

## **QUALITY AGENCY REGULATOR PERFORMANCE**

As part of its commitment to reduce unnecessary and inefficient regulation the Australian Government commenced a Regulator Performance Framework from 1 July 2015. The Framework is to measure the performance of regulators and to give businesses and the community confidence that regulators effectively and flexibly manage risk. It aims to encourage regulators to undertake their functions with the minimum of impact necessary to achieve regulatory objectives.

The Regulator Performance Framework includes six outcomes-based key performance indicators (KPIs) to articulate the Government's overarching expectations of regulator performance. These are:

1. Regulators do not unnecessarily impede the efficient operation of regulated entities
2. Communication with regulated entities is clear, targeted and effective
3. Actions undertaken by regulators are proportionate to the regulatory risk being managed
4. Compliance and monitoring approaches are streamlined and coordinated
5. Regulators are open and transparent in their dealings with regulated entities
6. Regulators actively contribute to the continuous improvement of regulatory frameworks.

These KPIs are supplemented by measures of good regulatory performance.

The Framework requires regulators to undertake and report on the results of an annual self-assessment . The first reporting period is 1 July 2015 to 30 June 2016.

Through consultation with the Aged Care Sector Committee and the Aged Care Advisory Council we have developed a suite of qualitative and quantitative measures that we will use to assess our performance against the six regulator KPIs.

# Australian Aged Care Quality Agency

## REGULATOR PERFORMANCE MEASURES

<b>KPI 1 – Regulators do not unnecessarily impede the efficient operation of regulated entities</b>	
<b>Measures of good regulatory performance</b>	<b>How we will assess our performance</b>
<p><b>1.1</b> We demonstrate an understanding of the operating environment of the industry or the organisation, or the circumstances of individuals and the current and emerging issues that affect the sector.</p>	<p><b>1.1.1</b> A stakeholder engagement strategy is in place.</p> <p><b>1.1.2</b> Regular Quality Agency Liaison Group (ALG) stakeholder consultation meetings held in each State and Territory.</p> <p><b>1.1.3</b> Percentage of industry association conferences attended and contributed to.</p> <p><b>1.1.4</b> Participation rates in Quality Agency Better Practice conference program creating opportunity for sharing understandings about aged care services.</p>
<p><b>1.2</b> We take actions to minimise the potential for unintended negative impacts of regulatory activities on regulated entities or affected supplier industries and supply chains.</p>	<p><b>1.2.1</b> Feedback questionnaire responses show low impact on service provision</p> <p><b>1.2.2</b> Any negative feedback and feedback suggesting improvement is acted upon promptly.</p> <p><b>1.2.3</b> Accessible complaints process is maintained and responses are prompt.</p>
<p><b>1.3</b> We implement continuous improvement strategies to reduce the costs of compliance for those we regulate.</p>	<p><b>1.3.1</b> Maintain contact with internationally recognised organisations through involvement with ISQua.</p> <p><b>1.3.2</b> Complaints process used to identify areas for improvement.</p> <p><b>1.3.3</b> Visit feedback questionnaire provides opportunity for services to identify improvement areas.</p> <p><b>1.3.4</b> Review of policies and procedures includes consideration of reducing compliance cost. (Number of changes to reduce compliance burden)</p> <p><b>1.3.5</b> Use of the SA Innovation Hub – evaluation results – to assess options to reduce compliance costs.</p>

<b>KPI 2 – Communication with regulated entities is clear, targeted and effective</b>	
<b>Measures of good regulatory performance</b>	<b>How we will assess our performance</b>
<b>2.1</b> We provide guidance and information that is up to date, clear, accessible and concise through media appropriate to the target audience.	<p><b>2.1.1</b> Percentage of website information that complies with government accessibility guidelines.</p> <p><b>2.1.2</b> Number of education/information sessions on accreditation and quality review arrangements</p> <p><b>2.1.3</b> Information and education offered through a range of media suitable for the mix of services/stakeholders.</p> <p><b>2.1.4</b> Percentage of feedback about education sessions that is positive.</p>
<b>2.2</b> We consider the impact on regulated entities and engage with industry groups and representatives of the affected stakeholders before changing policies, practices or service standards.	<p><b>2.2.1</b> Regular newsletter, Quality Standard provides regular information about practices and issues and invites comment.</p> <p><b>2.2.2</b> Number of meetings of Quality Agency Liaison Groups to communicate about and discuss changes in practice.</p>
<b>2.3</b> Our decisions and advice are provided in a timely manner, clearly articulating expectations and the underlying reasons for decisions.	<p><b>2.3.1</b> Percentage of decisions made within set timeframes.</p> <p><b>2.3.2</b> All accreditation and quality review report decisions include reasons for decisions.</p>
<b>2.4</b> Our advice is consistent and supports predictable outcomes.	<p><b>2.4.1</b> Approved procedures for communicating with providers of aged care services are used by staff and are controlled by business process management systems.</p> <p><b>2.4.2</b> Intensive initial training for quality surveyors; continuing professional development program is maintained.</p> <p><b>2.4.3</b> Resources to guide assessments and greater detail about how providers may meet expected outcomes are available publicly.</p>

<b>KPI 3 – Actions undertaken by regulators are proportionate to the regulatory risk being managed</b>	
<b>Measures of good regulatory performance</b>	<b>How we will assess our performance</b>
<p><b>3.1</b> We apply a risk-based, proportionate approach to compliance obligations, engagement and regulatory certainty or impact.</p>	<p><b>3.1.1</b> Risk and case management policies and procedures are available and followed by staff.</p> <p><b>3.1.2</b> Our risk and case management approach is publicly available.</p> <p><b>3.1.3</b> We make use of a range of actions proportionate to the extent, seriousness and/or risk of poor compliance performance and risk to care recipients.</p> <p><b>3.1.4</b> We provide time to remedy poor performance except where there is serious risk to care recipients.</p>
<p><b>3.2</b> Our preferred approach to regulatory risk is regularly reassessed. Strategies, activities and enforcement actions are amended to reflect changing priorities that result from new and evolving regulatory threats, without diminishing regulatory certainty or impact.</p>	<p><b>3.2.1</b> Assessment program management provides for adjustment to respond to changes in regulatory threats and risks (eg pandemic, natural disasters).</p> <p><b>3.2.2</b> We take a thematic approach to assessment as appropriate to address emerging risks or issues.</p>
<p><b>3.3</b> We recognise the compliance record of regulated entities, including using earned autonomy where this is appropriate. All available and relevant data on compliance, including evidence of external verification is considered</p>	<p><b>3.3.1</b> 100% of decisions about assessments include consideration of compliance record consistent with policy.</p> <p><b>3.3.2</b> Participation with the SA Innovation Hub and evaluation to inform future earned autonomy approach(es).</p>

<b>KPI 4 – Compliance and monitoring approaches are streamlined and coordinated</b>	
<b>Measures of good regulatory performance</b>	<b>How we will assess our performance</b>
<p><b>4.1</b> Our information requests are tailored and only made when necessary to secure regulatory objectives, and only then in a way that minimises impact.</p>	<p><b>4.1.1</b> Evidence of collected information being acted upon, stored and re-used, where appropriate.</p> <p><b>4.1.2</b> Information requests are limited to explicit legislated requirements, case management decisions or to enable assessment of performance against legislated standards.</p> <p><b>4.1.3</b> Feedback from services shows minimal impact on service delivery.</p>
<p><b>4.2</b> Our frequency of information collection is minimised and coordinated with similar processes including those of other regulators so that, as far as possible, information is only requested once.</p>	<p><b>4.2.1</b> Information provided by DSS and other sources is systematically recorded and used in lieu of independent information collection where practicable.</p>
<p><b>4.3</b> We utilise existing information to limit the reliance on requests from regulated entities and share the information among other regulators, where possible.</p>	<p><b>4.3.1</b> Transparency of assessment demonstrated in information available publicly about assessment processes, standards and considerations</p> <p><b>4.3.2</b> Number of assessments co-ordinated with similar regulators.</p> <p><b>4.3.3</b> Information provided by DSS and other sources is systematically recorded and used in lieu of independent information collection where practicable.</p>
<p><b>4.4</b> We base monitoring and inspection approaches on risk and, where possible, take into account the circumstances and operational needs of the regulated entity.</p>	<p><b>4.4.1</b> Operational needs and circumstances of services are taken into account in determining when to and when not to conduct unannounced assessments.</p> <p><b>4.4.2</b> 100% of decisions to visit services are based on all information available and reasons recorded.</p> <p><b>4.4.3</b> We apply risk-based case-management approach to timing and scope of all assessments.</p>

<b>KPI 5 – Regulators are open and transparent in their dealings with regulated entities</b>	
<b>Measures of good regulatory performance</b>	<b>How we will assess our performance</b>
<b>5.1</b> Our risk based frameworks are publicly available in a format which is clear, understandable and accessible.	<b>5.1.1</b> Our risk and case management policies are publicly available. <b>5.1.2</b> Details of assessment processes including assessor resources available publicly on our website.
<b>5.2</b> We are open and responsive to requests from regulated entities regarding the operation of the regulatory framework, and approaches implemented by regulators.	<b>5.2.1</b> Information and education sessions about assessment programs are available. <b>5.2.2</b> Information about assessment programs is available on our website. <b>5.2.3</b> Feedback and complaints mechanisms are in place to inform continuous improvement; complaints and feedback responded to promptly.
<b>5.3</b> Our performance measurement results are published in a timely manner to ensure accountability to the public.	<b>5.3.1</b> Performance measurement results are published on time.

**KPI 6 – Regulators actively contribute to the continuous improvement of regulatory frameworks**

<b>Measures of good regulatory performance</b>	<b>How we will assess our performance</b>
<p><b>6.1</b> We establish cooperative collaborative relationships with stakeholders to promote trust and improve the efficiency and effectiveness of the regulatory framework.</p>	<p><b>6.1.1</b> Participation in the SA Innovation Hub  <b>6.1.2</b> Regular Quality Agency Liaison Group meetings held.  <b>6.1.3</b> Comprehensive education programs to assist providers and service staff to meet Standards and participate efficiently in assessment process; number of participants in education programs.   <b>6.1.4</b> Collaboration with Aged Care Channel maintained  <b>6.1.5</b> Annual Better Practice conferences – participation rates  <b>6.1.6</b> Feedback mechanisms are available and made known to all stakeholders.  <b>6.1.7</b> Collaboration with industry and other associations in the delivery of education sessions.</p>
<p><b>6.2</b> We engage stakeholders in the development of options to reduce compliance costs. This could include industry self-regulation, changes to the overarching regulatory framework, or other strategies to streamline monitoring and compliance approaches.</p>	<p><b>6.2.1</b> Participation in the SA Innovation Hub and evaluation  <b>6.2.2</b> Liaison and co-ordination with similar state government regulators to reduce regulatory events.  <b>6.2.3</b> Application for accreditation simplified and provision of self- assessment report removed.</p>
<p><b>6.3</b> We regularly share feedback from stakeholders and performance information (including from inspections) with policy departments to improve the operation of the regulatory framework and administrative processes.</p>	<p><b>6.3.1</b> Maintenance and release of a national data set occurs.  <b>6.3.2</b> Information about performance of services is provided to the Department of Social Services (100% of assessments, on time).</p>