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20 February 2012

2409/12

Australian Commission on Safety and Quality in Health Care GPO Box 5480 SYDNEY NSW 2001

Email: goals@safeyandquality.gov.au

Dear Sir/Madam

## Australian Safety and Quality Goals for Health Care

On behalf of Royal College *of* Nursing, *Australia* (RCNA), I am writing to submit feedback RCNA members have provided in response to the Commission's Consultation Paper: *Australian Safety and Quality Goals for Health Care*.

RCNA is the peak professional organisation for nurses in Australia. RCNA represents nurses across all areas of practice throughout Australia. RCNA has members in all states and territories of Australia, and internationally. A not-for-profit organisation, RCNA provides a voice for nursing by advocating on health issues that affect nurses and the community. With representation on government committees and health advisory bodies, RCNA is recognised as a key centre of influence in the health policy arena in Australia. When health policy decisions are made, RCNA presents a professional nursing perspective, independent of political allegiance.

In addition to the brief member responses to the Consultation Paper questions that are included below, RCNA representatives with relevant nursing expertise and experience will be participating in the Commission's scheduled consultation workshops.

RCNA members provided the following comments in response to the Consultation Paper questions:

Q1. How do you think national safety and quality goals could add value to your existing efforts to improve the safety and quality of care?

RCNA members suggest the goals need to be inculcated through to direct clinical care in order to have relevancy and impact.

Q2. Do you agree with the topics that have been included as Goals and priority areas? Are there other areas that should be considered?

RCNA members agree with the topics that have been included as Goals and priority areas. In terms of other areas, they suggest pain management be considered for inclusion as it is an issue of central importance across many aspects of health care.

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Q3. What do you think about the specificity of the Goals and priority areas? Are they too broad or specific?

As noted above, members state that to have value the goals need to be relevant at the clinical level and, therefore, need to be suitably broad to facilitate compliance across varying health care settings. They stress that the goals need to support the implementation of direct improvement to clinical care and avoid encouraging the diversion of resources to compliance management processes.

Q4. Do you think that there should be specific targets attached to the Goal or priority area? If so, what form should such a target take?

While members raised concerns that specific targets may render the goals irrelevant in some health settings, it was suggested that the targets could include:

- review of length of stay and impact of pain management post surgery
- review of improved functional status
- review of documentation of pain scores (rest and movement) on observation charts.

RCNA congratulates the Commission on progressing this quality and safety initiative and we look forward to staying abreast of future developments.

Yours sincerely

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