

# Draft Community Care Standards

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Draft Standards, Expected Outcomes and Minimum Performance Criteria for community care have been developed in partnership with the sector by State and Territory governments and the Australian Government through the Community Care Planning and Accountability Working Group.

Earlier this year, feedback on the draft Standards and Expected Outcomes was sought. Input received through this process is reflected in the current draft.

Since then, a working version of these draft requirements including Minimum Performance Criteria has been developed. Feedback from the community care sector is now being sought to ensure they are robust and appropriate, prior to trialling and the development of assessment processes and practices.

Once finalised, the standards will be an important part of the quality assurance arrangements in community care and need to cover HACCC, packaged care and NRCP. All feedback is welcome to help us ensure that the standards achieve these aims. In particular, you may wish to comment on the following broad areas:

- The terminology used throughout the document (including how clear the terms are, whether they are accurate and consistency of use within the document )
- The structure of the draft Standards, Expected Outcomes and Minimum Performance Criteria (including the order in which they appear, whether they could be strengthened through cross referencing, and whether there are any overlaps that could combined)
- The level of detail and whether it is sufficient, particularly:
  - The need for elder abuse to be specifically included as an Expected Outcome or Minimum Performance Criteria
  - Standard 3, given the importance of care planning
  - Standard 7, given the need to reflect the complex operating environment for community care services including challenges in service delivery the use of brokering services in some circumstances, workforce constraints and associated management systems.

In addition the consultants, Australian Healthcare Associates, are currently preparing a preamble outlining the overarching principles for the Standards. Within the preamble issues such as social independence and cultural issues will be further articulated. Please advise whether you consider there are any other issues or objectives that could be addressed in the preamble.

**Closing date for comments is 31 October 2007.**

**All comments should be forwarded to [thewayforward@health.gov.au](mailto:thewayforward@health.gov.au)**

The following pages of this document contain a working version the Draft Standards, Expected Outcomes Feedback and Minimum Performance Criteria.

# Draft Community Care Standards

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## *DEFINITIONS:*

### *PROCESSES*

*Where an expected outcome refers to processes, this requires documented policies and procedures that have been implemented and periodically reviewed.*

### *SPECIAL NEEDS GROUPS*

Special needs groups refer to those identified within individual programs but may include people:

- From Aboriginal and Torres Strait Islander backgrounds
- From cultural and linguistically diverse backgrounds
- With dementia
- From rural and remote areas
- Who are financially or socially disadvantaged
- With physical and intellectual disabilities.

### *STANDARDS:*

- 1 – Access to Services
- 2 – Information and Consultation
- 3 – Coordinated, Planned and Reliable Service Delivery
- 4 – Privacy, Dignity, Confidentiality and Access to Personal Information
- 5 – Complaints and Disputes
- 6 – Advocacy
- 7 – Efficient and Effective Management.

# Standard 1 – Access to Services

*1. Service users, or potential service users, have access to services that are based on eligibility and their assessed needs.*

Expected Outcomes	Minimum Performance Criteria
1.1. Service user access to services is determined on a fair, equitable and non discriminatory basis.	1.1.1. The service provider has documented policies and procedures relating to fair, equitable and non discriminatory access. 1.1.2. The service provider can demonstrate that these policies and procedures have been applied.
1.2. Service users can expect to participate in an assessment.	1.2.1. The service provider has documented policies and procedures regarding the assessment of each service user. 1.2.2. The service provider can demonstrate a completed assessment for each service user, including assessment of the availability and needs of any carer. 1.2.3. The service provider can demonstrate active service user participation in the assessment process. 1.2.4. The service provider can demonstrate that the depth of the assessment completed is relevant to the service user's needs and to the services being offered or provided.
1.3. Service user access to services is based on prioritised need.	1.3.1. The service provider has documented policies and procedures to determine priority of need and how to manage demand for services. 1.3.2. The service provider can demonstrate that these policies and procedures have been applied.

## Standard 2 – Information and Consultation

*2. Service users, or potential service users, have access to information that allows them (and/or their representative) to make informed decisions about available services and advises them of their rights and responsibilities in relation to service delivery.*

Expected Outcomes	Minimum Performance Criteria
<p>2.1. Service users are assisted to make service choices by being advised of:</p> <ul style="list-style-type: none"> <li>- Rights and responsibilities</li> <li>- Services available</li> <li>- Fees</li> <li>- Privacy (refer Standard 4)</li> <li>- Complaints (refer Standard 5)</li> <li>- Advocacy (refer Standard 6).</li> </ul>	<p>2.1.1. The service provider has documented policies and procedures related to distribution of information to service users, in both written and verbal formats.</p> <p>2.1.2. The service provider has developed and distributed appropriate written information to advise service users of:</p> <ul style="list-style-type: none"> <li>- Rights and responsibilities</li> <li>- Services available</li> <li>- Fees</li> </ul> <p>2.1.3. The service provider can demonstrate that distribution and explanation of the information has occurred on entry to the service and regularly throughout the service period.</p>
<p>2.2. Service users are provided with information in a format which is appropriate to their needs.</p>	<p>2.2.1. The service provider has documented policies and procedures related to the development and distribution of information that considers the requirements of service users from special needs groups.</p> <p>2.2.2. The service provider can demonstrate that information has been provided to service users in an appropriate format.</p>

# Standard 2 – Information and Consultation

Expected Outcomes	Minimum Performance Criteria
<p>2.3. Service users are consulted about possible service choices; and provided with information about the services being offered.</p>	<p>2.3.1. The service provider has documented policies and procedures regarding consulting service users about the services to be offered.</p> <p>2.3.2. The service provider has documented policies and procedures regarding informing service users about the services to be offered.</p> <p>2.3.3. The service provider can demonstrate that they have consulted with and provided service users with information related to the:</p> <ul style="list-style-type: none"> <li>- Services being offered</li> <li>- Reason/s why and when service provision may change.</li> </ul>

## Standard 3 – Coordinated Planned and Reliable Service Delivery

3. *Service users receive coordinated services that are planned, evaluated and delivered in partnership with themselves and/or their representative.*

Expected Outcomes	Minimum Performance Criteria
<p>3.1. Service users (and/or their representative) participate in the development of a care/service plan that is based on identified needs, preferences and availability.</p>	<p>3.1.1. The service provider has documented policies and procedures related to care/service planning, which includes the participation of the service user and/or their representative.</p> <p>3.1.2. The service provider can demonstrate that each service user has a care/service plan that is based on assessed needs and preferences and developed in partnership with the service user (and/or their representative).</p> <p>3.1.3. Care/service planning:</p> <ul style="list-style-type: none"> <li>- Is goal orientated and outcome based</li> <li>- Recognises and addresses the requirements of special needs groups</li> <li>- Promotes functional and social independence and quality of life.</li> </ul> <p>3.1.4. The service provider can demonstrate that care/service plans and outcomes are reviewed and adjusted in response to changing needs and/or preferences.</p> <p>3.1.5. The service provider can demonstrate that each service user agrees to and receives a copy of their individually developed care/service plan.</p>
<p>3.2. Service users' needs are regularly reassessed and plans reviewed.</p>	<p>3.2.1. The service provider has documented policies and procedures related to the regular review and reassessment of service users.</p> <p>3.2.2. The service provider can demonstrate that all service users' needs are regularly reassessed and plans reviewed.</p> <p>3.2.3. The service provider can demonstrate that the depth, timing and level of the review/reassessment reflects the services delivered and the needs of the service user.</p>

## Standard 3 – Coordinated Planned and Reliable Service Delivery

Expected Outcomes	Minimum Performance Criteria
3.3. The service provider collaborates with others to meet the needs of service users, including referral to other service providers where appropriate.	3.3.1. The service provider has documented policies and procedures related to referral and collaboration, which include processes to meet relevant State/Territory and Commonwealth legislation. 3.3.2. The service provider can demonstrate that collaboration and appropriate referrals occur and that consent has been obtained prior to referrals being made.

## Standard 4 – Privacy, Dignity, Confidentiality and Access to Personal Information

4. The dignity and privacy of service users is respected and service providers demonstrate their awareness of their obligations relating to the protection of, and right of access to, personal information.

Expected Outcomes	Minimum Performance Criteria
<p>4.1. Service users (and/or their representative) are provided with information regarding privacy, confidentiality and access to personal information.</p>	<p>4.1.1. The service provider has documented policies and procedures related to the development and distribution of information regarding privacy to service users, in both written and verbal formats.</p> <p>4.1.2. The service provider has developed appropriate written information to advise service users of the processes to ensure:</p> <ul style="list-style-type: none"> <li>- Privacy</li> <li>- Confidentiality</li> <li>- Access to personal information.</li> </ul> <p>4.1.3. The service provider can demonstrate that distribution and explanation of the information has occurred on admission and periodically throughout the service period.</p>
<p>4.2. Service users' privacy and dignity is respected.</p>	<p>4.2.1. The service provider has documented policies and procedures related to respecting service users privacy and dignity.</p> <p>4.2.2. The service provider can demonstrate how a service user's privacy and dignity is respected.</p>

## Standard 4 – Privacy, Dignity, Confidentiality and Access to Personal Information

Expected Outcomes	Minimum Performance Criteria
<p>4.3. Service users' (and/or their representative) consent is obtained prior to the service provider collecting and/or releasing their personal information.</p>	<p>4.3.1. The service provider has documented policies and procedures that are in line with relevant State/Territory and Commonwealth legislation, related to obtaining consent for the collection and release of personal information.</p> <p>4.3.2. The service provider can demonstrate that these policies and procedures have been applied.</p> <p>4.3.3. Service users are provided with information related to the type of information collected and what this information would be used for.</p>
<p>4.4. Service users (and/or their representative) have access to their personal information.</p>	<p>4.4.1. The service provider has documented policies and procedures relevant to State/Territory and Commonwealth legislative requirements, related to a service user (and/or their representative) accessing their personal information.</p> <p>4.4.2. The service provider can demonstrate that these policies and procedures have been applied.</p>

## Standard 5 – Complaints and Disputes

5. *Service users (and/or their representative) have access to complaints and disputes processes that are fair, equitable and linked to improvement processes.*

Expected Outcomes	Minimum Performance Criteria
<p>5.1. Service users (and/or their representative) are provided with information regarding the complaints process and how this process is accessed.</p>	<p>5.1.1. The service provider has documented policies and procedures related to the distribution of information regarding complaints to service users, in both written and verbal formats.</p> <p>5.1.2. The service provider has developed appropriate written information to advise service users of the processes regarding:</p> <ul style="list-style-type: none"> <li>- How to make a formal or an informal complaint</li> <li>- Who to complain to</li> <li>- The expected timeframe for receiving responses</li> <li>- How to access an external complaints process.</li> </ul> <p>5.1.3. The service provider can demonstrate that distribution and explanation of this information has occurred on admission and periodically throughout the service period.</p>

## Standard 5 – Complaints and Disputes

Expected Outcomes	Minimum Performance Criteria
<p>5.2. Complaints are dealt with fairly, promptly, confidentially and without retribution.</p>	<p>5.2.1. The service provider has documented policies and procedures to manage complaints, which include:</p> <ul style="list-style-type: none"> <li>– Protection of service users’ rights</li> <li>– Recognition of service users with special needs</li> <li>– Roles and responsibilities of staff</li> <li>– Expected timeframes of actions</li> <li>– Promotion of the process to both service users (or their representative) and staff/volunteers</li> <li>– Provision of feedback to the complainant and staff regarding each complaint.</li> </ul> <p>5.2.2. The service provider has documented policies and procedures to assist service users to access external complaints processes.</p> <p>5.2.3. The complaints process is included in staff/volunteer orientation and ongoing staff/volunteer development activities.</p>
<p>5.3. The service provider evaluates and modifies service provision, as appropriate, in response to complaints.</p>	<p>5.3.1. The service provider has processes that include the collection of data regarding complaints and the monitoring of complaints in order to improve services.</p> <p>5.3.2. The service provider can demonstrate that complaints are used as part of their continuous improvement processes.</p>
<p>5.4. The service provider assists in the management of disputes between service users and their primary carer/s, related to service delivery.</p>	<p>5.4.1. The service provider has documented policies and procedures related to providing assistance in the management of disputes between service users and their primary carer/s, related to service delivery.</p> <p>5.4.2. The service provider can demonstrate that these policies and procedures have been applied.</p>

## Standard 6 – Advocacy

### 6. Service users (and/or their representative) have access to an advocate of their choice

Expected Outcomes	Minimum Performance Criteria
<p>6.1. Service users (and/or their representative) are provided with information regarding:</p> <ul style="list-style-type: none"> <li>- What an advocate is</li> <li>- Their right to access and use, an advocate of their choice.</li> </ul>	<p>6.1.1. The service provider has documented policies and procedures related to distribution of information regarding advocacy, in both written and verbal formats.</p> <p>6.1.2. The service provider has developed appropriate written information to advise service users of:</p> <ul style="list-style-type: none"> <li>- What an advocate is</li> <li>- Their right to access and use, an advocate of their choice.</li> </ul> <p>6.1.3. The service provider can demonstrate that distribution and explanation of this information has occurred on admission and periodically throughout the service period.</p>
<p>6.2. Service users (and/or their representative) can expect the service provider to accept their choice of advocate and, if necessary, assist them in accessing an advocate.</p>	<p>6.2.1. The service provider has documented policies and procedures to assist service users to access an advocate.</p> <p>6.2.2. The service provider can demonstrate that service users are supported, if required, in accessing and using an advocate of their choice.</p> <p>6.2.3. The service provider can demonstrate that staff/volunteer understand how to work with an advocate.</p>

## Standards 7 – Efficient and Effective Management

7. The service provider has a commitment to quality and continuous improvement across the service which includes: service/program planning, evaluation and monitoring, and compliance with Program and legislative requirements.

Expected Outcomes	Minimum Performance Criteria
<p>7.1. The service provider has management processes which are accountable to stakeholders, including service users. Processes must address:</p> <ul style="list-style-type: none"> <li>– Corporate governance requirements</li> <li>– Relevant State/Territory and Commonwealth legislation.</li> </ul>	<p>7.1.1. The service provider has documented policies and procedures related to governance arrangements including Board roles, responsibilities and procedures.</p> <p>7.1.2. The service provider has documented policies and procedures related to financial management and reporting.</p> <p>7.1.3. The service provider has processes in place to monitor and manage compliance and performance of services according to contractual obligations and service/funding agreements.</p> <p>7.1.4. The service provider has processes in place to identify and ensure compliance with relevant State/Territory and Commonwealth legislation.</p> <p>7.1.5. The service provider can demonstrate that the following policies and procedures have been applied:</p> <ul style="list-style-type: none"> <li>– Governance arrangements</li> <li>– Financial management and reporting</li> <li>– Compliance with legislation.</li> </ul>
<p>7.2. The service provider understands and engages with the community in which it operates and reflects this in service planning and development, to the benefit of service users.</p>	<p>7.2.1. The service provider has processes in place to monitor the profile and needs of the community in which it operates.</p> <p>7.2.2. The service provider has processes in place to be responsive to changing community needs, within contractual obligations and service/funding agreements.</p> <p>7.2.3. The service provider has processes in place to engage service users and the community in service development and management.</p> <p>7.2.4. The service provider has processes in place to work in collaboration with other community partners to meet the needs of identified groups within the community.</p>

## Standards 7 – Efficient and Effective Management

Expected Outcomes	Minimum Performance Criteria
7.3. The service provider continuously improves services provided to service users.	7.3.1. The service provider can demonstrate that it has a continuous quality improvement approach to service delivery and management.
7.4. The service provider identifies and addresses potential risk, to ensure the safety of service users, staff and the organisation.	7.4.1. The service provider has documented policies and procedures related to the management of risk. Potential risks include: <ul style="list-style-type: none"> <li>- Occupational health and safety risks</li> <li>- Financial risks</li> <li>- Clinical risks</li> <li>- Risk related to the management of external contractors.</li> </ul>
7.5. The service provider manages human resources to ensure that appropriately skilled and trained staff/volunteers are available for the safe delivery of care and services to service users.	7.5.1. The service provider has documented policies and procedures related to recruitment, selection and appointment of staff with the skills and competence to meet the needs of service users and the organisation. 7.5.2. The service provider has documented policies and procedures related to recruitment and selection processes of volunteers, to meet the needs of service users and the organisation. 7.5.3. The service provider can demonstrate that all staff and volunteers have access to: <ul style="list-style-type: none"> <li>- A documented orientation program</li> <li>- Ongoing training, based on the needs of both the organisation and the individual</li> <li>- Orientation and training to address any special needs of service users.</li> </ul> 7.5.4. The service provider can demonstrate that it has processes in place to support staff retention.