



EQulP6 Information Pack
EQulP6 Resource



Safety
Quality
Performance

EQulP6 General Information

Introduction

This information package provides an overview of The Australian Council on Healthcare Standards (ACHS) Evaluation and Quality Improvement Program (EQulP), associated programs and services and Frequently Asked Questions.

What is the Australian Council on Healthcare Standards?

The Australian Council on Healthcare Standards (ACHS) is an independent, not-for-profit organisation, dedicated to improving quality in health care. Having been at the forefront of Australian healthcare accreditation since its inception in 1974, ACHS has maintained its strong culture of developing relevant accreditation products and services.

With a 40 year history, ACHS has an unrivalled understanding of healthcare accreditation and is committed to ensuring that its healthcare standards are current, comprehensive and in alignment with best practice, and that furthermore, the standards are able to be assessed in a way that generates useful, accurate information to improve safety and quality for consumers.

The processes ACHS use to develop healthcare standards have been tested, evaluated and modified over the past 40 years, and achieving continuous improvement has been one of the driving goals.

The ACHS mission is 'to strengthen safe, quality health care by continuously advancing standards and education nationally and internationally'.

What is accreditation?

Healthcare accreditation is an external review of the quality of care and services. It is "an internationally recognised evaluation process used to assess and improve the quality, efficiency, and effectiveness of healthcare organisations; it is also a way to publicly recognise that a healthcare organisation has met national quality standards."¹

What is EQulP?

Introduced in 1996, ACHS' Evaluation and Quality Improvement Program (EQulP) is a four-year quality assessment and improvement program for healthcare organisation that supports excellence in consumer / patient care and services. It is designed to provide a framework which will assist and support healthcare organisations to ensure the provision of safe, high quality care and services, and to achieve continuous quality improvement. If this is achieved, accreditation will follow.

The key components of EQulP are:

- the standards that organisations work to achieve
- a yearly self-assessment to evaluate performance against the standards
- ACHS assistance and guidance around the organisation's self-assessment
- biennial onsite surveys by an external, experienced team of accreditation surveyors to provide an independent assessment of the organisation's performance against the standards
- the improvement process undertaken by organisations to address the recommendations from the onsite surveys.

The EQulP standards comprise a series of criteria and elements, arranged under graded ratings that reflect increasing maturity of an organisation's quality improvement activities.

The ACHS undertakes a comprehensive EQulP standards review and consultation process at least every four years to ensure the standards remain current, continue to reflect best practice and evidence, and are achievable.

The ACHS has finalised EQulP6, the 6th edition of the EQulP standards, and will commence surveying member healthcare organisations to EQulP6 from 1 January 2017.

Other ACHS programs include:

- EQulP Certification
- EQulP Day Procedure Centres
- EQulP Corporate (for Health Services and Member Services)

The EQulP principles

The ACHS Evaluation and Quality Improvement Program (EQulP) is based upon principles which support best practice and which are designed to facilitate a culture of continuous improvement. These principles can be applied to all aspects of service within a healthcare organisation.

A consumer focus in care provision is demonstrated by:

- understanding the needs and expectations of present and potential consumers / patients
- ensuring consumers / patients are the priority
- evaluating the service from the consumer / patient perspective.

Effective leadership demonstrates responsibility and commitment to excellence in care provision, quality improvement and performance by:

- providing direction for the organisation / health service
- pursuing the ongoing development of strategies, systems and methods for achieving excellence
- inspiring and motivating the workforce and encouraging employees to contribute, develop and learn
- considering proposals that are innovative and creative.

Continuous improvement – management and staff demonstrate how they continually strive to improve the quality of care. Continuous improvement assists the organisation / health service through:

- looking for ways to improve as an essential part of everyday practice
- consistently achieving and maintaining quality care that meets consumer / patient needs
- monitoring outcomes in consumer / patient care and seeking opportunities to improve both the care and its results.

Evidence of outcomes – organisations depend on the measurement and analysis of performance. Indicators of good care processes or, wherever possible, outcomes of care, demonstrate a commitment to maintaining quality and striving for ongoing improvement by:

- providing critical data and information about key processes, outputs and results
- reflecting those factors that lead to improved health and/or quality of life for consumers / patients or to better operational performance.

Striving for best practice – the organisation compares its performance with, or learns from, others and applies best-practice principles. Organisations might demonstrate their efforts through:

- discovering new techniques and technologies, and using them to achieve world-class performance
- learning from others to increase the efficiency and effectiveness of processes
- improving consumer / patient satisfaction and outcomes.

The EQulP6 framework

EQulP6 focuses on the issues considered to be of the greatest importance in providing safe, high quality health care. The standards have been developed in consultation with the healthcare industry and address the Clinical, Support and Corporate Functions of the organisation.

The EQulP6 standards and criteria express goals that are common to different types of services. This means that although the evidence presented by different healthcare organisations for a criterion may vary, consideration of evidence can be made in the context of organisational structure, geography, consumer / patient type and services.

EQulP6 is structured in a hierarchy, as follows:

- functions
- standards
- criteria
- elements
- guidelines.

Function:

A function is a group of standards.

Standard:

The standard describes the overall goal; for example Standard 1.1, Consumers / patients are provided with high quality care throughout the care delivery process.

Criteria:

The criteria describe key components of the goal, which are necessary for meeting the goal; for example Criterion 1.1.1, *Assessment ensures current and ongoing needs of the consumer / patient are identified.*

Elements:

For each criterion, there is a series of elements which:

- explains the criteria
- describes some important practices for each level of achievement
- should not limit practices; organisations are encouraged to undertake and present additional activities that respond to the criterion statement
- should be regarded as a framework for total quality rather than a checklist of compliance
- provides direction for improvement activities and for achieving better practice.

Each element identifies what should be in place to at least fulfil the requirements of the criterion at a certain rating level.

The Clinical Function sets out the standards that are predominantly associated with clinical care. Achievement of these standards is largely the responsibility of health professionals.

Function 1 – Clinical has six standards:

- 1.1 Continuity of care
- 1.2 Access
- 1.3 Appropriateness
- 1.4 Effectiveness
- 1.5 Safety
- 1.6 Consumer focus

The Support Function contains standards and criteria in which quality improvement requires clinical and corporate staff to work together, sometimes with assistance from internal ‘support staff’ or external consultants.

Function 2 – Support has five standards:

- 2.1 Quality improvement and risk management
- 2.2 Human resources management
- 2.3 Information management
- 2.4 Population health
- 2.5 Research

The Corporate Function identifies those standards and criteria for which the governing body of the organisation is predominately responsible.

Function 3 – Corporate has two standards:

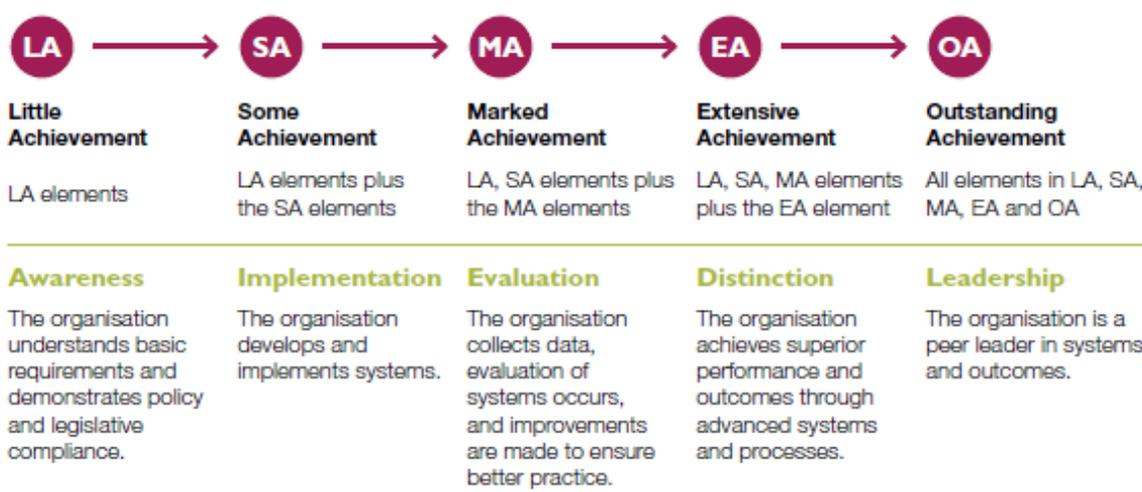
- 3.1 Leadership and management
- 3.2 Safe practice and environment

The EQulP criterion ratings

The EQulP criteria have been developed around a five-level rating scale designed to measure and support continuous improvement in key areas of a healthcare organisation’s operation.

Each of the 47 EQulP6 criteria has five possible levels of achievement: Little Achievement (LA), Some Achievement (SA), Marked Achievement (MA), Extensive Achievement (EA) and Outstanding Achievement (OA).

Organisations and surveyors will use the elements in each of the criteria to rate the level of the organisation’s achievement. The elements are not meant to be an audit checklist; they describe the practices that contribute to the achievement of each level. While the manner in which the elements are implemented and the evidence presented may differ between healthcare organisations, each organisation should be able to demonstrate that their practices address the intent of the elements, and that their evidence responds to their aims or purposes.



The **criteria rating format** will assist organisations to better understand how the elements can support continuous improvement.

Mandatory criteria

A mandatory criterion is one where it is considered that without evaluation, the quality of care or the safety of people within the organisation could be at risk. Mandatory criteria are those where a rating of Marked Achievement (MA) or higher is required to gain or maintain ACHS accreditation.

There are **16** mandatory criteria in EQUIP6.

The EQUIP accreditation cycle

Accreditation against the EQUIP standards requires organisations to participate in a four-year cycle of events, with one activity to be completed during each year of the cycle.

EQUIP member organisations are guided by the ACHS through a four-year cycle comprising:

Self-Assessments

Organisations need to assess their achievements and outcomes regularly to improve performance. Using the *Electronic Assessment Tool (EAT)*, organisations can compare and continually update and review their performance against the ACHS standards.

The Self-Assessment provides a gap analysis that the organisation can use as a basis for planning. In Phases 1 and 3, the self assessment is a review of progress against the recommendations of the previous survey. This allows all organisations to continue to improve in the areas that were identified at the previous survey as needing development.

In addition, the organisation submits an updated Risk Register of key organisational risks and a copy of the Quality Improvement Plan.

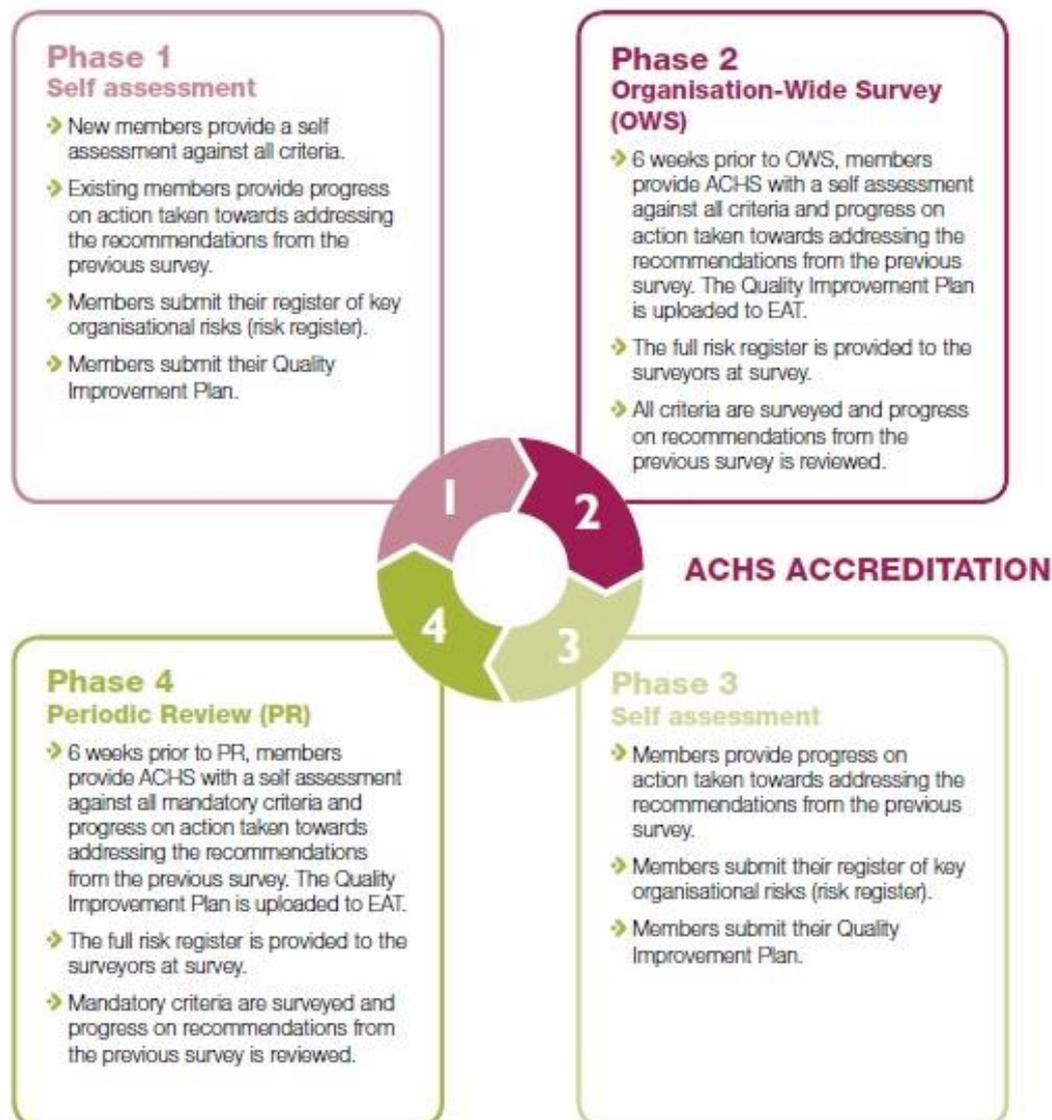
The **Risk Register** includes a risk rating and action plan for the key risks to the organisation as a whole. This demonstrates that the major risk areas to the organisation are being proactively managed and that this is contributing to the overall safety of the organisation and to quality improvement.

The **Quality Improvement Plan (QIP)** should document the key areas for improvement within the organisation. The QIP should outline how the need was identified, how the organisation intends to carry out the improvements, the timeframes and designated responsibilities, reporting arrangements including responsibilities for this, and the evaluation processes including the expected outcomes / improvements.

Template for a Quality Improvement Plan is available on the ACHS website:

www.achs.org.au/EQulP6/Resources/QualityImprovementPlan .

Members new to the ACHS are required to provide a Self-Assessment against all criteria for their first Self-Assessment.



Self-Assessment Support Service

ACHS Customer Services Managers are available to give advice and discuss any issues or concerns that organisations may have. The ACHS Customer Services Managers may be contacted on +61 2 9281 9955.

A report is provided for each Self-Assessment by the ACHS and is designed to give helpful suggestions to organisations on quality improvement and how to enhance or strengthen the Self-Assessment information submitted in preparation for the next onsite survey or review.

Organisation-Wide Survey

An Organisation-Wide Survey is conducted by ACHS surveyors. They are experienced and trained industry peers who provide feedback on overall performance. The survey involves several components including:

- presentations made by staff to demonstrate their achievements and improvements in all major areas of the organisation's operations
- verification by surveyors of the organisation's achievements in relation to ACHS standards
- summation of the surveyors' findings, recommendations and guidance for future action.

Periodic Review

A Periodic Review is an onsite survey that is undertaken approximately two years after the Organisation-Wide Survey in order to further facilitate ongoing improvement and maintenance of achievements. This review includes:

- action taken in response to recommendations from the previous survey
- organisational performance in relation to the 16 Mandatory Criteria.

Survey reports

Following each Organisation-Wide Survey and Periodic Review a summary of the surveyors' findings is compiled to provide the organisation with:

- a detailed assessment of its performance against the ACHS standards and criteria
- identification of areas where performance is satisfactory or where further action is required
- positive comments in areas of high achievement
- suggestions and recommendations for improvement.

Response to Recommendations from Organisation-Wide Survey or Periodic Review

Organisations are required to maintain in the Electronic Assessment Tool (EAT) action and planned action (including target dates) in response to the recommendations from the last survey event. This is reviewed at each Self-Assessment and by the surveyors at the next survey event.

ACHS accreditation

Accreditation is the status obtained by an organisation after a successful third party external evaluation by a recognised body to assess whether an organisation meets applicable predetermined and published standards.

Accreditation is one aspect of performance measurement / requirements set by several health departments in Australia. Accreditation status is also a consideration for health insurers when negotiating contracts for the payment of benefits on behalf of their members.

The focus of ACHS accreditation programs is to provide a framework for continuous improvement. It is about establishing a structure and processes that allow quality and safety to proliferate. Organisations that successfully achieve the ACHS standards through participation in the EQUIP program are awarded ACHS full accreditation for four years. This official acknowledgement of an organisation's commitment to continuous quality improvement is awarded after an OWS.

As part of the EQuIP subscription, organisations achieving ACHS accreditation will receive a *Certificate of Accreditation* and a sign under licence from the ACHS.

The sign, for display outside the organisation, will state: *This health care organisation is accredited by The Australian Council on Healthcare Standards – promoting quality care.*

Announcement of ACHS Accreditation

A public relations kit is forwarded with the completed survey report to assist organisations to promote their achievement of ACHS accreditation. At the invitation of the organisation, it may be possible to arrange for ACHS representative to attend the organisation's ceremony to present the ACHS Certificate of Accreditation.

EQuIP Membership

EQuIP members are from a range of health care organisations such as: hospitals, day procedure centres, community health services, specialist care services, rural and remote health services, area / district / network services etc.

EQuIP members could be:

- sole owners or partnerships
- government agencies
- community and charitable bodies
- private commercial entities.

There are opportunities for linking with other similar organisations for benchmarking or other ways of sharing information.

Benefits of EQuIP Membership

For people receiving your care EQuIP provides:

- assurance that your service conforms to industry standards
- comfort in the knowledge that your staff are accountable for their care
- trust in your staff's ability to respond appropriately to their needs
- security in the knowledge that systems are in place to identify and eradicate or minimise problems
- assurance that they remain informed and involved in planning for their health care.

EQuIP means the people working in your organisation are:

- empowered to improve the delivery of service and care
- provided with benchmarks for quality outcomes
- equipped with a rigorous approach to continuing improvement
- given a comprehensive report for your organisation's continuous improvement
- provided with the opportunity for increased funding.

For people who fund your service EQuIP provides:

- assurance that your organisation operates according to industry standards
- confidence that your organisation is customer focussed
- evidence of quality outcomes
- confidence in the way your organisation minimises and manages risk better value for the money spent on health.

EQuIP Membership Entitlements

EQuIP membership includes:

- A range of publications either web-based or in hard copy including The EQuIP6 Guide, specific service guidelines, clinical indicator manuals and electronic results booklets
- Electronic Assessment Tool (EAT)
- Support from Customer Services Managers
- Self-Assessment Support Service
- Organisation-Wide Survey
- Onsite Periodic Review
- Access to the ACHS Clinical Indicator Program and support from the ACHS Performance and Outcomes Service
- ACHS Clinical Indicator (including relevant publications & Performance Indicator Reporting Tool - PIRT)
- Technical IT support for EQuIP products
- Public relations support
- Access to the restricted members area on the ACHS website <http://www.achs.org.au>

Fees and Charges

Membership fees are based on the size and complexity of your organisation and are invoiced in four proportionate instalments, annually in advance.

It is not possible to estimate fees for organisations without full details on the size and complexity of the organisation. Applicants should contact the ACHS Customer Services Managers on +61 2 9281 9955 who will determine the appropriate EQuIP fee.

Frequently Asked Questions

How long does our organisation have to wait to have an Organisation-Wide Survey?

The first Organisation-Wide Survey generally occurs approximately 12 months after an organisation joins EQuIP program. However, this preparation period can be discussed with your Customer Services Manager. The ACHS Certification program may be more appropriate for new organisations.

How long does an Organisation-Wide Survey take?

Surveys vary from one to five days depending on the size and scope of your organisation.

How much will EQuIP cost?

Costs will depend on the size and scope of your organisation. These are staged over a four year cycle and paid annually. Your Customer Services Manager is available to assess the membership fee for your organisation.

What will be the extra workload of implementing EQuIP?

Organisations that already have systems in place and an infrastructure for regularly reviewing care and service may simply need to review and / or modify their current approaches to incorporate the EQuIP framework. Organisations new to a quality program will need to establish infrastructure and systems using the EQuIP framework as a guide.

Once a Self-Assessment is completed it can then be reviewed and becomes a living document. EQuIP is designed to be incorporated into everyday practice.

What happens if we need more help?

Customer Services Managers are assigned to each organisation and they are available to answer any questions you may have on EQuIP. Your Customer Services Manager will also discuss the survey findings with you, answer questions and make suggestions for future action.

The onsite consultancies are available on request to provide additional support to organisations.

Is it a good idea to employ a consultant?

Organisations will gain the most benefit and value for money from EQuIP if staff assess their own achievements to the *standards* and this is facilitated by a person within the organisation.

If this is not possible, a consultant may be able to assist, however staff involvement is essential.

What happens if our organisation does not meet the ACHS standards?

EQuIP is a continuous quality improvement program so it is not expected that all standards will be completely achieved. There will always be room for improvement and surveyors will provide guidance.

Standards relating to the safety of patients and staff need to be satisfactorily achieved for accreditation to be awarded. Depending on the nature of the risk, the organisation may receive conditional accreditation for one year or not be awarded accreditation.

Who determines if our organisation is accredited?

The authority to award accreditation status is vested in the ACHS Council. The survey team makes a recommendation on accreditation status to ACHS Councillors who determine the final accreditation status.

Can our organisation appeal against a decision of the ACHS Council?

Yes, details of the appeal process are outlined in the EQuIP Membership Agreement.

What happens to the information obtained about our organisation during accreditation?

Information obtained is used for assessment of your organisation and for future surveys. All information about the organisation is confidential and the ACHS is bound by this agreement with EQuIP members. Both staff and surveyors sign a confidentiality statement on appointment to the ACHS.

The ACHS may publish the accreditation status of the organisation, for example whether or not the organisation is accredited and the period of that accreditation.

In addition the ACHS may also publish non-identified aggregated data from EQuIP surveys and the national database for clinical indicators, for the purpose of informing the health care sector and the public and encouraging improvement in the quality of care.

Where can I get more information?

Phone the ACHS office on +61 2 9281 9955 or email achs@achs.org.au or visit our ACHS web site at <http://www.achs.org.au>