

Establishment of a National Aged Care Mandatory Quality Indicator Program for in-home aged care services

Consultation survey



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Overview

The Department of Health and Aged Care (Department) is undertaking an open public consultation on the establishment of a National Aged Care Mandatory Quality Indicator Program (QI Program) for in-home aged care services.

The QI Program aims to help people find information about the quality of aged care services, assist providers in measuring and improving the quality of their services, and support Government to make evidence-based policy.

The Department is collaborating with HealthConsult, the University of Queensland's Centre for Health Services Research, and the South Australian Health and Medical Research Institute to investigate how best to establish the QI Program.

We are interested in gathering feedback from stakeholders on the key issues that need to be considered when establishing a QI Program for in-home care services, including the scope of services covered, implementation strategy, timing, and priority quality indicators (QIs). Through this public consultation, the Department aims to ensure that the QI Program is robust, practical, and effective in improving the quality of care for older people receiving in-home aged care services.

The survey should take you about 15-20 minutes to complete.

A copy of the survey is below to allow you to see all of the questions asked and prepare the responses in advance.

Please take the time to read the consultation paper before you fill in the survey. This will assist you in answering the questions and provide contextual information about the proposed QI Program for in-home aged care services.

This survey will close on 9 July 2024.

If you or someone you know has something they would like to share about the QI Program but cannot complete this survey, please contact the HealthConsult team at QI@healthconsult.com.au.

Why your views matter

This consultation is open to all who would like to contribute and share their views, including:

- older people receiving in-home aged care services
- family members, carers or representatives of someone receiving in-home aged care services
- aged care providers and health professionals
- advocacy groups and professional bodies representing aged care workers
- aged care peak bodies, and
- interested members of the public.

Your feedback is critical in shaping the design and implementation of the QI Program and will help ensure that it effectively promotes continuous quality improvement and enhances the well-being of older people receiving in-home aged care services.

Please take the time to read the consultation paper before you fill in the survey: Consultation Paper - National Aged Care Mandatory Quality Indicator Program for In-Home Aged Care Services

Introduction and contact information

The survey should take you about 15-20 minutes to complete.

We acknowledge that people are responding to this survey from various perspectives. When completing the survey, please answer the questions relevant to your personal or professional role.

At any stage, you may stop, save your answers and return to the survey later.

Once you have submitted your response, you will be taken to the completion page where there is the option to provide your email address if you would like to receive a summary of your answers.

If you experience any IT issues while completing the survey, or if you have difficulty with the online survey, please send an email to Ql@healthconsult.com.au to arrange an alternative way to provide your response.

If you have any other questions about the survey questions or content, please email QI@healthconsult.com.au.

- 1. What is your name?
- 2. What is your email address?
- 3. Who is your employer?

Privacy Notice

Your personal information is protected by law, including the Privacy Act 1988 and the Australian Privacy Principles.

The Department of Health and Aged Care will share data from this survey with a third party who is engaged to analyse and report on the findings from the survey. The Department will not disclose your personal information.

You can get more information about the way in which the Department will manage the information you provide, including our privacy policy,

at: https://www.health.gov.au/resources/publications/privacy-policy.

You can contact the Department of Health and Aged Care by telephone on (02) 6289 1555 or free call 1800 020 103 or by using the online enquiries form at www.health.gov.au.

- 4. Which stakeholder group best describes you? Please tick all that apply. Please select all that apply
 - Federal Government
 - State Government
 - Local Government
 - Private aged care provider
 - Not-for-profit aged care provider
 - Regional/local private aged care provider
 - Regional/local not-for-profit aged care provider
 - Academic or researcher
 - Health professional working in aged care
 - Participant/person receiving in-home aged care services
 - Family member or carer of a person receiving in-home aged care services
 - Advocacy group or professional body representing aged care workers
 - Aged care peak body
 - Interested member of the public
 - Other

If other, please specify.

Part 1: Services/providers covered by the QI Program

The Support at Home program will replace Home Care Packages and Short-Term Restorative Care Programme from 1 July 2025. The Commonwealth Home Support Programme will transition into the Support at Home Program no earlier than 1 July 2027.

To minimise the impact on the sector, it is proposed that the QI Program be implemented 12 months after the commencement of the Support at Home program (1 July 2026).

It is proposed that the QI Program will apply to all services and supports under the new Support at Home Program. This would include ongoing and short-term services, as well as clinical and non-clinical services, such as personal care, nursing, allied health, domestic assistance, and social support.

- 5. Do you agree that the QI Program should apply to all services and supports under the new Support at Home Program? Please select only one item
 - Yes
 - No

Part 2: Implementation strategy

Recognising the complexity of implementing a QI Program for in-home aged care services, it is proposed that there will be a staged implementation, beginning with a small number of QIs (between one and three), followed by a period of data collection before deciding when and how to expand the number of QIs for in-home aged care services.

- 6. To what extent do you agree with this implementation strategy? Please select only one item
 - Agree
 - Somewhat agree
 - Neither agree nor disagree
 - Somewhat disagree
 - Not applicable

(Optional) Please provide further comments about your response, including any suggested alternatives or considerations of the implementation strategy:

- 7. When selecting the initial quality indicators for the staged implementation of the QI Program, which approach do you believe would be most effective? Please rank the options in order of priority, with 1 being the most effective and 3 being the least effective.
 - Start with quality indicators that have the broadest application across all in-home aged care services and participants
 - Start with quality indicators that focus on participants with higher care needs and/ or more complex service types
 - A balanced approach that includes a mix of broadly applicable and higher-risk focused quality indicators, to address both the general needs of the in-home aged care population and the specific needs of high-risk groups.

(Optional) Please provide any additional comments or rationale for your preferred approach to selecting the initial quality indicators for the staged implementation of the QI Program.

Part 3: Implementation timing

To minimise the impact on the sector, it is proposed the QI Program would be implemented no earlier than 12 months after the launch of the Support at Home program, i.e. no earlier than July 2026.

8. Do you consider an implementation date of 1 July 2026 achievable? If not, what would be a preferred implementation timeframe and why?

Part 4: Priority Quality Indicators

Based on an evaluation of the types of QIs identified through an evidence review, it is proposed that QIs be developed and prioritised in the following seven key areas of care:

- Consumer experience: The perspective of the person receiving care on the quality of care and services they receive
- Quality of life: How satisfied a person is with their life, including emotional, physical, material and social wellbeing
- Function: A person's ability to perform basic daily activities and how it changes over time
- Service delivery/care planning: Whether care is planned and individualised for each aged care recipient
- Workforce: The staffing levels, skill mix and training of aged care workers
- Weight loss/nutrition: Unintended weight loss and malnutrition in older adults, which can lead to poor health outcomes
- Falls/fractures/injury: The occurrence and prevention of falls, fractures and injuries in older people
- 9. Do you agree that QIs focusing on these seven areas should be given the highest priority for development and implementation?
 - Yes
 - No
 - Not applicable

(Optional) Are there any other critical areas of care that you believe should be prioritised for quality indicator development that are not covered by the seven areas listed above?

- 10. Considering a staged implementation of the QI Program, please rank the following areas in order of priority, with 1 being the highest priority and 7 being the lowest priority.
 - Consumer experience

- Quality of life
- Function
- Service delivery/care planning
- Workforce
- Weight loss/nutrition
- Falls/fractures/injury

(Optional) Please provide any additional comments or rationale for your ranking, particularly for the areas you ranked as the highest and lowest priorities.

11. Based on the interviews, focus groups, and evidence review conducted in preparation for this public consultation, in-home care participants, providers, advocacy groups, professional bodies, and peak bodies have emphasised the importance of consumer experience.

To what extent do you agree that consumer experience should be a priority area for quality indicator development and implementation?

Please select only one item

- Agree
- Somewhat agree
- Neither agree nor disagree
- Somewhat disagree
- Disagree
- Not applicable

(Optional) Please provide further comments about your response.

Person-centred care is fundamental to a positive consumer experience and is central to the strengthened Aged Care Quality Standards.

A consumer experience quality indicator will need to align to and reinforce the principles of person-centred care outlined in the strengthened Aged Care Quality Standards. This includes factors such as supporting older people to exercise choice and make decisions about their care and services, providing timely and accessible information, promoting autonomy and quality of life, and monitoring and responding to changes in the older person's well-being.

While there are many factors that can influence consumer experience and the delivery of person-centred care, some are likely to be more important than others. By identifying and prioritising these critical factors, we can ensure that the consumer experience quality indicator is focused, relevant, actionable, and consistent with the principles of person-centred care as outlined in the strengthened Aged Care Quality Standards.

12. How important are the following factors in shaping a positive consumer experience and delivering person-centred care? Please rank the following factors in order of priority, with 1 being the highest priority and 13 being the lowest priority.

- Understanding and valuing the older person's identity, culture, abilities, diversity, beliefs, and life experiences
- Empathy and respect shown by care or service delivery staff
- Continuity of care (e.g. having the same care staff over time)
- Supporting older people to exercise choice and make decisions about their care and services, with support when needed
- Emotional and social support provided by care staff
- Tailoring care and services to the older person's needs, goals, and preferences
- Timeliness and reliability of services
- Providing timely, accurate, and accessible information to enable informed decision-making
- Involvement of participants in decision-making about their care
- Promoting the older person's autonomy and quality of life through positive risk-taking
- Communication and information sharing with participants and families
- Monitoring and responding to changes in the older person's quality of life
- Coordination and integration of care services
- Competency and skill of care and service delivery staff

(Optional) Please provide any additional comments or rationale for your ranking, particularly for the factors you ranked as the highest and lowest priorities.

Part 5: Questions for providers

The next section is only for providers and people responding on behalf of providers. If you are not responding on behalf of a provider, go to Section 6.

In implementing the new QI Program for in-home care, the Department will provide the sector the following supports and services:

- guidance materials
- dedicated QI Program support within the Department to respond to enquiries
- case studies or examples of successful QI programs
- workshops and/or webinars on the QI Program
- access to comparative data with other providers
- regular updates and communications about the QI Program

14. (Optional) Are there any other supports needed?

We recognise that many providers already have quality management systems in place and may be collecting information related to various quality indicators. The following question aims to better understand current practices and identify opportunities for alignment with the proposed QI Program.

15. Are you currently collecting information related to any of the following areas? Please select all that apply.

Please select all that apply

- Consumer experience
- Quality of life
- Function
- Service delivery/care planning*
- Workforce
- Weight loss/nutrition
- Falls/fractures/injury
- None of the above

(Optional) If you are collecting information related to any of the above areas, please provide details on what you are collecting, who is collecting the data and how frequently.

We are interested in learning more about how providers currently collect and use consumer experience information to inform quality improvement efforts.

16. What tools do you currently use to collect information related to a consumer's experience? Please select all that apply.

Please select all that apply

- N/A
- Net Promotor Score
- Consumer Experience Reports
- Quality of life measure (QOL-ACC)
- Quality of care experience measure (QCE-ACC)
- The Australian Hospital Patient Experience Question Set
- Other

If other, please specify.

17. How often do you collect consumer experience information? Please select all that apply.

Please select all that apply

- N/A
- Continuously (ongoing feedback)
- Quarterly
- Every 6 months
- Annually
- Ad hoc (as needed)
- Other

If other, please specify.

18. What methods do you currently use to collect consumer experience information? Please select all that apply.

Please select all that apply

- N/A
- Paper-based surveys
- Online surveys (via email or website)
- SMS or mobile app surveys
- Face-to-face interviews
- Telephone interviews
- Focus groups
- Other

If other, please specify.

19. (Optional) Please provide any additional comments or insights regarding the tools, frequency, and methods you use to collect consumer experience information, and how you use this information to inform quality improvement efforts.

Part 6: Summary

20. (Optional) Please provide any additional comments or feedback you feel is important for consideration in the development and implementation of a QI Program for in-home aged care services.