



NS2.1 Short Notice Final Assessment

Final Report

Cohuna District Hospital

COHUNA, VIC

Organisation Code: 210387

Health Service Facility ID: 100055

Assessment Date: 02 December 2025

Disclaimer: The information contained in this report is based on the evidence provided by the participating organisation at the time of the accreditation survey and information that the organisation supplied through the reporting and editing process. Accreditation issued by ACHS/ACHSI does not guarantee the ongoing safety, quality or acceptability of an organisation or its services or programs, or that legislative and funding requirements are being met, or will be met.

©Copyright by The Australian Council on Healthcare Standards

All Rights Reserved

Org Name : Cohuna District Hospital
Org Code : 210387

Contents

Introduction	2
Authority to act as an Accrediting Agency.....	5
Conflicts of Interest.....	5
Assessment Team	6
Assessment Determination.....	6
Executive Summary.....	7
Assessor Findings at Final Assessment	9
Summary of Accreditation Status	12

Introduction

The Australian Council on Healthcare Standards

The Australian Council on Healthcare Standards (ACHS) is Australia's leading healthcare assessment and accreditation provider. ACHS is an independent, not-for-profit organisation dedicated to improving quality and inspiring excellence in health care. We accredit organisations according to either government standards, or our own established standards.

ACHS is approved to accredit the following standards

- National Safety and Quality Health Service (NSQHS) Standards including the Multi-Purpose Services Aged Care Module (MPS Module)
- National Safety and Quality Digital Mental Health (NSQDMH) Standards
- National Safety and Quality Primary and Community Healthcare (NSQPCH) Standards
- National Clinical Trials Governance Framework
- Royal Australian College of General Practitioners (RACGP) Standards for general practices (5th edition) and the RACGP Standards for point-of-care testing (5th edition)
- National Standards for Mental Health Services (NSMHS)
- Rainbow Tick Standards
- EQUiP Standards

Currently there are more than 1,600 healthcare organisations, including their associates, that undertake ACHS assessment and quality improvement programs. ACHS are proud to accredit the majority of all public and private hospitals in Australia.

With representation from governments, consumers and peak health bodies from throughout Australia, ACHS works with healthcare professionals, consumers, government and industry stakeholders to implement healthcare accreditation programs.

ACHS offers a variety of services including accreditation, education and training, data and benchmarking and consulting. We take a partnership approach to continuous improvement, tailored to the needs of individual services and health systems, using our expertise in accreditation, standards development and education.

Australian Commission on Safety and Quality in Health Care

The Australian Commission on Safety and Quality in Health Care (Commission) leads and coordinates national improvements in healthcare safety and quality. It works in partnership with patients, carers, clinicians, the Australian, state and territory health systems, the private sector, managers and healthcare organisations to achieve a safe, high-quality and sustainable health system.

Key functions of the Commission include developing national safety and quality standards, developing clinical care standards to improve the implementation of evidence-based health care, coordinating work in specific areas to improve outcomes for patients, and providing information, publications and resources about safety and quality.

The Commission works in four priority areas:

1. Safe delivery of health care
2. Partnering with consumers
3. Partnering with healthcare professionals
4. Quality, value, and outcomes

The Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme

Under the National Health Reform Act 2011, the Commission is responsible for the formulation of standards relating to health care safety and quality matters. This includes formulating and coordinating the Australian Health Service Safety and Quality Accreditation Scheme (the AHSSQA Scheme), which provides for the national coordination of accreditation processes.

The AHSSQA Scheme sets out the responsibilities of accrediting agencies in relation to implementation of the following safety and quality standards:

- National Safety and Quality Health Service (NSQHS) Standards including the Multi-Purpose Services Aged Care (MPS) Module
- National Safety and Quality Digital Mental Health (NSQDMH) Standards
- National Safety and Quality Primary and Community Healthcare (NSQPCH) Standards, and
- Any other set of standards that may be developed by the Commission from time to time

The National Safety and Quality Health Service (NSQHS) Standards were developed by the Commission in collaboration with the Australian Government, states and territories, the private sector, clinical experts, patients, and carers. The primary aims of the NSQHS Standards are to protect the public from harm and to improve the quality of health service provision. They provide a quality assurance mechanism that tests whether relevant systems are in place to ensure that expected standards of safety and quality are met.

There are eight NSQHS Standards, which cover high-prevalence adverse events, healthcare associated infections, medication safety, comprehensive care, clinical communication, the prevention and management of pressure injuries, the prevention of falls, and responding to clinical deterioration. Importantly, the NSQHS Standards have provided a nationally consistent statement about the standard of care consumers can expect from their health service organisations.

Rating scale definitions

Whenever the NSQHS Standards (2nd ed.) are assessed, actions are to be rated using the rating scale outline below:

Rating	Description
Met	All requirements of an action are fully met.
Met with recommendations	<p>The requirements of an action are largely met across the health service organisation, with the exception of a minor part of the action in a specific service or location in the organisation, where additional implementation is required. If there are no not met actions across the health service organisation, actions rated met with recommendations will be assessed during the next assessment cycle. Met with recommendations may not be awarded at two consecutive assessments where the recommendation is made about the same service or location and the same action. In this case an action should be rated not met.</p> <p>In circumstances where one or more actions are rated not met, the actions rated met with recommendations at initial assessment will be reassessed at the final assessment. If the action is not fully met at the final assessment, it can remain met with recommendations and reassessed during the next assessment cycle. If the organisation is fully compliant with the requirements of the action, the action can be rated as met.</p>

Org Name : Cohuna District Hospital
Org Code : 210387

Rating	Description
Not met	Part or all of the requirements of the action have not been met.
Not applicable	The action is not relevant in the service context being assessed. The Commission's advisory relating to not applicable actions for the health sector need to be taken into consideration when awarding a not applicable rating and assessors must confirm the action is not relevant in the service context during the assessment visit.

For further information, see [Fact sheet 4: Rating scale for assessment](#)

Repeat Assessment

If a health service organisation has 16 or more percent of assessed actions **rated not met and /or met with recommendations**, and /or more than 8 actions from the Clinical Governance Standard not met at initial assessment and is subsequently awarded accreditation, the organisation is required to undertake a further assessment within six months of the assessment being finalised. All actions rated not met or met with recommendations from the initial assessment will be reassessed. The aim of the reassessment is to ensure the organisation has fully embedded the necessary improvements in their safety and quality systems to maintain compliance with the NSQHS Standards. This is a one-off assessment with a remediation period of 60 business days. **All actions must be met when the assessment is finalised for the organisation to retain its accreditation.**

For further information, see [Fact Sheet 3: Repeat assessment of health service organisations](#)

Safety and Quality Advice Centre and Resources

The Advice Centre provides support for health service organisations, assessors, and accrediting agencies on NSQHS Standards implementation, the Primary and Community Healthcare Standards, the Digital Mental Health Standards, the National General Practice Accreditation (NGPA) Scheme, the National Pathology Accreditation Scheme, and the National Diagnostic Imaging Accreditation Scheme.

Telephone: 1800 304 056

Email: AdviceCentre@safetyandquality.gov.au

Further information can be found online at the *Commission's Advice Centre* via

<https://www.safetyandquality.gov.au/>

Org Name : Cohuna District Hospital
Org Code : 210387

Authority to act as an Accrediting Agency

I, Dr Karen Luxford, CEO of the Australian Council on Healthcare Standards (ACHS) declare that ACHS has the approval from the Australian Commission on Safety and Quality in Health Care to conduct assessment to the *NS2.1 Short Notice Final Assessment*. This approval is current until 31st December, 2029.

Under this authority, ACHS is authorised to assess health service organisations against the Australian Health Service Safety and Quality Accreditation Scheme.

Conflicts of Interest

I, Dr Karen Luxford, declare that ACHS has complied with Australian Commission on Safety and Quality in Health Care policy on minimising and managing conflicts of interest.

No conflicts of interest were evident as part of this assessment and no Consultants or third parties participated in this assessment.

Org Name : Cohuna District Hospital
Org Code : 210387

Assessment Team

Assessor Role	Name	Declaration of independence from health service organisation signed
Lead Assessor	Vince Gaglioti	Yes

Assessment Determination

ACHS has reviewed and verified the assessment report for Cohuna District Hospital. The accreditation decision was made on 19/12/2025 and Cohuna District Hospital was notified on 19/12/2025.

Org Name : Cohuna District Hospital
Org Code : 210387

Executive Summary

On 02/12/2025, Cohuna District Hospital underwent an NS2.1 Short Notice Final Assessment. Below is a summary of the Health Service Facilities (HSFs) that were reviewed as part of this assessment:

Health Service Facility Name	HSF Identifier	Delivery Type
Cohuna District Hospital	100055	Virtual

Summary of Recommendations Subject to the Final Assessment

Facilities(HSF IDs)	Initial Assessment MwR	Initial Assessment NM
Cohuna District Hospital-100055	1.07, 1.20, 2.01	

Summary of Ratings following the Final Assessment

Facilities(HSF IDs)	Final Assessment MwR	Final Assessment NM	Final Assessment Met
Cohuna District Hospital-100055	1.20, 2.01		1.07

The final assessment was conducted for Cohuna District Hospital on 02/12/2025. The following report outlines the assessment team's findings.

Org Name : Cohuna District Hospital
Org Code : 210387

General Discussion

Cohuna District Hospital (CDH) underwent a Final Assessment in accordance with the requirements of Fact Sheet 17 - Short notice accreditation assessment on 2 December 2025. This was undertaken by virtual assessment with only the Lead Assessor required to be in attendance.

The CDH staff in attendance were the Chief Executive Officer, the Director Clinical Services, the Corporate Services Manager, the PROMPT (policy platform) Administrator, the Quality Manager and a Partnering with Consumers Advisory Committee member who is a consumer, this latter attendance is for the Met with Recommendation rating issued under Action 2.01. It is acknowledged that a detailed and comprehensive approach to address these met with recommendations has been taken by CDH which attests to the commitment that CDH places on the assessment process.

A summary of the previous Met with Recommendation ratings is:

Action 1.07 regarding an issue having been identified in respect to policy governance, the intentions of this recommendation have been met, and this recommendation will now be closed.

Action 1.20 regarding the attribute of the numerics underpinning the mandatory training data, this process has required significant analysis of multiple platforms having resulted in a comprehensive spreadsheet which in effect is the training matrix and the mandatory compliance register, as this is a new process and requires to be sustained, the Met with Recommendation will remain open, with the risk rating being reduced to low.

Action 2.01 was in respect to consumers being provided to external learning and networking resources has resulted in the identification of a wider consumer agenda that CDH has commenced using a project management approach. The intentions of meeting the requirements of this Met with Recommendation have commenced, however sustaining this into the future underpinned by a revised framework will be required. This recommendation will remain open with a reduced risk rating.

Org Name : Cohuna District Hospital
 Org Code : 210387

Assessor Findings at Final Assessment

Below is a summary of the findings of the assessment team:

ACTION	
1.07	The health service organisation uses a risk management approach to: a. Set out, review, and maintain the currency and effectiveness of, policies, procedures and protocols b. Monitor and take action to improve adherence to policies, procedures and protocols c. Review compliance with legislation, regulation and jurisdictional requirements
Initial Assessment Comments	Initial Assessment Recommendation(s) / Risk Rating & Comment
This pertains to (c) maintaining the currency of policies. At assessment time CDH stated that 18% of the policies were out of date and this was verified. Of these out of date policies, none had been watermarked to state that they were out of date. Whilst there is good governance when a policy is presented for ratification, what was not evident was the governance regarding out of date policies.	<p>Rating: Met with Recommendation Applicable: All Recommendation: Expand the policy framework and policy governance to include overdue policies.</p> <p>Risk Rating: Moderate</p>
Final Assessment Comments	
The PROMPT software utilised by CDH has little capacity to be amended with individual enhancement requests, the intentions of this Met with Recommendation is one such request. Notwithstanding, CDH have amended internal work flow practices to have full visibility of overdue policies with a traffic light dashboard, revise the view of the policy landing page to flag new / just ratified policies, and policies under revision. The Document Control Procedure has been amended to reflect how controlled documents under revision are notated. As the full intentions of this recommendation have been addressed, this recommendation will be closed.	
Final Assessment Rating	Applicable
Met	All

Org Name : Cohuna District Hospital
 Org Code : 210387

ACTION		
1.20	The health service organisation uses its training systems to: a. Assess the competency and training needs of its workforce b. Implement a mandatory training program to meet its requirements arising from these standards c. Provide access to training to meet its safety and quality training needs d. Monitor the workforce's participation in training	
Initial Assessment Comments		Initial Assessment Recommendation(s) / Risk Rating & Comment
This pertains to (d) monitoring the workforce's participation in training. At assessment time, mandatory training data was variable, when this was discerned by CDH it was ascertained that with a number of the modules that the numerator and denominator required amendment to accurately reflect the staff who were required to complete the module and their work location, i.e. residential care or the acute setting.		<p>Rating: Met with Recommendation Applicable: All Recommendation: Review the mandatory training numerator and denominator definitions to ensure that accurate compliance data.</p> <p>Risk Rating: Moderate</p>
Final Assessment Comments		
<p>CDH have taken the opportunity to exceed the requirements of this met with recommendation and reviewed the entire process regarding mandatory education. The Education Training & Development Policy has been amended and at the time of the final assessment was awaiting ratification. A training matrix has been amended and developed across staff groups which allows for compliance to be identified.</p> <p>The Board of Directors have requested oversight of progress on these initiatives and improvements. The Director Clinical Services has made the spreadsheet available to her managers so they can operationalise and individualise this to their staff to complement performance improvement.</p> <p>As this process has not been fully rolled out and will need to be sustained, the Met with Recommendation will remain opened with the risk rating adjusted to low until this process is sustained as business as usual.</p>		
Final Assessment Rating	Applicable	Final Assessment Recommendation(s) / Risk Rating & Comment
MWR	All	<p>Recommendation: Sustain the review the mandatory training numerator and denominator definitions to ensure that accurate compliance data.</p> <p>Risk Rating: Low</p>

Org Name : Cohuna District Hospital
 Org Code : 210387

ACTION		
2.01	Clinicians use the safety and quality systems from the Clinical Governance Standard when: a. Implementing policies and procedures for partnering with consumers b. Managing risks associated with partnering with consumers c. Identifying training requirements for partnering with consumers	
Initial Assessment Comments		Initial Assessment Recommendation(s) / Risk Rating & Comment
This pertains to (c) that addresses the identification of training requirements for partnering with consumers. Consumers stated that they do not access education beyond the CDH mandated training. Consumers should be made aware of networking opportunities, and access external education as appropriate and as required.		Rating: Met with Recommendation Applicable: All Recommendation: Consumers to be made aware, have access to, and take up external networking and educational opportunities. Risk Rating: Moderate
Final Assessment Comments		
<p>This Met with Recommendation has provided CDH with a platform to review their consumer agenda. Access to external networking and educational opportunities, has commenced with the first educational opportunity being in the very early new year (6 January 2026).</p> <p>The Partnering with Consumers Advisory Committee Terms of Reference have been amended to reflect these additional requirements and the agenda sighted confirms this. Another benefit has been the introduction of an Annual Survey (draft version) to enable an evaluation of the systems in place.</p> <p>The core intentions of this recommendation have been addressed, pending the actual education opportunity in January 2026, however ensuring that this is sustained into the future will require a significant body more of work. Acknowledging all of this work, the risk assessment will be adjusted to low and the met with recommendation rating will remain in place.</p>		
Final Assessment Rating	Applicable	Final Assessment Recommendation(s) / Risk Rating & Comment
MWR	All	Recommendation: Sustain the process for consumers to be made aware, have access to, and take up external networking and educational opportunities. Risk Rating: Low

Org Name : Cohuna District Hospital
Org Code : 210387

Summary of Accreditation Status

A summary of the Accreditation awarded is outlined in the below table:

Health Service Facility Name	HSF Identifier	Accreditation Status
Cohuna District Hospital	100055	3 years Accreditation