

Summary of a Preliminary Survey  
of  
Aged Care Providers  
in  
Regards to  
Their Perceptions  
of  
Round Three Accreditation

Presented  
To  
Senator the Hon Santo Santoro  
Minister for Ageing  
31 January 2007

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## Disclaimer

The author of this document is a firm believer that accreditation has been necessary and has overall provided very positive outcomes for residents. It is also important to point out that not all facilities have grasped accreditation principles and some are still struggling either through ignorance of what is required or the ability to ensure that quality practices are initiated and adhered to. This should neither preclude nor diminish their right to fair, objective, unbiased and equitable treatment in every interaction with The Aged Care Standards and Accreditation Agency Ltd.

The author takes full responsibility for the contents of this document with the belief that the details are accurate and correct, to the best of his knowledge. While many people have provided details, observations and comments over time, sadly they must remain anonymous, respecting their perceived fear of retribution.

*Neil Baron*

31 January 2007

***“Feedback shows 80 per cent of service providers are satisfied with Agency performance ”***

- The Aged Care Standards and Accreditation Agency Ltd - Charter of commitment to service quality – review and measures

Dear Minister,

As the sixth Minister to oversee the challenging portfolio since the inception of the *Aged Care Act 1997* we wish to present you with this document in the hope that issues that have been raised, admittedly from a minority view, will be seriously investigated and that any corrective action that is deemed appropriate is initiated and presented to the aged care industry in order to provide continued confidence that the system is functioning in an unbiased, objective and transparent manner.

It is of critical importance to ensure that those involved in this most demanding of tasks, that is the successful day to day operation of a residential aged care facility, know that while measures are in place to provide for successful outcomes in regards to accreditation, that the operation of these outcomes will be implemented in a professional, objective and responsible manner.

Further it is imperative for future stability and satisfaction of these staff and providers to know that they will receive the same unbiased, objective and professional considerations irregardless of what auditor is present and that the same measures and criteria will be universally applied.

It is imperative to examine the issue of residential aged care and the accreditation system in totality, rather than in segments or isolation. While most facilities have been successful in achieving three-year accreditation with compliance of the 44 expected outcomes, the present system places the onus and responsibility on senior staff to ensure that the system works.

A perception exists that there appears to be little scrutiny of how the process is carried out in regards to your assessors, if services are subjected to biased or preconceived notions or if those doing the audit are objective, transparent and fair. This area is full of mystery to the community, with allegedly little attempt by the Aged Care Standards and Accreditation Agency Ltd. to provide transparency. Indeed, many facilities that have attempted to find further details allegedly indicate that they are rebuffed or treated with disdain.

It is also important for services to know what particular hat (auditor or educator) is being worn at any particular time and finally there is wide spread fear and concern over the perception of retribution or 'targeting' if complaints are made about the process.

It must be noted that while observers are at times present during an audit, this author has been present on more than one occasion; assessors appear to modify their behaviour at those times. A verbal complaint was mentioned to one observer in regards to an assessor unnecessarily unsettling staff by delaying a scheduled meeting by 45 minutes while he was 'otherwise engaged'. Anything done to address this issue was unknown as no feedback was received. It might be perceived that observers are present to cover actions of auditors, as it is impossible to gain any information on their actions.

Many senior staff and approved providers have expressed concerns over bringing issues forward at a State level due to these perceptions. When this matter was presented to The Aged Care Standards and Accreditation Agency Ltd. CEO, Mark Brandon, he indicated they could contact him directly. Unfortunately many individuals are still frightened of retribution.

Minister, this is a serious issue and one that has been fobbed off as being 'unrealistic' or that 'someone is perhaps being a bit paranoid'. Yet the Agency has not been able to provide a strategy or plan that will successfully alleviate these concerns.

Many CEOs and Approved Providers instruct staff not to complain as it might have a negative impact on their organisation, which might incorporate multiple sites. If you are serious about finding out what is actually happening Minister you must go past just talking to CEOs and large facilities. At their level they might factually indicate that there are no problems but a discussion with their staff, who are daily experiencing difficulties might provide a much different look at the area.

It has also been indicated by Agency staff that any questioning of the Agency should be addressed by the relevant peak bodies, while in theory this has merit it must be appreciated that most of the day to day staff responsible for ensuring compliance have very little interaction or influence on these bodies.

These staff are the same people that are so crucial to the continued successful operation of aged care, yet often feel undervalued and believe that no one will listen to their concerns. They are also the ones that leave the industry and take many years of expertise and strategies that are vital for the sustained care and quality of life of residents with them. Some, while not totally leaving the industry, go to work for nursing agencies where they feel better treated and supported and have greater control over their lives.

Residential Aged Care is majority composed of staff from a nursing background, an area that is widely recognised as:

- experiencing shortages of sufficient numbers of adequately trained personnel,
- an ageing population that are approaching a point of retirement or at least divestment of the pressure cooker areas to ones that are less stressful,
- an industry that is receiving less financial reward as compared to other nursing areas,
- an industry that has had perhaps the greatest amount of scrutiny and regulatory demands in the nation;
- a mandatory demand to demonstrate, at short notice, work practice that may be subjectively judged by individuals that might admit to not being able to do the same, if they were asked,
- continually dealing with aspects of grief, death, pain and comforting of family, residents and staff over the loss of residents,
- needing to successfully deal with approved providers who may not fully understand or comprehend issues, and are not subjected to the scrutiny, of those on the floor,
- possibly putting their professional integrity and future livelihood in question by carrying out actions and demands of approved providers that may be questionable,

- dealing with an ever growing labour force of carers that has been trained and promoted as an area of employment with too little pre-entry monitoring whether they have an aptitude for the area,
- an area that is under constant media scrutiny to expose deficiencies, problems or disorders but provides very little in positive reinforcement,
- dealing with a monopolistic bureaucratic organisation that is perceived to wield the big sword with the potential for dire consequences for senior staff that are seen as not ‘playing the game’ including participation in education sessions and industry events,
- dealing with an accreditation process that is deemed non-perceptive, but in reality is constituted of ‘motherhood statements’ that lack definitions and sufficient indicators to provide universal understanding,

to name but a few of the ongoing difficulties that must be faced and successfully overcome.

While it is often suggested that people should not take on the challenges if they are not ‘up to the job’ and in theory this notion has validity, the reality is that the majority of people are dedicated, passionate and committed to meeting the needs of residents under their care.

Many do genuinely express these sentiments while indicating that issues that have been highlighted above are leading to stress, burnout and to being partially or totally disillusioned to the point of “getting out of the industry” as the only viable option.

This is not to say that the job of running facilities is being neglected, but rather to state that it is perceived that the cost or burden is placed on the shoulder of senior staff that receive little gratitude when things go right, but cop the blame when things go wrong. It is important to note that in residential aged care staff make up the largest area of expenditure (ranging between 65 – 85% of income) and are the weakest link in the provision of quality care and maintaining accreditation. It has been repeatedly reported by approved providers that a change of senior staff have resulted in facilities going from three year accreditation with compliance in 44 expected outcomes to problems within a matter of months.

The ramifications of facility deficiency issues are directed at senior staff and may result in complex and long lasting issues with questions of professional competence and integrity (with possible reporting of register nurses to relevant licensing authorities for investigation) a perceived lost of stature within the community and with peers, a decrease in self-confidence and areas of depression and or disillusion.

While the approved provider is where the responsibility rightly lies, it is often seen that any difficulties are the result of the Director of Nursing or the senior staff, under a variety of titles. *Expected Outcome 1.5 Planning and Leadership – The organisation has documented the residential care service’s vision, values, philosophy, objectives and commitment to quality throughout the service*, does little to ensure that the approved provider is aware of its obligation and is taking responsibility of its duties.

A number of Approved Providers have little understanding or comprehension of the accreditation process and the huge effort required to ensure compliance in a system that is overly subjective and at the mercy of the assessor on the day. Some Approved Providers are well meaning, community minded individuals that are not aware of their obligations.

While The Aged Care Standards and Accreditation Agency Ltd does highlight in their document, *Results and Processes Guide*, page 5, December 2006 that; “*The Quality of Care Principles 1997 make clear that every home can choose how to respond to their obligations to comply with the Accreditation Standards*” this very important concept appears to be forgotten or ignored by some assessors who continue to impose their views, value systems or notions on what should or should not be happening and what is the correct way of performing and recording these areas.

The interpretation by individual assessors of the expected outcomes, complete with condescending and patronising attitudes has had a negative effect on many in the industry (refer to facility responses later in this report). That facilities are able to identify differences in assessor approaches suggests that consistency is not being adhered to and that a lack of a systematic approach is being practiced.

While this practice may not result in facilities failing to achieve compliance in the necessary 44 expected outcomes and thereby gaining three-year accreditation, it has resulted in some instances in demoralised and traumatised staff, high levels of stress, a lack of confidence by staff of their duties and obligations, high levels of uncertainty, a lack of what is required to comply and a belief that the accreditation system is not the fair and transparent process that it is purported to be.

Individuals have taken stress and sick leave with extreme cases being reported of hospitalization and at one level may have been responsible for a death. There is a perception that if you are given compliance that you should not complain or be over sensitive over the process that got you there. This is patently wrong and needs to be addressed.

## **The Survey**

The survey was developed and carried out to capture and summarise comments and complaints of senior staff in facilities in South Australia when asked the simple question of “how was accreditation for you?” The survey was sent by mail to all South Australian facilities on our data base along with a copy of an industry newsletter, *The Baron Report*, which attempts to highlights matters of current interest to residential aged care facilities. A random sample of surveys were also included in matter sent to facilities throughout the rest of Australia in order to seek to validate for consistency. The total cost of the exercise was administered and paid for by N & C Baron & Associates.

The survey consisted of a double-sided A4 sheet with ten questions:

1. How would you describe the accreditation process for this round?
2. How did this round compare with previous round?
3. How would you describe the auditors involved in your process?
4. Were the auditors 'helpful'?
5. Was the process conducted the way that you thought it would be?
6. Do you believe the auditing process was:  
Educational Directive Informative
7. Would you be happy to have the same auditors back again?
8. Was the process 'transparent' (*def. easy to see through, understand, or recognise- Collins Concise Dictionary*)
9. Do you believe that your facility received 'value for money' from this process?
10. Did you return the feedback sheet to the Agency?

Each question had provision for an answer to the question from a quantitative perspective but further had an area for respondents to provide further comments, a qualitative response.

The response in South Australia equated to approximately 25% of facilities, with a range of views expressed in the comments area and should be examined and understood rather than just relying on percentiles as evidence.

It must be stated that this survey is but a starting point and should be seen as such, that is to treat results with caution but not to ignore or down play the importance of what facilities are saying.

If a facility has had to endure an accreditation process with an assessor that deviates from the *Aged Care Principles*, or chooses to 'put their own spin' on the process or torments staff then the only conclusion that a reasonable person could conceive is that the system does not work. If it is excused by saying that it only happens to a 'small' number and the majority are happy, it is important to categorically define what percentage the Minister is prepared to find acceptable.

For the aged care accreditation system to work it must be seen as fair, effective, non-judgmental and transparent by those that must subscribe to its services in order to remain in business. The present system is a monopoly that might be perceived as a law upon itself and to lack scrutiny for their actions.

Many believe that if they complain they will suffer retribution, harassment and needless time and expense having to defend their actions to assessors who may have preconceived motives and conclusions before even stepping through the door.

Facilities have indicated to this author that the notion of staying in the Agency's good book is reinforced by attending education session and events, not for the knowledge but rather to have their name ticked off. To some the role of the Agency is that of an always present 'big brother' keeping a selective eye on some facilities while allegedly appearing to give others an easy ride. As previously

mentioned perceptions are accepted as reality when enough ‘evidence’ appears to point in that direction. Either yourself Minister, or your five predecessors, or staff from the Agency stating that is not the case does very little to alleviate their concerns.

## The Results

If near enough is good enough then this survey could indicate that all is well and that facilities have little issues with the accreditation process. Indeed, many praise the ease and professionalism of the experience.

Unfortunately the converse is also present and it would be folly to interpret their concerns as simple that of malcontents not able to successfully comply. Much of the criticism and comment was not an attempt to push for an elimination or reduction of the system, but an attempt to ensure that a fair, effective and transparent one is universally applied to all facilities as indicated in Table one.

**Table 1. Responses to questionnaire**

Questions	Response	SA	NSW	VIC	QLD
1. How would you describe the accreditation process for this round?	Excellent	27.3	22.2	11.1	50
	Good	37.7	47.2	55.5	33.3
		<b>65</b>	<b>69.4</b>	<b>66.6</b>	<b>83.3</b>
	Fair	15	30.5	11.11	16.7
	Poor	20	0	22.22	0
	<b>35</b>	<b>30.5</b>	<b>33.33</b>	<b>16.7</b>	
2. How did this round compare with previous rounds?	Better	40.2	47	25	40
	Same	30.6	41.2	37.5	60
	Worse	29.2	11.8	37.5	0
3. How would you describe the auditors involved in your process?	Excellent	29.2	41.7	22.2	60
	Good	35.7	33.3	44.4	33.3
		<b>65</b>	<b>75</b>	<b>66.6</b>	<b>93.3</b>
	Fair	15.6	25	11.1	16.7
	Poor	19.4	0	22.2	0
	<b>35</b>	<b>25</b>	<b>33.3</b>	<b>16.7</b>	
4. Were the auditors helpful?	Yes	70	78	72.2	91.6
	No	30	22	28.8	8.4
5. Was the process conducted the way you thought it would be?	Yes	77	92	75	80
	No	23	8	25	20
	Better	44.4	71	33.3	100
	Worse	55.6	29	66.7	0
6a. Do you believe the auditing process was educational?	Yes	53.6	66.7	57.2	80
	No	46.4	33.3	42.8	20
	Yes	50	82	55.6	80

6b. Do you believe the auditing process was directive?	Yes	50	82	55.6	80
6b. Do you believe the auditing process was ineffective?	Yes	<del>50.4</del>	<del>78.3</del>	<del>74.4</del>	<del>80.3</del>
	No	40.6	26.7	25	16.7
7. Would you be happy to have the same auditors back again?	Yes	73.6	85	65	100
	No	26.4	15	35	0
8. Was the process transparent?	Yes	72.7	80	60	90
	No	27.3	20	40	10
9. Do you believe that your facility received value for money?	Yes	45	53.3	28.6	60
	No	55	46.7	71.4	40
	Yes	81	83.3	80	100
	No	19	16.7	20	0

*Figures are those presented in replies to surveys. 'No Answers' have not been calculated into the above percentages. Rounding has been used.*

*Primary focus South Australia other states for comparative purposes, but with reduced sample size. A small response number from Tasmania, the ACT and West Australia have not be included in this result, but this in no way indicates that their concerns are any less that those reported.*

## Respondent comments to the Questions, in their own words:

### 1. How would you describe the accreditation process for this round?

- Auditors were not pleasant and seemed to be very 'picky' even though they found no fault. A diminishing experience all round! Very little positive feedback.
- Staff were made to feel inadequate, unknowledgeable, stressed, incompetent.
- One auditor was good the other one was only fair.
- It is good to tidy things up and get our house in order.
- Received positive feedback and were given the opportunity to explain our processes.
- Assessors validated application.
- Would have been excellent if the software for application was more reliable.
- We knew exactly what was happening and had time to push for staff coverage when interviews occurred.
- Both Assessors from The Agency advised process would be transparent – which it clearly was not

- In the mind of one particular Assessor we were showing signs of concern for one particular expected outcome early on Day 1 but not a non-compliance.
- Repeated concerns raised by this Assessor at other interviews with members of the Management Team.
- When Team Leader asked on Day 2 how we were going, we were told we were fine and they would have told us by now if there was a non compliance.
- Facility Care Manager and Lifestyle Coordinator still felt uncomfortable with the Assessor concerned with this expected outcome and asked the Team Leader if they could provide some more evidence. They were told it wasn't necessary, but go ahead if they really wanted to.
- Team Leader and Assessor advised CEO and FCM 5 minutes prior to Exit Interview there was 100% compliance, however, it would be expected that areas identified in the Team's recommendations for one particular expected outcome be addressed by the next Support Visit otherwise it could become non compliant.
- At Exit Interview advised those present we complied with the entire 44 expected outcomes.
- Statement of Major Findings showed 44 compliant – 44 non compliant. Only half of the 44 expected outcomes ticked compliant, remainder were blank.
- Team Leader absent the next day when CEO attempted to contact re this error.
- Following day Team Leader contacted CEO to advise that they had a meeting with their Manager when they returned from our facility and were inclined to now make the expected outcome non compliant.
- CEO accepted however asked for the Statement of Major Findings be faxed with the result in which it was intended at the Exit Interview.
- Statement of Major Findings faxed showed 43/44 instead of the original 44.
- Improvement needed in approach. The approach needs to be systemized and fair between assessors.
  
- CEO contacted the Team Leader again and requested the amended Statement of Major Findings be faxed with the result in which it was intended at the Exit Interview.
- Statement of Major Findings received showing 44/44.
- Accreditation Report showed 43/44 with one expected outcome non compliant.
- Evident a lot of documentation (supportive evidence) provided was not referred to.
- Time table was changed several times at short notice by Team Leader which resulted in several members of the Management Team experiencing 3 interviews in a row
- Didn't conform to the time table
  - Packed up quickly to leave 1 hour earlier than the timetable on Day 2 advising everything was fine. Staff had been invited to the Exit

Interview and those who came in off duty were disappointed that the Assessors had already left

- Evident one Assessor had not done her homework as halfway through Day 1 asked if we were high care & later to the CEO asked if we were an exempt facility.
- This same Assessor repeated some questions over and over.
- Calm, thorough and educational.
- None of these descriptions fit. Auditors were pleasant but hard to know at times what they were looking for.
- Great to receive feedback that we are going in the right direction.
- The process re paperwork was good, the actual visit traumatic. 3<sup>rd</sup> experience of visit.
- Much less stressful than previous occasions.
- Assessors were very relaxed, pleasant and very helpful, making staff feel very relaxed about the visit.
- Positive, helpful.
- If compliance is a basic level of criteria why are they so pedantic about processes when all your results are above average, even excellent?
- Poor communication between agency and facility regarding what is expected each new round. I.e. Where have parts changed and what are new expectations. Too much of a “catch you if we can” mentality, not supportive enough on the whole.
- The auditors were very positive and were looking to see how our system worked, not dictate how it should be done. The suggestions they made were minor and we were told it was up to us whether we implemented them.
- Thorough and recognized good efforts.
- We had two external auditors, who had (or at least one had) a good grasp of small facilities.
- This round of accreditation was the most outstanding as the accreditors were very positive – focused on the good things we do
- Process in general is poor. If the paper trails are there then there are no issues, even if they have not been put into practice. “Bullshit baffles brains” The more academic the directing the process then the better the round goes.
- Very negative approach. No recognition of achievements. The focus seemed to be only on faults.
- Our 3<sup>rd</sup> Accreditation was much more confident from our perspective. We felt well prepared and were proud of our effort
- Assessors pleasant, transparent process, plenty of consultation
- (I have responsibilities for 8 RACS Nos) Tremendous variation between sites even when the assessors were the same: consistency was an issue. It’s very difficult to achieve what the Agency views as quality service delivery when they don’t provide consistent feedback about what that is
- Some difficulties due to building compliance – auditors we believe over reacted. Issues resolved @ further site review & new auditor excellent
- No problems, no stress, can come in anytime, more than welcome, & a great opportunity to showcase our good work – 2 days though not long enough as they just got a glimpse
- I don’t think the Gov realise that this causes excess paperwork and reduces times spent with Residents – so much for best practice it’s a joke

- No feedback provided i.e. the Desktop Application. No positive comments about what we do well.
- Very stressful for all
- Still very stressful for all involved
- (Good) It is very time consuming though
- This needs some clarification. The preparation time was difficult, the on site time was good.
- Not as traumatic as I thought it could be
- Compared to any other visit dreadful

## 2. How did this round compare with previous rounds?

- Previous experiences were positive and we felt a great sense of achievement afterwards (even though this time we won a better practice award!).
- From the new application and it's prompts, it was quite evident what they were looking for, and the auditors stuck to that.
- Progressively getting pickier. Looking to find fault. Every round gets harder, not easier.
- More transparent, less adversarial.
- Unable to compare, wasn't working here last round.
- We were more aware of the process and knew what follow through was occurring.
- Not having an industry Assessor as one of the Team did not provide a balance between knowledge and "real life" analysis. With all previous rounds there has been a sense of support. Exit interviews for previous rounds have been much more positive and encouraging for staff where staff have walked away feeling elated and important about what they do. This time it was just so, so. It was evident they just wanted to get out of our facility.
- Less stressful during visits.
- My first experience.
- I manage several sites and I notice distinct differences in expectations depending on site.
- Staff understood the process better so therefore the fear factor was reduced.
- (Worse) One of the team leaders.
- We knew where we were at right through the process – there were no unexpected surprises that were there last time.
- A pleasant positive experience - even with some humor, appreciated by all.
- Don't know was not involved.
- Very disappointed with the lack of enthusiasm and failure to appreciate quality.
- Similar problems as previous, process much too subjective, inconsistencies between auditors, requirements and issues often unclear, auditors unable to justify their findings.
- All staff found assessor's very positive and easy to relate to, it has not been this way in the past.
- Although the accreditation process puts auditors under pressure it's the support visits that are of greater concern.

- Other rounds I have felt that they were more focused on the negative
- This round the auditors made comments and supportive observations when they observed positive outcomes
- My first full round
- We found that the information required & questions asked were relevant to our practices & clientele
- Do not know, have not been through the process before
- (I have responsibilities for 8 RACS Nos) Tremendous variation between sites even when the assessors were the same: consistency was an issue. It's very difficult to achieve what the Agency views as quality service delivery when they don't provide consistent feedback about what that is
- We now have mature systems in place and feel more confident
- Everyone works hard to achieve a better outcome, even though your compliant – the outcome is never enough. Not good for morale as it is staff do not want to work in aged care – Hello! We are over regulated. It is the most regulated industry and someone has to draw a line in the sand.
- (Worse) Although this is a process that staff don't enjoy the staff previously have been supported, not felt threatened and encouraged to share information
- Either the auditors were better or we knew what we are doing better this time round (probably both)
- Even though the process is always stressful, in previous rounds we were left feeling really positive & good about ourselves, this time left us feeling down, 'what is the point' 'what do they want'
- (Worse) Because the auditors at my previous place of work were absolutely brilliant, while these more recent ones were good they were not brilliant
- Previous rounds were more positive and educational and acted as a boost for staff morale
- We were more prepared – I have done the assessors course (4 days anyway)

### 3. How would you describe the auditors involved in your process?

- Not pleasant to be with really. Very pedantic. Late for appointments scheduled with residents and families. Several complaints received from residents and families who stated they felt uncomfortable talking to auditors as if they didn't believe what they were saying.
- Very warm, professional people who made us (management) feel valued in what we had achieved.
- Due to the process of accreditation can never feel comfortable no matter how good they are.
- They were open, approachable and we didn't feel inadequate at any time.
- Both were good listeners and weren't in the least bit intimidating.
- Approachable, friendly.
- The auditors were friendly, approachable and encouraging.
- 2 auditors – 1 x good, 1 x fair.
- Evident both very new to The Agency
- Evident neither had worked in an upper management/leadership role

- Evident one Assessor in particular had personal views on how things should be done as a result of her previous career and tended to use those personal views as a measuring tool for our processes
- This same Assessor was unprofessional in front of other staff and tended to approach the wrong staff for the required information and based her analysis on their lack of knowledge of an area not familiar to them.
  - Staff felt she did not believe them when they told her things.
  - Threw her arms up in the air whilst interviewing staff when a particular worker walked past and commented “I can’t handle that one, she gets on my nerves”. Yet had not spoken to this person at all.
  - This same Assessor read item in communication book written by RN and then asked residents about this RN.
- Fair, just insight into needs of a facility and its routine for those who live within and work at.
- Pleasant but looking for familiarity with their own processes and pedantic.
- Range better, good and poor. Can be variable. I have had to complain about behavior of auditors. E.g. telling staff to ring them if they have a disagreement with management.
- They gave good feedback, gave time for explanation (good attitude).
- Team member good, Team leader poor.
- Explained what they wanted – spoke freely with staff and residents.
- I find that every auditor has their own particular area where they are “pedantic”.
- Very pleasant ladies with suggestions and ideas to assist and compliment with what we are doing.
- Friendly, helpful, positive suggestions.
- Poor personal skills, especially communication. Of course they knew their job but their agenda was based on processes rather than outcomes.
- (Poor) Having said this however, on more recent visits we have had some very pleasant auditors who I believe were helpful and did their job professionally.
- We had Marion Pocock and Deb Griffiths – both excellent.
- 1 was exceptional.
- Fair, friendly & approachable
- On the day fair, however support contacts prior to the visit some auditors were very poor, confusing, pedantic.
- Very fair, gave us ample opportunity to ‘present’ our service
- Auditors were aware of our specific service and did not ‘compare’ us with others
- 1 assessor excellent – 1 assessor fair only
- One good – one fair. The good one was thorough but fair, the fair one was blasé and a little lax.
- Our allocated assessor who goes to every site is very slow, often runs overtime & has consistently spent between 3-5 1/2 hrs with activities staff. Each site got 44 compliant. Assessors then comment that residents weren’t/t involved in activities on the planner during the visit – but they have 2 program staff with them for 3 – 5 1/2 hrs
- Approach was friendly – made staff feel comfortable
- Very supportive

- I think the auditors have been watching too many police series. One plays good cop and the other is the bad cop.
- Interviews felt like interrogation, not supported. Schedule not adhered to at all. Expected staff to 'drop and attend.'
- Very nitpicking & negative
- Very intimidating. Had staff in tears
- Poor communication skills, very confrontational
- Lacking in informed, up to date knowledge of the industry in 2006
- They had difficulty comprehending that we were part of a larger health service. They wanted to see Aged Care more separated from the organisation.
- Very fair & thorough
- Fair – interactive offering future direction options to be ready for next review
- Male auditor excellent – female auditor – good, but attitude changed when the Agency observer was not present
- Very negative – Processes we have used to show CI & which have received good feedback from previous auditors, were considered as not meeting the Standard by these auditors
- Needs some people skills
- Can't comment on this as I was not previously fully involved as I was this time
- You had an idea what to expect as not first up
- (Worse) We have always received good feedback from previous auditors, whereas these auditors were determined to find fault
- Felt we were better prepared at site
- Auditors talked over what you were trying to say

#### 4. Were the auditors 'helpful'?

- Wrong explanation given about the gloves we use.
- We were compliant in 44 standards and auditor suggestion was an IT program we are considering to streamline CQI logging and follow through.
- At times through the grilling.
- One auditor was understanding and helpful. One auditor needs to reflect on the meaning of compliance.
- Very judgmental. Feedback was standard routine.
- Staff and relatives and residents felt comfortable talking to them.
- Helpful feedback from the auditor alerting us to be watchful of certain areas.
- No new suggestions.
- Very –
- Feedback was given but was very focused on what was wrong – positive feedback was minimal.
- Positive comments, helpful toward staff.
- As commented, pleasant and tried to be helpful.
- Generally.
- Very, when they were in the home, they were always giving feedback.
- Team member, yes, team leader, no.

- Generic responses that gave no real direction or purpose.
- Yes – gave suggestions on how to do things easier.
- Friendly, helpful, positive suggestions.
- Not too bad.
- Not positive until the exit interview. The lack of feedback was stressful. I'm still unhappy six months later.
- More recent auditors have been more helpful and provided some education. Earlier in this round we had some who were very unhelpful (bordering on obstructive) demeaned staff and could not validate some of their findings.
- Organised.
- Gave us every opportunity to provide information.
- Not really
- On the accreditation visit yes, but during the months leading up (support contacts) not always
- Where they felt there could be improvement made suggestions or discussed it in such a way that we resolved how the improvement could be done
- Offered ample opportunity to provide information
- 1 assessor yes 1 assessor no
- Clear explanation of all requests gave helpful suggestions and ideas for further improvement
- (yes) However method of giving feedback @ exit meetings needs to be worked on – should always start with the positives & would be nice if they gave compliance rating up front rather than last
- I auditor wanted many more audits & surveys & was not keen to use other data to support satisfaction (e.g. increased number of residents participating in activities)
- Were very successful in meeting with all levels of staff and residents
- Considerate of staff duties when interviewing

## 5. Was the process conducted the way that you thought it would be?

- Would like a more relaxed manner – it is stressful enough!! A bit of positive feedback would be nice after all the obvious hard work and great support of residents and families. Better time management would improve the flow of the visit.
- Always anxious about this process, never feel relaxed.
- Same old thing, each auditor appears to have their own “agenda”.
- They (auditors) were flexible and allowed for changes to the program e.g one particular group asked to have the other auditor as they wished to demonstrate their improvements to her since last support visit.
- Very professional, maintained a good sense of humor throughout.
- If the agency expect to see certain criteria, why not develop a preference that we just fill in ??
- The auditors explained the schedule and away we went, no problems.
- The team leader did not triangulate. Very little observation. Spent 45 minutes with one complaining resident and tried to make non-compliance. Then spent 1 1/2 hours next morning arguing.

- Didn't expect great outcomes – overall average process.
- More relaxed than I imagined.
- Friendly, helpful, positive suggestions.
- Generally yes. We haven't had any high expectations of process up to this point, with no confidence that we will be provided with a transparent, professional and consistent appraisal of our facility and processes (based on previous visits).
- Made the staff feel at ease.
- Still like appearing in court before a judge & jury, however guilty until proven innocent
- We weren't sure what really to expect as we completed our audit in November 2005 and there had not been much feedback by other facilities
- (yes) However last minute changes to the schedule (ie on the day) make it difficult to have corporate staff present & can cause issues with the roster
- Much better
- I think that all three accreditation audits that I have been involved with are different by nature of the auditors background. Even though outcomes are compliant. Some auditors are like dogs with bones. They never let go. There is not enough emphasis on loving and caring. Give us back the good old days when you gave hugs and kisses, laughter & fun as well as good nursing practice.
- No – I expected a more supported visit. With staff empowered to share knowledge, experience & processes. I would have expected that all staff would be listened to and respect given to the staff who were providing care to the residents to arrange mutually accepted time for interview.
- They had the 2 activity staff in a room for 4 ½ hours & then at the end of the day had the nerve to say that in 'the morning they observed residents walking around and calling out' – no wonder, who was meant to do the Activity work. They stated "what about other staff" They did not seem to acknowledge that all staff have their own roles to play.
- We started the audit on a very positive note as previous audits had been so good. We ended very deflated and confused.
- (Worse) The agency states that they are there to assist organisations to improve to ensure & outcomes for residents, which is agreed is a necessary task, but the entire process starts from a – position where we have to prove beyond doubt what we say we do, and are then judged on the appropriateness of those outcomes
- (Yes) Very thorough. We believe we really earned our 44/44.
- Although I had little to compare it with, except support visits which have on occasion been quite traumatic for us.
- No major 'surprises'
- This was a "spot check" & what you see is what you get in our facility. Considering feedback has been so positive in the past, the response from these auditors was very negative
- Standard process

## 6. Do you believe the auditing process was educational, directive, informative?

- Stressful and glad when it was over. Difficult to see any value in the visit.
- Stressful, several staff members in tears.
- One auditor was informative, the other one made directives.
- Educational as we did reflect on our achievements.
- Validated application.
- Suggestions such as “have you thought of/tried...” were given.
- In part but it was intimidating, demeaning and bordering on bullying of some staff.
- Yes we needed to know the process is a negative expectorial [sic] one!!!
- Where the Assessor had doubts about one particular expected outcome, she lacked the capability to express what they were. On receipt of the news that this expected outcome had been made non compliant, we immediately engaged a former Assessor to review our performance for this expected outcome. This person identified and communicated the gaps succinctly and efficiently in a supportive way. Resulting from this more professional review, we were able to develop a clear and concise improvement plan for that expected outcome that we feel confident will improve outcomes for our residents.
- At times I thought maybe we weren't compliant. As I think our residents tell us we provide a good level of care this was disconcerting. How do you defend appropriate care?? Whose definition.
- Hurried, rude. Intimidating for staff who felt the surveyor was trying to “put words into their mouth.”
- There is always something new to learn.
- Definitely not direct.
- Validating what we already knew!
- Learnt a lot about evaluating ourselves and how results for residents is so important.
- Positive input in all ways.
- At small places they interview every resident and every available staff member. They read every resident file. Instead of validating our results and evaluations they nit-pick at things they would never see at a large facility.
- Last visit the auditors we had provided some education through their program and were more helpful than previous.
- The whole system is subjected to the ‘whims’ of the individual auditor
- Auditors were happy to share their knowledge and experience
- 1 assessor very educational – 1 assessor DIRECTIVE
- was educational for some of our newer employees as it was their 1<sup>st</sup> experience. Very good for other staff, to remind them of systems and processes.
- Auditors gave clear concise information
- Timetable not adhered to, information not shared
- Just stressful
- The process confused us and was not at all helpful in developing an action plan or direction for continuous improvement
- Not informative however I felt validated that the facility was performing well

- Directive in that we had an opportunity to discuss our weaknesses and future planning
- As for question 4 (?) Constructive comments have been noted & changes to process made in response
- They gave us information that we could follow up on.

## 7. Would you be happy to have the same auditors back again?

- Would definitely not like the same auditors back! They require training in communication/personal relations/customer service!
- When the auditors have tears in their eyes as we announce how well we've done, they're our type of people!
- To see the improvements we've made not to find other areas to pick on.
- Doesn't matter.
- One of the auditors was very helpful in some ways.
- I think continuity of auditors increases "local knowledge" and follow-ups more measured and informative.
- Really appreciated having an auditor who had shared support visits with us. Both were excellent!
- 1 auditor – yes, 1 auditor – no
- Both were positive and pleasant in their approach.
- They were pleasant, but the process leaves everyone exhausted.
- Very pleasant and well organised.
- Team member Jeanne Hall, definitely. Team leader no (she has left the agency).
- We have never had any issues with auditors.
- Definitely.
- Particularly as environmental improvements are recognized by site.
- One interrogated the staff, they never want to see her again. The other appeared uncertain and let herself be restricted by her team leader.
- Yes – those that visited most recently.
- 1 yes 1 no - he was just trying to drum up business for himself
- Some auditors are clear & easily understood, while others go off on tangents. The auditors on the day of the actual audit visit were all right, however as the facility had many different auditors over the months before some were terrible and the thought of having them do any audit anywhere is frightening.
- Only one of them – the educator
- So long as they are consistent across all sites
- 2<sup>nd</sup> auditor
- Definitely not one of them this time (a)round
- 1 auditors yes – the other no. Feedback from staff in relation to one auditor was – they felt threatened, intimidated, she didn't record what they had said accurately. Didn't listen
- Even higher management thought the exit meeting was negative compares to what they'd heard at other sites

- It is quite clear from researching which auditors go to which organisations there = the outcome
- Would prefer that actually as now these auditors know about our whole health service
- They were understanding & very supportive, professional & approachable
- (Yes) I have heard some horror stories from other facilities
- (No) One auditors in particular was aggressive with a negative attitude – guilty until proven otherwise
- (Yes) Though we know that won't happen, the nursing auditor has left the Agency
- Definitely not

## 8. Was the process 'transparent' (*def. easy to see through, understand, or recognise- Collins Concise Dictionary*)?

- Felt there was some ulterior motive – looking to find fault – negative attitude – disappointing.
- Overkill (not enough credit given for the excellent things in place).
- The way one auditor asked questions made it hard to understand what he/she was looking for and even what outcome he/she was referring to.
- The auditors used language which was theoretical, unclear and staff and residents found it difficult to understand and respond at times.
- Easy to understand.
- We know that the information we provided was the information they followed through with in all areas.
- No surprises.
- We received all 44 standards and 3 years. Why were we left feeling exhausted and demoralized??
- Process, not site audit.
- Not during site audit.
- Not during site audit.
- At the end of the second day (exit) announced that visit to be extended by one day. I had to remind her of transparency.
- The clarified the process of systems and gave an understanding of the purpose of systems.
- Any miscommunication was quietly re-explained which dispelled nervousness/anxiety.
- Had no idea what they were thinking until they raved how good we were at the exit meeting. I kept asking for feedback, asking what they wanted, what we should do to provide information but felt totally uncertain and in the dark.
- Badly needs to be more objective and less subjective. We should know what is expected at each round beforehand (i.e. Where the goalposts are!) There should be a “minimum standard” system which is consistent.
- Very clearly defined what they were looking for.
- Her yes him no
- We were informed of the process at the beginning, during and at the completion of our visit. It is difficult to say otherwise because we were not in any position where there might have been lack of transparency

- We were impressed with the ‘openness’ of the audit & felt that there was a 2 way experience
- Mostly Good feedback given along the way
- I have to say it was
- (No) As above the assessors had poor communication skills and many items noted on the report were not even mentioned at audit.
- How can the agency say that the process is transparent when many facilities receive reports with new information in them
- Accreditation visit appears transparent but decision making process and follow up was not helpful
- They did not embrace the technology side at all

## 9. Do you believe that your facility received 'value for money' from this process?

- Not with the stressful time the staff and residents are put through.
- The punitive approach was unsettling.
- No education on new information.
- Yes, we felt affirmed, encouraged and residents and families felt proud of their facility and very involved in the process.
- 2-day review was appropriate.
- It seemed to us that neither assessor had any significant line management experience and this showed up in a number of ways eg, they appeared to have a poor understanding of the linkage of management to strategic planning as well as having a poor appreciation of quality systems. Previous assessors with strong line management & QA backgrounds have complimented our approach to KPI's where as these assessors seemed to think that we were short on “quality activities” because they did not understand KPI's – or alternatively had not at all familiarized themselves with our self assessment, which we also believe was in evidence
- Too costly an exercise that is ‘forced’ upon us, how can the fee be justified?
- CN, hostel supervisor and myself were devastated.
- I believe the “cost” is well above the actual cost.
- They couldn't see the big picture: that all results were evaluated against the business plan. They wouldn't let me explain it. Three times changed my direction away from showing them. They later said we were supposed to show them, but again it was too late to try.
- Definitely not. Agency staff not only need to be able to identify problems but also should be active in helping homes achieve standards and be able to indicate exactly what's required and how to achieve it. It should not be a guessing game!!
- It is an expensive process and don't believe that the cost is justified. This is a general comment and does not relate to this round of accreditation.
- Although it was a good process, I don't believe it is worth the money paid for it.
- (Yes) if indeed being put through the wringer or worse (or perceived worse) is something you want to pay for?
- The money would be better spent upgrading facilities

I'm not sure exactly what we get for our money as we have completed our systems and have had little input from the Agency. Based on that no.

- If you consider value is achieving 44/44 – yes. Difficult to define – are we now delivering a better service? – probably. Doubt that it was worth the thousands of dollars – could this money have been better spent?
- In comparison to private hospital ACHs costs, ours is a little more expensive, I think the Agency should review fees especially for isolated or stand alone facilities. This is a lot of money.
- I have to say they did cover compliance and that's good
- Extra time for staff (unpaid) plus extra time & money for staff to check over things put a strain on finances and staff
- I believe the costings for accreditation are extremely high
- (No) Definitely not – this facility has lost lots of money due to inconsistency between assessors & audits
- The time & effort put in by the facility can not be viewed as value for money, when the Agency Accredits you, but you have no choice. Money could certainly be better spent resulting in more + outcomes.
- (No) Non compliance created a high level of extra work, stress, process for prescriptive outcome
- (No) 'Value for money' would indicate receiving something positive
- (No response) Unsure how to evaluate this
- (No) I could have spent this money much more wisely

## **10. Did you return the feedback sheet to the Agency?**

- Where are the results of these published. I probably wasn't as honest as I have been on this form for obvious reasons!
- (No) Unsure what would happen.
- (No) There is no use, as the next audit could be worse.
- (No) Fear of retribution.
- Currently our response to the non-compliance is with The Agency for review. When we receive our Accreditation Certificate and only then will we provide feedback in fear of repercussions.
- I suggest that The Agency needs to get together with the industry. The process is not pleasant or helpful.
- Previous experience very good.
- Complaint to state manager – verbal. State manager resolved to my satisfaction.
- Haven't as yet but intending to.
- CN & hostel supervisors comments were sent on feedback sheet.
- I didn't feel I could write anything positive and that it would look like we were complaining because we didn't get the award we applied for.
- On most occasions we have – and also stated all problems and concerns when appropriate.
- Gave good feedback.
- The feedback forms are not anonymous
- In the past I have raised concerns that we feel that the process does not allow auditors on opportunity to praise a facility for aspects of their service that of a

high standard. This time we found that there was such praise and the staff were so proud of their efforts as it was validated by the Agency.

- The Agency feedback sheet asked for names; of facility & person filling in the data. It is my understanding that feedback should be anonymous.
- Am acting manager – don't know
- However I have had 5 of my 8 RACS nos [sic] go through with one common assessor & I have not seen any changes
- (No) Don't want feedback to impact on outcome
- We were told at exit meeting they value feedback & that it is completely anonymous. How can this be when the feedback sheets are coded & the facility name is on the top? One does not dare give them feedback for fear of retribution.
- (Yes) However was very careful about comments as I believe a previous poor feedback has had an impact.
- (No) We went into the agency & spoke to them directly to voice our concerns
- Questions don't really enable a true reflection of the process
- Completed by senior manager
- (Yes) As this was a 'spot' check, I as A/C Manager, had a commitment elsewhere & returned to find the staff involved very stressed. Auditors must realise that intimidation will not improve care

### Any further comments, you wish to make.

- I have received no feedback from the agency about ...(unreadable)... to complain for fear of retaliation but I decided to report complaints from residents and relatives – my duty of care. Thank you for the opportunity to be blatantly honest!!
- The paperwork to keep the Auditors happy has become massive (Auditors getting to picky with the paperwork) Are the residents happy etc. should be the most important thing.
- We find support visits more difficult than Accreditation because we don't know beforehand which staff to make available or which areas need extra staff coverage e.g. if kitchen staff need to give time to the auditors meals still need to be cooked and prepared without pressure.
- Thank you for the opportunity to partake in this questionnaire. Clearly there were some questions on your questionnaire that we would like to be asked by The Agency on their feedback sheet, which is reluctantly missing. Maybe they should ask us what we want to be asked about the visit. It would be useful to download your questionnaire so that it doesn't have to be retyped by those who have a lot to say!!!!
- This is a very stressful process. As a group who pride themselves on the care provided we were left exhausted and demoralized. This is an environment where staff can be difficult to recruit. Not good enough.
- Previous experiences have been very good.
- Previous experiences very good. One surveyor creating havoc in the state.
- I have found great variability in approach depending on auditors and site. I manage a number from small facilities in old building to larger facilities in state of the art buildings.
- Have no idea why our evaluations were never good enough. Not happy with their short sighted view of us having to introduce and evaluate projects as

opposed to improving all aspects of people's lives and evaluating outcomes against business plan KPI's.

- We need a transparent system (one involving “minimum standards” needed to pass accreditation.) More objective assessment processes, more than one choice of auditing company. An independent and speedy process for addressing serious complaints/concerns.
- One area of concern: Although we had numerous improvements in DT activities, we had to demonstrate that these were resident request – sometimes this is really difficult for high care (often dementia) residents to come up with the ideas themselves, despite them being very happy with everything done in the way of activities.
- Our auditors did not get carried away about things not being “perfect” in fact accepted some imperfections as normal – where they posed no risk. The process they used was real, grounded people. Despite our good outcome, past history suggests that this is not always so.
- The not for profit facilities fair far better – have teams of academics leading the process, but doubtful if the end care is better
- How are issues raised in our feedback to Agency dealt with & why do we not receive any feedback? I.e. My residents & relatives made complaints about the auditors to me – I included these on my feedback to agency – what has been done about this? No feedback from agency received – nearly 12 months since visit now!
- Feedback to agency is anonymous. The process was extremely stressful. A systematic approach is urgently required.
- I attended 5 Resthaven accreditation visits with same auditors & found them excellent at each visit
- Inconsistency of expectations of auditors a little difficult
- Staff & volunteers traumatized by the process. Some left in tears, some would not return to the facility if they were present.
- It would be far more beneficial to interview staff, residents & relatives, review all policies & procedures & look at the documentation than this system of expecting audits on everything. I certainly won't be in aged care for the next round.
- There has to be a simpler easier less stressful way of doing this. Lovely facilities are ‘just’ passing & poorly run ones seem to pass easily.
- Have given concerns above to ACCA who forwarded them to the Agency. Their comment was they cannot act unless they are given specifics. They will not get specifics if facilities are concerned about retribution!
- This facility was open & transparent with the Agency when they identified problems & felt penalized for this, this organisation believes the Agency has an “Agenda” – force it into Amalgamation with large company
- I feel the process is very time consuming & causes us to lose resident focus in many areas. It also seems much of our work is directed towards keeping the agency happy.
- The decision making process was considered harsh by the facility based on previous experience/record
- The auditing process should be a positive experience, fostering a desire to improve & exceed the Standards. I found this round very stressful & a negative experience.

- Here is our response to your accreditation survey. We retyped it as we had quite a bit to say!!! Please ensure we are not identified if you use any of this information in great fear of retribution. We would also like to comment on Mark Brandon's response to facilities not saying anything to the Agency in a negative manner in relation to their accreditation experience in fear of retaliation which was mentioned in your recent newsletter. "Mark's response was that accreditation feedback sheets are overwhelmingly positive and that nobody complained so therefore they could only conclude that there were no problems." I wonder what the Agency would say if the industry responded that way!! In fact our complaints management system was criticized on one of our Support Visits for having a low rate of complaints. We were told that there must be something wrong with our system where people are finding it too difficult to complain or are concerned about making a complaint. Two sets of rules again – still.
- My staff were all asked how they got on with me. How did I react if they rang me at home? I must be the 45 outcome.

Good One Minister, lets have more unannounced visits – A sure way to keep up our stress levels and drive what staff we have away.

How about attracting more staff so our residents will have more individual attention, which equals better care? Money injected to allow more checking – WHAT A WASTE.

DON

I have been part of the accreditation process as an external aged care assessor, as a quality manager in aged care and more recently as an executive officer of a small rural aged care facility for the last 6 years. I have participated in the accreditation process across 3 states. NSW, QLD & SA.

I can confirm that assessors are inconsistent, prescriptive and condescending.

I have worked with & been audited by assessors who have very little experience in quality management.

I have seen facilities found to be non compliant when they were compliant compared to like facilities & I have seen sites compliant when they were obviously non-compliant.

My last audit on August 05 my organisation did not receive the audit schedule & the dates of the audit until 7 days before site audit.

As a small facility with 20 staff I was unable to provide staff with their rostered shifts until 7 days before the site audit.

DON – External auditor

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## Other States

### New South Wales

#### 1. How would you describe the accreditation process for this round?

- The accreditation auditors were excellent – their people skills made the process enjoyable and not stressful
- One auditor was determined to find faults. Her questioning was interrogatory.
- I found it stressful and confronting knowing that we provide an exceptionally high standard of care but could be refused accreditation for not having the bits of paper proving it on the day was a concern
- Still quite threatening
- No idea, not involved prior years
- (Good) But still stressful for all being questioned endlessly for 2 days and everything scrutinized with “nitpicking” to find small things (nothing critical but just not how they would do it )
- Not altogether encouraging
- Standard 4 OH&S – Assessor unaware of numerical profiling process so consequently never took into account
- Excessive intrusion; excessive box ticking approach not outcome focused  
Assessors much more realistic & helpful - not downgrading

#### 2. How did this round compare with previous rounds?

- It was the first time for me as manager but we did fare better this report than the last
- (same) Different emphasis
- Always stressful for all staff
- There was too much subjectivity & ‘nitpicking’ which gave our staff negative feedback
- Very thorough. Lots of cross checking of answers.
- Had 3 assessors – never again – drilled down far to much

#### 3. How would you describe the auditors involved in your process?

- They were fair, had a high level of skill & knowledge, friendly and motivating in their manner
- One was good, one was pain
- One was good, the other was fair
- One of the auditors was excellent. She was down to earth and able to communicate effectively with staff and residents. The other was confronting, not able to communicate her wishes and kept requesting the same information

to be produced over and over each time she thought it may relate to the expected outcome she happened to be working on at the time

- 1 good – 1 less good – one accreditor gave very limited positive feedback, other fine.
- Very nice with lovely smiles but still felt like you were being questioned by police (with smiles) for two days
- Team leader was excellent but the other assessor was pedantic
- Positive feedback to provider, management & staff on all aspects of CQI on all occasions was valued
- One auditor saw only black and white – did not understand other approaches could provide a similar or better result

#### 4. Were the auditors 'helpful'?

- I was given useful advice on medication incident management that helped me improve our system
- To some extent
- One was, one wasn't
- 1 yes, 1 less helpful
- Unsure
- One was helpful – the T.L. The other was not helpful
- Very predictable in auditing process
- Gave valid reasons for implementations in place
- Constructive suggestions for improvements
- Very fair & thorough on every occasion
- No new initiatives – only more paperwork

#### 5. Was the process conducted the way that you thought it would be?

- I was very impressed with the auditors ability to relax people and educate them through their behaviour and manner that AUDITING is a positive process and not the stressful nightmare most people expect.
- I had worse experiences with annual site visits
- I understood the information they would be needing but was told one staff member needed to be available to help them. In fact both auditors required a staff member each and because we are a small facility were then left scrambling for sufficient supervision for residents and visiting families
- It was too subjective. The 2<sup>nd</sup> assessor was looking for problems
- Aged Care Accreditation more intricate than ACHS process
- Have been through previous accreditation
- Full explanations on process outlined in detail at entry meeting
- Only focus on negatives do not point out great work being conducted by facilities

## 6. Do you believe the auditing process was educational, directive, informative?

- Again I feel that the success of our audit visit had a lot to do with the excellent 'people skills' displayed by the auditors
- They tried to be directive
- Aged care needs to evolve into a new management approach based on TQM. Current auditors – focus on excessive documentation

## 7. Would you be happy to have the same auditors back again?

- All staff who had contact with the auditors were pleasantly surprised by how friendly and easy to talk to they were.
- One of them – we cannot nominate auditors – from past experiences
- One would be welcome anytime but the other appeared to have no empathy for what we are doing and no willingness to understand our management process. (To be fair I have since heard she was a new auditor, hopefully experience will help).
- Unsure – always ask for auditors who have been great either at previous accreditation or as trainers but never get same ones anyway
- (No) The team leader was exceptionally good but the other assessor did not seem to be as informative or as aware of the process
- "Better the devil you know"!
- We have had approx 6 site visits & recent accreditation over 2-3 years, and have found each & every auditor from the Agency, most professional in all their dealings whether negative or positive
- Only ever have 2 auditors again

## 8. Was the process 'transparent' (*def. easy to see through, understand, or recognise- Collins Concise Dictionary*)?

- Information about the process, and what actually happened were identical.
- I suggested that the Agency should appoint a small group of auditors to be responsible for ensuring standards in the N Homes under their responsibility – to which another DON stated that it would be unfair if N Homes get an unrealistic auditor.
- I was expected to know the ins and outs of the '44 expected outcomes' and everything in the facility that related to them, off the top of my head without referring to references. I.e. what are you doing to comply with Standard 4.1?
- (No) It was a particularly stressful time for all involved

- At all times, throughout the process was transparent, When issues were noted, Agency staff was quick to clarify throughout the audits

## 9. Do you believe that your facility received 'value for money' from this process?

- It is expensive, but I felt that we were being assessed by experts who gave us a lot of motivation, advice and valuable feedback.
- I think the accreditation process is necessary and needs to continue, however I think it costs too (much)
- We pay a lot of money and an excellent self assessment details – making their job simpler (No)
- No cost to us due to small facility
- Money better spent on much needed equipment for the residents
- Although we didn't pay as have < 20 residents
- Expected processes in place
- Excessive costs involved in paying agency no major positive initiatives – excessive stress for senior management
- A very costly process – not value for money

## 10. Did you return the feedback sheet to the Agency?

- I wanted the agency to know how good our auditors were.
- I had returned previously negative feedbacks to Agency (Yes)
- I noted on the feedback sheet the attitude and rudeness of the auditor and how stressful the process was.
- Will do after I get confirmation from agency of Accreditation & better practice awards
- This is a good idea. Even though ours was a positive experience , one feels constrained when completing the feedback sheet, to the Agency.
- With favourable comments, each time
- Do not trust agency

## Any further comments, you wish to make.

- Our organization enjoyed our on site audit – it was positive, MOTIVATING and REWARDING thanks to the way it was conducted by the auditors
- I do not support spot checks – Policing of Aged Care facility is not right. It's no wonder there is not enough RNs, DDSW & DSW wanting to work under these stressful environment!
- We have done great things in the way of continuous improvement for all standards for 21/2 years and then spent the 6 months before the audit preparing and fine tuning. The auditor only wanted to know the continuous improvement for the 6 months before the audit!! Not everything we had done over the 3 years since previous accreditation was taken into account.
- Still so dependant on who does it whether it's a good or bad process

- Administration is onerous for small facilities, streamlining the burden would help
- Needs to be better system. Good places are being scrutinized too much and far too much paper work leaving less time for resident care. Not so good places do not appear to have any more scrutiny.
- I applaud the introduction of a tool/process to monitor care in aged care facilities. It remains a stressful event which all facilities dread. I liken it to year 12 exams. I have been fortunate & had fair assessors; other facilities have not been as lucky. It's invasive, uncomfortable & extremely subjective. All assessors are different – no consistent messages for organisations to act on.
- I felt this round was far more stringent, less flexible
- We always confront difficulties due to being part of an Area Health service & policies procedures area are not always aged care specific
- Accreditation process fair, frequent spot check shortly after same seem to be “overkill”
- At each audit, we have always found the auditors very fair, reasonable & transparent at all times. They are there to account for taxpayers money
- Need to look at outcomes. Need to look at a more NATA approach to approach to accreditation. Assessors should be other practicing aged care managers – cross fertilization

## VICTORIA

### 1. How would you describe the accreditation process for this round?

- Belong to 3 campus health service. Each site audited as separate entities. Senior management have to attend all 3 audits & present same material.
- Subjective, inflexible, unprofessional conduct by Assessors in relation to communication with staff and thorough lack of professionalism to accept different processes which met the outcomes
- Still a few subjective comments though (no need for this)
- We found the Accreditors efficient, fair and approachable
- The team leader was not experienced enough. Lacked depth with audit process
- Reluctant to rate excellent – this was 8<sup>th</sup> audit I've been involved with – was easily the easiest!

### 2. How did this round compare with previous rounds?

- Individual auditors still have individual focus.
- Previous visits have been conducted by assessors with professional experience
- More confidence this time – staff felt that they could challenge subjective suggestions
- My first time as DON
- Unable to comment – 1<sup>st</sup> one at this facility

- Negative/ Difficult experiences previously still colour expectations
- Previous experiences had been positive
- Previous experience had been positive. Facility had made major improvements this round – no acknowledgement! The resulting report did not reflect all practices/initiatives implemented – very disappointing.

### 3. How would you describe the auditors involved in your process?

- One auditor friendly put staff at ease, encouraging, constructive comments. 2<sup>nd</sup> auditor made process unpleasant experience, asked questions in a way that was confusing. made staff uneasy, made unnecessary comments
- Unprofessional, dictatorial, emotive
- Nurses still concentrating “too hard” on clinical issues rather than outcomes. Is not a hospital!!!
- As above (The team leader was not experienced enough. Lacked depth with audit process)
- After 8 audits – the auditors/team are certainly the key

### 4. Were the auditors 'helpful'?

- Team leader unhelpful in comments e.g. “I’m not interested in your glossy folders.”
- Feedback was vague to say the least. The final report subjective & lacked real substance & reference source.
- In most cases yes – but sometimes unworkable ideas cause tension
- (Yes) for Standard 2 – the auditor was an RN (1) – very helpful
- Not prescriptive as others have been, - as a result ‘vague’ by comparison - objective
- Not really, but certainly pleasant

### 5. Was the process conducted the way that you thought it would be?

- Similar to previous experiences although a lot of the material that was asked to be provided prior to audit was not looked at – a lot of setting up – putting away
- Certainly not as it has been in the past when feedback and consultation provided excellent results. The facility gained from the experience and were motivated to continue to improve.
- Auditors need to talk more to staff, residents and their families. They have this notion that paperwork is the “be all”!!
- As I said previous experience coloured expectations & caused stress!
- Very little contact with residents “or floor” staff. My expectation was they would observe & talk with staff rather than constantly check & read paper work! (Which we know can be made up!!)

## 6. Do you believe the auditing process was educational, directive, informative?

- Prior to audit a lot of information is looked at 'refreshed' in everyone's mind
- Dictatorial
- Assessors imposed over advising experiences and opinions and directives and were absolute rude no consideration for processes in place
- We all know what we have to do. Auditors generally don't 'educate' 0 they tell!!
- Standard 2 yes
- Offered advice that was relevant to what they found but not prescriptive at all

## 7. Would you be happy to have the same auditors back again?

- Lack of professionalism should actually be appraised by the Agency performance was pitiful. (NO)
- After having an auditor from SA for our 'spot check' – I would much rather have her!!
- Absolutely – familiar with industry, were thorough without being overly so, were objective when looking at our system & processes
- (No) The auditors required more training on the Act and on interpretation performance data. Our auditors were inexperienced – placing two inexperienced auditors together?

## 8. Was the process 'transparent' (*def. easy to see through, understand, or recognise- Collins Concise Dictionary*)?

- Team leader did not ask questions clearly, used a lot of 'lingo' that was not transparent
- Due to lack of objective feedback (NO)
- My complaint for years now!!! It has never been transparent!! Still too subjective.
- (No) Different auditors have different 'barrows to push'
- Communicated well – told us things as were found – no surprises in exit meeting or report

## 9. Do you believe that your facility received 'value for money' from this process?

- Desk top audit takes a lot of time & effort to fill in before the actual audit. This was not looked at or commented on a lot of the questions the team leader asked have been clarified in that document.

- The Accreditation process has been most helpful in the past and well worth while the money but on this occasion only served to demoralize staff and create uncertainty for residents/relatives
- Not for that amount of money!
- We passed all 44 standards so from a Re Accreditation perspective – YES!
- Yes & No – Good outcome passed all 44 standards Audit took < 12 hours not 16
- Unsure if the process is of real value if it is so concentrated on paperwork/documentation

## 10. Did you return the feedback sheet to the Agency?

- Although feedback sheet was not ‘glowing’ I was not as honest as I have been here – I don’t want a spot visit every month for the next 3 years.
- With similar (negative) comments on the form
- You very rarely (if ever---who has?) see any changes made relating to your feedback!
- (No) (1) Fear of intimidation by Agency; (2) staff too traumatized on experience to comment

## Any further comments, you wish to make.

- Each of the 3 sites of our services had different auditors. The disparity between those audits areas focused on areas praised or criticised was very apparent.
- Staff sickness doubled after the visit, staff moral decreased Staff experienced a felling of “how can we do anything” “What is the point of it all”
- More transparent process needed! We need to know exactly what to expect when we are being audited!
- If we have external check to make ACFs safe, well run, efficient businesses then Accreditors are doing their jobs and the Aged benefit
- I suggest they need the paperwork sent to them prior to accreditation & spend more time ‘talking’ with families, residents & people giving the care. (I’m assuming they get it in plenty of time)

## Queensland

### 1. How would you describe the accreditation process for this round?

- The desk top audit consolidated all our processes for us
- We have just had a 3yr Accreditation visit (17<sup>th</sup> 18<sup>th</sup> August) Both assessors were helpful – one phoned before coming to inform us that if we used the Assessors Handbook from the Accreditation (Stds Agency) site we would know exactly

what they were looking for. We gave individual staff who were going to be interviewed a copy of relevant sections which enabled them to be more prepared for questions asked.

## 2. How did this round compare with previous rounds?

- Can't comment – wasn't here then
- Have never had any difficulties with any accreditation site visits
- We had a very bad experience during a support visit in 2005 – we were told we needed to improve and given 3 weeks to 'fix' the problem. The follow up visits x 2 were much better & the assessors, much more helpful. Our problems had involved care planning – we were expected to redo 48 care plans in 3 weeks.

## 3. How would you describe the auditors involved in your process?

- Team Leader was well organised and it was obvious that he was very familiar with our application
- Excellent the last 2 times. With our 'bad' experience I felt the assessor was out to get us – no matter what & we had to beat the clock if we wanted to stay on top.

## 4. Were the auditors 'helpful'?

- Team Leader provided us with ideas to enhance our systems

## 5. Was the process conducted the way that you thought it would be?

- Both members of the team conducted themselves in a manner that immediately put the staff at ease

## 6. Do you believe the auditing process was educational, directive, informative?

- It confirmed for us that our systems are very good and they do work

## 7. Would you be happy to have the same auditors back again?

- 

## 8. Was the process 'transparent' (*def. easy to see through, understand, or recognise- Collins Concise Dictionary*)?

- Mostly
- It was obvious they were only asking to validate information we had provided in our application

## 9. Do you believe that your facility received 'value for money' from this process?

- A huge waste of time
- We paid for 2 days of Accreditation and the team leader stated at exit interview they had trouble filling the time on the 2<sup>nd</sup> day (no)

## 10. Did you return the feedback sheet to the Agency?

- 

## Any further comments, you wish to make.

- After having negative Auditors for a support visit, This round was open; educational and received positive feedback. Congratulations
- If they find that something hasn't been followed through then they go looking & I accept that. I do firmly believe this is the best thing that has happened to aged care & I support the whole process. If they identify a problem – then thank you and lets fix it.

## Conclusion

As has previously been indicated, it would be premature to come to any hard and fast conclusions due to its size and scope, but it would be folly to not take seriously the sentiment that concerns are present over the current system. It would take a brave person indeed to condone a system where a facility, regardless of final result, can be either put through the ringer or have a professional experience due solely to the quality and demeanour of the assessor on that day. It could be seen as even greater folly for those in charge of this monopoly situation to allegedly position themselves in such a manner that they ignore or fob off facility concerns and questions and to be perceived as capable of any manner of retribution if challenged. It is important for everyone to know that someone independent is there to “police the police” and the system is fair and equitable to all.

In response to many inquiries in regards to this final document, it will be posted on the website of the author, [www.ncbaron.com](http://www.ncbaron.com) as will your forthcoming response.

Your response to these issues will be eagerly awaited.