



Australian Government

Aged Care Quality and Safety Commission

Stronger Standards, Better Aged Care Program

20 June 2023

Stronger Standards
Better Aged Care



Session outline

- Regulatory Framework
- Strengthening the Standards – what is changing
- Sector support
- Panel discussion
- Questions and answers



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Our panellists

- **Janet Anderson PSM**, Aged Care Quality and Safety Commissioner
- **Lisa Peterson PSM**, Assistant Commissioner Sector Capability, Aged Care Quality and Safety Commission
- **Emma Jobson**, Executive Director, Regulatory Policy and Intelligence, Aged Care Quality and Safety Commission
- **Josh Maldon**, Assistant Secretary, Choice and Transparency Branch, Department of Health and Aged Care
- **Tim Humphries**, Chief Executive Officer, Homestyle Aged Care Services
- **Sharon Blackburn CBE**, Executive Director, Ballycara
- **Jane Pappin**, Managing Director, Pop-Up Health



New Regulatory Model

The department is seeking feedback from all interested stakeholders on the paper *A new model for regulating Aged Care, Consultation Paper No.2*

Feedback is required by 5pm AEST, 23 June 2023

Paper:

<https://www.health.gov.au/resources/publications/a-new-model-for-regulating-aged-care-consultation-paper-2-details-of-the-proposed-new-model>

Survey:

<https://agedcareengagement.health.gov.au/engagement/consultation-open-on-a-new-model-for-regulating-aged-care/>



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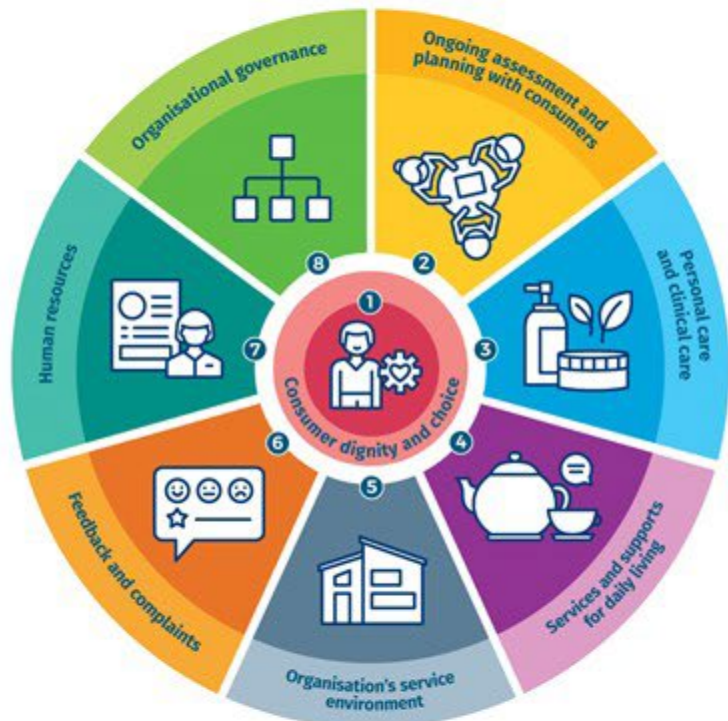
Proposed registration categories

| Provider | Description | Service types |
|-------------------|---|---|
| Category 1 | Home and community services | <ul style="list-style-type: none"> • Domestic assistance • Home maintenance and repairs • Meals • Transport |
| Category 2 | Assistive technology and home modifications | <ul style="list-style-type: none"> • Digital technologies • Digital monitoring, education, and support • Goods, equipment, and assistive technologies (non-digital) • Home modifications |
| Category 3 | Social support | <ul style="list-style-type: none"> • Social support |
| Category 4 | Clinical and specialised supports | <ul style="list-style-type: none"> • Personal care • Care management • Transition care services in the home • Specialised supports • Assistance with care and housing (hoarding and squalor support) • Nursing • Allied health |
| Category 5 | Home or community based respite | <ul style="list-style-type: none"> • Respite (home and community based) |
| Category 6 | Residential care | <ul style="list-style-type: none"> • Accommodation Services • Residential respite • Care and services • Transition care services (residential) • Transition care support services (residential) |

Obligations architecture for the provider registration

| Registration Category 1 Home and Community Service | Registration Category 2 Assistive technology and home modifications | Registration Category 3 Social Support | Registration Category 4 Clinical and specialised supports | Registration Category 5 Home or Community based respite | Registration Category 6 Residential care |
|---|---|---|--|--|---|
| Provider registration | | | | | |
|  |  |  |  |  |  |
| Standard registration period | | | | | |
| 3 years | 3 years | 3 years | 3 years | 3 years | 3 years |
| Registration / re-registration process | | | | | |
| Digital declaration | Digital declaration | Digital declaration | Quality assessment | Quality assessment | Quality assessment |
| Obligations architecture | | | | | |
| <p>Conditions that apply to all providers (e.g. the Code of Conduct for Aged Care)</p> <p>Conditions that apply to all providers – specific requirements and evidential requirements vary</p> | | | | | |
| Category-specific conditions | Category-specific conditions | Category-specific conditions | <ul style="list-style-type: none"> • Category-specific conditions • Quality Standards 1–4 • Quality Standards (Clinical Care) | <ul style="list-style-type: none"> • Category-specific conditions • Quality Standards 1–4 • Quality Standards (Clinical Care) | <ul style="list-style-type: none"> • Category-specific conditions • Quality Standards 1–4 • Quality Standards (Clinical Care; Food & Nutrition; The Residential Community) |
| Conditions applied to address provider-specific risks (e.g. additional reporting requirements imposed to address an identified risk) | | | | | |
| Risk-based monitoring to confirm a provider’s ongoing suitability to deliver aged care services (including complaints and other regulatory intelligence) | | | | | |

Strengthened Aged Care Quality Standards



More information about the draft strengthened Standards:
<https://www.health.gov.au/resources/publications/strengthened-aged-care-quality-standards-pilot-program>

Understanding the strengthened Standards

The Commission has compared the current Standards against the draft strengthened Standards to show where the Standards have been strengthened.

Our framework for explaining the changes:

1. Actions which **align directly with existing requirements** under the current Quality Standards
Actions identified with the same intent and focus as current requirements
2. Actions which align with **existing provider responsibilities** in the current legislation
Actions which are currently in legislation and have been lifted into the strengthened Standards
3. Actions which **clarify existing requirements** under the current Quality Standards
Actions which have been clarified to be more specific and or explicit
4. Actions which are **new or enhanced**
Actions which are new, including those which relate to recommendations from the Royal Commission
Actions where we are dialing up our expectations of care



| Draft Strengthened Standards | Number of actions associated with this standard | Number of actions which align with existing Quality Standard requirements | Number of actions which align with other existing provider responsibilities within the legislation | Number of actions which clarify existing requirements within the current Quality Standards | Number of actions that introduce new concepts or enhanced expectations in comparison to the current Quality Standards |
|---|---|--|---|---|--|
| Standard 1: The Person | 21 | 5 | 7 | 9 | |
| Standard 2: The Organisation | 46 | 7 | 8 | 25 | 6 |
| Standard 3: The Care and Services | 21 | 4 | | 15 | 2 |
| Standard 4: The Environment | 7 | 2 | | 5 | |
| Standard 5: Clinical Care | 38 | 3 | | 27 | 8 |
| Standard 6: Food and Nutrition | 10 | | | 4 | 6 |
| Standard 7: The Residential Community | 9 | | 1 | 8 | |
| | 152 | 21 | 16 | 93 | 22 |
| | | 14% | 11% | 61% | 14% |

Examples of actions which align with other existing provider responsibilities within the legislation



Standard 1: The Person

Standard 1 incorporates requirements from the:

- Charter of Aged Care Rights in relation to:
 - Older people maintaining their autonomy
 - Older people being involved in decision making
- Quality of Care Principles in relation to reportable incidents
- User Rights Principles in relation to:
 - Access to advocates
 - Terms articulated within care agreements
- Code of Conduct in relation to ensuring worker screening
- Financial & Prudential Principles in relation to transparency of fees and charges

Standard 2: The Organisation

Standard 2 incorporates requirements from the:

- Aged Care Act, Accountability Principles and Records Principles, in relation to reporting requirements
- Quality of Care Principles, in relation to incident managements requirements
- Code of Conduct in relation to responding to concerns and complaints

Examples of actions which clarify current Quality Standard requirements



Standard 3:
The Care and
Services

- The introduction of the concept of reablement in relation to optimising wellness for the older person
- More explicit requirements to identify and respond to deterioration in health
- More explicit requirements to identify others involved in the older person's care and ensuring care coordination, with a focus on transitions of care
- Partnership requirements clarified to explicitly reference recognition of carers as partners in the older person's care

Standard 4:
The Environment

- More explicit requirements regarding identifying and managing environmental risks for workers, including in home care settings

Standard 5:
Clinical Care

- Articulating specific requirements in relation to clinical assessments of older people
- The introduction of the concept of mobility in relation to falls management (prevention, reablement)
- More detailed requirements in relation to specific clinical care needs and comprehensive care

Standard 7:
The Residential
Community

- Privacy requirements expanded to include personal spaces
- Requirements regarding activities of daily living clarified to explicitly reference minimising boredom and loneliness for older people

Examples of actions which **introduce new concepts** or **enhanced expectations in comparison to the current Quality Standards**



Standard 2:
The Organisation

- Ensuring delivery of care is trauma-aware and healing informed
- Actions regarding partnering with and reporting to older people in respect of provider governance decisions

Standard 5:
Clinical Care

- Clinical care is articulated as a Standard
- Requirements regarding safe and quality use of medicines, including consideration of polypharmacy
- Enhanced clinical governance requirements and enhanced requirements for working with other health professionals

Standard 6:
Food and
Nutrition

- Food and nutrition is articulated as a Standard
- Introduction of requirements regarding development of menus in partnership with older people and relevant health professionals
- Explicit requirements regarding having sufficient workers to support food provision

Program timeframes - indicative

December 2022

October 2024

Public consultation - strengthened Quality Standards

Consultation activities by Department

Design & test a new audit method

Design new audit methodology and run a pilot program with providers

Feedback on Pilot Outcomes

Feedback to Sector and Department on Pilot outcomes.

New Aged Care Act

New Act passed.
Final strengthened Quality Standards published.

Release of guidance materials

Final guidance materials and learning resources released.

Continued support and resources

Provide intensive support to stakeholders to embed practices

Draft strengthened Quality Standards released

Draft Standards available to ACQSC to design implementation.

Public Consultation – New Regulatory Framework

Consultation activities by Department

Design the change support

Design the transition steps and change support.

Readiness Test

End to end testing of method, processes and support materials to confirm readiness

Go live

Strengthened Quality Standards in place.

Monitor & Reflect

Assess ways of working and adjust where required.

Continuous change management, stakeholder engagement, communications activities

Tell us the most useful thing that the Commission can do to help you prepare for the strengthened Standards?

Explain expectations

Be clear about the evidence

Templates

Early communication

Sufficient time to prepare and implement

Mapping current standards to new ones

Self-assessment tools

Provide information and tools early

Clear guidelines on what is best practice

Provide assessment criteria and methodologies

Eliminate pure subjectivity

Funding to support education

Easy to understand information

Direct contact number and email for information

Step-by-step clear and concise guide

Be patient



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What is the most important thing you need to do to be ready for the strengthened Standards?

Include clinicians in education Understanding the requirements

Board buy-in Keep up-to-date

Building internal capability

Gap analysis to inform policy review then EDUCATION

Stabilise staff recruitment and turnover

Formalise clinical governance

More specific examples

Time to prepare, with proper direction

Education especially for non English-speaking backgrounds

Indepth understanding

Education for staff and residents on expectations

Funding Stable workforce

Stay informed

Understand how it will be impacted by residents who have cognitive impairments





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Panel discussion

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Questions



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