

Why should services participate in NSAP?

The National Standards Assessment Program has many benefits for participating services:

- ✓ an opportunity to objectively assess your service against the *Standards*
- ✓ a formal mechanism for identifying areas and developing strategies for improvement
- ✓ an opportunity to participate in a peer review process and receive a benchmark report to see how your service compares to its peers and other services nationally
- ✓ ability to promote that your service has been externally validated as meeting the *Standards*
- ✓ support from the NSAP team and PCOC zone coordinators whilst participating
- ✓ ability to use outcomes of NSAP for accreditation purposes (and vice-versa)
- ✓ ability to track your progress over several cycles of NSAP.

Contact us

For more information about NSAP or details on how to register visit www.palliativecare.org.au or contact the NSAP national project team at

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Standards make a difference

Improving quality of care at the end of life



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National Standards Assessment Program

What is NSAP?

The National Standards Assessment Program (NSAP) is a quality improvement program to help services move towards best practice.



The key objective of NSAP is to improve quality in palliative care experiences and outcomes for patients, their families and carers.

NSAP provides services with a framework for consistent self-assessment against the *Standards for providing quality palliative care for all Australians*.¹

This can be followed by a peer review process through which services obtain a benchmark of their performance to support continuous quality improvement.

Importantly, NSAP is a resource for the palliative care sector to engage in quality improvement activities that align with existing accreditation requirements.

Services should formally assess themselves against the Standards every two years.

How NSAP works

The NSAP process is a continuous quality improvement program based on the PDSA (plan-do-study-act) cycle. Services work through a number of steps whilst participating in NSAP. The key steps include:

Plan:

1. Ensure support for NSAP at senior levels.
2. Assess organisation's readiness to change.
3. Establish a multi-disciplinary team (or identify an existing team).
4. Identify and collate evidence and data (undertaking audits if necessary).

Do:

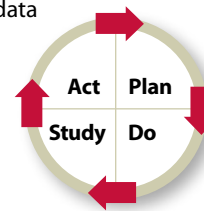
5. Undertake assessment of current achievement against the *Standards* using the multi-disciplinary team.

Study:

6. Analyse results and identify areas for improvement.
7. Develop an action plan for improvement.

Act:

8. Participate in the peer review process (optional).
9. Implement the action plan.



NSAP and accreditation

NSAP does not replace accreditation and does not remove the need for a service to undergo accreditation.

Rather, it provides a resource to the palliative care sector that will enable it to engage in quality improvement activities that align with accreditation requirements.

NSAP will support the production of evidence for the purposes of accreditation and any evidence gathered for the purposes of accreditation may be used to demonstrate achievement of the *Standards* through NSAP.

Ultimately, NSAP is a resource to promote both continuous quality improvement and accreditation in the sector.

Peer review

The optional peer review process incorporates an expert 'outsider' perspective to validate the self-assessment undertaken by the service.

Peer reviewers work with services to endorse the self-assessment rating and confirm the process undertaken meets NSAP requirements.

¹ The Standards for providing quality palliative care for all Australians, 4th Edition, Palliative Care Australia, 2005.