

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH PORTFOLIO

Supplementary Budget Estimates 2016 – 2017, 19 October 2016

Ref No: SQ16-000483

OUTCOME: 6 – Ageing and Aged Care

Topic: Elder Abuse in Aged Care

Type of Question: Written Question on Notice

Senator: Griff, Stirling

Question:

The website of the Aged Care Quality Agency states: “While it is not our role to investigate individual complaints, the Australian Aged Care Quality Agency will use any information we receive about the performance of an aged care service in planning future assessment and monitoring activities to determine if the applicable Standards are being met.” Does the Agency receive information from the Commissioner about elder abuse complaints and, if so, do they take that information into account when reassessing an aged care facility for accreditation?

Answer:

Yes. The Australian Aged Care Quality Agency (Quality Agency) receives referrals about aged care quality issues that may be of a serious or systemic nature from the Aged Care Complaints Commissioner and the Department of Health.

Monitoring of accredited services between re-accreditation audits is undertaken through annual unannounced visits by the Quality Agency. The Quality Agency uses a risk based approach to prioritise these site visits to the home. This means that we respond to the information we receive from the public, information or referrals from the Aged Care Complaints Commissioner or from the Department of Health. Referrals assessed as high risk are responded to with an assessment contact within 24 hours of referral.

The accreditation decision takes into account relevant information received from the Aged Care Complaints Commissioner or the Department.

The scope of an assessment contact or review audit will capture matters raised in the referral information so that the assessment of the provider’s performance against the accreditation standards takes this information into account.

The accreditation decision then takes into account:

- The re-accreditation site audit report for the service and any response to this report given to the Quality Agency by the approved provider.

- Any relevant information given to the CEO or to the assessment team that conducted the site audit, by a care recipient or former care recipient of the service, or by their representative.
- Any relevant information provided by the Department of Health.
- Whether the Quality Agency is satisfied that the approved provider will undertake continuous improvement in relation to the services.