

**REVIEW OF INQUIRY INTO COMPLAINTS HANDLING IN
NSW HEALTH**

Organisation: Australian Council on Healthcare Standards
Name: Mr Brian Johnston
Position: Chief Executive Officer
Telephone:
Date Received: 7/07/2006

Subject:

Summary

7 July 2006

Hon Patricia Forsythe MLC
Committee Chair
Legislative Council
Parliament House
Macquarie Street
SYDNEY NSW 2000

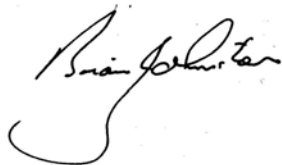
Dear Hon Forsythe

Re: Review of Inquiry into Complaints Handling in NSW Health

Thank you for your invitation to make a submission to the Review of Inquiry into Complaints Handling in NSW Health. Please find enclosed the submission from the Australian Council on Healthcare Standards.

If you require any clarification about the points raised in the submission please contact Ms Anne Rauch, Manager Standards Development

Yours sincerely

A handwritten signature in black ink, appearing to read "Brian Johnston". The signature is fluid and cursive, with a large, sweeping initial "B".

BW Johnston
Chief Executive

THE AUSTRALIAN COUNCIL ON HEALTHCARE STANDARDS (ACHS)
SUBMISSION TO THE
REVIEW OF INQUIRY INTO COMPLAINTS HANDLING IN NSW HEALTH
July 2006

Executive Summary

The usefulness of the ACHS Evaluation and Quality Improvement Program (EQuIP) as an appropriate measure of the quality of care can be demonstrated in the first *National Report on Health Services Accreditation Performance 2003 and 2004* (Attachment A) in which performance to the EQuIP criteria from 674 on site surveys is reported. To further the search for effective standards and accreditation processes, the ACHS is also the major industry partner in an Australian Research Council Linkage project researching accreditation and being conducted by the Centre for Clinical Governance Research in Health, University of NSW. The ACHS standards development process and the content of the standards are accredited by the International Society for Quality in Health Care.

The recommendations of the *Inquiry into Complaints Handling in NSW Health* provided the opportunity for the ACHS to enhance the areas of complaints management and open disclosure in the four yearly review of EQuIP standards. In this 4th edition that comes into effect from January 2007, complaints management has been enhanced and integrated with the incident management system. As the Open Disclosure standard is currently being piloted in 40 hospitals nation-wide by the Australian Commission on Safety and Quality in Health Care, the principles of open disclosure, rather than the Open Disclosure standard itself, have been included in the 4th edition standards. Full implementation of the Open Disclosure Standard will not take place until the results of the pilot process are known.

EQuIP member organisations are encouraged by the ACHS to publish an agreed (with the ACHS) accreditation performance statement for consumers and other stakeholders. Organisations are also able to publish their survey reports on the ACHS website.

The ACHS submission addresses only those recommendations that directly relate to the ACHS.

ACHS response to recommendations relating to the ACHS

The actions taken by the ACHS in response to the recommendations of the Legislative Council Inquiry are outlined in below.

In order to understand the contents of the table more completely it is important to know how the ACHS EQuIP standards are organised. The standards framework contains a number of functions, which are made up of standards, criteria and explanatory elements:

- A *function* is a group of standards
- The *standard* describes the overall goal, for example, quality and safe care for consumers / patients with desirable outcomes.
- The *criteria* describe key components of the goal, that are necessary for meeting the goal for example, planning care with consumers / patients, families and carers and working in partnership with them to achieve the best possible results.
- For each criterion there is a series of *elements*. Each element identifies what should be in place to achieve the criterion at a certain rating level
- *Guidelines* are also provided to give more information and guidance on achievement of the standards at the criterion level.

The examples below all fall at the criterion and element levels. There is five level rating system that is a continuous quality improvement approach and indicates a health care organisation's level of performance from LA (Little Achievement) through Some (SA), Moderate (MA), Extensive (EA) and Outstanding Achievement (OA).

Recommendation 1:

That the NSW Minister for Health raise with his counterparts on the Australian Health Ministers' Advisory Council whether the criteria used by the Australian Council on Healthcare Standards in its accreditation surveys of health services is an appropriate measure of quality.

ACHS Action:

The performance of organisations participating in the ACHS Evaluation and Quality Improvement Program (EQuIP) was reported for the first time in June 2005 when the first *National Report on Health Services Accreditation Performance 2003 and 2004* was published (Attachment 1). This report on patient safety and the quality of services, was drawn from data extracted from 674 onsite surveys that assessed performance to the EQuIP criteria and identified leading practices (eg in consumer participation and rights, care delivery) as well as areas in need of improvement (eg proven systems to identify and manage risks).

There is however, a lack of evidence based information world-wide on effective accreditation processes. This situation was recognised by the Australian Research Council who funded, in 2004, a linkage project to research accreditation. This study is being conducted by the Centre for Clinical Governance Research in Health, University of NSW with industry partners. The ACHS is the major industry partner. An overview of the project that consists of four studies is enclosed. (Attachment B)

The ACHS process of four yearly reviews of its standards also contributes to the development of appropriate measures of quality. The most recent review process that will result in the 4th edition of EQulP illustrates the rigorous process for developing standards. It has involved:

- a review of the relevant international and Australian literature
- a comparison of the EQulP standards and criteria with those of the UK, Canada, the USA, New Zealand, Ireland, France and Japan
- environmental scanning
- the establishment of working groups, reference groups and expert advisory groups
- the conduct of many focus groups and other consultative forums
- the drafting of revised standards
- the development of a number of new standards, criteria and guidelines
- a field review that invited formal feedback from about three thousand stakeholders including health care organisations and community and consumer representatives
- a pilot process in 16 health care organisations of various size, location (state / territory, metropolitan / rural), role (eg. community / acute) and health sector type (public / private) including two mental health services.

The review was undertaken with the understanding that the standards and criteria must be applicable to all types of health services in Australia. The standards are owned by the sector and therefore consultation must be broad and genuine, and take into account a diversity of views. Representatives of government participated in the working groups for the standards, and were part of the extensive field review process. The table of draft standards is provided at Attachment C.

This is a rigorous process that identifies criteria that are measurable, apply to contemporary circumstances and are identified by the health industry as an appropriate measure of quality. Standards and criteria are critiqued to ensure that they cover the nine dimensions of quality

identified in the *National Health Performance Framework*. NSW Health has six of these dimensions in their quality framework.

The ACHS EQUiP standards are accredited by International Society for Quality in Health Care (ISQua) thereby ensuring that they meet the highest international requirements for health care organisation standards.

Recommendation 4:

That the NSW Minister for Health raise with his counterparts on the Australian Health Ministers' Advisory Council the possible elevation of complaints handling in the Evaluation and Quality Improvement Program, conducted by the Australian Council on Healthcare Standards.

ACHS Action:

Health Services in NSW are currently using EQUiP 3rd edition. Their use began in January 2003. There are four elements that specifically relate to complaints handling and they are highlighted in full in Attachment D.

Criterion 2.4.2

Information is readily available for consumers / patients so that they are informed of their rights and responsibilities.

Elements:

2.4.2 LA (d) - complaints mechanism

2.4.2 SA (c) complaints management system

2.4.2 MA (d) complaints analysis, trending and improvements are made as required.

2.4.2 MA (e) evaluation of the complaints management system

Evaluation of the complaints process was an area commonly identified in those systems requiring evaluation in the *National Accreditation Performance Report 2003 and 2004* (page 33).

There has been considerable enhancement of elements related to complaints management in **EQUiP 4th edition** due to be implemented in January 2007. See Attachment E.

2.1.3 LA (a) (b) (d), SA (a) integrated complaints and incident policies, information and feedback managed in accordance with state / territory policies and Australian standards.

2.1.3 SA (f) staff orientation on incident and complaint management and open disclosure.

2.1.3 MA(c) (d) evaluation of incident and complaint management systems and the support provided for consumers and staff

2.1.3 MA (f) consumer involvement in the incident and complaint management processes

- 2.1.3 EA (a), (b) benchmarking of incident and complaints data and systems
- 2.1.3 EA (c) research into incident and complaint management
- 2.1.3 EA (d) consumer access to a system of direct notification of incidents and complaints.
- 2.1.3 EA (e) frontline staff training in methods of conflict and complaint resolution.
- 2.1.3 OA (a) recognition as a leader in incident and complaint management systems and processes.
- 2.1.3 OA (b) public reporting on incidents and complaints and the improvements

Recommendation 5:

That the NSW Minister for Health raise with his counterparts on the Australian Health Ministers' Advisory Council incorporation of the Open disclosure Standard in the current version of the Evaluation and Quality Improvement Program conducted by the Australian Council on Healthcare Standards.

ACHS Action:

The Open Disclosure standard became available in 2003 so was unable to be included in EQulP 3rd edition which was implemented in January 2003. The principles of open disclosure have been included in EQulP 4th edition which commences in January 2007.

All health care organisations will be required to work towards the implementation of this standard. Some health services are implementing the national standard in its entirety. However, others are addressing the legislative and insurance implications of its implementation. The national pilot involving 40 hospitals being conducted by the Australian Commission on Safety and Quality in Health Care will inform and support the process of implementation.

The elements in the EQulP 4th edition standards are:

- 2.1.3 LA (c) awareness of the principles for open disclosure
- 2.1.3 SA (f) staff orientation in open disclosure
- 2.1.3 MA (e) incident system includes open disclosure principles
- 2.1.3 EA (f) full implementation of the national open disclosure standard

See Attachment F for the full text of the elements.

Recommendation 6:

That the NSW Minister for Health raise with his counterparts on the Australian Health Ministers' Advisory Council the provision of an annual update on the implementation of the Open

Disclosure Standard, for the first two years following its incorporation into the Evaluation and Quality Improvement Program conducted by the Australian Council on Healthcare Standards.

ACHS Action:

Executive members of the ACHS meet regularly with senior staff from NSW Health. However, there have been only preliminary discussions with the ACHS about this issue. It is possible for this information to be extracted from the ACHS database and provided as a Report.

Recommendation 11:

That a suitable mechanism be identified by NSW Health to ensure the results of accreditation surveys conducted by the Australian Council on Healthcare Standards be provided to the Department within two weeks of their completion.

ACHS Action:

Initial discussions have occurred between the ACHS and NSW Health and further responses are awaited from the Department.

Recommendation 12

That NSW Health publish all accreditation reports prepared by the Australian Council on Healthcare Standards and any rectification reviews prepared by health services in response to these reports.

ACHS Action:

At present reports are made available to the member organisation and the accreditation status of a member organisation is published on the ACHS website.

Member organisations are encouraged by the ACHS to publish an agreed (with the ACHS) accreditation performance statement for consumers and other stakeholders. Organisations are also able to publish their reports on the ACHS website.

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