

1.Management and Leadership

These forms are designed to be used by both hospital personnel and external surveyors. The following information must be provided after each survey, before submitting the completed survey forms.

1.NAME OF HOSPITAL/CLINIC/FACILITY:

2. BASELINE/INTERNAL SURVEY INFORMATION:

Title and name of person who completed this document: _____

Post and position held: ____

Date of survey: _

3. EXTERNAL SURVEY INFORMATION:

Name of external surveyor: _

Date of external survey: __

GUIDE TO COMPLETION OF FORM

N.B. Hospital staff are please to use BLACK ink at all times. The external surveyors are requested to use RED ink at all times.

Please circle the rated compliance with the criterion, e.g. NA (Not applicable), NC (Non-compliant), PC (Partially compliant), C (Compliant).

The default category affected is designated on the form for

each criterion as follows:

- 1. patient and staff safety
- 2. legality
- 3. patient care
- 4. efficiency
- 5. structure
- 6. basic management
- 7. basic process
- 8. evaluation

The seriousness of the default is designated on the form for each criterion as follows:

- 1. mild
- 2. moderate
- 3. serious
- 4. very serious

Documents Checked

Surveyor:

Surveyor:

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1.Management and Leadership

1.1 Governance of the Organisation

1.1.1 Standard

Governance responsibilities and accountabilities are described in legislation, policies and procedures or similar documents that show how these duties are to be carried out.

Standard Intent: According to the Oxford Dictionary to govern is "to conduct the policy, actions and affairs of (a state, organisation or people) with authority." The same source defines governance as "the action or manner of governing a state, organisation, etc." It relates to decisions that define expectations, grant power or verify performance. It consists of either a separate process or part of management or leadership processes.

A governing body is the group of people given the power and authority to govern an organisation. A governing body can take the form of a board, a council, a steering committee or an assembly of elders or traditional owners. The role of a governing body is to plan strategic direction, set the organisation's goals, lead the organisation, make the policies and evaluate and support the management and personnel.

There is a governing body responsible for directing the operation of the health facility which is accountable for providing quality healthcare services to its community or to the population that seeks care. The responsibilities and accountability of this entity are described in a document that identifies how they are to be carried out, and are known to those responsible for management within the health facility. The responsibilities of governing bodies lie primarily in approving plans and documents submitted by the managers of the health facility. Those elements of management requiring approval by governance are documented. The process and practices that will apply will vary significantly given the environment in which they are applied. Governance in the public sector, which includes ministries, boards and similar entities, takes into account, among others, legal and constitutional accountability and responsibilities.

It is important that the organisation has clear leadership, operates efficiently and provides quality healthcare services. The lines of communication to achieve this are presented in an organisational chart or other document. The identification of individuals in a single organisational chart does not by itself ensure good communication and cooperation between those who govern and those who manage the organisation. This is particularly true when the governance structure is separate from the organisation, such as a distant owner or national or regional health authority. The process for communication and cooperation with the governance structure must therefore be made known to the organisation's managers and be used by them.

The responsibilities of governing bodies lie primarily in approving plans and documents submitted by the managers of the organisation. Those elements of management requiring approval by the governance structure are documented. The hospital board's relationship with the governance structure and the hospital management are described in written documents.

	Criterion	Comments
		Recommendations
Criterion 1.1.1.1	The organisation's	
Critical:	governance structure is described in written	
Catg: Basic Management + Efficiency	documents and is known to the staff of the organisation.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		

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Criterion 1.1.1.2 Critical:	There is an organisational chart or document that describes the lines of authority and accountability between the governance structure and the organisation as well as within the organisation.	
Criterion 1.1.1.3 Critical:	Those responsible for governance approve and make public the organisation's mission statement.	
Criterion 1.1.1.4 Critical:	Those responsible for governance approve the managerial policies and plans to operate the organisation.	
Criterion 1.1.1.5 Critical:	Those responsible for governance approve the budget and allocate resources required to meet the organisation's mission.	
Criterion 1.1.1.6 Critical:	Those responsible for governance appoint the organisation's senior manager(s) or director(s).	

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Criterion 1.1.1.7	Those responsible for governance collaborate with	
Critical:	the organisation's managers.	
Catg: Basic Management + Efficiency	nie organisation s managers.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.1.1.8	Those responsible for	
Critical:	governance receive and act upon reports of the quality	
Catg: Evaluation + Efficiency	programme at least quarterly.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.1.1.9	Those responsible for	
Critical:	governance receive and act upon reports on risk	
Catg: Basic Process + Efficiency	management at least	
Compliance	quarterly.	
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.1.1.10	Those responsible for	
Critical:	governance evaluate the performance of the	
Catg: Evaluation + Efficiency	organisation's senior	
Compliance	manager at least annually.	
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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1.2 Management of the Organisation

1.2.1 Standard

A senior manager is responsible for operating the organization within applicable laws and regulations.

Standard Intent: The senior manager is appointed by the governing body to be responsible for the overall day-to-day operation of the organisation. These responsibilities are documented and known to the personnel of the organisation. The individual appointed to carry out these functions has the education and experience to do so.

The senior manager is responsible for the implementation of all policies, which have been approved by the governing body.

	Criterion	Comments
Criterion 1.2.1.1 Critical: Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4	The senior manager manages the day-to-day operation of the organisation, including those responsibilities described in the position description.	Recommendations
Criterion 1.2.1.2 Critical: Catg: Basic Management + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3	The senior manager has the education and experience to match the requirements in the position description.	
Criterion 1.2.1.3 Critical: Catg: Basic Process + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	The senior manager carries out approved policies for management functions.	

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Criterion 1.2.1.4	The senior manager assures compliance with applicable	
Catg: Basic Process + Legality Compliance NA NC PC C	laws and regulations.	
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.2.1.5 Critical: þ Catg: Basic Process + Legality	The senior manager responds to any reports from inspecting and regulatory agencies.	
Compliance NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		

1.2.2 Standard

A senior manager implements processes to manage and control the organisation.

	Criterion	Comments
		Recommendations
Criterion 1.2.2.1	The senior manager	
Critical:	facilitates communication and cooperation between the	
Catg: Basic Process + Efficiency	organisation's governance	
Compliance	structure, management and the community.	
NA NC PC C	the community.	
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.2.2	The senior manager	
Critical:	implements processes to manage and control human,	
Catg: Basic Process + Efficiency	financial and other resources.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.2.2.3	The senior manager ensures	
Critical:	that the required physical facilities, installations and	
Catg: Basic Process + Efficiency	equipment are available and	
Compliance	are used optimally to provide the specified services.	
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		



Criterion 1.2.2.4 Critical: D Catg: Basic Process + Pat & Staff Safety Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	The senior manager ensures the implementation of risk management processes and activities.	
Criterion 1.2.2.5 Critical:	The senior manager implements processes to monitor patient expectations and satisfaction.	
Criterion 1.2.2.6 Critical: Catg: Evaluation + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	The senior manager implements processes to monitor staff expectations and satisfaction.	
Criterion 1.2.2.7 Critical: Catg: Evaluation + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	The senior manager implements processes for quality management and improvement.	
Criterion 1.2.2.8 Critical:	The senior manager implements processes to monitor the quality of clinical and other services.	

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1.2.3 Standard

The organisation's clinical and managerial leaders are identified and are collectively responsible for defining the organisation's mission and creating the plans and policies needed to fulfil the mission.

Standard Intent: An organisation's mission statement usually reflects the needs of its patient population, and patient care services are designed and planned to respond to those needs. Similarly, referral and specialty hospitals derive their mission from the needs of patients within larger geographic or political areas.

While managers are appointed to posts and have a leadership role, leaders of an organisation may arise from many sources. These leaders may represent every service in the organisation, e.g. medical, nursing, maintenance, administration, physiotherapy and radiography. Leaders may also be nominated or elected to certain committees such as health and safety committees and infection control. Effective leadership is essential for a healthcare organisation to be able to operate efficiently and fulfil its mission. Leadership is given to the organisation by individuals working together and separately and can be provided by any number of individuals.

Leaders may have formal titles or are recognised for their seniority, stature or contribution to the organisation. It is important that all the leaders of an organisation are recognised and brought into the process of defining the organisation's mission.

Patient care services are planned and designed to respond to the needs of the patient population. The leaders of the various clinical departments and services in the organisation determine what diagnostic, therapeutic, rehabilitative and other services are essential to the community, and their scope and intensity. In private healthcare organisations those persons who have an interest or a share in the service will need to be consulted during the planning processes.

	Criterion	Comments
		Recommendations
Criterion 1.2.3.1	The leaders of the	
Critical:	organisation are formally identified.	
Catg: Basic Process + Efficiency		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.3.2	The leaders work	
Critical:	collaboratively to develop and implement the strategic plan	
Catg: Basic Process + Efficiency	of the organisation.	
Compliance		
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Default Severity for NC or PC = 4 Very Serious		

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Criterion 1.2.3.3	The organisation's leaders
Critical:	meet with the leaders of other provider organisations in their
Catg: Basic Process + Efficiency	community to develop and
Compliance	revise strategic and operational plans to meet the
NA NC PC C	community needs.
Default Severity for NC or PC = 3 Serious	

1.2.4 Standard

The organisation communicates with its community to facilitate access to information about its patient care services.

Standard Intent: Healthcare organisations define their communities and patient populations and information systems ensure on-going communication with those key groups. The communication may be directly to individuals or through public media and through agencies within the community or third parties.

	Criterion	Comments
		Recommendations
Criterion 1.2.4.1	The organisation has	
Critical:	identified its target population.	
Catg: Basic Process + Patient Care		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.4.2	The organisation has	
Critical:	implemented a communication strategy with	
Catg: Basic Process + Patient Care	these populations.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.4.3	The organisation provides	
Critical:	information on the quality of its services.	
Catg: Basic Process + Patient Care		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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1.2.5 Standard

The organisation provides patient care within business, financial, ethical and legal norms.

Standard Intent: The organisation has established and implemented a framework for ethical management that includes marketing, admissions, treatment, transfers and discharges, and disclosure of ownership and any business and professional conflicts that may not be in the patients' best interests.

A healthcare organisation has ethical and legal responsibilities to the patients and community it serves. The leaders understand those responsibilities as they apply to the business and clinical activities of the organisation. The leaders create guiding documents, such as the organisation's mission, to provide a consistent framework to carry out those responsibilities. The organisation operates within this framework to:

- disclose ownership and any conflicts of interest
- honestly portray its services to patients
- provide clear guidelines for the levels of care and services offered
- withholding of resuscitation or life sustaining measures
- accurately bill for its services, and

• resolve conflicts when financial incentives and payment arrangements could compromise patient care.

When the organisation conducts clinical research, investigations or trials that involve patients, a committee or other mechanism to control all such activities in the organisation is established. The organisation develops a statement of purpose for these activities which includes the review process for all research protocols, a process to weigh the relative risks and benefits to the patients and processes related to the confidentiality and security of the research information.

	Criterion	Comments
		Recommendations
Criterion 1.2.5.1	The organisation's leaders	
Critical:	establish ethical and legal norms that protect patients	
Catg: Basic Process + Patient Care	and their rights.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.2.5.2	The organisation discloses its	
Critical:	ownership.	
Catg: Basic Process + Legality		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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Criterion 1.2.5.3 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	The organisation honestly portrays its services to patients.	
Criterion 1.2.5.4 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	The organisation provides clear admission, treatment, transfer and discharge policies.	
Criterion 1.2.5.5 Critical: Catg: Basic Process + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious Very Serious Very Serious	The organisation accurately bills for services.	
Criterion 1.2.5.6 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	The organisation has a committee or other mechanism to control all research undertaken within the organisation.	

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1.2.6 Standard

The organisation's leaders ensure that policies and procedures are implemented to support the activities of the organisation and to guide the staff, patients and visitors.

Standard Intent: Policies and procedures are formulated at different levels of authority, e.g. national Acts and regulations, national health and labour departmental policies, and organisational policies.

Leaders must ensure that all policies which apply to the organisation are available to the personnel and that they are implemented and monitored as they relate to various departments, services and functions.

Leaders should ensure that policies and procedures are available to guide the personnel in such matters as allocation, use and care of resources, financial practices, human resource management and dealing with complaints from patients and visitors.

	Criterion	Comments
		Recommendations
Criterion 1.2.6.1	The organisation's leaders ensure that policies and	
Critical:	procedures guide and support	
Catg: Basic Process + Efficiency	the activities and	
Compliance	management of the organisation.	
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.2.6.2	A designated manager is	
Critical:	responsible for compiling and indexing policies and	
Catg: Basic Process + Efficiency	procedures and for ensuring	
Compliance	their circulation, recall and review.	
NA NC PC C		
Default Severity for NC or PC = 2 Moderate		
Criterion 1.2.6.3	Policies and procedures are	
Critical:	signed by persons authorised to do so.	
Catg: Basic Process + Efficiency		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.6.4	Policies and procedures are	
Critical:	compiled into comprehensive manual(s) or a filing system,	
Catg: Basic Process + Efficiency	which is indexed and easily	
Compliance	accessible to all personnel.	
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Default Severity for NC or PC = 2 Moderate		

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Criterion 1.2.6.5	All policies and procedures	
Critical:	are reviewed at appropriate intervals, dated and signed.	
Catg: Basic Process + Efficiency Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.2.6.6	There is a mechanism to	
Critical:	ensure that policies are known and implemented.	
Catg: Basic Process + Efficiency	known and implemented.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		

1.2.7 Standard

The leaders direct the development and monitor the implementation of contracts/agreements for clinical or managerial services.

Standard Intent: Organisations frequently have the option to provide clinical and managerial services directly, or to arrange for such services through referral, consultation, contractual arrangements or other agreements. Such services may include, for example, radiology services, financial accounting services, equipment management, hotel services, etc.

In all cases, the leaders supervise such written contracts/agreements to ensure that the services meet patient needs and are monitored as part of the organisation's quality management and improvement activities.

Where volunteer services are provided, it is managed to provide a safe and effective service and is coordinated with other services within the organization.

	Criterion	Comments
		Recommendations
Criterion 1.2.7.1	Copies of contracts are made	
Critical:	available to those who ensure their implementation.	
Catg: Basic Process + Efficiency		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.7.2	Services provided under	
Critical:	contracts/agreements meet patient needs.	
Catg: Evaluation + Efficiency		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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Criterion 1.2.7.3 Critical: Catg: Evaluation + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	Contracts and other arrangements are monitored as part of the organisation's quality management and improvement programme.	
Criterion 1.2.7.4 Critical: Catg: Basic Process + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	There is a mechanism to ensure that all volunteers work under the guidance of suitably qualified health professionals in the employ of the care centre.	
Criterion 1.2.7.5 Critical: Catg: Basic Process + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	Volunteers sign a memorandum of agreement to abide by the conditions of the centre.	
Criterion 1.2.7.6 Critical: Catg: Basic Process + Efficiency Compliance NA NC PC C Default Severity for NC or PC = 3 Serious	There are written policies and procedures for the activities of the volunteer service.	

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1.2.8 Standard

The organisation's leaders foster communication between individuals and coordinate services among departments.

Standard Intent: To coordinate and integrate patient care, the leaders develop a culture that emphasises cooperation and communication. The leaders develop formal methods (e.g. standing committees, joint teams) and informal methods (e.g. newsletter, posters) for promoting communication among services and individual staff members.

Coordination of services comes from an understanding of the mission and services of each department and service and collaboration in the development of common policies and procedures.

Leaders have a special responsibility to patients and to the organisation. These leaders:

- support good communication
- jointly plan and develop policies that guide the delivery of services and
- monitor the quality of service delivery.

The leaders of all services create a suitable, effective organisational structure to carry out those responsibilities. The structure chosen can be highly organised with rules and regulations. In general, the structure(s) chosen is (are):

- inclusive of all relevant personnel
- consistent with the ownership, mission and structure of the organisation
- appropriate for the complexity of the organisation, and
- effective in carrying out the responsibilities listed above.

	Criterion	Comments
		Recommendations
Criterion 1.2.8.1	The organisation's leaders	
Critical:	promote communication among departments, services	
Catg: Basic Process + Efficiency	and individual staff members.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.8.2	Agendas are prepared for	
Critical:	meetings, and the personnel are given timely notification in	
Catg: Basic Process + Efficiency	order to prepare for	
Compliance	participation.	
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.2.8.3	Minutes of meetings are	
Critical:	taken and are circulated to all relevant personnel.	
Catg: Basic Process + Efficiency		
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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Criterion 1.2.8.4	There is a mechanism to
Critical:	ensure that key issues resulting from meetings of the
Catg: Basic Process + Efficiency	governing body and/or the
Compliance	management of the organisation are
NA NC PC C	communicated to and acted
Default Severity for NC or PC = 4 Very Serious	upon by the personnel.

1.3 Management of Departments and Services

1.3.1 Standard

Identified departmental or service managers control clinical and managerial activities in each department or service.

Standard Intent: The clinical care, patient outcomes and overall management of a healthcare organisation are only as good as the clinical and managerial activities of each individual department or service.

Good departmental or service performance requires clear leadership from a qualified individual. The qualifications of departmental managers should be appropriate to the department, i.e. suitable paediatric, ICU, operating theatre or information technology qualifications, as applicable. In large departments or services, clinical and administrative leadership may be separate. In such a case, the responsibilities of each role are defined in writing.

Documents prepared by each department define its goals, identify current and planned services and establish the knowledge, skills and availability of the personnel required to assess and meet patient care needs. The leaders of each department or service make their human resources and other resource requirements known to the organisation's senior managers. This helps ensure that adequate staff, space, equipment and other resources are available to meet patient needs at all times. The organisation's management provides departmental and service managers with data and information needed to manage and improve care and service. Patient care is not provided when special resources are not available.

Clinical services provided are coordinated and integrated within each department or service. For example, there is integration of medical and nursing services. Also, each department or service works to coordinate and integrate its services with other departments and services. The management of the organisation's organisational chart guides departmental/service staff in adhering to correct lines of communication. Each department or service documents the lines of communication within that department or service. Unnecessary duplication of services is avoided or eliminated to conserve resources.

	Criterion	Comments
		Recommendations
Criterion 1.3.1.1	The organisation ensures that	
Critical:	a qualified individual manages each department or	
Catg: Basic Process + Efficiency	service in the organisation.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		

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Criterion 1.3.1.2	The responsibilities of each	
Critical:	departmental manager are defined in writing.	
Catg: Basic Process + Efficiency Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.3.1.3	The departmental or service	
Critical:	manager implements processes to manage and	
Catg: Evaluation + Efficiency	control human, financial and	
Compliance	other resources.	
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.3.1.4	The departmental or service	
Critical: þ	manager ensures that there are sufficient personnel to	
Catg: Basic Process + Efficiency	provide the services.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.3.1.5	The departmental or service	
Critical:	manager ensures that resources are available to	
Catg: Basic Process + Efficiency	provide those services.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		
Criterion 1.3.1.6	Departmental or service	
Critical:	managers provide orientation and training for all personnel	
Catg: Basic Process + Efficiency	of the department or service	
Compliance	appropriate to their responsibilities.	
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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Criterion 1.3.1.7	There is coordination and	
Critical:	integration of services with other departments and	
Catg: Basic Process + Efficiency	services.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		
Criterion 1.3.1.8	Departmental managers	
Critical:	implement quality control and improvement programmes.	
Catg: Evaluation + Efficiency	improvement programmes.	
Compliance		
NA NC PC C		
Default Severity for NC or PC = 3 Serious		

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1.3.2 Standard

Policies and procedures and applicable laws and regulations guide the uniform care of all patients.

Standard Intent: As patients move through a healthcare organisation from entry to discharge or transfer, several departments and services as well as many different healthcare providers may be involved in providing care. Throughout all phases of care, patient needs are matched with the appropriate resources within and, when necessary, outside the organisation. This is commonly accomplished by using established criteria or policies that determine the appropriateness of transfers within the organisation.

For patient care to appear seamless, the organisation needs to design and implement processes for continuity and coordination of care among physicians, nurses and other care providers in:

- emergency services and inpatient admission
- diagnostic and treatment services
- surgical and non-surgical services and
- the organisational and other care settings.

The leaders of the various care settings and services work together to design and implement the processes. The processes may be supported by explicit transfer criteria or by policies, procedures or guidelines. The organisation identifies individuals responsible for coordinating patient care (for example between departments) or for coordinating the care of individual patients (for example the case manager).

Patients with the same health problems and care needs have a right to receive the same quality of care throughout the organisation. To carry out the principle "one level of quality of care" requires that the clinical and managerial leaders plan and coordinate the care provided to patients. In particular, services provided to similar patient populations in multiple departments or care settings are guided by policies and procedures that result in uniform delivery. Those policies and procedures respect applicable laws and regulations that shape the care process and are best developed collaboratively.

Uniform patient care is reflected in the following:

• access to and appropriateness of care and treatment do not depend on the patient's ability to pay or on the source of payment

• the seriousness of the patient's condition determines the resources allocated to meet the patient's needs

• the level of care provided to patients (for example anaesthetic care) is the same throughout the organisation and

• patients with the same nursing care needs receive comparable levels of nursing care throughout the organisation.

Uniform patient care results in the efficient use of resources and permits the evaluation of outcomes of similar care processes throughout the organisation.

	Criterion	Comments Recommendations
Criterion 1.3.2.1	Care planning and delivery is integrated and co-ordinated	
Catg: Basic Process + Efficiency Compliance	among care settings, departments and services.	
NA NC PC C		
Default Severity for NC or PC = 4 Very Serious		



Criterion 1.3.2.2 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	Clinical practice guidelines relevant to the patients and services of the organisation are implemented to guide uniform patient care processes.	
Criterion 1.3.2.3 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	The hospital maintains a clinical record for each patient.	
Criterion 1.3.2.4 Critical: Catg: Basic Process + Patient Care Compliance NA NC PC C Default Severity for NC or PC = 4 Very Serious	The patients' clinical records are completed according to guidelines determined by the organisation.	

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