

Health Quality and Complaints Commission Select Committee

***Submission by Aged Care Queensland  
Incorporated***

*August 2007*

Research Director  
Health Quality and Complaints Commission Select Committee  
Parliament House  
George Street  
BRISBANE QLD 4000

Dear Ms Groth

Thank you for the opportunity to provide a submission to the Committee.

Aged Care Queensland Incorporated ("ACQI") is the peak industry body representing providers of 'aged care' in the broadest sense – whether the care and accommodation services are delivered in a home or community setting, in a nursing home, or in a retirement village. Our members include churches, charities, and local government and 'for-profit' groups; all united in a common concern to provide aged and community care, and retirement services, of excellence.

We are aware that the definition of "health service" under the *Health Quality and Complaints Commission Act 2006* would cover many of the services provided by our members, and our interest is in avoiding duplication with the other bodies and authorities charged with supervising and monitoring the delivery of aged care services. (The levels of oversight and scrutiny which already apply to aged care providers under the Aged Care Act (Commonwealth) are outlined in the attachment; together with a description of the role of the Office of Aged Care Quality and Compliance, the Aged Care Complaints Investigation Scheme, the Aged Care Commissioner, and the Aged Care Standards and Accreditation Agency.)

We have met with the Chief Executive Officer of the Health Quality and Complaints Commission ("the Commission") to outline these concerns about the potential for jurisdictional overlap and confusion, and were reassured to learn that a Memorandum of Understanding ("MOU") is to be negotiated with the Commonwealth Department of Health and Ageing ("the Department"). We were offered the opportunity to be involved in the development of that MOU, and look forward to being part of this process.

We understand that the MOU may maintain an existing protocol whereby the initial investigation of issues relating to aged care is undertaken through the agencies of the Commonwealth, with the Commission retaining an oversight role.

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In her letter to the State Manager of the Department dated 26 February, the Chief Executive Officer explicitly acknowledged the concerns of our members, *"particularly as it related to primacy of investigation and duplication of monitoring processes for standards being set"*. In an accompanying letter to ACQI, she referred to the release of draft standards, and noted *"their application is to the individual practitioners for the clinical standards, and when applying the non clinical standards the HQCC would expect that appropriate cross reference to the Aged Care Standards and Accreditation Agency standards would occur for aged care facilities..."*

The Committee is asked to review and report (inter alia) *"whether the Commission has made satisfactory progress toward implementation of ...policies, procedures and systems to resolve complaints in a timely and responsive manner, and strategies to proactively engage providers and other entities about the quality of health services..."*. ACQI welcomes the Commission's commitment to negotiate protocols recognising that aged care providers are already subject to a comprehensive and rigorous set of standards under the Aged Care Act, and an extremely robust and well-resourced complaints investigation regime.

For example, in relation to Standard 1 ("Review of Hospital Related Deaths") we were concerned to avoid any additional administrative burden upon aged care providers. In relation to Standard 5 ("Complaint Management") we sought clarification and recognition that the Aged Care Act already imposes a comprehensive code for complaints management, allied with an independent investigatory body. We queried whether Standard 7 ("Providers' Duty to Improve the Quality of Health Services") acknowledged the fact that continuous improvement is a central plank of each of the standards in residential aged care, and that therefore there was no need for an additional level of audit, risk assessment in this area of service provision.

We would be pleased to provide the Committee with more information about the role and nature of aged care provision, and the impact of existing oversight mechanisms and their potential interaction with the Commission's jurisdiction.

Yours faithfully

Allan Pidgeon  
Chief Executive Officer

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The 500 aged care homes in Queensland, and the providers of aged care packages under the Aged Care Act, are subject to a comprehensive and widespread regime of monitoring, assessment and oversight.

**(1) Office of Aged Care Quality and Compliance**

The Office of Aged Care Quality and Compliance, within the Department of Health and Ageing, has been established to provide a focus on the quality improvement of care and services to care recipients in Australian Government subsidised aged care services. The Office manages national programs in relation to:

- Compliance with legislation;
- User rights;
- Aged care workforce;
- Clinical care; and
- Prudential Regulation.

( <http://www.healthconnect.gov.au/internet/wcms/publishing.nsf/content/ageing-quality-about.htm> )

**(2) Aged Care Complaints Investigation Scheme**

The Aged Care Complaints Investigation Scheme is available to anyone who wishes to provide information or make a complaint about an Australian Government subsidised aged care service that may need to be investigated. It replaces the former Aged Care Complaints Resolution Scheme. The new scheme provides a greater capacity for the Department of Health and Ageing to investigate concerns raised and take action where an approved provider breaches their responsibilities under the *Aged Care Act 1997*, and:

- is a free service which investigates concerns raised about the health, safety and/or well-being of people receiving aged care;
- has the power to investigate these concerns and require the service provider, where appropriate, to take action; and
- is able to refer issues that may be more appropriately dealt with by others (eg. police, nurses and medical registration boards).

Anyone may provide information (by way of complaint or otherwise) to the Scheme in relation to anything that may be a breach of an approved provider's responsibilities under the Act or the *Aged Care Principles 1997* (the Principles). **The person providing information may do so openly, anonymously, or may ask the Scheme to keep their identity confidential.** Information can be provided orally via the Scheme's dedicated phone line (1800 550 552 - freecall).

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### **Aged Care Complaints Investigation Scheme (cont)**

The Scheme covers both residential and community aged care services subsidised under the *Aged Care Act 1997*. Community care includes Extended Care at Home (EACH), Extended Care at Home Dementia (EACHD) and Community Aged Care Packages (CACPs). The Scheme will:

- facilitate the assessment and investigation of complaints by appropriately trained staff from the Office of Aged Care Quality and Compliance;
- provide a system for prioritising complaints;
- facilitate the resolution of complaints where this is possible;
- determine whether or not a breach of the approved provider's responsibilities has occurred;
- issue Notices of Required Action (NRA) to providers who have breached their responsibilities under the legislation, and take compliance action where the provider fails to remedy the issue; and
- provide feedback to the complainant and the approved provider on the outcome

Complaints can be received from:

- residents of aged care homes;
- people receiving community aged care packages or flexible care; or
- relatives, guardians or representatives of those receiving care.

The scheme employs 24 investigators in this state whose responsibility is solely to investigate and manage complaints received in respect of Queensland aged care providers.

### **(3) The Aged Care Commissioner**

The Aged Care Commissioner holds a statutory appointment and is independent of the Department of Health and Ageing and the Aged Care Standards and Accreditation Agency. The Aged Care Commissioner will look at examinable decisions made by the Office in relation to the investigation of complaints. The Commissioner also has the capacity to examine, as a result of a complaint or on their own initiative ('own motion'), the Department's processes for investigating complaints. The Commissioner can also examine the conduct of the Aged Care Standards and Accreditation Agency regarding its responsibilities under the Accreditation Grant Principles, including the conduct of a person carrying out an audit, or making a support contact.

The Commissioner will make recommendations to the relevant body (either the Department or the Aged Care Standards and Accreditation Agency) regarding the outcomes of such examinations.

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**(4) Aged Care Standards and Accreditation Agency**

The core functions of the Agency are:

- Manage the residential aged care accreditation process using the Accreditation Standards
- Promote high quality care and assist industry to improve service quality by identifying best practice, and providing information, education and training
- Assess and strategically manage services working towards accreditation
- Liaise with the Department of Health and Ageing about services that do not comply with the relevant Standards

Accreditation is the evaluation process that aged care homes must undergo to receive government payments which subsidise care and accommodation costs under the Aged Care Act 1997. There are four Accreditation Standards:

- Management systems, staffing and organisational development
- Health and personal care
- Resident lifestyle
- Physical environment and safe systems.

Within the four Accreditation Standards are 44 expected outcomes - refer to <http://www.accreditation.org.au/AccreditationStandards> .

To become accredited, aged care homes must show how they meet the 44 expected outcomes of the Accreditation Standards and must undertake continuous improvement. Specially qualified aged care assessors visit a home and speak with staff, management, residents and their families, to determine whether the home meets all the Accreditation Standards and expected outcomes. The Agency then makes a decision about how long a home is accredited. Even after a home receives accreditation, the Agency continues to monitor homes to ensure residents continue to receive a high level of care and that all standards continue to be met. **Agency assessors are entitled to make unannounced visits (“spot checks”) to any aged care home at any time.**

Homes must also show to the Agency that they regularly seek feedback from staff, residents and their families, and look at ways they can improve.

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**(5) Queensland Aged and Disability Advocacy (QADA) Inc.**

In addition to the government agencies and statutory authorities outlined above, the Commonwealth Government funds the Queensland Aged and Disability Advocacy Inc. This is a not-for-profit community-based statewide advocacy service funded to provide information, education, support and representation to enable people to understand and exercise their rights and their responsibilities.

QADA provides advocacy services to:

- recipients of Australian Government Aged Care services  
eg. residential care, EACH and CACP packages;
- recipients of Home and Community Care (HACC) services; and
- carers of these recipients.