SUBMISSION TO THE AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

RESOURCES TO SUPPORT THE NATIONAL SAFETY AND QUALITY IN HEALTH SERVICE STANDARDS (SECOND EDITION)

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Overview

The Consumers Health Forum of Australia (CHF) is the national peak body representing the interests of Australian healthcare consumers and those with an interest in health consumer issues. CHF works to achieve safe, quality, timely healthcare for all Australians, supported by accessible health information and systems.

CHF is pleased to provide the following comments on the four initial resources released by the Australian Commission on Safety and Quality in Health Care (ACSQHC) to support the National Safety and Quality in Health Service Standards (second edition).

The resources are:

- Guide for hospitals
- Accreditation workbook for hospitals
- Guide for day procedure services
- Guide for multi-purpose services and small rural hospitals

Introduction

In developing these comments, CHF has taken the following points into account:

- ACSQHS has provided the following questions to help guide comments:
  - **Language**: How could we improve the language, terminology and glossary used in the resource so that they are more appropriate and applicable to the context of your organisation?
  - **Usability**: How could we make the content in this resource more applicable and easier to use to implement the NSQHS Standards (second edition)? For example, changes to the length, layout, and level of detail of the content.
  - **Clarification**: Does any of the content in this resource require further clarification or rewording? Please provide suggestions for these changes.
  - **Gaps and duplication**: Are there any gaps in the content and how should they be addressed? Is there any unnecessarily duplicated content that could be removed?
  - **Additional functionality**: What additional functionality would be helpful in an interactive online resource or as separate resources? For example: links between actions; links to other resources; videos and animations; the ability to search and filter content based on topics and the user’s role; one-page factsheets; or infographics.

- CHF has focused on whether the resources give sufficient and appropriate guidance, in an easy to understand way, to ensure a consistently high level of achievement against the Partnering with Consumers Standard in particular. However, given the nature of our comments, nearly all of them would apply to the respective resource overall, not just the chapter concerning the Partnering with Consumers Standard.
CHF is aware that ACSQHC is preparing fact sheets for consumers about the NSQHS Standards (second edition), and that these will be provided to consumer organisations and other stakeholders for broader consumer testing before their release.

**Guide for hospitals**

This is a long document of more than 400 pages. The Partnering with Consumers Standard chapter comprises more than 40 pages.

CHF’s main concern about this document concerns its layout, structure and length. The content is not easy to follow. For example, the start of the Partnering with Consumers Standard chapter is presumably outlining material from or about the new Standard itself, but this is not explained and the reader is left guessing. This could be easily remedied.

In addition, throughout the document, the descriptive material from or about the Standards themselves could be presented in a shaded box to distinguish it from the narrative that follows.

The Partnering with Consumers Standard chapter then provides a few pages of introductory material (pages 84 to 87). This is the best part of this chapter. It provides an easy to read explanation of:

- why partnering with patients and consumers is important;
- the various levels at which those partnering relationships occur in health services; and
- the need for organisational leadership and appropriate resourcing to support and nurture these partnerships.

Table 1, which apparently shows an example of a continuum of consumer participation, did not appear in the document.

The chapter then addresses each of the four criteria for the Partnering with Consumers Standard. Again, it is not clear whether the initial material (eg, page 88 in relation to the first criterion) is from or about the Standard itself or something else. The reader shouldn’t have to guess this.

For each action for each criterion, a standard structure is used with headings such as intent, key tasks, strategies for improvement, governance for partnership with consumers, etc. We did not find this format and presentation easy to follow, and it requires some intuitive understanding of what is going on which is not explicit. There does not appear to be a logic to the structure. As a result, reading this material made for an unpleasant experience.

For some criteria concerning the Partnering with Consumers, there are cross-references under the strategies for improvement heading to actions required under the Clinical Governance Standards. These cross-references are not helpful as their relevance is not explained nor presented in an easy to understand way.
The eight-page glossary is impressive and comprehensive. CHF notes that the glossary includes definitions of consumer, partnership, patient and person-centred care, and that these definitions are appropriate.

Overall, CHF recommends that the structure and presentation of the Partnering with Consumers Standard and other chapters in the guide for hospitals be re-considered. There needs to be a logic to the structure, with the flow of content making sense to the reader. If anything, the document could be shorter rather than longer for greater usability.

**Accreditation workbook for hospitals**

In contrast to the guide for hospitals, CHF found the accreditation workbook for hospitals to be user-friendly with a practical, less theoretical style and a shorter (164 pages) length. The introduction is clear, the summary of the eight NSQHS Standards on page 8 is great, and the landscape format is well used.

Again, the start of the Partnering with Consumers Standard chapter is presumably outlining material from or about the new Standard itself, but this is not explained and the reader is left guessing.

The format for addressing each criterion and its actions is very readable and the content is comprehensive. The use of reflective questions and examples of evidence for each action is very helpful and presented succinctly.

Apologies if we missed it, but we did not see whether the examples of evidence included that the selection of consumers for surveys, committees and other processes needs to ensure a diverse and wide spread of individuals. There is a risk that health services might identify a consumer/s who they find easy to work with and tend to over-use as a result. It is important that health services nurture a diverse mix of active consumers which reflects the population that each service serves.

**Guide for day procedure services**

**Guide for multi-purpose services and small rural hospitals**

Unlike the two separate documents prepared for hospitals, the guides for day procedure services, and for multi-purpose services and small rural hospitals, combine the same material into single documents for each service type.

Given our concerns about the structure of the guide for hospitals, in our opinion this approach amplifies the readability issues with the guides for day procedure services, and for multi-purpose services and small rural hospitals. The reflective questions and examples of evidence are lost in all the other headings and content shown for each action.
The content of these two guides appears to be almost the same as the content of the guide for hospitals and the accreditation workbook for hospitals. We detected very few differences. In the guide for day procedure services, we noticed that a day procedure case study was inserted on page 97. However, there did not seem to be many such variations, leaving us wondering whether there was indeed a need for separate resources for different service types. We suspect there should be, but it has not been demonstrated.

For consultation purposes, it would have been helpful to start with template version of the guide and the accreditation workbook thought to be applicable for all service types, with any proposed variations for particular service types then explained.