



Consumers and Families panel – Q&As

1800 951 822

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Accessibility/ Communications

Question	Answer
<p>1. I am frequently asked what someone needs to do to access the services I receive. I advise them to firstly contact My Aged Care. I believe it would be of great service to elderly people to have easy access to the information they require, whether that be booklets/brochures at doctors, chemist, local media. There is a lot of confusion I have encountered so would welcome a simple easily accessible solution.</p>	<p>My Aged Care is a good place to start if someone you know is thinking about accessing aged care services. The 'Where to Start' page provides a list of available options depending on a person's needs, as well as a 4-step guide to access help at home services. Visit: myagedcare.gov.au/where-start.</p> <p>If a person does not have online access, they can call My Aged Care on 1800 200 422 (free call). A team member will be able to provide information such as how to access available resources and answer any questions.</p> <p>The Department of Aged Care has introduced a new program of Care Finders who can help people understand and access aged care and connect with other supports in their community. A list of care finder organisations is available on the My Aged Care website.</p>
<p>2. What can the Commission do differently to reach aged care</p>	<p>The Commission publishes a range of printed materials for people receiving care, their families and carers. People can also call us on 1800 951 822 (free call) to ask questions, provide comments and feedback or to request information and resources.</p>

consumers, particularly those without access to digital information?

The Commission is working closely with the Consumers and Families panel to improve how we communicate with people receiving care, particularly people who may have limited access to technology.

The panel recently participated in a communications survey which will help us to improve the way we communicate, including the format of our information and resources and the channels we use.

3. For residential aged care, what is the Commission's workforce capacity to process and respond to enquiries? How will the Commission's workforce communicate with aged care residents who are not able to use or have access to technology?

The Commission has good capacity to respond to enquiries and complaints. You can contact us by phone, email, online form and post.

An enquiry is where a person requests information to better understand rights and responsibilities of a provider or a consumer. The response timeframes can vary depending on how complex the enquiry is. Sometimes you'll get a response on the day you contact us but for more complex enquiries it can take longer - that is, sometimes up to a few weeks.

For complaints about an aged care service, we try to respond as quickly as possible. We prioritise depending on the level of risk.

If a person who has contacted us is concerned about the response time, we encourage them to reach out and let us know. We can then provide an update.

When people call us, our team can provide support in completing surveys or forms online. We can also arrange for forms or other information to be sent to you in the post. Team members can also provide the contact details for advocacy services, legal rights services or interpreter services depending on what would sort of help a person is looking for in relation to their aged care experience.

If people have specific communication needs, we do our best to provide additional support. For example, some people like a text message sent before we call as it can take time to get to the phone for mobility reasons.

We are working to continuously improve how we communicate with people receiving care and would welcome your ongoing feedback.

4. In the webinar you defined the term 'Approved Provider'. In terms of home care services, I've heard the terms 'Service Providers' and 'Agencies'. As I understand it a 'Service Provider' holds the person's Home Care Package {HCP} and provides all reports in relation to the HCP, whilst an 'Agency' doesn't seem to have the same responsibilities. Are both of these organisations the same in terms of the term - Approved Provider?
- The term 'approved provider' is the language used in the Aged Care Act that includes some but not all providers of aged care. 'Approved provider' refers to all government funded providers who deliver aged care services except for Commonwealth Home Support Programme providers and providers of National Aboriginal and Torres Strait Islander Flexible Aged Care services.
5. Could you please explain why it is so hard to find reports on the Commission's website? Will there be improvements to help families search when they don't have some of the correct organisation or ID details? I would be happy to use my experience of searching as a case example for you.
- We know that we need to improve our website and we are working on it. In the coming months, our website will be redesigned with improved accessibility, easy to read information and search functions.
- There have been opportunities for members of the Consumers and Families Panel to provide feedback on the current website as we start designing our new website.
- In the meantime, if you are searching for reports, please visit agedcarequality.gov.au/reports or select 'Find a report' from our home page.
- You can also visit the My Aged Care website to search for a provider's Star Rating. The new Star Ratings system provides simple information about the quality of care in an aged care home and how that home compares with others. This can help older Australians, their families and carers make more informed choices about their aged care. If you or your loved one lives in an aged care home, you can search for your provider's Star Rating by visiting myagedcare.gov.au/find-a-provider.



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At that site, you can find the latest compliance information and reports from the Commission. You can also search by a range of options on this page, including by name, location and state.

6. Why do you refer to us as 'consumers'? We prefer to be called 'residents'.

There are several terms used to refer to people who receive aged care services. 'Consumers' is the term used in the Commission's legislation. The Aged Care Act uses the term 'care recipients'.

We are aware that 'residents' is a preferred term for many people living in residential care, however it does not apply to people receiving aged care services at home.

We are aware that there are different opinions on this and will continue to seek feedback from our stakeholders.

7. You told us that the Commission will be developing a newsletter for consumers. What is the purpose of this and how is this different to existing publications like the Senior?

The Commission is considering introducing a newsletter for consumers based on survey feedback we have received. Topics nominated by survey respondents include;

1. What to expect from my provider, including my rights, issues and tips
2. Government reforms and legislation, including any changes
3. How the Commission can support me
4. The latest research in aged care and industry trends
5. Carer, family or supporter issues.

The Commission currently publishes a monthly newsletter called the [Quality Bulletin](#). Most articles are aimed at educating aged care providers, but anyone can subscribe including consumers.

8. Has the Commission considered podcasts as a way to share information?

Yes, we are exploring different ways to share information and podcasts are one of the options for consideration.



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<p>9. How do people without access to the internet get information about aged care?</p>	<p>People who want to find out more about the aged care system and how to access aged care services can call the My Aged Care contact centre on 1800 200 422.</p> <p>For those already using the aged care system, the Commission publishes a range of brochures that we encourage aged care providers to order and provide to their consumers. We will be consulting with the panel about ways we can improve how we reach consumers with our information.</p> <p>If you have an enquiry, you can phone us on 1800 951 822 and speak to a member of our Customer Contact team. We can post information to you.</p>
<p>10. Can we see more examples of high quality care and satisfied consumers, not just things that go badly?</p>	<p>We know that sharing examples of great care experiences is really important. We are working on how we gather these stories and will be checking in with the panel on the best way to share these stories.</p>
<p>11. I have never seen anything from the Commission explaining what I can expect from my provider – what are you doing about this?</p>	<p>Information about what you can expect from your aged care provider can be found on the Commission's website and on the My Aged Care website. There are also resources such as brochures and posters for consumers that providers and others can print from the Commission's website, and/or order from the Commission.</p> <p>This is an area where the Commission wants to do more work, and we will be consulting with the panel about ways to better reach consumers with our information.</p>

How the Consumers and Families panel will operate

Question	Answer
<p>12. How many panel members are from rural and remote areas?</p>	<p>Our panel represents a range of consumers, families, carers and supporters. Based on information provided in the expressions of interest, the panel includes:</p>

- 27% of people identified as living with a disability
- 19% of people identified as living in a rural or remote area
- 15% of people identified as having a CALD background
- 11% of people living with dementia
- 5% of people identified as LGBTQIA+
- 3% of people identified as Aboriginal or Torres Strait Islander
- 2% of people identified as veterans
- Around 1% of people identified as care leavers
- Around 1% of people identified as a young person with caring responsibilities.

13. Now that we know a bit more about the Commission and the panel, can I provide further information about my areas of interest or expertise as a panel member?

Yes, you can contact us to update your details or further clarify topics of interest. You can email consumerengagement@agedcarequality.gov.au or call 1800 951 822 and ask to speak with the Consumer Engagement team.

14. Are we able to tell people we are on this panel including the aged care providers caring for our family members?

Yes. It would be great if you wanted to talk about the Commission and our work with other people, to help them understand what we do. You can certainly tell anyone you like that you are part of the Consumers and Families panel.

When it comes to the specific topics that panel members have an opportunity to discuss and provide feedback on, there will be occasions where confidentiality will be important if we are sharing draft documents or processes with the panel for testing before they are released more widely. We will always be clear with panel members when a matter is being shared with them in confidence, and what that means in terms of not talking about it with others.

Of course, confidentiality also applies if someone shares their personal experience or insights during panel discussions. We will **never** identify a specific panel member as the source of particular comments or feedback and we expect all panel members to act in the same way.

15. Can panel members discuss their experiences to identify concerns,

To be a member of the panel, you need to have experience with the aged care sector, either as an aged care consumer, someone considering using aged care services or as a family member or carer of a person who receives aged care. These experiences are likely to shape



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<p>ideas, suggestions and proposals that could help?</p>	<p>any feedback you give us, which is really helpful. We will not talk about individual issues or services at our panel meetings. The panel meetings will be used to get your input on a specific topic.</p>
<p>16. Is feedback from consumers going to be used to make real change?</p>	<p>Yes, that is our intention. Our commitment to consumers is that we will listen to and consider all feedback. The objective of the panel is to enable collaboration, to develop a better understanding of the different views and perspectives, and to do our best to incorporate your preferences into our work. After each session, we will give the group feedback on the outcomes and what we are doing with the suggestions made. This includes where there are strong differences of opinion within the group.</p> <p>Over time with your assistance, we aim to improve how we communicate with consumers and the information we provide about aged care services. In addition, we will report on what we are hearing from consumers, and how we are acting on it.</p>
<p>17. Is there an overlap between our work with the panel and review of home care packages?</p>	<p>The Department of Health and Aged Care is responsible for implementing the government's reforms to aged care, including home care packages. You can find out more on the Department's website. The Department held a webinar in December 2022 to provide an update on feedback received on the discussion paper – A new program for in-home aged care. The recording of the webinar is available on the Department's website.</p> <p>You can also sign up to be involved through the Ageing and Aged Care Engagement Hub</p> <p>At times, there may be some overlap between issues we discuss with the panel and the Department's work. When this happens we will share the panel's feedback with the Department.</p>
<p>18. Did the Commission set up the panel in response to the Royal Commission?</p>	<p>The Aged Care Royal Commission did not specifically recommend the establishment of a Consumers and Families Panel, however it did highlight the need to enable and support a stronger consumer voice in aged care. The Commission has set up the panel to give us a better opportunity to understand what is important to consumers, and to help us to improve how we regulate aged care.</p>

The panel will also help to make sure we communicate with you and others who use aged care in ways that are useful and easy to understand. We hope that over time, this will help build trust and confidence in the quality of aged care in Australia.

19. When panel members provide input that relates to other government departments, can the input be shared to include common solutions?

We are not the only government agency that is involved with aged care in Australia. The Australian Government Department of Health and Aged Care also has an important role. The panel will not discuss issues that the Department (or My Aged Care) looks after. We will only talk about areas for which the Commission has responsibility. However, there may be times when we can refer your feedback to the Department for consideration.

We also encourage you to provide input directly through the [Ageing and Aged Care Engagement Hub](#).

Audit and compliance process

Question	Answer
20. Regarding assessment of a large service, why do their other services need to be considered? They can vary a great deal.	<p>The Commission assesses and monitors the performance of aged care providers against the Aged Care Quality Standards.</p> <p>We monitor and assess on a site by site basis. There are lots of large providers in the aged care sector, but you'll see that our performance reports are relevant to a specific site not the provider as a whole.</p>
21. Why does the Commission rely on self-reporting? I believe this to be a low value measure due to moral	<p>We have a range of information sources to ensure providers are complying with the Aged Care Quality Standards (Quality Standards).</p>



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hazard. I would prefer to have a camera in rooms and random audits if my parents were in aged care. Why isn't this feedback sought?

The Commission requires providers to 'self-report' on serious incidents under the Serious Incident Reporting Scheme (SIRS). Providers must also report a range of information to the Department of Health and Aged Care and we get access to that information. We review information patterns across the sector to identify any anomalies in reported information.

All site audits and most of the onsite assessment and monitoring activities at residential aged care services are conducted with no prior notice to the provider of the service.

We also have access to the Residents' Experience Surveys conducted by the Department of Health and Aged Care. This provides direct feedback from aged care consumers.

The Commission can also carry out unannounced visits to residential services outside of business hours, including on weekends based on risk. These unannounced activities help ensure the Quality Standards are always maintained.

22. Who audits Q&S? How are proposed recommendations such as improvements and education followed up?

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.

We also monitor aged care services considering all the different types of information we receive. Where we see something that we think could be concerning, we have various options for how we might follow up.

When non-compliance with the Quality Standards is identified, and the Commission is not satisfied that necessary improvements are being made to meet the Quality Standards, then the Commission may take further action such as:

- further assessment visits to assess performance or monitor quality of care and services which may be unannounced and at any time
- request detailed information about an identified risk
- further monitoring of compliance with the Quality Standards at other services operated by the provider when risks of poor quality of care are found in several of the provider's services

- regulatory action including a Non-Compliance Notice or a Notice of Decision to Impose Sanctions.

For more information, please read our Regulatory Bulletin on 'Responding to non-compliance with the Aged Care Quality Standards' at: agedcarequality.gov.au/resources/regulatory-bulletin-2019-4.

23. How is it possible to ensure that the self-recording system within a residential care facility is being accurately maintained?

The Commission applies several checks and balances when considering how a provider is meeting the requirements of their incident management system. This includes checking their system records when Commission staff are both onsite and offsite, checking with consumers and families if there have been any reportable incidents and cross-checking other information held within the Commission.

These checks may be done during an investigation into a single incident or a pattern of incidents, as well as during an audit or assessment contact. The Commission also has a referral system with allied health, hospitals and other medical staff which allows other health officials to report any concerning issues.

24. When doing audits of in-home care instead of getting names of clients from the organisation they wish you to talk to, are you able to access their client list and pick out who you want talk to so that the organisation doesn't just give you clients who will give a favourable report?

When completing assessment activities such as a quality review with a home services provider, a list of all consumers is provided to the assessment team. The assessment team will then select consumers from this list to contact.

For example, consumers may include people who have made complaints to the provider or have been involved in incidents or require complex health care support. Consumers and representatives, including former consumers or their representatives, who have requested an interview will also be selected.

With home care providers how can you be sure that the people visited by your assessors have not been 'cherry picked' for positive feedback?

I am sure that a home care provider will not be giving you the names of



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the people who have had issues with this provider, why not look for the people who have left this provider and find out why?

25. Why do you work through the provider? Why don't you contact the HCP recipient/aged care resident or their advocate directly please?

The Commission holds the provider to account for the quality of care and services delivered to consumers. We use a range of regulatory tools when this is not the case to enforce standards and requirements.

Engaging consumers and representatives and gathering feedback is a key part of all performance assessments for residential, home care and flexible services. The Commission schedules meetings and interviews with consumers and their representatives as part of the assessment process.

In addition to being involved in the Commission's assessment and monitoring activities, consumers and representatives can and are encouraged to provide feedback and lodge complaints if there is a concern about your care. If you make a complaint we will contact you directly to understand your concerns.

More information on making a complaint can be found on our website at:

agedcarequality.gov.au/making-complaint

26. When you are performing an onsite audit of an aged care provider, when looking at a resident's care plan, do you also talk to the resident to confirm that what is written the care plan is being implemented and provided to the resident (where a resident has their faculties and able to communicate)?

Yes, interviews with consumers and their representatives are essential to our assessment of a service's performance against the Quality Standards. The interviews ensure a deep understanding of consumer outcomes on the Quality Standards and strengthen the consumer voice about the quality of care received.

For example, quality assessors may:

- review a consumer's care plan and care notes to understand a person's needs and preferences
- interview the consumer or their representative to understand their view on their care and service delivery



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- speak to staff to test their understanding of the consumer's needs and preferences
- observe the delivery of care for the consumer through staff practices and consumer and staff interactions.

The quality assessors consider the information collected to form a view on the safe and effective care. The quality assessor's sample multiple consumers to understand whether the provider's care and service delivery is effective.

27. In checking homes for partner about to enter soon, I am a little confused. Compliant vs Not Compliant. One home has only one element within 5 out of 8 standards as not compliant and yet they are 'marked down' for the whole standard. Another has many elements not compliant yet shows the same not compliant.

For each performance report published on the Commission's website, you can find details of the assessment of the provider's performance. The report looks at service delivery against the Aged Care Quality Standards. There are 8 Quality Standards and 42 requirements within the Standards.

For a Standard to be found compliant, all requirements within the Standard need to be met. When one or more requirements within a Standard is found to be non-compliant, the entire Standard is found non-compliant.

The new Star Ratings system has also been introduced for residential aged care across Australia. The compliance decisions from the Commission form part of the Star Ratings to protect and enhance the safety, health, and wellbeing of older Australians receiving care. To find out more, visit health.gov.au/our-work/star-ratings-for-residential-aged-care

28. How are brokered services monitored/audited?

Providers are expected to have effective governance systems in place to assess, monitor and drive improvement in the quality and safety of the care and services they provide. This includes the care and services delivered through subcontracted or brokered services.

During a quality review or assessment contact activity with a home services provider, management of subcontracted or brokered services is considered by the assessment team. The team will assess consumer outcomes, staff understanding and knowledge and the organisation's governance system.



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29. I am also wondering what qualification Assessors must have? What experience and qualifications do aged care auditors have? Particularly are they expected to have worked in aged care? Why are your auditors expected to pay an annual fee for the auditor status?

The Commission's quality assessor workforce includes staff with a wide range of relevant knowledge, skills and experience that may include aged care, auditing, quality management, regulatory, health care, investigation and compliance.

Quality assessors must complete the Commission's Quality Assessor Training Program (QATP) and orientation program before they are registered and able to assess performance against the Quality Standards under the Aged Care Quality and Safety Commission Rules 2018 (Commission Rules).

Quality assessors are registered for a period of 12 months and must apply for a further period of registration if they wish to continue to be registered and meet all relevant requirements listed in the Commission Rules.

Further information on quality assessors can be found on the Commission's website at: agedcarequality.gov.au/about-us/assessors

30. How does an audit assess whether a provider is LGBTIQ+ friendly and staff have undergone awareness training? Does the Commission see this as important for people who may be gender diverse, e.g. trans?

We recognise and value the diversity in our community and aged care providers are required to provide supportive and inclusive care that recognises the diversity of people receiving care. While there is no specific requirement for the Commission to assess if a provider is LGBTIQ+ friendly, quality assessors from the Commission assess under the Quality Standards, whether:

- each consumer is treated with dignity and respect, with their identify, culture and diversity valued
- each consumer gets safe and effective care that is tailored to their needs and optimises their health and wellbeing
- services and supports for daily living assist each consumer to participate in their community within and outside the service environment and have social and personal relationships
- the provider's workforce is trained and supported to deliver outcomes required by the Quality Standards, based on consumers' needs, goals and preferences
- the provider's governing body promotes a culture of safe, inclusive and quality care.



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31. How does the Commission assess the care of residents during a 'lockdown'. Not just COVID but also gastro etc. Particularly their emotional/social needs. How can transparency and accountability be maintained when the residents essentially become invisible. The RACF's seem able to say 'we've done a risk assessment', and seem then to be unassailable. Is there any industry agreement or consistency regarding the type, or use, or interpretation of this risk assessment?

The Commission recognises the known physical, psychosocial and nutritional impacts on older people if they experience extended periods of social isolation, including during 'lockdown'. Your provider must have a plan to manage visitors to ensure that important social contacts continue even when there is an outbreak of COVID-19. [Ensuring safe visitor access to residential aged care](#) statement looks at provider responsibilities on visitor access.

The Commission may take regulatory action where access for essential visitors is not adequately supported. For example, when checking provider responsibilities on consumer outcomes and visitor access, we check for evidence of how a service is complying with any public health order. The Commission may also conduct an onsite 'spot check', make contact with the provider or service staff and consumers or their representatives, to gather evidence and monitor activity.

If you are concerned about your wellbeing or the wellbeing of a resident during a lockdown, we encourage you to [contact us](#) to provide this feedback or work with an advocate from [OPAN](#).

Read more in the Ensuring safe visitor access to residential aged care statement at: agedcarequality.gov.au/resources/ensuring-safe-visitor-access-residential-aged-care.

32. Mr Speed suggested there are both announced and unannounced audits or notice given and no notice. What are the percentages of each?

Over the last 15 months, 100% of site audits were unannounced.

Overall, 80% of onsite activities were unannounced.

33. There needs to be more clarity around when the Commission "can" or "may" take certain actions. These top of the peak actions as described by Janet need to be more prescriptive and less at the discretion of the agency.

Aged care providers vary in size and structure and will have different ways of meeting the Quality Standards. The Commission takes a risk-based and proportionate approach in deciding the most suitable regulatory response when responding to providers who don't meet the requirements in the Quality Standards.

This means that our response will be determined by:

- the nature of non-compliance
- the level of risk to consumers



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<p>34. When looking at complaints history during accreditation audits how far back are complaints considered? On what occasions would the Commission consider other facilities by the same provider?</p>	<ul style="list-style-type: none"> • what we know about the provider. <p>During a re-accreditation audit, the provider is required to show they have an accessible, confidential, prompt and fair system in place to resolve complaints and support all consumers to make a complaint or give feedback.</p> <p>While there is no specific timeframe on how far back complaints are considered, a past complaint or a trend of past complaints may be sampled to test if the complaints system at the service:</p> <ul style="list-style-type: none"> • encourages consumers to give feedback about the care and services they receive • responds to feedback and complaints consumers and others make formally and informally, written or verbally • helps the service to keep improving and guides improvements in care and services • resolves issues for consumers and others. <p>When deciding on reaccreditation, the Commission considers a range of factors in determining an accreditation period. This includes the compliance status of the provider as a whole, including but not limited to the single service.</p>
<p>35. Does the Commission provide certification for quality services? Does the Commission assess both residential and home care services?</p>	<p>The Commission gives accreditation to residential aged care services. Services need to be accredited to receive funding from the Australian government. We check the quality and care of services delivered by aged care providers against the Aged Care Quality Standards. Providers may receive an accreditation period of up to 3 years. The period of accreditation is dependent on the level of compliance with the Aged Care Quality Standards</p> <p>Home care services do not get accreditation, instead they go through a quality review process every three years. The quality review checks the services against the Quality Standards.</p>
<p>36. Does the Commission give providers notice when visiting or are there 'surprise' visits? Do we visit after hours and on weekends?</p>	<p>The Commission visits residential services as part of their accreditation. These visits are unannounced which means we do not tell the provider when we are coming. We may conduct a site audit outside of business hours or on weekends when there is a need to do so.</p>

A Home Services quality review includes a quality audit at the premises of the home service provider. The Commission will generally give the service written notification of the date or dates of the quality audit. This includes telling consumers and their nominated representatives about the quality audit. The Commission may conduct unannounced site visits in certain circumstances, particularly where there are concerns for consumer wellbeing.

We can also visit for other reasons to do an 'assessment contact'. Assessment contacts check a service against particular Quality Standards when we have information that suggests there may be risks to people receiving care.

Assessment contacts may be announced (where we give the provider notice we are coming), with short notice or unannounced. We can make an assessment contact at any time, including outside of business hours and on weekends.

37. Does the Commission publish results from assessments?

The Commission publishes performance reports after every assessment of performance against the Quality Standards. This includes accreditation site audits, quality reviews and assessment contacts. You can find [performance reports](#) on our website.

If a provider does not meet the Quality Standards or other regulations, the Commission may take compliance action. You can find out about current and past compliance history of a provider and view up-to-date Star Ratings on the [Non-Compliance checker](#) on the My Aged Care website.

38. What are the consequences for providers when they aren't meeting standards and regulations?

Our [Compliance and Enforcement Policy](#) describes how we find and respond to compliance issues such as a failure to meet the Quality Standards. The policy includes a description of the types of compliance action we can take depending on how serious the issues are. Types of compliance action can include requiring a provider to:

- give us a plan about how they are going to improve care
- do certain things to resolve the issue
- employ an expert adviser to help them fix any issues
- not take on any new residents or care recipients until the issues have been fixed.



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In response to serious cases, we may consider taking away a provider's approval to provide aged care.

39. Can providers and individuals be banned from aged care?

The Commission can take away approval for a provider to provide aged care services. As of 1 December, **new legislation** means the Commission now has the power to **ban individuals** from working in aged care if they are not compliant with the [Code of Conduct for Aged Care](#) or if the Commission reasonably believes that they are not suitable to provide aged care. Banning is one of the Commission's most serious compliance tools and will only be used in the most serious misconduct cases following an open and transparent investigation process.

40. How does the Commission judge if a breach is serious? Are sanctions given to a provider for one-off serious events or only ongoing events?

The Commission considers evidence from different sources when deciding if there is a compliance issue. This includes reports from assessments against the standards, complaints, incidents reported under the Serious Incident Response Scheme (SIRS), and other information such as news reports or information referred from other organisations.

In deciding how serious the issue is and what our response will be, we consider:

- the risk of harm to the safety, health, wellbeing and quality of life of consumers
- the Commission's trust in the provider to manage risk based on their track record.

41. Do repeat breaches of standards and regulations get reviewed?

Where there is a compliance issue, the Commission monitors the actions the provider is taking through reports and visits. If there are repeat issues and/or a history of compliance issues, the Commission may take more serious compliance action.

42. Will the aged care sector have a worker registration? Are there checks on aged care workers across all states/territories, like a working with children check?

Aged care providers are required to undertake a Police check for aged care workers.

There is currently no registration scheme for aged care workers.



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<p>43. Who writes and reviews provider guidelines?</p>	<p>The Department of Health and Aged Care is responsible for the laws and policies relating to aged care. This may include more detailed guidance such as the manual for home care packages.</p> <p>The Commission also provides detailed guidance for providers about the responsibilities that we are responsible for regulating, such as guidance on understanding the Quality Standards.</p>
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Involvement of consumers and families in assessment of services

Question	Answer
<p>44. How does the Commission involve consumers in assessment of services?</p>	<p>The consumer's experience of the quality of care and services is an important part of how we assess providers against the Quality Standards. Our Quality Assessors interview a minimum of 10% of residents and representatives when conducting an accreditation audit for a residential service. We interview a sample of consumers and representatives during a quality review for Home Care services. Representatives may include family members, enduring power of attorney or any other representatives.</p> <p>Aged care services must notify residents, or their representatives, of the date of the audit or quality review so you have the opportunity to meet with the assessment team to provide your feedback about the quality of care and services if you want to.</p>
<p>45. Does the Commission look at Power of Attorney when you interview consumers?</p>	<p>The Commission will try and talk directly to consumers, including when they are living with dementia. Sometimes, it may be more appropriate to interview the representative of a consumer to get an understanding of their experience.</p>
<p>46. Do assessors have training to be aware of special needs groups? Does</p>	<p>Quality Assessors must complete the Quality Assessor Training Program and a Cultural Awareness training module to become registered as assessors. To maintain registration. they</p>

this include understanding issues for LGBTIQ people?

must undertake professional development and must also meet the Quality assessor code of conduct.

Assessors are introduced to the government's [diversity framework](#) as part of their Quality Assessor Training Program. The training covers all the following diversity groups included in the [Aged Care Act](#)

- people from Aboriginal and Torres Strait Islander communities;
- people from culturally and linguistically diverse backgrounds;
- people who live in rural or remote areas;
- people who are financially or socially disadvantaged;
- veterans;
- people who are homeless or at risk of becoming homeless;
- care-leavers;
- parents separated from their children by forced adoption or removal;
- lesbian, gay, bisexual, trans gender and intersex people.

Our Quality Assessor Training Program includes discussions about identity, culture and diversity as well as cultural safety. Our assessors continually access [guidance and resource](#) materials that have example questions under each requirement. This is also available for aged care providers on our website.

47. Are assessors trained to speak with people living with dementia?

How do you work with people with a cognitive impairment to make sure their voice is heard, not just the preferences of their representative?

During the Quality Assessor Training Program, our assessors are provided with information about people living with dementia and mild cognitive impairment. This includes videos, case studies and assessments to explore how to effectively communicate with consumers. We also encourage our staff to access the free online courses from the [Wicking Dementia Research and Education Centre](#) on understanding dementia.

48. How does the Commission ensure people from different backgrounds such as people who have

As part of the assessment process, assessors speak with consumers from diverse backgrounds, for example people who have a sensory or cognitive impairment, who are represented by a public guardian, or who may have different needs to the majority of people at



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experienced trauma are supported in aged care?

the service. The assessors interview consumers using guidance and tools developed by the Commission.

Assessors also speak to staff about how they provide care and services. They look at documentation, such as care plans, to see if they reflect the things that are important to consumers, and show how care and services should be delivered in line with consumer preferences and choices.

Complaints

Question	Answer
49. If a consumer had a concern with a provider which was not resolved, and the concern subsequently has been resolved by Seniors Rights or OPAN, is the Commission informed of this?	The provider, advocacy group or consumer may later advise the Commission of this, but it does not happen automatically.
50. I would like to give you specific feedback on my experience with your 1800 line in January. What is the best way to do this?	Feedback can be provided over the phone on 1800 951 822. You may also write to us, email or fill in an online form on the Commission's website at: agedcarequality.gov.au/contact-us . If you are not happy with the response or if you would like to lodge a complaint about your experience, please visit: agedcarequality.gov.au/contact-us/complaints-about-us .
51. Consumers are interested in outcomes of complaints. If case studies are presented will consumers	We are looking at using case studies in future to show what can be achieved through a complaint resolution process. This includes thinking about how the information can be shared with consumers and families.



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also be provided with information on the outcomes of those case studies?

If you would like to be involved in developing and reviewing case studies, please email us at consumerengagement@agedcarequality.gov.au.

52. Under the Community Visitor Scheme, I have started visiting an Aged Care Centre. How do I communicate to the aged care provider that they should make the environment more light-&-airy as well as those living there should be able to communicate more?

As a volunteer visitor you have the right to receive ongoing support from the Community Visitor Scheme organisation. You also have the right to raise any concerns or issues freely and openly.

All concerns raised by volunteer visitors, especially of a serious nature such as about the welfare of a consumer, should be immediately reported to the Community Visitor Scheme coordinator and documented for immediate follow up. You can read more about the Community Visitors Scheme National Guidelines on the department's website at: health.gov.au/sites/default/files/documents/2020/01/community-visitors-scheme-cvs-national-guidelines.pdf.

Anyone can also lodge a complaint with the Commission if you have concerns about a provider. You can raise a complaint with the Commission by phoning 1800 951 822, submit your concern online or email us. You can also write to us at: Aged Care Quality and Safety Commission, GPO Box 9819, in your capital city.

You can also get free, independent help from an aged care advocate to support you to raise a complaint with your provider or with the Commission by contacting the Older Persons Advocacy Network (OPAN) on 1800 700 600 or visit: opan.org.au.

53. We are experiencing low consumer confidence in the ability of the Commission to deal with complaints. Why? How and when will this change?

We would welcome your feedback on how we can improve our complaints processes. You can contact us on 1800 951 822 or via email to info@agedcardquality.gov.au.

The government and the Commission have committed to establishing and filling the new position of Aged Care Complaints Commissioner. The Aged Care Complaints Commissioner will increase the profile of complaints and aims to improve public confidence in the Commission's ability to manage complaints in a more timely and effective way.

It is expected the Complaints Commissioner will be established in the first half of 2023.



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54. We may wish to raise a complaint, though how do we know what evidence is required by the Commission? It's also hard to provide some evidence and take out the emotion subsequent to the risk to a family member. Some evidence may breach privacy act or be difficult to obtain ID. The facility is slow to provide the documents such as clinical records.

Each complaint is unique, so we suggest that you discuss the matter with one of our staff. This can be done anonymously or as an enquiry before lodging a complaint. We can help guide you on what further information we need.

Generally, we would simply need an outline of the concerns and most evidence can then be obtained by the Commission contacting the relevant provider or service directly.

For more information, we have prepared some tips on 'making an effective complaint' at: agedcarequality.gov.au/making-complaint/how-make-effective-complaint.

55. I do volunteer work in aged care facilities, and I also live in a retirement village, so I am always in contact with many elderly people. Elderly people are afraid to complain due to time involved and repercussions from service providers, therefore, process of educating and providing independent help service for making a complaint.

We encourage you to talk to us. Our staff can provide you with information on making a confidential and anonymous complaint. We can also talk you through the complaint process, so you know what to expect.

Recently, we have released extra training for aged care providers and their staff on best practice complaints and feedback handling. This training helps staff identify and respond in a positive way to feedback and complaints, and to understand the steps in best practice complaints handling. This training is part of the Commission's commitment to supporting aged care providers with access to educational content anywhere and at any time. Providers and their staff can access our innovative online at [Aged Care Learning Information Solution – Alis](#).

You can also call the Older Persons Advocacy Network (OPAN) on 1800 700 600 for support when you raise an issue with us or your service provider. This can include extra support for you at any stage of the complaints process.

56. My provider only does what they want, not what I need or for my wellbeing. There are quite a few bad experiences with the provider. I have spoken to my primary physician and

We encourage you to talk to us. We can explain the complaints process and what you can expect through the process, including raising an anonymous complaint if you would prefer. Should you wish to make a complaint, we would be happy to assist you with this.



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nurse also. They are very much aware what is the best practice to keep me safe and happy at home!

You can also call the Older Persons Advocacy Network (OPAN) on 1800 700 600 for support you when you raise an issue with us or your service provider. This can include extra support for you at any stage of the complaints process.

57. How are you going to find the voice of the elderly, who will not complain, because they are scared of being punished by the provider? There are significant numbers that I know about. This is related to home care.

We are engaging through new ways such as the Consumers and Families Panel to better understand the voice of consumers. We use the feedback and information from the panel across all areas of the Commission.

In our engagement with providers, we continue to promote complaints handling within their organisations. The Aged Care Quality Standards requires providers to actively promote complaints handling. More information can be found on our website on the Quality Standards at: agedcarequality.gov.au/providers/standards.

We have also developed training for providers to help staff identify and respond in a positive way to feedback and complaints, and to understand the steps in best practice complaints handling.

58. What is the practice for independent complaints officers within home care package providers? How do we hold home care providers to account?

Home services providers are also subject to the Aged Care Quality Standards. Standard 6 requires a provider to have a system in place to resolve complaints. The system must be accessible, confidential, prompt and fair. It should also support consumers to make a complaint or give feedback. The Commission can investigate complaints about provider responsibilities under this Standard.

Resolving complaints within the organisation can help build the relationship between consumers and the organisation. It can also lead to better outcomes. Consumers should feel safe and comfortable giving feedback.

Some consumers may have barriers that make it difficult to raise complaints. These could be cognitive or communication difficulties, language or cultural differences. The nature of a complaint can also be particularly sensitive or private. Your provider is expected to look for ways to tackle these barriers and create a culture that welcomes feedback and supports you to make complaints.



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For more information on handling complaints, visit agedcarequality.gov.au/resources/better-practice-guide-complaints-handling-aged-care-services.

59. Can the Commission publish a record of complaints regarding home care providers?

We do not publish a report of all complaints received. We work with the person who has made the complaint and the provider to resolve the issue.

Where there have been multiple complaints, and a visit from our quality assessment and monitoring team, we publish our complaints directions. You can see the register of our [complaints directions on our website](#). Information about complaints is also published in quarterly Sector Performance Reports and our Annual Report.

The Commission publishes audit reports on our website. These reports give you performance information about individual aged care services and includes our assessment against Standard 6 – Feedback and complaints. You can search for reports on home care providers by visiting: agedcarequality.gov.au/reports.

60. Is it compulsory of the facility to create an incident report when a complaint is received?

Aged care providers are subject to the Aged Care Quality Standards. Standard 6 requires a provider to have a system to resolve complaints. This Standard also requires that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. This includes the requirement that providers record complaints and incidents.

61. Just wondering if there is a system available to consumers, residential or home, who have no digital access or easy phone access (due to health issues i.e. mobility issues) to be able to lodge a complaint. If they are reliant on their carer, with no family assistance, how can they be sure that any complaint is heard and followed up? In my experience these seem to

We would encourage consumers with no digital access to work with a family member, friend or advocate. We can then arrange for ongoing communication related to the complaint to be posted directly to the consumer.

Providers also have an obligation under Standard 6 to have a workforce who can identify consumers who may need help to raise a complaint or use an advocate. This includes providing information about how to contact advocacy and language services.

Consumers can also speak with a quality assessor during an audit and they could arrange for a complaints officer to get in touch.



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be the people who slip through the cracks far too often.

62. How do I raise a complaint about my care?

My provider sends staff who do not have the skills to provide personal care for me. What can I do about this?

I signed up with a home care provider and they did not provide us with any services for nine months but still charged us. What can I do about this?

I signed up with a home care provider and they did not provide us with any services for nine months but still charged us. What can I do about this?

If you feel comfortable, we encourage you to raise your concern with the staff or managers of the service first as this is often the best way to have your concern resolved. All service providers are required to have a complaints system in place. In most cases, you will be able to resolve your concern with your provider.

If this does not work or you do not feel comfortable, the Commission can support you to resolve your concern with your service provider. You can raise a complaint with the Commission by phoning 1800 951 822 or submit your concern [online](#). You can also write to us at: Aged Care Quality and Safety Commission GPO Box 9819, in your capital city.

You can also get free, independent help from an aged care advocate to support you to raise a complaint with your provider or with the Commission by contacting the [Older Persons Advocacy Network \(OPAN\)](#).

63. Does the Commission have power and authority to deal with complaints about the aged care system?

No, the Commission can only deal with complaints about individual aged care providers.

My Aged Care has a separate complaints process for [complaints about My Aged Care](#) or the assessment process.

The Department is responsible for aged care policy development and implementation, and the management of national aged care programs. The Department has an [engagement hub](#) specifically to invite people to get involved in reforms and drive change in aged care in Australia.



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<p>64. How do we know the right agency to lodge our complaint?</p>	<p>If you lodge a complaint with us and we can't help you, we will try to identify who can help you. We may need to refer some issues to other organisations to ensure that your concerns are handled correctly, by the people best placed to deal with them.</p>
<p>65. How do you ensure that consumers have their complaints taken seriously?</p>	<p>If you have a concern or complaint that you have not been able to resolve by talking with your service provider, the Commission can support you.</p> <p>When you contact us, we will listen to you and ask you questions about your concern to help us understand the issues and your expectations. We will let you know if your concern or complaint is an issue that we can help you with. We treat each concern or complaint on its own merits and we will carefully assess the information we receive and obtain.</p> <p>If you lodge a complaint with us, and you are not happy with a decision we have made about your complaint, you have review rights.</p> <p>You can also ask for a review of our complaints process by the Commonwealth Ombudsman.</p> <p>In addition, you can get free, independent help from an aged care advocate to support you to raise a complaint with your provider or with the Commission by contacting the Older Persons Advocacy Network (OPAN).</p>

Reforms

Question	Answer
<p>66. Are the new rules of certain number of hours with each resident compulsory for the nursing home to provide?</p>	<p>Yes. From October 2023, it will be mandatory for residential aged care services to provide an average of 200 care minutes, including 40 minutes of registered nurse care, per resident per day. This will be based on care provided by registered nurses, enrolled nurses and personal care workers.</p>



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From October 2024, this will increase to 215 care minutes, including 44 minutes of registered nurse care, per resident per day.

More information on this topic can also be found on the department's website:

health.gov.au/sites/default/files/documents/2022/06/what-are-care-minutes.pdf.

67. I'm really disappointed at the incentive structure surrounding the requirements - e.g. w.r.t the requirement for RN's to be onsite 24 hrs. Self-reporting is a meaningless measure. If an aged care facility reports non-compliance (which I highly doubt) they lose funding for the RN - who does this hurt? Only the residents. Why isn't the aged care facility required to submit RN timesheets/payroll evidence? Why doesn't the Commission hire the RN and bill the aged care facility until such time that they have employed an RN?

The Department of Health and Aged Care is responsible for developing the policy connected to the 24/7 register nursing reform. From 1 July 2023 approved providers must have at least one RN on-site and on duty 24 hours a day, 7 days a week, at each residential facility they operate. Residential aged care facilities with 30 or less approved beds in Modified Monash Model (MMM) 5–7 locations will be eligible for a one-off 12-month exemption from the 24/7 RN responsibility. Approved providers must apply for an exemption, the application process requires detailed evidence of alternative care arrangements in place for when they do not have an RN on-site and/or on duty. Approved providers can choose to opt out of the exemption.

Residential aged care facilities with, on average, 60 residents or less per day (based on occupied bed days) will be eligible for a funding supplement to employ extra RNs to deliver 24/7 RN care.

Facilities with more than 60 residents will not receive the supplement, because their existing AN-ACC funding is sufficient to provide for 24/7 RN care. Providers will submit monthly reports to the Department of Health and Aged Care (Department) about the 24/7 RN responsibility, including any additional information or documents requested by the Department on this matter. This information will be shared with the Commission and we will monitor, identify and respond to areas of risk to consumers and non-compliance by approved providers with their responsibilities under the aged care legislation, in accordance with the Commission's functions and community expectations.

In instances where approved providers cannot maintain an adequate number of sufficiently skilled staff, they must deploy strategies to ensure that the care needs, and particularly the clinical care needs, of consumers are met at all times.

Where a provider demonstrates a willingness to take all reasonable steps to comply with their responsibilities, the regulatory response will be different from the action taken if a provider is



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unable to demonstrate a suitable response, or deliberately avoids compliance obligations and may be placing consumers at risk of harm.

Approved providers will be supported to meet their responsibilities and to implement appropriate and robust workforce governance and management processes. The Aged Care Quality and Safety Commission (the Commission) recognises that the aged care sector is affected by external pressures which may at times present challenges to attracting and retaining a suitably skilled and competent workforce.

You can read more about 24/7 nursing [here](#).

68. Where local councils are providing the home care and support, are they also looked at as far as the Code of Conduct for Aged Care by the Commission, or do they slip under the radar? I have seen quite a few councils opt out of this care lately.

A local council that is an approved provider must comply with the Code and take reasonable steps to ensure that their aged care workers and governing persons comply with the Code. This includes contractors, volunteers or other people employed or otherwise engaged by the provider to deliver care and services.

Some local councils may receive government funding to deliver the Commonwealth Home Support Programme (CHSP) and National Aboriginal and Torres Strait Islander Flexible Aged Care Program (NATSIFACP). Providers of CHSP and NATSIFACP, their aged care workers and governing persons will not be covered by the Code.

The CHSP and NATSIFACP providers are still required to provide care that is safe and respectful and to behave in a way that aligns with the Code.

69. Will the revised Code address the need for providers to deal with discrimination some LGBTIQ+ elders fear when accessing aged care by ensuring governance facilitates training?

The Code requires providers, their workers and governing persons to provide care, supports and services that are free from all forms of violence, discrimination, exploitation, neglect and abuse, and sexual misconduct.

It also requires reasonable steps to be taken to safeguard consumers against harm and respond to incidents. This includes harm in the form of any discrimination including sexual orientation and gender identity.



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	<p>To find out more about the Code and view consumer resources, visit agedcarequality.gov.au/consumers/code -conduct-aged-care-information -consumers.</p>
<p>70. What about multiple complaints against an individual who has or is working at multiple providers?</p>	<p>Where the Commission is aware of multiple concerns about the conduct of a worker, they will take this into account when deciding what action to take. The Commission can manage cases where a worker is employed by multiple providers.</p>
<p>71. Does the new Code of Conduct mean that the Charter of Rights is going to finish?</p>	<p>The Charter continues to apply. The Code is an additional set of standards that providers, governing persons and aged care workers must comply with.</p> <p>Some elements of the Code reflect the same language of the Charter in describing how a consumer is expected to be treated through the actions or behaviours of providers, governing persons and workers.</p>
<p>72. How do we provide feedback on the reforms? Is that available on your website?</p>	<p>There are several ways you can be involved in the reforms, including through surveys, webinars, online workshops, consultation papers, discussion papers, and general feedback. The Commission has a range of information about the reforms from a regulatory perspective on our website: agedcarequality.gov.au/reforms.</p> <p>You can submit questions and feedback about the regulatory requirements of the reforms to: agedcarereform@agedcarequality.gov.au.</p> <p>You can read more about the government's aged care reforms in detail on the Department of Health and Aged Care's website: health.gov.au/initiatives-and-programs/aged-care-reforms.</p> <p>The department also has a dedicated Aged Care Engagement Hub, where you can find out more about current and upcoming opportunities to get involved with the reforms, and subscribe to relevant updates: agedcareengagement.health.gov.au.</p>



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<p>73. Could I have hard copies of the latest and updated information?</p>	<p>Yes. Please call us on 1800 951 822 to have printed copies of our resources posted to you or visit the Commission's website to download and print our resources: agedcarequality.gov.au/form/order-resources.</p>
<p>74. Are we going to see financial penalties imposed on non-compliant providers?</p>	<p>The Commission will take risk-based and proportionate action in response to non-compliance with provider responsibilities. For example, the Commission currently can apply to a Court to order a provider to pay the Commonwealth a financial penalty.</p>
<p>75. Those are a lot of changes. What do you think we, as consumers, can expect to see in terms of front-line care changes over the next year or so?</p>	<p>Key changes in care arrangements over the next year or so will include:</p> <ul style="list-style-type: none"> • an increased focus in the amount and type of direct care, including clinical care, delivered in a residential aged care setting, which will be through mandatory care minutes and the requirement to have an RN onsite and on duty at all times • additional safeguards for consumers through the Code • requirements for information sharing between Commonwealth agencies across the aged care, disability support and veterans' care sectors • requirements for approved providers to improve their governance arrangements • increased protections for consumers through strengthened arrangements, including consent arrangements, for the use of restrictive practices • caps on home care package charges and the removal of exit fees when a consumer changes their home services provider • stronger Aged Care Quality standards designed to improve the experience of care. <p>You can read more about the reforms on the Department's website health.gov.au/topics/aged-care/aged-care-reforms-and-reviews.</p> <p>The introduction of Star Ratings, and increased transparency of information about residential aged care providers and their services, will also help consumers and their representatives to make more informed choices about their care.</p>



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76. We know there's more and more focus on home care. How does the Commission assess the care of people living in the community?

Home care services provide support to help people stay at home and be more independent with their day-to-day activities and in the community. These include Home Care Packages, Commonwealth Home Support Program (CHSP) services and flexible care services, where short-term restorative care is provided at home.

The Commission conducts quality reviews of home care services providers to assess whether they are delivering services in line with the Aged Care Quality Standards. As part of these quality reviews, we engage with consumers to understand their experience of receiving care and any areas of concern.

For more information, and links to relevant home services resources, please visit:

agedcarequality.gov.au/providers/home-services.

77. It seems likely that quality and safety standards are to be intentionally wound down under the "Support at Home" care at home model. While some providers are apparently failing existing quality and safety standards, it seems that the Support at Home model advocates even less involvement from providers? Surely this will mean less oversight and compliance? The real problem seems to be excessive cost servicing and ineffective services that do not efficiently benefit the client. The proposed changes do not seem to rectify those issues?

The Department of Health and Aged Care is consulting widely on the development of a new in-home aged care program, to be introduced from 1 July 2024.

On 18 October 2022, the department [published a discussion paper](#) on the initial design of the program, including previous stakeholder feedback. This includes emphasis on excessive administration charges and improving the alignment of services with consumer needs.

The department is also designing a new framework for how aged care is regulated. Two papers were released already for public comment. The framework is intended to respond to the recommendations of the Royal Commission into Aged Care Quality and Safety.

The new approach intends to create a culture that encourages continuous improvement in the delivery of high quality and safe care for older Australians. The new approach will be:

- rights based
- people centred
- risk proportionate
- informed by best practice.

There is no intention to create a system that would allow poor quality or unsafe care to go unrecognised or addressed.

More information:

- [health.gov.au/resources/publications/a-new-program-for-in-home-aged-care-discussion-paper](https://www.health.gov.au/resources/publications/a-new-program-for-in-home-aged-care-discussion-paper)
- [health.gov.au/health-topics/aged-care/aged-care-reforms-and-reviews/designing-a-new-approach-to-regulating-aged-care](https://www.health.gov.au/health-topics/aged-care/aged-care-reforms-and-reviews/designing-a-new-approach-to-regulating-aged-care)

78. In the case of implementing a consumer body to oversee a provider is that to be within the entire provider of an individual facility? This may make a huge difference when the provider is based in one state while issues are occurring in a very far away state.

Large corporations might offer 1 consumer group for a number of services, but each individual service can differ significantly.

The legislation allows for one or more consumer advisory bodies to be established per provider. If the provider has many aged care services, a consumer advisory body may be formed for each service. Providers may have more than one consumer advisory body. The provider may determine the appropriate number of consumer advisory bodies for their organisation and take into consideration the way the services differ. We encourage you to talk to your provider about establishing a consumer body specifically for your service.

The requirement to offer to establish a consumer advisory body commenced from 1 December 2022 for all new providers. While existing aged care services can introduce advisory bodies at any stage, they are not required to do so until 1 December 2023.

A written offer to establish a consumer advisory body must be made to consumers and their representatives every 12 months, regardless of whether such a body (or multiple bodies) already exist.

For example, a large residential aged care provider may wish to establish a consumer advisory body for each aged care service, or multiple bodies may be established, each of which is dedicated to a certain aspect of quality feedback. However, for a small, community-based provider with a single service, it may be more practical to establish one consumer advisory body for the whole organisation.



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Regardless of how many consumer advisory bodies are established, feedback from consumers on individual services can be given at any time. This can be directly to the provider, with the help of an advocate, or to the Commission.

79. Like accreditation of an early childcare centre. Each accreditation round (be that 1 year or 2 or 3 years, depending on their level achieved) during the accreditation process at least 4 parents need to consult and provide input to the service provider.

Engaging consumers and representatives and gathering feedback is a key part of all performance assessments for residential, home care and flexible services. The Commission schedules meetings and interviews with consumers and their representatives as part of the assessment process.

80. With the new Star Rating being implemented in December 2022, will this also determine cost of the aged care provider e.g. will a 5-star provider be able to charge more for care than say a 3-star service? Or are the costs set out by the department?

Star Ratings are not connected to the costs that the provider can charge. Star Ratings will support older Australians and their representatives to easily compare services and make informed choices based on an overall Quality Rating and 4 sub-categories:

Quality Measures – data on 5 existing quality indicators (pressure injuries, physical restraint, unplanned weight loss, falls and major injury, and medication management) reported quarterly.

Compliance – based on non-compliance decisions made by the Aged Care Quality and Safety Commission reported daily.

Residents' Experience – at least 10% of older Australians living in residential aged care homes are interviewed face-to-face about their overall experience at their residential aged care home by a third-party vendor annually.

Staffing minutes – reviewed from reporting under the Quarterly Financial Report and Annual Financial report, case-mix adjusted through the Australian National Aged Care Classification and reported quarterly.

More information about Star Ratings and how costs are set out can be found on the department's website at:

- [health.gov.au/initiatives -and-programs/star -ratings-for-residential -aged-care](https://health.gov.au/initiatives-and-programs/star-ratings-for-residential-aged-care)



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81. Seeing as the Royal Commission said that the regulator was not fit for purpose, what are the major differences or changes that will give consumers confidence that the regulator is now adequate?

- health.gov.au/health-topics/aged-care/about-aged-care/how-much-does-aged-care-cost

The government has commissioned an independent capability review of the Commission, as recommended by the Royal Commission into Aged Care Quality and Safety. The review commenced in October 2022 and is expected to take around 6 months to complete.

The aim of the review is to ensure that the regulator is well-placed to fulfil its current and future responsibilities to hold providers to account for their delivery of safe, quality care and services that are tailored to meet the needs of each consumer. The review will identify improvements that will support the regulator to undertake strong regulatory activities, increase accountability, promote best practice and lift sector performance.

The Commission is committed to supporting the work of the independent reviewer, Mr David Tune AO PSM, as he conducts the review and prepares a report for Government identifying opportunities to strengthen the Commission's effectiveness and impact.

For more information about the review, and its terms of reference, please visit: health.gov.au/health-topics/aged-care/aged-care-reforms-and-reviews/royal-commission-into-aged-care-quality-and-safety/capability-review.

82. Where can we find more information on the proposed reforms in home care?

The Department is responsible for implementing the government's reforms to aged care. You can find information about [aged care reform](#) on the Department's website.

Will the review of the home care program include recognition of self-management of packages?

You can find out more about [home care reform](#) on the Department's website. The Department held a [webinar](#) in December 2022 to provide an update on the feedback received on the discussion paper. The webinar outlined the next steps for the reforms.

How will my CHSP services be affected by the changes to home services?

Mandatory care minute responsibilities for residential aged care will be introduced from 1 October 2023. You can learn about the 'care minutes' target and mandatory responsibilities at health.gov.au/our-work/care-minutes-registered-nurses-aged-care/care-minutes.

Will the aged care reforms include staffing ratios in aged care?

How will the availability of short-term respite to support those wishing to remain living at home for as long as possible and their carers be ensured?

Will ACFA's recommendations on respite care be included in the consultations?

You can also sign up to be involved through the Department's [Ageing and Aged Care Engagement Hub](#).

Other

Question	Answer
83. Who is OPAN?	<p>OPAN stands for the Older Persons Advocacy Network. OPAN is a national organisation providing free, confidential, and independent support to older people seeking or receiving government-funded aged care services, their families and representatives across Australia.</p> <p>OPAN helps older people understand and exercise their aged care rights, seek aged care services that suit their needs and find solutions to issues they may be experiencing with their aged care provider.</p> <p>For more information, visit: opan.org.au/contact-us.</p>
84. Who are the main peak, advocacy or membership organisations in aged care?	<p>Across the aged care sector there are a number of aged care groups, some of whom advocate for and support older Australians and some who represent aged care providers and workers. This includes:</p> <ul style="list-style-type: none">• Aged Care Industry Association (ACIA)• Industrial associations and trade unions



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- Aged & Community Care Providers Association (ACCPA)
- Catholic Health Australia
- Council on the Ageing (COTA) Australia
- Dementia Australia
- Federation of Ethnic Communities' Council of Australia (FECCA)
- LGBTIQ+ Health Australia
- National Advisory Council Group for Aboriginal and Torres Strait Islander Aged Care (NAGATSIAC)
- National Aboriginal Community Controlled Health Organisation (NACCHO)
- National Aged Care Alliance (NACA)
- National Seniors Australia
- Older Persons Advocacy Network (OPAN).

In addition, the Commission regularly engages with our Consultative Forum and receives advice from the Aged Care Quality and Safety Advisory Council about the Commissioner's functions and may also advise the Minister on these functions on request.

85. Why does the Commission not run a census (preferably) or at least a well-designed probability survey of consumers in regard to their care.?

The Department of Health and Aged Care is responsible for consumer experience interviews (CEIs) across Commonwealth funded residential aged care homes. Interviewees include residents from vulnerable communities, diverse cultures and people with special needs. The results from these interviews are part of the new Star Ratings system. You can find more information at: health.gov.au/our-work/star-ratings-for-residential-aged-care.

In addition, from April 2023 the National Aged Care Mandatory Quality Indicator Program (QI Program) requires all residential aged care providers to offer a consumer experience assessment to each care recipient. This consumer experience assessment means a standardised survey. For more information about the consumer experience assessment and the quality indication program, visit: health.gov.au/news/new-residential-aged-care-quality-indicators.



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86. Can this panel provide feedback on those new quality standards?

The Department of Health and Aged Care is leading the review of the Quality Standards, working with us and the Australian Commission on Safety and Quality in Health Care (ACSQHC).

Public consultation took place in late 2022 through a range of activities including online focus groups, an introductory webinar and a survey.

You can find more information on the 'Review of the Aged Care Quality Standards department's website at: health.gov.au/topics/aged-care/aged-care-reforms-and-reviews/royal-commission-into-aged-care-quality-and-safety/review-of-the-aged-care-quality-standards.

To get involved and have your say, visit the Departments Aged Care Engagement Hub: agedcareengagement.health.gov.au/qualitystandards.

Once the revised Quality Standards are developed, we plan to engage with the panel about how to best apply and share the updated information.

87. It would be helpful to have an independent phone number to give feedback to the Commission. The previous 1800 number was just a general number and it was impossible to reach a person on it. Also, a recent email address at the end of an email would not work.

Our number is 1800 951 822 (free call) for all enquiries, we call this our 'front door'. You can call us to:

- make a complaint
- provide feedback
- order a publication
- get more information
- make an enquiry.

If you would like to give us feedback in another way, you can also:

- post a letter to Aged Care Quality and Safety Commission, GPO Box 9819, in your capital city
- submit an enquiry online – agedcarequality.gov.au/enquiry-form
- email us at info@agedcarequality.gov.au.



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<p>88. Format of engagements with panel – can we consider face to face?</p>	<p>We would love to bring the panel together in person but with nearly 300 members spread across Australia we need to find other ways to engage.</p> <p>We have used email, post, phone calls and online meetings to engage with panel members. We would welcome any suggestions you have on how we can best engage with you as part of the panel.</p>
<p>89. What is the current 1800 phone number we can use as a panel member please?</p>	<p>Please call us on 1800 951 822 (free call) for all enquiries. If you would like to speak to the Stakeholder Engagement team, please use this number and ask to be connected to us.</p>
<p>90. How can grassroots advocacy groups participate further please?</p>	<p>Our Consumers and Families panel has been designed for individual consumers or family members to share their experience and help us improve how we regulate aged care. We also want to make sure we communicate with you and others who use aged care in ways that are useful and easy to understand.</p> <p>Members of advocacy groups are welcome to join the panel but need to understand that the panel might not be the best place to lobby for reform or policy change.</p> <p>If you are part of a grassroots advocacy group and would like to engage with the Commission please contact us on 1800 951 822 (free call) and ask for our Stakeholder Engagement team.</p> <p>You can also:</p> <ul style="list-style-type: none"> • post a letter to Aged Care Quality and Safety Commission, GPO Box 9819, in your capital city • submit an enquiry online at agedcarequality.gov.au/enquiry-form • email us at info@agedcarequality.gov.au.
<p>91. What qualifications are required to register as a provider?</p>	<p>Providers need to meet these requirements before they can be approved: comply with requirements set out in Part 7A of the Commission Act</p> <ul style="list-style-type: none"> • understand an approved providers' responsibilities under the Aged Care Act

- deliver care that meets the associated Principles made under section 96-1 of the Aged Care Act, including the Aged Care Quality Standards.

The assessment of their application considers the following:

- must be a corporation
- key personnel cannot be disqualified individuals
- experience providing aged care or other relevant forms of care
- understanding of approved provider responsibilities
- have, or will have, systems in place to meet responsibilities
- have, or will have, sound financial management records and practices
- compliance financial obligations and other responsibilities as a care provider, if already a provider.

92. Why is there no limit on the amount that some providers are charging, especially the management fees?

The government has announced that there will be caps on the amount home care consumers can be charged in administration and management fees, along with regular monthly reporting which came into effect 1 January 2023. You can read about these changes at: health.gov.au/news/newsletters/home_care_packages_program_update_november-2022#changesto-reduce-administration-and-management-charges.

As a consumer, you can also shop around and look for a provider with prices you think are reasonable. You can compare a provider's prices by using the 'Find a provider' tool on the My Aged Care website: myagedcare.gov.au/find-a-provider.

93. Evidential documentation of attendance at education and post-training courses is good. Should not rely on staff attending in-house

There are several challenges facing the aged care workforce and having appropriately skilled workers is important. The government has an Aged care workforce action plan 2022 – 2025, which you can read on the department's

courses without external courses and no assessment in the implementation of the learnings.

website: health.gov.au/resources/publications/aged_care_workforce_action_plan_2022_2025

The aged care workforce is mostly personal care workers. The remaining direct care workforce includes Enrolled Nurses, Registered Nurses and Nurse Practitioners as well as allied health practitioners and assistants. We acknowledge the important role of medical practitioners, allied health practitioners and additional roles, including gardeners, chefs, kitchen staff, cleaners, transport drivers and volunteers, provide to ensure older Australians have a high quality of life.

The Commission has an online learning platform which all staff employed by an approved provider can access. This platform ensures everyone working in the sector has access to external training modules with best practice content.

Dementia Australia also offer a nationally accredited program and 3 national palliative care projects are expanding to include residential aged care worker training.

The University of Tasmania has also developed a free learning package called 'Equip Aged Care', which is available to aged care workers, volunteers, caregivers, and anyone with an interest in improving care for older Australians.

Aged care financial issues

Question	Answer
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<p>94. Who can I contact to understand why my financial contribution to my package is so high? How can I get help if my fees are putting me into financial distress?</p>	<p>Fees that consumers have to pay for home care packages are set by government. You can find out more about how fees work on the My Aged Care website. If you are experiencing financial hardship, you may be eligible for assistance with your aged care fees, you can get more information at myagedcare.gov.au/financial-hardship-assistance. From 1 January, the Australian Government has capped administration and management charges in the Home Care Packages (HCP) Program. Care and package management charges will be capped at 20% and 15% of the package level respectively. Exit fees and separate subcontracting charges will also be eliminated.</p> <p>You can also get free financial advice through Services Australia's Financial Information Service (FIS). FIS officers can show you how to make informed financial decisions and help you to understand the financial implications of your aged care costs. To find out more about FIS or to make an appointment, phone 132 300 and say "Financial Information Service" when prompted.</p>
<p>95. My home care provider takes nearly 30% of my subsidy as a management fee. This does not leave enough for the care I need. What can I do about this?</p>	<p>From 1 January, the Australian Government capped administration and management charges in the Home Care Packages (HCP) Program. Care and package management charges are capped at 20% and 15% of the package level respectively. Exit fees and separate subcontracting charges have also been eliminated.</p> <p>You can compare provider's prices by using the Find a provider tool on My Aged Care.</p>

Residential care issues

Question	Answer
<p>96. How can consumers and families understand the risks and benefits of</p>	<p>You should always talk to the doctor or nurse practitioner who prescribes them as they are the ones who know the problem being managed, the proposed benefit of the medication and the risks of the use of the medication, including effects on the vulnerable brain of a person with dementia. The prescriber will also know the effect of the medication on other medical</p>

medication for consumers with dementia?

conditions the person has and the interaction with other medications they are taking. Your provider will be able to give information on any possible side effects of the medications being given to you or your family member that may be occurring or emerging e.g. drowsiness, constipation, falls etc. It is your right to make decisions about your care, including your medication, no matter your age or medical condition.

The Commission has partnered with the Older Person's Advocacy Network (OPAN) to produce resources for consumers to help you make informed choices about medications. You can find these resources, including a short explainer video on the [Medication it's Your Choice](#) page on OPAN's website.

97. How can aged care consumers have a regular pharmacist review of medications?

You can request a Residential Medication Management Review (RMMR), which is funded under Medicare. An RMMR involves a GP and a pharmacist working together to review your medication management. You should speak to your doctor or the residential facility to request a review. Your doctor must assess you and decide if an RMMR is clinically necessary. This is an opportunity to express concerns and wishes, and ask questions about medications.

For people living in the community, there is a Domiciliary Medication Management Review (DMMR) available under Medicare. This also involves your GP working with a community pharmacist who can visit you and review your medication.

98. Is there mandatory training about dementia for staff in aged care?

There is currently no mandatory training about dementia for aged care workers. However, [Quality Standard 7](#) requires that providers have a workforce that is sufficient, and is skilled and qualified to provide safe, respectful and quality care and services.

99. What is happening to improve food in residential care? Are there plans to replace pureed meals?

[Improvements to food in residential care](#) are part of the reforms the government is introducing. This includes a new standard specifically on food and nutrition as part of the strengthened Standards. You can read about the strengthened standards at [health.gov.au/topics/aged-care/aged-care-reforms-and-reviews/royal-commission-into-aged-care-quality-and-safety/review-of-the-aged-care-quality-standards](https://www.health.gov.au/topics/aged-care/aged-care-reforms-and-reviews/royal-commission-into-aged-care-quality-and-safety/review-of-the-aged-care-quality-standards).

The Commission recently published [resources](#) for providers and consumers to improve the food and dining experience. You can use these resources to discuss your food and nutrition



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needs and preferences with your provider. Resources on swallowing and risks of eating with impaired swallowing have recently been released on our [food, dining and nutrition webpage](#).

For pureed meals, providers need to understand the needs and wishes of all residents. There may be a recommendation for a modified consistency diet if a person has issues such as chewing or swallowing difficulties to make eating easier or more comfortable. All residents should have access to meals and snacks that look, smell and taste appealing, and are served at an appropriate temperature and texture. People who do not need or want pureed food should have their wishes respected. You can read our food and nutrition fact sheets including information on eating and drinking when you have problems with swallowing at www.agedcarequality.gov.au/consumers/food-dining-and-nutrition.

100. The Commission consulted with consumers about food and nutrition in residential care – why not in home care?

One of the government's priorities for reform is improving food for aged care residents. This is part of the response to the findings of the Royal Commission.

The Commission is supporting this through a project to educate providers and consumers about food, dining and nutrition in residential care. We consulted with consumers as part of this work and set up a Food and Nutrition Expert Advisory Group.

We know that eating well is very important for all people receiving care. Meals and food preparation can be provided as part of a home care package or through a Commonwealth Home Support Program (CHSP) service. However, most people receiving aged care at home are not as reliant on their aged care provider to meet their food and nutrition needs as people who live in residential care.



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Home care policy

Question	Answer
<p>101. How does the government ensure equitable access to mobility aids for people receiving aged care compared with the National Disability Insurance Scheme (NDIS)?</p> <p>There needs to be clearer guidelines for mobility aids and better equity with the NDIS for example for guide dogs.</p> <p>How can we have a multi-disciplinary approach to assessing needs for equipment and aids? Particularly when the aged care consumer is also living with disability (where some equipment/aids cannot be OT assessed/approved)</p> <p>What funds can be spent without requiring the advice of an Occupational Therapist (OT)?</p> <p>Will we be consulted on the new <i>Operational Manual for Home Care Package consumers?</i></p>	<p>You can read more about equipment and aids at myagedcare.gov.au/aged-care-services/aids-to-stay-independent.</p> <p>The Home Care Packages Program Manual explains the Home Care Packages Program and how it operates, and the manual outlines what's included and excluded from Home Care Packages. The manual is managed by the Department of Health and Aged Care. You can access the manual at myagedcare.gov.au/publications/home-care-packages-manual. If you'd like to provide feedback about this manual, you can call My Aged Care on 1800 200 422.</p>



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