

Date: 21 February 2023

1800 951 822 agedcarequality.gov.au

What is a site audit?



A site audit is a comprehensive assessment of performance against the Aged Care Quality Standards carried out at residential aged care services for the purpose of accreditation or re-accreditation.

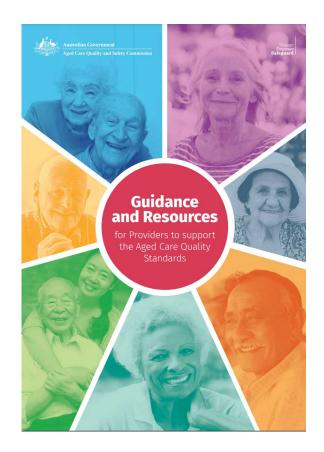
Site audits are unannounced and will result in a decision by the Commission to accredit/re-accredit or not to accredit the service. Where a service is accredited or re-accredited, the Commission will also make a decision regarding the period of accreditation.



The Assessment Methodology

Engage Empower Safeguard

- Sector guidance on the Commission's approach
- Supports a consistent approach in conclusions
- Application will vary subject to circumstance
- Reflective questions and examples of evidence



Preparing for a Site Audit



- Self assessment tool provides evidence that a service understands the requirements of the Quality Standards
- Evidences an understanding of risk and continuous improvement
- Submitted with application for reaccreditation



Conducting an unannounced site audit



- Assessment Team appointed with registered Quality Assessors who must comply with Code of Conduct
- Unannounced to request consent to enter the premises with appropriate screening procedures on entry
- Quality Assessors interview consumers, staff and others and may follow risk based questions drawn from our regulatory intelligence
- Information is drawn from three potential sources of evidence:
 - Interviews
 - Observations
 - Document and records review

The assessment approach





What we are looking for onsite



- The organisation understands risk and implements treatments in response to the risk
- The organisation understands the consumer experience
- The organisation demonstrates that it:
 - a) understands the requirement in relation to the consumer outcome
 - b) applies the requirement, and this is clear in the way it provides the consumer's care and services

Provider Responsibilities



- Submit a valid application for reaccreditation
- Notify consumers (and their representatives) and staff of a site audit and support their participation
- Actively participate in the audit, providing information as requested, as early as possible
- Arrange management participation if preferred
- Address any urgent concerns are raised by the assessment team
- Demonstrate courtesy and respect

Continuous Improvement



Approved Providers

- Plan for Continuous Improvement
 - o consider the needs of consumers and involve them in improvement activities
 - demonstrated through measurable outputs and outcomes
 - Request for copies and direction to revise

Commission

- Operational Quality Assurance Framework
- Workforce training and capability enhancements



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Responding to a site audit report



- Providers are given 14 days after receiving the Site Audit Report to provide a written response to its contents
- The response should present factual information and evidence about how the service meets the Quality Standards
- The Site Audit Report, along with the provider's response and other relevant information will be taken into account by the Commission in developing a Performance Report and making a reaccreditation decision

Performance Reports and the accreditation decision are published



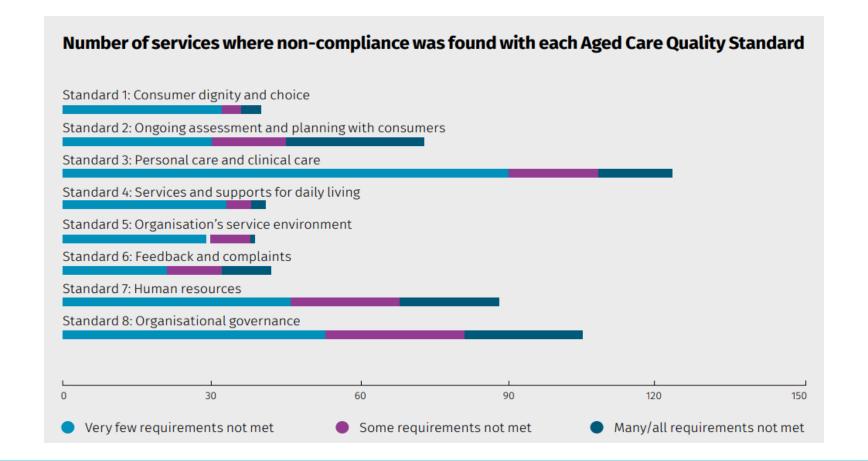
https://www.agedcarequality.gov.au/reports

Access performance information about individual aged care services including performance reports in relation to performance assessment activities undertaken, decisions relating to accreditation of residential services and other historical performance information. For information relating to Non-Compliance Notices, Notices to Agree and Sanctions, please visit My Aged Care's non-compliance checker. Service name Provider name RACS/Commission ID (4 or 6 digits) Service type Suburb Previous service name Postcode



Non-Compliance







Non-Compliance with requirements

Most frequently cited requirements where non-compliance was found	
3(3)(a) Safe and effective personal and clinical care	91
8(3)(c) Effective governance systems	71
3(3)(b) High impact or high prevalence risks managed effectively	65
8(3)(d) Risk management systems and practices	54
7(3)(a) Number and mix of workforce	53
2(3)(e) Regular reviews of care and services	51
2(3)(a) Assessment and planning informs safe and effective services	47
8(3)(e) Clinical governance framework	47
7(3)(d) Recruitment training and support for workforce	42
2(3)(b) Assessment and planning identifies current needs	33





- Complete the online feedback survey following the visit (a link is provided by the Assessment Team when they depart)
- Raise a complaint with the Commission
 (The complaint form can be found at agedcarequality.gov.au)

More information



Regulatory Bulletin 5 – Aged Care Quality Standards Performance Assessment Methodology

https://www.agedcarequality.gov.au/regulatory-bulletin

Bulletin number	Bulletin title		
RB 2023-18	Publication of provider performance information		
RB 2023-17	Banning orders		
RB 2022-16:	<u>Changes to Administration and Management Charges in the Home Care Packages</u> <u>Program</u>		
RB 2021-15	Plan for continuous improvement requirements		
RB 2021-14	Change in service ownership		
RB 2021-13	Regulation of restrictive practices and the role of the Senior Practitioner, Restrictive Practices		
RB 2021-12 Reconsideration of reviewable decisions			
RB 2020-10	Quality assessor registration		
RB 2020-09	Assessment contacts in residential and home services		
RB 2019-06	Regulatory decision making		
RB 2019-05	Aged Care Quality Standards performance assessment methodology		
RB 2019-04	Responding to non-compliance with the Aged Care Quality Standards		
RB 2019-03	Exclusion of specific dates for unannounced visits		





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respect

Compliance Readiness

How to be well-prepared for a visit from the Commission

21.02.2023



The Compliance Environment

Unknown Timing
 Legislative Changes
 Increased Expectations
 Risk Data

Unknown Timing

- We don't know when a visit will happen
- Gone are the days of timed preparation

Unknown Timing

What do we do?

- Always compliant and prepared mentality
- Systems over people
 - But people deliver the care
- Internal audits to identify gaps
 - Consider external if small
- · Gap rectification and systems to maintain

The Compliance Environment

1. Unknown Timing	2. Legislative Changes
3. Increased Expectations	4. Risk Data

Legislative Changes

- Increasing and changing legislative requirements
- Royal Commission
 - 119 Recommendations Accepted (or inprinciple)
 - 50 of these are for providers to implement
 - Only just started

Medium to high impact changes

# Recommendation Response Implementation Date Operational Impact TRegulation of restraints Accepted 2021 Medium 100 Serious incident reporting Accepted 2021 Medium 130 Responsibility for prudential regulation Accepted Accepted 2021 Medium 22 Quality indicators Accepted Accepted 2022 Medium 23 Using quality indicators for continuous improvement Accepted 2022 High Medium 23 Using quality indicators and accountabilities (Commissioner Brigs) Accepted 2022 High Medium 24 Using quality indicators for continuous improvement Accepted 2022 High Medium 24 Using quality indicators and accountabilities (Commissioner Brigs) Accepted 2022 High Medium 24 Using quality indicators and accountabilities (Commissioner Brigs) Accepted 2022 High Medium 24 Using quality passed funding in residential aged care Accepted 2022 Medium 24 Using quality passed funding in residential aged care Accepted 2022 Medium 24 Using quality and safe care Accepted 2022 Medium 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality standards Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe care Accepted 2023 High 25 Using quality and safe car						
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Legislative Changes

What do we do?

- Expect to be audited on new legislation (and old)
 - Governance for example
- Continuously monitor and implement systems to comply with new legislation
 - We resource this
- Update internal audits
- Take care of yourself

The Compliance Environment

1. Unknown Timing	2. Legislative Changes
3. Increased Expectations	4. Risk Data

Increased Expectations

- More black and white approach
- "Gaps" are not mets
- Escalations happen quickly

Increased Expectations

What do we do?

- Accept the increased expectations
- Take it seriously but not personally
- Don't fight with the Commission
 - Respond don't react

The Compliance Environment

1. Unknown Timing	2. Legislative Changes
3. Increased Expectations	4. Risk Data

Risk Data

- The Commission has data for a reason
 - Complaints
 - SIRS
 - Infection management (COVID)
 - Quality indicators
 - Including new indicators (July 2023)

Risk Data

- All quality indicators from July 2023
 - Pressure injuries
 - Physical restraint
 - Unplanned weight loss
 - Falls and major injury
 - Medication management
 - Activities of daily living
 - Incontinence care
 - Hospitalisation
 - Workforce
 - Consumer experience
 - Quality of life

Risk Data

What do we do?

- Analyse at the same data (and more)
- Dashboard / reporting
- Root cause analysis
- Systemise

The Compliance Environment

Unknown Timing
 Legislative Changes
 Increased Expectations
 Risk Data

Thank you.

Q8A





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