Aged Care Quality and Safety Commission

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

7 August 2020

PDR Number: IQ20-000445

Complaints to the Aged Care Quality and Safety Commission:

Written

Senator: Katy Gallagher

Question:

How many complaints were made to the Aged Care Quality and Safety Commission during the COVID-19 pandemic? Please provide the total number as well as a breakdown of complaints for March, April, May, June, July and August and by state and territory. How many of these complaints were directly related to visitation issues? Please provide a total number.

Answer:

During the COVID-19 pandemic to date (1 March to 12 August 2020) the Commission has received 4,638 complaints. Of these, 693 related to visitation concerns.

Table 1: Complaints and COVID-19 related complaints received, 1 March to 12 August 2020

	MAR	APR	MAY	JUN	JUL	1-12 AUG	TOTAL
COVID-19 complaints							
related to visitation							
concerns	61	224	194	125	74	15	693
Total COVID-19 complaints							
including visitation							
concerns	183	469	354	259	302	70	1,637
Total of all complaints							
including COVID-19 related	677	927	868	927	926	313	4,638

Source: Unpublished data as at 12 August 2020 from the Commission's case management system.

Table 2: Complaints and COVID-19 related complaints received by service state 1 March to 12 August 2020

	АСТ	NSW	NT	QLD	SA	TAS	VIC	WA	TBD*	Grand Total
COVID-19 complaints										
related to visitation										
concerns	19	229	4	85	68	11	223	54		693
Total COVID-19										
complaints including										
visitation concerns	32	472	8	212	142	31	639	98	3	1,637
Total of all complaints										
including COVID-19										
related	61	1,395	25	800	425	98	1,532	292	10	4,638

TBD* - To be determined, service state not yet recorded

Source: Unpublished data as at 12 August 2020 from the Commission's case management system.

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PDR Number: IQ20-000446

Earle Haven Inquiry for Recommendation 22

Written

Senator: Stirling Griff

Question:

Noting Recommendation 22 of the Earle Haven Inquiry, does the Aged Care Quality and Safeguards Commission have the power to appoint an independent manager of a residential aged care facility to stabilise a facility during a time of crisis and if not, why not?

Answer:

Under section 63U of the *Aged Care Quality and Safety Commission Act 2018* (Commission Act), an approved provider may be required to agree to certain matters if the Commissioner is satisfied the provider is not complying with their aged care responsibilities and is considering imposing a revocation sanction.

Relevantly, this power may be exercised if the Commissioner is satisfied that the approved provider's non-compliance poses an immediate and severe risk to care recipients.

Section 63U(3) lists the kinds of things that the Commissioner may require an approved provider to do. Included is requiring the provider to appoint an eligible adviser who has appropriate qualifications, skills or experience to assist the provider to comply with its aged care responsibilities. The list in section 63U(3) is not exhaustive.

The explanatory memorandum to the Bill that introduced this provision to the Commission Act provides as follows:

An agreement under this section may cover any matters that the Commissioner considers necessary to bring the approved provider back into compliance with its responsibilities, and would commonly include training for staff, payment of debts, and the appointment of an eligible adviser to assist with the clinical governance or corporate governance of the approved provider.

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The Aged Care Quality and Safety Commission's first notification of a COVID-19 case:

Written

Senator: Stirling Griff

Question:

What is the average time between a confirmed diagnosis of COVID-19 in a residential aged care facility, either staff or resident, and first contact by the Aged Care Quality and Safeguards Commission?

Answer:

The Commission is not the primary responder to a confirmed case of COVID-19 at a residential aged care service. The Commission's contact with a service where there is a confirmed case of COVID-19 can occur at any time following the Commission receiving advice of the outbreak from the state Public Health Unit (PHU) or Commonwealth Department of Health (through participation in the daily aged care outbreak meeting). The timing of the Commission's contact depends on intelligence received on the service's response to its outbreak and information about the performance of the approved provider.

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Quality Standards around infection control:

Written

Senator: Rachel Siewert

Question:

Are the quality standards around infection control adequate or do they need to be strengthened given the devastating outbreaks we have seen in Victoria?

Answer:

The Department of Health holds policy responsibility for the Aged Care Quality Standards (Quality Standards). Any proposed review, changes or additions to the Quality Standards are a matter for the Department.

To comply with the Quality Standards, providers are expected to have procedures in place based on best practice guidance and relevant law. This includes recognised guidance published by the Department of Health, the Communicable Diseases Network Australia and the Infection Control Expert Group.

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PDR Number: IQ20-000453

Aged Care Quality Standards:

Written

Senator: Rachel Siewert

Question:

The AMA has suggested the Commission should have more specific Aged Care Quality Standards, including a medical access standard, that helps to facilitate access to doctor services and other high-quality clinical care. Is this something the Commission is looking into?

Answer:

The Department of Health (Department) holds policy responsibility for the Aged Care Quality Standards. Any proposed review, changes or additions to the Aged Care Quality Standards is a matter for the Department.