

Quality systems in residential aged care services

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Quality Systems Review Project Overview 2008-2009

Context

Demands to demonstrate quality services

- Competing priorities
- Multiple Quality systems with lack of integration
- Few measures
- Accreditation issues
- No QAHCS**

Investigate

- Current contexts, approaches and practices
- Enablers and barriers
- Key stakeholders:
 - lit review
 - workshops (150 participants)
 - 15 site visits (low and high care)

Suggest

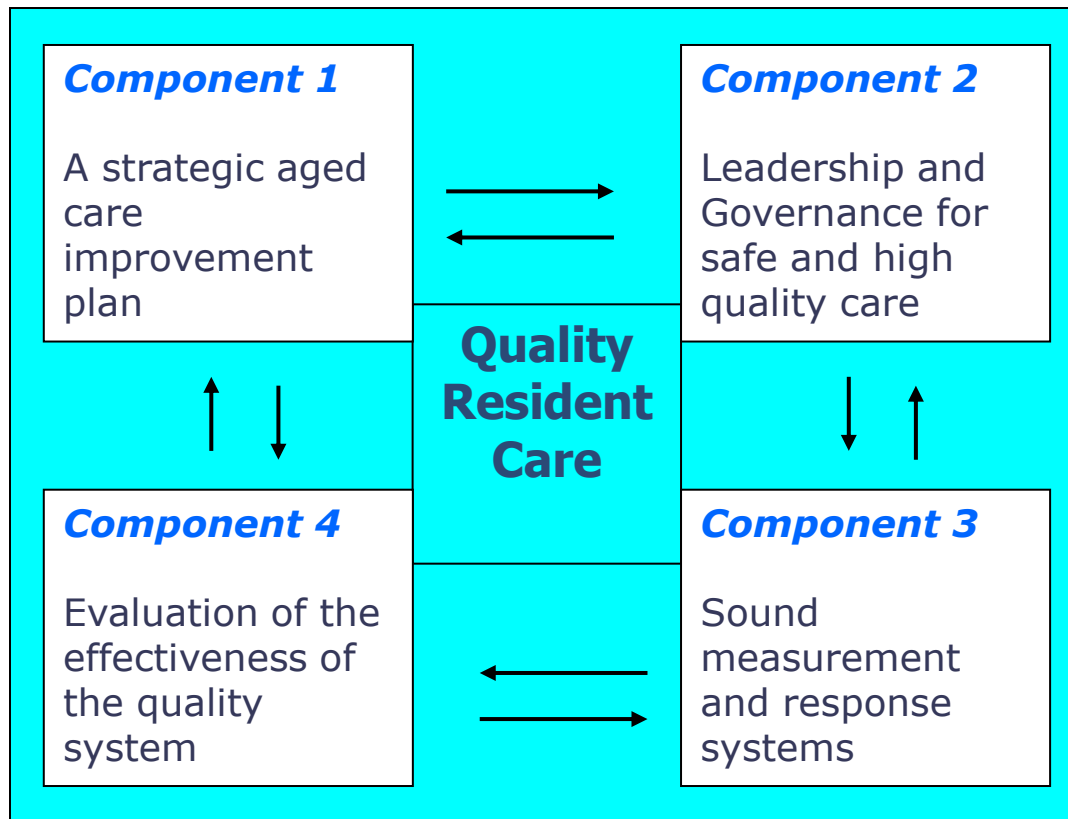
Options and directions for short, medium long term improvements in managing quality

A Residential Aged Care Quality System

An organisational system of governance, planning, tools, measurement, evaluation and action for the purpose of ensuring consistently safe and quality care and services for residents.

(Balding, 2008)

For the purposes of the review, four components of effective residential aged care organisational quality systems were identified from the literature and peak body feedback:



What we found: drivers for an effective quality system

- ▶ Accreditation and legislation
- ▶ Staff ownership and commitment to residents
- ▶ Resident, Board, Executive and community expectations
- ▶ Seeing positive results
- ▶ Leadership from the DON and aged care manager
- ▶ Input of the organisational quality manager and links to the broader health service quality system and strategic goals

Barriers to an effective quality system

- Lack of data describing the current quality situation
- No strategic goals for the quality of care to be provided
- Perceived lack of time to do audits and improvement activities
- Lack of people to do the audits and improvement activities: not enough staff with well developed improvement skills and problems with staff continuity
- Time and resources focused on achieving accreditation rather than planning and achieving continuously improving care for residents
- Lack of external requirements for aged care reporting and achievement as per acute care~

Key constraints affecting quality systems as seen in the review and the literature

- ▶ Most organisations think they're doing most things required for an effective quality system
- ▶ Mindset of 'Accreditation equates to high quality care': this can create a false sense of security at the Executive and Board level, and complacency at point of care
- ▶ A lack of strategic focus and valid data, combined with an accreditation model based on compliance, drives an audit-driven approach to meeting minimum standards
- ▶ Quality monitoring is broad but corresponding action is often restricted to auditing and education
- ▶ Where approaches 'beyond compliance' are happening, there is good evidence of leadership, but they eventually hit the 'paper ceiling' of compliance
- ▶ Limited use of frameworks and tools apart from accreditation standards~

What we can build on:

- ▶ The accreditation standards – the building blocks for a quality framework are there
- ▶ Cross pollination between aged and acute services
- ▶ Examples of high level consumer participation
- ▶ Culture of planning and reporting
- ▶ Frustration with staff engagement and change management issues
- ▶ Recognition of the value of the quality indicators and education
- ▶ Awareness that 'we don't know squared'~

Thankyou!