



## SURVEY TEAM ASSESSMENT

Please indicate the Service/SCU's compliance against each NAS Measure. For a NAS Measure that has more than one component please provide a compliance grading for each. (e.g. for NAS measure 1.1.1 there are two components – 1.1.1a, 1.1.1b). The AUTOMATIC summary on page 9 will convert the components to one compliance grading per NAS Measure.

The compliance grading system to be used is: Met, Unmet, Unable to be assessed. (The 'met with exception' category can only be applied to certain NAS Measures where performance is very close to meeting the absolute measure. The NAS Measures where it may be used are 2.4.1, 3.1.2(a), 3.1.6 and 4.2.6. Refer to section 3.3 in the Handbook).

### STANDARD 1 — ACCESS AND PARTICIPATION

Level	NAS Measure	Service/SCU responsibility
<b>Criterion 1.1</b> – The Service and/or SCU maximises the participation of women in the target age groups for screening and rescreening.		
2	1.1.1(a) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
2	1.1.1(b) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
2	1.1.2(a) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
2	1.1.2(b) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
2	1.1.3(a) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
2	1.1.3(b) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
<b>Criterion 1.2</b> – BreastScreen services are accessible to the target and eligible populations, especially women from Indigenous; culturally and linguistically diverse; rural/remote; and lower socioeconomic backgrounds and women with a disability.		
2	1.2.1(a) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
2	1.2.1(b) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
3	1.2.2(a) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>
3	1.2.2(b) <input style="border: 2px solid blue;" type="text"/>	<input type="text"/>

#### Survey Team's overall assessment against the NAS Measures for this Standard.

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**Survey Team's overall assessment against the NAS Measures for this Standard (*Continued*).**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

[Empty box for assessment content]

**Survey Team's overall assessment against the NAS Measures for this Standard (*Continued*).**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

[Empty box for survey team's overall assessment against the NAS Measures for this Standard.]

**STANDARD 2 — CANCER DETECTION**

Level	NAS Measure	Service/SCU responsibility
<b>Criterion 2.1 – The Service and/or SCU maximises the detection of invasive breast cancer in the target population.</b>		
1	2.1.1(a)	<input type="text"/>
1	2.1.1(b)	<input type="text"/>
1	2.1.2(a)	<input type="text"/>
1	2.1.2(b)	<input type="text"/>
1	2.1.3(a)	<input type="text"/>
1	2.1.3(b)	<input type="text"/>
1	2.1.3(c)	<input type="text"/>
<hr/>		
2	2.1.4a)	<input type="text"/>
2	2.1.4b)	<input type="text"/>
2	2.1.4c)	<input type="text"/>
2	2.1.5	<input type="text"/>
2	2.1.6	<input type="text"/>
<hr/>		
<b>Criterion 2.2 – The Service and/or SCU maximises the detection of ductal carcinoma in situ (DCIS).</b>		
2	2.2.1(a)	<input type="text"/>
	2.2.1(b)	<input type="text"/>
	2.2.2(a)	<input type="text"/>
	2.2.2(b)	<input type="text"/>
	2.2.4	<input type="text"/>
3	2.2.3	<input type="text"/>
<hr/>		
<b>Criterion 2.3 – The Service and/or SCU minimises the number of invasive interval breast cancers.</b>		
2	2.3.1(a)	<input type="text"/>
2	2.3.1(b)	<input type="text"/>
2	2.3.1(c)	<input type="text"/>
2	2.3.2(a)	<input type="text"/>
2	2.3.2(b)	<input type="text"/>
2	2.3.2(c)	<input type="text"/>

**STANDARD 2 — CANCER DETECTION** *(continued)*

Level	NAS Measure	Service/SCU responsibility
<b>Criterion 2.4</b> – The Service and/or SCU ensures high quality screen reading.		
2	2.4.1 <input type="text"/>	<input type="text"/>
<b>Criterion 2.5</b> – The Service and/or SCU ensures high quality imaging.		
3	2.5.1 <input type="text"/>	<input type="text"/>
3	2.5.2 <input type="text"/>	<input type="text"/>
<b>Criterion 2.6</b> – Investigations and recall for assessment of non-malignant lesions is minimised.		
2	2.6.1a) <input type="text"/>	<input type="text"/>
2	2.6.1b) <input type="text"/>	<input type="text"/>
2	2.6.3(a) <input type="text"/>	<input type="text"/>
2	2.6.3(b) <input type="text"/>	<input type="text"/>
2	2.6.3(c) <input type="text"/>	<input type="text"/>
2	2.6.4(a) <input type="text"/>	<input type="text"/>
2	2.6.4(b) <input type="text"/>	<input type="text"/>
2	2.6.4(c) <input type="text"/>	<input type="text"/>
2	2.6.5 <input type="text"/>	<input type="text"/>
2	2.6.6 <input type="text"/>	<input type="text"/>
2	2.6.7 <input type="text"/>	<input type="text"/>
3	2.6.2 <input type="text"/>	<input type="text"/>

**Survey Team’s overall assessment against the NAS Measures for this Standard.**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**Survey Team's overall assessment against the NAS Measures for this Standard (Continued).**  
Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

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**STANDARD 3 — ASSESSMENT**

Level	NAS Measure	Service/SCU responsibility
<b>Criterion 3.1 – The Service and/or SCU maximises the efficacy of assessment.</b>		
1	3.1.4	<input type="text"/>
1	3.1.5	<input type="text"/>
1	3.1.7	<input type="text"/>
1	3.1.8(a)	<input type="text"/>
1	3.1.8(b)	<input type="text"/>
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2	3.1.1	<input type="text"/>
2	3.1.2(a)	<input type="text"/>
2	3.1.2(b)	<input type="text"/>
2	3.1.3	<input type="text"/>
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3	3.1.6	<input type="text"/>

**Survey Team's overall assessment against the NAS Measures for this Standard.**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**Survey Team's overall assessment against the NAS Measures for this Standard (Continued).**  
Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**Survey Team's overall assessment against the NAS Measures for this Standard (*Continued*).**  
Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**STANDARD 4 — TIMELINESS**

Level	NAS Measure	Service/SCU responsibility
<b>Criterion 4.1</b> – The Service and/or SCU ensures that women progress through the screening pathway in a timely manner.		
2	4.1.1(a)	<input type="text"/>
2	4.1.1(b)	<input type="text"/>
2	4.1.2	<input type="text"/>
<b>Criterion 4.2</b> – The Service and/or SCU ensures that women progress through the assessment pathway in a timely manner.		
1	4.2.1(a)	<input type="text"/>
1	4.2.1(b)	<input type="text"/>
1	4.2.1(c)	<input type="text"/>
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2	4.2.2	<input type="text"/>
2	4.2.3	<input type="text"/>
2	4.2.4	<input type="text"/>
2	4.2.5	<input type="text"/>
2	4.2.6	<input type="text"/>

**Survey Team's overall assessment against the NAS Measures for this Standard.**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**Survey Team's overall assessment against the NAS Measures for this Standard (*Continued*).**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**STANDARD 5 — DATA MANAGEMENT AND INFORMATION SYSTEMS**

Level	NAS Measure	Service/SCU responsibility
<b>Criterion 5.1</b> – The Service and/or SCU ensures the collection of treatment information about women with breast cancer.		
2	5.1.1 <input type="text"/>	<input type="text"/>
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3	5.1.2 <input type="text"/>	<input type="text"/>

**Survey Team’s overall assessment against the NAS Measures for this Standard.**

Include positive points as well as comments on unmet and unable to be assessed NAS Measures.

**STANDARD 6 — CLIENT FOCUS**

*Note that there are no Criteria or Measures associated with this Standard.*

**Survey Team’s comments relating to this Standard.**

**Survey Team's comments relating to this Standard (Continued).**

[Empty box for survey team comments]

**Survey Team's comments relating to this Standard (Continued).**

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**STANDARD 7 — GOVERNANCE AND MANAGEMENT**

*Note that there are no Criteria or Measures associated with this Standard.*

**Survey Team’s comments relating to this Standard.**

**Survey Team's comments relating to this Standard (*Continued*).**

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**Survey Team's comments relating to this Standard (Continued).**

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### Survey Team AUTOMATIC Summary of Performance Against the Collated Risk Ratings

For Data Measures that have more than one component, surveyors are to provide a compliance grading for each component. However, when the automatic summary is calculated it only provides one compliance grading for the NAS Measure.

Only if ALL components of a NAS Measure are met will the automatic summary indicate the NAS Measure as being met. If ANY of the components are unmet, the automatic summary will indicate the NAS Measure as being unmet. Those remaining will be indicated as unable to be assessed (if any of the components are unable to be assessed) or met with exception (if any of the components are met with exception).

#### ACCESS AND PARTICIPATION

Risk level	Number of Measures	Number of Measures met	Number of Measures met with exception	Number of Measures unmet	Number of Measures unable to be assessed
2	4				
3	1				

#### CANCER DETECTION

Risk level	Number of Measures	Number of Measures met	Number of Measures met with exception	Number of Measures unmet	Number of Measures unable to be assessed
1	3				
2	15				
3	4				

#### ASSESSMENT

Risk level	Number of Measures	Number of Measures met	Number of Measures met with exception	Number of Measures unmet	Number of Measures unable to be assessed
1	4				
2	3				
3	1				

#### TIMELINESS

Risk level	Number of Measures	Number of Measures met	Number of Measures met with exception	Number of Measures unmet	Number of Measures unable to be assessed
1	1				
2	7				

#### DATA MANAGEMENT AND INFORMATION SYSTEMS

Risk level	Number of Measures	Number of Measures met	Number of Measures met with exception	Number of Measures unmet	Number of Measures unable to be assessed
2	1				
3	1				

**TOTAL SCU/SERVICE PERFORMANCE**

Risk rating	Number of Measures	Number of Measures met	Number of Measures met with exception	Number of Measures unmet	Number of Measures unable to be assessed	Percentage met*
1	8					
2	30					
3	7					
<b>Total</b>	<b>45</b>					

\*Percentage met = (number of Measures met + number of Measures met with exception)/total number of Measures.

**Summary comments on SCU/Service performance**

Key: M = Met, U = Unmet, UA = Unable to be assessed, ME = Met with exception

**Summary comments on SCU/Service performance (Continued).**

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**Summary comments on SCU/Service performance (Continued).**

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**For NQMC USE ONLY****List of Measures that are met, unmet, unable to be assessed and met with exception**

Ranking	Measure
Met	
Unmet	
Unable to be assessed	
Met with exception	

**Decision Tool Analysis**

Risk level	Number of Measures	Number of Measures met or met with exception	Percentage of Measures met or met with exception	NAS Measures that must be met to achieve Accreditation Tier		
				Accreditation with commendation	Accreditation	Conditional Accreditation
1	8			8	7	6
2	30			34	30	28
3	7					

**NQMC comments.**

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**NQMC comments (Continued).**

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**PART B**

**RESPONSE BY SERVICE AND/OR SCU (To be completed by the Service/SCU)**

Using the template *Response by Service and/or SCU* (BSA005), please indicate the Service/SCU's response against each of the Measures that are unmet, unable to be assessed or met with exception.