

**AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE**



ADVISORY

TITLE	Advice on the applicability of Aboriginal and Torres Strait Islander specific actions
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Replaces	n/a
Compliance with this advisory	It is mandatory for approved accrediting agencies to implement this Advisory
Information in this advisory applies to	All approved accrediting agencies All health service organisations
Key relationship	All NSQHS Standards
Attachment	Nil
Notes	n/a
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To be reviewed	December 2020



ADVISORY

AS18/04: Advice on the applicability of Aboriginal and Torres Strait Islander specific actions

PURPOSE:

To clarify the applicability of Aboriginal and Torres Strait Islander specific actions in the NSQHS Standards (2nd ed.).

ISSUE:

The NSQHS Standards (2nd ed.) include six defined actions that specifically address the needs of Aboriginal and Torres Strait Islander people. The implementation of these actions will support the provision of culturally appropriate care to Aboriginal and Torres Strait Islander people across the health system.

The Commission recommends that health service organisations implement all six actions. However, the Commission recognises that all six actions may not be applicable for all health service organisations, depending on the risk profile of the organisation's patient population.

REQUIREMENTS:

All health service organisations must comply with the following two actions, with no exclusions for:

- Action 1.21 – the health service organisation has strategies to improve the cultural awareness and cultural competency of the workforce to meet the needs of its Aboriginal and Torres Strait Islander patients
- Action 5.8 – the health service organisation has processes to routinely ask patients if they identify as being of Aboriginal and/or Torres Strait Islander origin, and to record this information in administrative and clinical information systems.

Health service organisations that provide services to Aboriginal and Torres Strait Islander people where the risk of harm is the same as for the organisation's general patient population may seek 'not applicable' status for the following actions:

- Action 1.2 – the governing body setting safety and quality priorities for Aboriginal and Torres Strait Islander people
- Action 1.4 – the health service organisation implementing strategies and monitoring safety and quality priorities for Aboriginal and Torres Strait Islander people
- Action 1.33 – the health service organisation demonstrating a welcoming environment
- Action 2.13 – partnering with the Aboriginal and Torres Strait Islander community.

Organisations seeking exemption for any of these actions must demonstrate that a comprehensive risk analysis has been undertaken that examines the:

- Risk profile of the organisation's general patient population
- Risk profile of the organisation's Aboriginal and Torres Strait Islander patient population.

Not applicable status for Actions 1.2, 1.4, 1.33 and 2.13 will only be granted where these risk profiles are comparable.

Where not applicable status is granted, health service organisations will be required to continue to manage the specific risk of harm, and provide safe and high-quality care for all Aboriginal and Torres Strait Islander patients through the safety and quality improvement systems set out in the NSQHS Standards that relate to their whole patient population.

This exemption will generally apply to day procedure services and is not generally available to hospitals. Applications from hospitals for not applicable states of Actions 2.13, 1.2, 1.4 and 1.33 must be submitted to the Commission and will be assessed on a case by case basis.

All acute health service organisations are required to submit an Attestation Statement annually, see [Fact Sheet 7: Governing body attestation statement](#).

Organisations that are granted not applicable status for Action 1.2 may cross through point two of the Attestation Statement and initial the change. In this way, the organisation is reporting its not applicable status has been confirmed for the named health service organisation.