



Quality in Aged Care

THE ASK:

All older people have the right to consistent, safe, high-quality and person-centred care regardless of cultural beliefs, diversity, values and needs. To deliver that care, governing bodies must implement processes and frameworks to manage the quality and safety of the services being delivered.

Disclaimer: The new Aged Care Act 2024 (the Act) starts on 1 November 2025. The Act replaces existing aged care legislation. The Aged Care Rules (the Rules) are expected to be finalised before the Act starts. The Rules give more information about how the new Act will work. This resource is in draft. We will update it when both the Act and the Rules come into force.

Covered in this topic guide

- Quality in aged care.
- Role of the governing body.
- Continuous improvement and care planning.
- Clinical governance.

Where are we now?

Most aged care providers want to improve the quality of life of older Australians, and that means having good systems and processes to oversee and manage quality. That can have a big impact on the remainder of their lives, and it falls on the governing body to ensure this happens.”

GOVERNING BODY MEMBER

Key concepts

The following high-level definitions are provided to assist in interpreting some of the key concepts discussed in this topic guide:

- **Person-centred care** is described as care and services designed around an individual's needs, preferences and background. It includes a partnership between older people and providers.
- **Safeguarding** is the actions taken to protect the rights, health and wellbeing of older people to ensure they feel valued, safe and heard.
- **Continuous improvement** is the ongoing effort to improve the quality of care and services provided by a service.
- **Clinical governance** is an integrated set of leadership behaviours, policies, procedures, responsibilities, relationships, planning, monitoring and improvement mechanisms that are implemented to support safe, quality clinical care and good clinical outcomes.

Quality in aged care

An organisation's governing body leads a culture of safety, inclusion and quality improvement that focuses on continuous improvement, embraces diversity and prioritises the safety, health and well-being of older people and the workforce.

There is now a much clearer definition of 'high-quality care', designed to lift the standard of care provided to older people. This is important, and in line with the Royal Commission's vision for the aged care sector, to encourage registered aged care providers to aim higher and not simply focus on meeting minimum standards.

It is proposed that 'high-quality care' is defined as the delivery of aged care services to a person in a way that prioritises:

- compassion and respect for the individuality, self-determination and dignity of a person accessing care, and their quality of life
- responding to the person's expressed personal needs, aspirations, and their preferences about the way services are delivered to them
- facilitating regular clinical reviews to ensure that the services delivered continue to reflect their individual needs
- supporting the person to improve their physical and cognitive capacities and mental health where possible
- supporting the person to participate in cultural, recreational and social activities, and remain connected to their community.

To ensure high-quality care is the central part of the aged care system, defining high quality care will not lift the standard of aged care services on its own. A range of measures are needed to set up for an aged care system where:

- there is no place for substandard or low-quality care
- all registered providers deliver care under the new robust legislative framework
- as the system matures, high-quality care becomes the norm.

There is an obligation on certain registered providers to demonstrate the capability for, and commitment to, continuous improvement designed to achieve the provision of high-quality care.

Reflecting on your practice



Think

Below are the top things you need to be **thinking** about:

- Do all governing body members understand their duties when it comes to delivering quality, inclusive and safe care?
- How do my provider's continuous improvement processes feed into the structural improvements related to delivering quality care to older people?
- How do the governing body and executives oversee clinical governance, including minimising the use of restrictive practices?



Ask and say...

Below are the top questions you need to be **asking**:

- How is feedback about quality of care from older people, their families, and the workforce, brought to the attention of the governing body and executives?
- What quality management systems are in place to support quality outcomes for older people?
- Does the provider have a documented quality improvement plan?
- What data and assurance are the governing body getting about clinical and quality indicators?



Do...

These are the top **actions and behaviours** of leaders:

- Establish regular forums and reporting protocols where the governing body can oversee the management of embedding quality, inclusive and safe practices (i.e. including stories about quality of care for consumers at the start of every governing body meeting agenda).
- Partner with older people to set priorities and strategic direction for the organisation and the design, delivery, evaluation and improvement of quality care and services.
- Monitor the outcomes of engagement and audits from the Aged Care Quality and Safety Commission and ensure that systemic issues are identified and addressed through continuous improvement, meeting obligations and care planning.

- Ensure that everyone understands their role in ensuring the quality of service delivery and provide clear avenues to develop a quality culture.

Tips for delivering quality aged care

Consumers at the centre of care

- Ensure high-quality services and care are driven by the needs of older people.
- Understand and capture the expectations that consumers have of quality.

Obligations and accountabilities

- Continually review quality assessments and compliance processes to support effective clinical governance and safety.

Knowledge, skills and experience

- Ensure employees are appropriately qualified and skilled for their roles with training and performance assessment.

Leadership and culture

- Instil a culture of high-quality service delivery across all aspects of the provider's activities.
- Encourage your provider to innovate their services and systems to drive quality improvement.

What is quality management?

The provision of quality service is core business for providers. A quality management system supports the delivery of safe, consistent, high-quality, and efficient aged care services by:

- identifying issues in the delivery of care to consumers
- monitoring compliance with the strengthened Aged Care Quality Standards
- implementing improvements and encouraging continuous improvement of the provider.

The strengthened Aged Care Quality Standards (the Quality Standards) reflect the level of care and services the community can expect from providers that provide Australian Government-funded aged care services. The Quality Standards provide a benchmark for care procedures and outcomes against which a provider can measure itself, comprising of 7 individual standards:



Elements of an effective quality management system

The Quality Standards will apply differently across providers, depending on the types of care and services they provide. They require the provider to use a quality system to enable and drive continuous improvement in the delivery of aged care services. Many providers will go beyond the core requirements of the Quality Standards to provide a higher quality of care and services for consumers. The elements of a quality system and framework of quality care include:

- demonstrating a commitment to older people, representatives, staff and community
- actively demonstrating a 'we' approach
- creating a culture of reflective practice and continuous improvement
- understanding that managing quality is everyone's business
- openly communicating improvements
- promoting a 'no-blame' culture
- recognising individual contributions
- performing cost benefit analyses.

Integral to a good quality system is that the processes for compliance are documented and are well understood by staff. The provider must maintain current policies and procedures to guide and support aged care workers. This will assist workers to undertake their roles in line with policies and procedures with a focus to continually improve the delivery of services.

The governing body has overall responsibility for the oversight of quality management, and any delegation of responsibility for managing and leading quality improvement should be clearly communicated and monitored.

Role of the governing body

The governing body is responsible for the overall effectiveness and performance of the provider. This includes making sure that services are well planned, meet the needs of older people and are delivered to the best possible level of quality by:

- Ensuring the organisation's activities are used to inform the way care and services are provided. In particular, the governing body needs to consider the views of consumers to develop a strategic plan for the organisation.
- Developing and pursuing provider goals of service excellence, which can include innovative solutions, and 'thinking outside the box' about how best to deliver services.
- Ensuring that the provider has a quality management system and that internal controls are in place to comply with relevant standards, current legislation and requirements of the Quality Indicator Program.

- Overseeing the implementation of robust risk management practices that address systemic issues.
- Monitoring the results of quality activities and making changes as needed.
- Ensuring compliance with reporting and related requirements.

Working with senior staff

To provide leadership in quality management, the governing body needs to work with senior staff to:

- foster a positive attitude to quality improvement across the workforce
- implement policy and procedures for quality management that will provide guidance to staff
- identify and communicate key quality indicators for the service
- establish documentation and reporting processes that will enable the ongoing tracking of quality improvement
- deliver quality outcomes for individuals – services are effective when they successfully meet the needs of people and improve their situation.

Continuous improvement and care planning

What is continuous improvement?

Continuous improvement is an ongoing effort to improve the quality of care and services provided by a service. It is a process which:

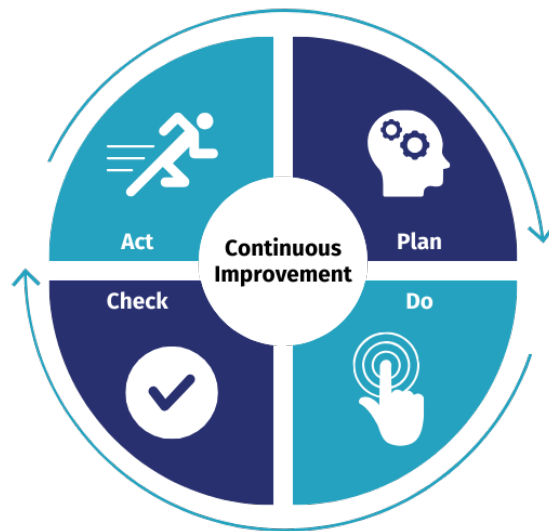
- considers the needs of older people and involves them in improvement activities
- is part of an overall quality system that assesses how well a provider's systems are working and the standard of care and services achieved
- is a results-focused activity that identifies opportunities for improvements and systematically implements change to improve quality over time.

Continuous improvement initiatives may range in scale from minor incremental improvements to systems and processes to significant strategic initiatives and should aim to lift the quality of care and services to deliver improved outcomes for older people. To be effective, continuous improvement must be central to a provider's focus, understood at all levels, and accepted and put into practice by all management and staff.

Under the strengthened Aged Care Quality Standards, Standard 2 - The organisation: *Outcome 2.3 Accountability, quality system and policies and procedures*, the governing body is accountable for the delivery of safe and quality care and services. This includes having effective organisation-wide governance systems relating to continuous improvement.

The Plan for Continuous improvement must be in writing and set out how the provider will:

- assess the quality of care and services provided against the Quality Standards
- monitor and improve the quality of care and services as measured against the Quality Standards
- check if there are areas where improvements to care and services are needed to ensure compliance with the Quality Standards and determine how those improvements will be made.



Care planning

Care plans assist providers in tailoring services to suit the culture, needs, goals and wellbeing of individuals. Governing bodies must oversee the effectiveness of management by incorporating human rights principles into care planning.

Providers are obligated to undertake initial and regular assessments and care plan reviews in collaboration with older people. Quality assessments and care plan reviews need to take into consideration:

- an individual's values, beliefs and culture
- their goals and needs, wellbeing and what is important to them
- factors that impact upon their health
- the resources available and currently missing from their care to optimise their health
- communicating the care plan with the workforce (clinical and non-clinical) to ensure older people are living their best life.

To facilitate effective care plans, providers should consider:

- what additional resources a consumer needs to maintain their connection to local community support services and social groups

- having community visiting schemes within aged care facilities to supplement where services are not available to older people from diverse and vulnerable backgrounds
- ensuring free and paid services of clinical and non-clinical care are available for all older people to support them to live their best life.

Quality indicators

Quality indicators measure important aspects of aged care services to evaluate the quality of services provided to older people. They are the measures of how well a provider is carrying out its work and achieving its aims across crucial care areas. They do not provide data for drawing instant conclusions about the quality of care. Governing bodies should note that a mediocre performance in a specific quality indicator does not necessarily mean a provider has a poor-quality system or substandard care but rather see this as an opportunity for improvement.

Providers are required to report on 14 quality indicators through the Quality Indicator Program (QIP) relating to:

- pressure injuries
- restrictive practices
- unplanned weight loss
- falls and major injury
- medication management
- activities of daily living
- incontinence care
- hospitalisation
- workforce
- consumer experience
- quality of life
- enrolled nursing
- allied health
- lifestyle officers.

These indicators are tools to help the provider identify performance issues, flag concerns and prompt them to make improvements to care and submit data through the My Aged Care Provider portal. Data recording templates have been developed to assist with calculating data for each quality indicator. If a quality indicator is not met, there may be compliance action for the provider.

Star Ratings

Star Ratings assist older people and their supporters to compare residential aged care homes and make more informed choices about their care. Star Ratings support providers to understand their performance and drive improvement using nationally consistent measures to monitor, compare and improve their care. Star Ratings are published for residential aged care homes, providing an Overall Star Rating between 1 and 5 stars, and 4 sub-category ratings:

- Residents' Experience
- Compliance
- Staffing
- Quality Measures.

Risk and quality oversight

A provider's governance systems and workforce are essential to delivering safe, quality, person-centred care for every older person, and driving continuous improvement. The governing body is responsible for monitoring and enhancing aged care services, informed by engagement with older people, their supporters and aged care workers, and care quality data.

It is important for the governing body to implement assurance processes to prioritise the quality and safety of care and services delivered to older people. Without assurance processes, the governing body cannot be confident that safe, high-quality care is consistently being delivered. It is necessary to have these assurances in place to meet Standard 2: The organisation and Standard 5: Clinical care of the strengthened Quality Standards.

Management of high impact or high prevalence risks

Providers need to ensure they can manage all risks related to personal and clinical care, which are largely operational risks. Providers are expected to manage risks related to the care of each older person in line with their care plan as part of their duty of care obligation. For high-impact or high-prevalent risks, providers are expected to use risk assessments to find ways to reduce these risks. These assessments should be undertaken in consultation with the older person. There is a lack of consistency between aged care providers when it comes to conducting regular risk assessments for all older people. It is important that providers balance effective risk management practices and a duty of care with an older person's right to control the care they receive, and the risks taken.

Clinical governance

Aged care services providing clinical care must implement a clinical governance framework. The governing body has overall responsibility to ensure that a clinical governance framework is implemented and for monitoring its effectiveness. Providers must operationalise this framework and report on its performance and success in supporting aged care workers to deliver high-quality clinical care services to older people.

Clinical governance framework

Clinical governance is an integrated set of leadership behaviours, policies, procedures, responsibilities, relationships, planning, monitoring and improvement mechanisms that are implemented to support safe, quality clinical care and good clinical outcomes for older people. Its purpose is to support the workforce and visiting practitioners in your service to provide safe, quality clinical care as part of a holistic approach to aged care that is based on the needs of each older person.

A governing body is responsible for overseeing clinical governance to ensure a provider's work practices and policies align with the strengthened Quality Standards and comply with the requirements regarding incident management and reporting under the Serious Incident Response Scheme (SIRS).

Regular reporting on all aspects of clinical care will need to be provided to the governing body to oversee and challenge a provider's response to identifying and mitigating clinical risks and identifying and resolving any older person's concerns or complaints.

All aged care providers who provide clinical care must meet the requirements under Standard 5 - Clinical care of the strengthened Quality Standards and have a clinical governance framework that includes but is not limited to:

- evidence-based, person-centred comprehensive care for older people delivered by health professionals
- ensuring dignity, inclusivity, and respect of older people (including minimising the use of restraint)
- open disclosure
- antimicrobial stewardship
- continuous quality improvement.

Minimising the use of restraint

Registered providers have specific responsibilities under the *Aged Care Act 2024* and the Aged Care Rules 2025 (the Rules) relating to the use of any restrictive practice in

residential aged care and short-term restorative care in a residential care setting. Restrictive practices must only be used as a last resort and in the least restrictive form.

Providers are required to satisfy several conditions before and during the use of any restrictive practice:

- Restrictive practices must only be used where the provider has documented changed behaviours (or behaviours of concern) for the older person, where these changed behaviours have been assessed by an approved health practitioner who has day-to-day knowledge of the consumer, or a behaviour support specialist, alternative strategies have been used prior to the use of any restrictive practice, and consent to the use of any restrictive practice if required.
 - The provider is required to document the alternatives to restrictive practices that have been considered and used and why they have not been successful.
 - The provider is required to have a clinical governance framework in place to minimise the use of restrictive practices. Where a restrictive practice is used, such a framework needs to ensure that informed consent for the restrictive practice has been obtained from the consumer, or their restrictive practices substitute decision-maker.
 - Where any restrictive practices are used, the consumer must be regularly monitored for signs of distress or harm, side effects and adverse events, changes in wellbeing, as well as independent functions or ability to undertake activities of daily living (ADLs).
 - Inappropriate use of restrictive practices is reportable under the Serious Incident Response Scheme. The Code of Conduct for Aged Care expects behaviours from providers and aged care workers that are consistent with respecting the rights, dignity and freedom of older people. They are expected to know how to identify violent, abusive and neglectful practices and how to act upon these.
 - The use of restrictive practice must be regularly reviewed by the provider with a view to removing it as soon as possible or practicable.



Providers are also required under the Rules to have a Behaviour Support Plan in place for every older person who exhibits behaviours of concern, a change in behaviour, or who has restrictive practices considered, applied, or used as part of their care. The Behaviour Support Plan forms part of the care and services plan and does not replace it.

The Rules set out the requirements for seeking informed consent when restrictive practices are necessary and the individual concerned lacks the capacity to give consent. To understand these requirements, which can differ based on provider context, access

chapter one, part 2 of the Aged Care Rules 2025, specifically section 6-20 Meaning of restrictive practices substitute decision-maker.

Open disclosure

Open disclosure is a discussion that an aged care provider has with older people and their families when something goes wrong that has harmed or had the potential to cause harm to the older person receiving aged care services. Open disclosure is a critical element of incident management and quality care. Governing bodies must ensure an open disclosure framework forms part of clinical and corporate governance practices.

The principles of open disclosure in an aged care context:

- Dignity and respect
- Privacy and confidentiality
- Transparency
- Continuous quality improvement.

As part of their open disclosure process, providers must ensure that clear escalation channels to the governing body are in place.

It is also important that providers engage directly with older people and their families or representatives and take timely action to understand how service delivery can be improved in such a way that supports better outcomes and individual choice.

The strengthened Quality Standards Outcome 2.3: Accountability, quality system and policies and procedures, requires providers to practice open disclosure and communicate with individuals, supporters of individuals and aged care workers when things go wrong. Outcome 2.6a further outlines that a provider's complaints and feedback management system must make sure they use open disclosure when they respond to complaints and negative feedback.

The governing body is accountable for the delivery of quality aged care services and must maintain oversight of all aspects of the provider's operations. The provider must use a quality system to enable and drive continuous improvement of the provider's delivery of funded aged care services. Open disclosure is part of the organisation's broader focus on clinical quality and safety performance that needs to be monitored and reported regularly to the governing body.

Governing bodies should receive regular data and analysis of the number of open and closed incidents over a period (e.g. monthly, quarterly, yearly). The governing body will be responsible for overseeing investigation into how the events occurred and what actions have been taken to mitigate future risks and improve practices across all aspects of service delivery.

Useful references and links

[Aged Care Act 2024 | Australian Government Federal Register of Legislation](#)

[Aged Care Rules 2025 | Australian Government Federal Register of Legislation](#)

[Statement of Rights | Aged Care Quality and Safety Commission](#)

[Strengthened Aged Care Quality Standards | Aged Care Quality and Safety Commission](#)

[Code of Conduct for Aged Care | Aged Care Quality and Safety Commission](#)

[Serious Incident Response Scheme | Aged Care Quality and Safety Commission](#)

[Provider Governance | Aged Care Quality and Safety Commission](#)

[Clinical Governance | Aged Care Quality and Safety Commission](#)

[Guidance resources | Aged Care Quality and Safety Commission](#)

[My Aged Care | Australian Government My Aged Care](#)

[Quality Aged Care | Australian Government My Aged Care](#)

[Resource Library | Aged Care Quality and Safety Commission](#)

[ISO 31000:2018 Risk Management | ISO: International Organization for Standardization](#)

[Minimising the use of restrictive practices | Aged Care Quality and Safety Commission](#)