

Aged Care Quality and Safety Commission

Sector performance report

April – June 2021



Australian Government

Aged Care Quality and Safety Commission

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Sector performance report

April – June 2021

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Sector performance overview

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Aged care services in Australia

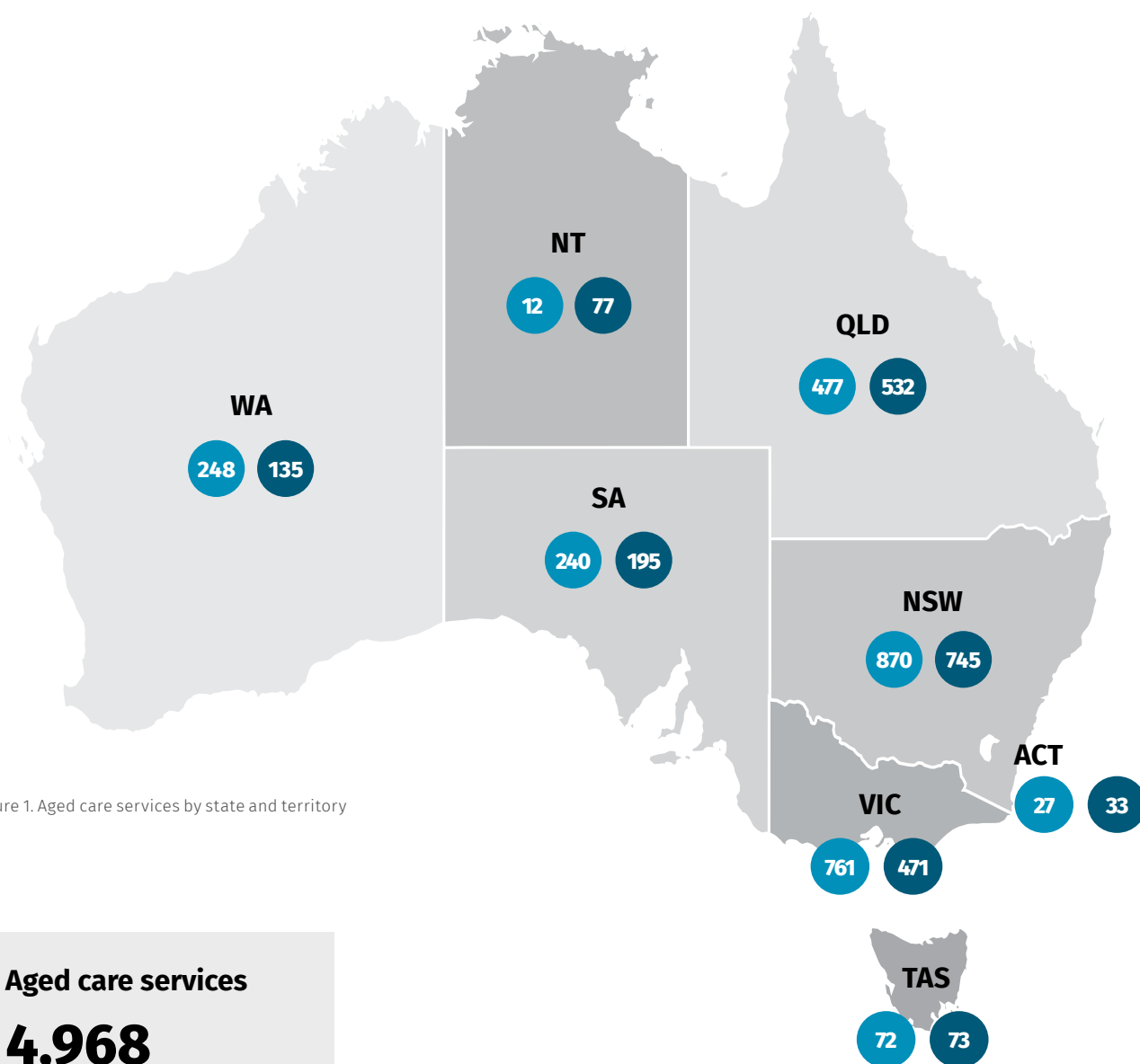


Figure 1. Aged care services by state and territory

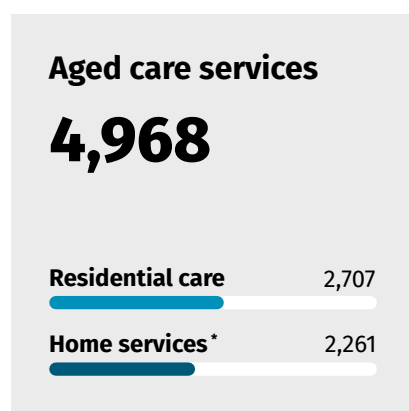


Figure 2. Aged care services

* Home services include home care packages, CHSP, and flexible care and services delivered in a home setting.

- Residential care services
- Home services

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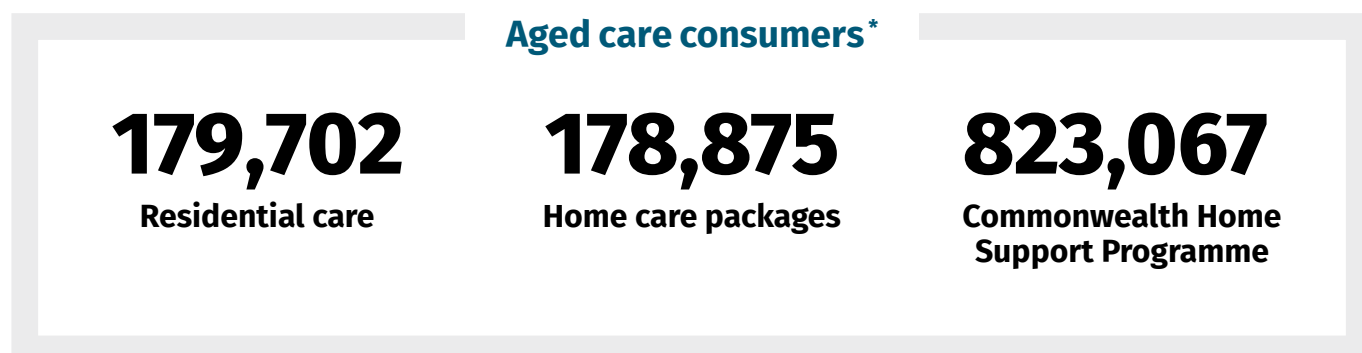


Figure 3. Aged care consumers



Figure 4. Sector performance overview

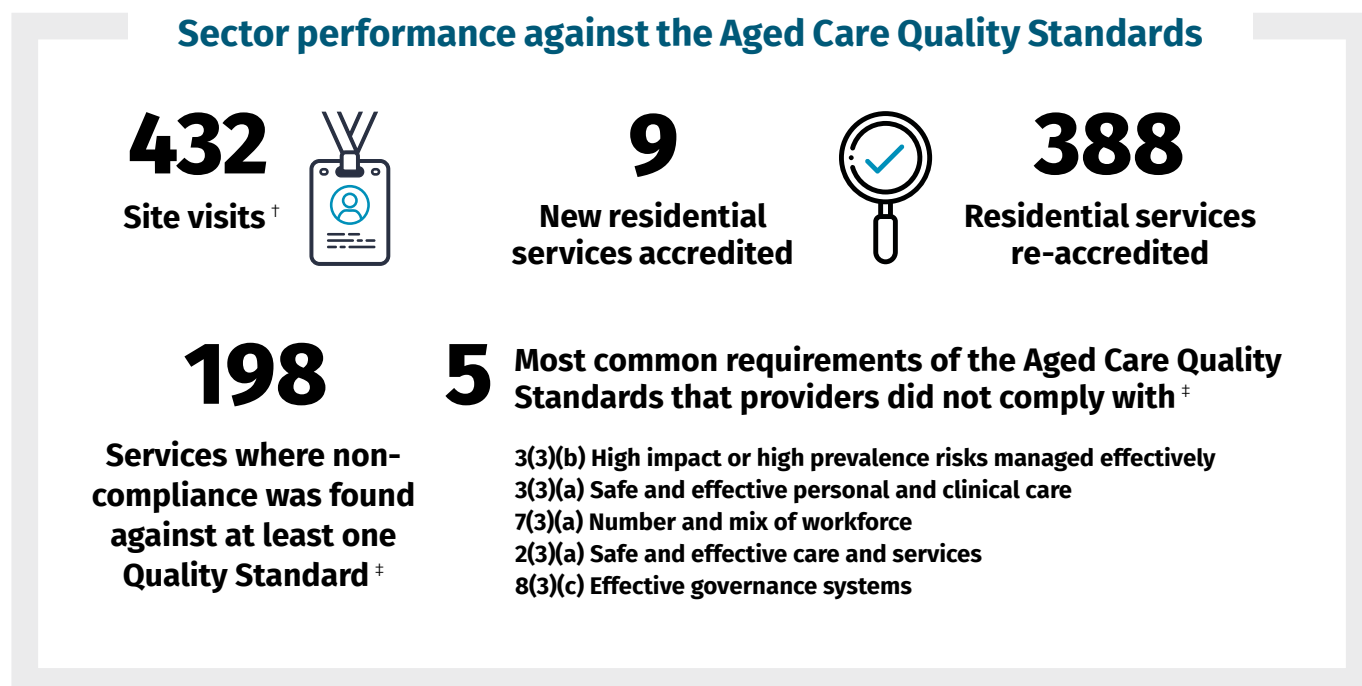


Figure 5. Sector performance against the Aged Care Quality Standards

* See Note on data

§ Includes complaints related to residential care, home services, the National Aboriginal and Torres Strait Islander Flexible Aged Care Program and Flexible Care

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

‡ Includes residential and home services

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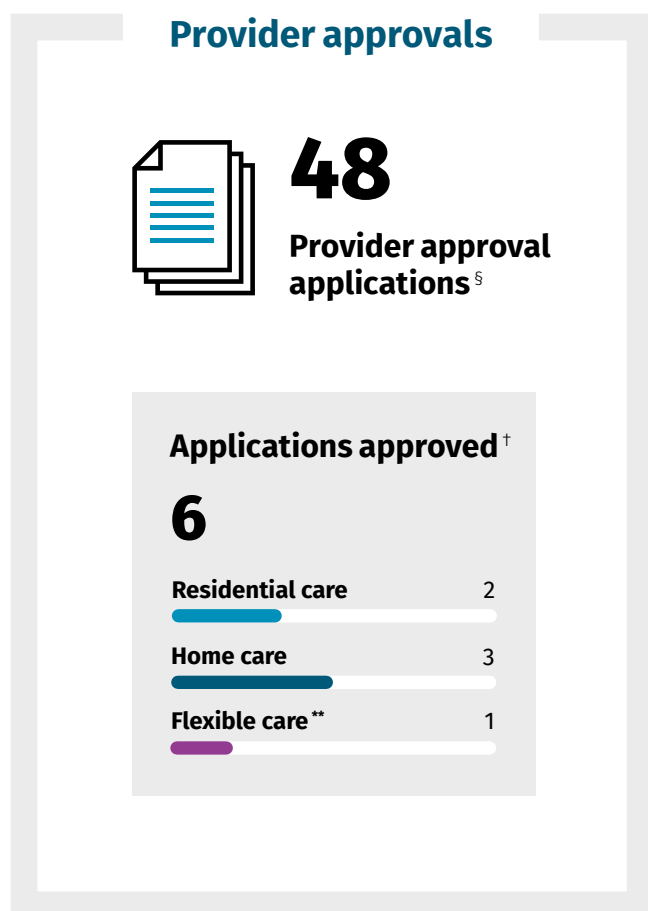


Figure 6. Provider approvals

§ 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

† Approved applications may include those that were made in previous quarters

* Includes home care packages and CHSP

** Includes short term restorative care, transition care, multi purpose services and innovative care

‡ Includes complaints related to residential care, home services, the National Aboriginal and Torres Strait Islander Flexible Aged Care Program and Flexible Care

^ May include those that were raised in previous quarters

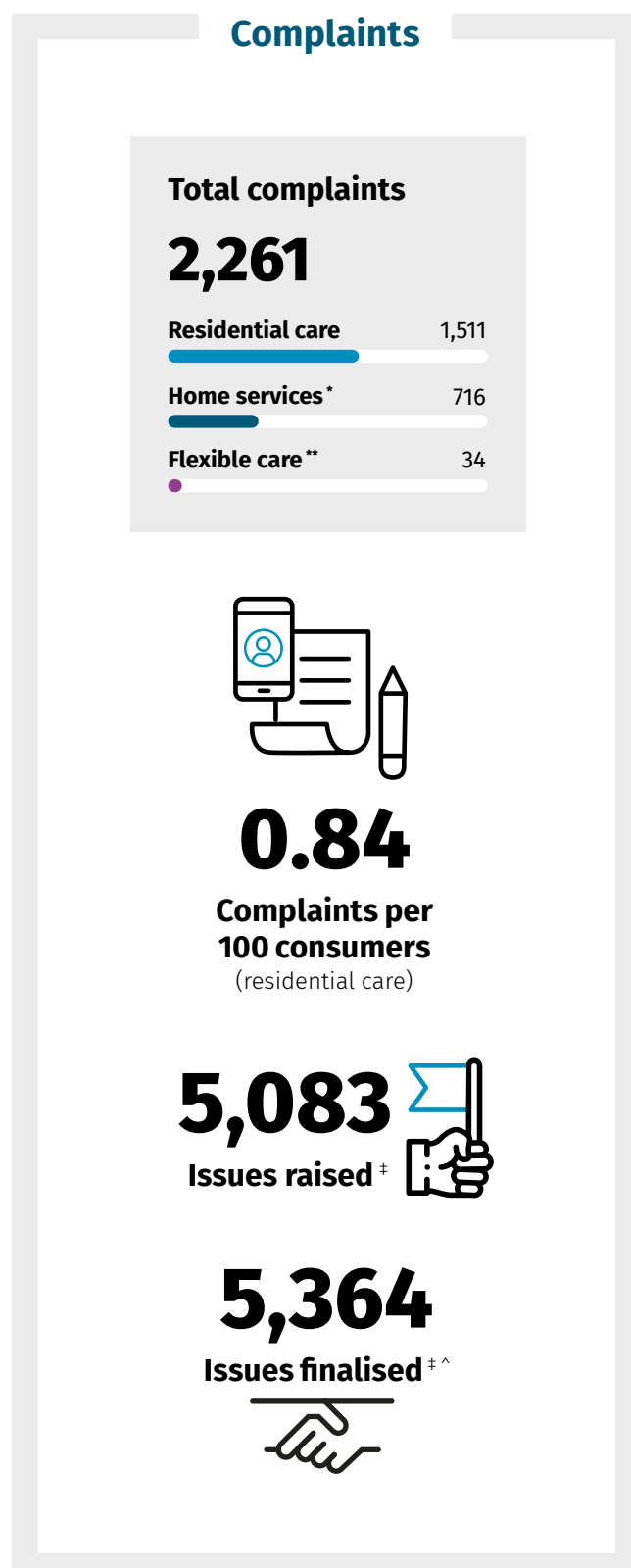


Figure 7. Complaints about aged care services

Sector performance overview

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Our response to non-compliance



118

Directions



69

Non-Compliance
Notices



3

Incident Management
Compliance Notices



2

Notices to Agree



5

Sanctions

Figure 8. Enforceable regulatory actions undertaken

Residential care sector performance

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Provider approvals

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

During the quarter, the Commission received 5 applications to become an approved provider of residential care. Over the same period, the Commission approved 2 applications and declined 2 applications to become an approved provider of residential aged care. A further 1 application 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.

An application can be made for approval to provide home care, residential care, flexible care, or any combination of these care types. The outcomes of applications (for example 'did not proceed') are counted for each type of care included in the application.

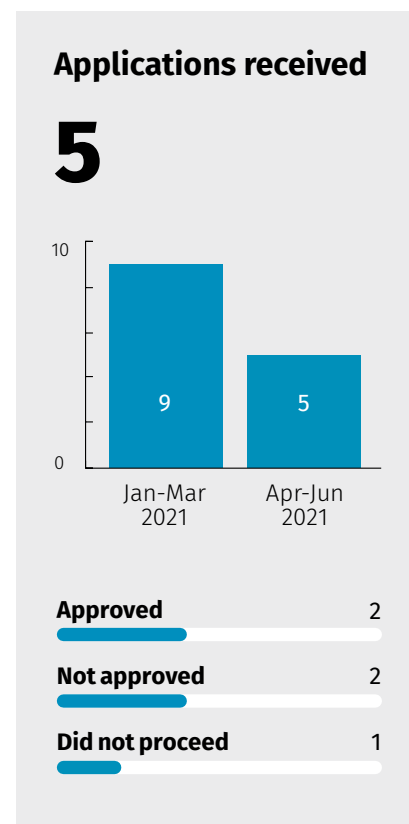


Figure 9. Provider applications and approvals. Application outcomes may relate to applications that were received in previous quarters.

Complaints

High or low complaint numbers are not, by themselves, a measure of good or poor service delivery. Under the 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 10. Complaints received in the last 2 quarters

Residential care sector performance

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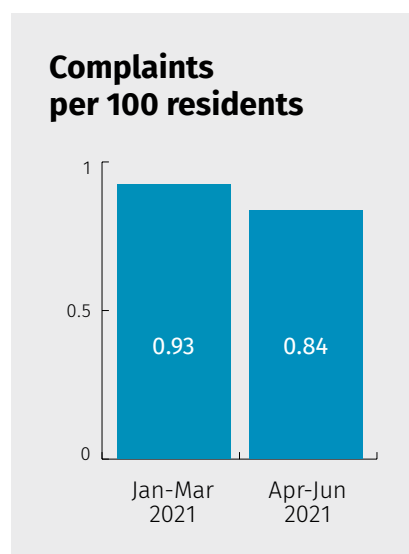


Figure 11. Complaints received in the last 2 quarters, per 100 residential care consumers

How many services had zero complaints, one, or more than one complaint made about them?

898, or 33% of residential care services were the subject of a complaint to the Commission during this period.

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

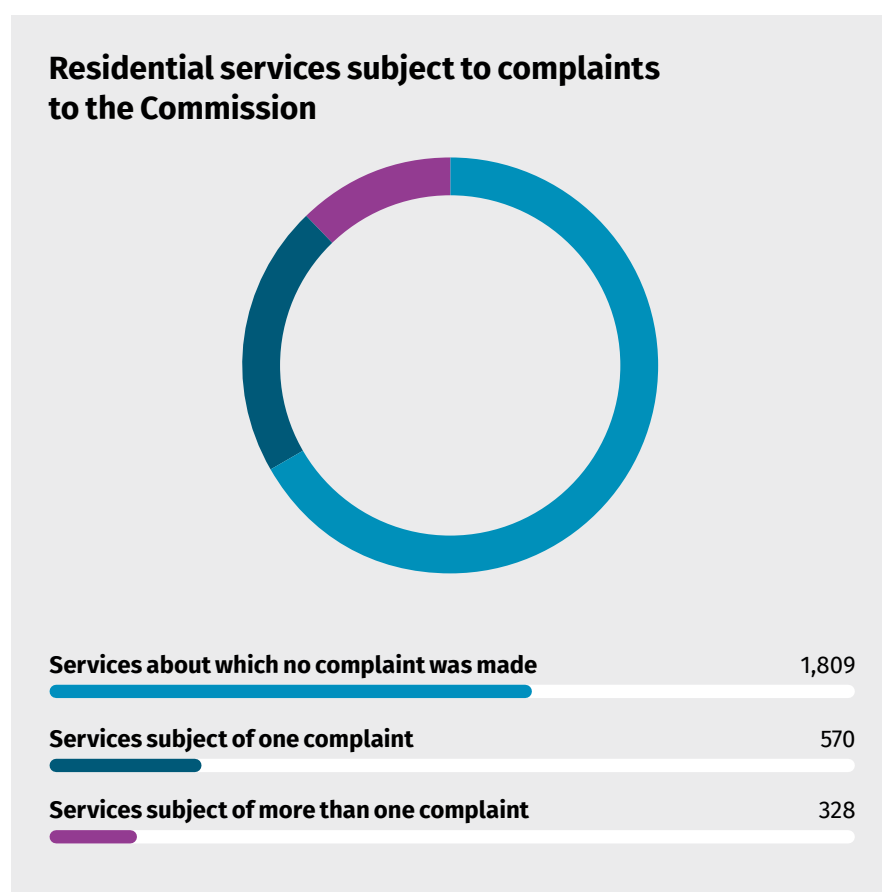


Figure 12. Complaints by service

Residential care sector performance

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How many complaints were made in each state and territory?

This table 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 gives a ratio of complaint issues, by the overall number of aged care residents in each state and territory.

Complaints about residential care

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Complaints received	425	419	309	158	120	48	11	21	1,511
Number of issues	1,184	930	693	407	302	155	32	69	3,772
Ratio of complaint issues per 100 residents **	2.00	2.00	1.95	2.56	1.91	3.56	6.50	3.08	2.10

Figure 13. Complaints by state and territory

* Where there are relatively few aged care residents – such as in the Northern Territory – this calculated ratio is very sensitive to small changes in the total number of complaint issues.

^ Ratios are calculated based on the total number of complaint issues received throughout the quarter and the number of consumers as at 17 June 2021.

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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.

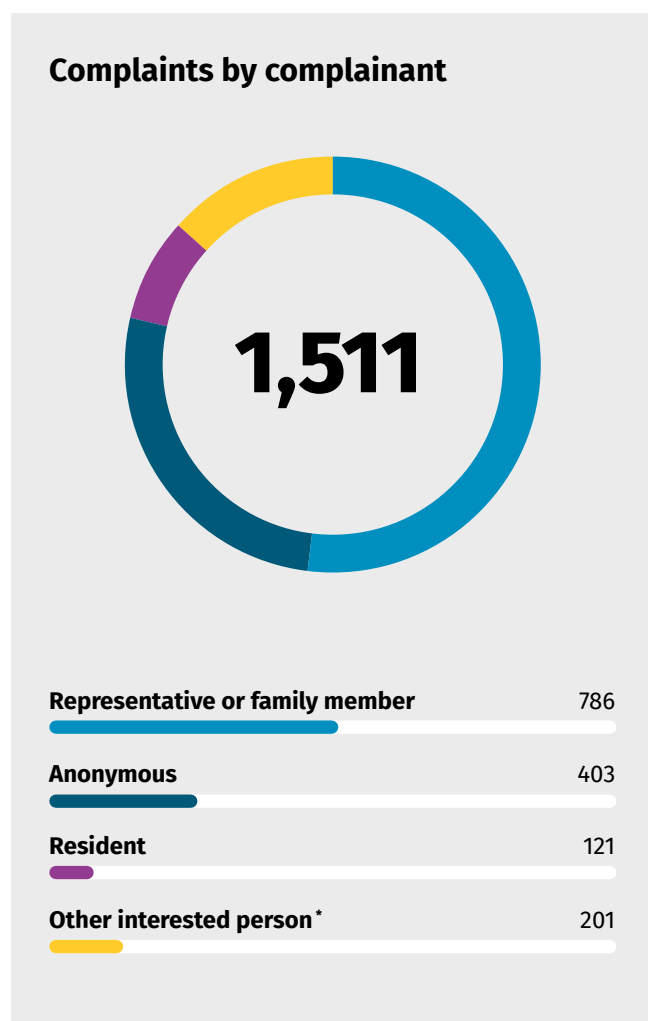


Figure 14. Complaints by complainant

* 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 15. Top 10 complaint issues

Residential care sector performance

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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 (top 5)

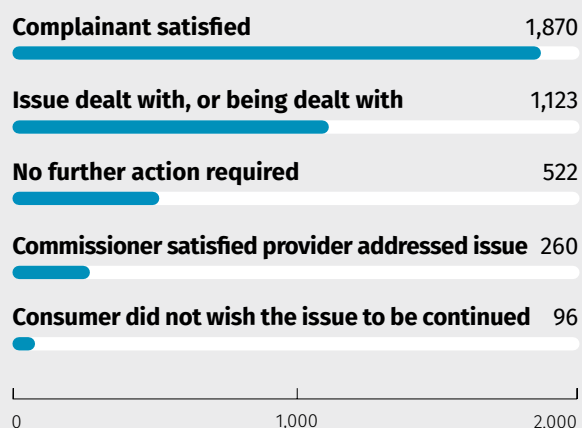


Figure 16. Top 5 reasons complaint issues were finalised

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.

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Quality assessment and monitoring

How many quality assessment and monitoring activities were carried out against 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 its aged care responsibilities, including the Quality Standards.

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

* The Commission's Infection Control and Monitoring (ICM) program became part of regulatory activities in this quarter. Targeted Infection Control Spot Checks may be carried out where approved providers fail to report on COVID-19 vaccination rates, or report low vaccination levels, or where other information indicates a high risk may be present. For this reason, ICM spot checks are now included in the audit and assessment activities captured below.

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

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Assessment contacts	316	124	77	45	35	8	13	4	622
Site audits	72	50	34	22	16	4	1	3	202
Review audits	2	0	2	0	1	0	0	0	5

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

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

This quarter the Commission made 395 on-site contacts with residential services, through assessment contacts, site audits and review audits.

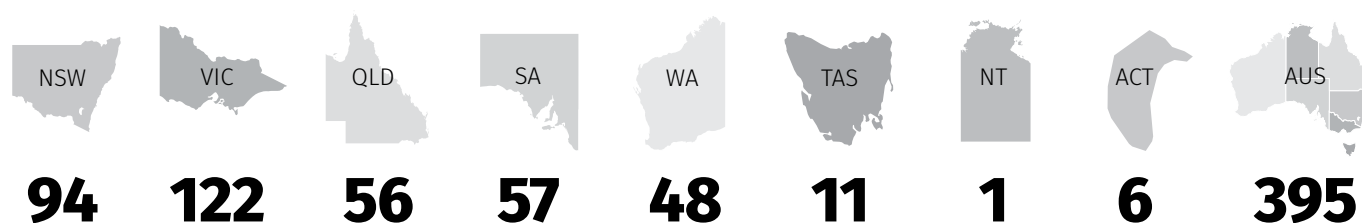


Figure 18. On-site quality assessment and monitoring activities by state and territory

Residential care sector performance

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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. The number of times a site audit resulted in a decision to reaccredit for a period of less than 3 years, or a decision not to reaccredit a service, is presented in Figure 26.

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

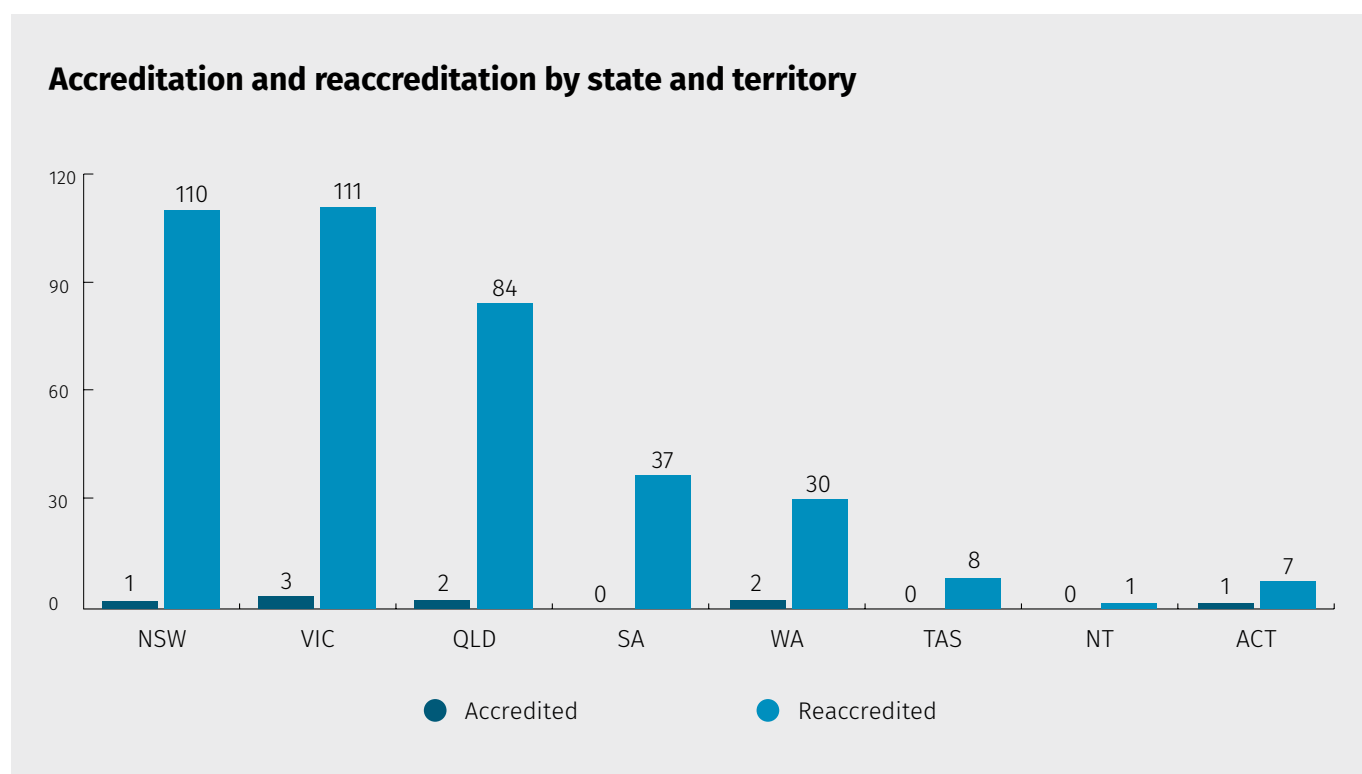


Figure 19. Accreditation and reaccreditation by state and territory

Residential care sector performance

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How did approved providers perform against each of the Aged Care Quality Standards?

An approved provider may operate one or more services. The Commission found non-compliance in relation to 189 services this quarter.

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

This figure shows that, of all the non-compliance against the Quality Standards found during the quarter, the most common was in relation to Standard 3 (personal care and clinical care). The higher proportion of non-compliance with Standard 3 was due largely to non-compliance with 'very few requirements.'

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

189

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 Quality Standard

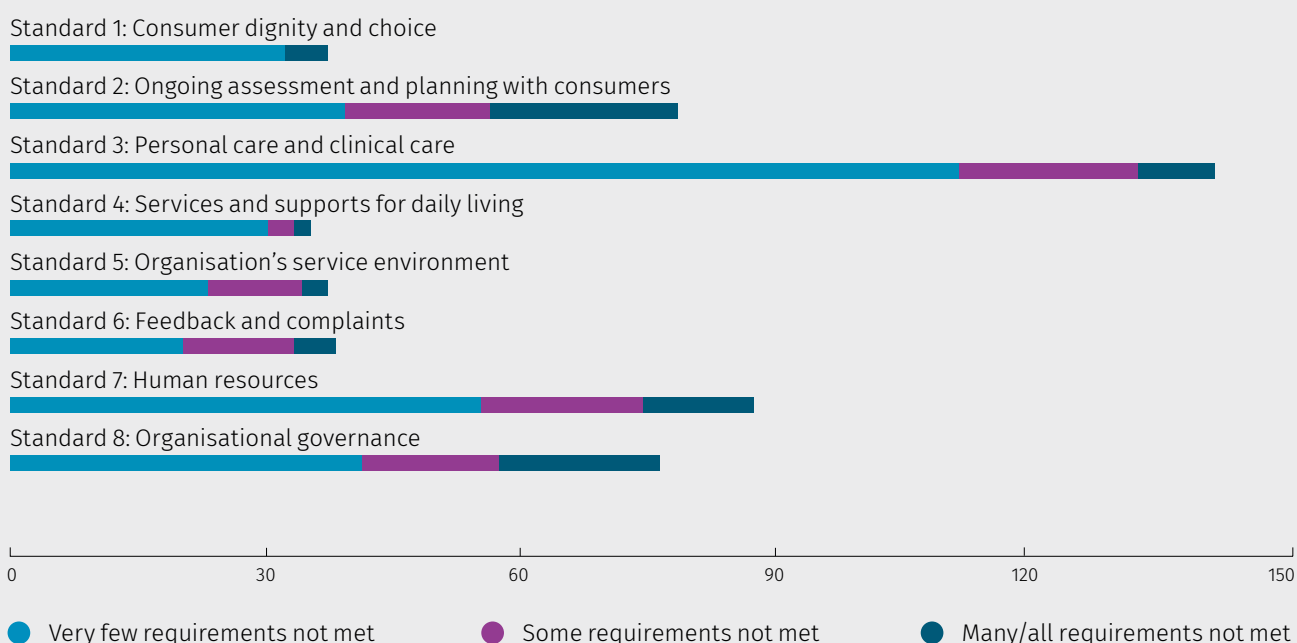


Figure 21. Total number of services where non-compliance with the Aged Care Quality Standards was found

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How did approved providers perform against 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 against the requirement of the Quality Standard.



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

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Non-compliance was found most often against 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 Quality Standard 3

Compliance and enforcement

How does the Commission respond to 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, wellbeing 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 directions notices issued in relation to each.

Residential care sector performance

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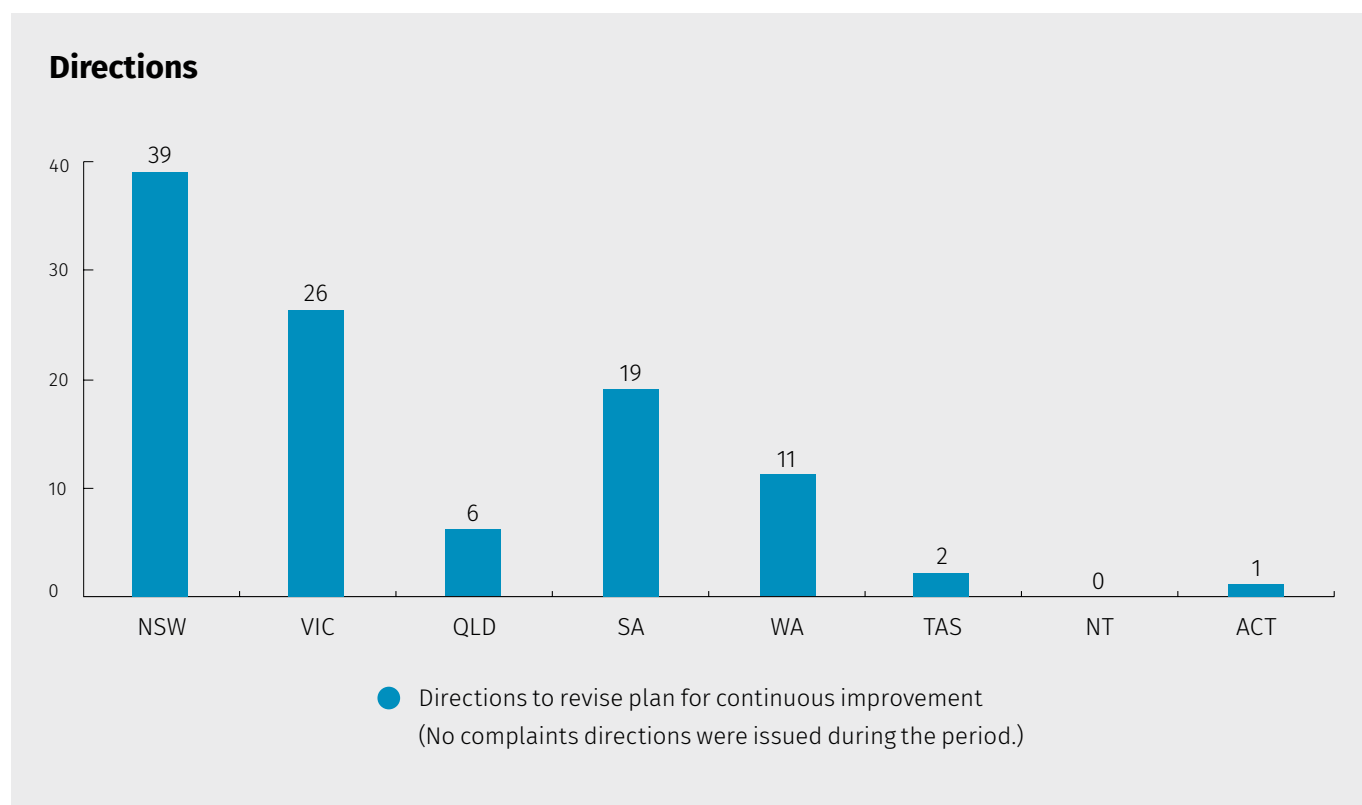


Figure 24. Directions

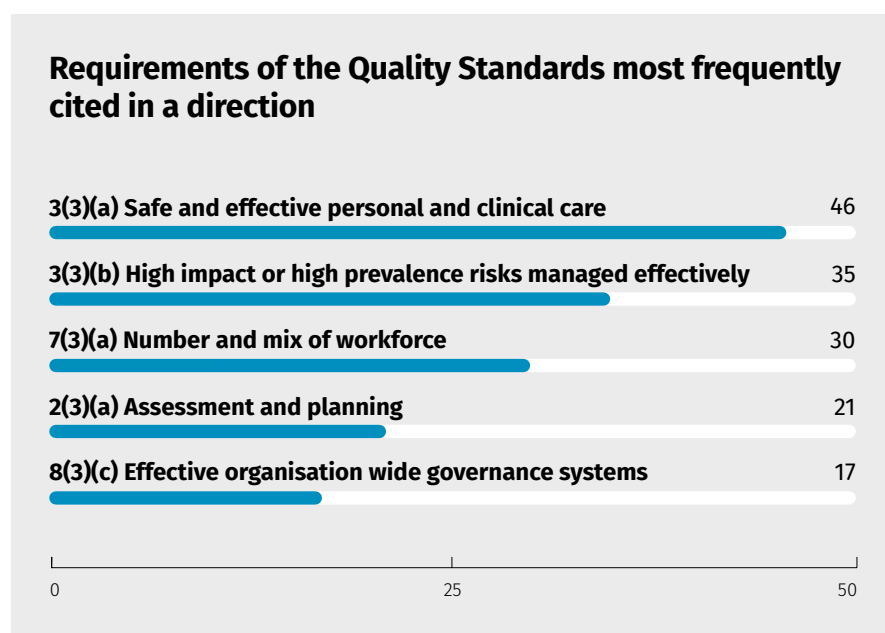


Figure 25. Requirements of the Quality Standards most frequently cited in a direction

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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 wellbeing of the people they care for.

For residential services, where a review audit has been completed, the Commission will consider the audit report, the provider's response to the report and other relevant matters such as the service's compliance history and whether the provider has demonstrated commitment to continuous improvement of the service with respect to the Aged Care Quality Standards.

The Commission may then decide to vary or revoke the period of accreditation of the service.

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
Non-Compliance Notices	32	19	6	5	2	0	0	0	64
Notices to Remedy	31	14	8	4	1	1	0	0	59
Incident Management Compliance Notices	1	0	1	0	1	0	0	0	3
Notices to Agree	1	0	0	0	1	0	0	0	2
Sanctions	4	1	0	0	0	0	0	0	5

Accreditation decisions

Reaccredited for less than 3 years	45	9	9	11	8	0	0	1	83
Accreditation period varied or revoked	0	0	2	0	0	0	0	0	2
Services that were not reaccredited	0	0	0	0	0	0	0	0	0

Figure 26. Enforceable regulatory actions

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Non-Compliance Notices

A Non-Compliance Notice 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 a Non-Compliance Notice (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 Quality Standards most frequently cited in Non-Compliance Notices issued to providers.

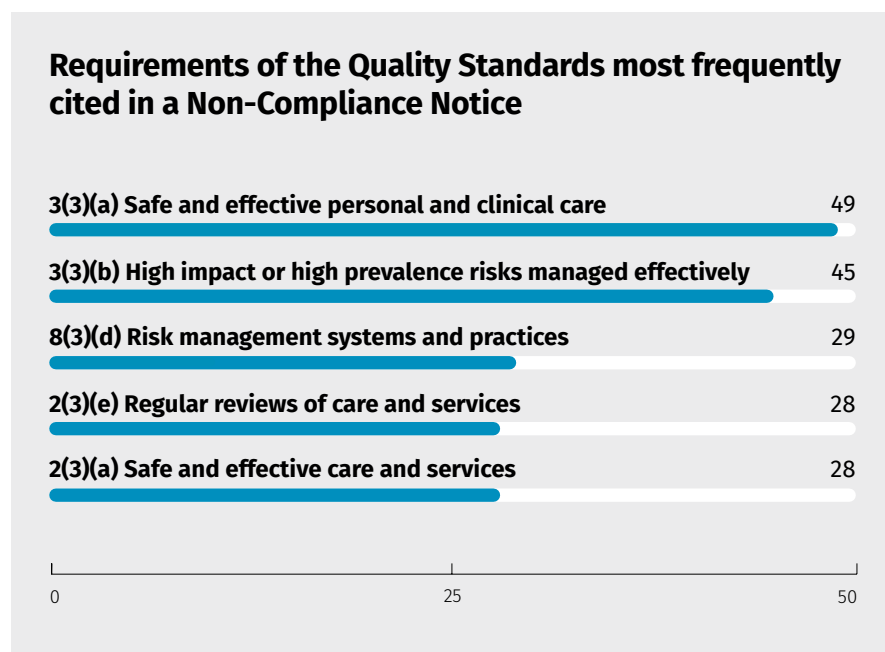


Figure 27. Requirements of the Quality Standards most frequently cited in a Non-Compliance Notice

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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 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 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 28. Number of notices to agree

Standard or section of legislation where non-compliance most frequently resulted in a Notice to Agree

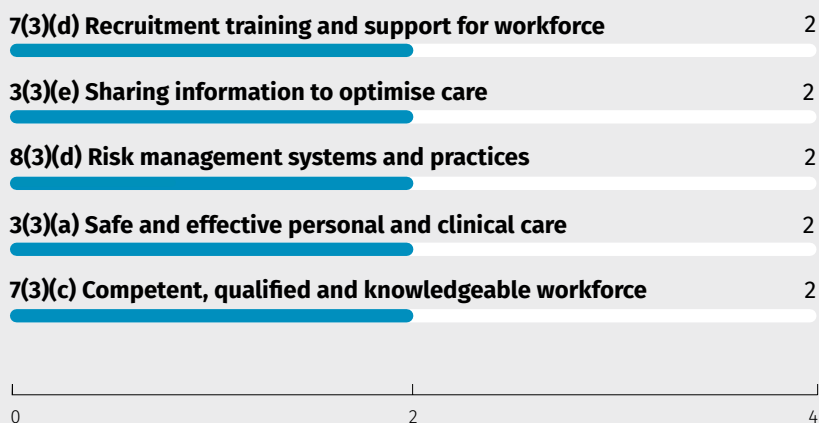


Figure 29. Number of notices to agree

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Incident Management Compliance Notices

The Commission may give an approved provider a Compliance notice in relation to its incident management 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 pathway.

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.

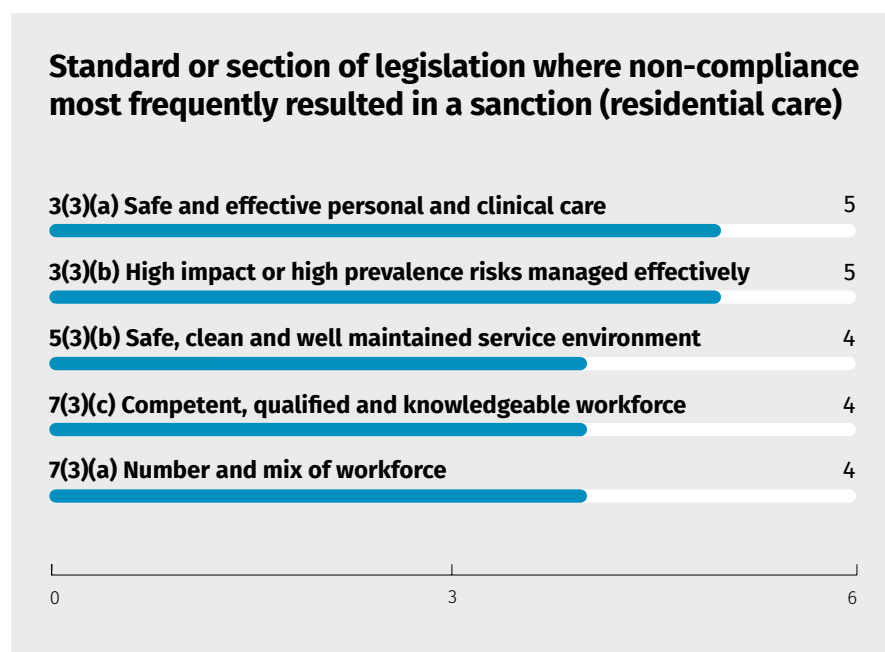


Figure 32. Number of Sanctions

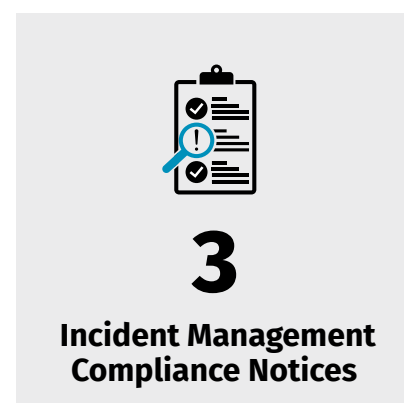


Figure 30. Number of Incident Management Compliance Notices



Figure 31. Number of Sanctions

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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 4.

Home services sector performance

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Provider approvals

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

During the quarter, the Commission received 39 applications to become an approved provider of home care.

Over the same period, the Commission approved 3 applications to become an approved provider of home care, and declined approval for 13 applications. A further 8 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.

An application can be made for approval to provide home care, residential care, flexible care, or any combination of these care types. The outcomes of applications (for example 'did not proceed') are counted for each type of care included in the application.

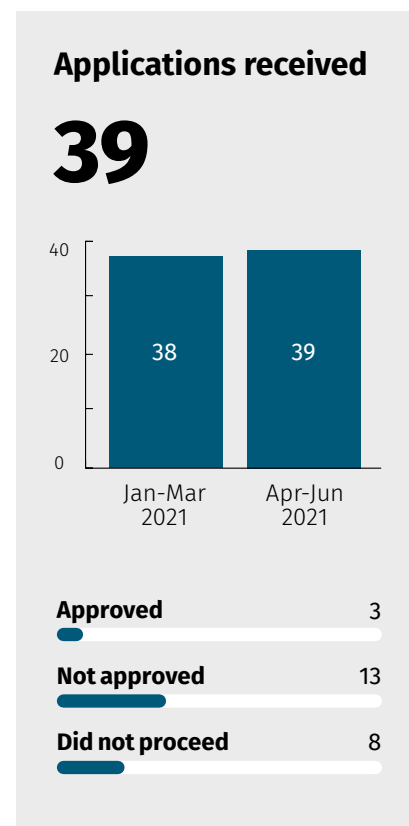


Figure 33. Home care provider applications and approvals

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Complaints

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

Under the 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	199	255	150	34	46	17	7	8	716
Number of issues	377	416	241	59	93	26	15	15	1,242

Figure 35. Complaints by state and territory



Figure 34. Complaints received in the last 2 quarters

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Who makes complaints?

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

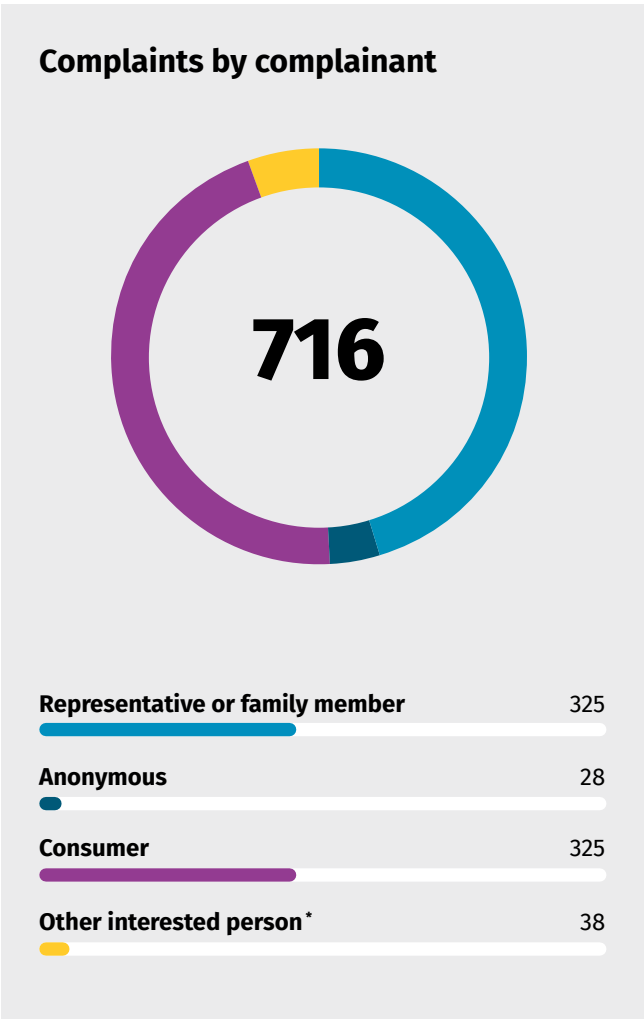


Figure 36. Complaints by complainant

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

What are complaints about?

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

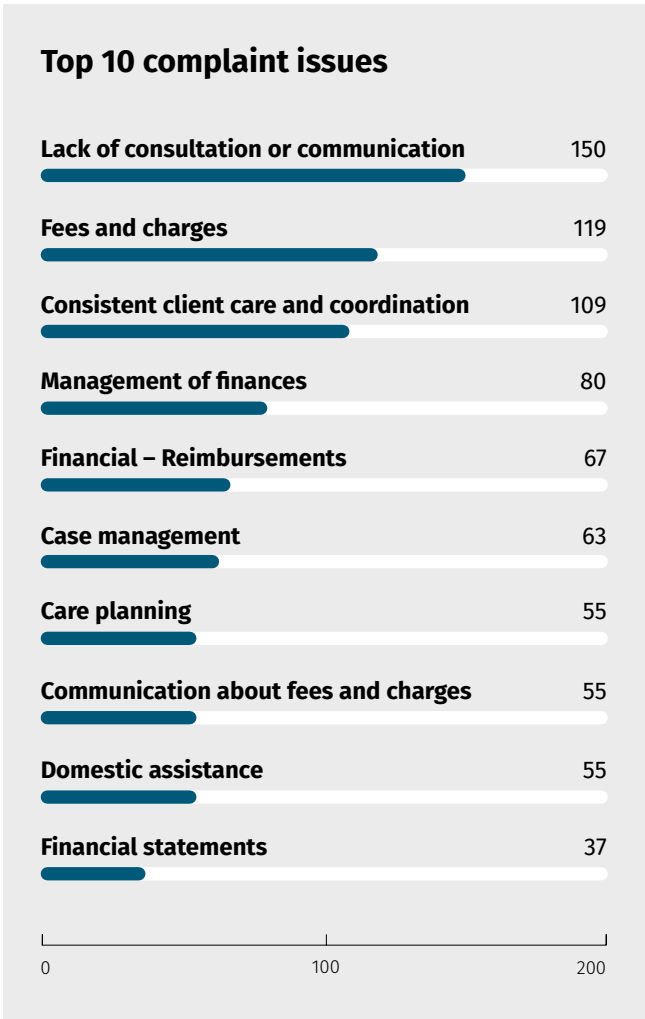


Figure 37. Top ten complaint issues

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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 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 (top 5)

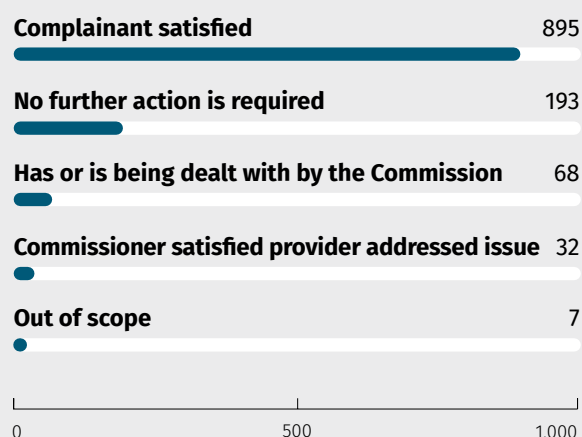


Figure 38. Top 5 reasons complaint issues were finalised

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 against 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 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.

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

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Assessment contacts	6	1	11	11	2	1	2	0	34
Quality audits	8	8	4	0	0	0	0	0	20

Figure 39. Quality assessment and monitoring against the Aged Care Quality Standards

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

This quarter the Commission made 37 on-site contacts with home services, through assessment contacts and quality audits.

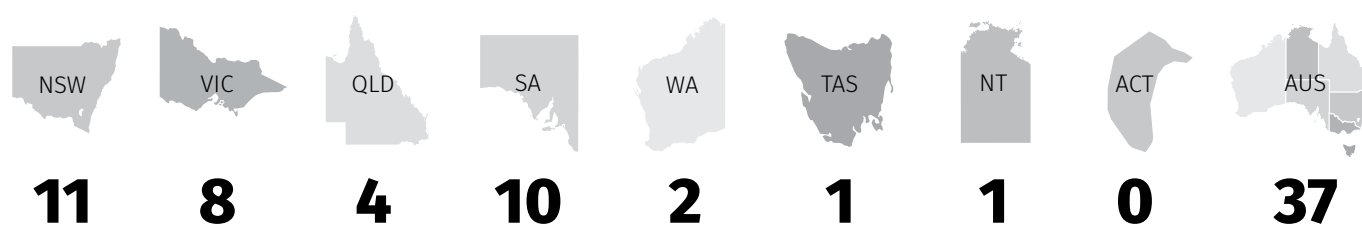


Figure 40. On-site quality assessment and monitoring activities by state and territory

Home services sector performance

April – June 2021

How did providers perform against 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 9 services this quarter.

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

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

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

9
Services where non-compliance was found



Figure 41. Non-compliance with the Aged Care Quality Standards

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

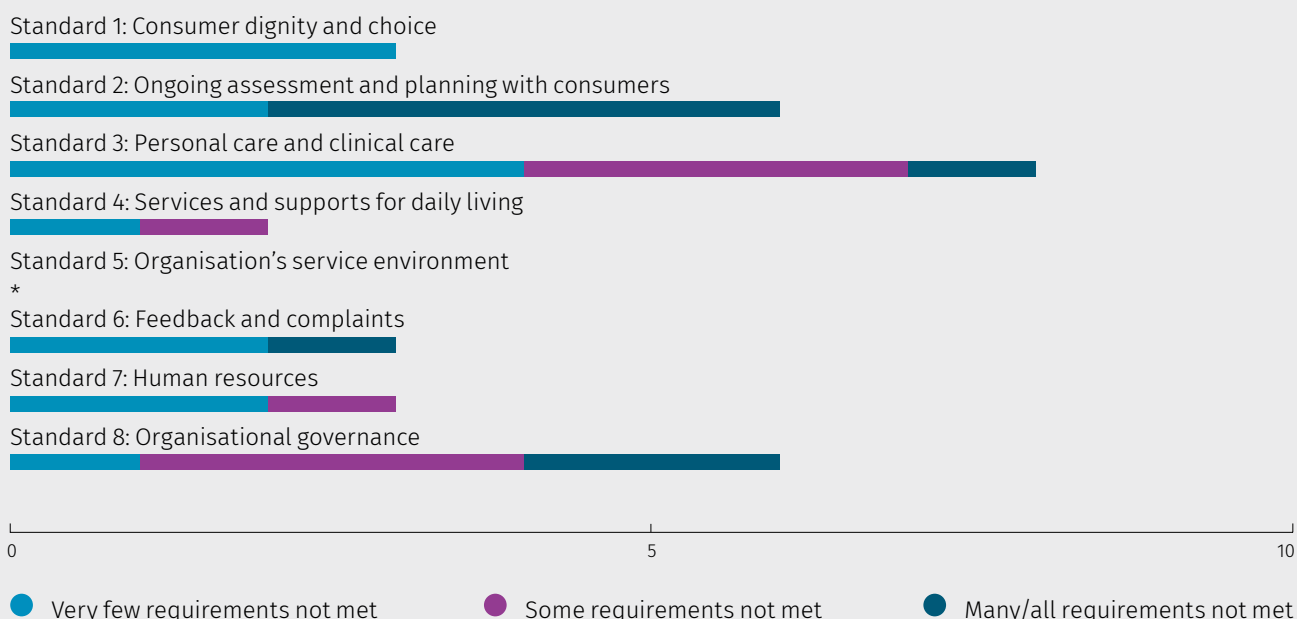


Figure 42. Total number of services where non-compliance with the Aged Care Quality Standards was found

* 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. There were no services where non-compliance with Quality Standard 5 was found in this quarter.

Home services sector performance

April – June 2021

How did providers perform against 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 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 against 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 10)

* This figure displays the number of times a decision of non-compliance was made against the requirement of the Quality Standard.

Compliance and enforcement

How does the Commission respond to 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.

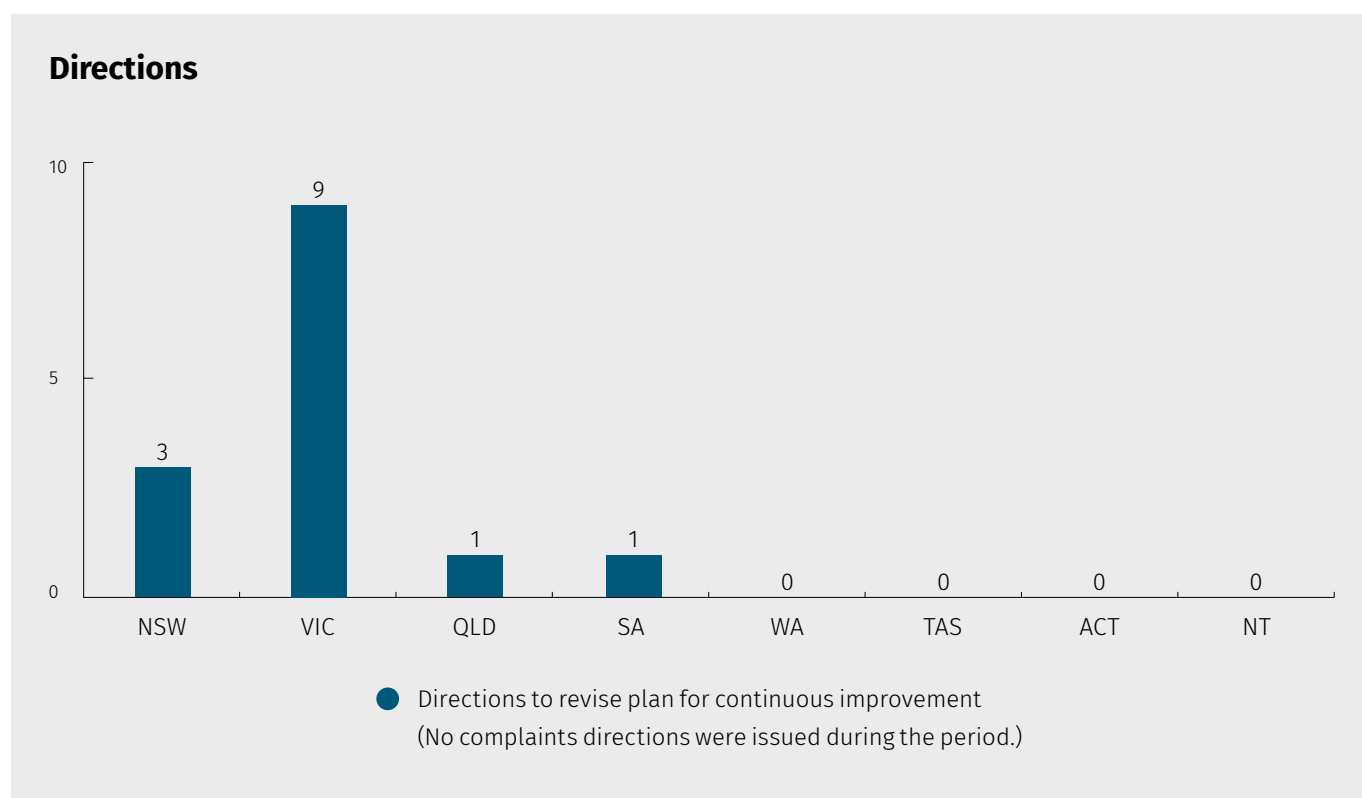


Figure 44. Directions

Home services sector performance

April – June 2021

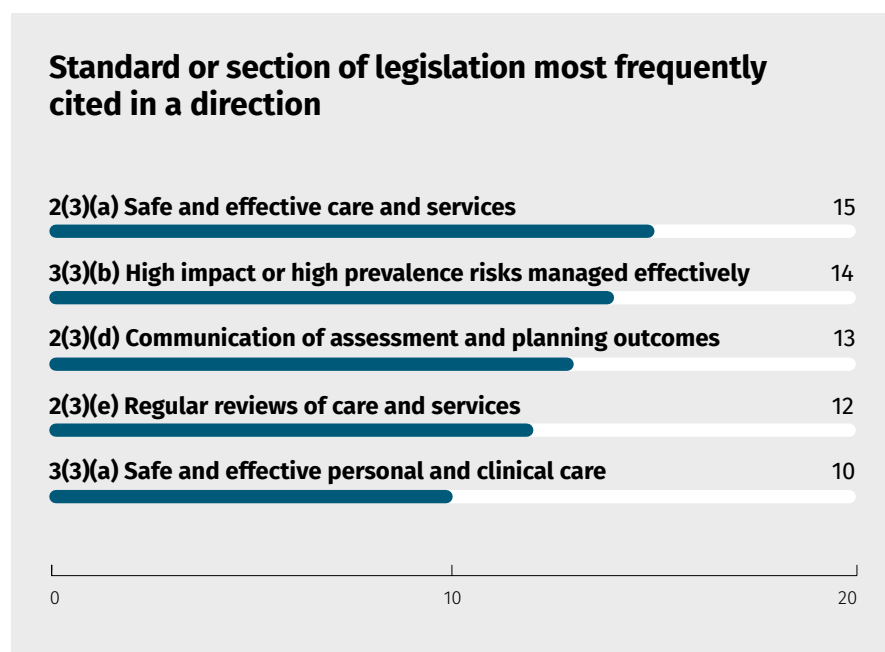


Figure 45. Standard/section of legislation where non-compliance was most frequently cited in a direction



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.

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

	NSW	VIC	QLD	SA	WA	TAS	NT	ACT	AUS
Non-Compliance Notices	1	0	4	0	0	0	0	0	5
Notices to Remedy	0	0	3	0	0	0	0	0	3
Notices to Agree	0	0	0	0	0	0	0	0	0
Sanctions	0	0	0	0	0	0	0	0	0

Figure 47. Enforceable regulatory actions

Home services sector performance

April – June 2021

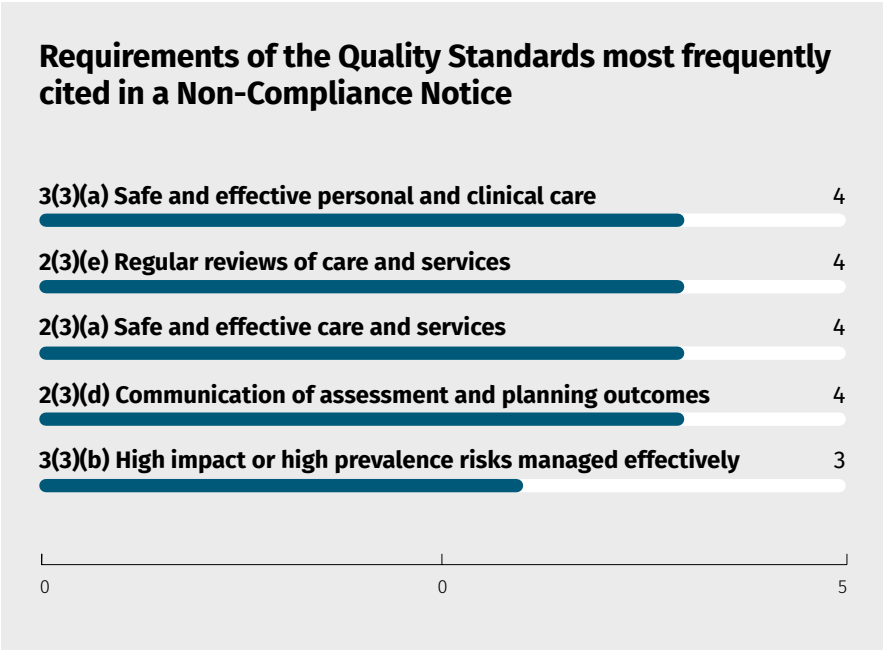


Figure 48. Requirements of the Quality Standards most frequently cited in a Non-Compliance Notice

Revocation of provider approval

There were no revocation decisions in quarter 4.

Sector performance report

April – June 2021

Note on data

Consumer data are sourced from the Department of Health. Quarter 4 data sources are different to the data source used in the Quarter 3 report.

Consumers in residential care: Department of Health data supplied to the Commission as at 17 June 2021.

Home care packages: Department of Health data supplied to the Commission as at 30 July 2021.

Commonwealth Home Support Programme: Department of Health data supplied to the Commission as at 31 July 2021.

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

Use of the terms 'very few, some, many/all':
The classifications 'very few, some or many/all' of the requirements of the Quality Standards used in this report are calculated based on the proportion of requirements not met within each 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 will be reported on an annual basis, from 2020-21 onwards.

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.



Phone

1800 951 822



Web

agedcarequality.gov.au



Write

Aged Care Quality and Safety Commission
GPO Box 9819, In Your Capital City