

## Appendix 3: About the audit

### Audit objective

This audit assessed the effectiveness of evaluating and planning palliative care services in NSW.

### Audit criteria

We addressed the audit objective with the following lines of inquiry and criteria:

1. Does NSW Health collect and use data to inform the planning of high quality, safe and appropriate palliative care services?
  - The information needs are known.
  - The right information is available and provided in a timely manner.
  - There is access to and use of information at all levels.
  - Data reporting is used to identify trends, risks and issues with service delivery.
2. Is service planning and delivery informed by evaluation and data?
  - Strong evaluation and performance reporting framework is in place.
  - Data is being used to identify unmet need.
  - Planning is evidence-based and supports meeting predicted future demand for services.
3. Does NSW Health work in collaboration with other stakeholders in evaluating and planning palliative care services in NSW?
  - There are programs to develop the evaluation and planning capacity of stakeholders to contribute to effective evaluation and planning.
  - NSW Health consults with stakeholders in the evaluation and planning of palliative care services in NSW.
  - NSW Health collects information from stakeholders to assist in statewide coordination of palliative care services.

### Audit scope and focus

In assessing the criteria, we checked the following aspects:

- information quality, collection and use
- service delivery and planning
- collaboration with stakeholders.

The audit did not seek to assess:

- clinical practice in delivering palliative care
- paediatric palliative care
- the Justice Health and the Mental Health Forensic Network.

### Audit approach

Our procedures included:

- interviewing staff from the Ministry of Health, eHealth NSW, NSW Ambulance, members of the Palliative Care Network Executive Committee, NSW Agency for Clinical Innovation, Primary Health Networks and contracted service providers
- interviewing staff from the Palliative Care Outcomes Collaboration (PCOC) at the University of Wollongong, and the Australian Institute of Health and Welfare
- interviewing individual expert clinicians and academics, peak bodies, consumer advocacy groups and individual consumers
- conducting site visits and interviewing staff in three LHDs – Northern Sydney, Illawarra Shoalhaven and Western NSW— including visits to Royal North Shore Hospital,

Greenwich Hospital, Wollongong Hospital, Port Kembla Hospital, David Berry Hospital, Dubbo Base Hospital, Lourdes Hospital, Orange Health Service and community health service hubs in the districts

- reviewing systems and data collections, tools and benchmarking reports as well as various systems in use at a local level
- reviewing policy and evaluation documents, plans and guidelines.

### **Examining documents**

We examined documents, including:

- documents setting out overall objectives for palliative care
- documents setting out future planning for palliative care
- documents detailing engagement and collaboration
- reporting and evaluation
- data collection and use frameworks.

### **Analysing data**

We reviewed reporting systems, including SNAP, CHOC, CHIME, eMR as well as recent evaluation/research data that is not ongoing but provides a valuable planning tool – e.g. the Facts of Death report.

We will also examine:

- documentation from other stakeholders obtained during the audit such as research and studies, statistical data and analysis
- information from other jurisdictions for comparison.

The audit approach was complemented by quality assurance processes within the Audit Office to ensure compliance with professional standards.

### **Audit methodology**

Our performance audit methodology is designed to satisfy Australian Audit Standards ASAE 3500 on performance auditing. The Standard requires the audit team to comply with relevant ethical requirements and plan and perform the audit to obtain reasonable assurance and draw a conclusion on the audit objective. Our processes have also been designed to comply with the auditing requirements specified in the *Public Finance and Audit Act 1983*.

### **Acknowledgements**

We gratefully acknowledge the co-operation and assistance provided NSW Health. Particularly we would like to thank our liaison officers in the Ministry of Health and the three Local Health Districts we visited as well as staff who participated in interviews and provided material relevant to the audit. Additionally, we wish to thank the many clinical experts and academics who gave their time to contribute to the audit.

We would also like to thank our consultant, Ms Michelle Wheeler of Michelle Wheeler Consulting, who advised and assisted throughout the audit.

### **Audit team**

Michael Thistlethwaite conducted the performance audit. Kathrina Lo provided direction and quality assurance.

### **Audit cost**

Including staff costs, printing costs and overheads, the estimated cost of the audit is \$170,000.