

NSQHS Standard 2 Partnering with Consumers

How to use the audit tools – Edition 2



Partnering with Consumers Audit Tools Instructions

Patient Safety and Quality Improvement Service, Clinical Excellence Queensland has developed audit tools for facilities and Hospital and Health Services (HHS) to use to collect data in support of evidence in meeting the National Safety and Quality Health Service (NSQHS) Standards. The audit tools have been updated to align to the second edition of the NSQHS Standards.

Purpose of the audit tools

The tools provide facilities and health services with additional supporting resources to use in conjunction with the existing NSQHS standards workbooks and guides to be able to:

- Demonstrate detailed evidence for an action by providing specific verification rather than noting the action has been met and listing the source, i.e. self-assessment
- Collect information and evidence to a further level of detail at a patient, ward and facility level, delving down into specific requirements that further support meeting the action
 - collect patient level data using a number of methods, i.e. chart documentation, observational and asking the patient/carer questions to demonstrate that the evidence has been met, and to what extent
 - observe ward/unit staff undertaking a process, e.g. clinical handover and recording individual results
- Determine actual performance results at a ward and patient level
- Clearly identify those detailed gaps/areas that need attention, in order to target improvements and build a robust action plan at the ward and facility level
- Track and monitor audit results at the three levels over time.

The tools can be used in conjunction with other resources and directly align to the criteria in the existing NSQHS Standards workbooks and guides. Depending on the size of the facility a number of audit questions may not be applicable, it is up to each facility/health service to determine the audit questions for review. Questions and responses can be adapted to suit the requirements of each facility/health service.

The suite of documents include the following:

1. A 'how to' guide on using the tools (this document)
2. A definitions guide to assist in completing the tools
3. Three specific audit tools that allow the collection and collation of information are provided that can be adapted for local use. An Excel workbook consisting of tabs with the following:
 - *Facility Collection and Results*: collects facility level responses
 - *Ward/Unit Collection Audit Tool*: collects the ward/unit level responses, the Excel spreadsheet can be used to collect up to 15 wards/units
 - *Patient Collection Audit Tool*: collects patient level responses (at a ward/unit level), the Excel spreadsheet can be used to collect up to 20 patients
 - *Results for Ward/Unit*: collates the ward/unit level responses
 - *Results for Patient*: collates the patient level responses.
4. A measurement plan for each standard that defines the goals, questions and responses in the audit tools. The plan details each audit question and its alignment to the action in the standard and can be adapted for local use. Some questions may be used by the facility to demonstrate evidence for other actions, in addition to the action it has been aligned with.

How the tools were developed

An example is provided below using Action 2.6 in Standard 2

1. The NSQHS Standards workbooks and guides were used, i.e.
 - a. Guide for Hospitals (November 2017) – Key tasks and Strategies for improvement
<https://www.safetyandquality.gov.au/wp-content/uploads/2017/12/National-Safety-and-Quality-Health-Service-Standards-Guide-for-Hospitals.pdf>

Example: Guide for Hospitals – Action 2.6 in Standard 2

Action 2.6



The health service organisation has processes for clinicians to partner with patients and/or their substitute decision-maker to plan, communicate, set goals, and make decisions about their current and future care

Intent

Patients receive safe and high-quality care by being involved in decisions and planning about current and future care.

Key tasks

- Develop policies and processes (or review existing policies and processes) to involve patients or their substitute decision-maker in planning, communication, goal-setting and decision-making for their current and future care, and review workforce compliance with these policies and processes
- Set up mechanisms to support communication between clinicians and patients or their substitute decision-maker
- Periodically review the systems for partnering with patients or their substitute decision-maker in their own care.

Strategies for improvement

Partnering with patients in their own care is integral to the delivery of safe and high-quality person-centred health care. Ensure that effective processes are in place to support clinicians to partner with patients or their substitute decision-maker in the planning, communication, goal-setting and decision-making relating to their current and future care.

Review current systems for supporting clinicians and patients to be partners in care

If systems are already in place to support clinician and patient partnerships, review the strategies outlined below and consider any additions or updates.

If the organisation does not have systems in place to support partnerships between clinicians and patients, use the strategies outlined below to develop or adapt policies and processes for partnering with patients in their care.

Create a supportive organisational culture

Supportive organisational climates are vital for achieving person-centred care, in which partnerships between clinicians and patients become the established norm. Strategies may include:

- Engaging leadership and governing bodies to act as champions for partnerships between clinicians and patients
- Incorporating the importance of clinician and consumer partnerships into the organisation's strategic planning, vision and goals
- Engaging consumers in organisational governance and strategic planning to support organisational redesign (see [Action 2.1](#) for guidance)
- Providing enough resources to support clinicians to partner with patients in their care
- Providing education and training to equip clinicians to partner with patients in their care; further information on education and training for clinicians is provided in [Action 2.7](#)⁴²

Example: Key tasks for 2.6 'Set up mechanisms to support communication between clinicians and patients or their substitute decision-maker'

- The questions in the audit tools (patient, ward, facility) assess and ask for verification of the examples of evidence and outputs to collect the detailed information necessary to meet that evidence. In addition, other examples of evidence may be used. The questions may directly ask if there is supporting evidence, or may be broken down into a series of questions to delve deeper into whether the evidence has been met.

Questions and responses have been developed in consultation with content area experts.

Example: Patient audit tool questions for Action 2.6 in Standard 2

Documentation audit - Patient		Pt 1	Pt 2
		URN:	
4.0	Ask: 'Were you involved in the development of any care plans while in hospital?'		
4.1	If yes to 4.0, list any. <i>(enter text to the right)</i>		

In addition to the collection of information, the Excel spreadsheet collates data at the patient and ward/unit levels. The tab *Results for Ward/Unit* shows the number of wards/units that met the indicator and the total number audited, which are then used to calculate the percentage of wards/units that met that indicator. Subsequently, the tab *Results for Patient*, displays the percentage of patients that met the indicator. Details of the indicators can be found in the measurement plan.

- The measurement plan details the actions and those question(s)/responses that correspond to the action.

Note: Some questions may be used by the facility to demonstrate evidence for other actions, in addition to the action it has been aligned with.

Example: Measurement plan for Action 2.6 in Standard 2

Action	Actions required	Goal	Indicator	Audit Tool	Question on Audit Tool	Response options	Numerator	Denominator
2.6	The health service organisation has processes for clinicians to partner with patients and/or their substitute decision-maker to plan, communicate, set goals, and make decisions about their current and future care	Identify if patients are involved in the development of any care plans while in hospital and were provided with a copy to review, sign and keep	% of patients involved in the development of any care plans while in hospital and were provided with a copy to review, sign and keep	Patient	4.0 Ask: 'Were you involved in the development of any care plans while in hospital?' 4.1 If yes to 4.0, list any.	Yes; No; Don't know; N/A text box	Number of patients involved in the development of any care plan while in hospital and were provided with a copy to review, sign and keep (Yes to 4.0)	Total number of eligible patients (Yes or No to 4.0)

Using the Excel tools

The audit tools are in different worksheets in the Excel document and these are accessed by the tabs at the bottom of the workbook or by clicking on the links in the Contents page.



National Safety and Quality Health Service (NSQHS) Standards Standard 2 Partnering with Consumers - Edition 2

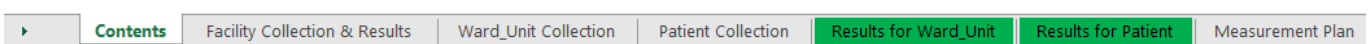


Audit Tools to audit against Edition 2 of the NSQHS Standards

Patient Safety and Quality Improvement Service, Clinical Excellence Queensland has developed audit tools for facilities and Hospital and Health Services (HHS) to use to collect data in support of evidence in meeting Edition 2 of the NSQHS Standards. There are a number of tools in the workbook. The tools provide the ability to collect a number of patients and wards, and display combined results for each indicator. In addition, the measurement plan provides a high level view of the NSQHS actions and their alignment to each audit question.

Contents

Facility Collection & Results	This audit tool collects Facility level data, and the results can be printed directly from this sheet
Ward_Unit Collection	This audit tool collects Ward/Unit level data
Patient Collection	This audit tool collects Patient level data
Results for Ward_Unit	This tab presents the results of the Ward/Unit level data (that were collected on the Ward_Unit Collection tab)
Results for Patient	This tab presents the results of the Patient level data (that were collected on the Patient Collection tab)
Measurement Plan	The measurement plan outlines the NSQHS Standards Actions and the audit questions and indicators aligned to them



In addition, we recognise that each facility will define when the audit will take place, how often, how many patients to audit and who will perform the audit.

Queensland Health facilities have the ability to enter their audit data online using an existing secure, electronic web-based system, Measurement, Analysis and Reporting System (MARS), available via the Queensland Health intranet. Please email mars@health.qld.gov.au for further information.

We recognise and appreciate that there may be gaps in the scope and questions included in these tools, however, as the audit tools are a constant '**Work in Progress**', future versions will build upon the existing scope and questions, and incorporate staff feedback and suggestions for improvement.

Patient Safety and Quality Improvement Service, Clinical Excellence Queensland, welcomes feedback on the audit tools and the measurement plans, to ensure the tools meet the needs of Queensland Health facilities. We appreciate any feedback you can provide for the next version.

Please email Patient Safety and Quality Improvement Service on mars@health.qld.gov.au for feedback or comments.

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