

# GUIDING PRINCIPLES FOR CONDUCTING EXTERNAL ASSESSMENT

External Assessment like any other Standard Practice is guided by certain underlying principles. These principles help to make the External Assessment an effective and reliable tool for providing information on which a Hospital can act in order to improve its performance. Adherence to these principles is prerequisite for providing Accurate Scores (Area of Concern/Standard/ME wise) and providing conclusions that are relevant and sufficient.

The Six Guiding Principles for External Assessment are:

## **1. Integrity:**

Integrity is the foundation of professionalism and External Assessors being Quality Professional Should:

- i. Perform their work with honesty, diligence and responsibility.
- ii. Observe and comply with applicable legal requirements.
- iii. Demonstrate their Technical and behavioural competence while performing assessment.
- iv. Perform their work in an impartial manner, i.e. remain fair and unbiased in all their dealings.
- v. Be sensitive to any influences that may be exerted on their judgement while carrying out an assessment.

## **2. Fair presentation:**

Obligation to report truthfully and accurately.

The different Assessment Scores (Overall, Departmental, Area of Concern or Measurable element wise), Findings, conclusions and Assessment Report should reflect truthfully and accurately the Assessment activities carried out during the assessment. The communication should be truthful, accurate, objective, timely, clear and complete.

## **3. Due Professional care:**

The External Assessors are expected to exercise due diligence and judgement while conducting assessment. Assessment should be carried out with due professional care with ability to make rational judgements in any situation.

## **4. Confidentiality:**

Assessors would be gathering lot of sensitive and confidential information. It is pivotal to handle this information with care and should not be used inappropriately for personal gain or in a manner that is detrimental to the interests of patient/Hospital/Community.

## **5. Independence:**

Assessors would not be conducting assessment in the state they belong or have spent significant number of years in a state e.g. Assessor working in Punjab educated and served in Maharashtra for 15 years would not take any Assessment either in the state of Punjab or Haryana.

#### **6. Evidence based approach:**

Findings and conclusion of assessment should be verifiable.

Apart from these six basic principles, External Assessors must also keep in mind and focus on the following:

**Consumer (Patient) focus:** Care; support and services meet the needs and preferences of consumers consistent with currently accepted practice. External Assessors shall use their technical and clinical expertise to collect evidence directly from consumers, relatives and providers and include a review of care and support received, considering both the episode of care and individual components of care.

**Outcomes focus:** The context for service provision must be considered, acknowledging that outcomes can be achieved through various inputs, processes and outputs. Assessment evidence shall reflect the inputs, activities and outputs that contribute to outcomes.

**Systems and process focus:** Effective systems and processes are implemented to support the delivery of services and care. External Assessors will determine through the collection of evidence that standards of service and care and support delivery are not dependent on any one person, but rather on the systems and processes present.

**Openness and transparency:** Information is effectively communicated throughout the Assessment process. External Assessors ensure stakeholders involved in the process are fully informed.

### **CODE OF CONDUCT OF EXTERNAL ASSESSOR**

Under the code of conduct, an Assessor is required to:

1. Act professionally and accurately, and report findings in a consistent and unbiased manner and in accordance with Ministry requirements.
2. Undertake assessments in accordance with Ministry requirements, procedures and guidelines. Ministry requirements are to supersede any other requirements
3. Strive to improve upon their competence by continuing to develop their assessment skills.
4. Not enter into any activity that may be in conflict with the best interests of the Ministry or that would prevent the performance of their duties in an objective manner
5. Not accept any inducement, commission or gift or any other benefit from any interested party while conducting assessments.
6. Not communicate false, erroneous or misleading information that may compromise the integrity of any assessment.

7. Cooperate fully with any inquiry in the event of a complaint about their performance as an assessor, or any alleged breach of this code
8. Make clear to providers that the decision about certification status rests solely with the 'National Quality Assurance Advisory Committee' MoHFW. They are not able to make comment or support an appeal concerning the determination made regarding certification
9. Accept that providers have the freedom to select and change their Assessors and not to place any undue influence on providers when they are making a decision in this respect
10. Refrain from making any comments on any Assessor, NHSRC, or MoHFW.
11. Respect patients' rights during any interaction especially when assessing vulnerable populations such as those in disability or mental health services.

**\*All external Assessors are required to submit "DECLARATION OF IMPARTIALITY, CONFIDENTIALITY & INTEGRITY"**

### **COMPLIANCE AND SCORING RULE:**

All Assessors are required to put score against each and every checkpoint.

Full compliance (2 Marks)

- ❖ All Requirements in Checkpoint are Meeting
- ❖ All Tracers given in Means of verification are available
- ❖ Intent of Measurable Element is meeting

Partial compliance (1Mark)

- ❖ Some of the requirements in checkpoints are meeting
- ❖ All Least 50% of tracers in Means of verification are available
- ❖ Intent of Measurable Element is partially meeting

Non-Compliance (0 Mark)

- ❖ Most of the requirements are not meeting
- ❖ Less than 50% of tracers in Means of verification are available
- ❖ Intent of Measurable Element is not meeting
- ✓ Only option available against each checkpoint is 0, 1, or 2. There is no option of NA (Not Applicable) as customization is done by state at the time of adoption of standards.
- ✓ It is mandatory to provide justification and rationale against "Remarks" column for each partial and non-compliance i.e. scores of 0 and 1. There must be sufficient and concrete evidence for partial and non-compliances.

### COLLECTING INFORMATION AND EVIDENCE (ASSESSMENT METHODS):

Information can be collected by several methods. It would help a lot if Assessor follows a systematic approach. Halting the processes to undertake the assessment would not only disturb the workers but also take away the opportunity for the Assessor to see things as they are. Do not intervene or correct the health worker while he/she is working, unless you feel that harm will be done to the beneficiary without your intervention. Some of the commandments of Assessment are:

- Know your check list well beforehand.
- Observe by looking and listening.
- Check the available logistics and commodities.
- Go through the records and reports.
- Talk to the team and later individually to the patients, visitors and attendants.
- Assessment should be facilitative not fault finding.
- Always praise work well done before raising problems.
- If you see a problem, check to see if the staffs see the same problem.
- Analyse problems with the supervisee to gain a good understanding of the underlying causes.
- Let the supervisee suggest possible solutions. This facilitates ownership and acceptance of the solutions.
- Visit off site and undertake a rapid community survey

Complete Assessment process is based on objective and measurable evidence. Assessment evidence is defined as '*records, statements of fact or other information which are relevant to the Measurable Element and Checkpoint and is verifiable*'.

Assessors shall collect evidence using appropriate methods, including but not limited to following four methods:

1. Observation.
2. Patient interview.
3. Staff interviews.
4. Record review.

Assessors are free to use any method as deemed appropriate to obtain the score against each checkpoint. It would add objectivity and value if more than one method are used. Assessors are required to triangulate evidence where possible and at a minimum corroborate each piece of evidence they cite, to increase the reliability of their findings. The corroboration process shall include substantiation from at least two sources. Assessors shall strive to triangulate evidence as part of the corroboration process. Triangulation requires evidence to be gathered from three sources.

For objectivity sake, gather as much information as possible before giving score; especially for non-compliances and partial compliances.

Assessment is an art as well as science. The thumb rule is 'Go beyond obvious'. Every effort is to be made to get the exact, accurate, objective and verifiable information. Facilities have tendency to put things under the carpet and camouflage facts and figures.

#### **ENCOURAGE, SUPPORT, HAND HOLD, AND PROVIDE ON THE JOB TRAINING:**

External Assessment is not a 'Fault Finding' but a Fact finding exercise in a manner that help and support healthcare facility in improving their quality of healthcare service delivery. Objective is not "Policing" but "Polishing" the system. Every effort should be made to acknowledge good practices, i.e. "*Catch Them Doing Right*". Assessors are not only supposed to find out the gaps but also help the service providers in traversing them. Success of External Assessment does not depend on number of gaps identified by the team of Assessors but the number of gaps Assessors helped the facility to close. Assessors shall strive to provide On-The-Job Training, wherever feasible.

*"When we hear, we forget,*

*When we see, we remember,*

*When we do, we know"*

The above proverb sums up the importance of on the job training. Field conditions provide more realistic environment and opportunities for health workers to learn. Assessors may follow following steps in teaching a skill:

- Explain the skill or activity to be learned.
- Demonstrate the skill or activity.
- Make the participants practice the demonstrated skill or activity.
- Review the practice session and giving constructive feedback.
- Make the participants again practice the skill or activity with clients under a trainer's guidance.