

Parallel Session: 2  
2.00pm – 3.30pm Tuesday 23 April 2024

# **Strengthened Standards – what to expect and how to be ready** (Home services)

**Emma Jobson**

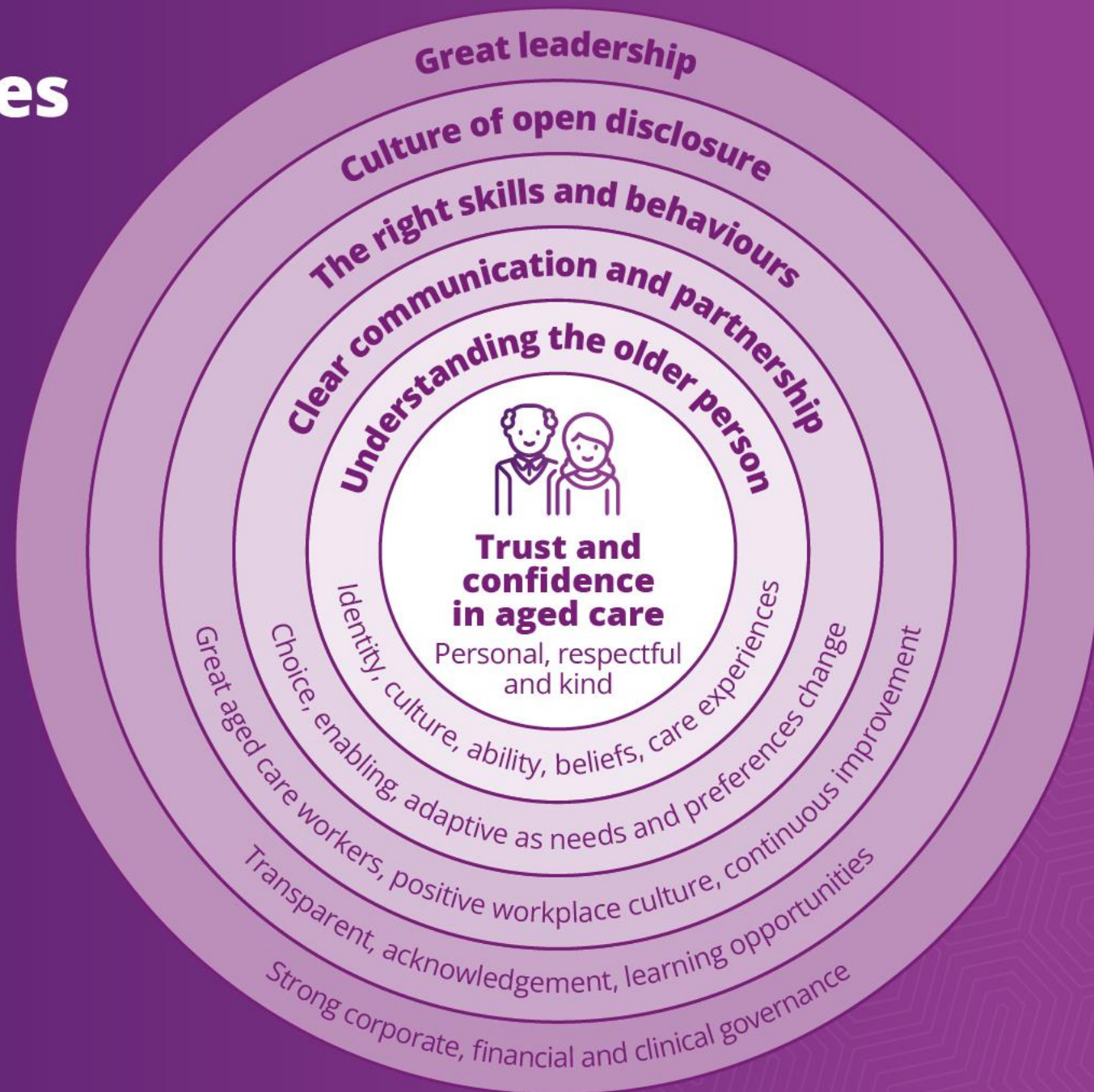
Executive Director  
Regulatory Policy and Intelligence



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# What makes great care





# Strengthened Quality Standards Framework Analysis

Draft strengthened Quality Standards	Number of actions associated with this Standard	Element 1 Number of actions which align with existing Quality Standard requirements	Element 2 Number of actions which align with other existing provider responsibilities within the legislation	Element 3 Number of actions which clarify existing requirements within the current Quality Standards	Element 4 Number of actions that introduce new concepts or enhanced expectations in comparison to the current Quality Standards
Standard 1: The Person	21	5	7	9	
Standard 2: The Organisation	43	7	8	22	6
Standard 3: The Care and Services	22	3		17	2
Standard 4: The Environment	6	2		4	
Standard 5: Clinical Care	35	3		27	5
Standard 6: Food and Nutrition	10			4	6
Standard 7: The Residential Community	9			9	
	146	20	15	92	19
		14%	10%	63%	13%



## Standard 1

# The person

**I am valued and have choice over the life I lead.**



**I understand the people I care for and support them in choices that impact their lives.**





## Standard 2

# The organisation

**I have confidence in my service provider.**



**I feel empowered to do my job well.**







## Standard 3

# Care and services

**My care is based around who I am and what's important to me.**



**I understand who I'm caring for and what is important to them.**





## Standard 4

# The environment

**I feel safe and supported  
where I live.**



**I create a safe and supportive  
environment.**







## Standard 5

# Clinical care

I get the right clinical care for me.



I understand the clinical needs of the person I'm caring for.







## Standard 6 **Food and nutrition**

I enjoy tasty and nutritious food every day.



I make sure our residents enjoy appetising and nutritious food every day.



## Standard 7 **The residential community**

I contribute to the community I live in.



We work together to build a connected residential community.



# Standards Resources Pack

## *Aged Care Act and Standards*

### **Standards Guidance**

Information to understand provider obligations and how to achieve outcomes under the Standards.

### **Evidence mapping framework**

Evidence we will look for when assessing performance against the Standards

### **Audit methodology**

The processes we will use to assess provider performance

### **Request for information**

Information that providers will need to send to the Commission as a first step in the audit process

### **Audit preparation tool**

Information to enable providers to assess their own performance and achieve continuous improvement

### **Framework analysis**

Comparison of current Standards and strengthened Standards (not for feedback)

**National  
Conference**

**Fact sheets**

**Webinars &  
videos**

**Online  
modules**

**Train the  
trainer**

**Facilitated  
Workshops**

**Training  
slides**

**Checklists &  
Tools**



# Registration categories

Provider Types	Audit arrangements	Which Aged Care Quality Standards apply?
<b>Type A - Category 1-3</b> (home or community based)	No audit	No standards
<b>Type B - Category 1, 2, 3 and 4</b> (home and community based)	One provider level audit for service types in Category 4	Standards 1-4 (Category 4 only)
<b>Type C - Category 1, 2, 3, 4 and 5</b> (home or community based)	One provider level audit across service types in Categories 4 and 5	Standards 1-5 (Categories 4 and 5 only)
<b>Type D - Category 1, 2, 3, 4, 5 and 6</b> (home or community based and residential care)	One provider level audit across service types in Categories 4 and 5 and one audit for each Residential Care Home	All Standards (Categories 4, 5 and 6 only)
<b>Type E - Category 6</b> (residential care)	One audit for each Residential Care Home	All Standards



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# Audit methodology – outcomes from the pilot program

A streamlined format for audit reports.

We need to further consider the context and challenges for remote and NATSIFACP services.

Auditors felt that the evidence gathering process supported an accurate assessment.

Audit findings will be made for each outcome and Standard.

Providers agreed that the audit process provided an accurate assessment.

Smaller and newer providers were challenging to audit.

Audits provided consistent and accurate outcomes.

Increased detail impacted the efficiency of the pilot audit.

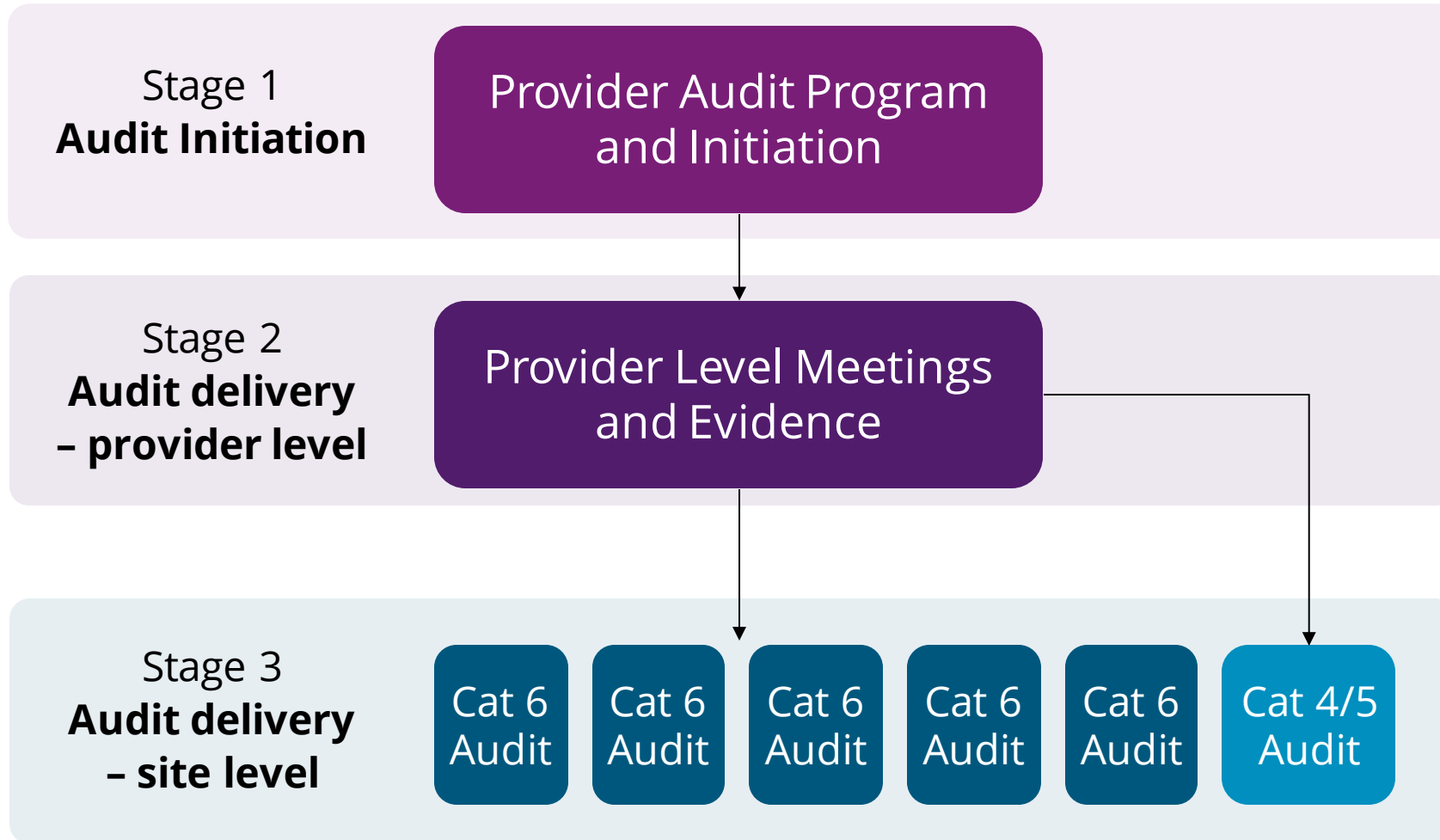


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# Provider Audit Program Example



## Desired Outcomes and Benefits:

- Provider audit program **planned and prepared** with provider, supports transparency.
- Provider level evidence **collected once** to inform audits and supports efficiency and consistency.
- Provider level evidence – **systems and processes**.
- Service level evidence – **validates systems, targeted sampling and interviews**.

# Evidence mapping framework

## Key themes

1. Person-centred care
2. Dignity, respect, and privacy
3. Choice, independence and quality of life
4. Agreements, fees, pricing, invoicing and statements
5. Corporate and clinical governance
6. Accountability and quality system
7. Risk Management System
8. Incident Management System
9. Feedback and Complaints Management System
10. Information Management System
11. Workforce and human resources management
12. Emergency and disaster management
13. Assessment and planning
14. Delivering comprehensive care and services
15. Clinical safety
16. Care coordination and transitions
17. Environment
18. Infection Prevention and Control
19. Medication management
20. Food and nutrition
21. Palliative and end of life care



# Evidence Mapping Framework

## Evidence categories

- Documents and records
- Governing body feedback
- Management feedback
- Worker feedback
- Third party feedback
- **Experience of older people**
- Observations and
- Care outcomes

Examples of evidence		
Evidence category	Provider-level	Service-level
Documents and records	<b>Category 4, 5 &amp; 6</b> <ul style="list-style-type: none"> <li>• Policies or processes for risk management that detail processes for: <ul style="list-style-type: none"> <li>– Identifying, assessing, documenting, managing, regularly reviewing risks to older people, workers, and the organisation</li> <li>– Developing strategies or actions to prevent, control, minimise or eliminate risks.</li> <li>– Collecting and analysing data to inform risk assessments and risk management.</li> <li>– Reviewing and improving the effectiveness of risk management.</li> <li>– Roles and responsibilities for management and workers.</li> </ul> </li> <li>• Enterprise (i.e. organisation wide) risk register detailing risks and controls for organisational risks.</li> <li>• Sample of provider-level risk assessments that identify risks and controls/mitigations.</li> <li>• Records of risk assessment and risk register reviews.</li> <li>• Plans for continuous improvement.</li> <li>• Meeting minutes from governing body or management meetings demonstrating discussion of critical risks.</li> <li>• Evidence that the risk management system has been reviewed and updated to improve effectiveness.</li> </ul>	<b>Category 4 &amp; 5</b> <ul style="list-style-type: none"> <li>• Sample of service-level risk register and risk assessments.</li> <li>• Service-level clinical risk register or similar.</li> <li>• Plans for continuous improvement.</li> <li>• Evidence of use of risk assessment processes to support workers undertake risk assessments of an older person's home environment.</li> </ul> <b>Category 6</b> <ul style="list-style-type: none"> <li>• Sample of service-level risk register and risk assessments.</li> <li>• Service-level clinical risk register or similar.</li> <li>• Plans for continuous improvement.</li> <li>• Strategies developed to protect physical and psychological safety of older people.</li> </ul>
Governing body feedback	<b>Category 4, 5 &amp; 6</b> <ul style="list-style-type: none"> <li>• Please describe the top five risks for the provider? <ul style="list-style-type: none"> <li>– How does the governing body gain visibility of these risks?</li> </ul> </li> </ul>	Not applicable

# Where to from here



**Digital tool**



**Learning  
modules**



**Posters**



**Videos**



**Infographics**



**Toolbox  
talk kits**



**Presentations**



# Further information



## Consultation page

<https://www.agedcarequality.gov.au/get-involved/consultation-and-engagement-hub/standards-guidance-consultation>



## Questions and targeted consultation

[engagement@agedcarequality.gov.au](mailto:engagement@agedcarequality.gov.au)



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# Q & A

## **Ingrid Leonard**

*Assistant Secretary, Choice and Transparency, Department of Health and Aged Care*

## **Michelle Kotis**

*General Manager, Governance, Risk & Innovation, BlueCross*

## **Belinda Hocroft**

*Director, Operational Policy and Support, Regulatory Policy and Intelligence Group*

## **Nick Holderness**

*Director, Operational Policy and Support, Regulatory Policy and Intelligence Group*



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# Thank you



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