

# **Australian Government**

Australian Government response to the Senate Community Affairs References Committee Interim Report:

Effectiveness of the Aged Care Quality Assessment and accreditation framework for protecting residents from abuse and poor practices, and ensuring proper clinical and medical care standards are maintained and practised

### **Recommendation 1**

The committee recommends the extension of this inquiry into the effectiveness of the Aged Care Quality Assessment and accreditation framework for protecting residents from abuse and poor practices, and ensuring proper clinical and medical care standards are maintained and practised.

#### **Noted**

The Australian Government notes this recommendation.

## **Recommendation 2**

The committee recommends that in the current aged care oversight reforms being undertaken, all dementia-related and other mental health services being delivered in an aged care context must be correctly classified as health services not aged care services, and must therefore be regulated by the appropriate health quality standards and accreditation processes.

## Not supported

The Australian Government does not support this recommendation but recognises and supports good clinical governance within aged care services to support access to high quality clinical care.

The Department is developing a Single Aged Care Quality Framework, which includes the development of a single set of contemporary aged care quality standards expected to be implemented from 1 July 2018 and assessed against from 1 July 2019. The new draft standards focus on quality outcomes for all consumers, including those with diagnosed mental health conditions and dementia, and require organisations to demonstrate that clinical care is best practice, safe and effective, and tailored to the consumer's needs, goals and preferences to optimise their health and wellbeing. This includes timely referrals to other organisations and health professionals where necessary.

The draft standards also address recommendations of the Carnell-Paterson *Review of National Aged Care Quality Regulatory Processes*, including requirements for providers to have systems in place for minimising the use of restraint (including physical and chemical) and identifying and responding to abuse and neglect of consumers. When clinical care is delivered, providers will also be required to establish and maintain an effective clinical governance framework, which includes open disclosure processes, as an integral part of their organisation's governance. The new standards have been designed to be consistent, where possible, with standards in other sectors that intersect with aged care, such as health care.

The Australian Aged Care Quality Agency is working to produce guidance material to support the implementation of the draft standards and to assist organisations to comply with them.

On 18 April 2018 in response to the recommendations of the Carnell-Paterson Review, the Government announced the establishment of a new independent Aged Care Quality and Safety Commission to oversee the approval, accreditation, assessment, monitoring, complaints handling and compliance of Commonwealth subsidised aged care providers.

Starting from 1 January 2019, the functions of the Australian Aged Care Quality Agency (Quality Agency), the Aged Care Complaints Commissioner (Complaints Commissioner) and the regulatory functions of the Department of Health will transition to the new Commission. A new Chief Clinical Advisor will provide advice to the Commission, particularly on complex clinical matters.

Prior to the transition to the new Commission, the Quality Agency, the Complaints Commissioner and the Department of Health will continue to strengthen their intelligence sharing and data analysis to target compliance activity to those providers or services with the highest risk of non-compliance. The Quality Agency has also strengthened training for its surveyors around understanding risk.

The Government has also announced initiatives to strengthen risk profiling of aged care providers to improve the identification of risks to people in aged care; and provide more information to give greater transparency about the quality of care being provided to ensure consumers are able to make informed choices about their care. These reforms build on the Government's recent introduction of unannounced re-accreditation audits across residential aged care facilities.

*People with dementia* account for 52 per cent of all *residents* in residential *aged care* facilities<sup>1</sup> and most of these people are cared for successfully under current aged care arrangements. There is a risk that this recommendation, if implemented, could create a disincentive for aged care providers to accept people with dementia and increase regulatory burden.

The Australian Government is however investing in a range of evidence-based, dementia-specific sector supports and resources to further assist providers and their workforce to deliver quality of care. This includes establishing Specialist Dementia Care Units (SDCUs) to complement the Dementia Behaviour Management Advisory Service and the Severe Behaviour Response Teams.

SDCUs will be community based residential aged care services. They will deliver a psychosocial model of care largely delivered by trained and experienced care workers focused on behaviour management and avoidance of behaviour triggers. The model of care will include regular comprehensive assessment and review of clients by visiting medical specialists, for example geriatricians and psychogeriatricians who meet the relevant medical standards.

The SDCUs will provide care predominantly for people with very severe behavioural and psychological symptoms of dementia (tier 6 of the Brodaty Triangle) who are unable to be effectively cared for by mainstream aged care services but who do not require care more appropriately delivered in acute or other health settings. The objective is for people to have their behavioural and psychological symptoms stabilised within the SDCU and be supported to transition back to a less intensive care setting, most likely a residential aged care service.

The Australian Government also supports better links to broader mental and cognitive impairment service providers and through the 2018-19 *More Choices for a Longer Life* Budget package has invested \$82.5 million over 4 years. This will improve access to mental health treatment services for people with a diagnosed mental health condition living in a residential aged care facility.

Primary Health Networks will now commission a range of services to best match the needs of individuals living in residential care through a person centred stepped care approach. Services will be made available from early 2019. Commissioned mental health services are required to meet the National Standards of Mental Health Services 2010.

<sup>&</sup>lt;sup>1</sup> The National Centre for Social and Economic Modelling NATSEM (2016) *Economic cost of dementia in Australia 2016-2056*