



listening.
learning

**ACT Health
Consumer Feedback Standards**

Acknowledgements

This document forms part of a collection of documents designed by the ACT Consumer Feedback Project (2002-2003). Many people shared their ideas and expertise in the development of the *ACT Health Consumer Feedback Standards*. Each of the following organisations was a collaborative partner and their contributions are gratefully acknowledged.

ACT Health

Health Care Consumers Association ACT Inc.

Community Health

Calvary Health Care ACT Limited

The Canberra Hospital

Mental Health ACT

ACT Community and Health Services Complaints Commission

Consumer Feedback Project Team

For further information please visit our website at:
<http://www.health.act.gov.au/consumerfeedback>

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Foreword

Foreword

ACT Health is committed to working with consumers to improve the quality and safety of our health services.

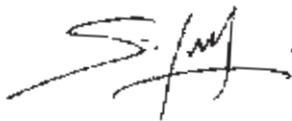
A vital part of that partnership is in listening to and learning from what consumers have to tell us about their experiences of health care in this city.

To assist that process ACT Health undertook the Consumer Feedback Project. A key task of the project was the development of the *ACT Health Consumer Feedback Standards* aptly named Listening and Learning.

The standards provide a framework for the effective management of consumer feedback and the use of that information to improve the way services are delivered.

They highlight the importance of consumer feedback and encourage health services to value all forms of feedback - whether that be compliments, suggestions or complaints - as a legitimate part of health care.

This publication sets the standard for future quality initiatives in the ACT. I would like to thank all those involved in their development.



Mr Simon Corbell MLA
Minister for Education,
Youth and Family Services

Health Care Consumers Association of ACT Inc. has played a role in the work of ACT Health for many years.

More recently we were involved in the Consumer Feedback Project and the development of the *ACT Health Consumer Feedback Standards*.

Consumer feedback can be difficult for everyone involved. The standards and other work of the project will make feedback easier for both consumers and staff.

They provide a consistency that wasn't previously available. When a consumer accesses any service in ACT Health they will find the same systems in place.

It will take many years of cultural change before feedback is seen as integral to health care. There is however, a willingness and commitment at all levels to improve relationships between consumers and providers. The standards will assist in that process.

I am pleased to see the publication of this document and look forward to improved consumer feedback in our health services.



Russell McGowan
President
Health Care Consumers
Association ACT Inc.

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Definitions

Consumer Feedback

The *ACT Health Consumer Feedback Standards* set the framework for managing consumer initiated feedback. They define consumer feedback as:

‘information provided by consumers - in their own words and in their own time - about their experiences of any aspect of health care, treatment or services.

Feedback includes both positive and negative information in the form of compliments, complaints or suggestions for improvements to the quality and safety of health care.’

Consumer

The word ‘consumer’ in the *ACT Health Consumer Feedback Standards* and associated documents refers to:

- People who directly access a health service
- Their nominated representative or representative with legal authority
- Their carer, family member or advocate
- Groups of consumers or consumer organisations; or
- Members of the community.

Health Services

These standards apply to all services directly administered by ACT Health including Calvary Health Care ACT, The Canberra Hospital, all program areas within Community Health and Mental Health ACT.

Quality

The people of the ACT have a right to high quality health care services and the Government will work with consumers and health professionals to improve the quality of services and to protect patient safety¹.

The five dimensions which support the consumer as the strategic focus are:

- | | |
|------------------|---|
| Safety: | Potential risks to consumers are avoided and inadvertent harm minimised in the care delivery process. |
| Effectiveness: | Interventions that are best practice and produce the desired outcome for the consumers are routinely used. |
| Appropriateness: | Care is tailored to meet individual needs, is timely and performed according to agreed evidence based considerations. |
| Accessibility: | Services are based on the assessment of consumer needs and is re-configured as required to meet changing needs. |
| Efficiency: | Resources are utilised in a way that ensures maximum benefit for consumers. |



Introduction

Why consumer feedback?

The consumer voice is now recognised as integral to improving the quality, safety and accountability of health services. A consumer perspective brings an added dimension to what constitutes quality and safe care. It is only by working in partnership with consumers and listening to and learning from their feedback, that it is possible for health services to truly appreciate what constitutes quality, safe health care.

Why standards?

The *ACT Health Consumer Feedback Standards* have been developed to improve feedback mechanisms for consumers and staff and to improve the quality and safety of health care in the ACT. They aim to do this by ensuring that health services capture and manage consumer feedback and then initiate quality improvements to the way services are delivered.

The *ACT Health Consumer Feedback Standards* identify the specific features and define the essential elements of a quality consumer feedback system for health services. The standards are accompanied by a *Service Improvement Tool* which enables health services to continuously assess and improve their practices for managing consumer feedback.

How were the standards developed?

The *ACT Health Consumer Feedback Standards* reflect best practice in the management of consumer feedback. They were developed by reviewing a broad range of standards, guidelines and other Australian and international resources and through extensive consultation and collaboration with ACT health consumers and staff.

The resources reviewed included The Australian Council on Healthcare Standards (ACHS) Evaluation and Quality Improvement Program (EQUIP); the National Standards for Mental Health Services; the Australian Council for Safety and Quality in Healthcare Draft Open Disclosure Standard; and many guidelines for the management of complaints.

Who will use the standards?

The *ACT Health Consumer Feedback Standards* should be known and understood by all ACT Health staff who: have contact with consumers; who handle, manage or coordinate consumer feedback; who have a responsibility for quality improvement initiatives; or who perform an executive or management function.



What principles underpin the standards?

Responsiveness

All consumers are entitled to provide feedback without compromise to their privacy or health care. ACT health services have an obligation to respond to that feedback.

An effective response is facilitated when all parties:

- Communicate with respect
- Provide full and factual information; and
- Clearly establish expectations and objectives.

Assistance

Consumers are assisted to provide feedback when required and are supported throughout the feedback management process. Assistance is also available to staff who are the subject of a complaint or are involved in the assessment or investigation of a complaint.

Organisational Commitment

Adequate resources are allocated to ensure the efficient and effective management of feedback. Consumer feedback informs strategic, operational and quality planning and is supported by senior staff.

Fairness

The consumer feedback management process is unbiased, objective and impartial to all parties. All feedback is treated as legitimate. The principles of procedural fairness and natural justice are applied.

Privacy and Confidentiality

The privacy of those who provide feedback and any staff member named in that feedback is respected. Information is disclosed according to principles outlined in legislation.

Transparency

The consumer feedback management process is open, clear and plainly evident to consumers and staff. This openness demonstrates accountability to the community.

Timeliness

Consumer feedback is acknowledged and managed efficiently within specified time frames.



Organisational Improvement

Consumer feedback is used to enhance organisational performance. Service improvements result from:

- The effective handling of feedback at the individual level; and
- The collation, analysis and use of aggregated feedback data for quality improvement initiatives.

Tell me about the standards

Six standards underpin the management of the ACT Health consumer feedback system. Each standard has a particular focus.

- Consumer Focus
- Organisational Commitment
- The Consumer Feedback Process
- Staff Focus
- Information Technology and Information Management
- Quality Improvement

Each of the six *standards* is underpinned by several *indicators*. The indicators are grouped with other related indicators under a common title such as ‘consumer participation’ or ‘information security’. The indicators provide a means for measuring the health service practices. Suggestions for the types of evidence for each indicator are outlined under the heading ‘*what to look for*’.

There is a distinction made between essential (indicated by ) and desirable indicators. The essential indicators define the minimum set of practices that must be demonstrated. The other indicators represent optimal practice.

Will these standards help me meet ACHS EQuIP Standards?

Yes! The *ACT Health Consumer Feedback Standards* link well with the *The Australian Council on Healthcare Standards (ACHS) Evaluation and Quality Improvement Program (EQuIP)*. ACHS indicates that it is appropriate to consider “specialty standards”² for further description of activities to achieve their criterion.

They indicate that “if a service was to implement the *ACT Health Consumer Feedback Standards* in full they would have a high level of achievement against the ACHS EQuIP Standards which relate to consumer feedback rights and participation if fully implemented those services will demonstrate best practice in consumer feedback”.

Standard 1

The health service has a consumer-centred feedback system.

(MINIMUM PRACTICE )

Consumer Participation (in the ACT Health Consumer Feedback System)

 1.1 *Consumers are involved in the development, evaluation and update of the consumer feedback system.*

What to look for:

Consumers are consulted to ensure that information, resources, training, policies and procedures meet their needs; consumers are consulted in the biennial review of the consumer feedback system. (Refer to 6.8)

1.2 *Consumers participate in consumer feedback training for staff.*

What to look for:

Consumers are consulted in the development and evaluation of training; consumers take part in training for staff.

1.3 *Consumers participate in quality improvement projects originating from consumer feedback where appropriate.*

What to look for:

Consumers assist to develop and monitor quality improvement initiatives in response to their feedback; consumers are members of quality improvement committees.

Consumer Rights

 1.4 *Consumers are informed of the avenues open for them to complain including their statutory rights to complain.*

What to look for:

Up-to-date information and publicity material from appropriate authorities eg. ACT Community and Health Services Complaints Commissioner (CHSCC), Mental Health Visitor etc; staff inform consumers of the avenues and rights to complain.

 1.5 *Consumers are informed that they can have an advocate present at any stage of the feedback process.*

What to look for:

Information about the role of advocates and advocacy services.





1.6 *Consumers are provided with assistance and support to submit feedback.*

What to look for:

Information about counselling, social work, translation services and other support services; staff offer and provide support as appropriate.



1.7 *Consumers who provide feedback are treated with respect, dignity, without discrimination or compromise to the health care they receive.*

What to look for:

Consumers who provide feedback report that they were treated with respect, dignity, without discrimination or compromise to their health care.



1.8 *Consumer feedback is treated confidentially.*

What to look for:

Information for consumers and staff about the confidentiality of the feedback system; consumers have access to places for private communication; consumer consent is sought prior to disclosure of feedback.



1.9 *No reference to a complaint is made on consumer medical records.*

What to look for:

No reference to complaints found in random audits of the medical records of consumers who have made a complaint.

1.10 *Consumers can provide feedback anonymously.*

What to look for:

Information about providing anonymous feedback and the limitation this has for the investigation of specific complaints.

Consumer Access

1.11 *Signs and information at health service points of entry, waiting areas and lifts inform consumers about the consumer feedback system.*

What to look for:

Written material in a variety of media; posters prominently displayed in strategic areas.



- Information for consumers includes but is not limited to:
- The type of feedback they can provide, who to and how
 - Support and assistance available such as advocacy and interpreter services
 - How the feedback system works
 - Confidentiality, privacy issues
 - Timeframes and outcomes; and
 - Anonymous feedback.

 1.12 *The consumer feedback system is accessible to people of all abilities, social, cultural and linguistic backgrounds.*

What to look for:

Information about the consumer feedback system is provided in a variety of formats and font sizes; information considers language, social and cultural beliefs, practices and values.

 1.13 *Staff actively encourage consumers to provide feedback.*

What to look for:

Staff ask consumers for feedback about the services and care they provide; staff provide feedback forms and offer to assist consumers to complete them. Questions about feedback are included in discharge processes such as Clinical Pathways and Care Plans.

1.14 *Consumers can provide feedback by phone, in person, in writing or electronically.*

What to look for:

Mechanisms are in place to receive consumer feedback by telephone, face to face, in writing or electronically.

 1.15 *Consumers are provided with direct contact details for staff managing their feedback.*

What to look for:

Staff provide appropriate contact information such as telephone number, email address, page number and the days and times it is best to contact them.



Standard 2

The health service is committed to a high quality consumer feedback system with feedback integral to its activities.

(MINIMUM PRACTICE )

Resource Allocation

 2.1 *The health service has a budget allocation for the consumer feedback system.*

What to look for:

Allocation to salary, a computerised information management system, training and resources defined in the annual budget.

 2.2 *The health service designates a staff member to manage and coordinate the consumer feedback system.*

What to look for:

A consumer feedback coordinator is designated.

Governance

2.3 *Executive staff, senior managers and all other staff have consumer feedback responsibilities included in their job descriptions and assessed in performance appraisal processes.*

What to look for:

Consumer feedback responsibilities are detailed in duty statements, selection documentation and performance appraisal documents.

 2.4 *Clinical and corporate governance bodies ensure that quality improvement projects originating from consumer feedback are implemented. (Refer to standard 6)*

What to look for:

Quality improvement projects arising from consumer feedback are reported to and monitored by clinical corporate governance committees.

Learning Organisation

 2.5 *The health service promotes consumer feedback as a valued learning activity for the organisation.*

What to look for:

Executive staff and senior managers encourage and support staff to attend training and provide statements supporting consumer feedback in newsletters and other communication to staff; consumer feedback is an agenda item for staff meetings.



2.6 *The health service treats all feedback as legitimate.*

What to look for:

Consumers who provide feedback report that their feedback was welcomed by staff and responded to appropriately.



2.7 *The health service promotes an environment of responsibility and accountability and discourages the attribution of blame.*

What to look for:

Staff who have had a complaint made against them report that the principles of procedural fairness were applied to the management of the complaint; the health service applies a systems approach to the management of consumer feedback rather than attributing blame to individuals; staff are held accountable for their actions including breaches of legislation and professional codes of conduct.



2.8 *The health service creates a culture that encourages open and honest communication between consumers and staff about any aspect of the health care and services they receive.*

What to look for:

Executive staff and senior managers support open and honest communication demonstrated by their actions and verbal and written statements to staff; consumers report open and honest communication with staff.



2.9 *The health service uses consumer feedback findings for strategic, operational and quality planning.*

What to look for:

Consumer feedback findings are integrated into strategic, operational and quality planning.



2.10 *The health service highlights the importance of consumer feedback in corporate and strategic documents.*

What to look for:

Reference to consumer feedback in strategic and business plans, quality frameworks, value statements, statements in annual reports and budget statements.



Standard 3

The health service has easily understood, readily accessible and effective processes for managing consumer feedback.

(MINIMUM PRACTICE )

Procedures

 3.1 *The health service has policy and procedures to:*

- *Receive, acknowledge and register consumer feedback*
- *Assess, investigate and resolve consumer feedback*
- *Identify and refer consumer feedback to other agencies with legal jurisdiction*
- *Review investigation findings, recommendations and actions*
- *Record and use consumer feedback data for quality improvement; and to*
- *Evaluate and monitor quality improvement initiatives originating from consumer feedback.*

 3.2 *The health service develops a strategy to communicate and implement consumer feedback policy and procedures.*

What to look for:

A communication strategy.

Delineation and Delegation of Authority

 3.3 *The health service has clearly defined roles, responsibilities and lines of authority for frontline staff, the consumer feedback coordinator, investigators, senior managers, and executive staff.*

What to look for:

Defined roles, responsibilities and lines of authority are articulated in consumer feedback policy; staff are aware of their role and responsibility to receive and act on feedback and to refer it where appropriate.

 3.4 *Staff resolve issues originating from consumer feedback at first contact with consumers, where appropriate.*

What to look for:

Audit of the information management system for point of resolution of feedback; consumers report that their feedback was resolved at the point of first contact with staff.



3.5 *The consumer feedback coordinator reports to, is accountable to, and has the cooperation and support of senior managers and executive staff.*

What to look for:

The consumer feedback coordinator reports to executive and quality meetings; the coordinator has access to and assistance from senior managers and executive staff.

Assessment

3.6 *Staff handling consumer feedback establish the expectations and objectives of the person providing the feedback.*

What to look for:

Staff ask consumers what they expect as a result of providing feedback; staff record this information and consider it in the management of feedback.

3.7 *The health service assesses feedback to develop a management plan.*

What to look for:

A management plan which includes:

- Staff responsible
- Health service staff or other agencies with legal jurisdiction that need to be informed
- 'Issue' category
- Level of corporate and clinical risk; and
- Resource allocation required.

Investigations



3.8 *The health service ensures trained experts have the necessary powers, knowledge and status to investigate complaints, make authoritative recommendations and use external investigators where appropriate.*

What to look for:

Investigators are appropriately trained, have immediate access to medical records; have access to clinical assistance in interpreting the information in records; have authority to disclose information, where appropriate, to consumers; external investigators are used where a conflict of interest may be perceived.





3.9 *Investigators comply with the principles of procedural fairness, are systematic, thorough and ensure that they:*

- *Collect, review and analyse all relevant facts and information*
- *Test any assertions made*
- *Ensure investigation findings flow from a chain of evidence*
- *Make recommendations based on investigation findings; and*
- *Act impartially and do not advocate for any parties associated with the investigation.*

What to look for:

A random audit by an independent investigator to ensure all processes are conducted appropriately.

3.10 *The health service conducts a full root cause analysis or other investigation of similar rigour for complaints identified as extreme risk.*

What to look for:

Staff use the root cause analysis risk matrix to determine extremity.



3.11 *The health service integrates investigation findings and recommendations for action into quality improvement processes.*

What to look for:

(Refer to 6.2)

Performance Measures



3.12 *The health service provides consumers with verbal or written acknowledgment of their feedback within 5 working days where appropriate.*

What to look for:

Audit of data for 'acknowledgement' performance.



3.13 *The health service provides consumers and staff involved in a complaint with updates every 21 calendar days until the complaint is resolved.*

What to look for:

Audit of data for progress 'update' performance.





3.14 *The health service resolves at least 80% of complaints within 35 calendar days.*

What to look for:

Audit of data for 'resolution' performance.



3.15 *The health service informs all parties involved in a complaint of the outcome of the complaint and provides them with copies of appropriate documentation.*

What to look for:

Audit of data for 'reporting' performance; parties involved in a complaint report that they received appropriate documentation.



3.16 *The health service refers complaints to other agencies with legal jurisdiction within 3 days of the need being identified.*

What to look for:

Audit of data for 'referral' performance.

3.17 *The health service determines the level of consumer and staff satisfaction with consumer feedback procedures. (Refer to 6.9)*

What to look for:

Consumers and staff report their level of satisfaction with consumer feedback procedures.

All consumer satisfaction tools include questions about the level of satisfaction with consumer feedback procedures.



Standard 4

The health service has a consumer feedback system that supports staff to manage consumer feedback effectively.

(MINIMUM PRACTICE )

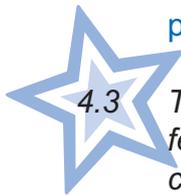
Education and training

 4.1 *The health service provides information about consumer feedback policies and procedures at orientation.*

 4.2 *The health service provides in-service training to staff in contact with consumers within 6 months of employment and at least every 3 years.*

What to look for:

Training program which includes but is not limited to: underlying principles, policy and procedures, designated roles and responsibilities of staff, the computerised information management system; staff and consumer rights; privacy and confidentiality requirements; cross cultural issues; the value of consumer feedback to the health service and customer service principles; audit of training attendance.

 4.3 *The health service provides specialised training to the consumer feedback coordinator and staff with delegated authority to manage consumer feedback and complaints.*

What to look for:

Training program which includes but is not limited to: the topics in 4.2; the legal framework; assessment; investigation; complaints resolution; quality improvement; use of the computerised information management system; interrogation of data and preparation of trend reports; procedural fairness; managing and supporting staff who have been involved in a complaint.

4.4 *The health service provides root cause analysis training to relevant staff.*

What to look for:

Training program which includes but is not limited to: topics in 4.2 and 4.3; systems review including root cause analysis; developing recommendations.

4.5 *The health service provides specialised training to executive staff and senior managers about their role in the consumer feedback system.*

What to look for:

Training program which includes but is not limited to: underlying principles, policy and procedures; the role and responsibilities of executive staff and senior managers in the implementation of the consumer feedback standards, particularly governance; learning organisation; resource allocation; delineation and delegation.

Staff Rights

4.6 *Staff who are involved in a complaint receive clear information about complaints management policy and procedures.*

What to look for:

Staff are notified about complaints management policy and procedures.

4.7 *Staff who are involved in a complaint are ensured procedural fairness.*

What to look for:

Staff are notified of the complaint; given full details of the complaint and the identity of the complainant; given an opportunity to respond; informed of proposed actions and the reasons; given the opportunity to make submissions about the proposed action and the reasons.

4.8 *Staff who are involved in a complaint are ensured appropriate confidentiality and privacy.*

What to look for:

Staff sign a code of conduct in relation to privacy and confidentiality; only staff involved in resolution or investigation processes receive information about a complaint. Staff report that their confidentiality and privacy were protected throughout the consumer feedback processes.

4.9 *Staff who are involved in a complaint have access to support services and are informed of their right to have a support person or advocate present during any discussions.*

What to look for:

Information about health service counsellors; employee assistance programs; professional advisors; union representatives etc; services are offered and provided to staff as appropriate.

Staff participation

4.10 *Staff are involved in the development, evaluation and up-date of the consumer feedback system.*

What to look for:

Staff are consulted to ensure that information; resources; training; policies and procedures meet their needs; staff are consulted in the biennial review of the consumer feedback system. (Refer to 6.9)

4.11 *Staff participate in the development, implementation and monitoring of quality improvement projects originating from consumer feedback about their service area. (Refer to standard 6)*

What to look for:

Staff assist to develop, implement and monitor quality improvement projects.



Standard 5

The health service uses an information management system for the management of consumer feedback.

(MINIMUM PRACTICE )

Information Management



5.1 *The health service uses a computerised information management system to record and manage all consumer feedback data.*

Information Security



5.2 *Staff comply with relevant legislation and regulations to ensure the privacy and confidentiality of consumer feedback.*

What to look for:

Staff compliance with *Health Records (Privacy and Access) Act 1997*.



5.3 *The health service has a central location with restricted access for the storage of confidential documentation relating to consumer feedback.*

What to look for:

Staff compliance with *Health Records (Privacy and Access) Act 1997*.

Reporting



5.4 *The health service provides quarterly trend reports to executive staff, senior managers, other staff and quality forums, ACT Health and the ACT Quality and Safety Forum, which include at a minimum:*

- *The number and type of feedback received*
- *Issues and trends; and*
- *Quality improvement projects.*

It provides these reports on request to relevant government and statutory authorities, service providers, consumers, members of the public and other agencies.





5.5 *The health service provides an annual report of consumer feedback information which includes:*

- *The number and type of feedback received*
- *Compliance with consumer feedback performance measures (Refer to 3.12-3.17)*
- *Issues and trends*
- *Quality improvement projects originating from consumer feedback (Refer to 6.7); and*
- *Level of consumer satisfaction with the consumer feedback system. (Refer to 6.9)*

What to look for:

Consumer feedback information in annual report or on health service area website.

5.6 *The health service provides de-identified consumer feedback data to ACT Health for aggregation, analysis and the production of annual ACT-wide trend reports.*



Standard 6

The health service integrates consumer feedback into quality improvement processes.

(MINIMUM PRACTICE )

Improving quality and safety



6.1 *The health service considers, prioritises and implements recommendations made by external bodies with a responsibility for investigating consumer feedback such as the ACT Community and Health Services Complaints Commission.*

What to look for:

Clinical and corporate governance bodies consider, prioritise and monitor the implementation of recommendations made by external bodies.

6.2 *The health service reviews investigation findings and recommendations for action to identify quality improvement projects.*

What to look for:

Quality improvement bodies and service areas analyse investigation findings and recommendations to determine quality improvement projects.



6.3 *The health service reviews trend reports on consumer feedback to identify quality improvement projects.*

What to look for:

Quality improvement bodies and service areas analyse consumer feedback data and determine quality improvement projects.



6.4 *The health service develops a detailed action plan for implementing quality improvement projects.*

What to look for:

A quality improvement action plan which includes:

- The issue
- Plan of approach
- Methodology/tools e.g. flow chart, cause and effect, root cause analysis
- Anticipated outcomes
- Resource requirements
- Reporting lines
- Staff responsible
- Timeframes; and
- Communicating timeframes.





6.5 *The health service communicates quality improvement projects to relevant staff for implementation and monitoring.*

What to look for:

Quality improvement bodies and service areas communicate action plans for quality improvement projects to relevant staff.



6.6 *The health service initiates the quality improvement action plan within 3 to 6 months. (Refer to 6.4)*

What to look for:

Quality improvement bodies and service areas ensure action plans are initiated within 6 months.



6.7 *The health service ensures those responsible for implementing quality improvement projects provide 6 monthly reports to the executive and senior management and the health services' quality improvement bodies.*

What to look for:

Quality improvement bodies and service areas provide reports against action plans to clinical and corporate governance committees and quality improvement bodies.



6.8 *The health service monitors and evaluates quality improvement projects to assess effectiveness.*

Improving the consumer feedback system



6.9 *The health service consults with staff, consumers and external agencies to conduct a biennial review of the consumer feedback system to identify strategies for improvement.*

What to look for:

A review which includes but is not limited to:

- Level of staff and consumer satisfaction
- Effectiveness of policy and procedures (Refer to 3.1)
- Quality and consistency of consumer feedback data
- Effectiveness of processes for collecting, analysing and presenting the data; and
- Effectiveness of the consumer feedback system in improving quality and safety; supporting culture change and a learning organisation.



Sharing lessons



6.10 *The consumer feedback coordinator collaborates with other health services and agencies to share knowledge and experiences to improve the consumer feedback system.*

What to look for:

Report on collaborative activities which includes but is not limited to:

- Joint meetings
- Seminars; and
- Forums.

6.11 *The executive staff and senior managers share lessons from the consumer feedback system with other health services and agencies across the ACT to contribute to quality and safety in health care.*

1 The ACT Health Action Plan 2002 p.76

2 ACHS EQuIP June 2002 p4-1

