Southern Cross Health Society Audit and Certification for Affiliated Providers Scope Exclusion Criteria for Rooms/Office NZS 8165:2005 if CORNERSTONE® accredited July 2014

Introduction: There are some Southern Cross Health Society Affiliated Providers who also have a current Royal New Zealand College of General Practitioner's (RNZCGP) CORNERSTONE® Accreditation to their standard known as *Aiming for Excellence*. As such there exists some overlap and duplication between these standards.

Purpose: The purpose of this document is to summarise the results of a comparative analysis between NZS 8165 and *Aiming for Excellence* so that there is a consistency of scope in the sector for achieving NZS 8165 certification by a current CORNERSTONE® accredited provider.

Outcome: The following table identifies the scope of NZS 8165:2005 noting that only those criteria identified as having a <u>high correlation</u> with CORNERSTONE® are identified for scope exclusion. The result is that with a successful audit the designated auditing agency would award the certification certificate for NZS 8165.

For this approach to be implemented please note the following:

- 1. The excluded criteria would not need to form part of the certification audit report, though if something is observed or identified on the day of audit relevant to an excluded criterion then the auditing agency reserves the right to include it in that specific audit.
- 2. That this certificate would include a condition that it is subject to the provider also maintaining a current CORNERSTONE® accreditation with RNZCGP for *Aiming for Excellence*. In the event that *Aiming for Excellence* or NZS 8165 are re-issued in an amended version, the parties agree that this gap analysis and/or scope exclusion criteria are likely to become out of date and should not be relied on.

Overview of excluded criteria from NZS 8165: 2005 includes the following:

- 1.1.2, 1.1.3, 1.1.4, 1.1.5, 1.1.7, 1.1.8
- 1.2.1, 1.2.2
- 2.5.4, 2.5.5
- 4.2.3, 4.2.6
- 4.4.3
- 4.6.2
- 6.1.4
- 6.2.1, 6.2.2, 6.2.3

Table: Scope for NZS 8156 <u>excluded</u> from the certification audit taking into account overlap with Aiming for Excellence

Criterion Reference	NZS 8165:2005Rooms/Office Based Surgery and Procedures
1.1.2	The Code of Health and Disability Services Consumers' Rights and Information about the Advocacy Service (provided under the Health and Disability Commissioner Act 1994) is made known, and/or made available to the patient in a suitable format, as appropriate.
1.1.3	Management and service providers are familiar with, and comply with, their obligations as specified by the Code.
1.1.4	The patient's informed consent is obtained in line with the requirements of the Code, with particular emphasis being given to the provision of information in order to enable informed decision making (www.hdc.org.nz reference 00HDC10159, 16 May 2003)
1.1.5	Barriers to communicating with the patient are minimised.
1.1.7	All steps are taken to maintain the confidentiality of patient information in compliance with the requirements of the Privacy Act and the Health Information Privacy Code.
1.1.8	The personal privacy and dignity of the patient is respected.
1.2.1	The facility ensures policies and procedures are developed and implemented that reflect a commitment to meeting the principles of the Treaty of Waitangi.
1.2.2	The care and treatment provided by service providers is sensitive to people with differing cultural needs, balanced with the need for clinical safety.
2.5.4	A clearly documented process for the identification and management of patient complaints is implemented and complies with legislative requirements - in compliance with Right 10 of the Code of Health and Disability Consumers' Rights.
2.5.5	The complaint management system is linked to the quality and risk management system to facilitate feedback and improvements.
4.2.3	Information of a private or personal nature is maintained in a secure manner and is not publicly accessible or observable.
4.2.6	Systems are in place to track and retrieve patient records.
4.4.3	The facility ensures adequate equipment is available for cardiopulmonary resuscitation. This equipment should be appropriate to the risks and complexity associated with the service being provided and the patient groups receiving the service.
4.6.2	There are current contact and referral details, and established links with other clinical series, support services, and community agencies.
6.1.4	Each procedure area has ready access to hand hygiene facilities to minimise the risk of cross contamination.
6.2.1	The facility has an approved evacuation plan in compliance with fire and local body regulations
6.2.2	The facility has procedures that ensure compliance with:
	(a) Occupational safety and health requirements;
	(b) The Smoke-free Environments Act
6.2.3	Equipment and supplies necessary to provide the service are available when required, or a contingency plan exists in the event that these are unavailable.

Disclaimer

Southern Cross Health Society (Southern Cross) has arranged for HDANZ to undertake a gap analysis [and propose scope exclusion criteria] ("Analysis") to assist Affiliated Providers to identify additional requirements which may exist in order for them to achieve NZS 8165:2005.

While every care has been taken in the preparation of this Comparison Analysis and the information it contains, this Comparison Analysis of NZS 8165:2005 with RNZCGP'S *Aiming for Excellence* 2011 - 2014 is provided as a guideline only.

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