



Regulatory Bulletin

Aged Care Quality Standards Performance Assessment Methodology

RB 2019-05

The purpose of this Regulatory Bulletin is to outline the assessment methodology used by quality assessors when undertaking performance assessments under the Quality Standards. It describes the Commission's systematic approach to assessment of provider performance as a key element of its regulatory practice.

Refer to the [Commission's glossary](#) for definitions of key terms.

- The assessment methodology supports quality assessors to use a consistent approach to assessing a provider's performance against the Quality Standards within the broader assessment program and the Regulatory Strategy of the Commission.
- The assessment methodology further supports quality assessors to reach similar conclusions about performance against the Quality Standards in similar circumstances and provides clarity for stakeholders about the conduct of quality assessment.

Key points

- The Commission has the authority to undertake assessments as regulatory functions under the Aged Care Quality and Safety Commission Act 2018 and the Commission Rules.
- The assessment methodology guides the Commission's overall approach to assessing aged care provider performance against the Quality Standards.



Aged Care Quality Standards

Performance Assessment Methodology

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Information in this bulletin applies to:

- All residential aged care services and flexible care services through which short-term restorative care is provided in a residential care setting
 - All home care services, Commonwealth Home Support Programme (CHSP) services and flexible care services through which short-term restorative care is provided in a home care setting.
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Attachment: N/A

Notes: This Regulatory Bulletin has been updated to include:

- further information about the publication of performance reports;
 - a link to the Commission's glossary which replaces the list of defined key terms.
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To be reviewed: 27 July 2021



Aged Care Quality Standards

Performance Assessment Methodology

Registered quality assessors undertake performance assessments through site audits, review audits, quality audits and assessment contacts under the Aged Care Quality and Safety Commission Rules 2018 (Commission Rules). A performance assessment consists of obtaining and evaluating evidence to determine performance against the Aged Care Quality Standards (Quality Standards). Evidence is collected through observations, interviews and documented evidence of the quality of care and services at a service.

The purpose of this Regulatory Bulletin is to outline the assessment methodology used by quality assessors when undertaking performance assessments under the Quality Standards. It describes the Commission's systematic approach to assessment of provider performance as a key element of its regulatory practice.

This assessment methodology is applicable to the following performance assessment activities:

- accreditation of commencing services (Part 3, Division 3, Subdivision C)
- re-accreditation of recommencing services (Part 3, Division 3, Subdivision C)
- re-accreditation of residential services other than recommencing services (Part 3, Division 3, Subdivision D)
- quality audit of home services (Part 4, Division 3)
- assessment contacts for the purpose of assessing the provider's performance, in relation to the service, against the Quality Standards (Part 5, Division 5, Subdivision A)
- review audits of accredited services (Part 5, Division 6).



Authority

The Commission undertakes its regulatory functions under the *Aged Care Quality and Safety Commission Act 2018* (Commission Act) and the Commission Rules. The *Aged Care Act 1997* also outlines the obligations and responsibilities of aged care providers receiving subsidies from the Australian Government.

The Commission's Regulatory Strategy provides clarity and transparency of the Commission's consumer focused, risk-based, and responsive approach to regulation. It informs operational policy, assessment program objectives and engagement with stakeholders. The Commission's regulatory functions are also supported by a policy framework. This can be found on the [Commission website](#).

Conducting a performance assessment

Assessment Team

An Assessment Team consists of one or more registered quality assessors appointed by the Commissioner to undertake a performance assessment against the Quality Standards. The Assessment Team works together to assess a provider's performance against the Quality Standards.

An assessment contact may also be undertaken by a delegate of the Commissioner to monitor the quality of care and services provided by a provider of aged care services. The assessment methodology does not apply to these assessment contacts.

Scope of assessment

In preparation for a performance assessment, quality assessors review information about the service. This may include provider self-assessment information, outcomes of previous assessments, complaints about care and services, referrals from other regulatory bodies, and information provided by consumers, their representatives and the provider. Assessment planning helps quality assessors to identify other important issues to consider and review within the scope of the assessment.

Not all performance assessments will assess the quality of care and services against all of the Quality Standards. For example, an assessment contact scope may require assessment of two Quality Standards or will focus on assessing whether a service has returned to compliance with the Quality Standards.



Assessment approach

The Quality Standards have been divided into four evidence domains for the purpose of collecting evidence during a performance assessment with a residential service:



The way the assessment is conducted differs depending on the evidence domain. The domain will guide who is selected for interview, the questions asked, the observations made, the documents reviewed, which types of evidence are pursued and lines of enquiry. Different pieces of evidence will answer different questions under each domain.

The evidence domain approach does not currently apply to performance assessments with home services or Aboriginal and Torres Strait Islander Flexible Aged Care Program services.

Entry meeting

Every performance assessment at a service's premises begins with an entry meeting between the person in charge at the service and the Assessment Team. The purpose of the meeting is to introduce the Assessment Team, briefly explain the quality assessors' authority and powers, outline how the assessment will be conducted, and the expected length of the performance assessment.

A performance assessment includes structured questions. The structured questions are a source of evidence in areas of importance to the Commission. They identify possible areas of risk or concern to be followed up by the Assessment Team as part of its assessment approach.

At the entry meeting, these structured questions include questions of the person in charge at the service that focus on areas of known risk in the sector (**risk-based questions**). Refer to our website for more information on the Commission's risk-based questions.

The Assessment Team will also request certain key documents during the entry meeting at site audits, review audits and assessment contacts where performance against the Aged Care Quality Standards (Quality Standards) is being assessed.



Initial documents requested during entry meeting

The Commission has developed an [information sheet](#) for approved providers of residential services setting out initial documents that will be requested during the entry meeting.

Ready access to this information supports an efficient and effective performance assessment against the Quality Standards. The information also helps the team to identify consumers and staff to speak with and to understand the service.

Awareness of the expectation to produce key documents will assist providers to prepare for a performance assessment and to discuss with service management how these documents will be produced on request.

Other documents relevant to the performance assessment will continue to be requested by the Assessment Team at various points during the performance assessment.

Communication during the performance assessment

The team leader will establish effective channels of communication between the Assessment Team and the person in charge at the service. For providers, this means making relevant information available to the Assessment Team during the performance assessment. For quality assessors, this means keeping the person in charge of the service informed throughout the assessment process, communicating effectively, being open to questions, and highlighting any concerns promptly.

If it becomes apparent that there is evidence of potential non-compliance with the Quality Standards, the team leader will immediately communicate this information to the Commission. The team leader will also raise concerns regarding possible non-compliance and risk to consumers with the person in charge of the service. This will enable the service to address risks at the point of care and to take early action to ensure the safety, health and well-being of consumers.

Where the performance assessment is being conducted at the premises of a service, on each day of the assessment a member of the Assessment Team will meet with the person in charge at the service to discuss the progress of the assessment.



Evidence collection

During a performance assessment the Assessment Team will collect evidence through the following methods:

- i) Interviews and enquiries
 - Quality assessors will interview a range of people including consumers and their families, representatives, staff, management, allied health personnel, volunteers, suppliers and contractors. This may also include former consumers of the service, health professionals or general practitioners, the public guardian, or advocacy services.
- ii) Observation
 - The Assessment Team will observe care in practice and use validated tools to record observations of consumers' experiences and gather insights into how staff interact with consumers. Observations will help inform the lines of enquiry the Assessment Team may pursue.
- iii) Review of documents
 - Quality assessors will review documents such as care plans, policies, procedures, and complaints to assess what the service has in place and the results it achieves for consumers. Documentation can be paper based or electronic. For most requirements in the Quality Standards, the presence of documentation alone will not be enough to demonstrate performance.

Evidence collection is enabled through a sampling approach that is purposeful. The sample size will depend on the scope of the assessment (which Quality Standards are being assessed), the size and nature of the service, the composition of the consumer population using the service, the risks and issues identified in assessment planning, opening questions about risk and consumer interviews.

Interviews conducted by the Assessment Team will include purposeful questions of consumers capturing their experience of care against the Quality Standards (**consumer journey questions**).

For residential services, consumer journey questions are usually asked on site during an assessment. For home services this input may be sought on site, via phone contact with consumers or their representatives, or via structured consumer experience interview (CEI) questions prior to the site visit.

Structured CEIs and consumer experience reports no longer form part of the re-accreditation site audit or other performance assessment for residential services. This means that a CER is not published from a site audit. Structured CEIs and consumer experience reports will be undertaken as a compliance monitoring assessment contact for the purpose of this activity. (See Regulatory Bulletin on Assessment Contacts for more information). While no longer included in a structured format, some of the CEI questions are incorporated in the domains approach to evidence collection.



The Assessment Team will also consider any relevant information about the quality of care and services provided including:

- information provided to the team by the Commission such as complaints or information about the provider of the service
- information given to the team by the provider of the service such as the key documents requested at the entry meeting, the service's plan for continuous improvement or self-assessment information
- any other relevant evidence.

Evidence of outcomes for consumers against the Standard

In assessing the service's performance against the Quality Standards, the Assessment Team will focus on the intended outcome of the Quality Standard in relation to each requirement.

In each instance, the key questions are:

- What is the consumer experience?
- Does the organisation demonstrate that it:
 - understands the requirement in relation to the consumer outcome?
 - applies the requirement, and this is clear in the way it provides the consumer's care and services?

The Assessment Team will consider the range of evidence sources relevant to the scope of each requirement. This means that depending on the requirement being assessed different forms of evidence may be relevant. The totality of evidence, in the context of the consumer outcome, will be considered in reaching a recommendation of whether a Quality Standard is met.

Exit meeting

At the conclusion of the performance assessment an exit meeting is held with the person in charge at the service, and those they choose to involve. The Assessment Team will provide an overview of the site assessment and communicate key issues identified. These issues may identify areas of concern (particularly possible risk of harm to consumers), observations on some areas done well, and results of consumer interviews.

At this time, the Assessment Team is not able to, and therefore will not, communicate the result of their assessment in terms of whether requirements were met or not met. This would pre-empt the consideration of evidence by the Assessment Team in writing their report.

The Assessment Team will communicate the next steps. They will also leave an optional, confidential feedback questionnaire for the service provider to complete regarding the assessment. This information is independently managed and used by the Commission for its continuous improvement of its assessment program.



Assessment Team Reports

The Assessment Team prepares a report¹ which details a summary of the Assessment Team's findings at the Standard level; recommendations of **met** or **not met** against each assessed requirement of the Quality Standards; and detailed findings and evidence from the assessment.

The Assessment Team will also identify in the report any concerns about potential risk of harm to the safety, health and well-being of consumers.

The Commission will provide the Assessment Team's report to the provider of the service so that it has the opportunity to:

- (a) understand the reasons, evidence and facts that the decision-maker is to rely on in making a decision regarding compliance with the Quality Standards
- (b) provide a response to matters identified in the assessment reports that may be relied on by the decision maker.

The Assessment Team's report is not published on the Commission's website.

Preparation of Performance Report

Following each performance assessment, a delegate of the Commissioner considers the Assessment Teams report, the provider's response and other relevant information; and develops a performance report.

This performance report details the delegate's assessment of the provider's performance, in relation to the service, against the Quality Standards. The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report may also specify areas in which improvements must be made to ensure the Quality Standards are complied with.

The Commission publishes all performance reports following performance assessments with residential and home services. For more information about the types of information the Commission publishes about provider performance refer to the Commission's [Regulatory Bulletin on Publication of provider performance information](#).

For more information on how the Commission responds to identified areas for improvement and non-compliance with the Quality Standards refer to the Commission's [Regulatory Bulletin on Responding to non-compliance with the Aged Care Quality Standards](#).

¹ Either a Site Audit Report, Review Audit Report, Quality Review Report or Assessment Contact Report.



Frequently asked questions

1. How does the Commission identify non-compliance with the Aged Care Quality Standards?

Assessment Teams consisting of registered quality assessors undertake performance assessments through site audits, review audits, quality audits and assessment contacts under the Commission Rules. A performance assessment consists of obtaining and evaluating evidence to demonstrate performance against the Quality Standards. Assessment Teams conduct the performance assessment by collecting evidence of the quality of care and services at a service including through observations, interviews and document review.

Assessment Teams prepare a written report which details a summary of their findings at the Standard level; assessment of met or not met against each assessed requirement of the Quality Standards; and detailed findings and evidence from the assessment.

The Assessment Team will also identify in the report any concerns about potential risk of harm to the safety, health and well-being of consumers.

The Commission then provides the assessment report to the provider of the service so that they have the opportunity to:

- (a) understand the reasons, evidence and facts that the decision-maker is to rely on in identifying areas for improvement and making a decision regarding compliance
- (b) provide a response to matters identified in the assessment report that may be relied on by the decision maker.

Following each performance assessment, a delegate of the Commissioner considers the Assessment Teams report, the provider's response and other relevant information; and develops a performance report.

The performance report details the delegate's assessment of the provider's performance, in relation to the service, against the Quality Standards. The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report may also specify areas in which improvements must be made to ensure the Quality Standards are complied with.

2. What is the Commission's assessment methodology based on?

The Commission has adopted the following principles for the conduct of assessments against the Quality Standards, based on the ISO19011 International Standard for auditing management systems:

- Integrity;
- Fair representation;
- Diligence and judgement in assessment;
- Independence;
- Evidence based approach;
- Risk-based assessment; and
- Transparency and accountability.



3. How does the Commission ensure that quality assessors are consistent in their assessment?

The Commission's assessment methodology supports consistent assessment of performance against the Quality Standards. The training and support for our quality assessors has a focus on risk-based, evidence informed performance. The Assessment Team follows a consistent process to collect sufficient relevant evidence within the scope of the assessment. These matters are dealt with in assessor training and the policy and resources for quality assessors.

The Commission provides support to quality assessors with guidance material and supporting policies and procedures. The Aged Care Quality Standards Guidance and Resources document is also available to support quality assessors and providers to understand the intent of each Quality Standard and ways in which evidence may be sought.

A Computer Assisted Assessment Tool (CAAT) supports performance assessment for all service types under the Quality Standards. CAAT enables quality assessors to record and evaluate information collected against the Quality Standards and to produce reports based on analysis of that information.

Quality assessors are subject to Quality Assessor obligations and a Code of Conduct and are only registered after completing a mandatory training program approved by the Commissioner. This training program is accredited by the International Society for Quality in Health Care. Ongoing continuing professional development is also against mandatory Commission requirements and this program responds to areas for improvement to meet the objectives of the Commission. Refer to [Regulatory Bulletin Quality assessor registration](#) for more information.

4. Why do performance assessments differ in scope?

Performance assessments of the quality of care and services may focus on one or all of the Quality Standards based on program objectives and risks. Under the Commission's risk-based approach to assessment and monitoring, the scope of an assessment may vary based on a number of factors including:

- the compliance history of the service or the provider
- input from consumer/representative interviews
- intelligence and complaints about the service
- the mix of consumers at the service
- areas identified from previous assessments
- sector wide and government priorities
- evidence and issues that emerge once the assessment has commenced.



5. How is the Commission accountable for its own performance?

Understanding our impact as a regulator is essential to the way the Commission works and improves. We incorporate measures of performance into our corporate and business planning and monitor these as we pursue our objectives.

We engage with a broad range of stakeholders in the sector and seek feedback to monitor our performance against the Government's Regulator Performance Framework. This provides a common set of performance measures for increased accountability and greater transparency in the way regulators perform their role.

We seek feedback from every performance assessment site visit in the form of a post-visit questionnaire. At the exit meeting, providers are asked to complete a survey providing feedback on how the performance assessment was conducted. This information is collected anonymously by an independent survey organisation and used as input for continuous improvement of compliance monitoring and assessment.

The Commission welcomes feedback. Complaints, concerns and inquiries can also be directed to our [website](#).

Need to know more?

If you have any questions or feedback on this Bulletin, please send an email to: info@agedcarequality.gov.au

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