The Standards
Review

Mapping:

Health and Disability Services Standards (NZS 8134:2008)

Fertility Services Standard (NZS 8181:2007)

Home and Community Support Sector Standard (NZS 8158:2012)

July 2019

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## Purpose

The purpose of this document is to compare three standards – the Health and Disability Services Standards (NZS 8134:2008), Fertility Services Standard (NZS 8181:2007), and Home and Community Support Sector Standard (NZS 8158:2012). The aim being to consider the duplication (and differences) across the three standards.

## Background

The Health and Disability Services (Safety) Act 2001 (the Act) prescribes the requirement to review the *relevant standards* at least every four years. The relevant standards in terms of the Act are the Health and Disability Services Standards (NZS 8134:2008) and the Fertility Services Standard (NZS 8181:2007).

In 2017 an initial review was undertaken to determine if the relevant standards required amendment/review to meet contemporary health practice. At this time the Home and Community Health Association (HCHA) reported interest in having the Home and Community Support Sector Standard (NZS 8158:2012) considered as part of the review of the relevant standards.

 For the purpose of this document ‘the standards’ means:

* The Health and Disability Services Standards (NZS 8134:2008) (HDSS)
* Fertility Services Standard (NZS 8181:2007) (FSS)
* Home and Community Support Sector Standard (NZS 8158:2012) (HCSS)

## The standards

The standards are organised into ‘parts’ i.e. Consumer rights, organisational management, etc. Each part is made up of a number of ‘standards’. To avoid confusion, these standards will be referred to as ‘outcome statements’. As seen in Diagram 1 there are 57 outcome statements in the HDSS, 42 outcome statements in FSS, and 31 in HCSS.

Diagram 1: The Standards

 

## Mapping methodology

The mapping approach has primarily compared outcome statements across the three standards, except when determining a ‘partial match’ which looked at criteria contained within each outcome statement. Appendix 1 shows the completed mapping.

A pragmatic approach to this mapping has been taken with the intent of offering an indication of high level synergies between the standards, and it is acknowledged in some case there may be a ‘better fit’ than that presented in this document.

Three terms have been used to map the standards:

1. Exact match - the outcome statements are essentially the same

|  |  |
| --- | --- |
| **HDSS** | 1.1.3: Independence, Personal Privacy, Dignity, And Respect Consumers are treated with respect and receive services in a manner that has regard for their dignity, privacy, and independence |
| **FSS** | 1.5: Personal Privacy and Dignity The personal privacy and dignity of the consumer is respected and met during service provision |
| **HCSS** | 1.2: Individual Privacy, Dignity and Respect Consumers are treated with respect and receive services in a manner that has regard for their dignity, privacy, confidentiality, and independence |

1. Partial match - the outcome statements either:
	1. ‘loosely’ align

|  |  |
| --- | --- |
| **HDSS** | 1.1.9: Communication Service providers communicate effectively with consumers and provide an environment conducive to effective communication. |
| **FSS** | 1.6: Consumer Information Consumers receive information that is accurate, timely and in formats appropriate to the consumer. |
| **HCSS** | 1.6: Communication in a Manner that the Consumer can understandInformation is communicated to consumers in a manner that the consumer can understand. |

* 1. OR an outcome statement can be mapped to criteria in one or both of the other two standards:

|  |  |
| --- | --- |
| **HDSS** | Standard 1.1.10: Informed Consent. Consumers and where appropriate their family/whānau of choice are provided with the information they need to make informed choices and give informed consent. |
| **FSS** | Standard 1.7: Informed Consent: Consumer consent is obtained in line with the requirements of the Code of Health and Disability Services Consumers’ Rights and the principles of the Human Assisted Reproductive Technology Act. |
| **HCSS** | Standard 1.1: Consumer Rights Under Legislation: Consumers receive services in accordance with their rights – match at criterion levelConsumers have the right to make an informed choice and give informed consent to actively participate in decision making and in support service delivery. |

1. No match: outcome statements do not appear across the three standards. For example, HDSS and HCSS have a standard relating to the recognition of pacific people’s values and beliefs, however FSS do not. This is reported as ‘no match’.

## Part 1: Consumer rights

Part 1: *Consumer rights* appears in the three standards, each containing a different number of outcome statements – refer Diagram 1.

### Exact match

Five outcome statements were considered to be an exact match within Part 1: *Consumer rights* – see Table 1. The outcome statements relate to consumer rights, being treated with respect, recognition of Maori values and beliefs, recognition of individual’s values and beliefs and complaints management.

Table 1: Consumer rights – exact match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 1.1.1: Consumer Rights during Service Delivery  | 1.1: Consumer Rights during Service Delivery | 1.1: Consumer Rights under Legislation |
| 1.1.3: Independence, Personal Privacy, Dignity, and Respect | 1.5: Personal Privacy and Dignity | 1.2: Individual Privacy, Dignity and Respect |
| 1.1.4: Recognition of Māori Values and Beliefs | 1.2: Tāngata Whenua | 1.4: Recognition of Maori Values and Beliefs |
| 1.1.6: Recognition and Respect of the Individual's Culture, Values, and Beliefs | 1.3: Recognition of Individual Values and Beliefs | 1.3: Individual Values and Beliefs Respected |
| 1.1.13: Complaints Management | 2.5: Complaints Management | 1.9: Complaints |

### Partial match

There are five HDSS outcome statements that partially match to FSS and/or HCSS. Of these, three of the five HDSS outcome statements map to *criteria* contained within 1.1 Consumer Rights during Service Delivery of FSS and 1.1 Consumer rights under legislation in HCSS - see Table 2.

Table 2: Consumer rights – partial match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 1.1.2: Consumer Rights during Service Delivery [Consumers are informed of their rights] | 1.1: Consumer Rights during Service Delivery (**criterion)** | 1.1: Consumer Rights Under Legislation (**criterion)** |
| 1.1.7: Discrimination | 1.1: Consumer Rights during Service Delivery (**criterion)**  | 1.7: Freedom from Abuse or Neglect |
| 1.1.9: Communication | 1.6: Consumer Information | 1.6: Communication in a Manner that the Consumer can understand |
| 1.1.10: Informed Consent | 1.7: Informed Consent | 1.1: Consumer Rights under Legislation (**criterion)** |
| 1.1.11: Advocacy and Support | 1.1: Consumer Rights during Service Delivery (**criterion)** | 1.1: Consumer Rights under Legislation (**criterion)** |

### No match

There are ten outcome statements across the three standards that do not match (Table 3). Note that in HDSS outcome statement 1.1.5 (Recognition of Pacific Values and Beliefs) is a match to HCSS 1.5 of the same name, however as there is no equivalent in FSS this is reported as ‘no match’.

Table 3: Consumer rights - no match

|  |  |
| --- | --- |
| **Standard** | **No match – outcome statements** |
| HDSS  | 1.1.5: Recognition of Pacific Values and Beliefs * HCSS: 1.5: Recognition of Pacific People’s Values and Beliefs

1.1.8: Good Practice1.1.12: Links with Family/Whānau And Other Community Resources  |
| FSS | 1.4: Consumer Confidentiality1.8: Health and Well-being of Offspring as a Result of Reproductive Technologies 1.9: Right to Know One's Genetic Origins1.10: Donation and Information Giving1.11: Donor's Rights and Responsibilities |
| HCSS | 1.5 Recognition of Pacific People’s Values and Beliefs* HDSS 1.1.5: Recognition of Pacific Values and Beliefs

1.8: Consumers' Belongings, Property, and Finances are Respected and Protected |

## Part 2: Organisational management

Part 2: *Organisational management* also appears in each of the three standards.

### Exact match

Six outcome statements matched within Part 2: *Organisational management* noting HDSS 1.2.7 has been mapped to HCSS 3.1 and 3.2; and HDSS 1.2.9 to FSS 2.11 and 2.12 – refer Table 4. The matched outcome statements cover governance, service management, quality and risk systems, and adverse event reporting, human resource management and consumer information.

Table 4: Organisational management – exact match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 1.2.1: Governance | 2.1: Governance | 2.1: Governance |
| 1.2.2: Service Management | 2.6: Service Management | 2.2: Service Management |
| 1.2.3: Quality and Risk Management Systems | 2.2: Quality and Risk Management Systems | 2.3: Quality and Risk Management |
| 1.2.4: Adverse Event Reporting | 2.4: Exception Reporting | 2.4: Adverse Event Reporting and Resolution |
| 1.2.7: Human Resource Management | 2.8: Human Resource Management | 3.1: Recruitment 3.2: Orientation, Induction, Ongoing Development, and Competency |
| 1.2.9: Consumer Information Management Systems | 2.11: Consumer Information Management System 2.12: Recording Systems | 2.6: Consumer Information Management Systems |

### Partial match

There are no outcome statements that have been reported as a partial match.

### No match

Table 5 shows the eight outcomes statements that do not match across the standards - noting in order to match the outcome statement (and/or criteria) need to match across the three standards.

Table 5: Organisation management – no match

|  |  |
| --- | --- |
| **Standard** | **No match – outcome statements** |
| HDSS  | 1.2.5: Consumer Participation1.2.6: Family/Whānau Participation1.2.8: Service Provider Availability * FSS 2.9: Service Provider Availability
 |
| FSS | 2.3: Occupational Health and Safety * HCSS 3.3: Health and Safety

2.7: Design and Implementation of Services Using New Assisted Reproductive Technology2.9: Service Provider Availability * HDSS 1.2.8: Service Provider Availability

2.10: Advertising and Marketing Strategies |
| HCSS | Standard 3.3: Health and Safety * FSS: 2.3 Occupational Health and Safety
 |

## Part 3: Continuum of service delivery

Outcome statements relating to service delivery are included in each of the standards, with HCSS recording these in Part 4 (Service Delivery), while HDSS and FSS record in Part 3 – refer Diagram 1.

### Exact match

Four outcome statements within HDSS and FSS have been matched to three outcome statements in HCSS. As shown in Table 6 HCSS has an outcome statement that considers entry to and exit from services, while HDSS and FSS have dedicated outcome statements for entry and exit.

Table 6: Continuum of service delivery – exact match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 1.3.1: Entry to Services 1.3.10: Transition, Exit, Discharge, Or Transfer  | 3.1: Entry to Services3.9: Exit, Discharge or Transfer | 2.5: Entry to and Exit from Services |
| 1.3.8: Evaluation  | 3.8: Clinical Review | 4.11: Review of Service Delivery |
| 1.3.12: Medicine Management  | 3.11: Medicines, Therapeutic Goods and Medical Devices Management  | 4.6: Medicine Management |

### Partial match

One outcome statement has been partially matched across the three standards, relating to service delivery.

Table 7: Continuum of service delivery – partial match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 1.3.6: Service Delivery/Interventions  | 3.5: Treatment Provision  | 4.5: Implementation of Individual Service Plan |

### No match

There are 22 outcome statements that do not easily match across the standards. This is the most significant variance seen so far as shown in Table 8 and when reviewing the outcome statements highlight differences between the different service types.

Table 8: Continuum of service delivery – no match

| **Standard** | **No match – standard outcome statements** |
| --- | --- |
| HDSS  | 1.3.2: Declining Referral/Entry to Services * FSS 3.2: Declining Entry to Services

1.3.3: Service Provision Requirements1.3.4: Assessment * HCSS 4.1 Service Agreement

1.3.5: Planning* HCSS 4.4: Service Delivery Planning

1.3.7: Planned Activities1.3.9: Referral to Other Health and Disability Services (Internal and External) 1.3.11: Use of Electroconvulsive Therapy 1.3.13: Nutrition, Safe Food, And Fluid Management * HCSS: 4.9: Nutrition and Safe Food Management
 |
| FSS | 3.2: Declining Entry to Services* HDSS 1.3.2: Declining Referral/Entry to Services

3.3: Donated Gametes and Embryos are Safe and Fit for Purpose3.4: Identification processes3.6: Safety of ART Treatment3.7: Day-stay Procedures3.10: Evaluation [Future consumers benefit from the review and evaluation of service delivery] |
| HCSS | 4.1: Service Agreement* HDSS 1.3.4 Assessment

4.2: Promoting and Supporting Independence4.3: Links with Other Groups4.4: Service Delivery Planning* HDSS 1.3.5 Planning

4.8: Equipment, Aids and Enablers4.9: Nutrition and Safe Food Management* HDSS 1.3.13: Nutrition, Safe Food, And Fluid Management

4.10: Skin Integrity4.12: Challenging Behaviours |

## Part 4: Safe and appropriate environment

This part of the HDSS and FSS pertains to the environment that health services are being delivered from. There is no equivalent part within the HCSS.

### Exact match

One outcome statement is a match within this part of the standards. This relates to essential and emergency services.

Table 9: Safe and appropriate environment – exact match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 1.4.7: Essential, Emergency, And Security Systems | 4.6: Essential, Emergency and Security Systems | 2.7: Essential and Emergency Systems |

### Partial match

There are no partially matched outcome statements across the standards.

### No match

There are 13 outcome statements that could not be matched across the standards. This is of no surprise as HCSS services are provided in an individual’s home. There are four outcome statements that match across HDSS and FSS (management of waste, facility specifications, cleaning and laundry and natural light.

Table 10: Safe and appropriate environment – no match

|  |  |
| --- | --- |
| **Standard** | **No match – standard outcome statements** |
| HDSS  | 1.4.1: Management Of Waste And Hazardous Substances * FSS 3.13: Management of Waste and Hazardous Substances

1.4.2: Facility Specifications* FSS 4.2: Facility and Equipment Specifications and Maintenance

1.4.3: Toilet, Shower, And Bathing Facilities 1.4.4: Personal space/ bed areas1.4.5: Communal Areas For Entertainment, Recreation, And Dining1.4.6: Cleaning And Laundry Services* FSS 4.5: Cleaning and Laundry Services

1.4.8: Natural Light, Ventilation, And Heating:* FSS: 4.3: Natural Light, Ventilation and Heating
 |
| FSS | 3.13: Management of Waste and Hazardous Substances* HDSS 1.4.1: Management of Waste and Hazardous Substances

4.1: Physical Privacy4.2: Facility and Equipment Specifications and Maintenance* HDSS 1.4.2: Facility Specifications

4.4: Reception, Waiting and Other Public Areas4.5: Cleaning and Laundry Services* HDSS 1.4.6: Cleaning and Laundry Services

4.3: Natural Light, Ventilation and Heating* HDSS 1.4.8: Natural Light, Ventilation, And Heating
 |
| HCSS | Nil |

## Restraint Minimisation and Safe Practice (RMSP)

There are no matches (or partial matches) across the RMSP outcome statements. It is noted HCSS outcome statement 4.12: Challenging Behaviours links to RMSP, however is not considered a match. The outcomes statements as listed in HDSS are in Table 11.

Table 11: RMSP

|  |  |
| --- | --- |
| Restraint Minimisation: Services demonstrate that the use of restraint is actively minimised | 2.1.1 Services demonstrate that the use of restraint is actively minimised  |
| Safe Restraint Practice | 2.2.1: Restraint approval and processes2.2.2: Assessment 2.2.3: Safe Restraint Use2.2.4: Evaluation2.2.5: Restraint Monitoring and Quality Review |
| Seclusion | 2.3.1: Safe Seclusion Use2.3.2: Approved Seclusion Rooms |

## Infection Prevention and Control

Each of the standards includes infection prevention and control (IPC) practices. In HDSS there are six outcome statements that cover the IPC programme and its implementation, policy, education, surveillance, and antimicrobial use. In the FSS and HCSS infection control is covered within one outcome statement.

For the purpose of this high level mapping the HDSS IPC outcome statements 3.1 through 3.4 are considered to be a partial match with FSS and HCSS, while outcome statements 3.5 (surveillance) and 3.6 (antimicrobial usage) are considered to not match – see tables 12 and 13.

Table 12: Infection prevention and control – partial match

|  |  |  |
| --- | --- | --- |
| **Health and Disability Services Standards**  | **Fertility Services Standard**  | **Home and community support sector Standard**  |
| 3.1: Infection control management3.2: Implementing the infection control programme3.3: Policies and procedures3.4: Education | Standard 3.12: Infection Control Management | Standard 4.7: Infection Prevention and Control |

Table 13: Infection prevention and control – no match

|  |  |
| --- | --- |
| **Standard** | **No match – standard outcome statements** |
| HDSS  | 3.5 IPC Surveillance3.6 ICP Antimicrobial usage |

## Summary

This mapping exercise has shown between 28% (HDSS) and 55% (HCSS) of all outcome statements can be matched across the standards, and between 35% (HCSS) and 54% (HDSS) could not be matched – refer Table 13.

Table 14: Matched outcome statements across the standards

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Standard** | **No. Outcome Statements** | **Match** | **Partial Match**  | **No Match** |
| HDSS | 57 | 16 (28%) | 10 (18%) | 31 (54%) |
| FSS | 42 | 18 (43%) | 3 (7%) | 21 (50%) |
| HCSS | 31 | 17 (55%) | 3 (10%) | 11 (35%) |

When considering the overall picture, it could be argued that there is little synergy between the standards, however when looking at the number of matches across each part a slightly different picture emerges. Table 14 shows that 50-70% of the outcome statements within Part 1 (Consumer Rights) and Part 2 (Organisational Management) match. This increased to over 61% if the matched and partially matched outcome statements are combined.

Table 15: Outcome statements Parts 1 & 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Standard** | **Consumer Rights & Organisational Management** | **Match** | **Partial Match** | **No Match** |
| HDSS | 22 | 11 (50%) | 5 (23%) | 6 (27%)  |
| FSS | 23 | 12 (52%) | 2 (9%) | 9 (39%) |
| HCSS | 17*[[1]](#footnote-1)* | 12 (70%) | 2 (12%)  | 3 (18%)  |

The most significant variation between the standards is seen within Part 3 (Continuum of Service Delivery) with a total of 22 outcome statements across the three standards not matching. It is assumed that this accounts for the technical aspects of fertility services, and the nature of home based services[[2]](#footnote-2).

## Opportunities

This mapping presents two options for to consider as this review progresses:

1. Retain the current three standards (HDSS, FSS, HCSS) in their current form
2. Develop modules – grouping outcome statements relevant to all services where synergies exist and develop technical/ service specific outcome statements where alignment does not exist.

Diagram 2 highlights what a modular approach could look like. The current Parts as outlined in this document have been renamed with no particular intent other than to invite the creation of a new vision. Module 1 – the people and their rights - could contain two clusters of outcome statements, one that applies to all service types and one that relates to fertility services only. The latter capturing the rights of offspring resulting from reproductive technologies, and donors for examples. Module 2 – staff and structure – could similarly contain two clusters of outcome statements. Variation surfaces when moving to Module 3 – the services I receive – with clusters of outcome statements for the various service types.

This concept can be further considered as the outcomes from the scoping workshops present.

Diagram 2: Example of a possible structure for revised standards



## Appendix 1: Mapping the Standards

| PART 1: CONSUMER RIGHTS | **Exact Match** | **Partial** | **No Match** |
| --- | --- | --- | --- |
| HDSS | 1.1.1: Consumer Rights During Service Delivery HDSS(C)S.2008:1.1.1): Consumers receive services in accordance with consumer rights legislation. | **√** |  |  |
|  | FSS | 1.1: Consumer Rights during Service Delivery: Consumers receive services in accordance with consumer rights legislation. |  |  |  |
|  | HCSS | 1.1: Consumer Rights under Legislation: Consumers receive services in accordance with their rights. |  |  |  |
| HDSS | 1.1.2: Consumer Rights during Service Delivery (HDS(C) S.2008:1.1.2): Consumers are informed of their rights. |  | **√** |  |
| FSS | 1.1: Consumer Rights during Service Delivery: Consumers receive services in accordance with consumer rights legislation – match at criterion level |
| HCSS | 1.1: Consumer Rights under Legislation: Consumers receive services in accordance with their rights – match at criterion level |
| HDSS | 1.1.3: Independence, Personal Privacy, Dignity, and Respect (HDS©S.2008:1.1.3): Consumers are treated with respect and receive services in a manner that has regard for their dignity, privacy, and independence.  | **√** |  |  |
| FSS | 1.5: Personal Privacy and Dignity: The personal privacy and dignity of the consumer is respected and met during service provision |
| HCSS | 1.2: Individual Privacy, Dignity and Respect: Consumers are treated with respect and receive services in a manner that has regard for their dignity, privacy, confidentiality, and independence |
| HDSS | 1.1.4: Recognition of Māori Values and Beliefs (HDS©S.2008:1.1.4): Consumers who identify as Māori have their health and disability needs met in a manner that respects and acknowledges their individual and cultural, values and beliefs | **√** |  |  |
| FSS | 1.2: Tāngata Whenua: Consumers who identify as Māori have their health and disability needs met in a manner that respects and acknowledges their individual values and beliefs. |
| HCSS | 1.4: Recognition of Maori Values and Beliefs: Māori consumers have their health and disability needs met in a manner that respects and acknowledges their individual and cultural values and beliefs. |
| HDSS | 1.1.5: Recognition of Pacific Values and Beliefs (HDS©S.2008:1.1.5): Pacific consumers have their health and disability needs met in a manner that respects and acknowledges their individual and cultural, values and beliefs. |  |  | **√** |
| FSS | No match |
| HCSS | 1.5: Recognition of Pacific People’s Values and Beliefs: Pacific consumers have their health and disability needs met in a manner that respects and acknowledges their individual and cultural values and beliefs. |
| HDSS | 1.1.6: Recognition and Respect of the Individual’s Culture, Values, And Beliefs (HDS©S.2008:1.1.6): Consumers receive culturally safe services which recognise and respect their ethnic, cultural, spiritual values, and beliefs | **√** |  |  |
| FSS | 1.3: Recognition of Individual Values and Beliefs: Consumers receive services in a manner that recognises their cultural and individual values and beliefs. |
| HCSS | 1.3: Individual Values and Beliefs Respected: Consumers receive culturally safe services which recognise and respect their ethnic, cultural, and spiritual values and beliefs |
| HDSS | 1.1.7: Discrimination (HDS©S.2008:1.1.7): Consumers are free from any discrimination, coercion, harassment, sexual, financial, or other exploitation |  | **√** |  |
| FSS | 1.1: Consumer Rights During Service Delivery: Consumers receive services in accordance with consumer rights legislation – match at criterion level (1.1.8) |
| HCSS | 1.7: Freedom from Abuse or Neglect: Consumers are free from any discrimination, coercion, harassment, sexual, financial, or other exploitation, abuse (physical, psychological, sexual, or financial), or neglect. |
| HDSS | 1.1.8: Good Practice (HDS©S.2008:1.1.8): Consumers receive services of an appropriate  |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.1.9: Communication (HDS(C)S.2008:1.1.9): Service providers communicate effectively with consumers and provide an environment conducive to effective communication. |  | **√** |  |
| FSS | 1.6: Consumer Information: Consumers receive information that is accurate, timely and in formats appropriate to the consumer. |
| HCSS | 1.6: Communication in a Manner that the Consumer can understand: Information is communicated to consumers in a manner that the consumer can understand |
| HDSS | 1.1.10: Informed Consent (HDS(C)S.2008:1.1.10): Consumers and where appropriate their family/whānau of choice are provided with the information they need to make informed choices and give informed consent. |  | **√** |  |
| FSS | 1.7: Informed Consent: Consumer consent is obtained in line with the requirements of the Code of Health and Disability Services Consumers’ Rights and the principles of the Human Assisted Reproductive Technology Act. |
| HCSS | 1.1: Consumer Rights Under Legislation: Consumers receive services in accordance with their rights – match at criterion level |
| HDSS | 1.1.11: Advocacy and Support (HDS(C)S.2008:1.1.11): Service providers recognise and facilitate the right of consumers to advocacy/support persons of their choice. |  | **√** |  |
| FSS | 1.1: Consumer Rights During Service Delivery: Consumers receive services in accordance with consumer rights legislation – match at criterion level |
| HCSS | 1.1: Consumer Rights Under Legislation: Consumers receive services in accordance with their rights – match at criterion level |
| HDSS | 1.1.12: Links with Family/Whānau and Other Community Resources (HDS(C)S.2008:1.1.12): Consumers are able to maintain links with their family/whānau and their community. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.1.13: Complaints Management (HDS(C)S.2008:1.1.13): The right of the consumer to make a complaint is understood, respected, and upheld | **√** |  |  |
| FSS | 2.5: Complaints Management: The organisation improves its services by formally acting on complaints from consumers and family/whānau. |
| HCSS | 1.9: Complaints: The consumer's right to make a complaint is understood, respected, and upheld. |
| HDSS | No match |  |  | **√** |
| FSS | 1.4: Consumer Confidentiality: Consumer confidentiality is maintained at all times |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 1.8: Health and Well-being of Offspring as a Result of Reproductive Technologies: The health and well-being of offspring born as a result of fertility services shall be an important consideration in all decisions about the services |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 1.9: Right to Know One's Genetic Origins: Donor offspring should be made aware of their genetic origins and should be able to access information about their origins. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 1.10: Donation and Information Giving: Gamete and embryo donation takes place in a way that protects the interests and health of donors, consumers and offspring. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 1.11: Donor's Rights and Responsibilities |
| HCSS | No match |
|  HDSS | No match |  |  | **√** |
| FSS | No match |
| HCSS | 1.8: Consumers' Belongings, Property, and Finances are Respected and Protected: Consumers’ belongings, property, and finances are respected at all times. |

| PART 2: ORGANISATIONAL MANAGEMENT | **Exact Match** | **Partial** | **No Match** |
| --- | --- | --- | --- |
| HDSS | 1.2.1: Governance (HDS(C)S.2008:1.2.1): The governing body of the organisation ensures services are planned, coordinated, and appropriate to the needs of consumers | **√** |  |  |
| FSS | 2.1: Governance: Efficient and effective governance ensures services are planned, coordinated and appropriate to the needs of the consumer group. |
| HCSS | 2.1: Governance: Consumers receive services that are planned, co-ordinated, and appropriate to their needs. |
| HDSS | 1.2.2: Service Management (HDS(C)S.2008:1.2.2): The organisation ensures the day-to-day operation of the service is managed in an efficient and effective manner which ensures the provision of timely, appropriate, and safe services to consumers. | **√** |  |  |
| FSS | 2.6: Service Management: The day to day operation of the service is managed in an efficient and effective manner which ensures the provision of timely, appropriate and safe services to consumers. |
| HCSS | 2.2: Service Management: Consumers receive timely, appropriate, and safe services through efficient and effective service management. |
| HDSS | 1.2.3: Quality and Risk Management Systems: (HDS(C)S.2008:1.2.3): The organisation has an established, documented, and maintained quality and risk management system that reflects continuous quality improvement principles. | **√** |  |  |
| FSS | 2.2: Quality and Risk Management Systems: The organisation has an established, documented and maintained quality and risk management system that reflects continuous quality improvement principles to better meet the needs of consumers and service providers |
| HCSS | 2.3: Quality and Risk Management: Consumers receive services that reflect continuous quality improvement principles through the organisation having an established, documented, and maintained quality and risk management system. |
| HDSS | 1.2.4: Adverse Event Reporting (HDS(C)S.2008:1.2.4): All adverse, unplanned, or untoward events are systematically recorded by the service and reported to affected consumers and where appropriate their family/whānau of choice in an open manner. | **√** |  |  |
| FSS | 2.4: Exception Reporting: The organisation systematically collects, reviews and acts on all adverse, unplanned and untoward events to improve its services to consumers. |
| HCSS | 2.4: Adverse Event Reporting and Resolution: All adverse unplanned or untoward events are systematically recorded and reported to affected consumers and where appropriate their family/whānau in an open manner. |
| HDSS | 1.2.5: Consumer Participation (HDS(C)S.2008:1.2.5): Consumers are involved in the planning, implementation, and evaluation at all levels of the service to ensure services are responsive to the needs of individuals |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.2.6: Family/Whānau Participation (HDS(C)S.2008:1.2.6): Family/whānau of choice are involved in the planning, implementation, and evaluation of the service to ensure services are responsive to the needs of individuals. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.2.7: Human Resource Management (HDS(C)S.2008:1.2.7): Human resource management processes are conducted in accordance with good employment practice and meet the requirements of legislation. | **√** |  |  |
| FSS | 2.8: Human Resource Management: The organisation manages its human resources to ensure competent staff deliver a safe and effective service for consumers. |
| HCSS | 3.1: Recruitment: Consumers receive services that are based on good employment practices and relevant legislation.3.2: Orientation, Induction, Ongoing Development, and Competency: Consumers receive services from service providers who are trained and assessed as competent to provide services. |
| HDSS | Standard 1.2.8: Service Provider Availability (HDS(C)S.2008:1.2.8): Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers. |  |  | **√** |
| FSS | Standard 2.9: Service Provider Availability: Consumers receive timely, appropriate and safe service from suitably qualified/skilled and/or experienced service providers |
| HCSS | No match |
| HDSS | Standard 1.2.9: Consumer Information Management Systems (HDS(C)S.2008:1.2.9): Consumer information is uniquely identifiable, accurately recorded, current, confidential, and accessible when required. | **√** |  |  |
| FSS | Standard 2.11: Consumer Information Management System: An accurate, accessible, confidential and secure record that promotes efficient and effective delivery of treatment and/or support is maintained for each consumer receiving the service. The detail of information required to manage consumer records is identified relevant to the service. On closure of a fertility service, the integrity of information and stored gametes and embryos are maintained. See Appendix D.Standard 2.12: Recording Systems: Consumer records are accurate, reliable, authorised and comply with current legislative and/or regulatory requirements, and the needs of consumers |
| HCSS | Standard 2.6: Consumer Information Management Systems: Consumer information is uniquely identifiable, accurately recorded, current, confidential, and accessible when required. |
| HDSS | No match |  |  | **√** |
| FSS | 2.3: Occupational Health and Safety: The organisation has a documented and maintained occupational safety and health policy to protect consumers and service providers. |
| HCSS | 3.3: Health and Safety: Consumers receive services that promote the health and safety of the consumer and service provider |
| HDSS | No match |  |  | **√** |
| FSS | 2.7: Design and Implementation of Services Using New Assisted Reproductive Technology: New assisted reproductive techniques are well-designed to maximise the safety and well-being of consumers and their children |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 2.10: Advertising and Marketing Strategies: Consumers receive accurate and balanced advertising and marketing information about the service. |
| HCSS | No match |

| PART 3: CONTINUUM OF SERVICE DELIVERY | **Exact Match** | **Partial** | **No Match** |
| --- | --- | --- | --- |
| HDSS |  1.3.1: Entry to Services (HDS(C)S.2008:1.3.1): Consumers' entry into services is facilitated in a competent, equitable, timely, and respectful manner, when their need for services has been identified | **√** |  |  |
| FSS |  3.1: Entry to Services: Consumers are considered for entry to ART treatment, including specialist consultation, diagnosis, and scoring for eligibility, in an equitable and timely manner. |
| HCSS | 2.5: Entry to and Exit from Services: Consumers’ entry into and exit from services is facilitated in an equitable, timely, and respectful manner. |
| HDSS | 1.3.2: Declining Referral/Entry to Services (HDS(C)S.2008:1.3.2): Where referral/entry to the service is declined, the immediate risk to the consumer and/or their family/whānau is managed by the organisation, where appropriate |  |  | **√** |
| FSS | 3.2: Declining Entry to Services: Where entry to the service is declined, consumers receive adequate support and information regarding the reasons for the service being declined. |
| HCSS | No match |
| HDSS |  1.3.3: Service Provision Requirements (HDS(C)S.2008:1.3.3): Consumers receive timely, competent, and appropriate services in order to meet their assessed needs and desired outcome/goals |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS |  1.3.4: Assessment (HDS(C)S.2008:1.3.4)Consumers' needs, support requirements, and preferences are gathered and recorded in a timely manner. |  |  | **√** |
| FSS | No match |
| HCSS | 4.1: Service Agreement: The consumer, organisation, and service provider have a full understanding of and agree to the services to be provided. |
| HDSS | 1.3.5: Planning (HDS(C)S.2008:1.3.5): Consumers' service delivery plans are consumer focused, integrated, and promote continuity of service delivery. |  |  | **√** |
| FSS | No match |
| HCSS | 4.4: Service Delivery Planning: Consumers have an individual service plan that describes their goals, support needs, and requirements |
| HDSS | 1.3.6: Service Delivery/Interventions (HDS(C)S.2008:1.3.6): Consumers receive adequate and appropriate services in order to meet their assessed needs and desired outcomes. |  | **√** |  |
| FSS | 3.5: Treatment Provision: Consumers receive timely, competent and appropriate treatment.  |
| HCSS | 4.5: Implementation of Individual Service Plan: Consumers’ goals and support requirements are met through provision of services. |
| HDSS | 1.3.7: Planned Activities (HDS(C)S.2008:1.3.7): Where specified as part of the service delivery plan for a consumer, activity requirements are appropriate to their needs, age, culture, and the setting of the service. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS |  1.3.8: Evaluation (HDS(C)S.2008:1.3.8): Consumers' service delivery plans are evaluated in a comprehensive and timely manner. | **√** |  |  |
| FSS | 3.8: Clinical Review: Service delivery for individuals is evaluated in a comprehensive and timely manner. |
| HCSS | 4.11: Review of Service Delivery: Consumers are supported to achieve their goals through regular monitoring and review of service delivery. |
| HDSS |  1.3.9: Referral to Other Health and Disability Services (Internal and External) (HDS(C)S.2008:1.3.9): Consumer support for access or referral to other health and/or disability service providers is appropriately facilitated, or provided to meet consumer choice/needs |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.3.10: Transition, Exit, Discharge, Or Transfer (HDS(C)S.2008:1.3.10): Consumers experience a planned and coordinated transition, exit, discharge, or transfer from services. | **√** |  |  |
| FSS |  3.9: Exit, Discharge or Transfer: Consumers are appropriately advised of their options to access other health and disability services where indicated or requested. Consumers experience a planned and co-ordinated exit from services. |
| HCSS | 2.5: Entry to and Exit from Services: Consumers’ entry into and exit from services is facilitated in an equitable, timely, and respectful manner  |
| HDSS |  1.3.11: Use of Electroconvulsive Therapy (Ect) (HDS(C)S.2008:1.3.11): Consumers who are administered electroconvulsive therapy are well informed and receive it in a safe manner. (Only mental health services that provide ECT need to comply with 3.11) |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS |  1.3.12: Medicine Management (HDS(C)S.2008:1.3.12): Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines | **√** |  |  |
| FSS | 3.11: Medicines, Therapeutic Goods and Medical Devices Management: Consumers receive medicines, therapeutic goods and/or medical devices in a safe and timely manner that complies with current legislative and regulatory requirements. |
| HCSS | 4.6: Medicine Management: Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines. |
| HDSS |  1.3.13: Nutrition, Safe Food, and Fluid Management (HDS(C)S.2008:1.3.13): A consumer's individual food, fluids and nutritional needs are met where this service is a component of service delivery. |  |  | **√** |
| FSS | No match |
| HCSS | 4.9: Nutrition and Safe Food Management: The consumer’s nutrition and hydration is supported by service delivery. |
| HDSS | No match |  |  | **√** |
| FSS | 3.3: Donated Gametes and Embryos are Safe and Fit for Purpose: Gametes and embryos are safe for donation. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 3.4: Identification processes: Consumer’s gametes, embryos and consumers are correctly identified and matched at all times  |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 3.6: Safety of ART Treatment: The well-being of consumers and their children is improved by limiting the risks of ART treatment. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 3.7: Day-stay Procedures: Consumers receive timely, competent and appropriate service provision in order to meet their assessed needs. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 3.10: Evaluation: Future consumers benefit from the review and evaluation of service delivery. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | No match |
| HCSS | 4.2: Promoting and Supporting Independence: Consumers maintain their independence during the course of service delivery by being supported to exercise choice and control over their lives. |
| HDSS | No match |  |  | **√** |
| FSS | No match |
| HCSS | 4.3: Links with Other Groups: Consumers receive continuity of service through effective links with other groups. |
| HDSS | No match |  |  | **√** |
| FSS | No match |
| HCSS | 4.8: Equipment, Aids and Enablers: Consumers are supported to safely use any required or prescribed equipment, aids, or enablers. |
| HDSS | No match |  |  | **√** |
| FSS | No match |
| HCSS | 4.10: Skin Integrity: Consumers’ skin integrity is maintained. |
| HDSS | No match |  |  | **√** |
| FSS |  No match |
| HCSS | 4.12: Challenging Behaviours: Consumers with behaviours that challenge are treated with respect and receive services in a manner that has regard for their safety, dignity, privacy, and independence. [LINK: RMSP] |

| PART 4: SAFE AND APPROPRIATE ENVIRONMENT | **Exact Match** | **Partial** | **No Match** |
| --- | --- | --- | --- |
| HDSS | 1.4.1: Management of Waste and Hazardous Substances: Consumers, visitors, and service providers are protected from harm as a result of exposure to waste, infectious or hazardous substances, generated during service delivery. |  |  | **√** |
| FSS | 3.13: Management of Waste and Hazardous Substances: Consumers, visitors and service providers are protected from harm as a result of exposure to waste or hazardous substances, generated during service delivery. |
| HCSS | No match |
| HDSS | 1.4.2: Facility Specifications: Consumers are provided with an appropriate, accessible physical environment and facilities that are fit for their purpose. |  |  | **√** |
| FSS | 4.2: Facility and Equipment Specifications and Maintenance: All buildings, plant and equipment used in the provision of services are maintained in reliable and safe working order. |
| HCSS | No match |
| HDSS | 1.4.3: Toilet, Shower, and Bathing Facilities: Consumers are provided with adequate toilet/shower/bathing facilities. Consumers are assured privacy when attending to personal hygiene requirements or receiving assistance with personal hygiene requirements. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.4.4: Personal space/bed areas: Consumer are provided with adequate personal space/bed areas appropriate to the consumer group and settings |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.4.5: Communal Areas for Entertainment, Recreation, and Dining: Consumers are provided with safe, adequate, age appropriate, and accessible areas to meet their relaxation, activity, and dining needs. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 1.4.6: Cleaning and Laundry Services: Consumers are provided with safe and hygienic cleaning and laundry services appropriate to the setting in which the service is being provided. |  |  | **√** |
| FSS | 4.5: Cleaning and Laundry Services: Consumers have a clean environment and safe and hygienic laundry services. (Where this service is outsourced, a system exists to ensure compliance is achieved.) |
| HCSS | No match |
| HDSS | 1.4.7: Essential, Emergency, and Security Systems: Consumers receive an appropriate and timely response during emergency and security situations. | **√** |  |  |
| FSS | 4.6: Essential, Emergency and Security Systems: Consumers receive an appropriate and timely response during emergency and security situations. |
| HCSS |  2.7: Essential and Emergency Systems: Consumers receive an appropriate and timely response during emergency and security situations.  |
| HDSS | 1.4.8: Natural Light, Ventilation, and Heating: Consumers are provided with adequate natural light, safe ventilation, and an environment that is maintained at a safe and comfortable temperature. |  |  | **√** |
| FSS | 4.3: Natural Light, Ventilation and Heating: Consumers are provided with adequate natural light, safe ventilation and an environment that is maintained at a safe and comfortable temperature. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 4.1: Physical Privacy: The design of the physical environment promotes privacy. |
| HCSS | No match |
| HDSS | No match |  |  | **√** |
| FSS | 4.4: Reception, Waiting and Other Public Areas**:** Consumers are provided with safe, adequate, appropriate and accessible areas for waiting and are able to move freely within these areas either independently or with the assistance of one or more persons, or mobility aids. |
| HCSS | No match |

| RESTRAINT MINIMISATION & SAFE PRACTICE | **Exact Match** | **Partial** | **No Match** |
| --- | --- | --- | --- |
| HDSS | 2.1.1: services demonstrate that the use of restraint is actively minimised |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.2.1: Restraint minimisation: Services demonstrate that the use of restraint is actively minimised. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.2.2: Assessment: Services shall ensure rigorous assessment of consumers is undertaken, where indicated, in relation to use of restraint. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.2.3: Safe Restraint Use: Services use restraint safely |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.2.4: Evaluation: Services evaluate all episodes of restraint. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.2.5: Restraint Monitoring and Quality Review: Services demonstrate the monitoring and quality review of their use of restraint. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.3.1: Safe Seclusion Use: Services demonstrate that all use of seclusion is for safety reasons only. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 2.3.2: Approved Seclusion Rooms: Seclusion only occurs in an approved and designated seclusion room. |  |  | **√** |
| FSS | No match |
| HCSS | No match |

| RESTRAINT MINIMISATION & SAFE PRACTICE | **Exact Match** | **Partial** | **No Match** |
| --- | --- | --- | --- |
| HDSS | 3.1: Infection Control Management: There is a managed environment, which minimises the risk of infection to consumers, service providers, and visitors. This shall be appropriate to the size and scope of the service. |  | **√** |  |
| FSS | 3.12: Infection Control Management: Consumers, embryos, gametes and service providers are protected from preventable exposure to infection – match criterion. |
| HCSS | 4.7: Infection Prevention and Control: Consumers and service providers are protected from infection through promotion and implementation of current infection prevention and control practices – match criterion |
| HDSS | 3.2: Implementing the infection control programme: There are adequate human, physical, and information resources to implement the infection control programme and meet the needs of the organisation. |  | **√** |  |
| FSS | 3.12: Infection Control Management: Consumers, embryos, gametes and service providers are protected from preventable exposure to infection – match criterion. |
| HCSS | 4.7: Infection Prevention and Control: Consumers and service providers are protected from infection through promotion and implementation of current infection prevention and control practices – match criterion |
| HDSS | 3.3: Policies and procedures: Documented policies and procedures for the prevention and control of infection reflect current accepted good practice and relevant legislative requirements and are readily available and are implemented in the organisation. These policies and procedures are practical, safe, and appropriate/suitable for the type of service provided. |  | **√** |  |
| FSS | 3.12: Infection Control Management: Consumers, embryos, gametes and service providers are protected from preventable exposure to infection – match criterion. |
| HCSS | 4.7: Infection Prevention and Control: Consumers and service providers are protected from infection through promotion and implementation of current infection prevention and control practices – match criterion |
| HDSS | 3.4: Education: The organisation provides relevant education on infection control to all service providers, support staff, and consumers. |  | **√** |  |
| FSS | 3.12: Infection Control Management: Consumers, embryos, gametes and service providers are protected from preventable exposure to infection – match criterion. |
| HCSS | 4.7: Infection Prevention and Control: Consumers and service providers are protected from infection through promotion and implementation of current infection prevention and control practices – match criterion |
| HDSS | 3.5: Surveillance: Surveillance for infection is carried out in accordance with agreed objectives, priorities, and methods that have been specified in the infection control programme. |  |  | **√** |
| FSS | No match |
| HCSS | No match |
| HDSS | 3.6: Antimicrobial usage: Acute care and surgical hospitals will have established and implemented policies and procedures for the use of antibiotics to promote the appropriate prudent prescribing in line with accepted guidelines. The service can seek guidance from clinical microbiologists or infectious disease physicians. |  |  | **√** |
| FSS | No match |
| HCSS | No match |

1. HCSS outcome statement 2.5 Entry and Exit to Services has been mapped to HDSS and FSS Part 3 Continuum of Service Delivery and. HCSS outcome statement 2.7 Essential and Emergency Services has been mapped to HDSS Part 4 Safe and Appropriate Environment. The total count for HCSS in Part 1, 2 and 3 totals 17. [↑](#footnote-ref-1)
2. HCSS Part 3 has been included in this table as these outcome statement relate to human resource management and are a match to HDSS and FSS outcome statement 2.7 human resource management [↑](#footnote-ref-2)