

# LARU Public Health Service Facility Accreditation Registration Form

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The *National Health Reform Act 2011* (the Act) specifies the role of the Australian Commission on Safety and Quality in Health Care (the Commission) for the formulation of the National Safety and Quality Health Service Standards (NSQHS Standards). The Act also has the provision for the establishment of a national accreditation scheme. In 2011 Australian Health Ministers approved the Australian Health Service Safety and Quality Accreditation Scheme (AHSSQA Scheme) and agreed to mandate that all Australian hospitals and day procedure centres should be accredited to the NSQHS Standards.

The Licensing and Accreditation Regulatory Unit (LARU), is the state regulator responsible for regulating accreditation of all public and private hospitals and private day hospitals (Class A) as per the AHSSQA Scheme in Western Australia.

[MP 0134/20 National Safety and Quality Health Service Standards Accreditation Policy](#) outlines the business rules that govern the Department of Health WA's regulatory approach for Health Service Providers to achieve mandatory accreditation to the [NSQHS Standards](#) as per [the AHSSQA Scheme](#).

As per requirement 3.2.3 of MP 0134/20 Health Service Providers must ensure the public health service facility registers accreditation details with LARU via an annual accreditation registration form, including:

- scheduled assessments and accreditation expiry dates
- accreditation pathways
- accrediting agency
- key accreditation personnel and contacts.

The public health service facility must update their LARU accreditation registration form by 31 January each year via email to [LARUAccreditation@health.wa.gov.au](mailto:LARUAccreditation@health.wa.gov.au) or as necessary to notify LARU of any changes.

The information provided within this registration form is in line with the AHSSQA Scheme and MP 0134/20. To assist with completing this registration form, it is important that you refer to the

- [MP 0134/20 National Safety and Quality Health Service Standards Accreditation Policy](#)
- [The AHSSQA Scheme](#)

This form applies to Health Service Providers in relation to any public health services delivered that are a part of a public hospital, public mental and dental health services.

The information provided in the registration form includes:

1. Health Service personnel contact details/persons
2. The number of services covered in the accreditation contract (multiple services or single service contracts)
3. The accrediting agency nominated to undertake the organisations accreditation against the NSQHS Standards
4. The organisations preference for either a fixed three year cycle or short notice surveys
5. Survey schedule dates
6. Information required by LARU when a Health Service Provider seeks approval to move to the SNA pathway (see appendix 1).

Once the document is completed please scan the completed document and forward to the LARU email. For further information and/or if you require any clarification about the Accreditation Registration Form please contact LARU on 6373 2347 or [LARUAccreditation@health.wa.gov.au](mailto:LARUAccreditation@health.wa.gov.au)

To be completed by the representative completing the registration form:

**I confirm that the information contained in the Accreditation Registration Form is a true and correct record**

Name

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Position

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Date

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## Section A: Demographic Information

### WA Health Region Details

Name of Region/Facility

Address

Suburb

Post Code

Telephone/Fax

(Phone)

(Fax)

PO Box Number

PO Box Suburb

PO Box Post Code

### Chief Executive Officer

Salutation

Mr

Mrs

Ms

Miss

Dr

First Name

Last Name

Position Title

Street Address

Post Code

Telephone/Fax

(Phone)

(Fax)

Mobile

Email Address

## Regional Area Executive Quality/Governance Manager

Salutation

Mr

Mrs

Ms

Miss

Dr

First Name

Last Name

Position Title

Street Address

Suburb

Post Code

Telephone/Fax

(Phone)

(Fax)

Mobile

Email Address

**Section B: Accreditation Information**

This page provides confirmation of the Health Service Provider and the Public Health Service Facility Accreditation Contact, Accreditation Certificate and those services and unique health identifiers that are included in the accreditation contract. Please list all Health Facilities/Services that will be assessed under the contractual relationship with the Accrediting Agency.

<b>Accreditation Contact</b>	Name		Telephone Number
	Position		Mobile Phone Number
	Email Address		
<b>Accreditation Certificate Title</b>			
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	
Public Health Service Facility Name		Commission Health Service Unique Identifier	

(Please note that the Commission is in the process of allocating unique health service and facility identifiers).

## Accreditation Information

Accrediting Agency	Name
Accrediting Agency Contract Expiry Date	
Accreditation Programs (Tick applicable)  <b>The standards marked (*) are included in MP 0134/20 and Accrediting Agencies must ensure these standards are assessed independently of the NSQHS Standards.</b>	<input type="checkbox"/> National Safety and Quality Health Service Standards  <input type="checkbox"/> Trauma Recovery Program Standards  <input type="checkbox"/> *ISO Accreditation <input type="checkbox"/> *National Standards for Mental Health Services  <input type="checkbox"/> *Other, please list:
Accreditation Cycle (Tick current pathway)	<input type="checkbox"/> Planned Assessment (three year cycle) <input type="checkbox"/> Short Notice Assessments ( <i>Please refer to appendix 1 for SNA requirements</i> )

Accreditation Cycle Phase	(Insert Date)	(Insert Date)	(Insert Date)	(Insert Date)
Last Survey to NSQHS Standards date				
Reassessment date (if required) post last survey				
Planned assessment (every 3 years) date of next survey				
Short Notice Assessment date of commencement (if applicable - refer appendix 1 for approval and requirements of SNA)				
Other Assessment date (if applicable + state what)				

## Appendix 1: Short Notice Assessments (SNA) Approval Process

### Background

Public health service facilities must submit a request in writing from the Chief Executive to LARU when transferring to the SNA pathway, on or before six months of the accreditation expiry date. It is important to note that on approval, the SNA pathway commences from the date of approval and at any time from that date a SNA may occur. LARU will consider all applications and liaise with the health service on receipt of the request. Approval to proceed will be assessed on a case by case basis.

The decision to proceed with a SNA is voluntary. A public health service facility will receive no more than two working days' notice of a pending assessment of either three or four NSQHS Standards chosen to be assessed. LARU in collaboration with the Commission determines and notifies the Accrediting Agency of the standards to be assessed.

A public health service facility is to be assessed against all NSQHS Standards within a three year period and prior to the accreditation expiry date, with no more than two assessments in any given year.

LARU will take into consideration when determining the NSQHS Standards to be assessed for a health service SNA factors such as:

- accreditation outcome results of the last survey, reassessment and recommendations
- Patient Safety and Clinical Quality feedback from information sources such as the Safety and Quality Indicator Data sets
- any significant whole of health safety and quality reports and for the private sector, relevant licensing review outcomes
- new public health service facilities undergoing interim assessment will not be eligible for SNA.

### Approval Process

To progress to the SNA pathway in line with the AHSSQA Scheme requirements, public health service facilities must submit a request in writing from the Chief Executive to LARU.

A SNA pathway will result in a change of contract with the accrediting agency. LARU recommends the public health service facility on choosing SNA pathways consults with the contracted Accrediting Agency. The Accrediting Agency will discuss the SNA requirements in relation to the assessments and may be able to further facilitate access to other services who have undergone SNA's and share experiences and/or contacts.

LARU will consider all applications in writing on a case by case basis. The request must nominate the key contact for the SNA approval and LARU will contact and liaise with the nominated contact on receipt of the request and notify the HSP in writing the outcome of the request within 20 working days of the request.

LARU endorses the Commission position that public health service facilities contemplating SNA, seek advice from the accrediting agency as to preparedness, ensure safety and quality systems are well embedded and routine processes are in place to monitor safety and quality performance against the standards and consider the potential risks and mitigation strategies as required. Considerations include the maturity of corporate, clinical, IT systems and staff engagement are in place to support the SNA pathway.

The Commission website provides specific advisory notifications and fact sheets to support the SNA process that are updated from time to time to reflect current practices in line with any approved changes and requirements of the AHSSQA Scheme.

### Relevant Accreditation Links:

- [AHSSQA Scheme Fact Sheets](#)
- [Short Notice Assessment Scheme Fact Sheet](#)

For further information and/or if you require any clarification about the Accreditation Registration Form please contact the Licensing and Accreditation Regulatory Unit on 6373 2347 or [LARUAccreditation@health.wa.gov.au](mailto:LARUAccreditation@health.wa.gov.au)