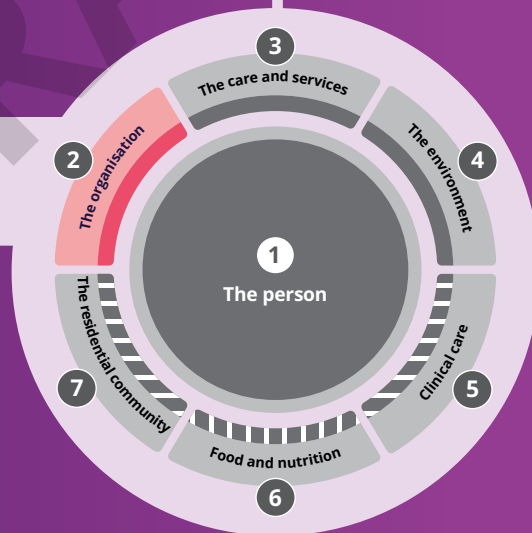




Draft Standard 2 The Organisation

Guidance material for the strengthened Aged Care Quality Standards for review and discussion

January 2024



2

Contents

Purpose of the guidance	4
Structure of this document	5
Guidance on Standard 2: The Organisation	6
What is the intent?	6
What will older people say if you are achieving the outcomes of this Standard?	6
What are the key concepts?	7
Guidance for Outcome 2.1: Partnering with older people	8
What is the outcome that needs to be achieved?	8
Why is this outcome important?	8
How could Outcome 2.1 be achieved in practice?	9
What are the key resources that can be referred to?	13
Guidance for Outcome 2.2: Quality and safety culture	14
What is the outcome that needs to be achieved?	14
Why is this outcome important?	14
How could Outcome 2.2 be achieved in practice?	15
What are the key resources that can be referred to?	18
Guidance for Outcome 2.3: Accountability and quality systems	19
What is the outcome that needs to be achieved?	19
Why is this outcome important?	19
How could Outcome 2.3 be achieved in practice?	20
What are the key resources that can be referred to?	27
Guidance for Outcome 2.4: Risk management	28
What is the outcome that needs to be achieved?	28
Why is this outcome important?	28
How could Outcome 2.4 be achieved in practice?	29
What are the key resources that can be referred to?	34

Please note the draft strengthened Quality Standards in this document are not yet in operation. This draft is intended for consultation purposes only.

Guidance for Outcome 2.5: Incident management	35
What is the outcome that needs to be achieved?	35
Why is this outcome important?	35
How could Outcome 2.5 be achieved in practice?	36
What are the key resources that can be referred to?	40
Guidance for Outcome 2.6: Feedback and complaints management	41
What is the outcome that needs to be achieved?	41
Why is this outcome important?	41
How could Outcome 2.6 be achieved in practice?	42
What are the key resources that can be referred to?	46
Guidance for Outcome 2.7: Information management	47
What is the outcome that needs to be achieved?	47
Why is this outcome important?	47
How could Outcome 2.7 be achieved in practice?	48
What are the key resources that can be referred to?	53
Guidance for Outcome 2.8: Workforce planning	54
What is the outcome that needs to be achieved?	54
Why is this outcome important?	54
How can Outcome 2.8 be achieved in practice?	55
What are the key resources that can be referred to?	61
Guidance for Outcome 2.9: Human resource management	62
What is the outcome that needs to be achieved?	62
Why is this outcome important?	62
How can Outcome 2.9 be achieved in practice?	63
What are the key resources that can be referred to?	69
Guidance for Outcome 2.10: Emergency and disaster management	70
What is the outcome that needs to be achieved?	70
Why is this outcome important?	70
How can Outcome 2.10 be achieved in practice?	71
What are the key resources that can be referred to?	76

Please note the draft strengthened Quality Standards in this document are not yet in operation. This draft is intended for consultation purposes only.

Purpose of the guidance

The Aged Care Quality and Safety Commission is committed to supporting the aged care sector to be ready for the implementation of the [strengthened Aged Care Quality Standards](#).

This draft guidance material is intended to support providers to comply with the strengthened Quality Standards. It also aims to promote best practice in service provision.

Aged care services vary in size and structure and have different ways of meeting the Standards. The draft guidance shows how providers can demonstrate they meet each Standard outcome.

This material is not a prescriptive guide. When we assess provider conformance against the Aged Care Quality Standards we won't expect that every provider will necessarily be taking each of the described actions. The actions you take to deliver high quality safe care will depend on the circumstances of your service and the needs of the people in your care. The material in this document can be used as a guide to achieving quality care outcomes in your organisation.

Consultation

We are consulting on the draft guidance materials for providers that deliver government-funded aged care services. Your insights will help to make our guidance materials:

- fit for purpose across service types
- practical and easy to understand
- useful tools for continuous improvement

We invite you to consider the below questions when reading through this document:

- Have you read and understood the draft Guidance material for the strengthened Quality Standard?
- To what extent do you feel the draft Guidance is fit-for-purpose for the different service types you deliver?
- To what extent do you feel the draft Guidance easy to understand and interpret?
- Is the level of detail in the Guidance right for each Outcome or Action? Is there content missing in relation to any Outcome or Action? Please specify the Outcome and Action and tell us what you would like changed.

You can provide your feedback by [filling in this feedback form](#) or using the QR code on this page before midday (AEST) on 19 May 2024.



Questionnaire

<https://survey.websurveycreator.com/s/ConsultationStrengthenedQualityStandardsMaterial>

Structure of this document

The guidance material is intended to help support delivery of person centred quality care and outcomes. It presents the intent and outcomes of the strengthened Standard including key concepts.

The tables on the following pages outline how you can achieve these outcomes in practice, depending on your role within an organisation.

To help users easily find information that applies to their service role, there are separate tables for:

- Governing body
- Provider organisation
- Worker (when applicable)

Different colour bars at the top of the tables indicate who in your organisation the information is targeted for.

Each of the tables include suggested actions and activities that can help achieve the outcomes of the strengthened standards and support continuous improvement.

We are also developing examples and other key resources that can be used as a further guide to ensure best practice in person-centred care. These will be made available at a later stage.

Guidance on Standard 2: The Organisation

What is the intent?

The intent of Standard 2 is to set out the expectations of the governing body to meet the requirements of the Quality Standards and deliver quality care and services.

The governing body sets the strategic priorities for the organisation and promotes a culture of safety and quality. The governing body is also responsible for driving and monitoring improvements to care and services, informed by engagement with older people, family, carers and workers, and data and information on care quality.

A provider’s governance systems and workforce are critical to the delivery of safe, quality, effective and person-centred care for every older person, and continuous care and services improvement. Workers are empowered to do their jobs well.

What will older people say if you are achieving the outcomes of this standard?

“The organisation is well run. I can contribute to improvements to care and services. My provider and workers listen and respond to my feedback and concerns. I receive care and services from workers who are knowledgeable, competent, capable and caring.”



What are the key concepts?

The following key concepts are covered by Standard 2 The Organisation:

Outcome 2.1 Partnering with older people	Strategic planning*	Partnership	Continuous improvement	Diversity	
Outcome 2.2 Quality and safety culture	Continuous improvement	Strategic planning*	Quality of life	Enterprise risk*	
Outcome 2.3 Accountability and quality system	Accountabilities and responsibilities*	Contemporary, evidence-based practice	Monitoring organisational performance*	Open disclosure	Governance
Outcome 2.4 Risk management	Enterprise risk*	Emergency and disaster management*	Contemporary, evidence-based practice		
Outcome 2.5 Incident management	Timely	Contemporary, evidence-based practice			
Outcome 2.6 Feedback and complaints management	Advocate*	Timely	Continuous improvement		
Outcome 2.7 Information management	Informed consent	Privacy*	Contemporary, evidence-based practice		
Outcome 2.8 Workforce planning	Enterprise risk*	Psychological safety*	Strategic planning*		
Outcome 2.9 Human resource management	Competency- based training*	Monitoring and review of worker performance*			
Outcome 2.10 Emergency and disaster management	Enterprise risk*	Partnership			

* A full list of key terms and definitions for the strengthened Quality Standards can be found in the [Glossary of Terms and Definitions](#).

Guidance for Outcome 2.1: Partnering with older people

What is the Outcome that needs to be achieved?

Meaningful and active partnerships with older people inform organisational priorities and continuous improvement.

Why is this Outcome important?

Outcome 2.1 explains how your activities can be better guided by the insights and point of view of older people.

The following key concepts have been strengthened:

- Partnering directly with older people.
- Supporting older people to take part in partnerships.
- Partnering with older people about governance.
- Understanding the diversity of older people who use services, including those at higher risk of harm. You can use this information to develop tailored information for older people.
- Partnering with older people who are diverse. This needs to include Aboriginal and Torres Strait Islander older people.

How can you achieve Outcome 2.1 in practice?

Governing body	
Actions	Associated activities
<p>2.1.1 The governing body partners with older people to set priorities and strategic directions for the way care and services are provided.</p> <p>2.1.2 The provider supports older people to participate in partnerships and partners with older people:</p> <p>a) who reflect the diversity of those who use their services</p> <p>b) who identify as Aboriginal and Torres Strait Islander to ensure care and services are accessible to, and culturally safe for, Aboriginal and Torres Strait Islander peoples.</p> <p>2.1.3 The provider partners with older people in the design, delivery, evaluation and improvement of quality care and services.</p>	<p>Partner with older people to set priorities and strategic directions for the provider organisation.</p> <p>Partnership with older people can involve:</p> <ul style="list-style-type: none"> • Forums. • Meetings. • Feedback sessions. • Surveys. • Information analysis and/or research about the diverse perspectives of older people, including: <ul style="list-style-type: none"> – Any older people who use, or could use, the service. – Aboriginal and Torres Strait Islander older people. – Culturally and linguistically diverse older people. – Older people with dementia and their families or carers representing them. – Families and consumer panels. <p>The Commission expects you to:</p> <ul style="list-style-type: none"> • Communicate outcomes from governing body meetings to older people (Outcome 3.3). • Provide an opportunity for people receiving aged care to establish a Consumer Advisory Body. This lets them provide feedback about the quality and safety of care provided. When the Consumer Advisory Body is established, the Commission expects that: <ul style="list-style-type: none"> – All feedback from the Consumer Advisory Body will be considered when making decisions. – The Consumer Advisory Body will be advised in writing how the governing body considered this feedback. <p>More information about Consumer Advisory Body requirements can be found on our website.</p> <p>The Commission expects that the provider organisation’s activities are used to inform the way care and services are provided. In particular, the governing body needs to consider views of older people to develop a strategic plan for the provider organisation (Outcome 2.2).</p> <p><i>Continued on the next page</i></p>

Governing body (continued)	
Actions	Associated activities
	<p>Monitor the provider organisation's performance in partnering with older people. This is to support the governance, design, evaluation, and improvement of quality care and services.</p> <p>The governing body:</p> <ul style="list-style-type: none">• Is accountable for the organisation's delivery of quality care and services (Outcome 2.2 and Outcome 2.3).• Needs to maintain oversight of all aspects of their operations by reviewing the organisation's reports on the:<ul style="list-style-type: none">– Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6)– The quality of care and services delivered by workers (i.e. performance assessments).• Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If the governing body find any issues or ways the provider can improve through these reviews, the governing body needs to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none">• Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers.• Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation's performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.1.1 The governing body partners with older people to set priorities and strategic directions for the way care and services are provided.</p> <p>2.1.2 The provider supports older people to participate in partnerships and partners with older people:</p> <p>a) who reflect the diversity of those who use their services</p> <p>b) who identify as Aboriginal and Torres Strait Islander to ensure care and services are accessible to, and culturally safe for, Aboriginal and Torres Strait Islander peoples.</p> <p>2.1.3 The provider partners with older people in the design, delivery, evaluation and improvement of quality care and services.</p>	<p>Partner with older people to support the governance, design, evaluation, and improvement of quality care and services.</p> <p>The Commission expects you to build on activities performed by the governing body. This gives you a better understanding of the needs and preferences of:</p> <ul style="list-style-type: none"> • Any older people who use, or can use the service. • Aboriginal and Torres Strait Islander older people. • Culturally and linguistically diverse older people. • Older people with dementia. • Families and consumer panels. <p>This information needs to be used to inform the design and improvement of the organisation’s quality management system (Outcome 2.3). Use the views of older people as a guide to understand:</p> <ul style="list-style-type: none"> • The way information is tailored. This makes sure that services and the way information is shared are in line with the older people’s needs and preferences (Outcome 3.3). • Potential improvements to the quality and safety culture and quality management system (Outcome 2.2. and Outcome 2.3). • The design of care and services (Standard 1, Standard 3, Standard 4, Standard 5, Standard 6 and Standard 7). This is to make sure these: <ul style="list-style-type: none"> – Are older person-centric – Are accessible to, appropriate for, and culturally safe for all Aboriginal and Torres Strait Islander peoples. – Accommodate all applicable cultural needs – Meet the needs of older people living with dementia, disabilities and living with mental illness. <p>Support older people to take part in partnerships.</p> <p>The Commission expects that strategies are in place to make sure your workers partner with older people. For example, strategies or supports need to be in place to:</p> <ul style="list-style-type: none"> • Make sure older people understand how they can take part in partnerships. • Encourage older people to contribute their ideas, where they: <ul style="list-style-type: none"> – Are less inclined to speak up. – Live with mental illness. – Live with disabilities. • Give older people different mechanisms to contribute their suggestions in a way they feel comfortable with. These can be: <ul style="list-style-type: none"> – One-to-one chats. – Anonymous feedback boxes. – Other suggestions that suit them. <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>Monitor processes for partnering with older people.</p> <p>To understand if you are managing partnerships with older people appropriately, you need to review:</p> <ul style="list-style-type: none">• Feedback from older people (Outcome 2.6):<ul style="list-style-type: none">– About what matters to them.– Whether the process works for them and is having an impact on the improvement of quality care and services.• Older people’s care and service plans as well as progress notes (Outcome 3.1).• Complaints (Outcome 2.6).• Incident information (Outcome 2.5). <p>You also need to assess whether workers are following your quality management system (Outcome 2.9). You can do this through performance assessments and system checks.</p> <p>If you find any issues or ways you can improve through your reviews and assessments, you need to address them. If things go wrong, you need to:</p> <ul style="list-style-type: none">• Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers.• Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>You will know things are going well if older people say that they are confident that they feel:</p> <ul style="list-style-type: none">• safe to speak up.• feel heard. <p>This information supports the governance, design, evaluation, and improvement of quality care and services. You can find more information on monitoring the quality management system in the guidance material for Standard 2 (Outcome 2.3).</p>

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.1:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.2: Quality and safety culture

What is the Outcome that needs to be achieved?

The governing body leads a culture of safety, inclusion and quality that focuses on continuous improvement, embraces diversity and prioritises the safety, health and wellbeing of older people and the workforce.

Why is this Outcome important?

Outcome 2.2 explains the governing body's role in creating and maintaining a culture of quality, safety and continuous improvement that achieves the Outcomes of the strengthened Standards.

The following key concepts have been strengthened:

- Strategic and business planning.
- Addressing the needs of First Nations older people.
- Addressing the needs of older people living with dementia.

How can you achieve Outcome 2.2 in practice?

Governing body	
Actions	Associated activities
<p>2.2.1 The governing body leads a positive culture of quality care and services and continuous improvement and demonstrates that this culture exists within the organisation.</p> <p>2.2.2 In strategic and business planning, the governing body:</p> <ul style="list-style-type: none"> a) prioritises the safety, health and wellbeing of older people and workers b) ensures that care and services are accessible to, and appropriate for, people with specific needs and diverse backgrounds, Aboriginal and Torres Strait Islander peoples and people living with dementia c) actively engages and consults with workers d) considers legislative requirements, organisational and operational risks, workforce needs and the wider organisational environment. 	<p>Perform strategic and business planning.</p> <p>The governing body has ultimate accountability and responsibility to:</p> <ul style="list-style-type: none"> • Lead a culture of quality and safety. • Lead in diversity and inclusion. • Achieve all Outcomes across the Standards. <p>The Commission expects that the Outcomes from partnering with older people are used to understand the way care and services are provided (Outcome 2.1).</p> <p>The governing body needs to use the diverse views of older people to develop a strategic plan for the provider organisation that explains the:</p> <ul style="list-style-type: none"> • Key priorities for the provider organisation, including specific initiatives or goals that needs to be achieved to: <ul style="list-style-type: none"> – Identify and meet legislative requirements. – Prioritise the rights, safety, health and quality of life of older people. – Manage organisational and operational risks (Outcome 2.4). – Manage workforce needs and the wider organisational environment based on the care and services (Outcome 4.1a, Outcome 4.1b and Outcome 2.8). – Make sure that care and services are accessible to, and appropriate for, people with specific and diverse needs (e.g. Aboriginal and Torres Strait Islander peoples and people living with dementia) (Outcome 1.1). – Make sure that incident management and information management systems are put in place and used to support quality and safety of care and services (Outcome 2.5 and Outcome 2.7). • Strategic directions, including how goals can be successfully achieved. <p>Strategic and business planning needs to consider the context of the organisation and legal requirements.</p> <p>Set expectations across all governing and leadership representatives about their role in promoting a positive culture of safety, inclusion and continuous improvement.</p> <p>Expectations should flow through the provider organisation roles. This can be communicated through:</p> <ul style="list-style-type: none"> • Training. • Regular conversations. • Role descriptions outlining each role’s contribution in leading a positive quality and safety culture. <p><i>Continued on the next page</i></p>

Governing body (continued)	
Actions	Associated activities
	<p>This can include requesting the provider to establish a Quality Care Advisory Board (QCAB). You can find more information about QCABs from this factsheet.</p> <p>The governing body is expected to outline behaviours that promote a positive quality and safety culture. This can result in older people receiving quality care and services centred around meeting their needs.</p> <p>The provider organisation’s hiring practices (Outcome 2.8), and rostering and training system (Outcome 2.9), are expected to be used to make sure the workforce displays these behaviours consistently.</p> <p>Monitor the provider organisation’s performance in promoting a positive culture of quality care and services and continuous improvement.</p> <p>The governing body:</p> <ul style="list-style-type: none">• Is accountable for the organisation’s delivery of quality care and services (Outcome 2.2 and Outcome 2.3).• Needs to maintain oversight of all aspects of their operations by reviewing the organisation’s reports on the:<ul style="list-style-type: none">– Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6). This includes feedback from clinical and consumer advisory bodies.– Management of risks, complaints and incidents (Serious Incident Response Scheme or SIRS resources, Outcome 2.5 and Outcome 2.6).– Quality of care and services delivered by workers (i.e. performance assessments, Outcome 2.9).• Leads a culture of safety, inclusion and quality care. This is done by monitoring and investigating priority areas found in the reports listed above. If the governing body finds any issues or ways the provider can improve through these reviews, the governing body needs to address them. This needs to include providing feedback and support to the provider to be able to address concerns and improve the quality of care. <p>If incidents occur or risks are identified, the governing body needs to be open about them and share this information with older people, their family and carers (Outcome 2.3).</p> <p>When monitoring the provider organisation’s performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.2.1 The governing body leads a positive culture of quality care and services and continuous improvement and demonstrates that this culture exists within the organisation.</p> <p>2.2.2 In strategic and business planning, the governing body:</p> <ul style="list-style-type: none"> a) prioritises the safety, health and wellbeing of older people and workers b) ensures that care and services are accessible to, and appropriate for, people with specific needs and diverse backgrounds, Aboriginal and Torres Strait Islander peoples and people living with dementia c) actively engages and consults with workers d) considers legislative requirements, organisational and operational risks, workforce needs and the wider organisational environment. 	<p>Escalate any concerns about the organisation’s culture of quality care and services.</p> <p>As outlined in the guidance for Outcome 2.1, you are expected to report quality performance information to the governing body on a regular basis. These reports need to outline the results from performance monitoring. This includes any issues or concerns about the culture of quality care and services.</p> <p>You need to report any significant matters or situations (SIRS Reference) where older people have been put at risk of harm. For example, situations such as negligence need to be:</p> <ul style="list-style-type: none"> • Communicated to the relevant consumer advisory bodies. More details about consumer advisory bodies can be found in this factsheet. • Reported to the governing body. <p>These matters need to be resolved in a timely manner by using the processes in your:</p> <ul style="list-style-type: none"> • Incident management system (Outcome 2.5) • Risk management system (Outcome 2.4) • Feedback and complaints management system (Outcome 2.6). <p>When reporting quality performance information (Outcome 2.3), make sure data about the organisation’s quality and safety culture is included.</p> <p>The Commission expects that information about your quality and safety culture is gathered and reported (Outcome 2.3). This needs to be informed by:</p> <ul style="list-style-type: none"> • Feedback from older people (e.g. consumer advisory bodies), their families, carers and their representatives and workers. • Older people’s care and services plans and progress notes. • Results from evaluation of workers’ performance in compliance with the quality management system (Outcome 2.7). <p>This information is expected to be reviewed and analysed with the intent of driving continuous improvement.</p>

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.2:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.3: Accountability and quality systems

What is the Outcome that needs to be achieved?

The governing body is accountable for the delivery of quality care and services and maintains oversight of all aspects of the organisation's operations.

The provider's quality system enables and drives continuous improvement of the care and services.

Current policies and procedures guide the way workers undertake their roles.

Why is this Outcome important?

Outcome 2.3 explains the overarching organisational systems and processes that are needed to make sure the Outcomes of the strengthened Standards are achieved by providers, with a focus on governing body accountabilities and responsibilities, and continuous improvement.

The following key concepts have been strengthened:

- Developing and implementing a quality system.
- Making investments to improve outcomes for older people.
- Reporting on the performance of the quality system.

How can you achieve Outcome 2.3 in practice?

Governing body	
Actions	Associated activities
<p>2.3.1 The provider implements a quality system that:</p> <ul style="list-style-type: none"> a) Supports quality care and services for all older people b) Sets out accountabilities and responsibilities for supporting quality care and services, specific to different roles c) Sets strategic and operational expectations for the delivery of quality care and services d) Enables the governing body to monitor the organisation's performance in delivering quality care and services, informed by: <ul style="list-style-type: none"> i) Feedback from family, carers and workers ii) Analysis of risks, complaints and incidents (and their underlying causes) iii) Quality Indicator data iv) Contemporary, evidence-based practice e) Supports the provider to meet strategic and operational expectations and identify opportunities for improvement. <p>2.3.2 The governing body monitors investment in priority areas to deliver quality care and services.</p> <p>2.3.3 The provider regularly reviews and improves the effectiveness of the quality system.</p> <p>2.3.4 The provider regularly reports on its quality system and performance to older people, family, carers and workers.</p> <p>2.3.5 The provider practices open disclosure and communicates with older people, family, carers and workers when things go wrong.</p> <p>2.3.6 The provider maintains and implements policies and procedures that are current, regularly reviewed, informed by contemporary, evidence-based practice, and are understood and accessible by workers and relevant parties.</p>	<p>Make sure the provider organisation develops and implements a quality management system that is centred around the older people's needs.</p> <p>The provider organisation's quality management system needs to:</p> <ul style="list-style-type: none"> • Include a set of documented procedures that outline step-by-step processes for achieving the Outcomes of the strengthened Standards. • Outline clear roles and responsibilities • Be suitable and relevant to the organisation's operations. <p>It is the governing body's role to make sure this quality management system has been developed and maintained. It must support a culture of open disclosure and continuous improvement. Provider organisations can get this information through quality reports and audits, and needs to:</p> <ul style="list-style-type: none"> • Ensure organisational governance frameworks are monitored to make sure safe and quality care and services are provided to older people. • Set organisational performance monitoring processes, including: <ul style="list-style-type: none"> – Clear performance expectations (such as key performance indicators) – Reporting processes to help the governing body make informed decisions and meet its responsibilities. • Review and endorse key components of the quality management system (for example, procedures relating to delivery of care and services). • Monitor your performance in delivering quality care and services. This is expected to involve examination of reports prepared by the provider organisation, that relate to the quality and safety of care and services. There needs to be particular focus on the review of: <ul style="list-style-type: none"> – Feedback from older people, family, carers, and workers – Risks, complaints and incidents (and their underlying causes) – Quality Indicator data – Contemporary, evidence-based practice. <p>This information is expected to be used by the governing body to understand the quality and safety culture (Outcome 2.2) and monitor investments in priority areas. This makes sure that investments continue to promote quality care and services for older people. If issues or improvement opportunities are identified, the governing body needs to make sure these are resolved and support the provider organisation to address matters in a timely manner.</p> <p>For example:</p> <ul style="list-style-type: none"> • Feedback from older people needs to be used to understand if the way workers deliver care and services is in line with their needs, goals, and preferences. If feedback suggests workers do not consistently provide person-centred care, the governing body needs to support the provider organisation to investigate why and address this holistically (e.g. through improving ways of working, delivering worker training). <p><i>Continued on the next page</i></p>

Governing body (continued)	
Actions	Associated activities
	<ul style="list-style-type: none"> • Feedback from workers needs to be used to understand if care and services are well resourced. If feedback suggests that care and services have not been appropriately resourced, the governing body needs to support the provider organisation to review and address its workforce gaps. • Examination of contemporary, evidence-based practice needs to be used to establish if the provider organisation’s quality management system supports workers to deliver the best available form of care. If more contemporary practice is available, the governing body needs to support the provider organisation to roll this out in a way that is relevant to the context and ability of the organisation, leveraging change management principles where relevant. • Analysis of risks, complaints and incidents needs to be used to understand if there are any specific aspects of care and services that need to be improved. For example, if there is a pattern of complaints, the root cause of the issue needs to be investigated and addressed (Outcome 2.6). <p>Review the provider organisation’s report on quality performance information on practicing open disclosure when things go wrong.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation’s delivery of quality care and services (Outcome 2.2) • Needs to maintain oversight of all aspects of their operations by reviewing the organisation’s reports on the: <ul style="list-style-type: none"> – Report on quality performance information on practicing open disclosure. – Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6) – The quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If you find any issues or ways the provider can improve through these reviews, you need to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>When monitoring the provider organisation’s performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.3.1 The provider implements a quality system that:</p> <ul style="list-style-type: none"> a) Supports quality care and services for all older people b) Sets out accountabilities and responsibilities for supporting quality care and services, specific to different roles c) Sets strategic and operational expectations for the delivery of quality care and services d) Enables the governing body to monitor the organisation's performance in delivering quality care and services, informed by: <ul style="list-style-type: none"> i) Feedback from family, carers and workers ii) Analysis of risks, complaints and incidents (and their underlying causes) iii) Quality Indicator data iv) Contemporary, evidence-based practice e) Supports the provider to meet strategic and operational expectations and identify opportunities for improvement. <p>2.3.2 The governing body monitors investment in priority areas to deliver quality care and services.</p> <p>2.3.3 The provider regularly reviews and improves the effectiveness of the quality system.</p> <p>2.3.4 The provider regularly reports on its quality system and performance to older people, family, carers and workers.</p> <p>2.3.5 The provider practices open disclosure and communicates with older people, family, carers and workers when things go wrong.</p> <p>2.3.6 The provider maintains and implements policies and procedures that are current, regularly reviewed, informed by contemporary, evidence-based practice, and are understood and accessible by workers and relevant parties.</p>	<p>Develop and implement a quality management system for delivering safe and quality care and services that is centred around the older people's needs.</p> <p>This is expected to outline:</p> <ul style="list-style-type: none"> • Who is accountable and responsible for specific tasks. • 'What good looks like' in the organisation's context and scope of service. • How performance will be monitored in line with expectations set by the governing body. • How quality will be monitored to make sure outcomes of the strengthened Standards are achieved. • How the results of monitoring activities will be reported in a way that supports open disclosure. <p>For example, where relevant, your quality management system is expected to:</p> <ul style="list-style-type: none"> • Make sure quality and safe delivery of care and services are provided to older people, in line with the overall organisational governance and quality system framework. • Recognise, prevent and respond to violence, abuse, racism, neglect, exploitation and discrimination (Outcome 1.2). • Make sure information given to older people about their care and services is current, accurate, timely, easy to understand, and enables the older person to make informed decisions (Outcome 1.3). • Make sure that older people provide informed consent where this is needed for a treatment, procedure, intervention or dignity of risk. (Outcome 1.3). • Make sure prices, fees and payments are accurate and transparent for older people (Outcome 1.4). • Make sure older people are supported to take part in partnership activities (Outcome 2.1). • Manage organisational risk (Outcome 2.4). • Record, investigate, respond to and manage incidents and near misses that occur in relation to the delivery of care and services (Outcome 2.5). • Receive, record, respond to, and report on feedback and complaints, with a focus on continuous improvement (Outcome 2.6). • Securely manage records (Outcome 2.7). • Implement workforce planning strategies (Outcome 2.8). • Make sure workers have the necessary skills, qualifications, and competencies to perform their role (Outcome 2.9). • Make sure that care and services assessment and planning processes are working (Outcome 3.1 and Outcome 5.4). • Care for older people living with dementia (Outcome 3.2). <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none"> • Communicate structured information about older people and their care and services (Outcome 3.3). • Make sure the coordination of care and services processes are working (Outcome 3.4). • Make sure that older people receive care and services in a physical environment that is safe and supportive of their needs (Outcome 4.1). • Prevent and control infection (Outcome 4.2 and Outcome 5.2). • Support the appropriate use of personal protective equipment (Outcome 4.2). • Implement the clinical governance framework to drive safety and quality of care and services (Outcome 5.1). • Integrate clinical information into nationally agreed electronic health and aged care digital records (Outcome 5.1). • Support the safe and quality use of medicines (Outcome 5.3). • Monitor and continuously improve food service (Outcome 6.1). • Implement services and supports for daily living that optimise the quality of life of older people (Outcome 7.1). • Transition older people to and from hospital, other care services and stays in the community (Outcome 7.2 and Outcome 3.4). • Benchmark with National Quality Indicators. <p>Develop guides, training, and/or strategies to help workers to use the quality management system.</p> <p>These are expected to be suitable and developed to help workers. Attention should be paid to make sure workers understand their role in application and how to promote tailored care for each older person at all times.</p> <p>Refer to Outcome 2.8 and Outcome 2.9 for further detail about workforce planning and human resource management.</p> <p>Improve the quality management system on an ongoing basis.</p> <p>It is expected that the quality management system will regularly be reviewed for effectiveness. This can be done through:</p> <ul style="list-style-type: none"> • Examination of: <ul style="list-style-type: none"> – Feedback from older people, family, carers and workers. – Analysis of risks, complaints and incidents (and their underlying causes). – Quality Indicator data. – Contemporary, evidence-based practice. • Review of older people’s care and services (e.g. care and services plans, progress notes) (Outcome 3.1). • Assessment of worker performance and compliance with the quality management system (Outcome 2.9). • Partnership with older people. For example, discussions with your consumer advisory bodies or other advisory groups (Outcome 2.1). <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>Policies and procedures need to be:</p> <ul style="list-style-type: none">• Current.• Regularly reviewed.• Informed by contemporary, evidence-based practices (Outcome 2.7). <p>To achieve this, the above data needs to be compared and analysed to:</p> <ul style="list-style-type: none">• Identify any systemic issues requiring resolution. To help with this, it is useful to compare actual performance against ‘what good looks like’. If actual performance falls short of planning targets, additional investment may need to be requested from the governing body.• Identify any non-systemic issues requiring resolution (e.g. a particular worker or older person who needs more targeted support). <p>Report quality performance information to the governing body, workers, older people, their families, and carers, practicing open disclosure when things go wrong.</p> <p>It is expected that reports are prepared and distributed based on the needs of each stakeholder group. These must be in line with the governing body’s expectations and directions.</p> <p>Reports are expected to clearly outline the results from performance monitoring, including where:</p> <ul style="list-style-type: none">• Things that have gone well.• Things have not gone to plan.• Changes will be made to make sure that similar situations do not occur again. <p>If you identify any issues about your quality and safety culture, you need to report this so that issues are escalated and addressed promptly (Outcome 2.2). You need to report this information to the governing body and the Quality Advisory Committee if established.</p>

Worker	
Actions	Associated activities
<p>2.3.1 The provider implements a quality system that:</p> <ul style="list-style-type: none"> a) Supports quality care and services for all older people b) Sets out accountabilities and responsibilities for supporting quality care and services, specific to different roles c) Sets strategic and operational expectations for the delivery of quality care and services d) Enables the governing body to monitor the organisation's performance in delivering quality care and services, informed by: <ul style="list-style-type: none"> i) Feedback from family, carers and workers ii) Analysis of risks, complaints and incidents (and their underlying causes) iii) Quality Indicator data iv) Contemporary, evidence-based practice e) Supports the provider to meet strategic and operational expectations and identify opportunities for improvement. <p>2.3.2 The governing body monitors investment in priority areas to deliver quality care and services.</p> <p>2.3.3 The provider regularly reviews and improves the effectiveness of the quality system.</p> <p>2.3.4 The provider regularly reports on its quality system and performance to older people, family, carers and workers.</p> <p>2.3.5 The provider practices open disclosure and communicates with older people, family, carers and workers when things go wrong.</p> <p>2.3.6 The provider maintains and implements policies and procedures that are current, regularly reviewed, informed by contemporary, evidence-based practice, and are understood and accessible by workers and relevant parties.</p>	<p>Apply the organisation's quality management system for delivering safe and quality care and services, in a way that is centred around the older people's needs.</p> <p>Based on their specific role, workers need to:</p> <ul style="list-style-type: none"> • Make sure quality and safe delivery of care and services are provided to older people, in line with the overall organisational governance and quality system framework. • Prevent, recognise, and respond to violence, abuse, racism, neglect, exploitation and discrimination (Outcome 1.2). • Make sure information given to older people about their care and services is current, accurate, timely, easy to understand, and enables the older person to make informed decisions (Outcome 1.3). • Make sure that older people provide informed consent where this is needed for a treatment, procedure, intervention or dignity of risk. (Outcome 1.3). • Make sure prices, fees and payments are accurate and transparent for older people (Outcome 1.4). • Make sure older people are supported to take part in partnership activities (Outcome 2.1). • Manage organisational risk (Outcome 2.4). • Record, investigate, respond to and manage incidents and near misses that occur in relation to the delivery of care and services (Outcome 2.5). • Receive, record, respond to, and report on feedback and complaints, with a focus on continuous improvement (Outcome 2.6). • Securely manage records (Outcome 2.7). • Implement workforce planning strategies (Outcome 2.8). • Make sure they have the necessary skills, qualifications, and competencies to perform their role (Outcome 2.9). • Make sure that care and services assessment and planning processes are implemented and effective (Outcome 3.1 and Outcome 5.4). • Meet the care needs of older people living with dementia (Outcome 3.2). • Communicate structured information about older people and their care and services (Outcome 3.3). • Make sure coordination of care and services processes are implemented and effective (Outcome 3.4). • Make sure that older people receive care and services in a physical environment that is safe and supportive of their needs (Outcome 4.1). • Prevent and control infection (Outcome 4.2 and Outcome 5.2). • Support the appropriate use of personal protective equipment (Outcome 4.2). • Implement the clinical governance framework to drive safety and quality of care and services (Outcome 5.1). <p><i>Continued on the next page</i></p>

Worker (continued)	
Actions	Associated activities
	<ul style="list-style-type: none">• Integrate clinical information into nationally agreed electronic health and aged care digital records (Outcome 5.1).• Support the safe and quality use of medicines (Outcome 5.3).• Monitor and continuously improve food service (Outcome 6.1).• Implement services and supports for daily living that optimise the quality of life of older people (Outcome 7.1).• Transition older people to and from hospital, other care services and stays in the community (Outcome 7.2 and Outcome 3.4).• Practice open disclosure. <p>Provide feedback about the effectiveness of the organisation's quality management system.</p> <p>Workers have a unique opportunity and responsibility to make sure the organisation's quality management system is effective and meets the needs of the older people in their care. As such, they need to escalate concerns or issues about the system and their ability to use it.</p> <p>If workers are not confident that any concerns or issues they raise are being dealt with properly, they are encouraged to make a complaint with the Commission (Making a complaint Aged Care Quality and Safety Commission).</p>

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.3:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.4: Risk management

What is the Outcome that needs to be achieved?

The provider uses a risk management system to identify, manage and continuously review risks to older people, workers and the provider's operations.

Why is this Outcome important?

Outcome 2.4 explains how you as a provider, need to manage risk.

The following key concepts have been strengthened:

- Use of systems for managing risk. These need to include broad risk mitigation strategies and actions.
- Analysis of data to understand risk.
- Engaging with older people and workers to inform the quality system.

How can you achieve Outcome 2.4 in practice?

Governing body	
Actions	Associated activities
<p>2.4.1 The provider implements a risk management system to identify, assess, document, manage and regularly review risks to older people, workers, and the organisation.</p> <p>2.4.2 The provider puts strategies in place and undertakes actions to prevent, control, minimise or eliminate identified risks.</p> <p>2.4.3 The provider collects and analyses data and engages with older people and workers to inform risk assessment and management. This feeds into the provider's quality system to improve care and services.</p> <p>2.4.4 The provider regularly reviews and improves the effectiveness of the risk management system.</p>	<p>Monitor the provider organisation's performance in implementing their risk management system.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation's delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation's reports on the: <ul style="list-style-type: none"> – Management of risks. – Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6). – The quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality care. This is done by monitoring and investigating priority areas identified in the reports listed above. If the governing body finds any issues or ways the provider can improve through these reviews, the governing body need to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation's performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.4.1 The provider implements a risk management system to identify, assess, document, manage and regularly review risks to older people, workers, and the organisation.</p> <p>2.4.2 The provider puts strategies in place and undertakes actions to prevent, control, minimise or eliminate identified risks.</p> <p>2.4.3 The provider collects and analyses data and engages with older people and workers to inform risk assessment and management. This feeds into the provider's quality system to improve care and services.</p> <p>2.4.4 The provider regularly reviews and improves the effectiveness of the risk management system.</p>	<p>Develop and implement a risk management system.</p> <p>At a minimum, the Commission expects your risk management system to outline:</p> <ul style="list-style-type: none"> • Clear and documented roles and responsibilities for managing risks to: <ul style="list-style-type: none"> – Older people. – Workers. – Your operations. – Business continuity and emerging infectious diseases. • How risks are: <ul style="list-style-type: none"> – Identified. – Assessed. – Documented. – Managed. – Reviewed. • The strategies to manage the risks identified, including how they are: <ul style="list-style-type: none"> – Prevented. – Controlled. – Minimised. – Eliminated. <p>The following are key elements of a risk management system to make sure it is effective. These include:</p> <ul style="list-style-type: none"> • Finding and escalating risks. Risks relevant to all aspects of the organisation's operations need to be identified, with escalation of any new risks occurring in a timely manner. This needs to be informed by broader performance monitoring (Outcome 2.3), in particular, review of feedback received and analysis of the organisation's business data such as incidents and near misses. The risk management system needs to encourage reporting and escalation, to make sure key risks can be dealt with in a timely manner. This may need escalating certain risks to the governing body for attention and/or resolution. Risks identified through this process are expected to include any risks that have the potential to impact the organisation and its people, including but not limited to, risks to safety, older people, finances and reputation. • Assessing risk. Once risks have been identified, a 'risk assessment' need to be performed to establish the potential of a negative outcome happening. A risk assessment needs to be documented and should be used to understand whether an activity can be performed or if further actions are needed to minimise the risk. Assessment of risk can also be used to prioritise actions. In specific situations, more targeted or detailed risk assessments may be needed (for example, an on-site risk assessment may be needed for older people new to home care services, to make sure workers are not exposed to risks in the home environment (Outcome 4.1a). <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none">Managing risk. Allocation of actions and resources to minimise risk. Strategies are needed to eliminate risk whenever possible and if not, actions to control and minimise risk, in addition to preventing risks from reoccurring, particularly if ‘high’ risks are identified. Actions could relate to strategic business priorities (e.g. workforce planning activities (Outcome 2.7) or specific outcomes of the strengthened Standards (for example, use of personal protective equipment to manage an emerging infection) (Outcome 5.4, Outcome 5.6 and Outcome 4.2).Reviewing risk. Data needs to be gathered and analysed to make sure risk continues to be prevented or minimised as much as possible. This is expected to occur at an organisation level, with any systemic issues identified and addressed with reference to Outcome 2.3.Sharing information about the risks you found and how they have been managed. This means, sharing information to relevant people about the actions taken and outcome of your assessment. You need the informed consent of older people when the information is about an older person (Outcome 2.7). <p>At a minimum, you need to have one enterprise-wide risk register. In addition, organisations with multiple sites or locations may need to have a risk register or risk assessment for each separate service. You may need to complete a separate risk assessment for high-risk activities.</p> <p>If the service environment includes home care, you can refer to “Quality and Safety in home services – 5 Key Areas of Risk” for additional information.</p> <p>Develop guides, training, and strategies to help workers manage risk.</p> <p>You need to make sure your risk management procedure is suitable and developed to help workers. Make sure workers understand their role in the risk management procedure and how to follow it.</p> <p>Monitor that the risk management system is implemented consistently and well.</p> <p>To understand if you are managing risks appropriately, you need to review:</p> <ul style="list-style-type: none">Feedback and complaints (Outcome 2.6).Older people’s care and service plans as well as progress notes (Outcome 3.1).Incident information (Outcome 2.5). <p>You also need to assess whether workers are following your risk management system. This can be monitored through performance assessments and system checks. (Outcome 2.9).</p> <p>If you find any issues or opportunities for improvement are identified through reviews and assessments, they need to be addressed. If things go wrong, you need to be open about it and share this information with older people, their family, and carers.</p> <p><i>Continued on the next page</i></p>

Draft: Standard 2 – The Organisation

Guidance material for the strengthened Aged Care Quality Standards for review and discussion

Provider organisation (continued)	
Actions	Associated activities
	<p>You will know things are going well if older people and workers say that they are confident that they feel safe.</p> <p>This information supports the governance, design, evaluation, and improvement of quality care and services. You can find more information on monitoring the quality management system in the guidance material for Outcome 2.3.</p>

DRAFT

Worker	
Actions	Associated activities
<p>2.4.1 The provider implements a risk management system to identify, assess, document, manage and regularly review risks to older people, workers, and the organisation.</p> <p>2.4.2 The provider puts strategies in place and undertakes actions to prevent, control, minimise or eliminate identified risks.</p> <p>2.4.3 The provider collects and analyses data and engages with older people and workers to inform risk assessment and management. This feeds into the provider’s quality system to improve care and services.</p> <p>2.4.4 The provider regularly reviews and improves the effectiveness of the risk management system.</p>	<p>Use the organisation’s risk management system.</p> <p>No matter what the worker’s role is, they need to escalate any concerns or risks about:</p> <ul style="list-style-type: none"> • Their safety as a result of delivery of care and services. • The safety of older people, their family, or carers, particularly in relation to care and services. • Situations or issues that have the potential to impact the ability of the organisation to operate. For example, situations which have the potential to create resourcing challenges, such as operation in regional areas. <p>Depending on the worker’s role and skills, they may need to support with:</p> <ul style="list-style-type: none"> • Identifying and escalating risks. Workers may need to help find, assess, manage and review risks in the organisation’s operations. This includes risks and the potential risk to older people, workers, and the organisation. For example, risk can relate to older people’s care, worker safety, or be financial or reputational. Workers may assess, manage and review: <ul style="list-style-type: none"> – The organisation’s performance monitoring results (Outcome 2.3). – Feedback, incidents and near misses (Outcome 2.6 and Outcome 2.5). • Risks found through this process. • Sharing information about risk. Workers need to make sure all older people, their families and carers understand risks that are relevant to them. This includes older people who choose to engage in positive risk taking to promote their autonomy and quality of life. Workers need to explain dignity of risk to the older person and make sure they understand. Workers need to ask for the older person’s informed consent and document it within their care and services plans (Outcome 2.7). • Assessing risk. Once risks have been found, workers need to do a ‘risk assessment’ to understand the potential of a negative outcome happening. Workers need to document a risk assessment and should use it to understand whether an activity can be performed or if further actions are needed to minimise the risk. Use the assessment of risk to prioritise actions. In specific situations, workers may need a more targeted or detailed risk assessments. For example, an on-site risk assessment may be needed for older people new to home care services. This is to make sure workers are not exposed to risks in the home environment (Outcome 4.1a). • Addressing actions to manage risk. Workers need to put in place strategies to minimise risks as much as possible. This is very important if workers find ‘high’ risks. The provider organisation’s management system will explain what is meant by the term ‘high risk’. If any high risks are identified, workers may need to support finding strategies. Strategies can relate to: <ul style="list-style-type: none"> – Strategic business priorities. For example, workforce planning activities. – Specific outcomes of the strengthened Standards. For example, the use of personal protective equipment to manage an outbreak (Outcome 2.7). • Reviewing risk. Workers may need to gather and analyse data to make sure risk is minimised as much as possible. This needs to occur at an organisational level, with any systemic issues found and addressed with reference to Outcome 2.3.

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.4:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.5: Incident Management

What is the Outcome that needs to be achieved?

The provider uses an incident management system to safeguard older people and acknowledge, respond to, effectively manage and learn from incidents.

Why is this Outcome important?

Outcome 2.5 explains how you as providers, need to manage and respond to incidents that occur.

The following key concepts have been strengthened:

- Supporting and encouraging older people to report incidents.
- Incident management responsibilities for workers.

DRAFT

How can you achieve Outcome 2.5 in practice?

Governing body	
Actions	Associated activities
<p>2.5.1 The provider implements an incident management system to record, investigate, respond to and manage incidents and near misses that occur in connection with the delivery of care and services and reduces or prevents incidents from recurring.</p> <p>2.5.2 The provider takes timely action to respond to and manage incidents.</p> <p>2.5.3 The provider supports older people, family and carers to report incidents and encourages their involvement in identifying ways to reduce incidents from occurring.</p> <p>2.5.4 The provider supports the workforce to prevent, recognise, respond to and report incidents.</p> <p>2.5.5 The provider collects and analyses incident data. Outcomes are reported to older people and workers and feed into the provider's quality system to improve the quality of care and services.</p> <p>2.5.6 The provider regularly reviews and improves the effectiveness of the incident management system.</p>	<p>Monitor the provider organisation's performance in implementing their incident management system.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation's delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation's reports on the: <ul style="list-style-type: none"> – Management of complaints, feedback and incidents (Outcome 2.6). – The quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If the governing body finds any issues or ways the provider can improve through these reviews, the governing body needs to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation's performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.5.1 The provider implements an incident management system to record, investigate, respond to and manage incidents and near misses that occur in connection with the delivery of care and services and reduces or prevents incidents from recurring.</p> <p>2.5.2 The provider takes timely action to respond to and manage incidents.</p> <p>2.5.3 The provider supports older people, family and carers to report incidents and encourages their involvement in identifying ways to reduce incidents from occurring.</p> <p>2.5.4 The provider supports the workforce to prevent, recognise, respond to and report incidents.</p> <p>2.5.5 The provider collects and analyses incident data. Outcomes are reported to older people and workers and feed into the provider's quality system to improve the quality of care and services.</p> <p>2.5.6 The provider regularly reviews and improves the effectiveness of the incident management system.</p>	<p>Develop and implement an incident management system.</p> <p>The Commission expects your incident management system to outline clear and documented roles and responsibilities. The roles and responsibilities are about how incidents need to be acknowledged, responded to, managed and learnt from.</p> <p>Key elements of an incident management system include:</p> <ul style="list-style-type: none"> • Categorisation of what constitutes an incident. You need to be clear about what an 'incident' or 'near miss' includes. The definition needs to be in relation to the organisation's scope of service and situations that have, or could, cause harm to a person. The categories need to follow the aged care Serious Incident Response Scheme (SIRS) and include harm or possible harm to: <ul style="list-style-type: none"> – An older person. – A member of their family. – A worker. – Another party providing care and services. <p>Incidents can be clinical and non-clinical. Incidents can also relate to worker safety.</p> <p>You need to have clear processes to respond to each type of incidents that can occur in relation to care and services you provide. You need to outline who must be involved and the timeframe when key activities need to happen. Key activities can be reporting, investigations and sharing of information.</p> <ul style="list-style-type: none"> • Reporting incidents. You need to have clear processes to record and report different type of incidents. You need to include: <ul style="list-style-type: none"> – Who reports incidents. – How to document an incident report. – What level of detail goes into an incident report. – How the incident report is submitted. – When an incident report needs to be submitted. • Steps to take following an incident. You need to be clear about who must be involved in determining any immediate actions to keep older people and workers safe following an incident. You need to make sure to review the care and services plan of an older person if an incident relates to that older person (Outcome 3.1 and Outcome 5.4). • Investigating the cause of an incident. You need to make sure incidents are investigated. This is to find and manage the underlying cause of an incident and prevent it from happening again. You need to be open about the outcome of the investigation and shared this information with the older person, their families and carers if the older person chooses to. <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none">• Trend analysis to find systemic issues and ways for you to improve. Do this as part of your broader performance monitoring activities (Outcome 2.3). For example, a systemic issue can be:<ul style="list-style-type: none">– Aspects of care which are not delivered well. These may indicate the need for additional worker training.– Older people regularly fall at a specific area of the service and the area needs to be re-designed to be safer.• Potential complaints following an incident or near miss. You need to integrate this with your feedback and complaints management system (Outcome 2.6). <p>You need to have an incident reporting form and incident register that details key information about each incident that has occurred.</p> <p>You can find additional information in “Effective incident management systems: Best practice guidance”.</p> <p>Develop guides, training, and strategies to help workers to use the incident management system well.</p> <p>You need to make sure your incident management system is suitable and developed to help workers use it. Make sure workers understand their role in the incident management system and how to follow it.</p> <p>You can find more details about workforce planning and human resource management in Outcome 2.8 and Outcome 2.9.</p> <p>Monitor that the incident management system is implemented consistently and well.</p> <p>To understand if incidents have been managed properly, you need to review:</p> <ul style="list-style-type: none">• Older people’s care and services.• Complaints, feedback and incidents (Outcome 2.6 and Outcome 2.5). <p>You also need to assess whether workers are following your incident management system consistently and well (Outcome 2.9). You can do this through performance assessments, audits and system checks.</p> <p>If any issues or opportunities for improvement are identified through reviews and assessments, these need to be addressed. If things go wrong, you need to be open about it and share this information with older people, family, and carers (Outcome 2.3).</p> <p>Review your incident management system regularly to make sure it is effective and so you can find ways to improve.</p> <p>You can find more information on monitoring the quality system in Outcome 2.3.</p>

Worker	
Actions	Associated activities
<p>2.5.1 The provider implements an incident management system to record, investigate, respond to and manage incidents and near misses that occur in connection with the delivery of care and services and reduces or prevents incidents from recurring.</p> <p>2.5.2 The provider takes timely action to respond to and manage incidents.</p> <p>2.5.3 The provider supports older people, family and carers to report incidents and encourages their involvement in identifying ways to reduce incidents from occurring.</p> <p>2.5.4 The provider supports the workforce to prevent, recognise, respond to and report incidents.</p> <p>2.5.5 The provider collects and analyses incident data. Outcomes are reported to older people and workers and feed into the provider’s quality system to improve the quality of care and services.</p> <p>2.5.6 The provider regularly reviews and improves the effectiveness of the incident management system.</p>	<p>Use the organisation’s incident management system.</p> <p>No matter what the workers’ role is at the organisation, they need to escalate any incidents that occur in relation to delivery of care and services. This includes incidents that almost occur, also known as near misses. These could include any incidents involving an older person, the worker, a colleague, family, or carers.</p> <p>Depending on the workers’ role and skills, workers may also help with:</p> <ul style="list-style-type: none"> • Determining and taking immediate actions to make older people, other workers and visitors safe during or following an incident. • Reviewing an older person’s care and services plan if the incident involved an older person (Outcome 3.1 and Outcome 5.4). • Submitting an incident report. • Investigating the cause of an incident. • Sharing information about the outcome of an investigation to older people, their families and carers. Workers need to share information in line with the information management system (Outcome 2.7 and Outcome 3.3). This includes only sharing information where consent has been given by the older person. • Implementing actions to prevent an incident or similar incident from happening again. • Completing trend analysis to identify systemic issues and ways to improve. Workers can do this as part of broader performance monitoring activities (Outcome 2.3).

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.5:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.6: Feedback and complaints management

What is the Outcome that needs to be achieved?

Older people, workers and others are encouraged and supported to provide feedback and make complaints about care and services, without reprisal.

Feedback and complaints are acknowledged, managed transparently and contribute to the continuous improvement of care and services.

Why is this Outcome important?

Outcome 2.6 explains how providers need to manage and respond to feedback and complaints.

The following key concepts have been strengthened:

- Reporting outcomes from feedback to older people and workers.
- Monitoring the effectiveness of the complaints resolution process.

How can you achieve Outcome 2.6 in practice?

Governing body	
Actions	Associated activities
<p>2.6.1 The provider implements a complaints management system to receive, record, respond to and report on complaints.</p> <p>2.6.2 The provider encourages and supports older people, family and carers, workers and others to provide feedback and make complaints.</p> <p>2.6.3 Older people are empowered to access advocates, language services and other ways of raising and resolving feedback and complaints.</p> <p>2.6.4 The provider takes timely action to resolve complaints and uses an open disclosure process when things go wrong.</p> <p>2.6.5 The provider collects and analyses feedback and complaints data. Outcomes are reported to the governing body, older people and workers and inform the provider’s quality system to improve the quality of care and services.</p> <p>2.6.6 The provider regularly reviews and improves the effectiveness of the complaints management system.</p>	<p>Monitor the provider organisation’s performance in implementing their feedback and complaints management system.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation’s delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation’s reports on the: <ul style="list-style-type: none"> – Management of feedback and complaints from Consumer advisory bodies (Outcome 2.1). – Management of complaints, feedback and incidents (Outcome 2.5). – Quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If you find any issues or ways the provider can improve through these reviews, you need to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation’s performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.6.1 The provider implements a complaints management system to receive, record, respond to and report on complaints.</p> <p>2.6.2 The provider encourages and supports older people, family and carers, workers and others to provide feedback and make complaints.</p> <p>2.6.3 Older people are empowered to access advocates, language services and other ways of raising and resolving feedback and complaints.</p> <p>2.6.4 The provider takes timely action to resolve complaints and uses an open disclosure process when things go wrong.</p> <p>2.6.5 The provider collects and analyses feedback and complaints data. Outcomes are reported to the governing body, older people and workers and inform the provider’s quality system to improve the quality of care and services.</p> <p>2.6.6 The provider regularly reviews and improves the effectiveness of the complaints management system.</p>	<p>Develop and implement a feedback and complaints management system.</p> <p>The Commission expects your feedback and complaints management system to outline:</p> <ul style="list-style-type: none"> • Clear and documented roles and responsibilities. • How older people and their families are encouraged and empowered to provide feedback and complaints. • The available feedback mechanisms (Resources to SIRS and Consumer Advisory Bodies). • How confidentiality is achieved. This needs to be in line with your information management system. It is important to make sure older people and workers do not experience any form of retribution as a result of raising a complaint. Effort must be made to minimise administrative burden, while also ensuring that all complaints and feedback are resolved and any patterns or trends are identified (Outcome 2.7). • How stakeholders can: <ul style="list-style-type: none"> – Escalate feedback and complaints so that it can be dealt with in a timely manner and without retribution. – Access information about external complaints and feedback mechanisms (Resources for SIRS). – Provide positive feedback to validate and reinforce good practices they observe. • What feedback or complaints are needed to be recorded by workers. Your system needs to describe any situations where feedback does not need to be recorded. For example, if the older person chooses not to. • Any feedback or complaints that needs to be responded to. This needs to include: <ul style="list-style-type: none"> – Who should be involved in this process. – Timeframes. – Situations where an investigation is needed to be performed (i.e. after an incident or near miss) (Outcome 2.5). • How complaints are discussed (and, where possible, resolved) in consultation with the complainant. You must communicate with older people in a way that meets their needs. Considerations must include their (Outcome 3.3): <ul style="list-style-type: none"> – Spoken language. – Culture. – Medical condition. – Needs and preferences. • How workers encourage and empower older people to access advocates and other services. • How to practice open disclosure when things go wrong (Outcome 2.3). <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none">• How complaints and feedback are analysed and resolved. Activities must be completed during performance monitoring to identify any trends and systemic issues. For example, aspects of care that were not delivered well may indicate the need for additional worker training (Outcome 2.3).• A feedback register or equivalent must be used to track and monitor feedback and complaints. <p>You need to have mechanisms to provide feedback that work well for older people, their family and carers. This can include a complaints escalation process and/or feedback form.</p> <p>Develop guides, training, and/or strategies to help workers to use the complaint management system well.</p> <p>These need to be suitable and developed to help workers. Attention must be paid to make sure workers understand their role in application.</p> <p>Refer to Outcome 2.8 and Outcome 2.9 for further detail about workforce planning and human resource management.</p> <p>Monitor the implementation and effectiveness of your feedback and complaint management system.</p> <p>To understand if you are managing feedback and complaints appropriately, you need to review:</p> <ul style="list-style-type: none">• Feedback and complaints from older people and their families.• Older people’s care and service plans as well as progress notes (Outcome 3.1).• Incident information (Outcome 2.5). <p>You also need to assess whether workers are following your feedback and complaint management system. You can do this through performance assessments and system checks (Outcome 2.9).</p> <p>If you find any issues or ways you can improve through your reviews and assessments, you need to address them. If things go wrong, you need to be open about it and share this information with older people, their family, and carers.</p> <p>You will know things are going well if older people say that they are confident that:</p> <ul style="list-style-type: none">• Their complaints had been closed out appropriately in a timely manner.• They feel heard. <p>You can find more information on monitoring the quality management system in the guidance material for Standard 2 (Outcome 2.3).</p>

Worker	
Actions	Associated activities
<p>2.6.1 The provider implements a complaints management system to receive, record, respond to and report on complaints.</p> <p>2.6.2 The provider encourages and supports older people, family and carers, workers and others to provide feedback and make complaints.</p> <p>2.6.3 Older people are empowered to access advocates, language services and other ways of raising and resolving feedback and complaints.</p> <p>2.6.4 The provider takes timely action to resolve complaints and uses an open disclosure process when things go wrong.</p> <p>2.6.5 The provider collects and analyses feedback and complaints data. Outcomes are reported to the governing body, older people and workers and inform the provider’s quality system to improve the quality of care and services.</p> <p>2.6.6 The provider regularly reviews and improves the effectiveness of the complaints management system.</p>	<p>Apply the complaints management system.</p> <p>Depending on the workers’ roles and responsibilities, workers must:</p> <ul style="list-style-type: none"> • Be confident to raise feedback and complaints without fear of retribution. • Make sure any complaints or negative feedback is managed without reprisal for older people. • Document the complaint or feedback. • Acknowledge any positive feedback. • Practice open disclosure when things go wrong (Outcome 2.3). • Empower older people to access advocates, language services and other ways of raising and resolving feedback and complaints (Resources for SIRS). • Record and resolve complaints in a timely manner, using the organisation’s information management system (Outcome 2.7). • Escalate the complaint if it has not been resolved.

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.6:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.7: Information management

What is the Outcome that needs to be achieved?

Information is identifiable, accurately recorded, current and able to be accessed and understood by those who need it.

The information of older people is confidential and managed appropriately, in line with their informed consent.

Why is this Outcome important?

Outcome 2.7 explains how providers need to manage the information of older people to make sure information is secure and accessible to workers.

The following key concepts have been strengthened:

- Access to information.
- Accuracy and completeness of information.
- Review and improvement of the information system.

How can you achieve Outcome 2.7 in practice?

Governing body	
Actions	Associated activities
<p>2.7.1 The provider implements an information management system to securely manage records.</p> <p>2.7.2 The provider’s information management system ensures that:</p> <p>a) Workers and older people have access to the right information at the right time to deliver and receive quality care and services</p> <p>b) The accuracy and completeness of information collected and stored is maintained</p> <p>c) Informed consent is sought to collect, use and store the information of older people or to disclose their information (including assessments) to other parties</p> <p>d) Older people understand their right to access or correct their information or withdraw their consent to share information.</p> <p>e) Information from different sources is integrated.</p> <p>2.7.3 The provider regularly reviews and improves the effectiveness of the information management system.</p> <p>2.7.4 The provider maintains policies and procedures that are current, regularly reviewed, informed by contemporary, evidence-based practices, and are understood and accessible by workers and relevant parties.</p>	<p>Monitor the provider organisation’s performance in implementing their information management system.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation’s delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation’s reports on the: <ul style="list-style-type: none"> – Management of information in line with applicable privacy acts and legislation. – Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6). – The quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas found in the reports listed above. If the governing body finds issues or ways the provider organisation can improve through these reviews, the governing body needs to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation’s performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.7.1 The provider implements an information management system to securely manage records.</p> <p>2.7.2 The provider’s information management system ensures that:</p> <p>a) Workers and older people have access to the right information at the right time to deliver and receive quality care and services</p> <p>b) The accuracy and completeness of information collected and stored is maintained</p> <p>c) Informed consent is sought to collect, use and store the information of older people or to disclose their information (including assessments) to other parties</p> <p>d) Older people understand their right to access or correct their information or withdraw their consent to share information.</p> <p>e) Information from different sources is integrated.</p> <p>2.7.3 The provider regularly reviews and improves the effectiveness of the information management system.</p> <p>2.7.4 The provider maintains policies and procedures that are current, regularly reviewed, informed by contemporary, evidence-based practices, and are understood and accessible by workers and relevant parties.</p>	<p>Develop and implement an information management system to securely manages records.</p> <p>The system for managing information, including the clinical information system (Outcome 5.1), is expected to:</p> <ul style="list-style-type: none"> • Enable workers and others (e.g. locum doctors, agency workers and contractors) to have access to the right information at the right time. • Enable older people to access the information they need to receive and quality care and services. • Maintain the accuracy and completeness of information collected and stored. This also applies to any external resources that can be provided to support older people (i.e. Telehealth). • Make sure informed consent (Outcome 1.3) is sought to collect, use and store the information of older people or to disclose their information (including assessments) to other parties. In the event older people withdraw their consent to share information, this needs to be acknowledged, documented, and communicated. • Integrate information from different sources, such as hospitals, where relevant. • Manage cyber security risks. • Provide adequate data storage for the records which need to be kept. <p>Your information management system is expected to make sure any records associated with the service are securely managed. The information management system needs to be applied during application of processes, systems and/or strategies associated with:</p> <ul style="list-style-type: none"> • Choice, independence and quality of life (Outcome 1.3) and Transparency and Agreements (Outcome 1.4). Information about the older person’s care and services, and agreements and care commencing (whichever comes first) needs to be current, accurate, timely and easy to understand. The information needs to: <ul style="list-style-type: none"> – Support the older person to make informed decisions. – Be readily accessible by workers. – Enable workers to partner with older people to make sure older people are making informed decisions based on accurate and timely information. • Human resource management (Outcome 2.9). The information provided by potential candidates and existing workers needs to be accurately stored against their profile. • Assessment and Planning (Outcome 3.1). Each older person’s care and services plan needs to include information about the risks associated with the delivery of care and services and how workers can support older people to manage these risks (Outcome 2.4). Information from the assessment and planning must be securely stored and used to inform the systems for: <ul style="list-style-type: none"> – Comprehensive care (Outcome 5.4). – Safe use of medicines (Outcome 5.3). <p style="text-align: right;"><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none"> – Palliative care and end-of-life care (Outcome 5.7). – Food, drink and dining experiences (Outcome 6.1, Outcome 6.2 and Outcome 6.4). <p>Care and services plans need to be offered to, and able to be accessed by, the older person (Outcome 3.1).</p> <ul style="list-style-type: none"> • The clinical governance framework (Outcome 5.1). A digital clinical information system is needed to be put in place that incorporates feedback and information on experiences of older people, family, carers and workers to drive safety and quality. • Daily living (Outcome 7.1). Workers need to monitor and record the preferences, function and changes of each older person when participating in activities of daily living. • Coordination of care and services (Outcome 3.4) and Transitions (Outcome 7.2). Receiving family, carers, health professionals or organisations are expected to be given timely, current and complete information about the older person as needed and with their informed consent. <p>Information on older people receiving home care can be stored within clinical modules within your databases (e.g. nutritional needs, activities for daily living). This does not need to be a dedicated clinical information system. Information related to the safe delivery of care and services needs to be assessed and accessible to those involved in their care (including contractors).</p> <p>Make sure all policies and procedures relating to quality management are accessible to workers and other relevant parties.</p> <p>Strategies and supports need to be in place to make sure all workers and other parties (e.g. contractors) have access to your quality management system, including any policies and procedures. Feedback from workers and other parties is expected to be sought, to understand if there are any challenges accessing key policies and procedures. Any challenges need to be addressed. For example, if contractors are unable to access policies and procedures, access needs to be enabled.</p> <p>In addition to this, it is expected that policies and procedures are:</p> <ul style="list-style-type: none"> • Current, regularly reviewed, and informed by contemporary, evidence-based practices. Refer to Outcome 2.3 for further information about how information, such as complaints and incident data need to be used to improve the quality management system. • Understood by workers and relevant parties. Refer to Outcome 2.9 for further information about how the training system needs to be used to build and verify worker competency. <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>Make sure information management systems are accessible to workers and other relevant parties as needed.</p> <p>It is expected that:</p> <ul style="list-style-type: none">• Strategies and supports are in place to make sure all workers and other parties (e.g. contractors) have access to your information management system (i.e. any system used by workers or others in their role such as older people’s care and services management system, clinical management, feedback and complaints and incident management systems).• Feedback from workers and other parties is sought, to understand if there are any challenges accessing and operating these systems. Any challenges need to be addressed. For example, if workers are unable to access care and services plans in regional areas where there is limited internet, access needs to be enabled or extracts need to be downloaded. <p>Develop guides, training, and/or strategies to help workers to use the information management system.</p> <p>These should be suitable and developed to help workers. Attention should be paid to make sure workers understand their role in application and have access to the relevant information.</p> <p>These policies and procedures are also expected to be:</p> <ul style="list-style-type: none">• Current and informed by the latest contemporary evidence-based practices.• Regularly reviewed.• Understood and accessible by workers and relevant parties. <p>Monitor that the information management system is implemented consistently and well.</p> <p>To understand if you are managing information appropriately, you need to review:</p> <ul style="list-style-type: none">• Feedback and complaints from older people and their families.• Older people’s care and service plans as well as progress notes (Outcome 3.1).• Incident information (Outcome 2.5). <p>You also need to assess whether workers are using your information management system. You can do this through performance assessments and system checks (Outcome 2.9).</p> <p>If you find any issues or ways you can improve through your reviews and assessments, you need to address them. If things go wrong, you need to be open about it and share this information with older people, their family, and carers.</p> <p>You can find more information on monitoring the quality system in Outcome 2.3.</p>

Worker	
Actions	Associated activities
<p>2.7.1 The provider implements an information management system to securely manage records.</p> <p>2.7.2 The provider’s information management system ensures that:</p> <p>a) Workers and older people have access to the right information at the right time to deliver and receive quality care and services</p> <p>b) The accuracy and completeness of information collected and stored is maintained</p> <p>c) Informed consent is sought to collect, use and store the information of older people or to disclose their information (including assessments) to other parties</p> <p>d) Older people understand their right to access or correct their information or withdraw their consent to share information.</p> <p>e) Information from different sources is integrated.</p> <p>2.7.3 The provider regularly reviews and improves the effectiveness of the information management system.</p> <p>2.7.4 The provider maintains policies and procedures that are current, regularly reviewed, informed by contemporary, evidence-based practices, and are understood and accessible by workers and relevant parties.</p>	<p>Apply the information management system.</p> <p>Depending on the workers’ roles and responsibilities, workers must:</p> <ul style="list-style-type: none"> • Make sure older peoples’ information is kept confidential (Outcome 1.2). • Make sure that older people have access to the right information when needed. • Maintain the security, accuracy, and completeness of information collected and stored. • Make sure that the system to obtain consent has been utilised (Outcome 1.3) before collecting, using and storing the information of older people or disclosing their information to other parties. • Make sure older people understand their right to access or correct their information or withdraw their consent to share information. • Integrate information from different sources, if needed.

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.7:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.8: Workforce planning

What is the Outcome that needs to be achieved?

The provider understands and manages its workforce needs and plans for the future.

Why is this Outcome important?

Outcome 2.8 explains how providers implement a workforce strategy to make sure there are enough appropriate workers who have the skills, qualifications and capabilities to deliver quality and safe care and services.

The following key concepts have been strengthened:

- Implementation of a workforce strategy.
- Supports for a satisfied and psychologically safe workforce.
- Supervision and resources for workers.
- Use of a training system that:
 - Draws on the experience of older people.
 - Is responsive to multiple inputs.
- Continuous improvement of the training system.
- Competency-based training for workers.

How can you achieve Outcome 2.8 in practice?

Governing body	
Actions	Associated activities
<p>2.8.1 The provider implements a workforce strategy to:</p> <ul style="list-style-type: none"> a) Identify, record and monitor the number and mix of workers required and engaged to manage and deliver quality care and services b) Meet minimum care requirements and engage with workers on how planning and rostering will achieve these requirements c) Identify the skills, qualifications and competencies required for each role d) Engage suitably qualified and competent workers e) Use direct employment to engage workers whenever possible, and minimise the use of independent contractors f) Mitigate the risk and impact of workforce shortages and worker absences or vacancies. 	<p>Monitor the provider organisation’s performance in maintaining a safe and healthy workforce and workforce strategy.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation’s delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation’s reports on the: <ul style="list-style-type: none"> – Management of complaints, feedback and incidents in relation to their safety and wellbeing (Outcome 2.5 and Outcome 2.6). – The quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If you find any issues or improvement opportunities through these reviews, you need to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation’s performance, this needs to include monitoring the performance of any subcontracted providers.</p>
<p>2.8.2 The provider implements strategies for supporting and maintaining a satisfied and psychologically safe workforce.</p>	

Provider organisation	
Actions	Associated activities
<p>2.8.1 The provider implements a workforce strategy to:</p> <ul style="list-style-type: none"> a) Identify, record and monitor the number and mix of workers required and engaged to manage and deliver quality care and services b) Meet minimum care requirements and engage with workers on how planning and rostering will achieve these requirements c) Identify the skills, qualifications and competencies required for each role d) Engage suitably qualified and competent workers e) Use direct employment to engage workers whenever possible, and minimise the use of independent contractors f) Mitigate the risk and impact of workforce shortages and worker absences or vacancies. <p>2.8.2 The provider implements strategies for supporting and maintaining a satisfied and psychologically safe workforce.</p>	<p>Develop and implement a workforce strategy.</p> <p>In order to develop an effective workforce strategy, the needs of older people and the business need to be assessed. This will make sure adequate numbers and mix of qualified workers are available to provide safe and quality care and services that meets the older people's needs.</p> <p>It is expected that the workforce strategy will include:</p> <ul style="list-style-type: none"> • Processes to identify the specific skills, qualifications and competencies needed of workers to deliver safe and quality care and services to older people. The skills, qualifications, and competencies need to be established with reference to what older people need and want. In particular, attention needs to be paid to understand older peoples' clinical needs (Outcome 5.4) and supports needed to eat and drink safely (Outcome 6.4), so that the skills of workers are established based on this. • Processes to screen and engage suitably qualified and competent workers. Potential candidates' capabilities to use the organisation's quality management needs to be considered. In particular, any history of complaints, incidents, or other feedback needs to be reviewed to understand if an individual has the ability to deliver tailored care for each older person. If you find any issues through your reviews and assessments, you need to investigate them to understand if an individual's capability gaps can be addressed with training (Outcome 2.9). This is with the exception of those identified on the Aged Care Banning Orders Register, as they must not be engaged regardless of their competencies. Individuals should only be engaged into the workforce if it is confirmed that they can deliver quality and safe care and services. You can do this through competency and skill based tests. • Processes to identify the number and mix of adequately skilled/competent workers needed to provide the necessary care and services to meet the older people's needs (Outcome 2.7). These need to include an analysis of: <ul style="list-style-type: none"> – The number of older people you are caring for. – The specific needs of older people under your care. – The number and mix of current workers along with the skills and services they can deliver. <p>In particular, attention needs to be paid to understanding older peoples' clinical, emotional, spiritual, and psychological needs (Outcome 5.4) and supports needed to eat and drink safely (Outcome 6.4), so that enough workers are available to support older people at particular times of day (e.g. morning, bedtime, mealtimes), and maximise worker continuity (Outcome 3.2). This needs to include:</p> <ul style="list-style-type: none"> • Processes to make sure the workforce strategy is in line with the legislative requirement of 24/7 registered nurse workforce responsibilities and care minutes (only applicable to Residential Care). <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none">• Mitigating the risk and impact of workforce shortages, absences or vacancies. This needs to involve maintaining relationships with aged care hiring agencies and labour hires. Attention should be paid to make sure staffing needs are met on an ongoing basis, in particular, in advance to busy periods. The use of contractors (agency staff) should be minimised where possible. However, if contractors are needed, you need to maintain continuity of care by rostering the same contractors for the older person (unless they have specifically requested otherwise) and make sure all competency checks are satisfactory, in line with your policies and procedures, and the contractor is properly inducted and monitored (Outcome 2.9).• Processes to make sure diverse workers (e.g. LGBTQI, culturally, linguistically diverse, Aboriginal, and Torres Strait Islander workers etc.) are supported. <p>The workforce strategy is expected to be documented, with key initiatives in place to make sure workforce needs are met. The method for documenting this needs to be based on the organisation's complexity and context. For example, some organisations can build these processes into risk management systems (Outcome 2.4) and/or rostering processes. More complex organisations may need to build this into strategic business planning (Outcome 2.1).</p> <p>Develop and implement strategies that promote a healthy and safe workforce.</p> <p>These strategies need to be developed based on the health and safety risks found using the risk management system and through analysis of incidents (Outcome 2.4 and Outcome 2.5). Strategies need to outline how you will maintain a satisfied and psychologically safe workforce, for example, through:</p> <ul style="list-style-type: none">• Completion of risk assessments in any situations that have the potential to cause harm to workers (e.g. in new home environments, when exposed to traumatic events). Risk assessments should be used to understand the physical and psychological risks and how these can be managed on a case-by-case basis (Outcome 2.4).• Processes to identify and provide appropriate support mechanisms for workers who are experiencing times of distress (e.g. fatigue, bullying and harassment) (Outcome 2.2).• Completion of regular workplace checks, to identify any new hazards in the service environment (e.g. slips and trips) and manage these well.• Delivery of training to assist workers to respond to traumatic events and any other hazardous situations. This training needs to be targeted to the needs of workers (Outcome 2.9) and help workers to manage their own health, as well as that of older people.• Incentives for workers to promote a safe working environment, such as recognition of quality and safe work that meets the older people's needs, as well as the individual needs of workers. These incentives can also aim to minimise the risk associated with workers' turnover, by ensuring workers are fulfilled in their role and receiving the support they need. <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none"> • Development of Key Performance Indicators (KPIs) relating to health and safety. KPIs are expected to link closely to strategic business planning (Outcome 2.1) and performance reporting (Outcome 2.3). <p>Similar to the organisation’s workforce strategy, these strategies are expected to be documented, with key initiatives in place to make sure workforce health and safety needs are met. The method for documenting these strategies needs to be based on the organisation’s complexity and context. For example, some organisations can build these processes into risk management systems (Outcome 2.4) and/or workforce planning processes. More complex organisations may need to build this into strategic business planning (Outcome 2.1).</p> <p>Monitor that the workforce strategy is effective.</p> <p>To understand if the workforce strategy is effective, you need to review:</p> <ul style="list-style-type: none"> • Older people’s care and services (Outcome 3.1). • Complaints (Outcomes 2.6). • Feedback (Outcomes 2.6). • Incident information (Outcomes 2.5). <p>You also need to assess your worker qualifications, skills, abilities and quality performance. This needs to be a key component of evaluating quality and care outcomes (Outcome 2.3). You need to review your workforce strategy and updated it on a regular basis.</p> <p>If you find any issues or ways you can improve through your reviews and assessments, you need to address them. If things go wrong, you need to be open about it and share this information with older people, their family and carers (Outcome 2.3).</p> <p>Monitor that the workforce is healthy and safe.</p> <p>It is expected that activities are performed to understand if the workforce is healthy and safe, for example, by:</p> <ul style="list-style-type: none"> • Seeking feedback from workers to understand if they receive the support they need to be healthy and safe. • Analysing incident data to understand if any recurring incidents, or serious incidents, are occurring (Outcome 2.5). If this is the case, action needs to be taken in a timely manner to make sure the risk of incidents is minimised in the future. • Completing assessments or checks to confirm workers are delivering care and services in a manner that is safe for older people but also themselves and their colleagues (Outcome 2.3). If assessments uncover any issues or concerns, action needs to be taken in a timely manner to address these. For example, quality management systems may need to be modified and/or additional training may need to be provided to workers to make sure they understand how to perform their role safely. <p>You need to regularly review and improve your strategies to promote a healthy and safe workforce. You can use these monitoring activities to do that and report your findings to the governing body (Outcome 2.3).</p>

Worker	
Actions	Associated activities
<p>2.8.1 The provider implements a workforce strategy to:</p> <ul style="list-style-type: none"> a) Identify, record and monitor the number and mix of workers required and engaged to manage and deliver quality care and services b) Meet minimum care requirements and engage with workers on how planning and rostering will achieve these requirements c) Identify the skills, qualifications and competencies required for each role d) Engage suitably qualified and competent workers e) Use direct employment to engage workers whenever possible, and minimise the use of independent contractors. f) Mitigate the risk and impact of workforce shortages and worker absences or vacancies. <p>2.8.2 The provider implements strategies for supporting and maintaining a satisfied and psychologically safe workforce.</p>	<p>Apply the organisation’s workforce strategy.</p> <p>If your role lies within the responsibilities of managing the workforce strategy (i.e. hiring, admin etc.), you may be expected to:</p> <ul style="list-style-type: none"> • Apply the processes to identify the specific skills, qualifications and competencies needed of workers, to deliver safe and quality care and services to older people. • Apply the processes to screen and engage suitably qualified and competent workers (Outcome 2.3). • Apply the processes to identify the number and mix of adequately skilled/competent workers needed to provide the necessary care and services to the older people’s needs (Outcome 1.1). This needs to be based on an analysis of the: <ul style="list-style-type: none"> – Number of older people the organisation is caring for. – Specific needs of older people under the care of the organisation. – Number and mix of current workers along with the skills and services they can deliver. • Maintain close working relationships with aged care hiring agencies and labour hires to make sure staffing needs can be met on an ongoing basis. <p>Apply strategies that promote a healthy and safe workforce.</p> <p>Depending on your role and skills/qualifications, you may be expected to:</p> <ul style="list-style-type: none"> • Complete risk assessments in any situations that have the potential to cause harm to yourself or your colleagues (e.g. in new home environments, when exposed to traumatic events). Risk assessments can be used to understand the physical and psychological risks and how these should be managed on a case-by-case basis (Outcome 2.4). • Identify and/or provide appropriate support mechanisms for workers who are experiencing times of distress (e.g. fatigue, bullying and harassment) (Outcome 2.2). If you have experienced distress, you should use these mechanisms as appropriate. • Complete regular workplace checks, to identify any new hazards in the service environment (e.g. slips and trips) and manage these well. • Deliver training to assist workers to respond to traumatic events and any other hazardous situations. This training needs to be targeted to the needs of workers (Outcome 2.9) and help them to manage their own health as well as that of older people. • Participate in training to respond to traumatic events and any other hazardous situations. • Develop and/or report on Key Performance Indicators (KPIs) relating to health and safety. These indicators are expected to link closely to strategic business planning (Outcome 2.1) and performance reporting (Outcome 2.3). • Promote wellbeing in the workplace. • Develop and use workforce retention strategies. <p><i>Continued on the next page</i></p>

Draft: Standard 2 – The Organisation

Guidance material for the strengthened Aged Care Quality Standards for review and discussion

Worker (continued)	
Actions	Associated activities
	<p>Escalate any situations where you feel you need additional support to perform your role safely.</p> <p>This can relate to any issues associated with the tools and training you have been provided to complete specific activities. You can escalate these situations using the organisation’s complaints management system (Outcome 2.6) or any alternative mechanism that enables the matter to be dealt with in a timely manner.</p>

DRAFT

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.8:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.9: Human resource management

What is the Outcome that needs to be achieved?

The care and services needs of older people are met by workers who are skilled and competent in their role, hold relevant qualifications and who have relevant expertise and experience to provide quality care and services.

Workers are provided with training and supervision to effectively perform their role.

Why is this Outcome important?

Outcome 2.9 explains how providers need to make sure workers have the skills they need to deliver quality and safe care and practices.

DRAFT

How can you achieve Outcome 2.9 in practice?

Governing body	
Actions	Associated activities
<p>2.9.1 The provider maintains records of worker pre-employment checks, contact details, qualifications, and experience.</p> <p>2.9.2 The provider deploys the number and mix of workers to enable the delivery and management of quality care and services.</p> <p>2.9.3 Workers have access to supervision, support and resources.</p> <p>2.9.4 The provider maintains and implements a training system that:</p> <p>a) Includes training strategies to make sure that workers have the necessary skills, qualifications and competencies to effectively perform their role</p> <p>b) Draws on the experience of older people to inform training strategies</p> <p>c) Is responsive to feedback, complaints, incidents, identified risks and the outcomes of regular worker performance reviews.</p> <p>2.9.5 The provider regularly reviews and improves the effectiveness of the training system.</p> <p>2.9.6 All workers regularly receive competency-based training in relation to core matters, at a minimum:</p> <p>a) The delivery of person-centred, rights-based care</p> <p>b) Culturally safe, trauma aware and healing informed care</p> <p>c) Caring for people living with dementia</p> <p>d) Responding to medical emergencies</p> <p>e) The requirements of the Code of Conduct, the Serious Incident Response Scheme, the Quality Standards and other requirements relevant to the worker's role.</p> <p>2.9.7 The provider undertakes regular assessment, monitoring and review of the performance of workers.</p>	<p>Monitor the provider organisation's performance in strategies or processes to roster workers and effectiveness of training systems.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation's delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation's reports on the: <ul style="list-style-type: none"> – Supports provided to workers in the delivery of care and services. – Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6). – The quality of care and services delivered by workers (i.e. performance assessments). • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If the governing body find any issues or ways the provider can improve through these reviews, the governing body need to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation's performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.9.1 The provider maintains records of worker pre-employment checks, contact details, qualifications, and experience.</p> <p>2.9.2 The provider deploys the number and mix of workers to enable the delivery and management of quality care and services.</p> <p>2.9.3 Workers have access to supervision, support and resources.</p> <p>2.9.4 The provider maintains and implements a training system that:</p> <p>a) Includes training strategies to make sure that workers have the necessary skills, qualifications and competencies to effectively perform their role</p> <p>b) Draws on the experience of older people to inform training strategies</p> <p>c) Is responsive to feedback, complaints, incidents, identified risks and the outcomes of regular worker performance reviews.</p> <p>2.9.5 The provider regularly reviews and improves the effectiveness of the training system.</p> <p>2.9.6 All workers regularly receive competency-based training in relation to core matters, at a minimum:</p> <p>a) The delivery of person-centred, rights-based care</p> <p>b) Culturally safe, trauma aware and healing informed care</p> <p>c) Caring for people living with dementia</p> <p>d) Responding to medical emergencies</p> <p>e) The requirements of the Code of Conduct, the Serious Incident Response Scheme, the Quality Standards and other requirements relevant to the worker's role.</p> <p>2.9.7 The provider undertakes regular assessment, monitoring and review of the performance of workers.</p>	<p>Make sure the human resources management system records accurate details provided by potential candidates in the pre-employment validation phase.</p> <p>An effective pre-employment validation process verifies that information provided by applicants about their qualifications, skills, and experience in their resumes or job applications are accurate. These processes are expected to include background checks, verification of education and qualifications, confirmation of employment history, reference checks, and competency assessments. This is to make sure that potential workers are suitably capable to provide safe and quality care and services to older people (Outcome 2.2), or, that the organisation's training system can uplift ability as needed.</p> <p>This information is expected to be stored in line with the organisation's Information Management System (Outcome 2.7). Specifically, information received from candidates needs to be stored accurately and completely (i.e. documents received by applicants need to correspond to their profile).</p> <p>Develop and implement strategies or processes to roster workers for quality and safe care and services.</p> <p>It is expected that rostering is informed by the organisation's workforce strategy (Outcome 2.8). In particular, enough and appropriate mix of workers need to be assigned to specific shifts and/or tasks based on their skills, qualifications, and competencies. Rostering needs to make sure that, at all times, quality and safe care and services is able to be provided that is centred around the needs and preferences of older people.</p> <p>Rostering should involve assessment of the skills, number and mix of workers that are needed to deliver safe and quality care and services. Particular attention needs to be paid to make sure that are enough and a mix of workers are deployed during specific times of day when older people may need more targeted support (e.g. mealtimes, bedtime), taking into consideration worker continuity.</p> <p>It is expected that workers will be provided with adequate and appropriate supervision, support and resources.</p> <p>Develop and implement a training system.</p> <p>Your training system needs to be developed in consultation with workers and older people, and include:</p> <ul style="list-style-type: none"> • Completion of regular training needs analyses, that outline the skills requirements for each role type and what contemporary evidence-based training is needed to be completed to achieve these skills. This needs to meet the organisation's scope of services and the diversity of older people, and in line with the legislative requirement (Outcome 2.8). In particular, training will need to be conducted to fill any competency gaps identified during hiring activities (Outcome 2.8), broader performance monitoring, or assessment of the organisation's quality and safety culture (Outcome 2.2). <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<ul style="list-style-type: none"> • Implementation of training strategies and a ‘training matrix’ (or equivalent) listing: <ul style="list-style-type: none"> – All worker role types (e.g. care worker, chef, cleaner, administration). – The training needed to be completed for each role type, to help workers perform that role. • Delivery of training in line with the training needs analysis. Training on the following matters will need to be delivered: <ul style="list-style-type: none"> – The delivery of person-centred, rights-based care. – Culturally safe, trauma aware and healing informed care. – Caring for people living with dementia. – Responding to medical emergencies. – The requirements of the Code of Conduct. – The requirements of the Serious Incident Response Scheme (SIRS). – How workers can help meet the requirements of the Quality Standards. – How workers can meet any other requirements relevant to their role (e.g. Infection Prevention and Control Leads). <p>In addition to these topics, training will also need to be delivered that builds worker competency in all areas identified during completion of the training needs analysis. It is expected that, at all times, workers have access to the supervision, support, and resources they need to perform their role well.</p> <ul style="list-style-type: none"> • Completion of activities to validate workers’ skills and understanding. Following delivery of any training, it is expected that processes are followed (for example, competency evaluations, individual worker performance assessments, tracking of training completion) to confirm workers’ capabilities meet the requirements of their role. You need to make sure that workers are capable of providing quality, safe, tailored care for each older person that helps achieve all outcomes of the strengthened Standards that relate to their role. <p>It is expected that training records, including records of training completion and verification of worker competency, will be retained for all individual workers (including contractors) in line with the organisation’s information management system (Outcome 2.7). You can put in place a system where competencies are tracked and alerts you, when a workers’ license (e.g. driver’s license, registrations) nears expiry. Also, in line with Outcome 2.7, it is a requirement that you make sure policies and procedures are understood by workers and relevant parties (as they relate to their role).</p> <p>The training system needs to be relevant for, accessible to, and applied by both contractors and employees.</p> <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>Develop and implement strategies or processes to regularly assess, monitor and review performance of workers for quality and safe care and services.</p> <p>It is expected that the strategies or processes to manage workers' performance include:</p> <ul style="list-style-type: none"> • Development and monitoring of performance metrics. Based on the role and responsibilities of each worker, the performance metrics to measure their performances may be different (e.g. positive feedback from older people for carers compared to hiring targets for admin workers). • Completion of periodic performance reviews in line with an agreed schedule. This ensures that reviews are conducted on a periodic basis and takes into consideration all monitored performance metrics and feedback. Workers should be provided an opportunity to clarify or provide further reasoning to any feedback that does not meet their expectations. Performance reviews need to make sure: <ul style="list-style-type: none"> – Workers are fairly assessed based on feedback provided by older people, other workers, supervisors, and people they work with (Outcome 2.6). – Workers are provided with support in areas identified for improvement in the training needs analysis as part of the training system. – Workers are incentivised to deliver quality and safe care and services (Outcome 2.3). – Outcomes from the training system are considered during the review. • Processes to assess all performance review outcomes to determine broader opportunities for improvement. This should result in recognition of workers with exceptionally positive outcomes, and action plans for workers who need to improve. Improvement plans need to be prepared in partnership with the worker to determine what they can do to make sure they provide quality care and services meets the Standards (Outcome 2.3). <p>Information about worker performance needs to be stored using your information management system. This will make sure it is accurate, secure, and accessible when needed (Outcome 2.7).</p> <p>Monitor the effectiveness of strategies or processes to roster workers for quality and safe care and services.</p> <p>This is expected to include discussions with workers and older people, as well as review of older people's care and services, complaints, feedback, and incident information (Outcome 2.6 and Outcome 2.5) to understand if the resource needs of the organisation are being met. In particular, it needs to be established if enough appropriately skilled workers are available to deliver safe and quality care and services in line with the needs and preferences of older people.</p> <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>If you find any issues or ways you can improve through these activities, action would be taken to address these matters as they relate to individuals and/or the organisation more broadly. In line with Outcome 2.3, this is expected to include the practice of open disclosure and communication with older people, family, and carers when things go wrong.</p> <p>Refer to the guidance material for Standard 2 (Outcome 2.3) for further detail about monitoring of the quality systems.</p> <p>Monitor the implementation and effectiveness of the training system.</p> <p>This is expected to include completion of the following activities, to understand if workers have the needed capabilities and/or the supervision, support, and resources to perform their role as needed:</p> <ul style="list-style-type: none">• Discussions with workers and older people.• Review of complaints, feedback, and incident information (Outcome 2.6 and Outcome 2.5).• Completion of individual performance assessments.• Monitoring workers performing their role in practice.• Examination of training records to make sure training has been completed as needed. <p>It is expected that, if any issues or improvement opportunities are identified through these activities, action would be taken to address these matters as they relate to individuals and/or the organisation more broadly. In line with Outcome 2.3, this is expected to include the practice of open disclosure and communication with older people, family, and carers when things go wrong.</p> <p>Refer to the guidance material for Standard 2 (Outcome 2.3) for further detail about monitoring of the quality systems.</p>

Worker	
Actions	Associated activities
<p>2.9.1 The provider maintains records of worker pre-employment checks, contact details, qualifications, and experience.</p>	<p>Provide accurate information about your skills, qualifications, and experience.</p> <p>Information workers provide needs to be accurate to make sure workers are given the support they need to deliver quality and safe care and practices.</p> <p>Participate in training and other activities delivered to build competency.</p> <p>Workers should provide feedback on training and engage with content to help achieve any specific learning outcomes.</p> <p>Escalate any situations where you may be unavailable for a shift.</p> <p>This is to make sure management has enough time to identify alternative resourcing arrangements for continued delivery of safe and quality care for older people.</p> <p>Escalate any situations where you feel you need additional support to develop and/or use any skills relevant to your role.</p> <p>This can relate to any training, support or issues associated with the tools you have been provided to complete specific activities.</p> <p>Participate in performance reviews.</p> <p>Workers are expected to take part in performance reviews to make sure they understand how they can improve their performance moving forward. This should involve:</p> <ul style="list-style-type: none"> • Asking questions if they are unsure why they are receiving feedback. • Asking for support in areas identified for improvement. • Clarifying how they can deliver care and services that meets the Standards set by the governing body and provider organisation (Outcome 2.3).
<p>2.9.2 The provider deploys the number and mix of workers to enable the delivery and management of quality care and services.</p>	
<p>2.9.3 Workers have access to supervision, support and resources.</p>	
<p>2.9.4 The provider maintains and implements a training system that:</p> <p>a) Includes training strategies to make sure that workers have the necessary skills, qualifications and competencies to effectively perform their role</p> <p>b) Draws on the experience of older people to inform training strategies</p> <p>c) Is responsive to feedback, complaints, incidents, identified risks and the outcomes of regular worker performance reviews.</p>	
<p>2.9.5 The provider regularly reviews and improves the effectiveness of the training system.</p>	
<p>2.9.6 All workers regularly receive competency-based training in relation to core matters, at a minimum:</p> <p>a) The delivery of person-centred, rights-based care</p> <p>b) Culturally safe, trauma aware and healing informed care</p> <p>c) Caring for people living with dementia</p> <p>d) Responding to medical emergencies</p> <p>e) The requirements of the Code of Conduct, the Serious Incident Response Scheme, the Quality Standards and other requirements relevant to the worker's role.</p>	
<p>2.9.7 The provider undertakes regular assessment, monitoring and review of the performance of workers.</p>	

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.9:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT

Guidance for Outcome 2.10: Emergency and disaster management

What is the Outcome that needs to be achieved?

Emergency and disaster management planning considers and manages the risks to the health, safety and wellbeing of older people and workers.

Why is this Outcome important?

Outcome 2.10 explains how you, as a provider need to plan for emergency and disaster situations. You also need to make sure workers have the skills and resources to respond to any of these situations.

The following key concepts have been strengthened:

- Planning for emergencies and disasters.
- Engagement with older people, families, carers, and workers.
- Testing and review of emergency and disaster management plans.

How can you achieve Outcome 2.10 in practice?

Governing body	
Actions	Associated activities
<p>2.10.1 The provider develops emergency and disaster management plans that describe how the organisation and workers will respond to an emergency or disaster and manage risks to the health, safety and wellbeing of older people and workers.</p> <p>2.10.2 The provider implements strategies to prepare for, and respond to, an emergency or disaster.</p> <p>2.10.3 The provider engages with older people, family, carers and workers about the emergency disaster management plans.</p> <p>2.10.4 The provider regularly tests and reviews the emergency management plans in partnership with older people, family, carers, workers and other response partners.</p>	<p>Monitor the provider organisation’s performance in developing strategies about emergency and disaster management plans.</p> <p>The governing body:</p> <ul style="list-style-type: none"> • Is accountable for the organisation’s delivery of quality care and services (Outcome 2.2 and Outcome 2.3). • Needs to maintain oversight of all aspects of their operations by reviewing the organisation’s reports on the: <ul style="list-style-type: none"> – Management of emergency and disaster management plans. This includes sharing information about the emergency and disaster plans. – Management of complaints, feedback and incidents (Outcome 2.5 and Outcome 2.6). – The quality of care and services delivered by workers (i.e. performance assessments). – Management of emergency and disaster drill records. • Leads a culture of safety, inclusion and quality. This is done by monitoring and investigating priority areas identified in the reports listed above. If the governing body find any issues or ways the provider can improve through these reviews, the governing body need to address them. The governing body needs to provide feedback and support to the provider to be able to improve. <p>If things go wrong, the governing body needs to:</p> <ul style="list-style-type: none"> • Practice open disclosure. This means being open about what has gone wrong and sharing this information with older people, their family and carers. • Implement strategies to mitigate the risk of things going wrong again. <p>Further detail on this can be found at Outcome 2.3.</p> <p>When monitoring the provider organisation’s performance, this needs to include monitoring the performance of any subcontracted providers.</p>

Provider organisation	
Actions	Associated activities
<p>2.10.1 The provider develops emergency and disaster management plans that describe how the organisation and workers will respond to an emergency or disaster and manage risks to the health, safety and wellbeing of older people and workers.</p> <p>2.10.2 The provider implements strategies to prepare for, and respond to, an emergency or disaster.</p> <p>2.10.3 The provider engages with older people, family, carers and workers about the emergency disaster management plans.</p> <p>2.10.4 The provider regularly tests and reviews the emergency management plans in partnership with older people, family, carers, workers and other response partners.</p>	<p>Develop and implement emergency and disaster management plans.</p> <p>You need to design emergency and disaster management plans with the intent of reducing risks to the health, safety, and wellbeing of older people and workers.</p> <p>Emergency and disaster management plans need to be:</p> <ul style="list-style-type: none"> • Based on completion of an ‘emergency risk assessment’. The risk assessment is to find different emergency and disaster situations that can occur during delivery of care and services. These can include floods, fire or medical emergency. The risk assessment also helps to assess the responses needed by you and your workers to manage these scenarios. <ul style="list-style-type: none"> – In residential care, the emergency plan is applicable for all older people and workers, and considers additional supports that each older person needs. – In home care, the emergency plans need to cater to the individual and the home care environment. It is recommended that you complete risk assessments for home care in regional and rural communities with people from the area as they may understand certain risks that others may not (Outcome 4.1b). For example, high kangaroo activity on a certain road may pose a risk when travelling. Your risk management system and incident management systems need to be used in this process to find and manage new and unexpected situations. (Outcome 2.4 and Outcome 2.5). • Based on the context of the organisation. The emergency risk assessment needs to be used to determine if an emergency and disaster management plan specific to the service is needed. Alternatively, a high-level plan can be enough. In the context of home care, a higher-level plan can be enough if it is supported by a broader risk assessment for each home setting (Outcome 4.1b). The broad risk assessment for each home setting needs to assess any challenges to responding to emergencies in each individual home environment. For example, during heatwaves and in flood prone areas. • Developed with older people, their family, carers, workers and other response partners. This is to make sure the processes cater to older people’s needs (Outcome 2.1 and Outcome 1.1). • Shared with older people and their families through a variety of means. This can be by displaying the plans on noticeboards or email alerts (Outcome 2.2 and Outcome 3.3). • Tested on a periodic basis. Use a variety of different emergency scenarios included in an emergency drill schedule. If you find any deficiencies through these tests, you need to improve the emergency plans. Deficiencies can be workers being unsure of what to do. Drills need to be done with workers, older people, their families and carers, and other response partners (Outcome 2.1). For example, you can complete fire drills in consultation with Australasian Fire Authorities Council. These drills can also include scenarios like power outages and internet outages, if needed. <p style="text-align: right;"><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>If an actual emergency event happens, you need to re-evaluate the responses and emergency management plans to validate if they worked well and make changes as necessary.</p> <ul style="list-style-type: none">• Inclusive of processes to respond quickly to outbreaks of infectious diseases. You need to do this even if the disease is suspected (Outcome 4.2). You can develop an outbreak management plan using information from: Managing a COVID-19 outbreak in residential aged care Department of Health and Aged Care. <p>More information on how to prepare for emergency events can be found at Service continuity and emergency events Department of Health and Aged Care.</p> <p>Note: 'Response partners' may include government agencies, the State Emergency Service, other service providers, community organisations, local health services, local public health units etc.</p> <p>Conduct periodic emergency drills.</p> <p>You need to plan and do emergency drills. You need to test a variety of different emergency scenarios. If you find any deficiencies in the emergency plans, you need address them. Tests need to happen with workers, older people, their families and carers, and other response partners (Outcome 2.1). Response partners can include:</p> <ul style="list-style-type: none">• Government agencies.• State Emergency Service.• Other service providers.• Community organisations.• Local health services.• Local public health units. <p>Make sure the workers who provides care have the time, support and resources to use the processes within emergency and disaster management plans.</p> <p>The Commission expects you to develop and follow a workforce strategy that considers:</p> <ul style="list-style-type: none">• Transitions of care.• Assessing workers' abilities during the hiring process. <p>Providing workers with guidance and training about their roles and responsibilities in an emergency and disaster scenario. Training and guidance need to be in line with:</p> <ul style="list-style-type: none">• The organisation's policies and procedures.• Their roles and responsibilities. <p>More details about this can be found in guidance material for Outcome 2.9.</p> <p><i>Continued on the next page</i></p>

Provider organisation (continued)	
Actions	Associated activities
	<p>Monitor the implementation and effectiveness of strategies associated with emergency and disaster management plans.</p> <p>To understand if the emergency and disaster management plans are effective, you need to:</p> <ul style="list-style-type: none">• Have conversations with workers, older people, their families, and carers.• Review of complaints, feedback, and incident information (Outcome 2.6 and Outcome 2.5).• Assess emergency and disaster drill records. <p>If any issues or opportunities for improvement are identified through reviews and assessments, these need to be addressed. If things go wrong, you need to be open about it and share this information with older people, family, and carers (Outcome 2.3).</p> <p>You can find more information on monitoring the quality system in the guidance material for Outcome 2.3.</p>

DRAFT

Worker	
Actions	Associated activities
<p>2.10.1 The provider develops emergency and disaster management plans that describe how the organisation and workers will respond to an emergency or disaster and manage risks to the health, safety and wellbeing of older people and workers.</p> <p>2.10.2 The provider implements strategies to prepare for, and respond to, an emergency or disaster.</p> <p>2.10.3 The provider engages with older people, family, carers and workers about the emergency disaster management plans.</p> <p>2.10.4 The provider regularly tests and reviews the emergency management plans in partnership with older people, family, carers, workers and other response partners.</p>	<p>Participate in emergency management drills.</p> <p>Depending on their specific role, workers may:</p> <ul style="list-style-type: none"> • Take part in emergency drills. • Provide feedback about any improvements to emergency plans and response processes. • Engage with emergency wardens to help improve ways to support older people in these scenarios. • Ask for feedback from older people about emergency management drills. <p>Escalate any emergency or disaster situations that need to be responded to.</p> <p>Depending on their specific role, workers may:</p> <ul style="list-style-type: none"> • Need to support older people during actual emergency situations. • Need to follow the processes found in the emergency and disaster management plans. • Engage with emergency respondents. These are the police, fire and ambulance service.

What are the key resources that can be referred to?

The following key resources relate to Outcome 2.10:

- [TO BE COMPLETED]

Key legislation relevant to this outcome includes:

- [TO BE COMPLETED]

Other provider obligations include:

- [TO BE COMPLETED]

The content for this page is still under development and will be included in the final versions of the Guidance material.

DRAFT



DRAFT

The Aged Care Quality and Safety Commission acknowledges the Traditional Owners of country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.



Phone
1800 951 822



Web
agedcarequality.gov.au



Write
Aged Care Quality and Safety Commission
GPO Box 9819, in your capital city