

10 August 2015

The Director
General Purpose Standing Committee No. 3
Parliament House
Macquarie Street
SYDNEY NSW 2000

gpscno3@parliament.nsw.gov.au

Dear Sir/Madam

Re: Inquiry into registered nurses in New South Wales nursing homes

On Wednesday 5 August 2015 I provided a submission to the Committee and also attended to give evidence. Subsequently there were media reports that touched on the information that I provided and I am writing now to provide further contextual information so that members of the Committee do not form incorrect views about information I provided to the Committee, from those reports.

Number and type of visits to residential care homes

Every care home receives at least one unannounced visit each year but this is in the context of a wider visit program.

The Australian Aged Care Quality Agency maintains a program of visits to residential care homes in managing their accreditation. There are currently 2,684 residential care homes in Australia. 876 of those are in NSW.

In the year to 30 June 2015 we conducted 5,152 visits to residential care homes nationally. We conducted 1,711 visits to the 876 services in NSW/ACT – 893 of these visits were unannounced. These visits were:-

- Re-accreditation audits
- Unannounced assessment contacts
- · Announced assessment contacts
- Review audits

Re-accreditation audits are carried out when care homes' accreditation renewal becomes due. For almost all care homes this is every three years.

While every care home received at least one unannounced visit during the year, some care homes received more than one unannounced visit. There were also a large number of additional announced assessment contacts. Extra unannounced and announced assessment contacts are carried out when we have information that warrants follow up to ensure care standards are being maintained. We also

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conduct extra visits to care homes where we have identified a failure to meet any expected outcomes in the Accreditation Standards.

Review audits are comprehensive audits that we carry when we have concerns about the standards of care at a care home that warrant a comprehensive review of its performance and accreditation.

Performance of the residential aged care sector

The submission provided to the Committee on 5 August 2015 included information about the performance of aged care services against the Accreditation Standards. In particular, it noted that in the first round of accreditation audits that concluded in December 2000, 64% of services met all 44 expected outcomes of the Accreditation Standards whereas by the last round of comprehensive audits, that was concluded in December 2012, 95% then met all expected outcomes.

In the three years to 30 June 2015, there were 5,069 visits carried out to care homes in NSW. Out of those visits there were 93 cases where assessors identified a failure to meet one or more of the 44 expected outcomes in the Accreditation Standards. Of the 93 cases:-

- 60 involved 1 expected outcome
- 15 involved 2 expected outcomes
- 5 involved 3 expected outcomes
- 1 involved 4 expected outcomes
- 1 involved 5 expected outcomes
- 11 involved more than 5 expected outcomes.

Managing failures to meet the Accreditation Standards

When a failure to meet one or more of the 44 expected outcomes is identified, the approach typically taken is to require the care home to make improvements to correct any problems identified within a short timeframe. In the vast majority of cases, care homes act promptly to correct any failures identified and do so within the timetable imposed by the Quality Agency – usually no more than three months. 95% of care homes correct problems within the timetable set. Only a very small number take longer to correct identified problems.

We may reduce the period of a care home's accreditation to ensure that we can carry out a further comprehensive assessment and to be satisfied that improvements are sustained before restoring a longer period of accreditation. We may revoke a care home's accreditation if there are serious failures or serious risk to residents.

We report any failures to the Department of Social Services including if failures persist at the end of the timetable to correct them. The Department may then decide if and what further compliance action is appropriate and this may include imposing sanctions. Examples of sanctions include requiring a provider of aged care to take particular actions such as appoint a nurse adviser or administrator or to provide specified training to its personnel.

I hope that this additional information assists the Committee.

Yours sincerely

Ross Bushrod Director Quality and Standards