



# Quality in Aged Care

## THE ASK:

All older Australians have the right to consistent, safe, high quality and consumer-centred care regardless of cultural beliefs, diversity, values and needs. To deliver that care governing bodies must implement processes and frameworks to manage the quality and safety of the services being delivered.

## Covered in this Topic Guide

- Quality in aged care
- Role of the governing body
- Continuous improvement and care planning
- Clinical governance

## Where are we now?



*Most aged care providers want to improve the quality of life of older Australians, and that means having good systems and processes to oversee and manage quality. That can have a big impact on the remainder of their lives, and it falls on the governing body to ensure this happens.*

GOVERNING BODY MEMBER

## Key concepts

The following high-level definitions are provided to assist in interpreting some of the key concepts discussed in this Topic Guide:

- **Consumer-centred care** is described as care and services designed around an individual's needs, preferences and background. It includes a partnership between consumers and providers.
- **Safeguarding** is the actions taken to protect the human rights, health and wellbeing of older Australians to ensure they feel valued, safe and heard.
- **Continuous improvement** is the ongoing effort to improve the quality of care and services provided by a service
- **Clinical governance** is an integrated set of leadership behaviours, policies, procedures, responsibilities, relationships, planning, monitoring and improvement mechanisms that are implemented to support safe, quality clinical care and good clinical outcomes.

## Quality in aged care

The Charter of Aged Care Rights, under the Aged Care Act 1997, safeguards the rights of a consumer receiving residential, home or community aged care. Providers of Commonwealth-subsidised aged care services are required to comply with the Aged Care Act 1997 and its subordinate legislation, including the Aged Care Quality Standards (Quality standards). Governing bodies and executives should consider the needs, culture, safety and wellbeing of consumers in care and adhere to the Charter of Aged Care Rights and the Aged Care Quality Standards. This includes ensuring that the needs and preferences of culturally and linguistically diverse (CALD) communities and Aboriginal and Torres Strait Islanders are built into care services.

## Reflecting on your practice



### Think...

Below are the top things you need to be **thinking** about:

- Do all governing body members understand their duties when it comes to delivering quality, inclusive and safe care?
- How do my provider's continuous improvement processes feed into the structural improvements related to delivering quality care to consumers?
- How do the governing body and executives oversee clinical governance, including minimising the use of restrictive practices?



### Ask and say...

Below are the top **questions you need to be asking**:

- How is feedback from consumers, their families and the workforce about the quality of care brought to the attention of the governing body and executives?
- What quality management systems are in place to support quality outcomes for older Australians?
- Does the provider have a documented quality improvement plan?
- What data and assurance are the governing body getting about clinical and quality indicators?



### Do...

These are the top **actions and behaviours** of leaders:

- Establish regular forums and reporting protocols where the governing body can oversee the management of embedding quality, inclusive and safe practices (i.e. including consumer quality stories at the start of every governing body meeting agenda).
- Listen to the consumers and value their feedback in improving quality and safety.
- Monitor the outcomes of performance assessments by the Aged Care Quality and Safety Commission and ensure that systemic issues are identified and addressed through continuous improvement and care planning.
- Ensure that everyone understands their role in ensuring the quality of service delivery and provide clear avenues to develop a quality culture.

## Tips for delivering quality aged care

### Older Australians at the Centre of Care

- Ensure high quality services and care are driven by consumer needs.
- Understand and capture the expectations that consumers have of quality.

### Obligations and Accountabilities

- Continually review quality assessments and compliance processes to support effective clinical governance and safety.

### Knowledge, Skills and Experience

- Ensure employees are appropriately qualified and skilled for their roles with training and performance assessment.

### Leadership and Culture

- Instil a culture of high quality service delivery across all aspects of the provider's activities.
- Encourage your provider to innovate their services and systems to drive quality improvement

## What is quality management?

The provision of quality service is core business for providers. A quality management system supports the delivery of safe, consistent, high quality, and efficient aged care services by:

- identifying issues in the delivery of care to consumers
- monitoring compliance with the Quality Standards
- implementing improvements and encouraging continuous improvement of the provider.

The Aged Care Quality Standards reflect the level of care and services the community can expect from providers that provide Commonwealth-subsidised aged care services. The Quality Standards provide a benchmark for care procedures and outcomes against which a provider can measure itself. The Quality Standards comprise 8 individual standards, namely:



## Elements of an effective quality management framework

The Aged Care Quality Standards will apply differently across providers, depending on the types of care and services they provide. Many providers will go beyond these core requirements to provide a higher quality of care and services for consumers. The elements underpinning the framework are:

- demonstrating a commitment to consumers, representatives, staff and community
- actively demonstrating a 'we' approach
- creating a culture of reflective practice and continuous improvement
- understanding that managing quality is everyone's business
- openly communicating improvements
- promoting a 'no-blame' culture
- recognising individual contributions
- performing cost benefit analyses.

Integral to a good quality management framework is that the processes for compliance are documented and are well understood by staff. The governing body has overall responsibility for the oversight of quality management, and any delegation of responsibility for managing and leading quality improvement should be clearly communicated and monitored.

## Role of the governing body

The governing body is responsible for the overall effectiveness and performance of the provider. This includes ensuring that services are well planned, meet the needs of consumers and are delivered to the best possible level of quality by:

- developing and pursuing provider goals of service excellence, which can include innovative solutions, and 'thinking outside the box' about how best to deliver services
- ensuring that the provider has a quality management system and that internal controls are in place to comply with relevant standards, current legislation and requirements of the Quality Indicator Program.
- overseeing the implementation of robust risk management practices that address systemic issues
- monitoring the results of quality activities and making changes as needed
- ensuring compliance with reporting and related requirements.

## Working with senior staff

In order to provide leadership in quality management, the governing body needs to work with senior staff to:

- foster a positive attitude to quality improvement across the staff team
- implement policy and procedures for quality management that will provide guidance to staff
- identify and communicate key quality indicators for the service
- establish documentation and reporting processes that will enable the ongoing tracking of quality improvement
- deliver quality outcomes for individuals – services are effective when they successfully meet the needs of people and improve their situation.

## Continuous improvement and care planning

### What is continuous improvement?

Continuous improvement is an ongoing effort to improve the quality of care and services provided by a service. It is a process which:

- considers the needs of consumers and may involve them in improvement activities
- is part of an overall quality system that assesses how well a provider's systems are working and the standard of care and services achieved
- is a results-focused activity that identifies opportunities for improvements and systematically implements change to improve quality over time.

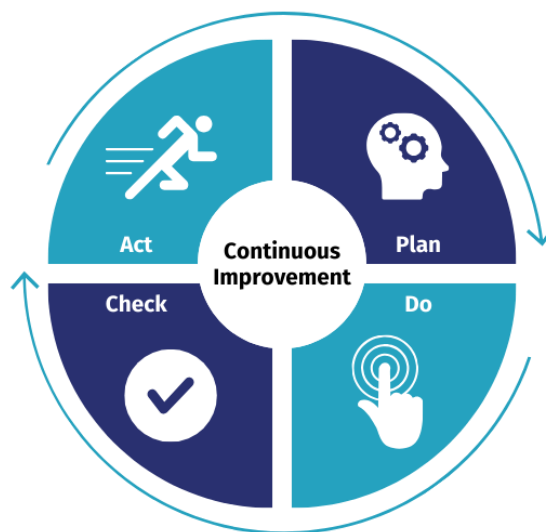
Continuous improvement initiatives may range in scale from minor incremental improvements to systems and processes to significant strategic initiatives and should aim to lift the quality of services provided to deliver improved outcomes for consumers. To be effective, continuous improvement must be central to a provider's focus, understood at all levels, and accepted and put into practice by all management and staff.

Under the Aged Care Quality Standards (Standard 8), providers of aged care services are required to be accountable for the delivery of safe and quality care and services. This includes having effective organisation-wide governance systems relating to continuous improvement.

Standard 8 requirement 3(c) organisations must have a plan for continuous improvement and check their progress against this plan to improve the quality and safety of care services.

The Plan for Continuous improvement must be in writing and set out how the provider will:

- assess the quality of care and services provided against the Quality Standards
- monitor and improve the quality of care and services as measured against the Quality Standards
- check if there are any areas in which improvements in relation to the service are needed to ensure that the Quality Standards are complied with, and determine how those improvements will be made.



## Care planning

Care plans assist providers in tailoring services to suit the culture, needs, goals and wellbeing of individual consumers. Governing bodies must oversee the effectiveness of management by incorporating human rights principles into care planning.

Providers are obligated to undertake initial and regular assessments and care plan reviews in collaboration with consumers. Quality assessments and care plan reviews need to take into consideration:

- a consumer's values, beliefs and culture
- their goals and needs, wellbeing and what is important to them
- factors that impact a consumer's health
- the resources available and currently missing from their care to optimise their health
- communicating the care plan with the workforce (clinical and non-clinical) to ensure senior Australians are living their best life

To facilitate effective care plans, providers should consider:

- what additional resources a consumer needs to have access to maintain their connection to local community support services and social groups

- having community visiting schemes within aged care facilities to supplement where services are not available to older Australians from diverse and vulnerable backgrounds
- ensuring free and paid services of clinical and non-clinical care are available for all consumers to support older Australians live their best life.

## Quality indicators

Quality indicators are the way consumer outcomes and the quality of services provided are evaluated. They are the measures of how well a provider is carrying out its work and achieving its aims. They do not provide data for drawing instant conclusions about the quality of care. Governing bodies should note that a less than optimal performance in a specific quality indicator does not necessarily mean a provider has a poor-quality system or substandard care, but rather see this as an opportunity for improvement.

Providers are required to report on 11 quality indicator standards through the Quality Indicator Program relating to:

- pressure injuries
- physical restraint
- unplanned weight loss
- falls and major injury
- medication management including polypharmacy and anti-psychotics
- activities of daily living
- incontinence care
- hospitalisation
- workforce
- consumer experience
- quality of life.

These indicators are tools to help the provider identify performance issues, flag concerns and prompt them to make improvements to care and submit data through the My Aged Care Provider portal. Data recording templates have been developed to assist with calculating data for each quality indicator. If a standard is not met, there may be compliance action for the provider.

## Risk and quality oversight

It is important that there are assurance processes in place to prioritise the quality and safety of clinical care to adhere to Quality Standard 8(3)(e) Organisational Governance. Governing bodies are accountable for ensuring there are systems and processes in place to identify and mitigate emerging risks associated with clinical care, such as COVID-19 and antibiotic-resistant infections.



## Management of high impact or high prevalence risks

Providers need to ensure they can manage all risks related to personal and clinical care, which are largely operational risks. Providers are expected to manage risks related to the care of each consumer in line with the consumer's care plan as part of their duty of care obligation. For high-impact or high-prevalent risks, providers are expected to use risk assessments to find ways to reduce these risks. These assessments should be undertaken in consultation with the consumer. There is a lack of consistency between aged care providers when it comes to conducting regular risk assessments for all consumers. It is important that providers balance effective risk management practices and a duty of care with an older Australian's right to control the care they receive, and the risks taken.

## Clinical governance

Commonwealth-subsidised aged care providers must operate an effective clinical governance framework, if they offer clinical care to consumers of Residential Aged Care, Home Care Packages, Short Term Restorative Care, Multi-Purpose Services Program and National Aboriginal and Torres Strait Islander Flexible Aged Care Program.

### Clinical governance framework

Clinical governance is an integrated set of leadership behaviours, policies, procedures, responsibilities, relationships, planning, monitoring and improvement mechanisms that are implemented to support safe, quality clinical care and good clinical outcomes for each consumer. Its purpose is to support the workforce and visiting practitioners in your service to provide safe, quality clinical care as part of a holistic approach to aged care that is based on the needs of each consumer.

A governing body is responsible for overseeing clinical governance to ensure a provider's work practices and policies align with the Aged Care Quality Standards and comply with the requirements regarding incident management and reporting under the Serious Incident Response Scheme.

Regular reporting on all aspects of clinical care will need to be provided to the governing body in order to oversee and challenge a provider's response to identifying and mitigating clinical risks and identifying and resolving consumer concerns and complaints.

All aged care providers who provide clinical care must meet the requirements under Standard 8 of the Aged Care Quality and Safety Standards and have 'a clinical governance framework' that includes but is not limited to:

- ensuring dignity and respect of consumers (including minimising the use of restraint)
- open disclosure
- antimicrobial stewardship.

## Minimising the use of restraint

From 1 July 2021, approved providers have updated specific responsibilities under the Aged Care Act (1997) and the Quality of Care Principles (Principles) relating to the use of any restrictive practice in residential aged care and short-term restorative care in a residential care setting. Restrictive practices must only be used as a last resort and in the least restrictive form.

Providers are required to satisfy a number of conditions before and during the use of any restrictive practice. From 1 July 2021:



- Restrictive practices must only be used where the provider has documented changed behaviours (or behaviours of concern) for the consumer, where these changed behaviours have been assessed by an approved health practitioner who has day-to-day knowledge of the consumer, or a behaviour support specialist, alternative strategies have been used prior to the use of any restrictive practice, and consent to the use of any restrictive practice if required.
- The provider is required to document the alternatives to restrictive practices that have been considered and used and why they have not been successful.
- The provider is required to have a clinical governance framework in place to minimise the use of restrictive practices. Where a restrictive practice is used, such a framework needs to ensure that informed consent for the restrictive practice has been obtained from the consumer or their restrictive practices substitute decision-maker.
- Where any restrictive practices are used, the consumer must be regularly monitored for signs of distress or harm, side effects and adverse events, changes in wellbeing, as well as independent functions or ability to undertake activities of daily living (ADLs).
- The use of restrictive practice must be regularly reviewed by the provider with a view to removing it as soon as possible or practicable.

From 1 September 2021, providers are also required under the Principles to have a Behaviour Support Plan in place for every consumer who exhibits behaviours of concern or a change in behaviour or who has restrictive practices considered, applied or used as part of their care. The Behaviour Support Plan forms part of the care and services plan and does not replace it.

The Quality of Care Amendment (Restrictive Practices Principles 2022, which commenced on 1 December 2022, set out a temporary hierarchy of persons or authorised bodies who can give informed consent where restrictive practices are necessary, and a consumer is unable to provide consent or where restrictive practices substitute decision-maker has not already been appointed. The changes will give certainty to consent arrangements in states and territories that do not have arrangements permitting another person to provide consent for restrictive practices use on a consumer's behalf.

## Open disclosure

Open disclosure is the open discussion that an aged care provider has with consumers and their families when something goes wrong that has harmed or had the potential to cause harm to a person receiving aged care services. Open disclosure is a critical element of incident management. Hence, governing bodies must ensure an open disclosure framework forms part of clinical and corporate governance practices.

The principles of open disclosure in an aged care context:

- Dignity and respect
- Privacy and confidentiality
- Transparency
- Continuous quality improvement

As part of their open disclosure process, providers must ensure that clear escalation channels to the governing body are in place. It is also important that providers engage directly with consumers and their families or representatives to understand how service delivery can be improved in such a way that supports better consumer outcomes and individual choice. Governing bodies should therefore receive regular data and analysis of the number of open and closed incidents over a period (e.g. monthly, quarterly, year). The governing body will be responsible for overseeing the executive team's investigation into how the events occurred and what actions have been taken to mitigate future risks and improve practices across all aspects of service delivery.

## Antimicrobial stewardship

Antimicrobial stewardship (AMS) is the careful and responsible management of medications used to treat or prevent infections. AMS involves activities that promote and support best practice antimicrobial prescribing and use. Governing bodies are required to demonstrate actions to minimise infection-related risks to consumers, the workforce and the broader community by:

- having a clinical governance framework that describes the approach of a service to ensure the quality and safety of clinical care related to AMS
- implementing practices to promote appropriate prescribing and use of antimicrobial medication in consultation with visiting medical officers
- supporting optimal care of residents
- reducing the risk of increasing resistance to antimicrobials.

## Useful references and links

[Aged Care Act 1997](#)

[Quality Standards | Aged Care Quality and Safety Commission](#)

[Guidance resources | Aged Care Quality and Safety Commission](#)

[Resource Library | Aged Care Quality and Safety Commission](#)

[ISO 31000:2018 Risk Management](#)

[Open Disclosure](#)

[Effective incident management systems: Best practice guidance](#)

[Charter of Aged Care Rights](#)

[Quality of Care Principles 2014](#)

[Minimising the use of restrictive practices | Aged Care Quality and Safety Commission](#)