

Aged Care Quality and Safety Commission

# Providers | Regulating aged care

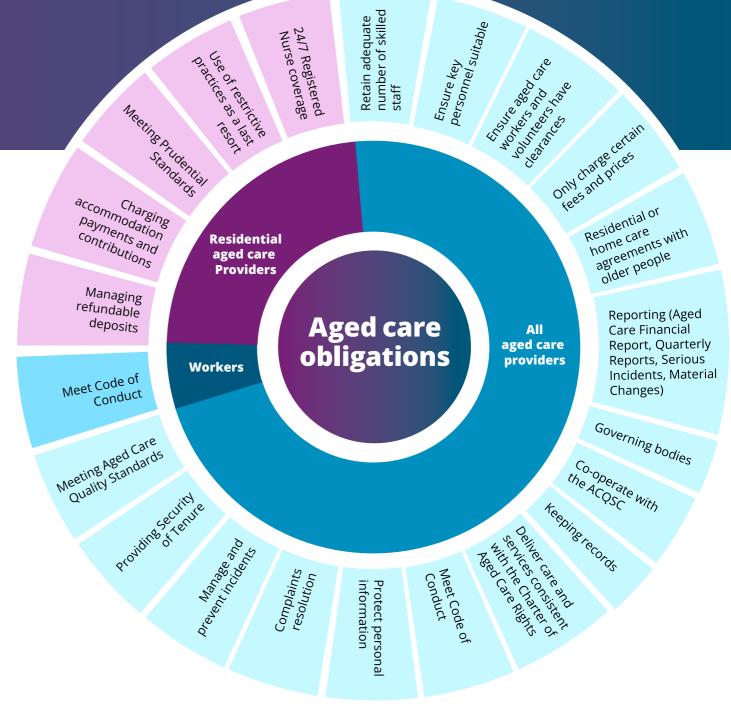
# Our core purpose is to protect the rights of older people to receive high-quality, safe care. To achieve this, we work with aged care providers and workers to make excellence in aged care the standard.

We want you, older people and the public to have trust in our capability as the regulator of aged care. This includes confidence that our regulatory approach is timely, consistent and proportionate.

We will support high-quality care by monitoring your compliance, engaging with you on how you manage risks and correct any failures in care, and building sector capability more broadly by providing information and education.

Holding you to account for the care provided in your services is a core function of the national regulator. We do this through risk profiling, which involves bringing together information from multiple sources to develop a comprehensive understanding of risk across your services, at the provider level and more broadly in the sector. This analysis underpins our efficient detection, assessment and response to risk.

Under our provider supervision model, we continually monitor risk. Where we find risk or noncompliance including failures in care, we will expect you to fix the problem, restore the trust of older people in your care, and take action to prevent the problem from happening again. These expectations are reinforced through our engagement with you. If you are assessed as being high risk, you will experience a greater intensity of supervision and engagement with us until you have resolved the issues of concern.



# **Provider supervision model**



## **Risk surveillance**

Providers in the low-risk cohort with no specific risk or compliance concerns.

## **Targeted supervision**

The Commission is engaging with providers to manage specific events or issues.

## **Active supervision**

Providers are assigned an active supervision status where high-level risks are identified that are most effectively dealt with at a provider level.

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Only a small number of providers will be assigned into heightened supervision, representing a cohort that is the highest risk caseload and one the Commission has most concern over.





# **Heightened supervision**

# The regulatory tools we use depend on the risks to older people, the nature of any failures in care and how quickly and effectively you correct the problem.

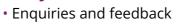
Prompt, successful remediation by the provider will generally avoid a formal regulatory response from us. We will use our regulatory tools where providers are unwilling or unable to respond to risks and issues guickly and effectively. Where non-compliance has resulted in significant harm to older people, or is serious or systemic in nature, we may take enforcement action. This includes circumstances where you or a worker have failed to take agreed actions under a supervised non-compliance management process, or where a breach of the Code of Conduct is determined. Enforcement actions are designed to apply a penalty and enforce a consequence for the non-compliance. Using enforcement actions in the right circumstances deters future non-compliance from all providers and workers, by reinforcing the requirement for obligations to be met.

This holistic approach to regulation will allow us to act quickly and decisively to respond to risks and make sure that older people and their care remains your priority.

# What we expect from providers all the time



# Dailv



- Complaints
- Workers concerns
- Reportable incidents
- Media

# Quarterly

- Financial
- Staffing
- Food and nutrition
- Quality indicators
- (e.g. pressure injuries, unplanned weight loss, medication management, physical restraint, falls)



The Commission's risk analysis model

Commission risk analysis for sector and program trends

# What we expect from providers

# Remedy

Providers understand and fix what went wrong.

#### Restore

Providers listen to and partner with older people to restore their trust in care.

#### Prevent

Providers take action to prevent the issue from happening again.

Annually

- Financial statements
- Prudential compliance statements
- Consumer experience interviews
- Provider governance and operations information
- Provider governing body statement

## As required

- Site audits
- Risk-based monitoring
- Material changes
- Referrals from other agencies
- Research and publications

Commission engagement with providers and workers about risk