Purpose
The Quality Accounts Guidance Manual is best practice advisory guidance for providers of Health and Disability services within New Zealand to make use of during the production and publication of their Quality Account within the 2012/2013 financial year. It seeks to consolidate the understanding of the purpose of Quality Accounts and to guide their development based on best practice and feedback gained from the Quality Accounts working group and staff from the wider health and disability sector during the manual design processes.

Intended Audience
This toolkit is aimed at all providers of health and disability services within New Zealand. Other stakeholders (including District Health Board members and others who have a role in contributing to, and commenting on, Quality Accounts) may also find this guidance useful.

Contents
This guidance manual provides information that health and disability service providers may wish to consider including in their Account and contains a practical step by step approach to the preparation, documentation and publication of a Quality Account.

Acknowledgements
The Health Quality & Safety Commission would like to thank colleagues in the New Zealand DHB Quality and Risk Managers group for their leadership and efforts in the development of this document. This document was developed by PwC.
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What Are Quality Accounts?

An Overview of Quality Accounts For The New Zealand Health and Disability Sector
Introduction To Quality Accounts

Background

Quality Accounts were introduced into the UK National Health Service (NHS) in 2009 and, following testing in several NHS Trusts, became a reporting requirement for all trusts within the NHS during 2010. The aim was to demonstrate the importance of quality of care as a core business for the NHS by placing the reporting of quality on an equal footing with financial reporting.

The Health Quality & Safety Commission (the Commission) identified in their Statement of Intent 2011-14 their priority to identify indicators of quality and safety in health, with the aim to standardise and streamline quality reporting.

To progress this further, in June 2012 the Commission published their recommendation that each health and disability service provider document and publish a yearly Quality Account, providing the public with a transparent indication of the health and quality outcomes being delivered, with the initial account to reflect performance for the 12/13 financial year.

Purpose

The primary purpose of Quality Accounts is to encourage boards and leaders of healthcare organisations to assess quality across all of the healthcare services they offer, and encourage them to engage in the wider processes of continuous quality improvement. The visible product of this process is a document aimed at a local, public readership. This both reinforces transparency and helps persuade stakeholders that the organisation is committed to quality excellence. Quality Accounts go above and beyond regulatory requirements, which focus on essential standards.

Definition

Quality Accounts are annual reports from health and disability service providers regarding the quality of the services provided, and how each provider is progressing in terms of continuous quality improvement, the consumer experience and health outcomes.

Quality Accounts provide a mechanism through which health and disability service providers are able to transparently share their successes, learning and future improvements with the public and the wider sector.

Quality Accounts are designed to be published alongside annual financial accounts to demonstrate their equal value and status, and to provide the public with a clear and concise indication of the health and quality outcomes being delivered.

Quality Accounts are not a compliance tool, but rather a means for each health and disability service provider to:

- Demonstrate their commitment to continuous, evidence-based quality improvement across all services
- Set out to the public where improvements are needed and planned
- Receive challenge and support from the public and wider sector on what they are trying to achieve
- Be held to account by the public and local stakeholders for delivering quality improvements
Introduction To Quality Accounts

The introduction of Quality Accounts to all health and disability service providers marks an important step in putting quality at the heart of all healthcare activity. It is intended that this increase in focus will act as a catalyst to improve quality and provide an opportunity for organisations to demonstrate measurable improvements in quality of care over the coming years.

Benefits
Quality reporting can deliver many benefits to an organisation and the public when utilised effectively. The publication of a Quality Account provides a mechanism through which health and disability service providers are able to share their successes, learnings and future improvements, essentially providing transparency and accountability for each provider regarding the quality of their performance.

Driving Quality
The process of producing a Quality Account mobilises managers, clinicians, front line staff and support staff to collect, review and analyse information relating to quality and to identify their areas of success and opportunities for improvement. This is done in such a way that quality excellence becomes a fundamental part of the health and disability service provider’s core business.

The activities required to generate an Account will create synergies between a provider’s focus on corporate and clinical governance and the responsibility for the quality of clinical care. It will also highlight accountability for quality and for budget control as equal performance focus indicators in health management.

The journey to quality excellence has no end point; there is always more that can be done and each published set of Quality Accounts will mark these key stages by providing feedback and stimulating further feedback, which in turn will lead to setting greater goals for performance enhancement.

Whole of System Focus
Quality Accounts are designed to represent the whole organisation, not just a particular area of focus and should progressively reflect the partnership between community, primary and secondary care services. Within the Account it is suggested that providers report on the quality of service delivered and their plans for improvement, measured against the Health and Disability Sector Triple Aim for quality and safety improvement.
The guiding principles for the New Zealand Health and Disability Sector Quality Accounts are reflective of the principles of quality excellence that have been applied in health systems over many decades and are based on the six dimensions of quality.

**Guiding Principles**

**Accountability and Transparency**
- Quality Accounts are intended to enhance provider’s accountability to deliver high quality health outcomes. Accountability can only be effective if there is transparency in reporting, and together this will drive improvement by:
  - Making health and disability service providers more accountable to consumers, the clinical community and the wider population
  - Allowing clinical teams to review their performance (with the ability to track performance against targets) and providing opportunities for improvement
  - Offering a framework for discussing local priorities and service improvement

**Meaningful and Relevant**
- Each quality measure within Quality Accounts must assist in the understanding of performance of the individual provider and its services
- It is imperative that the development of Quality Accounts does not become a paper exercise with the main driver being “to simply make the numbers”. They must be used to drive learning and improvement in quality service delivery
- Quality measures should be meaningful and relevant from a clinical perspective and also from the perspective of consumers

**Whole of System Outcomes**
- All providers of health and disability services should be encouraged to produce, or participate in the production of Quality Accounts
- The whole of system approach will ensure that patient accountability extends across care pathways and that the reporting is available across all sites and services within individual organisations

**Continuous Quality Improvement**
- Quality Accounts will support providers’ existing quality and performance improvement activities to drive the health system to continuously improve, support innovation, minimise unnecessary variation and strive for quality excellence rather than simply meeting, achieving or maintaining minimum standards
What Should Be In A Quality Account?

Suggested Content For Quality Accounts Within The New Zealand Health and Disability Sector
Quality Account Content Overview

Quality Accounts are public documents; they will be read by consumers, their carers and the general public. Additionally, the audience for these reports also includes clinicians, employees of health and disability providers and other experts in healthcare. It is important that the information given is detailed enough to give an accurate and evidence-based account of each provider’s quality, safety and experience story, while remaining a short, readable document where the information is meaningful to the public. Clinical teams should be able to see information about their service or specialty presented accurately. The wider workforce should recognise the Quality Account as describing the quality programme that is in place within their organisation. The public should be able to access information which is meaningful for them and reflects, in part, the aspects of quality safety and consumer experience that matters most to them.

Retrospective and Future Focused

Quality Accounts are both prospective and retrospective reports that present an honest and balanced picture of the quality of service being delivered and the improvement plans that each provider has in place.

From a retrospective viewpoint Quality Accounts should be seen, amongst other things, as an education opportunity, ensuring a wide audience of providers can learn from instances where things went wrong and what improvement activities work well.

The prospective element explains what the organisation has identified as priorities for improvement over the coming financial year, and how it plans to achieve and measure these priorities.

Suggested Content

In order to achieve some standardisation of Quality Accounts throughout New Zealand it is recommended that each provider’s Account should consist of three key sections, including information that is common to all providers, as well as information that is specific to each organisation according to local and organisation-specific circumstances.

Opening Statements

- Foreword
- Statement of Endorsement
- Statement of Engagement
- Feedback Statement of Intent

Performance Review

- Nationally Consistent Content
  - Ministry of Health National Health Targets
  - Serious and Sentinel Events
- Provider Determined Content
  - Quality, Safety and Experience of Care
  - Health and Equity for the Population
  - Value for Public Health System Resources

Future Focus

- Priorities for Improvement
- Capability Development
Section 1 – Opening Statements

The purpose of the opening statements are to demonstrate that the health and disability service provider has a clear commitment to the quality, safety and experience of care delivered. It offers the opportunity to summarise the organisation’s quality story and to explain their progress to the public.

The statements made in this section cannot be seen as a stand alone element within the Account; the commitment to quality excellence and continuous improvement documented here must be echoed throughout the whole report.

It is recommended that the opening statements are divided into four sections. This includes a summary of the provider’s view of the quality of services provided during the reporting period; and a written statement signed by a senior member of the Executive Leadership team or Board to indicate that to the best of that person’s knowledge the information in the document is accurate.

**Foreword**

The foreword provides a summary of the Account, focusing on the progress made across the last year and the goals that have been set for the year ahead.

It acts as an introduction to the Account and the organisation, offering the opportunity for each provider to set out a summary of its values, achievements and goals, highlights the key points plainly and clearly, and to explain what Quality Accounts are and why they have been produced.

**Statement of Endorsement**

The purpose of this statement is to demonstrate the Board and Executive Leadership team’s endorsement that all content is accurate and representative of the provider’s quality performance over the past year and the improvement goals for the year ahead.

This statement mirrors the sign-off given to a financial account and represents the organisation’s commitment to improving the quality of care they deliver.

**Statement of Engagement**

Within this statement it is recommended that providers will include information about who has been involved in developing the Quality Account, determining the content and priorities so that the reader knows from the outset how their views may be reflected.

**Statement of Intent Regarding Feedback**

Providers should give information to readers on how they can provide feedback on the report and make suggestions for content for future reports.

In this section the provider should outline:

- How they will publish the Quality Accounts
- How they intend to seek feedback from the community
- How they will incorporate feedback into future Quality Accounts
Section 2 – Performance Review

This section is where the provider is able to report on the previous year’s quality performance, offering the reader the opportunity to understand the quality of services delivered both in a nationally consistent context and in areas specific to each organisation and their community.

Nationally Consistent Content

The aim of the nationally consistent requested content is to give information to the public, which will be common across all Quality Accounts.

This section of the Quality Account is deliberately intended to be smaller in comparison to the provider determined and improvement sections, with the suggestion that it contains high level graphical analysis and commentary regarding the individual health and disability service provider’s performance.

As the Commission’s National Quality and Safety Indicator programme develops, there will be further opportunity to agree data for presentation in all Quality Accounts, where this could assist in the identification of quality excellence, variation in approach and areas for quality improvement; and prompt further collaboration or national work programmes.

For the financial year 12/13* this content should include:

- Ministry of Health National Health Targets
- Serious and Sentinel Events

Provider Determined Content

This section allows each provider to demonstrate the quality of care delivered and shows data relevant to specific services and specialities of the organisation as well as what consumers and the public say matters most to them, balanced against the Health and Disability Sector’s Triple Aim.

Provider Determined Content Could Include:

- Patient Safety and Experience Indicators
- Clinical Indicators
- Quality, Safety and Experience improvement programmes
- Regional and National Quality, Safety and Experience initiatives

Each provider’s performance should be documented at a high level including:

- Graphical representation of each indicator’s month on month performance
- Accompanying commentary that outlines:
  - Contributing factors to the performance outcomes
  - Any trends and learning's that have been identified
  - An overview of any improvement activities that have been undertaken and the impact that they had on performance
  - Why this indicator was selected, and why the reader should be interested
  - What the results mean for the organisation, the community and the wider sector

*It is expected that from FY13/14 onwards Nationally Consistent Content will align to a standard list of quality and safety indicators as developed by the New Zealand Quality and Safety Indicator project.
Section 3 – Future Focus

This is the prospective section of the Quality Account and is the opportunity for each provider to share with their community and the wider sector their plans for quality improvement, why the priorities have been chosen, and how their organisation is developing quality improvement capacity and capability to deliver these priorities.

Priorities for Improvement

The Quality Account should contain details of a local improvement plan, providing a forward look at priorities. It should offer the reader the opportunity to understand what improvements the organisation plans to make over the next year, detailing:

- Three to five priorities for quality improvement – agreed by the board. This should include a rationale for how these priorities were selected and whether, or how, the views of the community, staff and wider sector were taken into account
- The key improvement initiatives for each priority. This should include a description of how progress towards improvement targets will be monitored and measured
- Reporting of improvement targets against defined measures. In subsequent years, providers should report on progress made on the priorities, including the use of historical data where available

Capability Development

The focus on driving up the quality and productivity of healthcare through innovation means that now, more than ever, health and disability service providers need a good understanding of the fundamentals of quality improvement in order to deliver successful improvement projects.

Within this section the provider should outline the plans and processes that they will put in place in the following year to develop the capability and capacity of their organisation. The delivery of these planned activities will enable health teams to have the tools, skills and knowledge required to lead and deliver high quality services whilst remaining accountable for the health outcomes generated by these same processes and procedures.

Identifying Improvement Opportunities

Quality Accounts offer a commitment to improve quality of services and to do this providers need to establish not only what needs improving but also how this can be achieved. Priorities for improvement and capability development should be determined by the process of reviewing services and working with stakeholders, with information included in the Accounts indicating how the priorities were decided and who was involved in the decision making process.
How Are Quality Accounts Developed?

Suggested Approach To Develop Quality Accounts Within The New Zealand Health and Disability Sector
Development Approach

Many health and disability service providers will have their own project methodology and where these exist they should be used to develop the Quality Accounts. This section is included for those providers who may not have an established methodology and act as a prompt for those that do, to ensure all factors are considered.

This section describes a four step project management method for initiating the production of Quality Accounts, suggesting a standard approach that incorporates the principles of project management. This guide is a suggested framework. Each organisation is different and providers may choose to adapt the approach to meet the needs of their organisation.

The four project stages are shown in the diagram below:

**Feasibility**
Providing the organisation with a clear and common understanding of what the Quality programme is aiming to achieve and agreement of the production process

**Initiation**
Establishing the overall shape of the programme to ensure that it is underpinned by clear plans, resources and budget

**Scoping**
Defining and agreeing the indicators, measures and content for the Accounts

**Deployment**
Developing the information technology, data and processes needed to support and enable the production of the Accounts

One important fact to consider is that there are certain critical elements for success which should be continually considered throughout the life of the project. These are:

- Stakeholder engagement and involvement
- A focus on sustainability
- The ability to measure
- Risk and issues management
- Project documentation
Feasibility Stage

The feasibility stage recommends activities to make sure that each provider is ready to develop and implement their Quality Account.

**Aim**

- To ensure that the organisation has a good understanding of why Quality Accounts are important and to engage key clinical staff and the wider workforce regarding both the benefits of Quality Accounts and the process for implementing them

**Considerations**

- It is important to consider the long term costs involved to implement Quality Accounts and building the costs for support, maintenance and licensing into financial planning
- Developing a good understanding of the organisation’s capability, current information strategy and source systems will provide most of the information required to develop a suitable approach for the design and implementation of the Quality Accounts programme

<table>
<thead>
<tr>
<th>Main Activities</th>
<th>Expected Outcomes</th>
</tr>
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<tbody>
<tr>
<td>Prepare a business case; develop estimates for the costs and timescales</td>
<td>Completed business case including risk register</td>
</tr>
<tr>
<td>Identify non clinical resources required to develop and implement the Quality Account</td>
<td>Confirmation that the resources (people, budget and time) required to generate and deliver the Quality Account is available</td>
</tr>
<tr>
<td>Engage with clinical and executive leads to establish and confirm senior level support</td>
<td>Approval gained from the board and executive team</td>
</tr>
<tr>
<td>Consult individual clinical teams and provide a clear understanding of the practical benefits of the Quality Account in improving health outcomes and local clinical care</td>
<td>Strong clinical engagement and support</td>
</tr>
<tr>
<td>Consider how the Quality Account can address local concerns and difficulties</td>
<td>Identification of how the Quality Account will help to improve the quality of care and the service provided to patients</td>
</tr>
<tr>
<td>Gain an overview of existing systems and reporting</td>
<td>An understanding of the provider’s capability to implement and accurately measure performance</td>
</tr>
<tr>
<td>Identify target stakeholder groups for the Quality Account, including assessing their needs and expectations</td>
<td>Completed stakeholder management and communications plan</td>
</tr>
</tbody>
</table>
Initiation Stage

The initiation stage involves defining the requirements for each set of Quality Accounts, and understanding what will be delivered, who will deliver it and, at what cost.

Aims

- To support clinical teams to produce an agreed set of requirements for the Quality Account and signing off the scope of the project
- Identification of the timeframes and the actual costs of putting the Quality Account in place

Considerations

- It is important that all key stakeholders have approved the Quality Account programme and have committed the appropriate resources from an early stage
- Although it is recommended that the Quality Account programme is led by clinicians with a senior clinician (for example a Clinical Director) as a senior sponsor, this should not exclude involvement from all disciplines across the organisation
- The data measurement system and approach to data analysis can have a significant impact on the overall effort required to deliver the solution. As such the information management team should be involved as early as possible in the programme and should help develop the data measurement system and plan
- Ideas and suggestions for metrics must to be circulated as widely as possible to achieve the best possible set of Quality Accounts

<table>
<thead>
<tr>
<th>Main Activities</th>
<th>Expected Outcomes</th>
</tr>
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<tbody>
<tr>
<td>Establish governance structures and processes for the Quality Account project</td>
<td>Documented and agreed governance and processes for the Quality Account project including sign-off requirements and change management processes</td>
</tr>
<tr>
<td>Produce a structured, detailed and resourced Project Plan for putting the Quality Account in place</td>
<td>Confirmed approach to generating the Account</td>
</tr>
<tr>
<td>Share any existing metric information from previous prototypes, pilots or other processes that may be relevant</td>
<td>Utilisation of existing reports and metric, avoiding the ‘re-invention the wheel’ where possible</td>
</tr>
<tr>
<td>Set up wider clinical teams and give them the appropriate background information. These teams should include multidisciplinary team members</td>
<td>To have consulted clinicians and to have attracted as much interest in the project as possible</td>
</tr>
</tbody>
</table>
Scoping Stage

The scoping stage will ensure that requirements for the Quality Account are able to be agreed with the clinical teams. Identifying realistic and achievable areas to focus on will enable the planned benefits to be realised within the timescales set. This can be done through a number of workshops.

Aim

- The clinical focus and usefulness of each metric is identified and agreed

Considerations

- The first workshop should aim to develop a wish list of requirements for the Quality Account based on how useful the information will be and the benefits that come from having the information available
- Consulting the wider clinical teams is strongly encouraged for the first workshop. However, for subsequent workshops, it may be helpful if the clinical lead takes the responsibility of gathering and assessing further clinical feedback, to avoid multiple versions and confusion
- Allow enough time between workshops to carry out the necessary data research, as this is vital in setting expectations for what is possible to achieve with the Quality Account
- Outputs should be provided to the clinical leads ahead of workshops so that they can add their input to the refinement of requirements that are used
- Consider a workshop for signing off the requirements and planning the benefits

<table>
<thead>
<tr>
<th>Main Activities</th>
<th>Expected Outcomes</th>
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<tbody>
<tr>
<td>Engaging a broad range of clinicians from each speciality to attend requirements-gathering workshop(s)</td>
<td>Agreement on a balanced selection of indicators covering: Quality, Safety and Experience of Care, Health and Equity for the Population, Value for Public Health System Resources</td>
</tr>
<tr>
<td>Carrying out research into the availability of data (inside and outside the organisation)</td>
<td>An agreed estimate of resource and cost requirements for the generation and on-going management of the data measurement system</td>
</tr>
<tr>
<td>Carrying out and supporting requirements sign-off workshop</td>
<td>Requirements signed off by the clinical leads for each specialty and the Board</td>
</tr>
<tr>
<td>Conduct project scoping and create development plan</td>
<td>A detailed project plan to put the Quality Accounts in place and a key milestone development plan for each of the Accounts modules</td>
</tr>
<tr>
<td>Consulting clinical teams on any identified difficulties or changes to metrics and ensuring the clinical relevance and purpose of the metrics is maintained</td>
<td>Ongoing engagement with the clinical leads</td>
</tr>
</tbody>
</table>
Development Stage

The development stage will typically start once the scoping stage is complete and the requirements for the Quality Account have been agreed with the clinical team.

**Aim**

- Designing, building and testing all aspects of the Quality Account

**Considerations**

- Ensure that there are checkpoints and regular communication with development teams (both in-house and outside developers) during this stage, and that any data issues are resolved quickly
- Effective and efficient communications are the key to the success of the project through all stages. Health and disability service providers should ensure that a comprehensive communications plan is in place and is reviewed at various stages throughout delivery
- Provision of an early view of the Quality Account for users to confirm that they meet their expectations and ensure that usability/accessibility requirements are addressed
- There should be continued testing of assumptions that have been made in the requirements specification through communication with the clinical end users
- Ensure that Information Management and Information Technology resources are available to support the development of the Quality Account as significant effort can be required
- Standards and guidelines should be in place and used for development and testing

### Main Activities | Expected Outcomes
--- | ---
Setting regular development checkpoints to help achieve the main aims | Quality of the Account is assured, through a structured system test plan
Developing a training and user acceptance testing plan | A defect identification and resolution plan developed
Developing and agreeing a communications plan | Communications, testing and training plans agreed
Produce a detailed data plan – outlining the metrics that are needed and the systems that the data will be taken from | An understanding of the information management and information technology resource implications for delivering the Quality Account (e.g. if systems need to be changed to capture data required for the Account)
Consulting clinical teams on any identified difficulties or changes to metrics because of data configuration and so on, and making sure the clinical relevance and purpose of the metrics is maintained | To continue developing useful metrics, agreed by the clinical lead to be an appropriate balance between the metrics identified initially and any identified difficulties with local data flows
How To Prepare A Quality Account

Considerations For Documenting Quality Accounts Within The New Zealand Health and Disability Sector
**Considerations For Drawing Up Quality Accounts**

Quality Accounts will be read by a variety of people, including members of the public, medical directors, prospective employees, and staff of government agencies and organisations. Within their Quality Account each provider should aim to present information in a way that is accessible for all.

Effective engagement is a key way of encouraging input from the public and ensuring relevance of the document to the community. Giving thought to the way the information is presented can ensure that Quality Accounts are accessible for all readers and make community input more likely, there should not be a need to produce more than one version of the document for different audiences to cover different levels of technical ability.

Additionally, it recommended that providers consider the inclusion of a glossary at the end of the Account, or include a 'plain English' explanation of each specialist term in brackets throughout the document.

**Communication Styles**

The audience for each provider’s Quality Account is primarily the public, but also includes clinicians, non-clinical staff, commissioners, academics and other experts in health and disability care.

When drawing up an Account, it is suggested that the provider focuses on the key messages that matter and are of interest to their specific audience.

The Account should include a variety of communication mechanisms to cater for different learning styles i.e. a need for a balance between textual and visual information in the document.

Providers should also consider the communication needs of their local community and whether it is appropriate to communicate all, or part, of the Quality Account in different languages or formats (eg Braille). They should also consider distribution methods for those members of the community who may not have access to the internet, having regard to their duties under equality legislation when preparing their Quality Accounts.

It is critical that each Quality Account use language that the audience will understand. If technical language is used its meaning should be explained, and providers should avoid overly long sentences, ensuring that they are as concise as possible.
Considerations For Drawing Up A Quality Account

Interpreting Data
In order to interpret data correctly it should be approached without any preconceived ideas about what conclusions have been reached. Highlighting areas where development and improvement are needed gives the Quality Account honesty and integrity, and providers should consider reporting on such conclusions within the Quality Account using it as an opportunity to state what they are going to do to make improvements.

Presenting Data
Data presentation should be simple and in a consistent format. Information should provide a balance between positive information and acknowledgement of areas that need improvement. Use of both qualitative and quantitative data will help to present a rounded picture and the use of data, information or case studies relevant to your local community will help make each Quality Account meaningful to its reader.
Information should be presented in both quantitative and qualitative formats so that it is meaningful for the wider public, choosing a selection of metrics which offers both organisational (for instance healthcare-acquired infection rates) and service-specific indicators of quality.

Using Tables and Graphs
Tables and graphs provide a visual representation of data that can be more effective than text when trying to convey a particular message. They can also break up text and make the Account far more visually appealing and engaging for the reader. A graph should have a clear heading, one clear message, and avoid unnecessary visual effects.
A good graph can be an extremely effective way of presenting the key results from any data collected, but a poor graph can be confusing or misleading.

The following tips may help providers to create graphs that are both engaging and revealing to the reader:

**General Rules for Using Graphs:**
- A graph should have one clear visual message. It is not recommended to include more than one idea in a graph, as this is more likely to confuse than illuminate the situation.
- Graphs should have a clear heading that contains all the information that the reader needs to understand its content.
- Acronyms and abbreviations should be avoided, as should unnecessary visual effects, as these can make the graph much harder to understand.
Considerations For Drawing Up A Quality Account

Publishing

It is proposed that all health and disability service providers should publish their Quality Account on their organisation’s specific website, timed to align with the publication of their financial reporting.

In addition, the Commission will also publish a link on their website, allowing users the opportunity to easily locate, read and download each provider’s Account.

Joint publishing provides a mechanism by which progress, successes, improvement opportunities and commitment to continuous quality excellence can be shared widely with the population and the wider health sector.

In order to submit a Quality Account to the Commission, providers should email their website link to info@hqsc.govt.nz including the title ‘Quality Accounts’ and the name of their organisation.

There is no requirement to mail a hard copy of the Quality Account to the Commission.

Below is a recommended approach to publishing a Quality Account:

- **Final Edit**: Review with Consumers, Health Literacy Specialists and Content Editors
- **Communicate**: Ensure that all employees within the organisation, the community and the wider sector understand where and how to access the Account
- **Publish**: Upload the Quality Account to the organisations website and share the link with the Commission

Future Quality Accounts

It is important that both the Quality Account and the wider improvement agenda are continually reviewed, built upon and improved for the future.

In future Account providers may want to invite back participants who helped to design each Quality Account to review the finished product and start planning for next year as a result.

Quality Accounts are annual reports and the public will want to see consistency between them so that, year-on-year, progress updates are given on the results of last year’s planning and prioritisation, followed by an account of what will happen in the next year. This looking both back and forward in Quality Accounts is crucial to giving the public information about the quality journey that each organisation is on.
Checklist And Resources

A Checklist and Useful Resources For The Development Of Quality Accounts Within The New Zealand Health and Disability Sector
The checklists below can be utilised by providers to ensure that they have covered all recommended elements in the design and preparation of their Account.

Feasibility Stage
- Have you identified how Quality Accounts will help to improve the quality of care and the experience of services provided to your consumers and address local concerns?
- Have you gained clinical and executive level ‘buy in’ to promote Quality Accounts within the organisation as a method for Quality Excellence?
- Are the resources (people, budget and time) required to deliver the Quality Account confirmed?
- Have you completed and gained sign-off for your Quality Accounts Business Case?
- Have you costed the longer term costs of implementing Quality Accounts into the business case?
- Are the main clinical leads for Quality Accounts identified and do they have a full understanding and appreciation of the process involved in developing the Quality Account and how it will benefit the organisation in the future?
- Have other non-clinical resources been identified and allocated?
- Are you clear about which stakeholders you need to consult with to ensure a widely understood and shared view of quality?

Initiation Stage
- Have you identified existing information systems and reporting capability?
- Is there a Board sponsor allocated to the programme?
- Have you developed a detailed project plan?
- Are Information Management leads allocated to the Quality Accounts programme?
- Have you established a process to circulate draft suggestions for metrics as widely as possible?
- Have you developed a process for logging and responding to issues and risks?

Scoping Stage
- Does the proposed Quality Account present a balanced picture of the organisation’s performance?
- Is there sufficient confidence in the reliability and accuracy of the data for the Quality Account?
- Do you have a clear picture of the availability of data required?
- Have the Quality Accounts requirements been signed off?
- Has an implementation plan been developed?

Development Stage
- Have you developed a communications plan?
- Have you developed a detailed data plan?
- Have you developed standards and guidelines for development and testing?
Checklists

Opening Statements
- Is quality clearly defined by your organisation as a core part of your overall purpose and values?
- Do you have a powerful and prominent quality statement that is widely disseminated and understood?
- How far has your Health Board progressed in creating a quality culture? How can you measure this?
- Is your emphasis on quality an integral part of your wider values? How does it sit with other things that you are emphasising, such as your financial sustainability or your contribution to the local community? Are these regarded these as competitive or complimentary?
- Can you show that your Quality Accounts have been influenced through engaging with stakeholders? How has your definition of quality, your selection of measures and indicators and your design of Quality Accounts changed as a result?
- How far have you devolved responsibility for quality? Does each department within your organisation produce their own subsidiary version of Quality Accounts from which the overall DHB’s Accounts are developed?
- How are you ensuring that the Board has full responsibility for Quality Accounts? Are there particular Board Members / Executives nominated to take responsibility? Are other quality champions established? Is there a quality sub-committee of the board?
- Is it clear how you will gather feedback on the Quality Account, and how this feedback will be incorporated into future Quality Accounts.

Performance Review
- Have you reported against Ministry of Health targets and Serious and Sentinel Events measures?
- Is your DHB specific content relevant to the community?
- Have you defined each target clearly?
- Have you stated why you are interested in this indicator, and why the reader should be interested?
- Have you defined how and by whom the data has been collected?
- Have you clearly demonstrated performance against each target?
- Have you included narrative around each target to provide an explanation of each result? What the results mean for your organisation and what the results mean for consumers.
- Have you used a variety of methods to communicate the information against each target?

Priorities for Improvement
- Have you set some public targets for improvement and are you reporting against them?
- Are you using best practice to help improve your performance and to check that your targets are stretching enough?
- Have you set out objectives and priorities that are to be achieved over a number of years? Are there some clear milestones on the way?
- Have you determined your priorities?
Resources

Quality Accounts toolkit: Advisory guidance for providers of NHS services producing Quality Accounts for the year 2010/11

How do Quality Accounts measure up? Findings from the first year


Consultation: The proposed framework for Quality Accounts. The NHS Confederation. 2009
- http://www.nhsconfed.org/Publications/Documents/Quality_accounts_consultation_FINAL.pdf


Transparency in outcomes: a framework for the NHS. Department of Health. 2010

Quality Accounts. Making the most of your Quality Accounts. Foundation Trust Network. 2009