

## Attachment 3: Proposed Compliance Monitoring Report Questions

Official

Each Health Service Provider must complete a single report form that covers compliance across all applicable sites within its service.

Completed forms must be submitted to [EOPP@health.wa.gov.au](mailto:EOPP@health.wa.gov.au) annually by 31 August

Health Service Provider Name:

Please indicate how your service/ site demonstrates compliance with the following policy requirements:

1. Health Service Providers must have systems, structures and processes in place to support the recognition, response, escalation and management of physiological and mental state deterioration.

1.1 Does your HSP have systems, structures and processes for the recognition, response, escalation and management of physiological and mental state deterioration consistent with this policy in place?

If No, outline program for their development.

**2. Systems, structures and processes should be consistent with guidance provided by the NSQHS ‘Standard 8: Recognising and Responding to Acute Deterioration’, including comprehensive training for all clinical and non-clinical personnel, commensurate with the duties and responsibilities of their respective roles.**

## 2.1 Does your HSP have training for clinical and non-clinical personnel for Recognising and Responding to Acute Deterioration

## 2.2 How does your health service measure compliance for this training?

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**3. Health Service Providers must utilise an observation and response chart that allows health professionals to monitor and document vital signs and any changes over time.**

3.1 Are observation and response charts, that clearly identify/trigger patient deterioration in use by your service compliant with this policy?

If No, outline the plan for ensuring their compliance with this policy

### 3.2 Are regular audits conducted to evaluate and monitor for compliance?

If no, please explain why

#### **4. Health Service Providers must implement guidelines/ a pathway to support the escalation of care**

#### 4.1 Are guidelines/pathways consistent with this policy implemented?

If No, outline the plan for ensuring their compliance with this policy

**5. Health Service Providers must implement communication protocols for patient, family, support people or carer-initiated escalation of care.**

5.1 Does your health service have clear processes for patients, family, support people and carers to escalate care if they have concerns?

If no, provide details on future plans for implementation of how this will be monitored and evaluated.

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6. Health Service Providers must have a formal rapid response system to facilitate appropriate and timely response to acute deterioration.

## 6.1 Is the formal rapid response system-in place consistent with this policy?

If No, outline the plan for ensuring their compliance with this policy?

## 7. Was non-compliance with this policy identified during this reporting period.

If yes, describe the issue/s and actions taken in the table below.

Issue identified	Action taken

Form completed by \_\_\_\_\_ Designation \_\_\_\_\_ Date \_\_\_\_\_

Approved by \_\_\_\_\_ Designation \_\_\_\_\_ Date \_\_\_\_\_