

Ref FOI18-34



Dear 

**Freedom of information request – FOI18-34**

I refer to your application received by ACT Health on 22 May 2018 in which you sought access to information under the *Freedom of Information Act 2016* (the Act).

In your application you have requested documents related to contingency plans since the failed interim report of the hospital does not pass the Council of Healthcare Standards accreditation.

I am an Information Officer appointed by the Director-General under section 18 of the Act to deal with access applications made under Part 5 of the Act. ACT Health is required to provide a decision on your access application by 21 June 2018.

Decision on access

I can advise that nine documents have been identified by ACT Health within the scope of your request. The full release of these documents is outlined in the Schedule of documents attached.

Charges

Processing charges are not applicable for this request.

Online publishing – disclosure log

Under section 28 of the Act, ACT Health maintains an online record of access applications called a disclosure log. Your original access application, my decision and documents released to you in response to your access application will be published in the ACT Health disclosure log not less than three days but not more than 10 days after the date of decision. Your personal contact details will not be published.

You may view the ACT Health's disclosure log at <http://www.health.act.gov.au/public-information/consumers/freedom-information/disclosure-log>.

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#### Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman  
GPO Box 442  
CANBERRA ACT 2601

Via email: [ACTFOI@ombudsman.gov.au](mailto:ACTFOI@ombudsman.gov.au)

#### ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal  
Level 4, 1 Moore St  
GPO Box 370  
Canberra City ACT 2601  
Telephone: (02) 6207 1740  
<http://www.acat.act.gov.au/>

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on 6205 1340 or email [HealthFOI@act.gov.au](mailto:HealthFOI@act.gov.au).

Yours sincerely



Denise Lamb  
Executive Director, Safety and Quality

20 June 2018

## FREEDOM OF INFORMATION REQUEST SCHEDULE

Please be aware that under the *Freedom of Information Act 2016*, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: <http://www.health.act.gov.au/public-information/consumers/freedom-information>

| NAME       | WHAT ARE THE PARAMETERS OF THE REQUEST  | File No  |
|------------|---|----------|
| [REDACTED] | Documents related to contingency plans since the failed report if the hospital does not pass the Council of Healthcare Standards accreditation. | FOI18/34 |

| Ref No | No of Folios | Description   | Date        | Status       | Reason for non-release or deferral | Open Access release status |
|--------|--------------|---|-------------|--------------|------------------------------------|----------------------------|
| 1      | 1-3          | Draft Ministerial Brief Accreditation outcomes and implications | Undated     | Full release |                                    | Yes                        |
| 2      | 4-9          | Ministerial Brief Accreditation outcomes and implications       | Undated     | Full release |                                    | Yes                        |
| 3      | 10-15        | Ministerial Brief Accreditation outcomes and implications       | 11 May 2018 | Full release |                                    | Yes                        |

|                         |       |   |            |              |  |     |
|-------------------------|-------|---|------------|--------------|--|-----|
| 4                       | 16    | Email from Elizabeth Webster on behalf of Jane Murkin to Michael De'Ath | 7 May 2018 | Full release |  | Yes |
| 5                       | 17-19 | Advisory Note to Minister for Health and Wellbeing                      | Undated    | Full release |  | Yes |
| 6                       | 20-22 | Advisory Note to Minister for Health and Wellbeing                      | Undated    | Full release |  | Yes |
| 7                       | 23-25 | Draft Advisory Note to Minister for Health and Wellbeing                | Undated    | Full release |  | Yes |
| 8                       | 26-30 | Question time brief GBC18/280   | 7 May 2018 | Full release |  | Yes |
| 9                       | 31-34 | Question Time Brief GBC18/279   | 7 May 2018 | Full release |  | Yes |
| <b>Total No of Docs</b> |       |   |            |              |  |     |
| 9                       |       |   |            |              |  |     |



MINISTERIAL BRIEF

Health Directorate

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**To:** Minister for Health and Wellbeing Tracking No.: MIN18/616

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**From:** Michael De’Ath, Interim Director-General

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**Subject:** Accreditation outcomes and implications

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**Critical Date:** Not applicable

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**Critical Reason:** Nota applicable

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- DG       .../.../...
- DDG     .../.../...

**Purpose**

To provide you with information in relation to implications for ACT Health should the organisation not receive re-accreditation against the National Safety and Quality Health Service Standards.

**Recommendation**

That you note the information contained in this brief.

**Noted / Please Discuss**

Meegan Fitzharris MLA ...../...../.....

Minister’s Office Feedback

**Background**

1. ACT Health underwent assessment against the National Safety and Quality Health Services Standards from 19-23 March 2018. A team of surveyors from the accreditation agency Australian Council on Health Care Standards (ACHS) assessed ACT Health’s implementation of the 10 National Standards through review of evidence, meetings with key staff and site visits across Canberra Hospital and Health Services (CHHS).

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2. As a result of this assessment, ACT Health received a Not Met report, assessing the organisation as requiring further activity to meet 33 of the core National Standards actions.
3. ACHS has provided ACT Health with a remediation period of 90 days to address the Not Met Core Actions. ACT Health will be reassessed on those Core Actions through a process called Advanced Completion (AC). Two ACHS surveyors will conduct an AC on-site survey at CHHS, 3-5 July 2018.
4. ACT Health is currently accredited until 13 July 2018.
5. ACHS have 20 business days from completion of the AC90 on-site review to prepare a final accreditation outcomes report. ACT Health will remain accredited throughout the AC90 process and until receipt of that report, which signals the end of the formal accreditation process. The expected date of receipt of the report is 2 August 2018.
6. Should ACT Health receive indication from ACHS during the on-site survey that any core actions will not be met, there may be opportunity to negotiate with ACHS to complete any minor rectification work before the report is finalised.

**Issues**

7. The Australian Commission on Safety and Quality in Health Care (Commission) have advised that in the event ACT Health does not receive reaccreditation against the National Standards at completion of the AC90 process, the organisation will need to be reassessed against the National Standards within twelve months.
8. ACT Health's licensing and regulatory policy directives, with oversight by the Regulator will need to be followed until the organisation receives National Standard accreditation.
9. The *ACT Health Care Facilities Code of Practice 2001* (Code) determines the Chief Health Officer as the Regulator. If ACT Health were to be unaccredited, a Type 1 Health Care Facility Public Health License would need to be applied for through the Regulator. Once the license is issued, services would be subject to periodic inspection and compliance with the Code.
10. The Code predates the introduction of the National Standards in 2011 and requires review.
11. Health Protection Service, Population Health are in the process of reviewing the regulatory framework for health care facilities, including the Code. They have advised that this process will take upwards of 18 months to complete and will involve internal and external consultation processes, development of a Regulatory Impact Statement outlining options for a new framework, possible cabinet process and rewriting the Code and/or development of new legislation.

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- 12. Other States and Territories have policy directives in relation to roles, responsibilities and regulatory requirements in relation to accreditation processes for public health services and organisations. Examples of these have been sought from the Commission.

**Financial Implications**

- 13. In the unlikely event that ACT Health does not receive accreditation to the National Standards, the organisation will not be eligible for private health insurance funding.
- 14. ACT Health's bargaining position in relation to Australian Health Ministers Advisory Council funding opportunities, and negotiations around hospital acquired complications funding implications has the potential to be impacted if services are not accredited.

- 15. ACT Health's insurance premiums could also be affected.

? pls check  
this does not seem very clear?

**Consultation**

Internal

- 16. Health Protection Service, Population Health Division

Cross Directorate

- 17. Population Health have sought advice from the ACT Government Solicitors Office in relation to the Chief Health Officers Regulatory role. This advice is pending.

External

- 18. Program Director, Australian Commission on Safety and Quality in Health Care

**Benefits/Sensitivities**

- 19. The Australian Commission on Safety and Quality in Health Care requires hospitals and health services to meet all core actions in order to achieve accreditation to the National Standards.
- 20. There are political, reputational, public trust, staff culture and funding implications should ACT Health public health services not receive National Standards accreditation.

**Media Implications**

- 21. ACT Health's accreditation outcomes and the AC90 process has generated significant media attention. ACT Health have prepared media statements and supporting documentation.

|                 |  |        |           |
|-----------------|--|--------|-----------|
| Signatory Name: | Jane Murkin, Deputy Director-General,<br>Quality Governance and Risk (QGR) | Phone: | 6207 7880 |
| Action Officer: | Josephine Smith, Director, Clinical<br>Effectiveness, QGR                  | Phone: | 6205 0095 |



## MINISTERIAL BRIEF

## Health Directorate

UNCLASSIFIED

**To:** Minister for Health and Wellbeing

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**From:** Michael De'Ath, Interim Director-General

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**Subject:** Accreditation outcomes and implications

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**Critical Date:** Not applicable

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**Critical Reason:** Not applicable

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Tracking No.: MIN18/616

- DG           .../.../...
- DDG        .../.../...

**Purpose**

To provide you with information in relation to implications for ACT Health should the organisation not receive accreditation against the National Safety and Quality Health Service (NSQHS) Standards.

**Recommendation**

That you note the information contained in this brief.

**Noted / Please Discuss**

Meegan Fitzharris MLA ...../...../.....

Minister's Office Feedback

**Background**

1. ACT Health is currently accredited against the National Safety and Quality Health Services Standards until 13 July 2018.
2. ACT Health underwent assessment for reaccreditation against the National Standards from 19-23 March 2018. A team of surveyors from the accreditation agency Australian Council on Health Care Standards (ACHS) assessed ACT Health's implementation of the 10 National Standards through review of evidence, meetings with key staff and site visits across Canberra Hospital and Health Services (CHHS).

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3. As a result of this assessment, ACT Health received a Not Met report, assessing the organisation as requiring further activity to meet 33 of the core National Standards actions.
4. ACHS has provided ACT Health with a remediation period of 90 days to address the Not Met Core Actions. ACT Health will be reassessed on those Core Actions through a process called Advanced Completion (AC). Two ACHS surveyors will conduct an AC on-site survey at CHHS, 3-5 July 2018.
5. ACT Health will be advised of the outcome of the AC review and surveyor recommendation to ACHS on the last day of the on-site survey, 5 July 2018.
6. The ACHS survey team have five working days from the last day of the on-site review to submit their report to ACHS.
7. The ACHS surveyor draft report and recommendation is reviewed by the ACHS Chief Executive Officer (CEO) or their delegate. If a recommendation for non-accreditation is made, an ACHS Accreditation Panel is convened to review the survey report and vote on the accreditation decision.
8. ACHS have advised that a draft AC report should be available for ACT Health review in ten working days following the on-site survey, 19 July 2018. ACT Health have five working days from receipt of the report to review and provide a response to ACHS by 26 July 2018.
9. The final survey report should be received within 30 calendar days of the AC90 on-site review, which includes the accreditation decision. The expected date of receipt of the report is 5 August 2018.
10. ACT Health remain accredited until finalisation of the AC90 process.
11. As per the ACHS Appeals Process policy, ACT Health may appeal the accreditation decision within 28 days from receipt of the written advice of the accreditation decision.

Policy states: "An appeal may be made on one or more of the following grounds:

- Error in making of the accreditation decision or process leading to that decision
- Relevant and significant evidence was not properly considered or incorrectly interpreted
- Inappropriate weighting given to evidence used in making the accreditation decision, or process leading to the decision, and
- Reasons provided for the accreditation decision are inconsistent with the evidence on which the decision was made."

12. The appeal application must be in writing to the ACHS CEO, accompanied by an outline of the grounds upon which the health organisation seeks to appeal and provision of

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- the associated fee. ACHS CEO will then formally acknowledge the appeal application in writing and provide the organisation with 28 days to submit appeal documents.
13. To review an appeal against an accreditation decision, ACHS convene an Appeals Committee based on the circumstances, nature and complexity of the appeal. Committee members cannot include surveyors or Council members involved in the original accreditation decision.
  14. The Appeals Committee determines whether the applicant has satisfied the grounds for appeal. This may include inviting oral submissions, inspecting health service premises, and/or inviting any person to appear before the Committee. Once submissions and evidence has been considered, the Committee recommends to the ACHS Board one or more of the following:
    - Confirmation of the original decision
    - Variation of the original division in whole or in part, and/or
    - Re-survey of the relevant premises, in whole or in part.
  15. The Board of ACHS considers the recommendations made by the Appeals Committee to determine the final outcome, which is reached within one month of receiving the Appeals Committee recommendations. The Boards decision is final.
  16. The original accreditation status awarded to ACT Health following the survey in May 2015 shall remain in force until the appeal is finalised.

**Issues**

17. In the event that ACT Health does not receive re-accreditation, the Australian Commission on Safety and Quality in Health Care (Commission) has advised that the organisation is required to be reassessed against the National Standards within twelve months.
18. During the intervening period the Commission has also advised that ACT Health's licensing and regulatory policy directives, with oversight by the Regulator, will need to be followed until the organisation receives National Standard accreditation.
19. Section 18 of the *Public Health Act 1997* (the Act), regulates the operation of a health care facility.
20. The *ACT Health Care Facilities Code of Practice 2001* (Code) is an enforceable Code of Practice under the Act. The Code sets the systems and standards to protect the community from health risks associated with health care facilities.
21. The Code requires that an operator of a health care facility hold a Health Care Facility Public Health License in order to conduct the business of a health care facility. The License is available at two levels:
  - Type 1: Licence for non-accredited facilities, and
  - Type 2: Licence for facilities that are accredited with a recognised accreditation system.

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22. The ACT Minister for Health and Wellbeing is responsible for executing the Act (and the Code of Practice made under it) and has specific powers under the Act in relation to health care facilities, such as the power to vary, suspend or cancel a license in the interests of public health where a contravention of the Act is believed to have occurred. These powers have been delegated to the Chief Health Officer appointed by the Minister pursuant to section 7 of the Act, and the Director of the Health Protection Service (Director HPS).
23. If ACT Health were not to receive accreditation to the National Standards, a Type 1 (Unaccredited) Health Care Facility Public Health License would need to be applied for and issued.
24. The process in relation to changing the license from a Type 2 (Accredited) to a Type 1 (Unaccredited) license type would be as follows:
  - The health service is required to advise Director HPS that the facility is no longer accredited, and completes a license variation form (at a nominal cost).
  - Director HPS reviews the license application and once satisfied that the application is satisfactory, Director HPS issues a Type 1 license.
  - The service would be subject to periodic inspection and compliance with the Code.
25. As a Type 1 health care facility license holder, ACT Health would be obligated to comply with all provisions of the Code. Authorised officers under the *Public Health Act 1997* may inspect health service facilities from time to time to assess compliance with the Code.
26. The Code predates the introduction of the National Standards in 2011 and requires review.
27. Director HPS, Population Health are in the process of reviewing the regulatory framework for health care facilities, including the Code. They have advised that this process will take up to 18 months to complete and will involve internal and external consultation processes, development of a Regulatory Impact Statement outlining options for a new framework, possible cabinet process and rewriting the Code and/or development of new legislation. The process of review is able to be undertaken within the current reaccreditation process without further impact on the reaccreditation outcome.
28. Other States and Territories have policy directives in relation to roles, responsibilities and regulatory requirements in relation to National Standards accreditation processes for public health services and organisations. Best practice examples of these have been sought from the Commission, with documents from Victoria, Queensland and South Australia provided. These examples will assist in informing the way forward for the ACT.
29. These States all apply a similar process if accreditation is not met after an AC90 review:

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- The regulator needs to be notified and a responsive regulator process commenced
  - Health service provides the regulator with an action plan with timeframes and ongoing action that will occur to address the issues
  - Health service re-applies for external assessment against the National Standards.
30. A National Standards accreditation policy directive for the ACT that supports the Code is currently being drafted by the Division of Quality, Governance and Risk.
31. The accreditation status for ACT Health will apply to the University of Canberra Hospital (UCH) once it commences service delivery in July 2018.
32. In September 2017, ACT Health wrote to the Commission to seek advice relating to UCH accreditation requirements. The Commission advised that as existing services are being moved from CHHS facilities to UCH campus, an additional external accreditation process was not required. However, due to the inherent risk associated with the move of patients and services between facilities, the Commission recommended ACT Health undertake an internal alignment survey against the National Standards. ACT Health is in the process of procuring an external consultant to conduct this assessment.
33. ACT Health's membership agreement with ACHS will be amended to include UCH as a survey assessment site for future accreditation processes, once the service is operational.

**Financial Implications**

34. Not applicable

**Consultation**Internal

35. Chief Health Officer and Health Protection Service, Population Health Division

Cross Directorate

36. ACT Government Solicitors Office

External

37. Program Director, Australian Commission on Safety and Quality in Health Care
38. Customer Services Manager, Australian Council on Healthcare Standards

**Benefits/Sensitivities**

39. The Australian Commission on Safety and Quality in Health Care requires hospitals and health services to meet all core actions in order to achieve accreditation to the National Standards.
40. ACT Health's public health facilities are not required to be closed by the Chief Health Officer as a result of not being accredited to the National Standards. However, there are powers available to the Minister to close a health care facility in the event of a

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significant risk to public safety by revoking its license.

41. There are political, reputational, public trust, staff culture and funding implications should ACT Health public health services not receive National Standards accreditation.

**Media Implications**

42. ACT Health's accreditation outcomes and the AC90 process has generated significant media attention. ACT Health have prepared media statements and supporting documentation.

|                 |  |        |           |
|-----------------|--|--------|-----------|
| Signatory Name: | Jane Murkin, Deputy Director-General,<br>Quality Governance and Risk (QGR) | Phone: | 6207 7880 |
| Action Officer: | Josephine Smith, Director, Clinical<br>Effectiveness, QGR                  | Phone: | 6205 0095 |



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7 - MAY 2018

MINISTERIAL BRIEF

Health Directorate

UNCLASSIFIED

To: Minister for Mental Health

Tracking No.: MIN18/617


From: Michael De'Ath, Interim Director-General

Subject: Accreditation outcomes and implications

Critical Date: Not applicable

Critical Reason: Not applicable

- DG
- DDG

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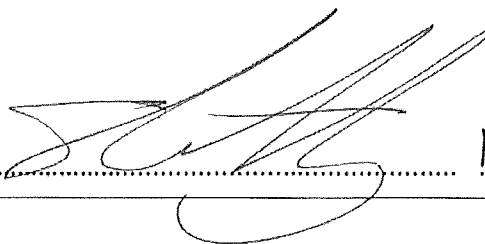
**Purpose**

To provide you with information in relation to implications for ACT Health should the organisation not receive accreditation against the National Safety and Quality Health Service (NSQHS) Standards.

**Recommendation**

That you note the information contained in this brief.

Shane Rattenbury MLA



11.5.18

Minister's Office Feedback

**Background**

1. ACT Health is currently accredited against the National Safety and Quality Health Services Standards until 13 July 2018.
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**Media Implications**

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| Signatory Name: | Jane Murkin, Deputy Director-General,<br>Quality Governance and Risk (QGR) | Phone: | 6207 7880 |
| Action Officer: | Josephine Smith, Director, Clinical<br>Effectiveness, QGR                  | Phone: | 6205 0095 |

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**Webster, Elizabeth (Health)**

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**From:** Webster, Elizabeth (Health) on behalf of Murkin, Jane (Health)  
**Sent:** Monday, 7 May 2018 4:34 PM  
**To:** De'Ath, Michael (Health)  
**Cc:** Dal Molin, Vanessa (Health)  
**Subject:** Meeting with Minister Fitzharris: Actions taken - Updated QTBs and Advisory Note [DLM=Sensitive]  
**Attachments:** Advisory Note - Accreditation outcomes and implications.docx; May A ACT Health Accreditation.docx; May A Accreditation.docx

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

Hi Michael

Based on the discussion with Minister Fitzharris this morning, I have reviewed and updated the QTBs on accreditation. I have also drafted an Advisory Note addressing the additional information the Minister for Health and Wellbeing requested regarding the accreditation outcomes and implications brief.

The updated QTBs and Advisory Note (see attached) was emailed and hand delivered to the MAGS team this afternoon.

Regards



Jane Murkin – Deputy Director-General  
Quality, Governance and Risk

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**Care ▲ Excellence ▲ Collaboration ▲ Integrity**



## ADVISORY NOTE

Minister for Health and Wellbeing

|                                 |  |
|---------------------------------|--|
| <b>TRIM Ref: MIN18/616</b>      | ACT Health Organisation Wide Re-accreditation - Implications |
| <b>Critical Date</b>            | Not applicable   |
| <b>Interim Director-General</b> | Michael De'Ath ...../...../.....                             |

### Minister's question/s:

1. Please provide clarification regarding the financial implications if ACT Health does not receive reaccreditation to the National Standards.
2. Please provide details regarding public and private health facilities which received not met actions at initial assessment to the National Standards and post an AC90 review.
3. What progress has been made with the accreditation of the University of Canberra Hospital (UCH).

### ACT Health's response:

#### Financial implications

1. The Private Health Insurance (Accreditation) Rules 2011 under the Private Health Insurance Act 2007 states that a health service must be accredited to receive funding for treatment given to a privately insured patient.
2. ACT Health currently claims funds from private insurance providers for services including accommodation, prosthesis, specialist consultations and diagnostic services (imaging and pathology).
3. On receipt of a claim, private health insurance providers assess the claim on a number of factors and eligibility requirements, including accreditation status of the health service provider.
4. In the unlikely event that ACT Health does not receive reaccreditation to the National Standards, the organisation would not be eligible to receive reimbursement from private health insurance providers.
5. This may also affect private patients' reimbursement from private health insurance providers for treatments and services received in Canberra Hospital and Health Services public health facilities.

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6. The Commission have advised that as the National Standards are a critical component of the Australian Health Services Safety and Quality Accreditation Scheme endorsed by the Australian Health Ministers in November 2010, ACT Health's bargaining position in relation to Australian Health Ministers Advisory Council funding opportunities has the potential to be impacted. This could potentially also include negotiations around funding implications associated with hospital acquired complications.
7. ACT Health's insurance premiums could also be affected.

Public and private health facilities that did not receive accreditation

8. For the 2016-2017 financial year, 22% of public and private health facilities received not met actions at initial assessment to the National Standards.
9. Since the introduction of the National Standards, two public health facilities have received not met actions post an AC90 review. One service closed, undertook remediation activity and then reopened. The other service appointed an administrator and continued operations with substantial oversight whilst working towards reaccreditation with the service successfully reassessed against the National Standards twelve months later.

UCH

10. The accreditation status for ACT Health will apply to the UCH once it commences service delivery in July 2018.
11. In September 2017, ACT Health wrote to the Australian Commission on Safety and Quality in Health Care requesting advice in relation to accreditation requirements for the UCH with specific reference to Advisory no: A13/03 Interim Accreditation for New Health Service Organisations.
12. The Commission responded that the UCH did not meet the definition of a new service and Advisory A13/03 requirements, as existing health services were being relocated to a new facility. However, due to patient safety risks associated with the relocation of health services, the Commission suggested ACT Health undertake a voluntary alignment assessment to ensure that all necessary safety and quality systems have been implemented at the UCH and the services continue to meet the requirements of the National Standards.
13. Internal discussions occurred between the Deputy Director-Generals of Canberra Hospital and Health Services and Quality, Governance and Risk to determine the appropriate process to undertake the alignment survey, with agreement to procure an external consultant to undertake the survey. As health services being moved to the UCH were subject to the organisation wide accreditation process, it was decided that the alignment survey should be undertaken after the on-site survey, 19 – 23 March. The Commission also advised that the alignment survey should be undertaken within four weeks of the services being opened.
14. In April 2018, procurement documentation was developed and approved with request for tender sent to four consultants recommended by the Australian Commission on Safety and Quality in Healthcare as per ACT Government procurement guidelines on 4 May 2018.

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**Noted / Please Discuss**

**Meegan Fitzharris MLA  
Minister for Health and Wellbeing**

.../.../...

|                 |  |          |
|-----------------|--|----------|
| Signatory Name: | Jane Murkin, Deputy Director-General<br>Quality, Governance and Risk | 62077880 |
| Action Officer: | Josephine Smith, Director Clinical<br>Effectiveness                  | 62050095 |



## ADVISORY NOTE

Minister for Health and Wellbeing

|                                 |  |
|---------------------------------|--|
| <b>TRIM Ref: MIN18/616</b>      | ACT Health Organisation Wide Re-accreditation - Implications |
| <b>Critical Date</b>            | Not applicable   |
| <b>Interim Director-General</b> | Michael De'Ath ...../...../.....                             |

### Minister's question/s:

1. Please provide clarification regarding the financial implications if ACT Health does not receive reaccreditation to the National Standards.
2. Please provide details regarding public and private health facilities which received not met actions at initial assessment to the National Standards and post an AC90 review.
3. What progress has been made with the accreditation of the University of Canberra Hospital (UCH).

### ACT Health's response:

#### Financial implications

1. The Private Health Insurance (Accreditation) Rules 2011 under the Private Health Insurance Act 2007 states that a health service must be accredited to receive funding for treatment given to a privately insured patient.
  2. The Rules also state that the health service can be "formally engaged in the process of an appropriate accrediting body to be accredited or certified by that body, where 'formally engaged' means having made a valid application to the body for accreditation or certification, the application has been accepted and the applicant is undertaking the requirements of the body in the timeframes required." ACT Health currently claims funds from private insurance providers for services including accommodation, prosthesis, specialist consultations and diagnostic services (imaging and pathology).
  3. On receipt of a claim, private health insurance providers assess the claim on a number of factors and eligibility requirements, including accreditation status of the health service provider.
1. In the unlikely event that ACT Health does not receive reaccreditation to the National Standards, the organisation would not be eligible to receive reimbursement from private



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health insurance providers until such time that the health services are engaged in another subsequent assessment process against the National Standards.

2. This may also affect private patients' reimbursement from private health insurance providers for treatments and services received in Canberra Hospital and Health Services public health facilities.
3. ACT Health is yet to understand the full financial impact from private health insurance providers, but will make further inquiries as a priority and will provide you with further information.
4. ACT Health's insurance premiums could also be affected. Further investigations will be undertaken to fully understand the potential impact.

#### Public and private health facilities that did not receive accreditation

5. For the 2016-2017 financial year, 22% of public and private health facilities received not met actions at initial assessment to the National Standards.
6. Since the introduction of the National Standards, two public health facilities have received not met actions post an AC90 review.
7. A mental health service that was assessed as part of a large metropolitan teaching hospital was closed following assessment. The service undertook remediation activity and was renovated before being reopened.
8. A medium size rural service in a remote location was not awarded accreditation. That service appointed an administrator and continued operations with substantial oversight by the health department whilst working towards reaccreditation. The service was successfully re-accredited within twelve months.

#### UCH

9. The accreditation status for ACT Health will apply to the UCH once it commences service delivery in July 2018.
10. In September 2017, ACT Health wrote to the Commission requesting advice in relation to accreditation requirements for the UCH with specific reference to Advisory no: A13/03 Interim Accreditation for New Health Service Organisations.
11. The Commission responded that the UCH did not meet the definition of a new service and Advisory A13/03 requirements, as existing health services were being relocated to a new facility. However, due to patient safety risks associated with the relocation of health services, the Commission suggested ACT Health undertake a voluntary alignment assessment to ensure that all necessary safety and quality systems have been implemented at the UCH and the services continue to meet the requirements of the National Standards.
12. Internal discussions occurred between the Deputy Director-Generals of Canberra Hospital and Health Services and Quality, Governance and Risk to determine the appropriate process to undertake the alignment survey, with agreement to procure an external consultant to undertake the survey. As health services being moved to the UCH were subject to the

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organisation wide accreditation process, it was decided that the alignment survey should be undertaken after the on-site survey which was held on 19 – 23 March 2018. The Commission also advised that the alignment survey should be undertaken within four weeks of the services being opened.

13. In April 2018, procurement documentation was developed and approved with request for tender sent to four consultants recommended by the Commission as per ACT Government procurement guidelines on 4 May 2018.
14. Quotes are to be submitted by prospective consultants by 18 May 2018. The quotes will then be reviewed and procurement finalised by 1 June 2018, with the successful consultant commencing as soon as possible in June as per their availability.
15. Expected deliverables from this procurement for an internal alignment survey include:
  - An assessment report identifying any gaps in the implementation of the National Standards at UCH, by 30 June 2018.
  - Action Plan detailing action required to address identified gaps including detail of accountability, responsibility and timeframe for completion of actions, by 30 June 2018.
  - Assist key staff in review of weekly progress reporting to address actions detailed in the Action Plan, providing advice to ensure progress remains on track.
  - Coordinate and undertake an internal alignment survey within four weeks of UCH opening, assessing the implementation of the National Standards at UCH
  - Provide an assessment report by 7 August 2018.

**Noted / Please Discuss**

**Meegan Fitzharris MLA  
Minister for Health and Wellbeing**

.../.../...

|                 |  |          |
|-----------------|--|----------|
| Signatory Name: | Jane Murkin, Deputy Director-General<br>Quality, Governance and Risk | 62077880 |
| Action Officer: | Josephine Smith, Director Clinical<br>Effectiveness                  | 62050095 |



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**ADVISORY NOTE**

Minister for Health and Wellbeing

|                          |  |
|--------------------------|--|
| TRIM Ref: MIN18/616      | ACT Health Organisation Wide Re-accreditation - Implications |
| Critical Date            | Not applicable   |
| Interim Director-General | Michael De'Ath ...../...../.....                             |

**Minister's question/s:**

1. Please provide clarification regarding the financial implications if ACT Health does not receive reaccreditation to the National Standards.
2. Please provide details regarding public and private health facilities which received not met actions at initial assessment to the National Standards and post an AC90 review.
3. What progress has been made with the accreditation of the University of Canberra Hospital (UCH).

**ACT Health's response:**Financial implications

1. The Private Health Insurance (Accreditation) Rules 2011 under the Private Health Insurance Act 2007 states that a health service must be accredited to receive funding for treatment given to a privately insured patient.
2. The Rules also state that the health service can be "formally engaged in the process of an appropriate accrediting body to be accredited or certified by that body, where 'formally engaged' means having made a valid application to the body for accreditation or certification; the application has been accepted and the applicant is undertaking the requirements of the body in the timeframes required."
- 3.2. ACT Health currently claims funds from private insurance providers for services including accommodation, prosthesis, specialist consultations and diagnostic services (imaging and pathology).
- 4.3. On receipt of a claim, private health insurance providers assess the claim on a number of factors and eligibility requirements, including accreditation status of the health service provider.

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1. In the unlikely event that ACT Health does not receive reaccreditation to the National Standards, the organisation would not be eligible to receive reimbursement from private health insurance providers until such time that the health services are engaged in another subsequent assessment process against the National Standards.
2. This may also affect private patients' reimbursement from private health insurance providers for treatments and services received in Canberra Hospital and Health Services public health facilities.
3. ACT Health is yet to understand the full financial impact from private health insurance providers, but will make further inquiries as a priority and will provide you with further information.
4. ACT Health's insurance premiums could also be affected. Further investigations will be undertaken to fully understand the potential impact.

Commented [SJ(1)]: I have asked Jarrad Nuss/Matt Richter for additional information – have cc'd Elizabeth in. Still waiting for response.

Public and private health facilities that did not receive accreditation

5. For the 2016-2017 financial year, 22% of public and private health facilities received not met actions at initial assessment to the National Standards.
6. Since the introduction of the National Standards, two public health facilities have received not met actions post an AC90 review.
7. A mental health service that was assessed as part of a large metropolitan teaching hospital was closed following assessment. The service undertook remediation activity and was renovated before being then reopened.
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UCH

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11. The Commission responded that the UCH did not meet the definition of a new service and Advisory A13/03 requirements, as existing health services were being relocated to a new facility. However, due to patient safety risks associated with the relocation of health services, the Commission suggested ACT Health undertake a voluntary alignment assessment to ensure that all necessary safety and quality systems have been implemented at the UCH and the services continue to meet the requirements of the National Standards.
12. Internal discussions occurred between the Deputy Director-Generals of Canberra Hospital and Health Services and Quality, Governance and Risk to determine the appropriate process to

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undertake the alignment survey, with agreement to procure an external consultant to undertake the survey. As health services being moved to the UCH were subject to the organisation wide accreditation process, it was decided that the alignment survey should be undertaken after the on-site survey which was held on 19 – 23 March 2018. The Commission also advised that the alignment survey should be undertaken within four weeks of the services being opened.

13. In April 2018, procurement documentation was developed and approved with request for tender sent to four consultants recommended by the Commission as per ACT Government procurement guidelines on 4 May 2018. ~~{Comment from DG: Include more detail here on next next steps. What is the closing date, when do we anticipate the survey will take place, what additional processes are required etc.}~~
14. Quotes are to be submitted by prospective consultants by 18 May 2018. The quotes will then be reviewed and procurement finalised by 1 June 2018, with the successful consultant commencing as soon as possible in June as per their availability.
15. Expected deliverables from this procurement for an internal alignment survey include:
  - An assessment report identifying any gaps in the implementation of the National Standards at UCH, by 30 June 2018.
  - Action Plan detailing action required to address identified gaps including detail of accountability, responsibility and timeframe for completion of actions, by 30 June 2018.
  - Assist key staff in review of weekly progress reporting to address actions detailed in the Action Plan, providing advice to ensure progress remains on track.
  - Coordinate and undertake an internal alignment survey within four weeks of UCH opening, assessing the implementation of the National Standards at UCH
  - Provide an assessment report by 7 August 2018.

Noted / Please Discuss

Meegan Fitzharris MLA  
Minister for Health and Wellbeing

.../.../....

|                 |  |          |
|-----------------|--|----------|
| Signatory Name: | Jane Murkin, Deputy Director-General<br>Quality, Governance and Risk | 62077880 |
| Action Officer: | Josephine Smith, Director Clinical<br>Effectiveness                  | 62050095 |

GBC18/280

Portfolio/s Mental Health

**ISSUE: ACCREDITATION****Talking points:**

- The Australian Council on Healthcare Standards completed a comprehensive assessment of ACT Health's compliance with the National Safety and Quality Health Service Standards from 19-23 March 2018.
- During the organisation wide re-accreditation assessment, the Australian Council on Healthcare Standards assessed ACT Health's implementation of the National Standards. This involves awarding either a 'satisfactorily met' or 'not met' to the actions within the National Safety and Quality Health Service Standards.
- ACT Health received the formal Australian Council on Healthcare Standards 'Not Met' Action report on 4 April 2018.
- The Australian Council on Healthcare Standards 'Not Met' Action report details 176 core criteria as met with 37 assessed as 'Not Met' under five of the 10 National Standards.
- Of the 37 'Not Met' actions, 33 are 'Not Met' core National Standards actions and 4 are 'Not Met' developmental National Standards actions. Of the 4 'Not Met' developmental National Standards actions, one is in Standard 1, Governance; two in Standard 2, Partnering with Consumers, and one in Standard 4, Medication Safety.
- The Australian Council on Healthcare Standards provided ACT Health a remediation period of 90 days to address the 33 'Not Met' Core Actions. ACT Health will be reassessed on those 33 'Not Met' Core Actions through a process called Advanced Completion, with two Australian Council on Healthcare Standards surveyors conducting an Advanced Completion survey on-site at Canberra Hospital and Health Services during 3-5 July 2018.

Cleared as complete and accurate: 07/05/2018  
Cleared by: Deputy Director-General Ext: 77880  
Information Officer name: Jane Murkin  
Contact Officer name: Josephine Smith Ext: 50095  
Lead Directorate: Health

TRIM Ref: GBC18/280



## QUESTION TIME BRIEF

- ACT Health will need to undertake improvement activity to ensure the 4 'Not Met' developmental National Standards actions are met in the future. ACT Health will not be reassessed against these developmental actions during the Advance Completion process and the on-site survey in July 2018.
- All Core Actions must be assessed as 'Satisfactorily Met' at the Advanced Completion survey for ACT Health to be awarded accreditation.
- ACT Health has been progressing work against all of the 'Not Met' criteria and specific recommendations, including three that relate to the ligature and self-harm risk in mental health units. An action plan has been developed to manage these recommendations
- ACT Health is in the process of finalising draft terms of reference for the establishment of a Mental Health Review Advisory Body to oversee the review of all CHHS Mental Health Inpatient Units, Alcohol and Drug, Justice Health facilities and the implementation of subsequent recommendations.
- The Independent external review of the acute inpatient mental health facilities will commence in May 2018 and will involve attendance to the mental health facilities and review the safety aspects of:
  - Model of Care,
  - Policies and procedures (are we using the existing tools correctly)
  - Patient cohort
  - Workforce, skill mix
  - Unique admission criteria to each unit
  - Physical environment, and
  - Service demand.
- The independent external review will occur during 21-23 May 2018 and the team from Northwestern Mental Health, Victoria comprises of:
  - Dr David Fenn, Interim Director of Clinical Governance
  - Peter Kelly, Director of Operations
  - Cosino Birsci, Facilities Manager

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Information Officer name: Jane Murkin  
Contact Officer name: Josephine Smith Ext: 50095  
Lead Directorate: Health

TRIM Ref: GBC18/280

## QUESTION TIME BRIEF

- A National Standards Leadership Committee, chaired by the Interim Director-General with membership from the Deputy Director-General and Professional Lead cohort has been established to oversee development, progress and implementation of the Action Plan.
- It is important to emphasise that improving quality and safety is an ongoing process in the health system and that does not start or end with accreditation. There is significant work underway every day in our hospital that is focussed on quality and patient safety.
- ACT Health was last surveyed by Australian Council on Healthcare Standards in May 2015 and was successful in achieving accreditation against the National Standards until July 2018. ACT Health will remain accredited until completion of the current assessment process.

### Key Information

- The ACHS surveyors presented an “Accreditation Summation” session to ACT Health staff on 23 March 2018. This gave clinical and operational staff an overview of what might be expected in the final survey report.
- At summation, the surveyors provided a brief overview of their findings against each action, highlighting areas of excellence including the ACT Health Quality Strategy, the positive patient centred care delivered to regional patients through the Renal telehealth service, and the rapid person centred care provided to unwell oncology patients through the Rapid Assessment unit in radiation oncology.
- ACT Health has received the draft comprehensive Accreditation Report from the Australian Council on Health Care Standards (ACHS) on 19 April 2018. ACT Health reviewed the report to ensure factual accuracy, although cannot change the recommendations or outcomes. Feedback was provided to ACHS on 3 May 2018 to enable finalisation of the report.
- ACHS will submit the final report to ACT Health in the coming weeks. The outcomes will be used to continually drive quality and safety improvements in the health service.

### Not Met report

- ACT Health has commenced significant work to address the not met core action report. This includes:

|                                   |                         |            |
|-----------------------------------|-------------------------|------------|
| Cleared as complete and accurate: | 07/05/2018              |            |
| Cleared by:                       | Deputy Director-General | Ext: 77880 |
| Information Officer name:         | Jane Murkin             |            |
| Contact Officer name:             | Josephine Smith         | Ext: 50095 |
| Lead Directorate:                 | Health                  |            |

TRIM Ref: GBC18/280



## QUESTION TIME BRIEF

- The establishment of the National Standards Leadership Committee. The role of the committee is to provide leadership oversight and effective governance to address the 'not met core action report'. Including the development of an action plan, audit processes which have been put in place, and the process for collation of required documentary evidence for the on-site reassessment 3-5 July 2018.
- ACT Health has established an accreditation coordination team who have commenced development of a robust programme plan to track and report weekly to the National Standards Leadership Committee and the Minister for Health and Wellbeing. This plan includes a detailed action plan and traffic light progress.
- The Minister for Health and Wellbeing has commenced weekly meetings with ACT Health and has requested and is receiving weekly briefings on ACT Health's progress in addressing the not met core actions.
- Two all staff forums have been convened by ACT Health's Interim Director-General, with the forum held on 4 May attended by the Minister for Health and Wellbeing. The staff forums were held to provide an update on ACT Health's key priorities including accreditation.
- The Interim Director-General has liaised with the Australian Commission on Safety and Quality in Health Care and Australian Council on Health Care Standards to discuss the outcomes of the accreditation survey and the monitoring processes ACT Health is taking to address the not met core action report.
- The Commission have provided ACT Health with their full support and confidence in the approach ACT Health is undertaking to address the Not Met Core Actions and in achieving re-accreditation, including a visit to ACT Health in the coming weeks to support ACT Health throughout this process.

### **Background Information – may not be suitable for public disclosure**

- ACT Health will be advised of the outcome of the AC review and surveyor recommendation to ACHS on the last day of the on-site survey, 5 July 2018.
- The ACHS survey team have five working days from the last day of the on-site review to submit their report to ACHS, which is internally reviewed to determine the accreditation decision.
- A draft AC report is then provided to ACT Health in ten working days following the on-site survey, 19 July 2018. ACT Health have five working days from receipt of the report to review and provide a response to ACHS, 26 July. The final survey report should be received within

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Lead Directorate: Health

TRIM Ref: GBC18/280

## QUESTION TIME BRIEF

30 calendar days of the AC90 on-site review, which includes the accreditation decision. The expected date of receipt of the report is 5 August 2018.

- ACT Health remain accredited until finalisation of the AC90 process.
- As per ACT Health's Agreement with ACHS, and the ACHS Appeals Policy, ACT Health may appeal the accreditation decision within 28 days from receipt of the written advice of the accreditation decision.
- In the event that ACT Health were to appeal the decision, the original accreditation status awarded to ACT Health following the survey in May 2015 would remain in force until the appeal is finalised.
- In the event ACT Health does not receive reaccreditation, the Australian Commission on Safety and Quality in Health Care (Commission) have advised that the organisation will need to be reassessed against the National Standards within twelve months. There is no official waiting period before the ACT Health can be reassessed as long as the reassessment occurs within the twelve months period.
- During the intervening period the Commission has also advised that ACT Health's licensing and regulatory policy directives, with oversight by the Regulator will need to be followed until the organisation receives National Standard accreditation.
- In the event that the hospital is no longer accredited, the Chief Health Officer (as delegate of the Minister for Health and Wellbeing) would licence CHHS as a non-accredited health care facility under the *Health Care Facilities Code of Practice 2001* (the Code). The hospital will not close.
- As a non-accredited health care facility licence holder, the CHHS would be obligated to comply with all provisions of the Code. Authorised officers under the *Public Health Act 1997* may inspect CHHS from time to time to assess compliance with the Code.

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Lead Directorate: Health

TRIM Ref: GBC18/280

GBC18/279

Portfolio/s Health &amp; Wellbeing

**ISSUE: ACCREDITATION****Talking points:**

- The Australian Council on Healthcare Standards completed a comprehensive assessment of ACT Health's compliance with the National Safety and Quality Health Service Standards from 19-23 March 2018.
- During the organisation wide re-accreditation assessment, Australian Council on Healthcare Standards assessed ACT Health's implementation of the National Standards. This involves awarding either a 'satisfactory met' or 'not met' to the actions within the National Safety and Quality Health Service Standards.
- ACT Health received the formal Australian Council on Healthcare Standards 'Not Met' Action report on 4 April 2018.
- The Australian Council on Healthcare Standards 'Not Met' Action report details 176 core criteria as met with 37 assessed as 'Not Met' under five of the 10 National Standards.
- Of the 37 'Not Met' actions, 33 are 'Not Met' core National Standards actions and 4 are 'Not Met' developmental National Standards actions. Of the 4 'Not Met' developmental National Standards actions, one is in Standard 1, Governance; two in Standard 2, Partnering with Consumers, and one in Standard 4, Medication Safety.
- The Australian Council on Healthcare Standards provided ACT Health a remediation period of 90 days to address the 33 'Not Met' Core Actions. ACT Health will be reassessed on those 33 'Not Met' Core Actions through a process called Advanced Completion, with two Australian Council on Healthcare Standards surveyors conducting an Advanced Completion survey on-site at Canberra Hospital and Health Services during 3-5 July 2018.

Cleared as complete and accurate: 7/5/18  
Cleared by: Deputy Director-General Ext: 77880  
Information Officer name: Jane Murkin  
Contact Officer Name: Josephine Smith Ext: 50095  
Lead Directorate: Health



## QUESTION TIME BRIEF

- ACT Health will need to undertake improvement activity to ensure the 4 'Not Met' developmental National Standards actions are met in the future. ACT Health will not be reassessed against these developmental actions during the Advance Completion process and the on-site survey in July 2018.
- All Core Actions must be assessed as 'Satisfactorily Met' at the Advanced Completion survey for ACT Health to be awarded accreditation.
- A National Standards Leadership Committee, chaired by the Interim Director-General with membership from the Deputy Director-General and Professional Lead cohort has been established to oversee development, progress and implementation of the Action Plan.
- It is important to emphasise that improving quality and safety is an ongoing process in the health system and that does not start or end with accreditation. There is significant work underway every day in our hospital that is focussed on quality and patient safety.
- ACT Health was last surveyed by Australian Council on Healthcare Standards in May 2015 and was successful in achieving accreditation against the National Standards until July 2018. ACT Health will remain accredited until completion of the current assessment process.

### Key Information

- The ACHS surveyors presented an "Accreditation Summation" session to ACT Health staff on 23 March 2018. This gave clinical and operational staff an overview of what might be expected in the final survey report.
- At summation, the surveyors provided a brief overview of their findings against each action, highlighting areas of excellence including the ACT Health Quality Strategy, the positive patient centred care delivered to regional patients through the Renal telehealth service, and the rapid person centred care provided to unwell oncology patients through the Rapid Assessment unit in radiation oncology.
- ACT Health has received the draft comprehensive Accreditation Report from the Australian Council on Health Care Standards (ACHS) on 19 April 2018. ACT Health reviewed the report to ensure factual accuracy, although cannot change the recommendations or outcomes. Feedback was provided to ACHS on 3 May 2018 to enable finalisation of the report.

Cleared as complete and accurate: 7/5/18  
Cleared by: Deputy Director-General Ext: 77880  
Information Officer name: Jane Murkin  
Contact Officer Name: Josephine Smith Ext: 50095  
Lead Directorate: Health

## QUESTION TIME BRIEF

- ACHS will submit the final report to ACT Health in the coming weeks. The outcomes will be used to continually drive quality and safety improvements in the health service.

### Not Met report

- ACT Health has commenced significant work to address the not met core action report. This includes:
  - The establishment of the National Standards Leadership Committee. The role of the committee is to provide leadership oversight and effective governance to address the 'not met core action report'. Including the development of an action plan, audit processes which have been put in place, and the process for collation of required documentary evidence for the on-site reassessment 3-5 July 2018.
  - ACT Health has established an accreditation coordination team who have commenced development of a robust programme plan to track and report weekly to the National Standards Leadership Committee and the Minister for Health and Wellbeing. This plan includes a detailed action plan and traffic light progress.
- The Minister for Health and Wellbeing has commenced weekly meetings with ACT Health and has requested and is receiving weekly briefings on ACT Health's progress in addressing the not met core actions.
- Two all staff forums have been convened by ACT Health's Interim Director-General, with the forum held on 4 May attended by the Minister for Health and Wellbeing. The staff forums were held to provide an update on ACT Health's key priorities including accreditation.
- The Interim Director-General has liaised with the Australian Commission on Safety and Quality in Health Care and Australian Council on Health Care Standards to discuss the outcomes of the accreditation survey and the monitoring processes ACT Health is taking to address the not met core action report.
- The Commission have provided ACT Health with their full support and confidence in the approach ACT Health is undertaking to address the Not Met Core Actions and in achieving re-accreditation, including a visit to ACT Health in the coming weeks to support ACT Health throughout this process.

Cleared as complete and accurate: 7/5/18  
Cleared by: Deputy Director-General Ext: 77880  
Information Officer name: Jane Murkin  
Contact Officer Name: Josephine Smith Ext: 50095  
Lead Directorate: Health

**Background Information – may not be suitable for public disclosure**

- ACT Health will be advised of the outcome of the AC review and surveyor recommendation to ACHS on the last day of the on-site survey, 5 July 2018.
- The ACHS survey team have five working days from the last day of the on-site review to submit their report to ACHS, which is internally reviewed to determine the accreditation decision.
- A draft AC report is then provided to ACT Health in ten working days following the on-site survey, 19 July 2018. ACT Health have five working days from receipt of the report to review and provide a response to ACHS, 26 July. The final survey report should be received within 30 calendar days of the AC90 on-site review, which includes the accreditation decision. The expected date of receipt of the report is 5 August 2018.
- ACT Health remain accredited until finalisation of the AC90 process.
- As per ACT Health's Agreement with ACHS, and the ACHS Appeals Policy, ACT Health may appeal the accreditation decision within 28 days from receipt of the written advice of the accreditation decision.
- In the event that ACT Health were to appeal the decision, the original accreditation status awarded to ACT Health following the survey in May 2015 would remain in force until the appeal is finalised.
- In the event ACT Health does not receive reaccreditation, the Australian Commission on Safety and Quality in Health Care (Commission) have advised that the organisation will need to be reassessed against the National Standards within twelve months. There is no official waiting period before the ACT Health can be reassessed as long as the reassessment occurs within the twelve months period.
- During the intervening period the Commission has also advised that ACT Health's licensing and regulatory policy directives, with oversight by the Regulator will need to be followed until the organisation receives National Standard accreditation.
- In the event that the hospital is no longer accredited, the Chief Health Officer (as delegate of the Minister for Health and Wellbeing) would licence CHHS as a non-accredited health care facility under the *Health Care Facilities Code of Practice 2001* (the Code). The hospital will not close.
- As a non-accredited health care facility licence holder, the CHHS would be obligated to comply with all provisions of the Code. Authorised officers under the *Public Health Act 1997* may inspect CHHS from time to time to assess compliance with the Code.

Cleared as complete and accurate: 7/5/18  
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