable' actions (if any) to HDAA, prior to any assessment
- Consent to the attendance of personnel from the Commission in any on site or virtual component of an assessment as observers, at the discretion of the Commission, and
- Where the Commission personnel attend as observers, to access to any documentation prepared by the Agency as part of any such assessment and to information concerning the management and conduct of the assessment process by the Agency which may be requested by the Commission.

Consent to disclosure of information relating to healthcare service

In signing this Client Service Agreement, you are providing written consent for HDAA to:

- Provide the Commission with demographic information, accreditation outcome data or other information in respect of your healthcare service, or any of your facilities or services, in accordance with [the Policy](#) and HDAA's conditions of approval
- Disclose any reportable information to the relevant regulator or for the Commission to disclose this information to a relevant regulator at any time
- Provide for inclusion of certain reportable information relating to demography and accreditation assessment outcomes of your healthcare service, as determined by the

Commission from time to time, in public reporting on individual healthcare services. This may include:

- Significant risks identified during the assessment;
- Change of accrediting agency during an assessment or before an accreditation award is determined;
- All actions that are requested to be or rated as not applicable;
- Instances where accreditation is not awarded; and
- Information relating to demography and accreditation assessment outcomes of your healthcare service for routine aggregated public reporting by the Commission of accreditation assessment outcomes of healthcare services.

HDAА assessment teams and personnel

HDAА lead assessors are qualified to lead, manage, and coordinate any accreditation assessment process, and will have participated fully and actively in accreditation assessment days as set out by the Commission in [the Policy](#).

The lead assessor:

- Has the knowledge, skills and experience required to manage assessment processes, an assessment team and healthcare service engagement
- Has a sound understanding of primary and community health service delivery within an Australian context
- Is adequately supported by HDAА in their role as lead assessor.

HDAА will ensure that any assessor in an assessment team, regardless of role, has not undertaken more than 2 consecutive assessment cycles in respect of a facility or service.

HDAА assessment teams are comprised:

- Of qualified assessors with experience in the sector and service type where they will be assessing
- With the mix of skill to effectively assess each of the relevant standards
- Of the appropriate size and with enough time to rigorously assess the service

HDAА will ensure the assessment team is adequately briefed, including being provided with adequate documentation, about your healthcare service and any facility or service to be assessed, and the scope of the assessment to be undertaken.

Assessment planning and sampling

In determining the assessment duration and sampling, HDAА shall consider the requirements of the Scheme and relevant advisories (refer to [Sampling for accreditation assessment](#)).

HDAА will not conduct an accreditation assessment using relevant standards under the Scheme at the same time as it conducts an accreditation assessment using any non-Scheme standards, proprietary or otherwise. For the avoidance of doubt, this does not prevent HDAА from undertaking an assessment (onsite or hybrid) for a non-Scheme accreditation immediately following an assessment for an accreditation assessment conducted under the Scheme.

Provision of assessment services

HDAА provides a 2 or 3-year accreditation cycle, dependant of the Model of assessment chosen.

Healthcare services entering the scheme will be assessed by a staged assessment process, using the Model of Assessment selected for accreditation involving an initial desktop assessment alone, or

an initial desktop assessment combined with a virtual assessment comprising observations of relevant equipment and facilities and interviews with relevant personnel; or an initial desktop assessment combined with an on-site assessment comprising observations of equipment and facilities, and interviews with relevant personnel. Where applicable, the initial assessment will be followed a remediation period of a duration specified in the Commission's instructions on the Scheme, to allow a healthcare service to address any material concerns identified at initial assessment, and a final assessment will then be conducted.

HDAA provides both announced and short notice assessments in line with the Scheme Requirements and Model of assessment chosen.

Announced assessment program

(Model of Assessment – Stage 1-3)

Where an announced assessment is requested by a healthcare service, HDAA will:

- Conduct at least one assessment (and a final assessment where indicated) within a three-year accreditation cycle
- Ensure assessment visit occurs no later than 3 years (2 years for Stage 1) after any prior assessment (irrespective of which agency undertook the previous accreditation)
- Commence the assessment at least four months before the current accreditation expiry date
- Provide at least 4 weeks' notice of the date for commencement of the assessment.

It is the responsibility of the Healthcare Service to determine if an announced assessment (Stage 1,2 or 3) is appropriate. Where assessment to the NSQPCH Standards is required as part of contractual or funding obligations, it is up to the funder to determine the type of assessment required.

Short notice assessment program

(Model of Assessment – Stage 4)

Short notice assessments will be conducted as per the Scheme and in line with the requirements issue by the Commission from time to time.

If a short notice assessment does not proceed based on refusal of the healthcare service to allow access or entry, any unrecoverable costs incurred will be charged to the healthcare service and the assessment will be conducted on another date determined by the accrediting agency.

Reporting during assessment process

Significant patient risk is one where there is a high probability of a substantial and demonstrable adverse impact for patients if the practice is to continue.

Where any significant patient risk is identified in the course of an assessment, HDAA will:

- Ensure assessors inform the healthcare service that a significant patient risk has been identified
- Discuss immediate action with the health service and required them to develop and submit, within 2 working days, a plan of action to remedy the risk
- Notify the relevant regulator and the Commission within 2 working days that a significant patient risk has been identified and provide a copy of the healthcare service's action plan as soon as practicable.

Where a healthcare service terminates its contract for accreditation services during the course of an accreditation assessment, HDAA will notify the Commission within two working days.

Reporting on assessment outcomes

HDAA will:

- Notify healthcare services in writing, within 5 working days of completion of an initial accreditation assessment of the outcome of the initial assessment, including specifying all matters that require remediation
- Provide a written report of the accreditation assessment within 30 working days of completion of a final accreditation assessment

Accreditation certificates

HDAA will include the following information on certificates awarded for any accreditation using the Scheme:

- Name of healthcare service
- Facility unique identifier
- List of each facility and healthcare service covered by the award
- For each listed facility or service, whether the applicable accreditation relates to announced or short notice assessment
- For each listed facility or service, the relevant standards to which the accreditation relates
- Date of commencement and expiration of the relevant accreditation cycle
- Date accreditation is awarded.

Accreditation testimonial

HDAA will include the following information in a testimonial (schedule) which is to accompany the certificate of accreditation:

- Healthcare service name
- List of each facility and healthcare service address covered by the award
- For each listed facility or service, whether the applicable accreditation relates to announced or short notice assessment
- For each listed facility or service, the relevant standards to which the accreditation relates, and any parts of the relevant standards excluded from the assessment as not applicable or not assessed
- Date of commencement and expiration of the relevant accreditation cycle
- Date accreditation is awarded.