



The New Aged Care Quality Standards

Eva Tilley Memorial Home
2019

About the new Aged Care Quality Standards



The new Standards will replace the [existing standards](#):

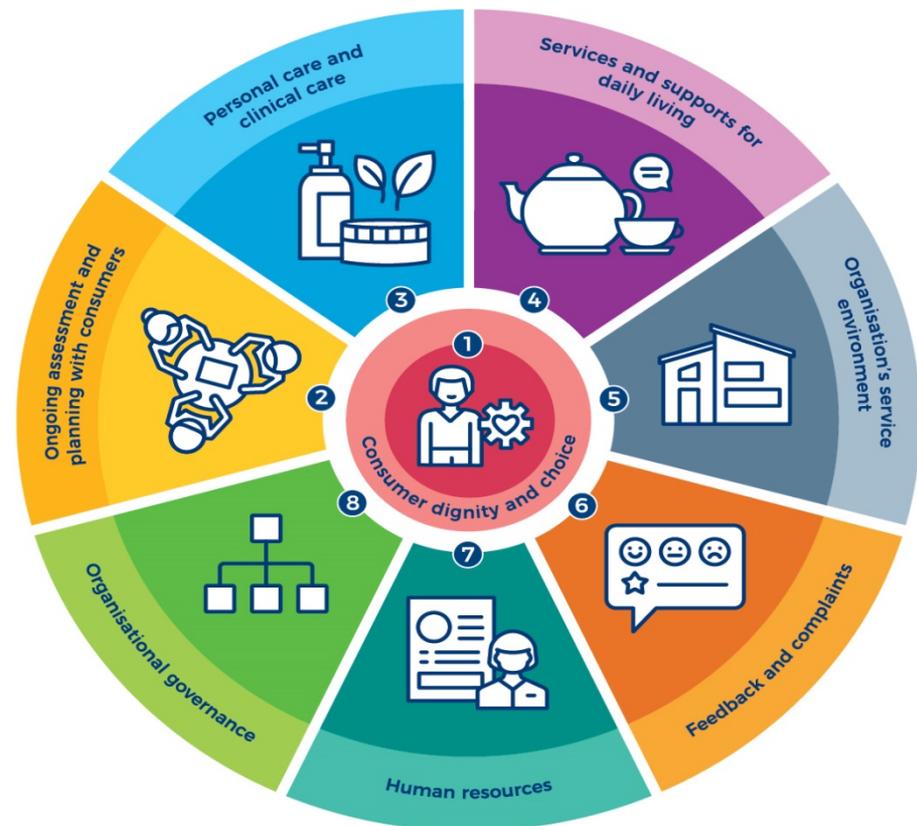
- Accreditation Standards
- Home Care Standards
- National Aboriginal and Torres Strait Islander Flexible Aged Care Program Quality Framework Standards
- Transition Care Standards.

The Aged Care Quality Standards will apply to all aged care services including residential care, home care, flexible care and services under the Commonwealth Home Support Programme.

The Aged Care Quality Standards were developed by the Department of Health in collaboration with consumers, carers, aged care providers, aged care workers, clinicians and other experts.



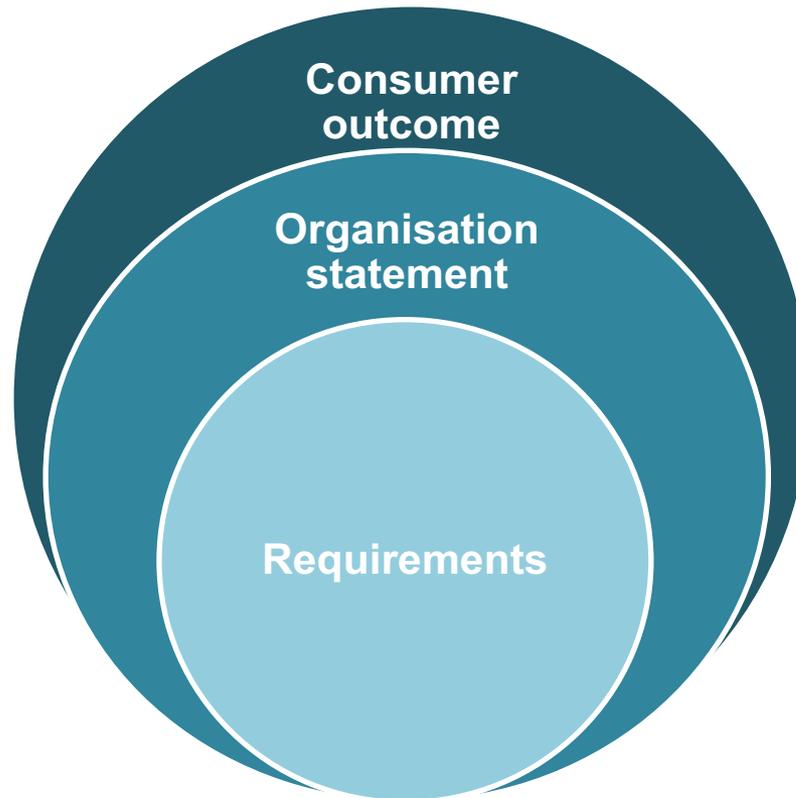
- The new Aged Care Quality Standards have a stronger focus on quality outcomes for consumers.
- There is one set of Standards for all aged care services.
- Residential Aged care services will be assessed against all of the eight standards.
- We will be having new and different conversations in our workplace.



- The NEW Aged Care Quality Standards are made up of eight individual standards:
- 1. Consumer dignity & choice
- 2. Ongoing assessment & planning with consumers
- 3. Personal & clinical care
- 4. Services & supports for daily living
- 5. Organisation's service environment
- 6. Feedback & complaints
- 7. Human resources
- 8. Organisational governance



- Each of the Standards is expressed in three ways



Standard 1

Consumer dignity and choice

Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

Organisation statement:

2. The organisation:
a) has a culture of inclusion and respect for consumers; and
b) supports consumers to exercise choice and independence; and
c) respects consumers' privacy.

Requirements:

3. The organisation demonstrates the following:

- a) Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.
- b) Care and services are culturally safe.
- c) Each consumer is supported to exercise choice and independence, including to:
 - i) make decisions about their own care and the way care and services are delivered; and
 - ii) make decisions about when family, friends, carers or others should be involved in their care; and
 - iii) communicate their decisions; and
 - iv) make connections with others and maintain relationships of choice, including intimate relationships.
- d) Each consumer is supported to take risks to enable them to live the best life they can.
- e) Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.
- (f) Each consumer's privacy is respected and personal information kept confidential.

Standard 2

Ongoing assessment and planning with consumers

Consumer outcome:

1. I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

Organisation statement:

2. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer.

Assessment and planning has a focus on optimising health and well-being in accordance with the consumer's needs, goals and preferences

Requirements:

3. The organisation demonstrates the following:
- a) Assessment and planning, including consideration of risks to the consumer's health and well-being, informs the delivery of safe and effective care and services.
 - b) Assessment and planning identifies and addresses the consumer's current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.
 - c) Assessment and planning:
 - i) is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer's care and services; and
 - ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.
 - d) The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.
 - e) Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

Standard 3

Personal care and clinical care

Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

Organisation statement:

2. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer's needs, goals and preferences to optimise health and well-being.

Requirements:

3. The organisation demonstrates the following:

- a) Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:
 - i) is best practice; and
 - ii) tailored to their needs; and
 - iii) optimises their health and well-being.
- b) Effective management of high-impact or high-prevalence risks associated with the care of each consumer.
- c) The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.
- d) Deterioration or change of a consumer's mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.
- e) Information about the consumer's condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.
- f) Timely and appropriate referrals to individuals, other organisations and providers of other care and services.
- g) Minimisation of infection-related risks through implementing:
 - i) standard and transmission-based precautions to prevent and control infection; and
 - ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

Standard 4

Services and supports for daily living

Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

Organisation statement:

2. The organisation
The organisation provides safe and effective services and supports for daily living that optimise the consumer's independence, health, well-being and quality of life.

Requirements:

3. The organisation demonstrates the following:
- a) Each consumer gets safe and effective services and supports for daily living that meet the consumer's needs, goals and preferences and optimise their independence, health, well-being and quality of life.
 - b) Services and supports for daily living promote each consumer's emotional, spiritual and psychological well-being.
 - c) Services and supports for daily living assist each consumer to:
 - i) participate in their community within and outside the organisation's service environment; and
 - ii) have social and personal relationships; and
 - iii) do the things of interest to them.
 - d) Information about the consumer's condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.
 - e) Timely and appropriate referrals to individuals, other organisations and providers of other care and services.
 - f) Where meals are provided, they are varied and of suitable quality and quantity.
 - g) Where equipment is provided, it is safe, suitable, clean and well maintained.
- * **Services and supports for daily living** include, but are not limited to, food services, domestic assistance, home maintenance, transport, recreational and social activities.

Standard 5

Organisation's service environment

Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation's service environment.

Organisation statement:

2. The organisation provides a safe and comfortable service environment that promotes the consumer's independence, function and enjoyment.

Requirements:

3. The organisation demonstrates the following:
- a) The service environment is welcoming and easy to understand, and optimises each consumer's sense of belonging, independence, interaction and function.
 - b) The service environment:
 - i) is safe, clean, well maintained and comfortable; and
 - ii) enables consumers to move freely, both indoors and outdoors.
 - c) Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

* An organisation's **service environment** refers to the physical environment through which care and services are delivered, including aged care homes, cottage style respite services and day centres. An organisation's service environment does not include a person's privately owned/occupied home through which in-home services are provided.

Standard 6

Feedback and complaints

Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

Organisation statement:

2. The organisation
The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

Requirements:

3. The organisation demonstrates the following:

- a) Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.
- b) Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.
- c) Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.
- d) Feedback and complaints are reviewed and used to improve the quality of care and services.

Standard 7

Human resources

Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

Organisation statement:

2. The organisation
The organisation has a workforce that is sufficient, and is skilled and qualified to provide safe, respectful and quality care and services.

Requirements:

3. The organisation demonstrates the following:

- a) The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.
- b) Workforce interactions with consumers are kind, caring and respectful of each consumer's identity, culture and diversity.
- c) The workforce is competent and members of the workforce have the qualifications and knowledge to effectively perform their roles.
- d) The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.
- e) Regular assessment, monitoring and review of the performance of each member of the workforce.

Standard 8

Organisational governance

Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

Organisation statement:

2. The organisation
The organisation's governing body is accountable for the delivery of safe and quality care and services.

Requirements:

3. The organisation demonstrates the following:
- a) Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.
 - b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.
 - c) Effective organisation wide governance systems relating to the following:
 - i) information management
 - ii) continuous improvement
 - iii) financial governance
 - iv) workforce governance, including the assignment of clear responsibilities and accountabilities
 - v) regulatory compliance
 - vi) feedback and complaints
 - d) Effective risk management systems and practices, including but not limited to the following:
 - i) managing high-impact or high-prevalence risks associated with the care of consumers
 - ii) identifying and responding to abuse and neglect of consumers
 - iii) supporting consumers to live the best life they can.
 - e) Where clinical care is provided — a clinical governance framework, including but not limited to the following:
 - i) antimicrobial stewardship
 - ii) minimising the use of restraint
 - iii) open disclosure.

Training Calendar - Transition to the new Aged Care Quality Standards 1 July 2019

		Jan	Feb	March	April	May	June
Training/Meetings	Person responsible						
Residents/Other Consumers Review 2 standards each meeting	QM & TM		20 Introduction Standards 1 & 2 (handout & power point)	15 Standards 3 & 4 (handout & power point)	16 Standards 5 & 6 (handout & power point)	14 Standards 7 & 8 (handout & power point)	5 Overview (handout & power point)
Board Directors			9 – Board Strategic Planning – presentation e.g. Standard 8 (including self-assessment)				
Senior Management Online training with power point presentation (Aged Care Quality and Safety Commission)	QM & TM	29 & 31(TM & QM) Strategic planning in readiness to transition	9 – Board Strategic Planning 12 (emailed to staff) Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	14 (staff meeting) 1hr Review (face to face) Standards 1,2,3,& 4	11 (emailed to staff) Online (self-learning) Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19	9 (staff meeting) 1hr Review (face to face) Standards 5,6, 7 & 8	18 (staff meeting) Review our understanding of the new standards
Registered Nurses Online training with power point presentation (Aged Care Quality and Safety Commission)	QM & TM		12 (emailed to staff) Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	14 (staff meeting) 1hr Review (face to face) Standards 1,2,3,& 4	11 (emailed to staff) Online (self-learning) Introduction & Standards 5,6,7,&8 Learning review questionnaire by 18/4/19	9 (staff meeting) 1hr Review (face to face) Standards 5,6, 7 & 8	18 (staff meeting) Review our understanding of the new standards
Care Staff Online training with power point presentation (Aged Care Quality and Safety Commission)	QM & TM		12 (emailed to staff) Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	14 (staff meeting) 1hr Review (face to face) Standards 1,2,3,& 4	11 (emailed to staff) Online (self-learning) Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19	9 (staff meeting) 1hr Review (face to face) Standards 5,6, 7 & 8	18 (staff meeting) Review our understanding of the new standards Learning review/questionnaire - scope of practice

Training Calendar - Transition to the new Aged Care Quality Standards 1 July 2019

Training/Meetings	Person responsible	Jan	Feb	March	April	May	June
Catering	QM & TM		12 (emailed to staff)	14 (staff meeting) 1hr	11 (emailed to staff)	9 (staff meeting) 1hr	18 (staff meeting)
Online training with power point presentation (Aged Care Quality and Safety Commission)			Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	Review (face to face) Standards 1,2,3,& 4	Online (self-learning) Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19	Review (face to face) Standards 5,6, 7 & 8	Review our understanding of the new standards Learning review/questionnaire - scope of practice
Lifestyle & volunteers	QM & TM		12 (emailed to staff)	14 (staff meeting) 1hr	11 (emailed to staff)	9 (staff meeting) 1hr	18 (staff meeting)
Online training with power point presentation (Aged Care Quality and Safety Commission)			Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	Review (face to face) Standards 1,2,3,& 4	Online (self-learning) Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19	Review (face to face) Standards 5,6, 7 & 8	Review our understanding of the new standards Learning review/questionnaire - scope of practice
Maintenance	QM & TM		12 (emailed to staff)	14 (staff meeting) 1hr	11 (emailed to staff)	9 (staff meeting) 1hr	18 (staff meeting)
Online training with power point presentation (Aged Care Quality and Safety Commission)			Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	Review (face to face) Standards 1,2,3,& 4	Online (self-learning) Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19	Review (face to face) Standards 5,6, 7 & 8	Review our understanding of the new standards Learning review/questionnaire - scope of practice
Administration	QM & TM		12 (emailed to staff)	14 (staff meeting) 1hr	11 (emailed to staff)	9 (staff meeting) 1hr	18 (staff meeting)
Online training with power point presentation (Aged Care Quality and Safety Commission)			Online (self-learning) Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19	Review (face to face) Standards 1,2,3,& 4	Online (self-learning) Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19	Review (face to face) Standards 5,6, 7 & 8	Review our understanding of the new standards Learning review/questionnaire - scope of practice
External Contractors	QM & TM		12 (emailed to staff)		11 (emailed to staff)		
Vivir / Elite			Online (self-learning)		Online (self-learning)		
Online training with power point presentation (Aged Care Quality and Safety Commission)			Introduction & Standards 1,2,3 & 4 Learning review questionnaire by 19/2/19		Introduction & Standards 5,6,7,& 8 Learning review questionnaire by 18/4/19		

Transition to the new Aged Care Quality Standards 1 July 2019

Transition of:	Plan
Current Policy and Procedures (Leapfrog)	February - July 2019 Leapfrog have provided updates and planned update guide to align to the new standards during the transition period February <ul style="list-style-type: none"> - commence referencing all policies and procedures to the new Aged Care Quality Standards (provided by Leapfrog) - Update each index of the manuals with the changed names of documents referencing to the Aged Care Quality Standards - New name for the Health and Lifestyle Manual – change to the Health and Wellbeing Manual to align with the new standards
Audit tools/ Surveys/handbooks	February - July 2019 updated as relevant in line with procedure updates
CI plan	Maintain a live continuous improvement plan
Risk management	Maintain a live risk register
Software- Manad	Updated new versions in line with the new standards – Manad
Readiness of/for:	Plan
Unannounced Visit	Entry documents required by the auditors -readily available – location
Customer Expectation	

KEY CONSIDERATIONS



Consumer Choice - Consumer Directed Care, Consumer Focused Care

“Consumer Directed Care (CDC) is a model of service delivery designed to give more choice and flexibility to consumers. Consumers who receive a Home Care Package will have more control over the types of care and services they access and the delivery of those services, including who delivers the services and when.” (www.myagedcare.health.gov.au)



The six principles of Consumer Directed Care:

- consumer choice and control
- rights
- respectful and balanced partnerships
- participation
- wellness and re-ablement
- transparency



Eva Tilley Services

- ❖ Clinical Care
- ❖ Catering
- ❖ Lifestyle
- ❖ Laundry
- ❖ Cleaning
- ❖ Physiotherapy
- ❖ Hairdressing
- ❖ Pharmacy

Residents' Charter of Rights and Responsibility

Each resident of a residential care service has the RIGHT:

- to full and effective use of his or her personal, civil, legal and consumer rights;
- to quality care appropriate to his or her needs;
- to full information about his or her own state of health and about available treatments;
- to be treated with dignity and respect, and to live without exploitation, abuse or neglect;
- to live without discrimination or victimisation, and without being obliged to feel grateful to those providing his or her care and accommodation;
- to personal privacy;
- to live in a safe, secure and homelike environment, and to move freely both within and outside the residential care service without undue restriction;
- to be treated and accepted as an individual, and to have his or her individual preferences taken into account and treated with respect;
- to continue his or her cultural and religious practices, and to keep the language of his or her choice, without discrimination;
- to select and maintain social and personal relationship with anyone else without fear, criticism or restriction;
- to freedom of speech;
- to maintain his or her personal independence, which includes a recognition of personal responsibility for his or her own actions and choices, even though some actions may involve an element of risk which the resident has the right to accept, and that should then not be used to prevent or restrict those actions;
- to maintain control over, and to continue making decisions about, the personal aspects of his or her daily life, financial affairs and possessions;
- to be involved in the activities, associations and friendships of his or her choice, both within and outside the residential care service;
- to have access to services and activities available generally in the community;
- to be consulted on, and to choose to have input into, decisions about the living arrangements of the residential care service;
- to have access to information about his or her rights, care, accommodation and any other information that relates to the residents personally;
- to complain and to take action to resolve disputes;
- to have access to advocates and other avenues of redress; and
- to be free from reprisal, or a well-founded fear of reprisal, in any form for taking action to enforce his or her rights.

Each resident of a residential care service has the RESPONSIBILITY:

- to respect the rights and needs of other people within the residential care service, and to respect the needs of the residential care service community as a whole;
- to respect the rights of staff and the proprietor to work in an environment free from harassment;
- to care for his or her own health and well-being, as far as he or she is capable; and
- to inform his or her medical practitioner, as far as he or she is able, about his or her relevant medical history and current state of health.

Reference: *Charter of Residents' Rights and Responsibilities* available at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/ageing-publicat-resicharter.htm>