Don’t let your quality improvement and assessment outcomes fail your hospital

Transform your safety and quality improvement processes into a finely tuned engine that supports your NSQHS Standards compliance

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Hospitals constantly seek to improve patient care by providing high-quality service.

Ongoing monitoring and improvements in healthcare provision are crucial for hospitals to comply with the National Safety and Quality Health Service (NSQHS) Standards.

All public and private hospitals are assessed against these Standards to ensure they have systems in place that support safe and good quality care, and identify and manage risks of harm.¹

This consistent national approach to assessment provides the opportunity to compare outcomes and identify areas for improvement, and is the basis for reporting to patients, carers and consumers², with results of hospital assessments also available online.

Measurement and reporting on safety and quality informs people designing, delivering and funding health care about any gaps or variation in the delivery of health care; the impact of improvement activity; and how a health service organisation performs compared with national and international standards.

The state of patient safety and quality in Australian hospitals 2019
Assessment outcomes

First edition NSQHS Standards assessment outcomes
January 2013 - December 2018

- All hospitals and day procedure services accredited at least once: 906
- 67% (609) met all core actions at initial assessment at first accreditation cycle
- 74% (672) met all core actions at second accreditation cycle

Second edition NSQHS Standards assessment outcomes
Hospitals and day procedure services
January 2019 - December 2021

- 60% completed assessments
- 74% of assessments met requirements at initial assessment
- 1 not accredited
- 20 required mandatory re-assessment
- 7 with significant risks identified

Source: Australian Commission on Safety and Quality in Health Care

The Australian Commission on Safety and Quality in Health Care (ACSQH) uses feedback on the lessons learnt through accreditation to identify areas where hospitals may require additional support or tools and to maintain and update the NSQHS Standards.

Included among the most frequently rated actions for improvements are:
- Measurement and quality improvement
- Risk management
- Applying quality improvement systems
- Governance, leadership and culture
- Safety and quality training
- Policies and procedures

Good health outcomes rely on effective governance and management processes, and establishing systems involving a large number of contributors in health service organisations and across the health system.


Don’t let your quality improvement and assessment outcomes fail your hospital | 3
Quality improvements

Quality improvements can propel ongoing upgrades in healthcare provision and strengthen compliance to the NSQHS Standards – as long as they are launched, completed, and disseminated efficiently.

Hospital teams may find they duplicate efforts and experience roadblocks to collaboration. There is no simple way for projects to be prioritised, for new people to join a team, or for team members to document and track a project’s evolution. Teams may have no standard workflow and no way to easily communicate or get feedback on a specific stage of a quality improvement project.

According to the NSQHS Standards User Guide for Governing Bodies: “There is increasing recognition that paper-based reporting is limiting, and that governing bodies should use a blend of soft and hard intelligence. A mix of information and data sources are needed to support quality improvement and monitoring.”

Organise and standardise quality improvement

When hospitals look at their compliance with the NSQHS Standards, they must also examine their process for maintaining that compliance. This includes:

- Real-time visibility into all projects at the executive and projects levels
- Standardised, configurable templates for quality improvement workflows
- Collaboration capabilities within project templates
- Integrated search and full-text retrieval
- Artificial intelligence-driven literature appraisal
- Automated evidence synthesis and project reporting

Together, these capabilities can help hospitals transform their safety and quality improvement processes into a finely tuned engine that supports their compliance with the NSQHS Standards.
Enhance your hospital's quality programs

Ovid® Synthesis Clinical Evidence Manager offers a single, cohesive view of projects and reduces duplication while also fostering collaboration within projects by streamlining the literature search, appraisal process, implementation, and dissemination.

The intelligent design of Ovid® Synthesis Clinical Evidence Manager empowers staff to perform research more effectively and efficiently, resulting in increased interest in quality improvement.

This solution will take clinical practice improvement projects to the next level to ensure high quality based on the latest research insights and evidence, and support hospitals with their NSQHS Standards compliance.

Features

- Manages all projects in one place
- Executive and project level dashboards
- Filter and export projects for critical surveys and accreditation
- Built in clinical literature review
- Save searches conducted within the tool
- Easy import of research from any source
- Built in templates based on quality improvement methodologies to guide implementation planning
- Easily upload supporting documents
- Promotes change management
- Enables sharing project results across the hospital for quicker adaption and implementation
- Exports a summary or presentation directly from the tool

Learn more:
wltrskwr.com/ovid-synthesis

References

1 Consumer fact sheet 2: Accreditation of health service organisations
2 The state of patient safety and quality in Australian hospitals 2019
3 The state of patient safety and quality in Australian hospitals 2019