

Circular No: 53/93
Date: 22 October 1993

Contact: **Regional Office**
Distribution: **Public Hospitals**

Subject: Quality Assurance Plans

In the Hospital Conditions of Funding 1993/94, there are a number of elements relating to the quality of care in hospitals. These are minimum requirements designed to supplement the range of quality assurance activities and evaluation in hospitals including those in conjunction with other hospitals.

One of the requirements in the Conditions of Funding is for a quality assurance plan to be developed. (Section 2.22.1). This plan and reports on its implementation are available to the Department on request.

Hospitals which are accredited with the Australian Council on Healthcare Standards (ACHS) are deemed to have met this requirement as a quality assurance plan is a mandatory requirement for accreditation.

Hospitals which have been declared under s.139 of the Health Services Act are also deemed to have met this requirement.

Hospitals which have not developed a quality assurance plan may seek guidance on the preparation of the plan from the ACHS Standards for Quality Assurance (attached).

The Department expects hospitals to have prepared quality assurance plans and have reports on implementation available by 1 April 1994.



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A Planned Approach

The systematic improvement of hospital services needs to be both planned (organised) and adequately resourced (e.g. facilities, staff and equipment). Effective quality improvement starts with the facility's overall strategic planning process and requires the QA plan to be integrated with the facility's business plan.

A quality assurance plan will show that the facility has taken the time to determine the goals and methods of implementation of its program i.e. it has thought about where it wants to go and what it wants to achieve with its quality assurance program.

The QA plan should identify closely with the facility's mission statement.

Surveyors will look for the inclusion of the following elements in a quality assurance plan:

- * objectives of the program
- * scope of the program (who and what activities)
- * methods by which these will be achieved
- * individuals or committees responsible for implementing the program and the way in which these results are communicated (organisation chart)
- * terms of reference of the QA committee/group and its relationship with other committees
- * resources available for implementing the plan
- * role of the governing body
- * confidentiality issues
- * time frame for implementation
- * plan for periodic evaluation.

While a facility may have a plan such as this, it is essential to demonstrate adherence to the plan and to ensure it is understood by key health professionals in the facility.

In addition, the QA plan should clearly indicate that areas of primary importance to the facility are reviewed, rather than peripheral events which bear minimal relevance to patient care or the delivery of service. Facilities are encouraged to provide evidence of a central plan, developed by a QA committee or the Governing Body, as this will ensure better coordination and conduct of the program at a facility-wide level. Depending on the size and complexity of the facility, the central plan will be reflected at a departmental level.

Ref: Pages 14a and 15a of the ACHS Accreditation Guide Standards for Australian Health Care Facilities.