



Australian Government

Aged Care Quality and Safety Commission

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# **Stronger Standards, Better Aged Care Program**

**Stronger Standards**  
Better Aged Care



# Session outline

- Stronger Standards, Better Aged Care Program context
- Program of work
- Strengthened Quality Standards Pilot Project
- Strengthening the Standards – what is changing
- Evidence framework
- Sector support



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- ① Royal Commission
- ② Independent evaluation of the Standards
- ③ New regulatory model

**A better aged care  
experience** for  
older Australians



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# Stronger Standards Better Aged Care



## Vision Statement

The strengthened Quality Standards are designed to deliver a better aged care experience. The Stronger Standards Better Aged Care Program will provide valued and effective support to help the sector prepare for the implementation of the stronger Standards.

We strive to be a world-class regulator, strengthening our capability, effectiveness and accountability. We are committed to the goal of protecting and enhancing the safety, health, wellbeing and quality of life of every aged care consumer.

The Program will also help to position the Commission as a contemporary, connected, accessible regulator supporting continuous improvement, excellence and trust in the provision of quality aged care to older persons receiving Commonwealth funded aged care in Australia.

## End State

### Our Providers

- I am supported to understand and operationalise my legal commitments and obligations to the people in my care
- I effectively demonstrate how our operations and provision of care delivers on the strengthened Standards
- I consistently measure and evidence the performance of my service against the Standards
- I know what to expect when the Commission assesses my performance
- I understand how to effectively interact with the Commission
- I know where to go to get the information and support I need
- Older people know what they can expect for their care experience when they choose to receive the services I provide
- My staff know what the standards mean for them and their provision of care.

# Program timeframes - indicative

December 2022

October 2024

## Public consultation - strengthened Quality Standards

Consultation activities by Department

## Design & test a new audit method

Design new audit methodology and run a pilot program with providers

## Feedback on Pilot Outcomes

Feedback to Sector and Department on Pilot outcomes.

## New Aged Care Act

New Act passed.  
Final strengthened Quality Standards published.

## Release of guidance materials

Final guidance materials and learning resources released.

## Continued support and resources

Provide intensive support to stakeholders to embed practices

## Draft strengthened Quality Standards released

Draft Standards available to ACQSC to design implementation.

## Public Consultation – New Regulatory Framework

Consultation activities by Department

## Design the change support

Design the transition steps and change support.

## Readiness Test

End to end testing of method, processes and support materials to confirm readiness

## Go live

Strengthened Quality Standards in place.

## Monitor & Reflect

Assess ways of working and adjust where required.

**Continuous change management, stakeholder engagement, communications activities**



# Piloting the strengthened Quality Standards

## The pilot project will inform:

- How we will adjust the way we assess provider performance under the strengthened Standards
- How graded assessment will better differentiate performance
- What support providers will need to understand and meet the strengthened Standards
- How to best support older Australians to understand what the strengthened Standards mean for the delivery of safe and quality aged care
- Feedback to the Department regarding application of the strengthened Standards.



# Strengthened Quality Standards Pilot timeline



# Understanding the strengthened Standards

The Commission has compared the current Standards against the draft strengthened Standards to show where the Standards have been strengthened.

## Our framework for explaining the changes:

1. Actions which **align directly with existing requirements** under the current Quality Standards  
*Actions identified with the same intent and focus as current requirements*
2. Actions which align with **existing provider responsibilities** in the current legislation  
*Actions which are currently in legislation and have been lifted into the strengthened Standards*
3. Actions which **clarify existing requirements** under the current Quality Standards  
*Actions which have been clarified to be more specific and or explicit*
4. Actions which are **new or enhanced**  
*Actions which are new, including those which relate to recommendations from the Royal Commission*  
*Actions where we are dialing up our expectations of care*





<b>Draft Strengthened Standards</b>	Number of actions associated with this standard	Number of actions which <b>align with</b> existing Quality Standard requirements	Number of actions which align with other <b>existing provider responsibilities</b> within the legislation	Number of actions which <b>clarify existing requirements</b> within the current Quality Standards	Number of actions that <b>introduce new concepts or enhanced expectations</b> in comparison to the current Quality Standards
<b>Standard 1:</b> The Person	21	5	7	9	
<b>Standard 2:</b> The Organisation	46	7	8	25	6
<b>Standard 3:</b> The Care and Services	21	4		15	2
<b>Standard 4:</b> The Environment	7	2		5	
<b>Standard 5:</b> Clinical Care	38	3		27	8
<b>Standard 6:</b> Food and Nutrition	10			4	6
<b>Standard 7:</b> The Residential Community	9		1	8	
	<b>152</b>	<b>21</b>	<b>16</b>	<b>93</b>	<b>22</b>
		14%	11%	61%	14%

## Examples of actions which align with the existing Quality Standard requirements



### **Standard 1:** The Person

- Older people are treated with kindness, dignity and respect
- Older people are supported to live the best life they can, by ensuring their goals and preferences are understood and exercising dignity of risk to support quality of life
- Older people receive information about their care and services that is current, accurate and timely, in a format they understand, that enables them to make informed decisions

### **Standard 2:** The Organisation

- The governing body leads a positive culture of safety
- Actions in relation to ensuring access to feedback and complaints management systems, and enabling access to advocates and language services
- Action in relation to practicing open disclosure
- Actions regarding the number and mix of workers, including their skill set and scope of practices, to enable the delivery and management of safe and quality care and services

## Examples of actions which align with other existing provider responsibilities within the legislation



### **Standard 1:** The Person

#### **Standard 1 incorporates requirements from the:**

- Charter of Aged Care Rights in relation to:
  - Older people maintaining their autonomy
  - Older people being involved in decision making
- Quality of Care Principles in relation to reportable incidents
- User Rights Principles in relation to:
  - Access to advocates
  - Terms articulated within care agreements
- Code of Conduct in relation to ensuring worker screening
- Financial & Prudential Principles in relation to transparency of fees and charges

### **Standard 2:** The Organisation

#### **Standard 2 incorporates requirements from the:**

- Aged Care Act, Accountability Principles and Records Principles, in relation to reporting requirements
- Quality of Care Principles, in relation to incident managements requirements
- Code of Conduct in relation to responding to concerns and complaints



## Examples of actions which clarify current Quality Standard requirements



### **Standard 3:**

The Care and Services

- The introduction of the concept of reablement in relation to optimising wellness for the older person
- More explicit requirements to identify and respond to deterioration in health
- More explicit requirements to identify others involved in the older person's care and ensuring care coordination, with a focus on transitions of care
- Partnership requirements clarified to explicitly reference recognition of carers as partners in the older person's care

### **Standard 4:**

The Environment

- More explicit requirements regarding identifying and managing environmental risks for workers, including in home care settings

### **Standard 5:**

Clinical Care

- Articulating specific requirements in relation to clinical assessments of older people
- The introduction of the concept of mobility in relation to falls management (prevention, reablement)
- More detailed requirements in relation to specific clinical care needs and comprehensive care

### **Standard 7:**

The Residential Community

- Privacy requirements expanded to include personal spaces
- Requirements regarding activities of daily living clarified to explicitly reference minimising boredom and loneliness for older people

## Examples of actions which **introduce new concepts** or **enhanced expectations in comparison to the current Quality Standards**



### **Standard 2:** The Organisation

- Ensuring delivery of care is trauma-aware and healing informed
- Actions regarding partnering with and reporting to older people in respect of provider governance decisions

### **Standard 5:** Clinical Care







- Clinical care is articulated as a Standard
- Requirements regarding safe and quality use of medicines, including consideration of polypharmacy
- Enhanced clinical governance requirements and enhanced requirements for working with other health professionals

### **Standard 6:** Food and Nutrition

- Food and nutrition is articulated as a Standard
- Introduction of requirements regarding development of menus in partnership with older people and relevant health professionals
- Explicit requirements regarding having sufficient workers to support food provision



# Evidence Framework

<b>Evidence Categories</b> The broad categories of evidence that together inform a holistic understanding of a provider or service's performance against the standards. Not all categories will be relevant to all outcomes and not all categories need to be evidenced to determine conformity.	<b>Older people's experience</b> Covers all types of evidence where the source is from older people who have experienced the care and services. This includes evidence from representatives, families, and carers for older people.	<b>Feedback from workers and management</b> This is evidence from people who work in/for the provider and/or service (including contractors). It also includes evidence from management and governing body.	<b>Feedback from third parties</b> This is evidence from third parties that interact with the provider and/or service that is being audited (e.g. advocacy groups, other regulators).	<b>Observations</b> This is evidence that is directly observed by the auditor to understand the delivery of care, interactions between workers and older people, and the implementation of controls in the service environment.	<b>Processes</b> This is series of steps, or activities that are carried out to deliver care and services that are safe and meets older people's needs. Focus is on effectiveness of the processes rather than simply the fact they exist.	<b>Outcomes</b> This is evidence that seeks to understand the impact of processes on older people (i.e. how care has affected older people's physical, functional or psychological status).
<b>Evidence types</b> Evidence types may vary by service type and outcome/action. Evidence types may be categorised by the relevant Donabedian risk and harm typologies/indicators	<ol style="list-style-type: none"> <li>1. Interviews with older people</li> <li>2. Interviews with representatives, families or carers of older people</li> <li>3. Surveys conducted by the Department or the Commission</li> <li>4. Surveys conducted by the provider or service</li> <li>5. Complaints and feedback (provider system)</li> <li>6. Complaints and feedback (Commission)</li> </ol>	<ol style="list-style-type: none"> <li>1. Interviews staff and contractors (clinical and non-clinical)</li> <li>2. Interviews with visiting health professionals (NPs, GPs, allied health)</li> <li>3. Interviews with management and governing body</li> <li>4. Provider/service staff feedback surveys or similar</li> <li>5. Provider/service pre-audit tool</li> <li>6. Governance, management or staff meeting minutes</li> </ol>	<ol style="list-style-type: none"> <li>1. Adverse findings or similar from other regulators, accreditation bodies, etc.</li> <li>2. Feedback from advocacy or representative groups</li> </ol>	<ol style="list-style-type: none"> <li>1. Observing delivery of care and services</li> <li>2. Observing the service environment including equipment and premises</li> </ol>	<ol style="list-style-type: none"> <li>1. Review of policies, procedures, processes</li> <li>2. Review of records (e.g. training)</li> <li>3. Review of care plans, progress notes, medication charts</li> <li>4. Incident and investigations records</li> <li>5. Review of provider or third party audits and inspections</li> <li>6. Review of previous Commission audits, risk-based monitoring, compliance activities</li> <li>7. Corrective actions</li> </ol>	<ol style="list-style-type: none"> <li>1. National Quality Indicator Program</li> <li>2. Provider nominated key performance indicators and metrics</li> <li>3. Hospitalisation rates</li> <li>4. Infection related data</li> <li>5. Quality of life assessments or similar</li> <li>6. Incident records</li> </ol>
<b>Outcome/Action</b>						



# Improving the experience of engaging with the Commission

- We have listened to your feedback.
- We are working to understand how older Australians and providers experience our services.
- We are doing research to understand what type of information is helpful, preferred channels, and how people engage with materials to feel informed and supported.
- There are opportunities to participate so please get in touch by emailing [agedcarereform@agedcarequality.gov.au](mailto:agedcarereform@agedcarequality.gov.au).
- The insights will give us an evidence base to understand how we can improve the experience.



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# Where to from here?

- Working with older Australians to provide the right information and resources
- Working with providers to ensure they have the right education, resources and tools to meet their obligations
- Working with peak organisations to leverage their knowledge and reach
- Bespoke engagement to meet the needs of diverse communities
- Keeping consumers and providers up to date:
  - [www.agedcarequality.gov.au/about-us/stronger-standards-better-aged-care-program](http://www.agedcarequality.gov.au/about-us/stronger-standards-better-aged-care-program)
  - <https://agedcareengagement.health.gov.au/>



**Mentimeter code**  
**49 67 37 6**

**Tell us what  
you think**

**Tell us the most useful thing  
that the Commission can do  
to help you prepare for the  
strengthened Standards?**





**Mentimeter code  
49 67 37 6**

**Tell us what  
you think**

**What is the most important  
thing you need to do to be  
ready for the strengthened  
Standards?**





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# Questions



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