



Australian Government

Department of Health and Aged Care

WEBINAR

# New aged care regulatory model: how it will work

14 November 2024

# Acknowledgement of Country

The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community.

We pay our respects to them and their cultures, and to Elders both past and present.



Artist: Chern'ee Sutton

# Agenda



## The new regulatory model for aged care

- Overview

### **Rob Day**

Assistant Secretary, Harmonisation and Regulatory Strategy Branch, Department of Health and Aged Care

- Four pillars of regulatory model
- Benefits
- Features

### **Simon Christopher**

Director, Regulatory Model Strategy Section, Department of Health and Aged Care



## How will providers be regulated

- Registration
- Monitoring
- Enforcement

### **Emma Jobson**

Acting Deputy Commissioner, Sector Capability and Regulatory Strategy, Aged Care Quality and Safety Commission



## Looking ahead

- How we are preparing providers/deeming
- Engagement and communications
- Building provider awareness

### **Leonie Anderson**

Acting Director, Regulatory Model Implementation and Transition Section, Department of Health and Aged Care



## Panel Q&A

## Section 1

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# New aged care regulatory model

- Overview
- Four pillars of the regulatory model
- Benefits
- Features

# Why do we need a new regulatory model?

*“Regulation should seek to prevent harm to people receiving aged care services and ensure that instances of substandard care are detected and addressed...it should complement other measures to incentivise good care.”*

-Royal Commission into Aged Care Quality and Safety, Final Report 2021  
p487

*“A rigorous assessment of those wanting to provide Australian Government-funded aged care services is the first and best opportunity to ensure that they are able to provide high quality and safe care to older people on a sustainable basis.”*

-Royal Commission into Aged Care Quality and Safety, Final Report 2021  
p489

<b>Improve</b>	outcomes for older people
<b>Emphasise</b>	stronger working relationships
<b>Provide</b>	more transparency and collaboration
<b>Support</b>	<ul style="list-style-type: none"><li>- the strengthened Quality Standards</li><li>- planned reforms to in-home care</li><li>- other recommendations of the Royal Commission</li></ul>

# The four pillars of the new regulatory model

1

## Rights-based

*Ensures the new regulatory model protects the rights of older Australians*

2

## Person-centred

*Focuses on the unique needs, goals, values, preferences, and dignity of older Australians*

3

## Risk-based

*Preventing, detecting and correcting risks*

4

## Continuous improvement

*A commitment to keep improving the aged care sector*

# What are the benefits?

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**Universal  
provider  
registration**



**An easy to  
access and  
navigate  
system**



**Streamlined  
provider  
obligations**



**Enhanced  
powers for  
ACQSC**



**Focus on  
continuous  
improvement  
and  
innovation**

# Features of provider registration under the new regulatory model

The new registration model will apply a risk-proportionate approach to providers entering the aged care sector. This will be achieved through several new features and conditions that will apply to the new model.



**Risk-based Registration Categories**



**Registration Renewal**



**Register of Providers**



**Registration Certificate**



**Obligations**



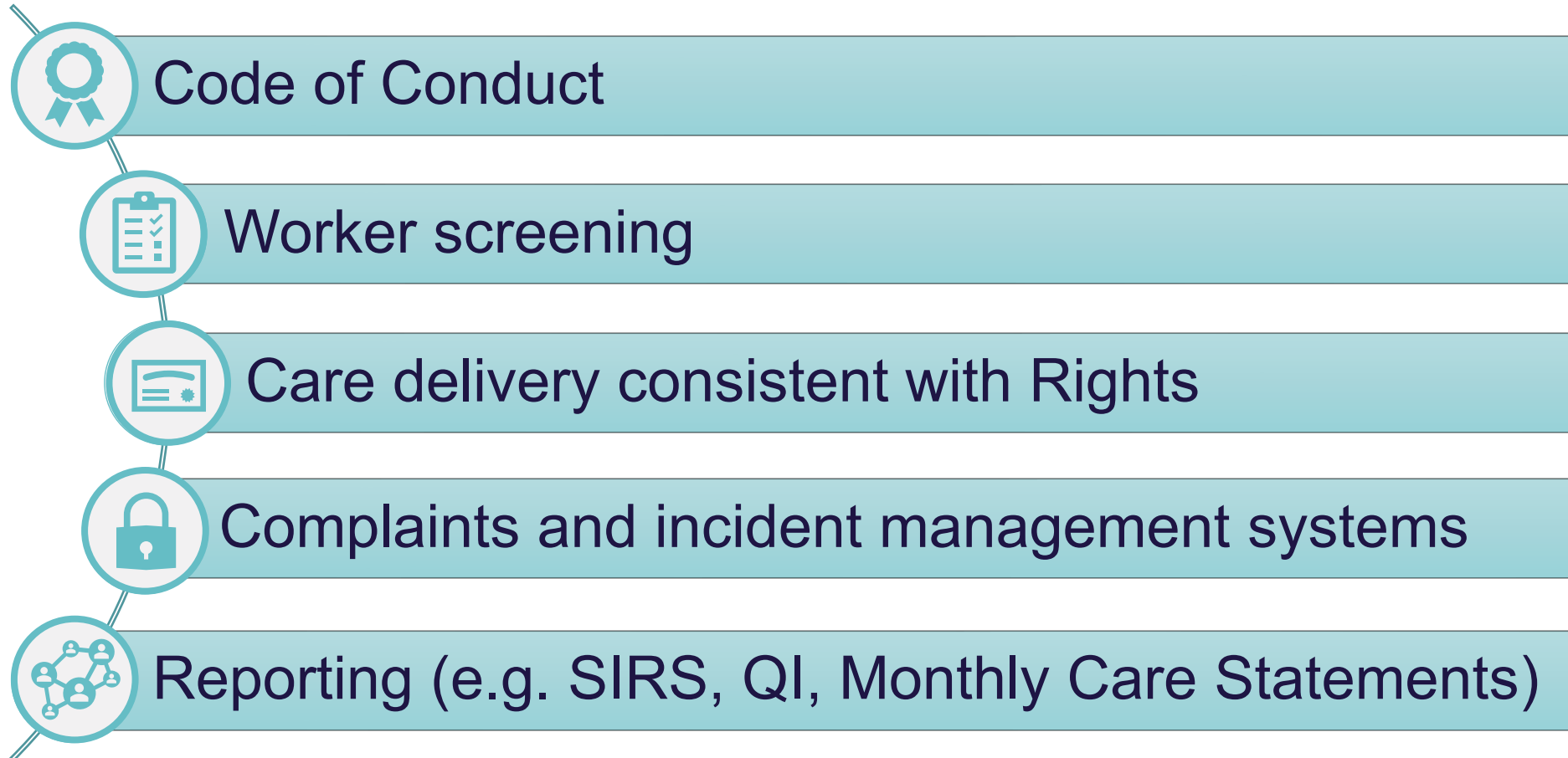
**Sole Traders and Partnerships**



## Final proposed registration categories – July 2024

Provider registration category	Description	Service types	Application to registration categories			
			Provider obligations	Code of Conduct	Aged Care Quality Standards Standards 1 to 4	Aged Care Quality Standards Standards 5 to 7
<b>Category 1</b>	Home and community services	<ul style="list-style-type: none"> <li>Domestic assistance</li> <li>Home maintenance and repairs</li> <li>Meals</li> <li>Transport</li> </ul>	✓	✓	X	X
<b>Category 2</b>	Assistive technology and home modifications	<ul style="list-style-type: none"> <li>Equipment and products</li> <li>Home adjustments</li> </ul>	✓	✓	X	X
<b>Category 3</b>	Advisory and support services	<ul style="list-style-type: none"> <li>Hoarding and squalor assistance</li> <li>Social support and community engagement</li> </ul>	✓	✓	X	X
<b>Category 4</b>	Personal care and care support in the home or community (including respite)	<ul style="list-style-type: none"> <li>Allied health and other therapy</li> <li>Personal care</li> <li>Nutrition</li> <li>Therapeutic services for independent living</li> <li>Home or community general respite</li> <li>Community cottage respite</li> <li>Care management</li> <li>Restorative care management</li> </ul>	✓	✓	Standard 1: The Person Standard 2: The Organisation Standard 3: The Care and Services Standard 4: The Environment	Standard 5: Clinical Care – Outcome 5.1 Clinical Governance (Applies to the service types of care management and restorative care management only)
<b>Category 5</b>	Nursing and transition care	<ul style="list-style-type: none"> <li>Nursing care</li> <li>Assistance with transition care</li> </ul>	✓	✓	Standard 1: The Person Standard 2: The Organisation Standard 3: The Care and Services Standard 4: The Environment	Standard 5: Clinical Care
<b>Category 6</b>	Residential care (including respite)	<ul style="list-style-type: none"> <li>Residential accommodation</li> <li>Residential everyday living</li> <li>Residential services</li> <li>Residential clinical care</li> </ul>	✓	✓	Standard 1: The Person Standard 2: The Organisation Standard 3: The Care and Services Standard 4: The Environment	Standard 5: Clinical Care Standard 6: Food and Nutrition Standard 7: The Residential Community

## Examples of Conditions of Registration



## Section 2

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# How providers will be regulated under the new model

- Registration
- Monitoring
- Enforcement



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# Regulating under the new Regulatory Model

14 November 2024

**Emma Jobson**

Acting Deputy Commissioner  
Sector Capability and Regulatory Strategy  
Aged Care Quality and Safety Commission







# Regulation under the new Regulatory Model

- Commission functions
- A rights-based aged care system
- How we will regulate





# Proposed Functions of the Commission

## Safeguarding Functions

- Uphold rights under the Statement of Rights
- Ensure safety, health, wellbeing, and continuity of care
- Risk monitoring, continuous improvement and compliance

## Engagement and education functions

- Engage, educate and build capability of aged care recipients, providers and workers
- Develop best practice models for providers and workers

## Registration of providers functions

- Oversee provider registration, variation, suspension, and revocation

## Complaints Commissioner functions

- The Aged Care Bill 2024 establishes the Complaints Commissioner as a statutory appointment within the Aged Care Quality and Safety Commission
- The Complaints Commissioner holds the complaints functions



# Providers and workers are accountable in a rights-based aged care system

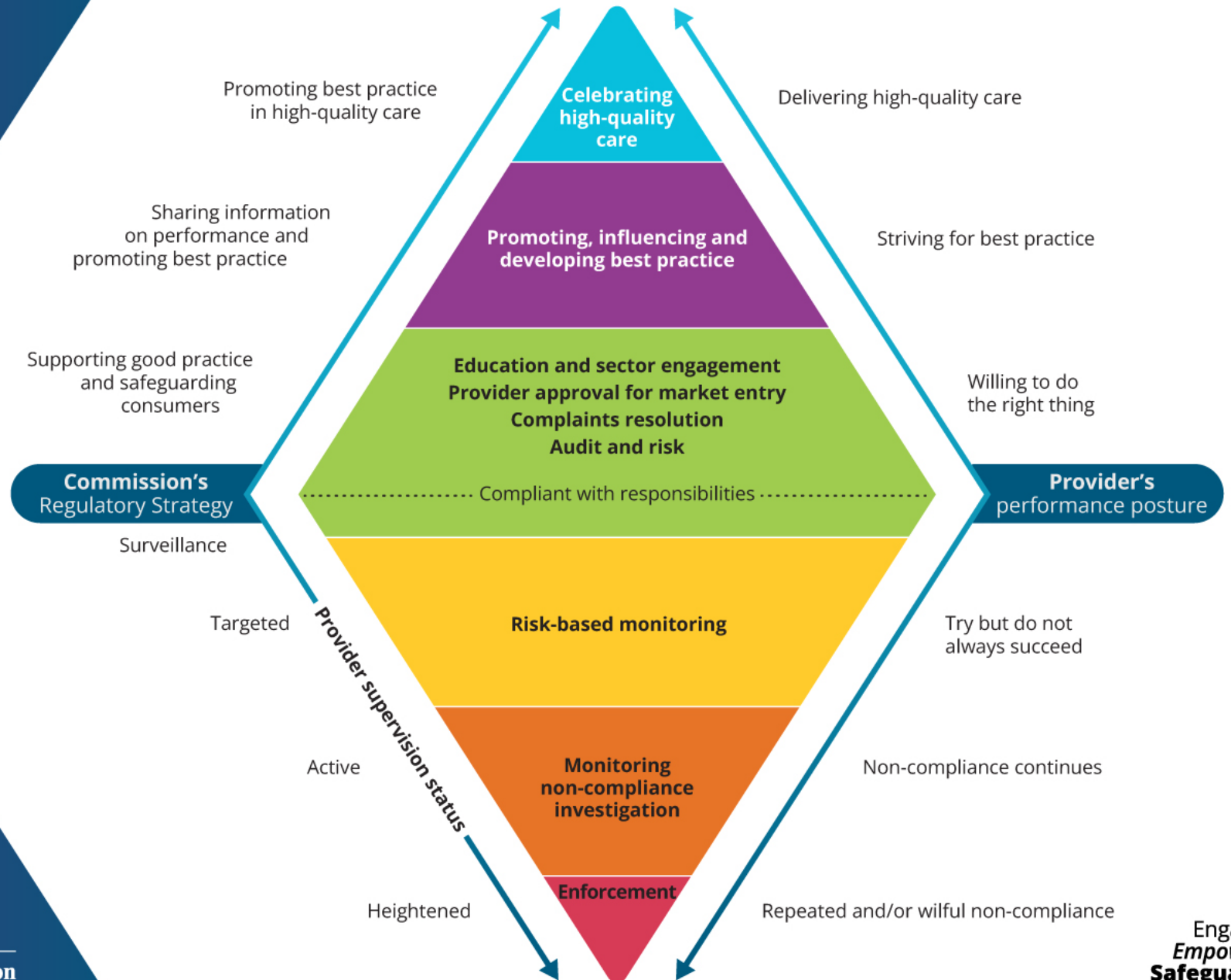
## Provider must:

- continuously improve toward the delivery of high-quality care
- Provider must:
  - openly disclose when something goes wrong
  - continuously improve towards the delivery of high-quality care
  - deliver person-centred care
  - openly disclose when something goes wrong
- deliver person-centred care

## Providers and workers must comply with the Code of Conduct including:

- Providers and Workers must comply with the Code of Conduct including:
  - respecting people's rights to quality aged care
  - respecting people's rights to quality aged care, exploitation and abuse
  - providing care that is free from violence, discrimination, exploitation and abuse
  - providing safe, competent and skilled care

# Aged care regulatory diamond







# Risk detection & analysis

## Daily

- Enquiries and feedback
- Complaints
- Disclosures
- Worker concerns
- Reportable incidents
- Media

## Quarterly

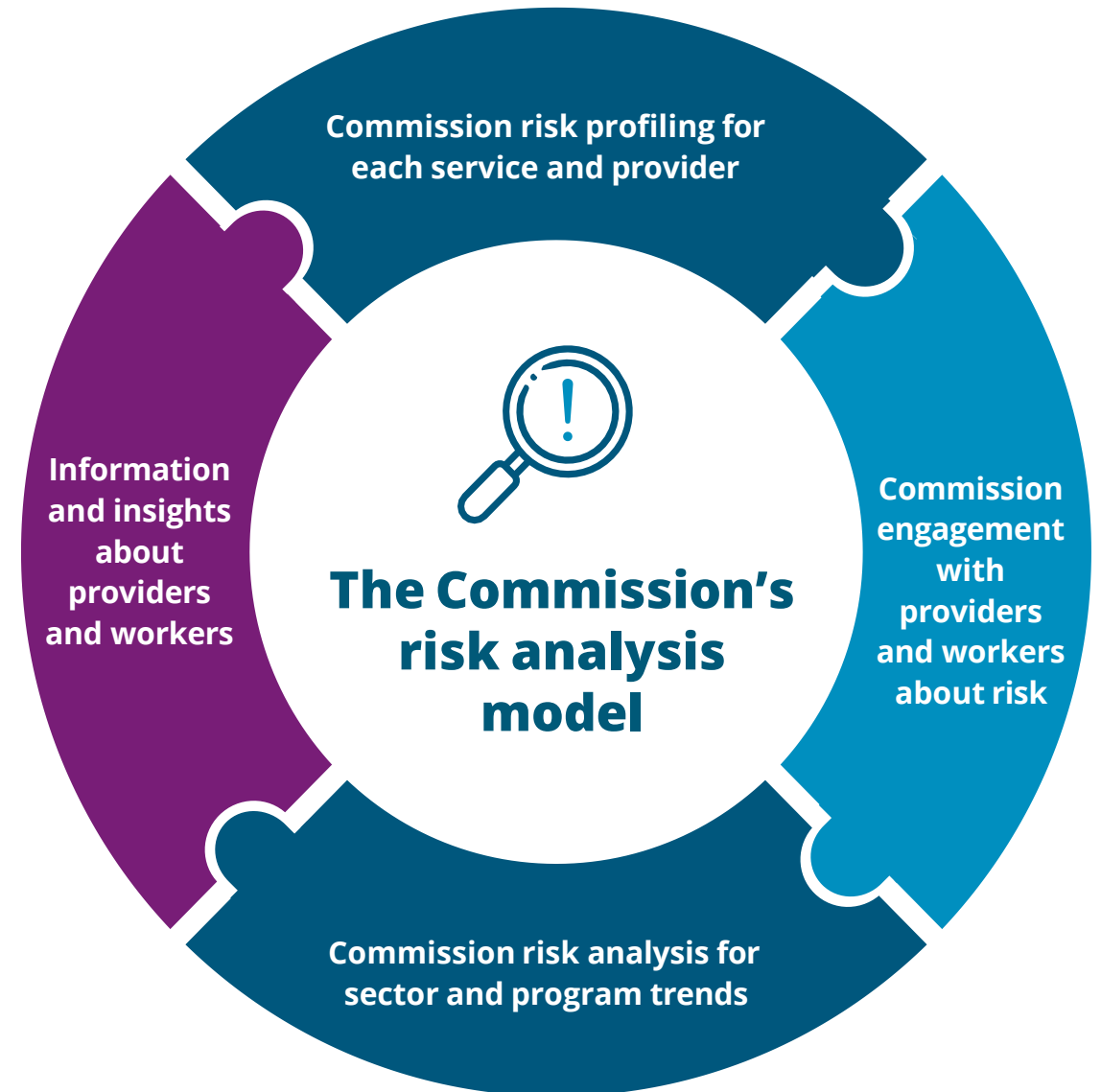
- Financial
- Staffing
- Food and nutrition
- Quality Indicators (e.g. pressure injuries, physical restraint, unplanned weight loss, falls and major injury, medication management, activities of daily living, incontinence care, hospitalisation, workforce, consumer experience, quality of life)

## Annually

- Financial statements
- Prudential compliance statement
- Residential experience interviews
- Provider governance and operations information
- Provider governing body statement

## As required

- Registration audits
- Risk based monitoring
- Change in circumstance notifications
- Referrals from other agencies
- Research and publications



# Five ways we will regulate providers, workers and sector

- 1 Manage complaints, enquiries and other information
- 2 Register and audit providers
- 3 Provider supervision to manage compliance
- 4 Enforce obligations
- 5 Respond to sector risks



# Manage complaints, enquiries and other information

- **Restorative engagement**
- Focus on **early remediation**
- **Complaints process** upholds a person's right to quality aged care
- **Data-driven** risk surveillance



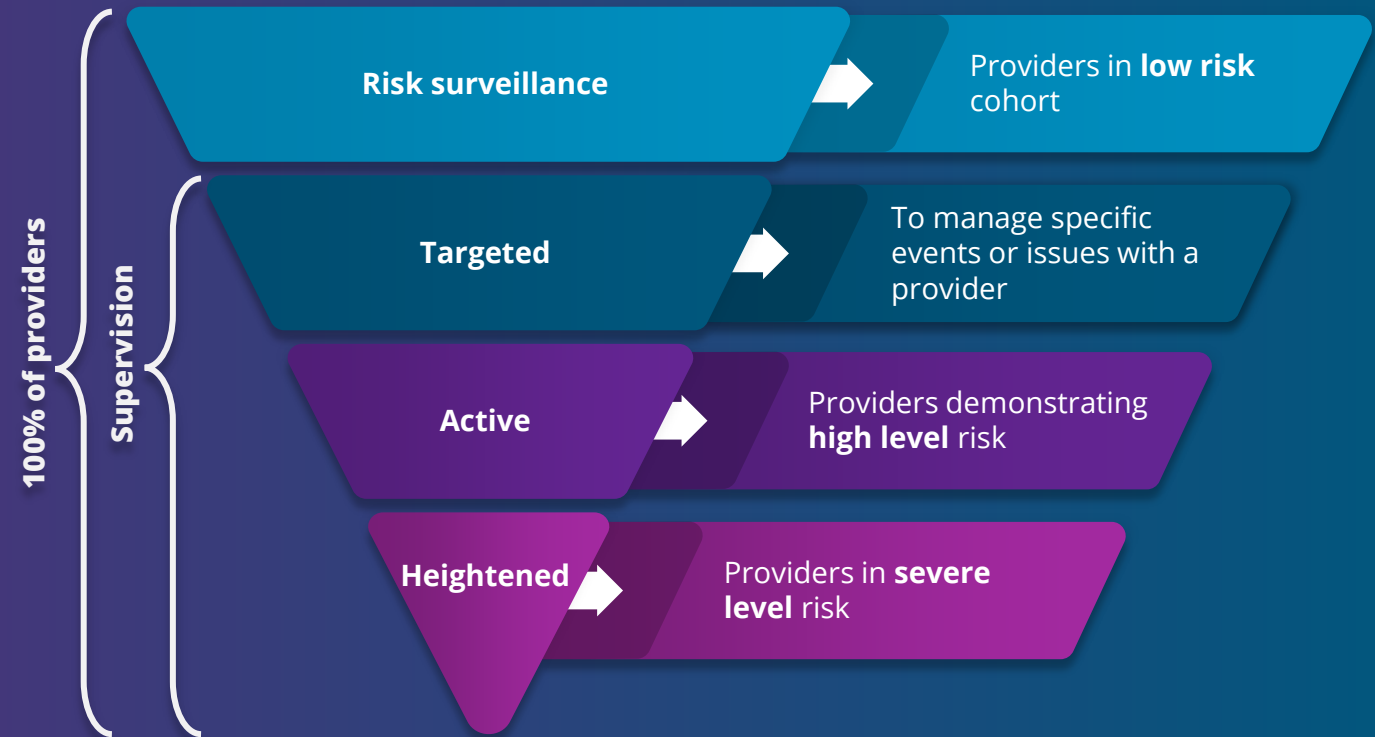
# Register and Audit Providers

- **Registration** and **renewal** of providers
  - **Universal requirements** for all providers
  - Considering **capability** dependent on specific registration categories
- Auditing conformance with the **strengthened Quality Standards** using a new audit methodology (for specified registration categories)
- Suspending, revoking, or placing **conditions** on a provider's registration when needed



# Provider supervision to manage compliance

- Incentivises providers to address risk and non-compliance
- Driven by risk to older people
- Positive or negative provider engagement can influence their supervision status
- When a provider doesn't act to remedy non-compliance, there are consequences



# Monitoring Tools

**Monitoring risk** – we use the following monitoring tools to verify and respond to identified risks and harms to older people

**Targeted Enquiry** – initial requests for information to assess and verify risks, supporting early remediation or escalation.

**Review** – educates providers and monitors risk identified through profiled data and intelligence.

**Inspection** – monitors providers' compliance, including on site, to ensure timely verification and responses to risk.

**Investigation** – of serious allegations or incidents of non-compliance or misconduct, supporting enforcement actions.



# Compliance Tools

Tools we use are informed by the nature of the risk we identify through monitoring and investigations. When a provider has an unacceptable level of risk, the Commission can use:

**1. Engagement** and agreement with a provider on the risks and planned or implemented responses.

**2. Requirement for Action** – a notice requiring specific actions of a provider.

**3. Enforceable Undertaking** – agreement with provider to take or stop specific actions to ensure compliance.

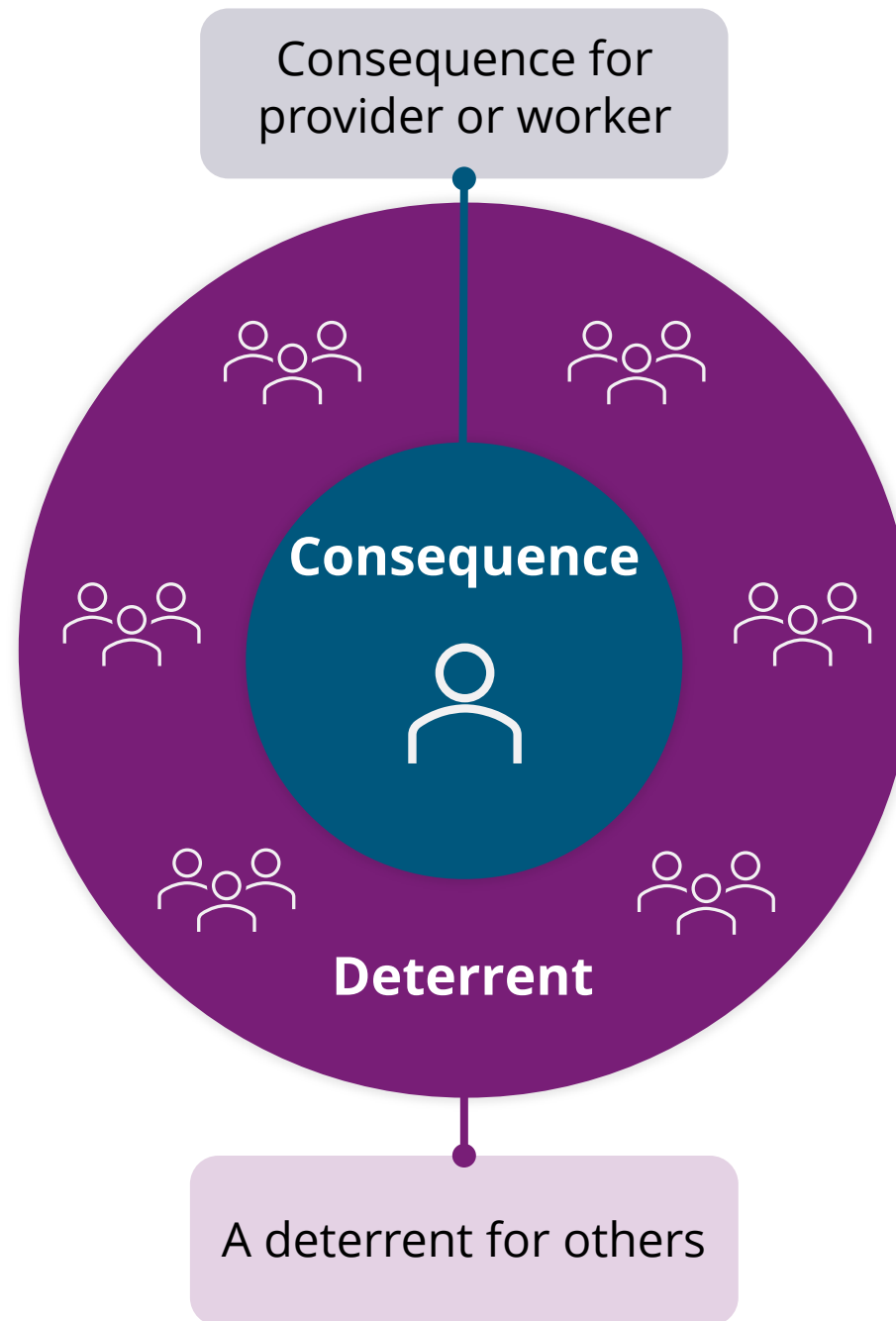
**4. Compliance Notices** – with or without significant failures and/or systemic patterns of conduct. A notice detailing non-compliance and required actions.

**5. Commission initiated condition of registration** – add or vary a condition to address risk or non-compliance.





# Enforcement approach





# Enforcement tools

1. Imposing a **ban** on a worker or provider restricting or permanently preventing their participation in the aged care sector.

2. Imposing **penalties** on providers or workers by issuing infringement notices or commencing civil proceedings.

3. Seeking an **injunction** to force a provider to take, or stop taking, certain actions.

4. Referring an offence for criminal **prosecution**.

5. **Varying, revoking or suspending** a provider's registration to receive funding and deliver aged care.



# Respond to Sector Risks



## Our strategies

- Preventative regulation
- Using intelligence to predict sector risks
- Identify sector trends
- Sector-wide campaigns and targeted coordinated campaigns
- Educating providers and workers on how to manage risks appropriately



## Our focus

- Infection prevention and control
- Food, nutrition and dining
- Provider workforce-related responsibilities
- Strengthening governance and practising open disclosure
- Managing serious incidents





# What you will see from us

1

A rights-based approach consistent with the new regulatory model.

2

Maturing data-driven 'eyes on' risk surveillance and risk monitoring on all providers.

3

Implementing a provider supervision model to incentivise and compel providers to remedy problems, restore trust and prevent recurrence when things go wrong.

4

Engaging with and educating providers to promote excellence in care to align with community expectations.

5

Using enforcement to apply a penalty for serious non-compliance, and deter future non-compliance for all providers and workers.

6

Regulating through a mix of proactive and reactive responses to risk demonstrated in the regulatory diamond.

7

Embracing the practice of restorative engagement which underpins our approach to complaints resolution and regulation.

8

Investing further in our data and intelligence capability to detect and respond to risks at the service, provider and sector level.

9

Using regulatory campaigns to target specific sector performance issues to uplift capability.



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# Resource links

[Regulatory Strategy 2024 - 2025](#)

[Strengthened Quality Standards](#)

[Reform for Better Aged Care – older people](#)

[Reform for Better Aged Care – workers](#)

[Reform for Better Aged Care – providers](#)



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## Section 3

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# Looking ahead

- How we are preparing providers/deeming
- Engagement and communications
- Building provider awareness

# Deeming of providers



## What is Deeming?

Deeming is a process of transitioning providers into a new regulatory model:

- based on the services they are currently delivering or the services as required by a current funding agreement,
- by analysing existing data, and
- engaging with certain provider cohorts to gather additional information for a manual deeming approach, where necessary.



## Why is Deeming being undertaken?

- In essence, deeming is about safeguarding the welfare of older people by ensuring care services are consistently available and appropriately flexible as the new model is introduced.

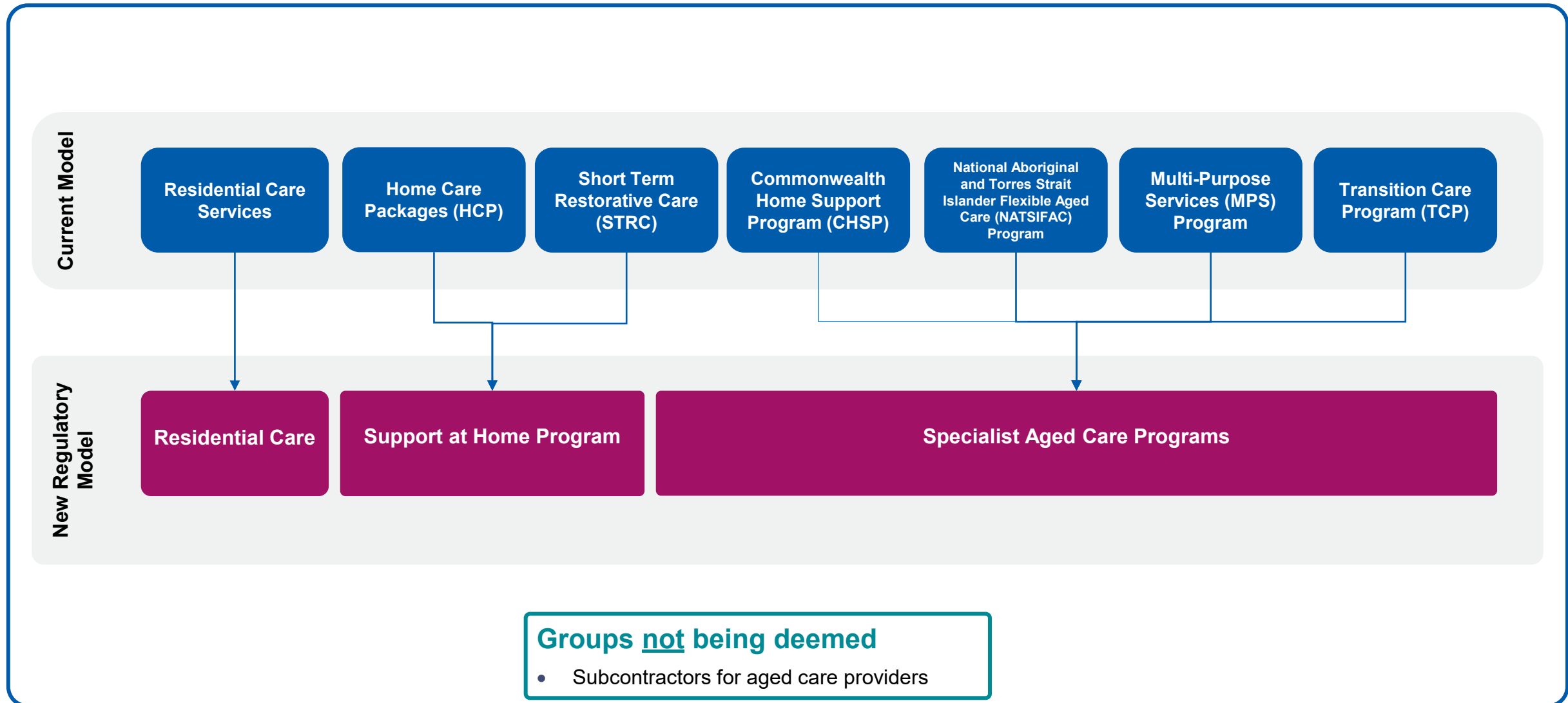


**Continuity of Service**



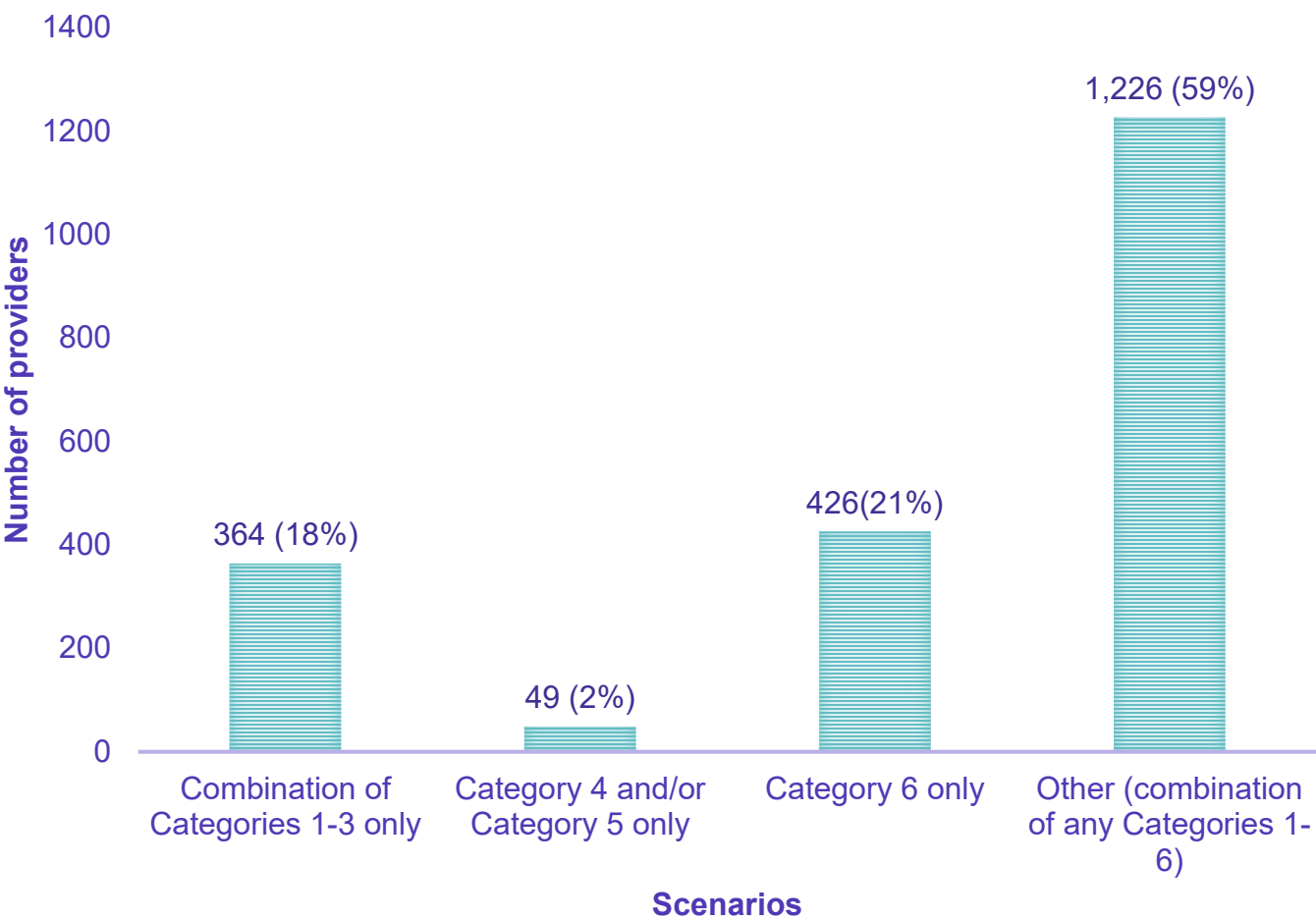
**Flexible Process**

# How providers are being deemed from the current to the new regulatory model



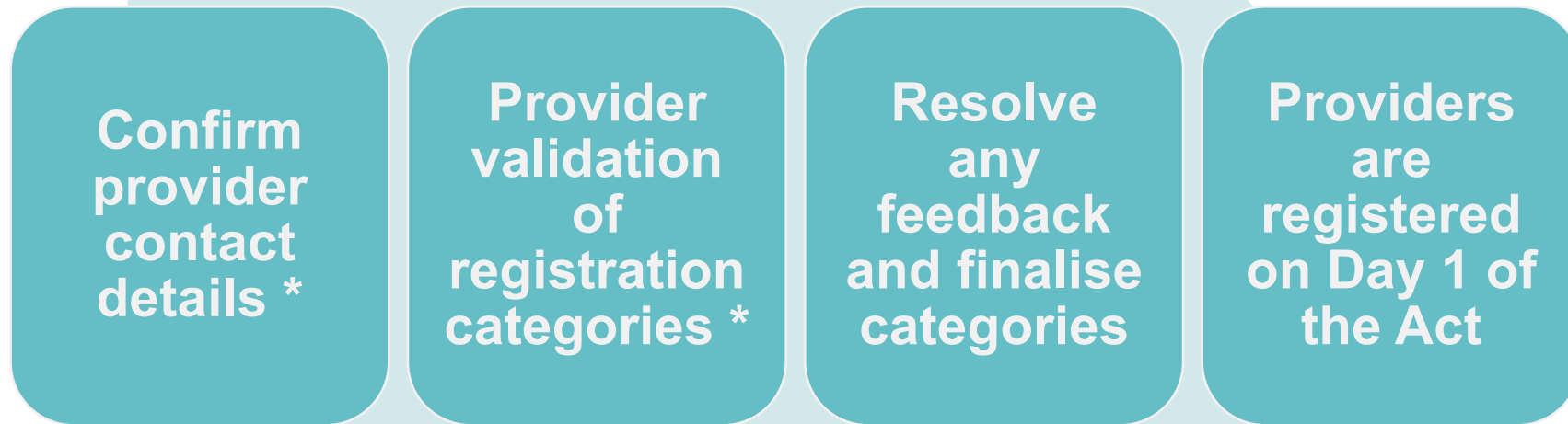
# Profile of indicative provider registration categories

The table presents mutually exclusive combinations of registration categories providers can be deemed into, based on current analysis of available data.





# Deeming steps



\* The department will contact you through a legitimate third-party email address: [noreply@gemailserver.com](mailto:noreply@gemailserver.com)

# What's next?



Supporting IT uplift



Obligations tool



Additional resources



# More information

- You can find more information on the department's website:  
<https://www.health.gov.au/our-work/new-model-for-regulating-aged-care>
- Provider booklet – *Unpacking the new model for providers*:  
<https://www.health.gov.au/resources/publications/new-regulatory-model-for-aged-care-unpacking-the-new-model-for-providers>
- Keep an eye out for future webinars in early 2025
- Contact us  
at [AgedCareRegModel@health.gov.au](mailto:AgedCareRegModel@health.gov.au)



Section 4

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# Questions and answers





Paula Jones



[agedcareengagement.health.gov.au](https://agedcareengagement.health.gov.au)



Phone **1800 200 422**  
(My Aged Care's free call phone line)