

Private Health Facilities (Standards) Notice

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| **Patient care standard (version 6)** | | | |
|  | Compliance StatusC - CompliantNC - Non-compliantN/A - Not applicable | Evidence of Compliance | Assessment of evidence(PHRU to complete) |
| 1. The process of entry to the facility is facilitated by an effective admission system, which fully informs and prepares the patient for the episode of care. |  | Name of admission procedure and date of most recent review. |  |
| 1. A record is developed by the appropriate health professionals in consultation with the patient and/or carer which covers:  * patient assessment; * the plan for management of the patient’s care; * treatment provided; * regular evaluation of the patient’s condition; and * discharge plan. |  | State outcomes and date of medical record documentation audit. |  |
| 1. Patients have access to a document, which explains their rights and responsibilities. |  | Name and location of document. |  |
| 1. Patients give informed consent to their treatment. |  | Consent policy or similar documents with version and date of review. |  |
| 1. Patients are informed in a culturally appropriate manner about:  * their condition; * any necessary clinical investigations relevant to their condition; * any treatment proposed; and * the likely outcomes and risk of complications. |  | Name of documents that address needs of CALD patients. |  |
| 1. The number, qualifications and experience of nursing, medical and support staff are appropriate having regard to:  * number of patients; * co-morbidity; * other patient risk factors; and * Casemix. |  | Describe staffing allocation process eg, Trendcare / daily team meeting to discuss patient needs/ patient allocation. |  |
| 1. Facilities, equipment and resources comply with theQueensland Health Clinical Services Capability Framework for Public and Licensed Private Health Facilities (CSCF) and CSCF Companion Manual,Australian Standards and appropriate college / professional body guidelines. |  |  |  |
| 1. The process of separation is facilitated by an effective discharge system, which fully informs and prepares the patient for subsequent appropriate care. |  | Discharge policy and procedure, including version and date of review. |  |
| 1. Processes are established for the receipt, documentation, investigation and review of all complaints relevant to the provision of patient care. |  | Complaints policy including version and date of review. |  |
| 1. Patients are informed on the role of the Office of the Health Ombudsman as an independent health complaints agency. |  | Describe where and how this is available to patients. |  |