

Aged Care Quality and Safety Commission

Sector performance report

October – December 2021



Australian Government

Aged Care Quality and Safety Commission

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Sector performance overview

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Aged care services in Australia

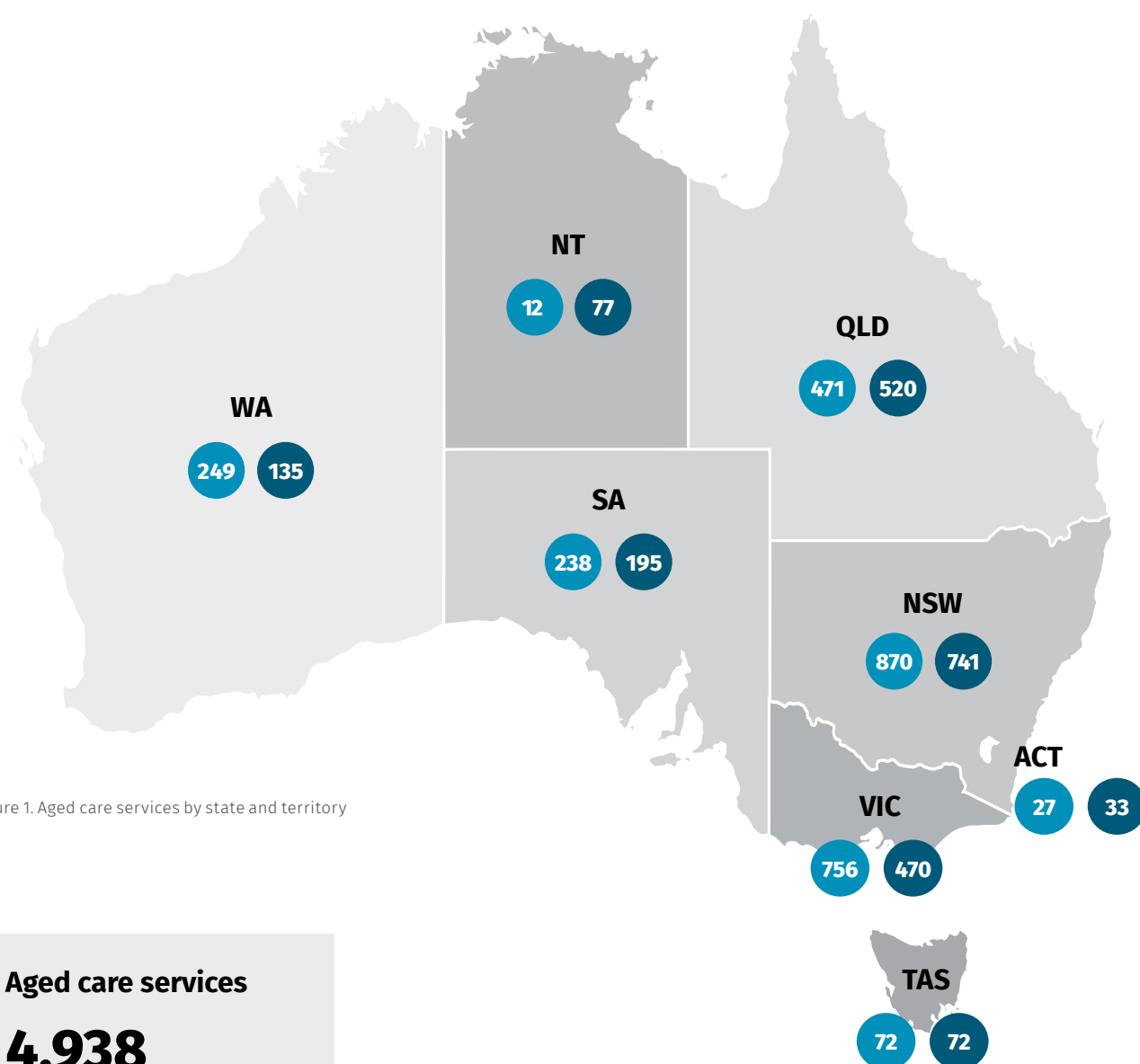


Figure 1. Aged care services by state and territory

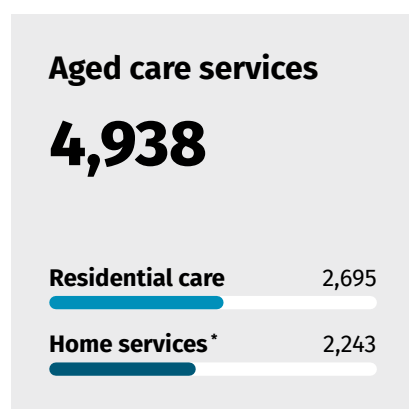


Figure 2. Aged care services

* Home services include home care packages, Commonwealth Home Support Packages, and flexible care and services delivered in a home setting.

- Residential care services
- Home services

Sector performance overview

October – December 2021

Provider approvals



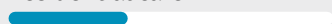
231

Applications to become
an approved provider §

Care types approved †

6

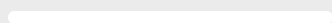
Residential care 2



Home care 4



Flexible care 0



Aged care consumers *

183,894

Residential care

176,105

Home care packages

825,383

Commonwealth Home
Support Programme

Figure 3. Provider approvals

§ An application can be for residential, home care or flexible care, or any combination of these care types. For this reason, when broken down into care types, application totals are not cumulative

† Care types approved may include those that were made in previous quarters

Figure 4. Aged care consumers

* See Note on data

Sector performance overview

October – December 2021

Complaints about aged care services

Total complaints

2,543

Residential care 1,639

Home services* 878

Flexible care** 26



0.89

**Complaints per
100 consumers**
(residential care)

5,485

Issues raised[†]



5,679

Issues finalised[‡]



Figure 5. Complaints about aged care services

* Includes home care packages and CHSP

** Includes short term restorative care, transition care, multi-purpose services and the National Aboriginal and Torres Strait Islander Flexible Aged Care Program

† Includes issues raised in complaints related to residential care, home care and flexible care

‡ May include those that were raised in previous quarters

Sector performance overview

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Sector performance against the Aged Care Quality Standards



264

Site visits[†]

4

New residential
services accredited



97

Services where non-compliance
was found against at least one
Quality Standard[‡]

186

Residential services
re-accredited



**Most common requirement of the Aged Care Quality
Standards that providers did not comply with**

Residential care: 3(3)(a) Safe and effective personal and clinical care
Home services: 2(3)(a) Assessment and planning informs safe, effective
care and services

Figure 6. Sector performance against the Aged Care Quality Standards

[†] Includes site visits conducted through site audits, performance assessments, monitoring contacts and quality audits for residential and home services

[‡] Includes residential and home services

Sector performance overview

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Managing non-compliance



52

Directions



6

**Incident Management
Compliance Notices**



3

**Restrictive Practices
Compliance Notices**



36

**Non-Compliance
Notices**



9

Notices to Agree



3

Sanctions

Figure 7. Enforceable regulatory actions undertaken

Residential care sector performance

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Applications to become an approved provider

What were the outcomes of applications to be an approved provider of residential care?

An application can be made for approval to provide home care, residential care, flexible care, or any combination of these care types. From 15 November 2021, a fee applies to all applications to become an approved provider. There was an increase in the number of residential care applications made in this quarter, before the fees were introduced.

The Commission received 8 applications to become an approved provider of residential care. The Commission approved 2 applications and declined 2 applications to become an approved provider of residential aged care. A further 2 applications did not proceed.

An application that did not proceed is one that was either:

- a) returned to the applicant as incomplete
- b) withdrawn prior to assessment or
- c) withdrawn during assessment.

The outcomes of applications (for example 'did not proceed') are counted for each type of care included in the application. Outcomes may relate to applications that were received in previous quarters.

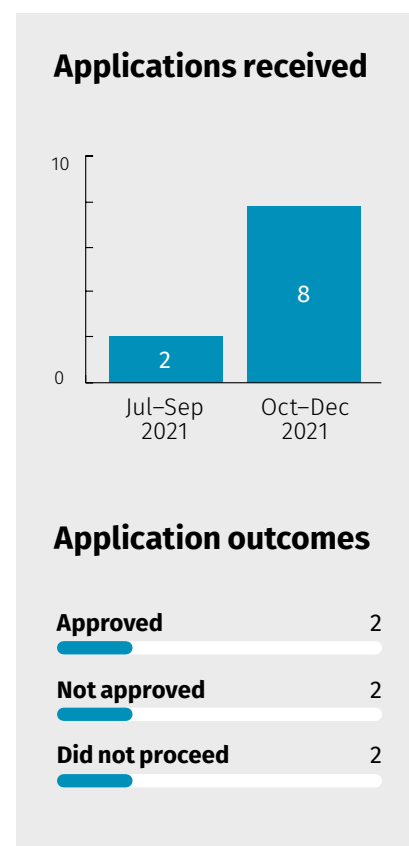


Figure 8. Provider applications and outcomes
Application outcomes may relate to applications that were received in previous quarters

Complaints

Low or high complaint numbers are not, by themselves, a measure of good or poor service delivery.

Under the Aged Care Quality Standards, all providers are required to have a complaints system in place to resolve complaints locally. A service with a positive complaints culture encourages feedback and uses it as an opportunity to improve service delivery.

A complainant may also (or instead) choose to lodge a complaint about a service with the Commission. The Commission takes all complaints seriously and works with providers and consumers to resolve the matter. Complaints to the Commission inform our understanding of risk to consumers and can influence our regulatory activities.

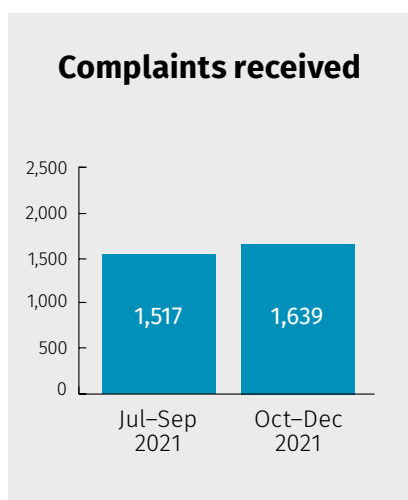


Figure 9. Complaints received in the last 2 quarters

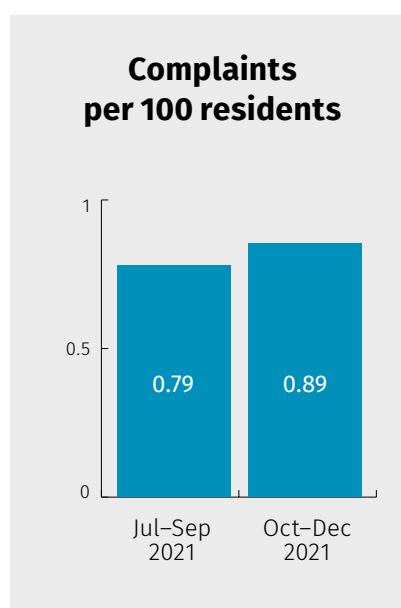


Figure 10. Complaints received in the last 2 quarters, per 100 residential care consumers

Residential care sector performance

October – December 2021

How many services had complaints made about them?

897 residential care services were the subject of a complaint to the Commission during this period.

This figure shows how many residential services were subject to no complaints, one complaint or more than one complaint to the Commission.

Residential services subject of complaints to the Commission

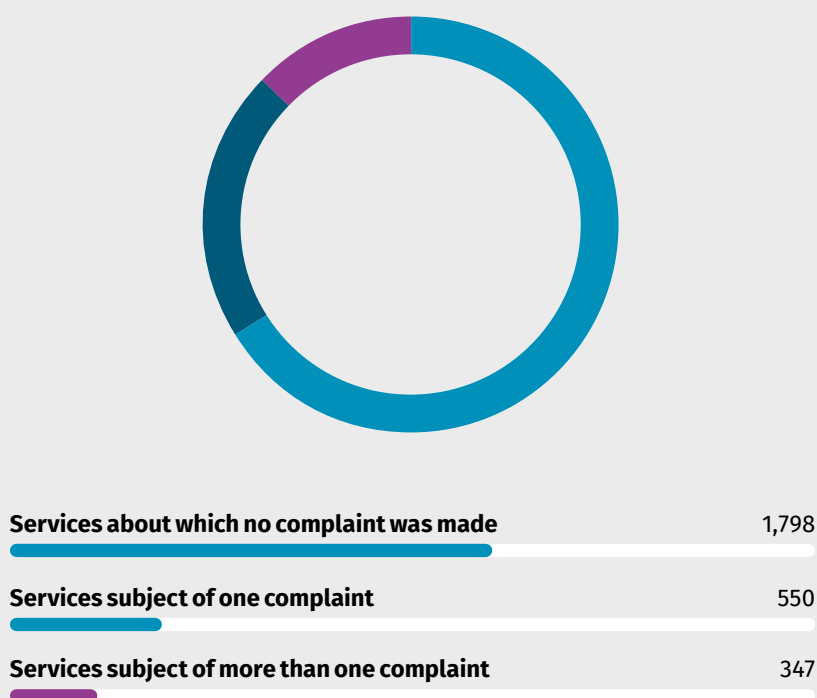


Figure 11. Complaints by service

How many complaints were made in each state and territory?

The table below shows the number of complaints made about residential care in each state and territory. It also displays the total number of complaint issues (a complaint can be about more than one issue) and presents a ratio of complaints issues per 100 aged care residents in each state and territory.

Complaints about residential care

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Number of residential consumers	60,287	47,495	36,273	16,233	16,334	4,516	489	2,267	183,894
Complaints received	539	506	284	138	114	30	10	18	1,639
Number of issues	1,416	1,005	714	331	279	65	23	52	3,885
Ratio of complaint issues per 100 residents ^	2.35	2.12	1.97	2.04	1.71	1.44	4.70	2.29	2.11

Figure 12. Complaints by state and territory

^ Ratios are calculated based on the total number of complaint issues received throughout the quarter and the number of consumers as at 30 June 2021.

* Where there are relatively few aged care residents – such as in the Northern Territory – even a small change to the total number of complaint issues received in a quarter can significantly impact the ratio of complaint issues per 100 residents.

Residential care sector performance

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Who makes complaints?

This graph shows the percentage of complaints received by the Commission about residential care, by who made the complaint.

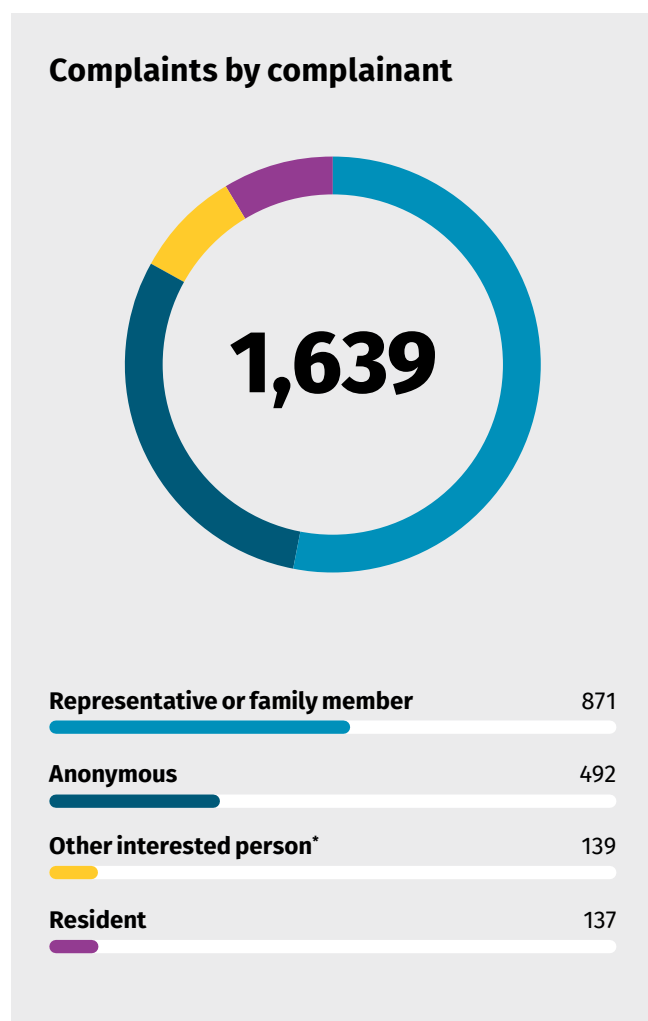


Figure 13. Complaints by complainant

* Other interested person includes staff, external agency, media or provider

What are complaints about?

This graph shows the top 10 most frequent complaint issues received about residential care during the reporting period.

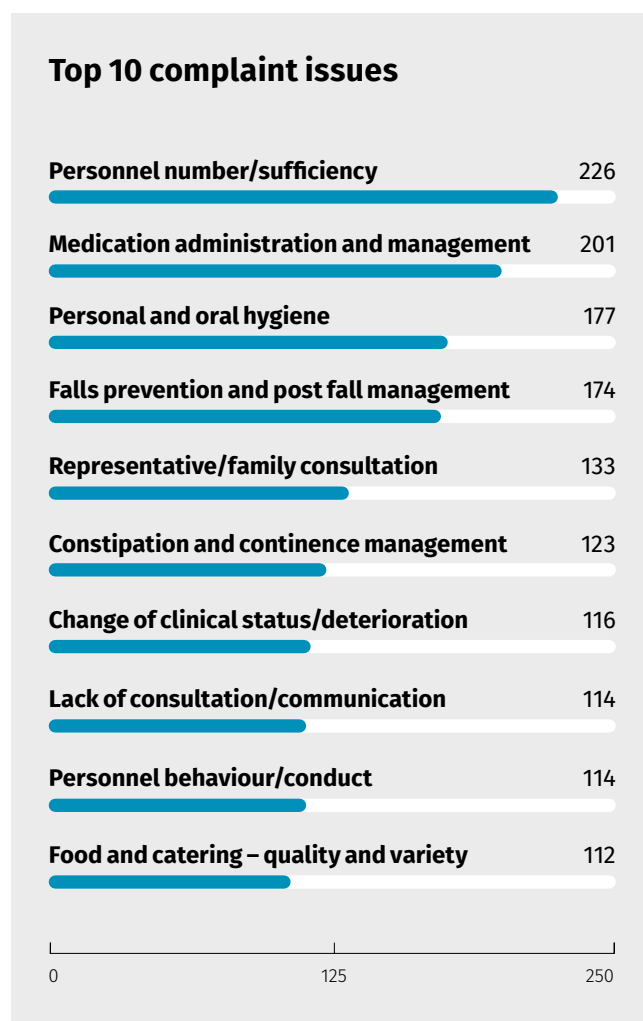


Figure 14. Top 10 complaint issues

Residential care sector performance

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Finalised complaints

The Commission finalised 1,656 complaints about residential care this quarter.

How were complaint issues finalised?

Before a complaint is finalised, the Commission talks to all parties to explain the Commission's findings and how the issues have been resolved. The Commission also provides written feedback in relation to all complaints, except where the complainant is satisfied to close the complaint and does not require a letter.

The figure to the right shows the top 5 reasons for finalising complaints over the period.

The data includes complaints where all individual issues which make up the complaint have been resolved, and so the complaint as a whole has been finalised.

Complaints resolved 'to the satisfaction of the complainant' indicate the person making the complaint is satisfied their issues have been heard and addressed. Some complaints are not resolved 'to the satisfaction of the complainant' for reasons which do not necessarily mean that the complainant is not satisfied. These include anonymous complaints, and complaints which have been withdrawn.

Some issues are raised by complainants more than once, in one or more separate complaints. Some issues raised by complainants may also be the subject of compliance or quality assessment and monitoring activities. Where an issue has been dealt with or is being dealt with in another complaint or through the Commission's regulatory activities, the Commissioner may finalise the issue.

How complaint issues were finalised

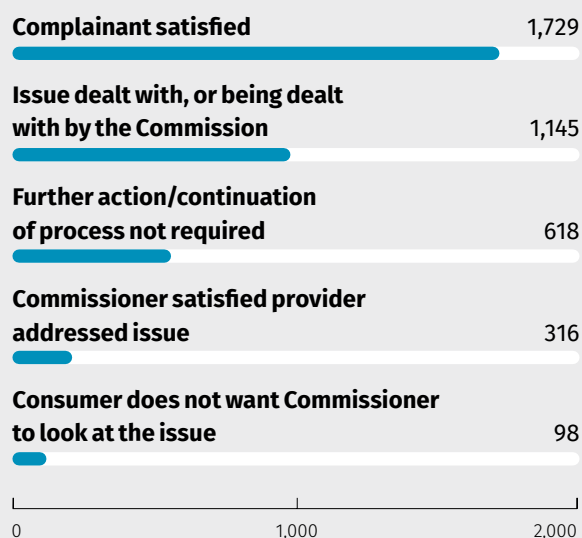


Figure 15. Top 5 reasons complaint issues were finalised

In some cases, having regard to all the circumstances, no further action in relation to an issue is required by the Commissioner. Complaint issues may be finalised in this way when, for example, the issue is not ongoing and there is no outcome that can be achieved by continuing the process.

Issues 'resolved to the satisfaction of the Commissioner' include those where the Commission concludes that the provider has met its responsibilities or has taken appropriate action to address the concerns. The Commissioner is satisfied the provider has met its responsibilities, but the complainant may remain unsatisfied.

Reportable incident notifications

There are 8 types of [reportable incidents](#).

Providers must respond to all incidents to ensure the safety, health and well-being of those affected.

Priority 1 reportable incidents must be notified to the Commission within 24 hours of the provider becoming aware of the incident.

Priority 1 reportable incidents are incidents:

- that have caused or could reasonably have been expected to cause, a consumer physical or psychological injury or discomfort that requires medical or psychological treatment to resolve, or
- where there are reasonable grounds to contact the police, or
- where there is the unexpected death of a consumer or a consumer's unexplained absence from the service.

There were 5,102 notifications assessed as in-scope priority 1 notifications this quarter.

Priority 2 reportable incidents are those that do not meet the criteria for a Priority 1 reportable incident. From 1 October 2021, providers must report Priority 2 reportable incidents to the Commission within 30 days of becoming aware of it occurring. There were 5,828 notifications assessed as in-scope priority 2 notifications this quarter.

The Commission reviews all incident notifications within 24 hours of receipt and will take appropriate and proportionate action as required.

This figure shows the breakdown of reportable incidents notified to the Commission in this quarter.

Reportable incident notifications (Priority 1 and Priority 2)

Reportable incident	Priority 1	Priority 2
Unreasonable use of force	2,443	4,521
Neglect	1,014	448
Psychological or emotional abuse	248	764
Unlawful sexual conduct or inappropriate sexual contact	515	15*
Unexplained absence	467	0
Unexpected death	199	0
Inappropriate restrictive practices	113	42
Stealing or financial coercion	103	38
Total	5,102	5,828

Figure 16. Reportable incident notifications

* The Commission reviews and assesses all notifications of unlawful sexual conduct or inappropriate sexual contact within 24 hours to determine risk to the consumer. Assessed risk is different from, and not dependent on, the priority classification type. In this quarter, the Commission [clarified guidance](#) for providers to report incidents relating to unlawful sexual contact to the police.

Quality assessment and monitoring

How many quality assessment and monitoring activities were carried out using the Aged Care Quality Standards?

The [Aged Care Quality Standards](#) are a set of 8 standards used to determine the performance of an aged care service. They focus on outcomes for consumers and reflect the level of care and services the community can expect from organisations that provide Commonwealth subsidised aged care.

The Commission conducts monitoring activities to check providers' compliance with their aged care responsibilities, including the Quality Standards.

Data for this reporting period reflects adjustments made to the Commission's regulatory program to focus on continuing risks arising from the COVID-19 pandemic, and to comply with local Public Health Directions which prevented on-site access in regions. To ensure providers were keeping aged care consumers safe, the Commission used targeted regulatory activities to monitor infection control preparedness and outbreak management, including attending **956 outbreak management meetings** this quarter.

This figure shows the total number of contacts (assessment contacts, site audits and review audits) the Commission conducted with residential aged care services by state and territory this quarter, including those specifically focussed on infection control.

Number of quality and monitoring activities using the Aged Care Quality Standards by state/territory

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Assessment Contacts	339	81	171	43	18	0	0	7	663
Site Audits	26	14	31	25	22	4	0	1	123
Review Audits	2	0	0	2	0	0	0	0	4

Figure 17. Quality assessment and monitoring activities using the Aged Care Quality Standards

On-site quality assessment and monitoring activities by state and territory

This quarter, the Commission conducted 247 on-site contacts with residential services through assessment contacts and site audits.



Figure 18. On-site quality assessment and monitoring activities by state and territory

Residential care sector performance

October – December 2021

How many services were accredited or reaccredited in this quarter?

Residential services must be accredited to receive residential care subsidies from the Commonwealth Government. Accreditation is for a fixed period and a residential service must undergo a comprehensive site audit for reaccreditation.

Accreditation applies to newly commencing services, while reaccreditation applies to accredited or previously accredited services.

Reaccreditation is most often for a period of 3 years. In this quarter, the Commission reaccredited 166 services for 3 or more years and 20 services for less than 3 years.

The figure below shows the number of residential services in each state and territory that were accredited or reaccredited during the reporting period.

Accreditation Decisions	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Newly accredited	0	3	0	0	1	0	0	0	4
Reaccredited	30	35	55	34	27	5	0	0	186
<i>Reaccredited for 3 years or more</i>	30	33	48	27	23	5	0	0	166
<i>Reaccredited for less than 3 years</i>	0	2	7	7	4	0	0	0	20
Accreditation period reduced*	0	1	0	1	0	0	0	0	2

Figure 19. Accreditation and reaccreditation by state and territory

* For residential services where a review audit has been completed, the Commission may decide to take enforceable regulatory action in some circumstances. This may include, for example, to reduce the period of accreditation of the service.

Residential care sector performance

October – December 2021

How did approved providers perform in relation to each of the Aged Care Quality Standards?

An approved provider may operate one or more services. The Commission found non-compliance in relation to 86 services this quarter.

A provider can be found non-compliant with more than one Quality Standard at a service. The figure below shows whether the non-compliance was with very few, some, or many/all of the requirements of each Quality Standard.*

This figure shows that, of all the non-compliance with the Quality Standards found during the quarter, the most common was in relation to Standard 3 (personal care and clinical care). Most instances of non-compliance with Quality Standard 3 were due to providers failing to comply with 1 or 2 of the requirements of that Standard.

* Non-compliance against one requirement means that Quality Standard will not be met. See note on definitions for an explanation of very few, some, or many/all.

86

Services where non-compliance was found



Figure 20. Non-compliance with the Aged Care Quality Standards

Number of services where non-compliance was found with each Aged Care Quality Standard

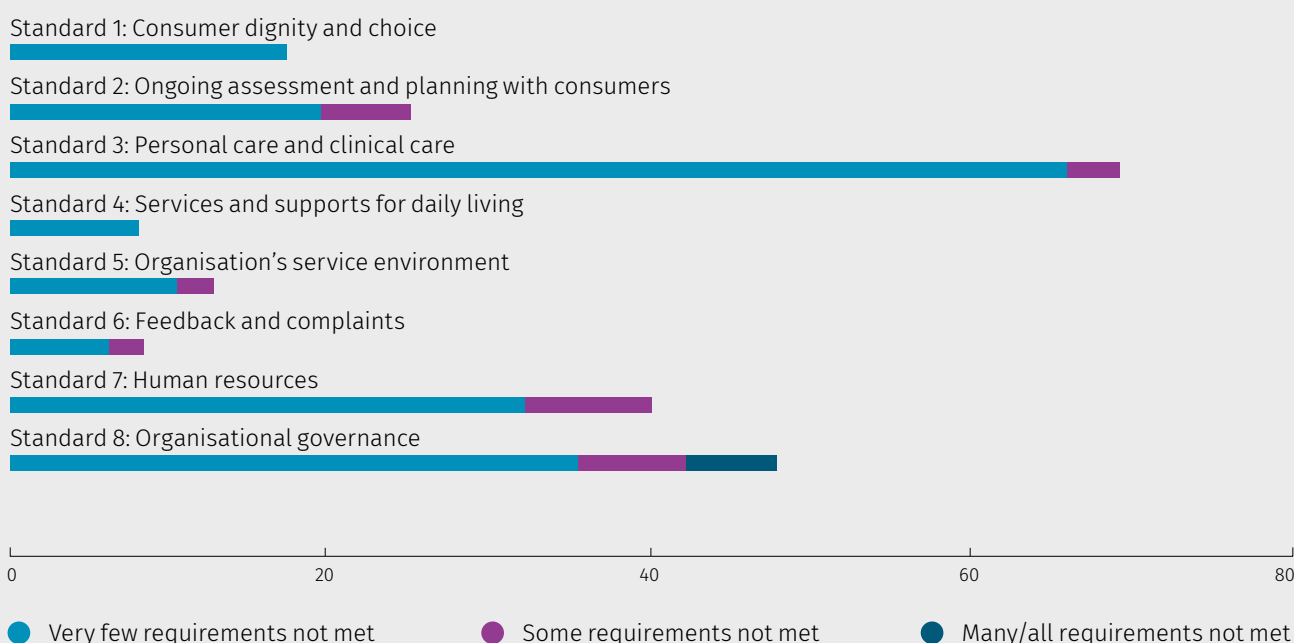


Figure 21. Total number of services where non-compliance with the Aged Care Quality Standards was found

Residential care sector performance

October – December 2021

How did approved providers perform in relation to the requirements of the Aged Care Quality Standards?

Each of the Aged Care Quality Standards contains requirements to demonstrate that the Quality Standard has been complied with. Approved providers are expected to show how their approach enables them to meet these requirements at the service(s) they operate.

This figure shows the top 10 requirements of the Quality Standards that were not complied with, ranked in descending order. It displays the number of times a decision of non-compliance was made in relation to the requirement of the Quality Standard.

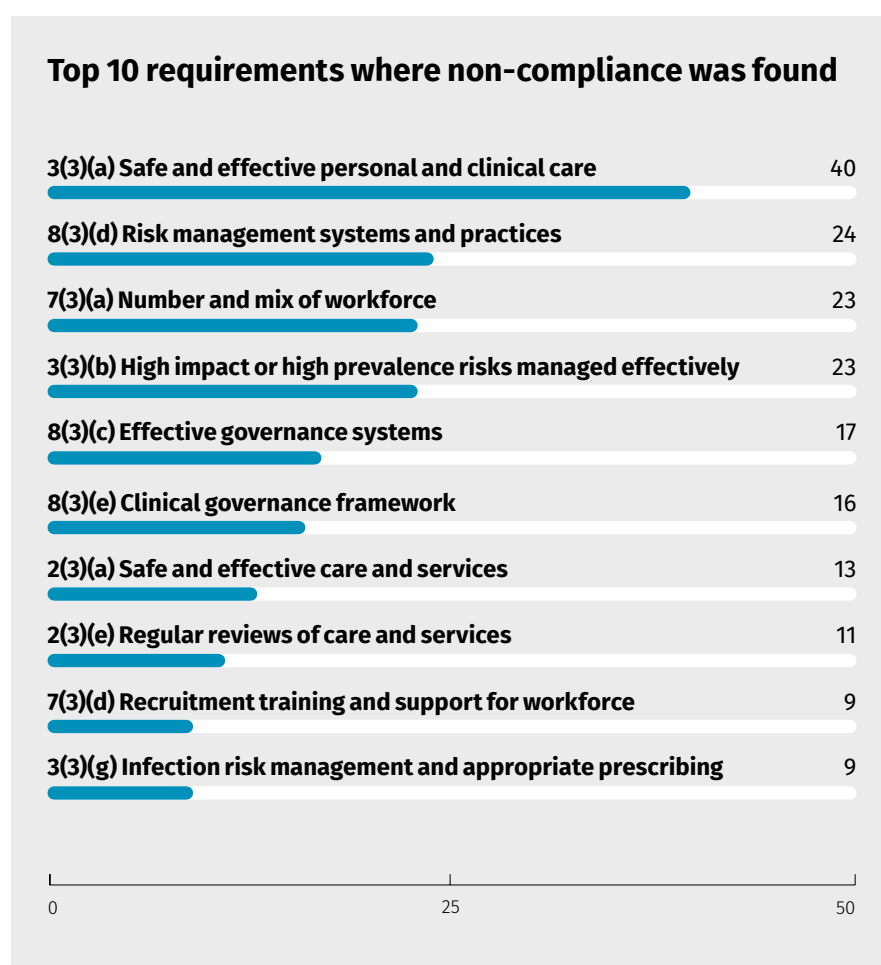


Figure 22. Top 10 requirements of the Aged Care Quality Standards where non-compliance was found

Residential care sector performance

October – December 2021

Non-compliance was found most often in relation to Standard 3 of the Aged Care Quality Standards

The figure below shows non-compliance with the requirements of Quality Standard 3. The data is drawn from performance assessments, and is shown as a percentage of decisions.



Figure 23. Non-compliance with requirements of Aged Care Quality Standard 3

Compliance and enforcement

How does the Commission manage non-compliance?

The Commission has the power to take regulatory or enforceable action(s) where appropriate to address non-compliance with provider responsibilities. In determining a response to non-compliance by providers, the Commission takes into account the risk to the safety, health, well-being and quality of life of consumers, and the extent to which the provider will manage that harm.

Regulatory action

Regulatory action may be considered where risk to consumers is assessed as low to medium. This approach reflects the level of trust and confidence the Commission has in the provider's motivation and capacity to manage the risk and rectify non-compliance. It signals to the provider there has been a failure to meet responsibilities and encourages the provider to rectify the non-compliance and take action to sustain improvements.

Enforceable regulatory actions

In cases where the risk to consumers is assessed as medium to severe, or where a provider has failed to remedy non-compliance following regulatory action, the Commission may respond with enforceable regulatory action. An enforceable regulatory action is intended to oblige the provider to take action to address quality and safety risks and to comply with its responsibilities as quickly as possible.

The Commission's Compliance and Enforcement policy is available on our [website](#). It provides more information about how we use our compliance and enforcement powers.

How many times did provider non-compliance result in regulatory action (directions)?

Where the Commission is satisfied a provider is not meeting its responsibilities, it may issue directions describing the actions to be taken by the provider (and the timeframes within which those actions must be taken). These directions may be about its compliance with the Aged Care Quality Standards or in relation to a complaint. If the provider fails to comply with these directions, further action may be taken against the provider.

The graph on the next page shows the number of Directions Notices issued by the Commission over the reporting period. The data shows directions to revise a plan for continuous improvement, categorised by state and territory. There were no complaints directions in this period.

The figure following the graph shows the top 5 reasons for issuing directions, and the number of services subject of the Directions Notices.

Residential care sector performance

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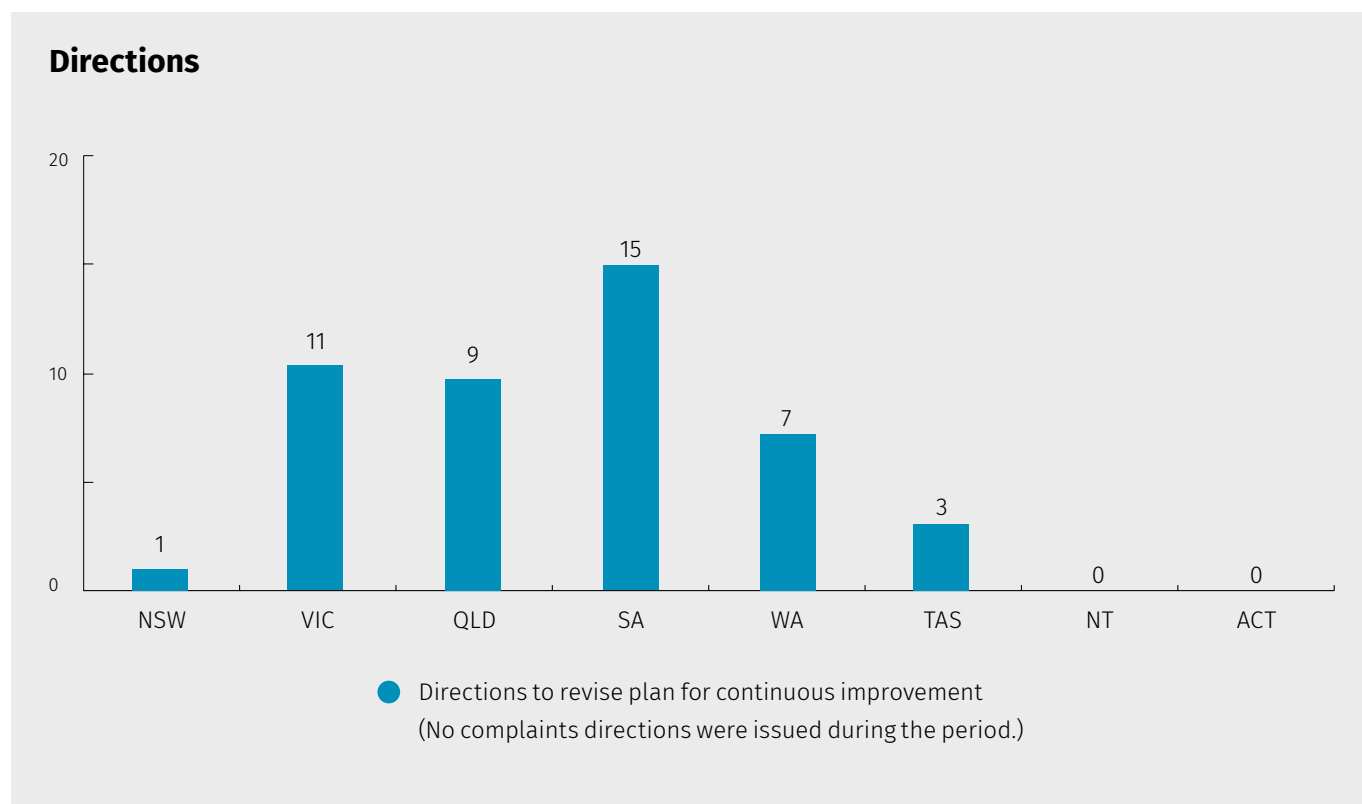


Figure 24. Number of Directions Notices issued to approved providers

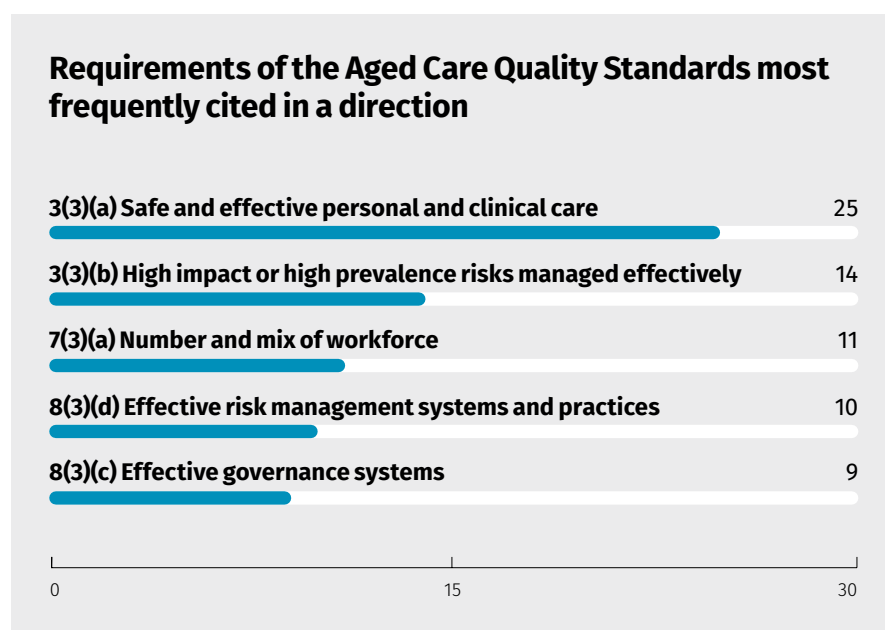


Figure 25. Number of services subject of Directions Notices

Residential care sector performance

October – December 2021

How many times did provider performance result in enforceable regulatory action?

Where provider performance poses a medium to severe risk to quality and safety, or where a provider has failed to remedy non-compliance following regulatory action, the Commission may take one or more enforceable regulatory actions, requiring the provider to improve its performance and ensure the safety and well-being of the people they care for.

The table below shows the actions taken by the Commission over the reporting period, by state and territory. The regulatory activities leading to these actions may have occurred in preceding quarters.

Number of times provider performance resulted in enforceable regulatory action

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Incident Management Compliance Notices	1	0	2	0	3	0	0	0	6
Restrictive Practices Compliance Notices	0	1	0	0	0	1	0	1	3
Non-Compliance Notices	6	11	7	5	1	1	0	0	31
Notices to Agree	3	3	0	2	0	0	0	0	8
Sanctions	1	0	0	1	0	0	0	0	2

Figure 26. Enforceable regulatory actions

Residential care sector performance

October – December 2021

Compliance Notices

The Commission may give an approved provider a Compliance Notice in relation to its incident management or restrictive practices responsibilities, where there is a risk of harm to consumers and the provider’s response is insufficient at the time of the Notice.

The Notice compels the provider to address actual or possible non-compliance within a reasonable time period. The Compliance Notice is designed to elicit an immediate and proactive response outside the Non-Compliance Notice and sanctions pathways.



Figure 27. Number of Compliance Notices

Residential care sector performance

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Non-Compliance Notices

A Non-Compliance Notice (NCN) may be issued to the provider if the Commission is satisfied the provider is or has been non-compliant with one or more of its responsibilities under the Aged Care Act, but that the non-compliance does not pose an immediate and severe risk to the safety, health and well-being of consumers. This notice signals to the provider the Commission's intention to impose sanctions with respect to the non-compliance, sets out actions the provider is required to take to remedy the non-compliance, and gives the provider the opportunity to make submissions prior to the decision-maker deciding to impose one or more sanctions.

If the Commission is satisfied with the provider's response to the NCN (for example, the response outlines the proposed action to remedy the non-compliance; or sets out an acceptable reason for the non-compliance; or is otherwise satisfactory) a Notice to Remedy (NTR) may be issued to the provider.

An NTR requires the provider to give to the Commission, within 14 days after receiving the NCN, an Undertaking to Remedy the non-compliance in the NCN.

The figure below shows the requirements of the Aged Care Quality Standards most frequently cited in Non-Compliance Notices issued to providers.

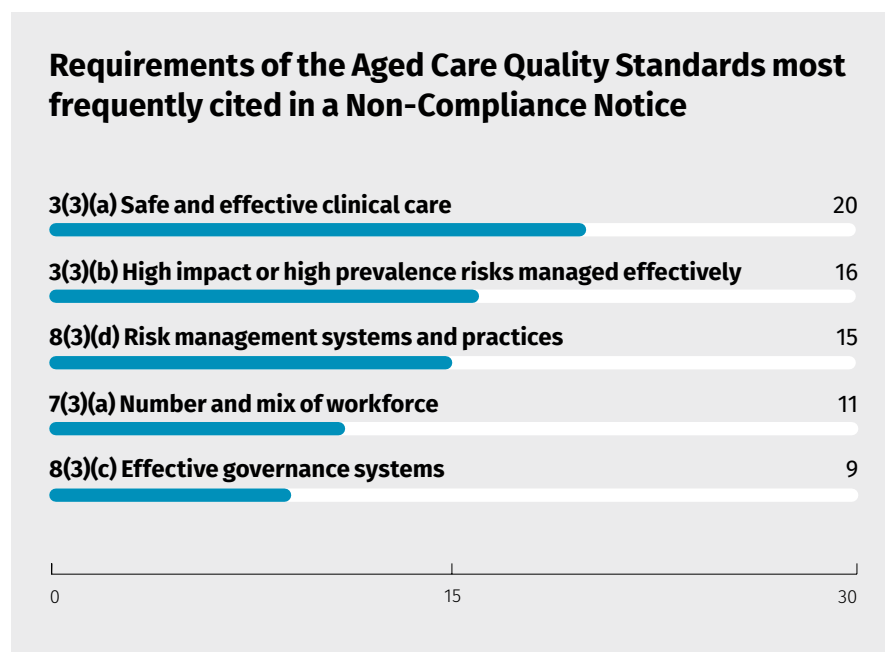


Figure 28. Requirements of the Aged Care Quality Standards most frequently cited in a Non-Compliance Notice

Residential care sector performance

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Notices to Agree

In cases where the risk to consumers is assessed as high to severe and an approved provider’s non-compliance has resulted in the Commission considering revoking its approval to deliver aged care, or the provider has failed to comply with an undertaking to remedy, the Commission may – in certain circumstances – first issue the provider a Notice of Requirement to Agree to Certain Matters (NTA). An NTA may cite one or more requirements of the Aged Care Quality Standards, or other legislation.

An NTA sets out actions a provider is required to take (including necessary timeframes). Should a provider fail to agree, their approval to provide Australian Government subsidised aged care may be revoked.



Figure 29. Number of Notices to Agree

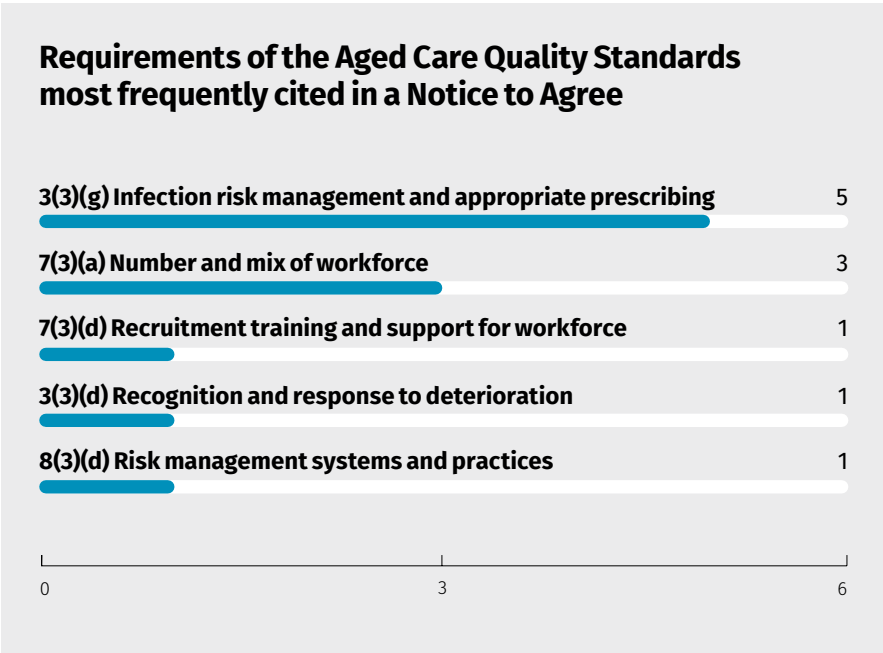


Figure 30. Requirements of the Aged Care Quality Standards most frequently cited in a Notice to Agree

Residential care sector performance

October – December 2021

Sanctions

If the Commission is not satisfied with the provider's response to a Non-Compliance Notice or where there is immediate and severe risk, the Commission may also issue a Notice of Decision to Impose Sanctions. This notifies the provider, in writing, of the Commission's requirements for immediate action or decision to impose one or more sanctions on the provider.

Sanctions require the provider to remedy its non-compliance promptly and are intended to protect consumers – both future and current.

In this quarter, 2 Sanctions were imposed on providers. These providers are not eligible to receive funding for new consumers for the period of the sanction.



Figure 31. Number of Sanctions

Requirements of the Aged Care Quality Standards most frequently cited in a Sanction



Figure 32. Requirements of the Aged Care Quality Standards most frequently cited in a Sanction

Residential care sector performance

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Revocation decisions

In cases of serious non-compliance – that is, where the risk to consumers is severe or where a provider has failed to remedy non-compliance, or the provider is no longer suitable to provide aged care – the Commission may respond by revoking accreditation of a residential aged care service and/or revoking provider approval to provide aged care.

This level of regulation reflects a complete lack of trust in the provider's suitability to provide care. The consequence of revocation is cessation of Commonwealth subsidies for the provision of care and services.

Where a provider's non-compliance is particularly serious, for example systematic, repeated, wilful or criminal, the Commission may expedite the provider's exit from the sector through issuing a revocation sanction.

There were no revocation decisions in quarter 2.

Home services sector performance

October – December 2021



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Applications to become an approved provider

What were the outcomes of applications to be an approved provider of home care?

An application can be made for approval to provide home care, residential care, flexible care, or any combination of these care types. From 15 November 2021, a fee applies to all applications to become an approved provider. There was a significant increase in the number of home care applications made in this quarter, before the fees were introduced.

The Commission received 227 applications to become an approved provider of home care.

Over the same period, the Commission approved 4 applications to become an approved provider of home care and declined approval for 14 applications. A further 53 applications did not proceed.

An application that did not proceed is one that was either:

- a) returned to the applicant as incomplete
- b) withdrawn prior to assessment or
- c) withdrawn during assessment.

The outcomes of applications (for example 'did not proceed') are counted for each type of care included in the application. Outcomes may relate to applications that were received in previous quarters.

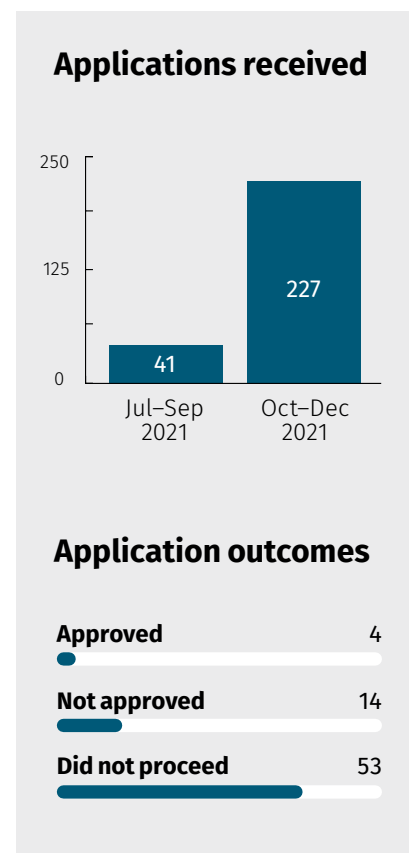


Figure 33. Home care provider applications and outcomes

Application outcomes may relate to applications that were received in previous quarters

Complaints

Low or high complaint numbers are not, by themselves, a measure of good or poor service delivery.

Under the Aged Care Quality Standards, all providers are required to have a complaints system in place to resolve complaints locally. A service with a positive complaints culture encourages feedback and uses it as an opportunity to improve service delivery.

A complainant may also or instead choose to lodge a complaint about a service with the Commission.

The Commission takes all complaints seriously and works with providers and consumers to resolve the matter. Complaints to the Commission inform our understanding of risk to consumers and can influence our regulatory activities.

How many complaints were made in each state and territory?

This table shows the number of complaints made about home services (home care packages and Commonwealth Home Support Programme services) in each state and territory over the reporting period. It also displays the total number of complaint issues (a complaint can be about more than one issue).

Complaints about home services

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Number of complaints received	242	269	197	54	79	16	10	6	873
Number of issues	447	444	321	99	157	30	22	28	1,548

Figure 35. Complaints by state and territory

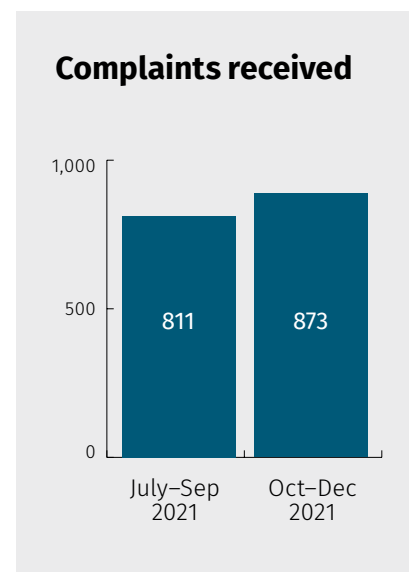


Figure 34. Complaints received in the last 2 quarters

Home services sector performance

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Who makes complaints?

This graph categorises the complaints received by the Commission about home services, by who made the complaint.

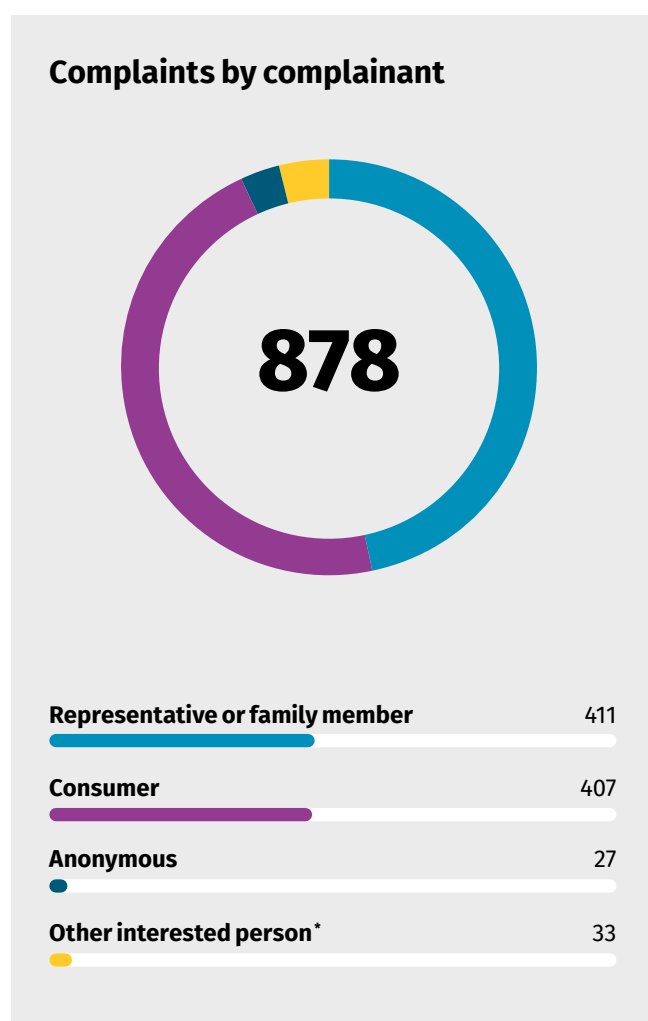


Figure 36. Complaints by complainant

* Other interested person includes staff, external agency, media, internal referrals or provider.

What are complaints about?

This graph shows the top 10 most frequent complaint issues received about home services during the reporting period.

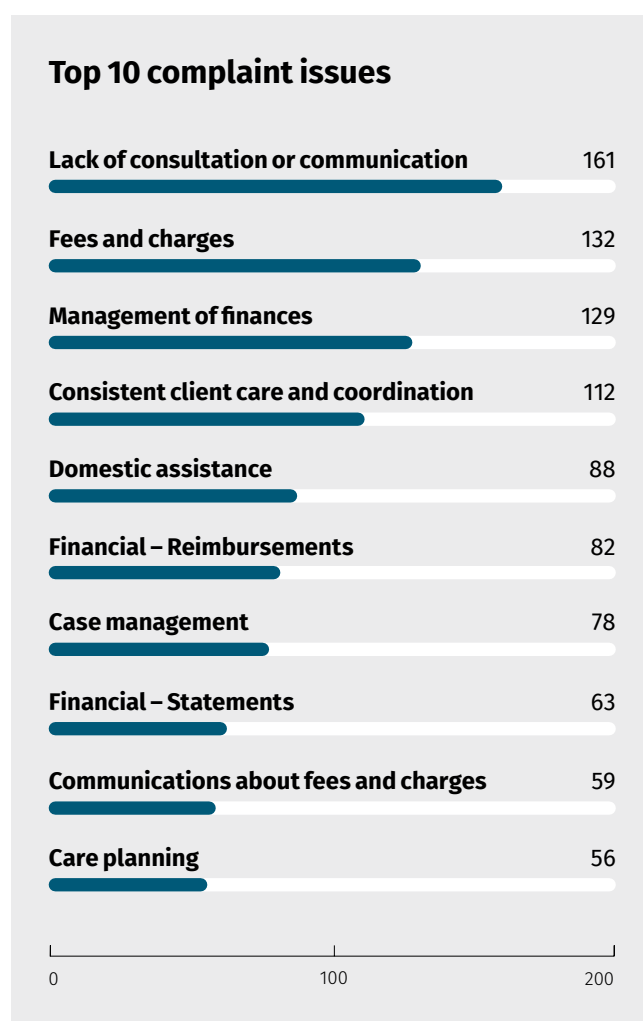


Figure 37. Top 10 complaint issues

Home services sector performance

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Finalised complaints

The Commission finalised 839 complaints about home services this quarter.

How were complaint issues finalised?

Before a complaint is finalised, the Commission talks to all parties to explain the Commission's findings and how the issues have been resolved. The Commission also provides written feedback in relation to all complaints, except where the complainant is satisfied to close the complaint and does not require a letter.

This figure shows the top 5 reasons for finalising complaint issues over the period.

The data includes complaints where all individual issues which make up the complaint have been resolved, and so the complaint as a whole has been finalised.

Complaints resolved 'to the satisfaction of the complainant' indicate the person making the complaint is satisfied their issues have been heard and addressed.

Some complaints are not resolved 'to the satisfaction of the complainant' for reasons which do not necessarily mean that the complainant is not satisfied. These include anonymous complaints, and complaints which have been withdrawn.

Some issues are raised by complainants more than once, in one or more separate complaints. Some issues raised by complainants may also be the subject of compliance or quality assessment and monitoring activities. Where an issue has been dealt with, or is being dealt with in another complaint or through the Commission's regulatory activities, the Commissioner may finalise the issue.

How complaint issues were finalised (top 5)

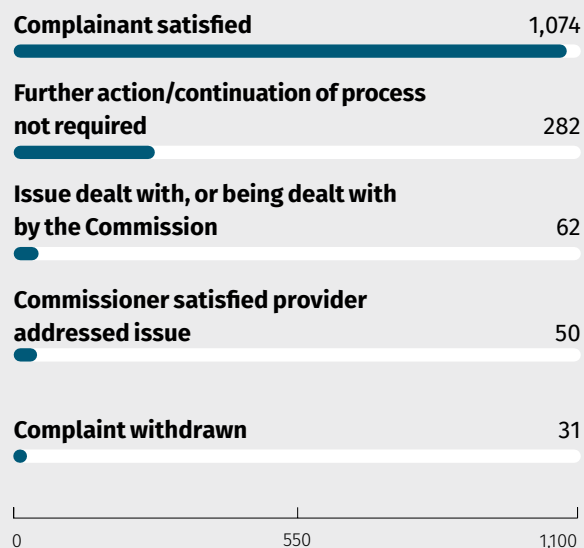


Figure 38. Top 5 reasons complaint issues were finalised

In some cases, having regard to all the circumstances, no further action in relation to an issue is required by the Commissioner. Complaint issues may be finalised in this way when, for example, the issue is not ongoing and there is no outcome that can be achieved by continuing the process.

Issues 'resolved to the satisfaction of the Commissioner' include those where the Commission concludes that the provider has met its responsibilities or has taken appropriate action to address the concerns. The Commissioner is satisfied the provider has met its responsibilities, but the complainant may remain unsatisfied.

Quality assessment and monitoring

How many quality assessment and monitoring activities were carried out using the Aged Care Quality Standards?

The Commission conducts monitoring activities to check providers' compliance with the Aged Care Quality Standards.

This figure shows the total number of assessment contacts and quality audits the Commission undertook with home services by state and territory this quarter.

Data for this reporting period reflects adjustments made to the Commission's regulatory program to focus effort on the continuing risks arising from the COVID-19 pandemic, and to comply with local Public Health Directions. To ensure providers were doing everything possible to keep aged care consumers safe, the Commission's modified regulatory program continued to undertake on-site activities when state and territory restrictions and outbreaks did not prevent them from occurring.

Number of quality assessment and/or audit activities by state/territory

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Assessment contacts	26	16	4	0	1	0	20	1	68
Quality audits	3	4	8	0	0	0	0	0	15

Figure 39. Quality assessment and monitoring activities using the Aged Care Quality Standards

On-site quality assessment and monitoring activities by state and territory

This quarter the Commission conducted 17 on-site contacts with home services, through assessment contacts and quality audits.



Figure 40. On-site quality assessment and monitoring activities by state and territory

Home services sector performance

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How did providers perform in relation to each of the Aged Care Quality Standards?

A provider of care may operate one or more services. The Commission found non-compliance in relation to 11 services this quarter.

The figure below shows whether the non-compliance was with very few, some, or many/all of the requirements of each Quality Standard.[†]

Non-compliance with one requirement means that Quality Standard will not be met. An approved provider can be found non-compliant with more than one Quality Standard at a single service.

[†] See Note on definitions for an explanation of very few, some, or many/all.

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Services where non-compliance was found



Figure 41. Total number of services where non-compliance with the Aged Care Quality Standards was found

Number of services where non-compliance was found with each Aged Care Quality Standard

Standard 1: Consumer dignity and choice



Standard 2: Ongoing assessment and planning with consumers



Standard 3: Personal care and clinical care



Standard 4: Services and supports for daily living



Standard 5: Organisation's service environment*



Standard 6: Feedback and complaints



Standard 7: Human resources



Standard 8: Organisational governance

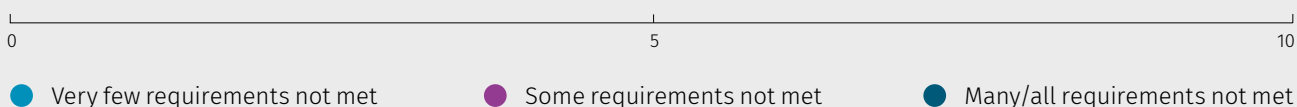


Figure 42. Number of services where non-compliance with the Aged Care Quality Standards was found

* Quality Standard 5 applies to the physical service environment that the organisation provides for residential care, respite care and day therapy centres. It does not apply to home services where the environment is the consumer's home. It also does not apply to other environments that consumers visit, such as bowling clubs or libraries.

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How did providers perform in relation to the requirements of the Aged Care Quality Standards?

Each of the Aged Care Quality Standards contains requirements to demonstrate that the Standard has been complied with.

Providers are expected to show how their approach enables them to meet these requirements.

This figure shows the top 5 requirements of the Quality Standards that were not complied with, ranked in descending order. It displays the number of times a decision of non-compliance was made in relation to the requirement of the Quality Standard.

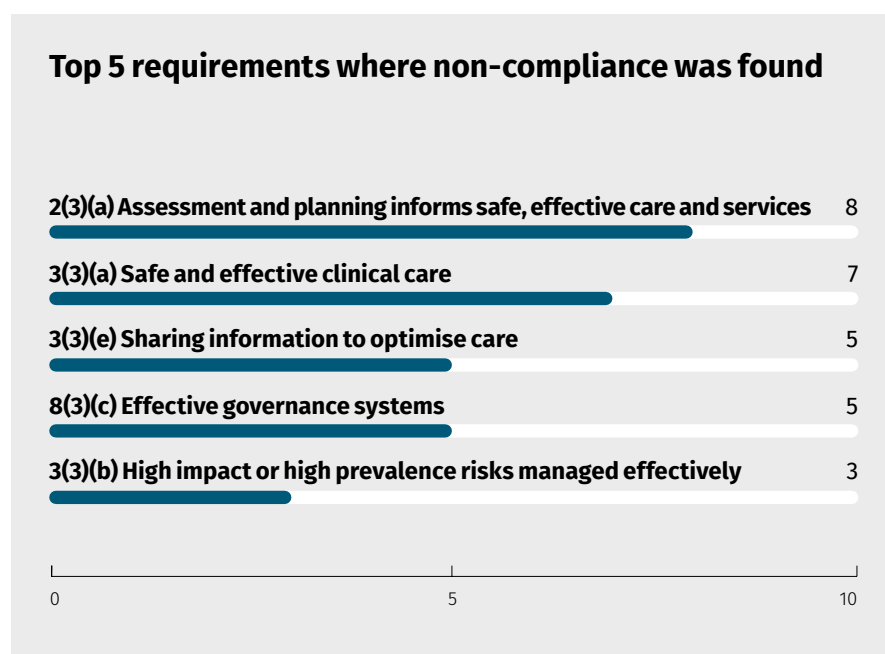


Figure 43. Number of times non-compliance was found with the requirements of the Aged Care Quality Standards (top 5)

Compliance and enforcement

How does the Commission manage non-compliance?

The Commission applies a risk based, transparent and proportionate approach when responding to non-compliance. Further information about the Commission's regulatory actions and enforceable regulatory actions can be found in the [Residential care section](#) of this report.

How many times did provider non-compliance result in regulatory action (directions)?

The graph below shows the number of directions notices issued by the Commission over the reporting period. The data shows directions to revise a plan for continuous improvement, categorised by state and territory. There were no complaints directions in this period.

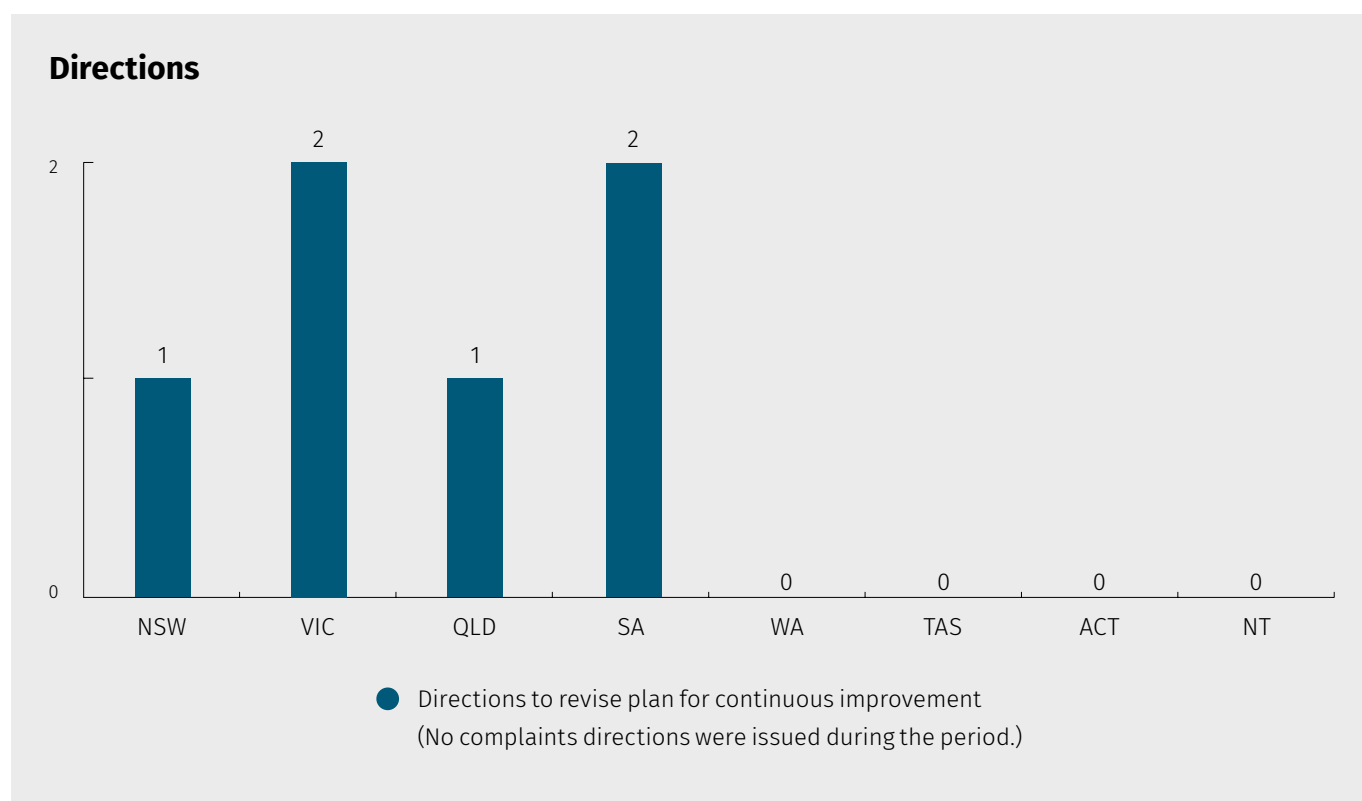


Figure 44. Number of directions issued to approved providers

Home services sector performance

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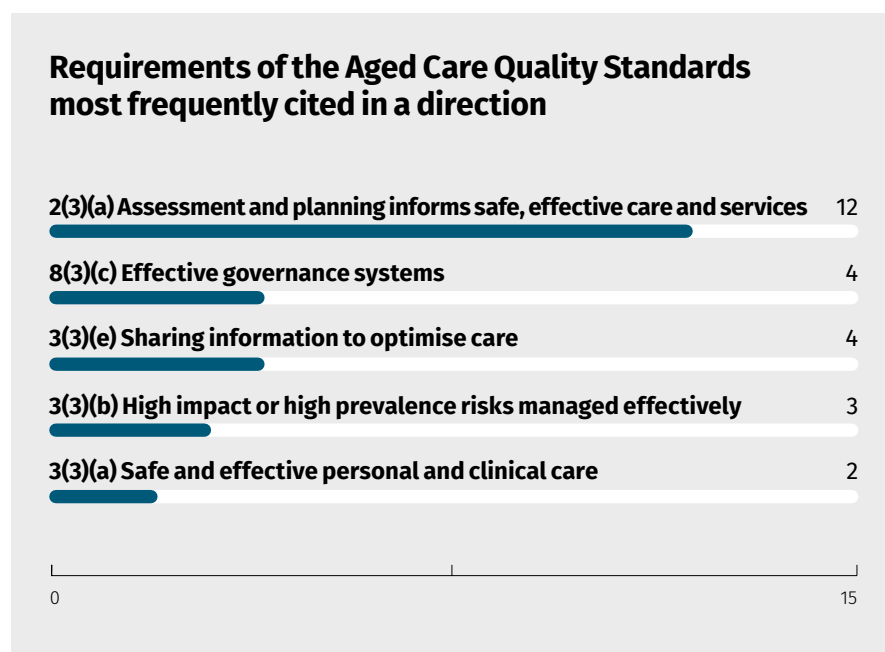


Figure 45. Number of services subject of Directions



Figure 46. Number of Directions

How many times did provider non-compliance result in enforceable regulatory action?

The table below shows the actions taken by the Commission over the reporting period, by state and territory.

Enforceable regulatory action

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Non-Compliance Notices	1	2	2	0	0	0	0	0	5
Notices to Agree	0	0	1	0	0	0	0	0	1
Sanctions	0	0	1	0	0	0	0	0	1

Figure 47. Enforceable regulatory actions

Home services sector performance

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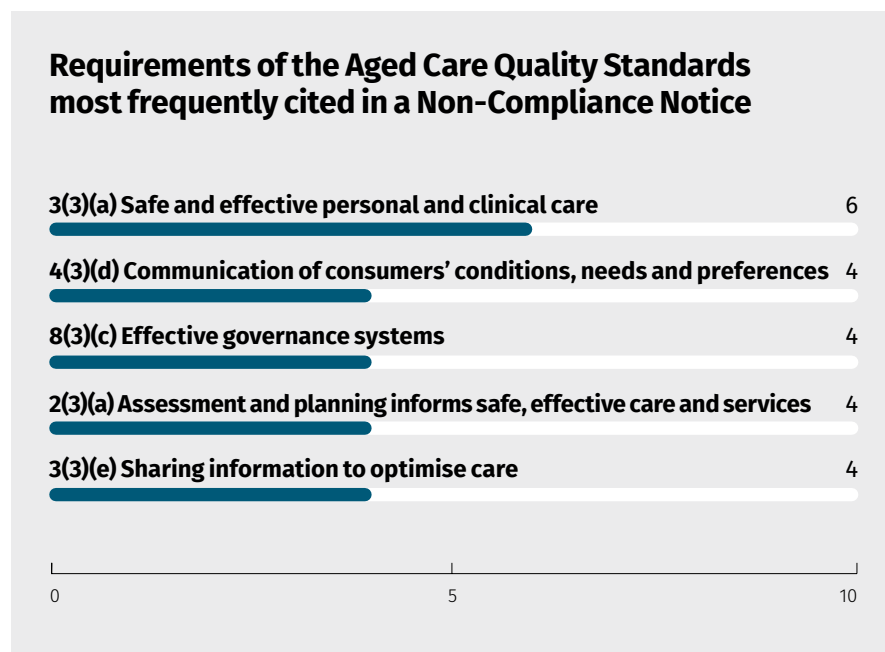


Figure 48. Requirements of the Aged Care Quality Standards most frequently cited in a Non-Compliance Notice

Sanctions

In this quarter, 1 Sanction was imposed on a home services provider. The provider failed to comply with the User Rights Principles because it did not transfer a portion of one or a number of consumers' unspent funds to the Commonwealth after it ceased providing care to the consumer/s, and also failed to provide information about those funds when required. The provider is not eligible to receive funding for new consumers for the period of the sanction.

Revocation decisions

There were no revocation decisions in quarter 2.

Sector performance report

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Note on data

Consumer and service data are sourced from the Report on the Operation of the Aged Care Act 2021, released November 2021. The full report can be found on the [GEN Aged Care data website](#).

Sector performance data is extracted at a point in time from Commission systems. Reported figures may be superseded as database records are updated.

Data about quality assessment and monitoring activities and outcomes in this report includes care delivered flexibly (for example services provided through Short-Term Restorative Care).

Note on definitions

The terms 'very few', 'some', 'many/all' reflect the proportion of requirements not met within each Quality Standard. As the number of requirements in each Standard varies, the proportions are determined according to the table below.

Note on National Aboriginal and Torres Strait Islander Flexible Aged Care Program (NATSIFACP) data

Sector performance data about the NATSIFACP is reported on an annual basis.

Number of requirements not met	Number of requirements in each Quality Standard				
	Standard 5	Standard 6	Standards 2, 7, 8	Standard 1	Standards 3, 4
	3 requirements	4 requirements	5 requirements	6 requirements	7 requirements
1	Very few	Very few	Very few	Very few	Very few
2	Some	Some	Some	Very few	Very few
3	Many/all	Many/all	Many/all	Some	Some
4		Many/all	Many/all	Many/all	Some
5			Many/all	Many/all	Many/all
6				Many/all	Many/all
7					Many/all



The Aged Care Quality and Safety Commission acknowledges the Traditional Owners of country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.



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