



Quality of Care Amendment (Single Quality Framework) Principles 2018

I, Ken Wyatt AM, Minister for Senior Australians and Aged Care, make the following principles.

Dated 28 September 2018

Ken Wyatt AM
Minister for Senior Australians and Aged Care

Contents

1	Name.....	1
2	Commencement	1
3	Authority.....	1
4	Schedules.....	1
	Schedule 1—Amendments	2
	<i>Quality of Care Principles 2014</i>	<i>2</i>

1 Name

This instrument is the *Quality of Care Amendment (Single Quality Framework) Principles 2018*.

2 Commencement

- (1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

Commencement information		
Column 1	Column 2	Column 3
Provisions	Commencement	Date/Details
1. The whole of this instrument	1 July 2019.	1 July 2019

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

- (2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

This instrument is made under the *Aged Care Act 1997*.

4 Schedules

Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1—Amendments

Quality of Care Principles 2014

1 After the heading to section 4

Insert:

- Note: A number of expressions used in these principles are defined in the Act, including the following:
- (a) classification level;
 - (b) continuing residential care recipient.

2 Section 4

Insert:

consumer has the meaning given by section 4A.

3 Section 4 (definition of *representative*)

Omit “care recipient”, substitute “consumer”.

4 Section 4

Insert:

service environment has the meaning given by subclause 5(4) of Schedule 2.

5 Section 4 (definition of *service provider*)

Repeal the definition.

6 Section 4

Insert:

services and supports for daily living has the meaning given by subclause 4(4) of Schedule 2.

7 Section 4 (definition of *service user*)

Repeal the definition.

8 Section 4

Insert:

workforce, of an organisation that is the approved provider of an aged care service, means the service staff in relation to the aged care service.

9 Section 4 (note)

Repeal the note.

10 Section 5

Repeal the section, substitute:

4A Meaning of *consumer*

- (1) **Consumer** means a person to whom an approved provider provides, or is to provide, care through an aged care service.
- (2) A reference to a consumer in a provision of the Aged Care Quality Standards set out in Schedule 2 includes a reference to a representative of the consumer, so far as the provision is capable of applying to a representative of a consumer.

5 Meaning of *representative*

- (1) **Representative**, of a consumer, means:
 - (a) a person nominated by the consumer as a person to be told about matters affecting the consumer; or
 - (b) a person:
 - (i) who nominates themselves as a person to be told about matters affecting a consumer; and
 - (ii) who the relevant organisation is satisfied has a connection with the consumer and is concerned for the safety, health and well-being of the consumer.
- (2) Without limiting subparagraph (1)(b)(ii), a person has a connection with a consumer if:
 - (a) the person is a partner, close relation or other relative of the consumer; or
 - (b) the person holds an enduring power of attorney given by the consumer; or
 - (c) the person has been appointed by a State or Territory guardianship board (however described) to deal with the consumer's affairs; or
 - (d) the person represents the consumer in dealings with the organisation.
- (3) Nothing in this section is intended to affect the powers of a substitute decision-maker appointed for a person under a law of a State or Territory.

11 Division 1 of Part 2 (heading)

Repeal the heading.

12 Section 6 (heading)

Omit "**Division**", substitute "**Part**".

13 Section 6

Omit "Division", substitute "Part".

14 Subsection 7(3)

Omit "meets the Accreditation Standards specified", substitute "complies with the Aged Care Quality Standards set out".

15 Division 2 of Part 2

Repeal the Division.

16 Division 1 of Part 3 (heading)

Repeal the heading.

17 Section 12 (heading)

Omit “**Division**”, substitute “**Part**”.

18 Section 12

Omit “Division”, substitute “Part”.

19 Subsection 13(4)

Omit “the care recipient’s care needs identified in the care plan developed for the care recipient in accordance with table item 2.3 of clause 2 of the Home Care Common Standards specified in Schedule 4”, substitute “the care and services plan documented for the care recipient in accordance with the Aged Care Quality Standards set out in Schedule 2”.

20 At the end of subsection 13(4)

Add:

Note: See Standard 2 (ongoing assessment and planning with consumers) set out in clause 2 of Schedule 2.

21 Subsection 13(5)

Omit “meets the Home Care Common Standards specified in Schedule 4”, substitute “complies with the Aged Care Quality Standards set out in Schedule 2”.

22 Division 2 of Part 3

Repeal the Division.

23 Division 1 of Part 4 (heading)

Repeal the heading.

24 Section 15A (heading)

Omit “**Division**”, substitute “**Part**”.

25 Section 15A

Omit “Division”, substitute “Part”.

26 Subsection 15B(4)

Omit “the care recipient’s care needs identified in the care plan developed for the care recipient in accordance with the Flexible Care Standards for short-term restorative care set out in section 15E”, substitute “the care and services plan documented for the care recipient in accordance with the Aged Care Quality Standards set out in Schedule 2”.

27 At the end of subsection 15B(4)

Add:

Note: See Standard 2 (ongoing assessment and planning with consumers) set out in clause 2 of Schedule 2.

28 Subsection 15B(5)

Omit “meets the Flexible Care Standards for short-term restorative care set out in section 15E”, substitute “complies with the Aged Care Quality Standards set out in Schedule 2”.

29 Subsection 15C(4)

Omit “the care recipient’s care needs identified in the care plan developed for the care recipient in accordance with the Flexible Care Standards for short-term restorative care set out in section 15F”, substitute “the care and services plan documented for the care recipient in accordance with the Aged Care Quality Standards set out in Schedule 2”.

30 At the end of subsection 15C(4)

Add:

Note: See Standard 2 (ongoing assessment and planning with consumers) set out in clause 2 of Schedule 2.

31 Subsection 15C(5)

Omit “meets the Flexible Care Standards for short-term restorative care set out in section 15F”, substitute “complies with the Aged Care Quality Standards set out in Schedule 2”.

32 Division 2 of Part 4

Repeal the Division.

33 After Part 4

Insert:

Part 5—Aged Care Quality Standards

16 Purpose of this Part

For the purposes of section 54-2 of the Act, this Part provides for Aged Care Quality Standards. Aged Care Quality Standards are standards for quality of care and quality of life for the provision of aged care.

17 Aged Care Quality Standards

- (1) Schedule 2 sets out the Aged Care Quality Standards.
- (2) Each standard deals with a particular matter, and consists of the following:
 - (a) a consumer outcome for the matter;
 - (b) an organisation statement for the matter;
 - (c) requirements for the matter.

18 Application of Aged Care Quality Standards

- (1) The Aged Care Quality Standards apply to the following:
 - (a) residential care;
 - (b) home care;
 - (c) flexible care in the form of short-term restorative care.
- (2) The Aged Care Quality Standards apply equally for the benefit of each care recipient being provided with care mentioned in subsection (1) through an aged care service, irrespective of the care recipient’s financial status, applicable fees

and charges, amount of subsidy payable, agreements entered into, or any other matter.

34 Schedule 1 (note 2)

Repeal the note, substitute:

Note 2: The care and services specified in this Schedule must be provided in a way that complies with the Aged Care Quality Standards set out in Schedule 2 (see subsection 7(3)).

35 Schedule 2

Repeal the Schedule, substitute:

Schedule 2—Aged Care Quality Standards

Note: See section 17.

1 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 is kept confidential.

2 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.

3 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) is 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.

4 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 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;

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- (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.

Meaning of services and supports for daily living

- (4) **Services and supports for daily living** include, but are not limited to, food services, domestic assistance, home maintenance, transport and recreational and social activities.

5 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.

Meaning of service environment

- (4) An organisation’s **service environment** means the physical environment through which care and services are delivered, but does not include an individual’s privately owned or occupied home at which in-home services are provided.

6 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 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.

7 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 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 the 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.

8 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'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.

36 Schedule 3 (note 2)

Repeal the note, substitute:

Note 2: The care and services specified in this Schedule must be provided in a way that complies with the Aged Care Quality Standards set out in Schedule 2 (see subsection 13(5)).

37 Schedule 4

Repeal the Schedule.

38 Schedule 5 (note 2)

Repeal the note, substitute:

Note 2: The care and services specified in this Schedule must be provided in a way that complies with the Aged Care Quality Standards set out in Schedule 2 (see sections 15E and 15F).