



Aged Care

Standards and Accreditation Agency Ltd

Annual Report 2008/2009



evidence-based practice self-directed learning packages Better Practice QUEST resident care
quality improvement transparency relationship quality of life
relatives safety and quality framework person-centred care
resident focused care quality of care residents
continuous improvement consumer involvement



Quality
ISO 9001

SAI GLOBAL

Annual Report 2008-2009

Aged Care Standards and Accreditation Agency Ltd

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Aged Care Standards and Accreditation Agency Ltd's Annual Report 2008/2009 can be accessed via the internet at www.accreditation.org.au.

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Annual Report 2008/2009

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Message from the Chairman

I am pleased to present the annual report and financial accounts of the activities of the Aged Care Standards and Accreditation Agency Ltd for 2008/09.

During the year, the Agency was appointed for a further three-year period as the accreditation body under the *Aged Care Act 1997*, and we continue to attract international recognition as a leading accrediting body through our links with the International Society for Quality in health care.

The Agency plays a pivotal role in promoting safety and quality in Australian Government subsidised residential aged care homes.

While the accreditation related processes invariably involve a relationship principally between the accrediting body and the approved provider, the accreditation scheme exists for the benefit of consumers, in particular residents.

There are a number of stakeholders with an interest in the assessment and its outcomes. These include of course residents and relatives of residents, but also prospective residents and intending consumers of aged care services, the staff, management and owners of aged care facilities, the government and the taxpayer generally who seek reassurance that substantial public monies allocated to providers, directly or as subsidies, are achieving the required level of care for residents consistent with the community's expectations and the Accreditation Standards.

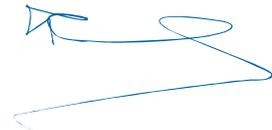
The processes for managing the accreditation arrangement recognise that accreditation is one part of a broad safety and quality framework directed at safeguarding the quality of care and quality of life of residents and promoting quality improvement in the sector.

We also maintained our strong education program. The Board believes that it is this combination of education and accreditation that will contribute to and promote the continuous improvement in sector performance for the benefit of residents.

During the year, the Minister for Ageing, the Hon Justine Elliot MP, announced a review of the accreditation arrangements and Accreditation Standards. We welcome the reviews and have made a submission on a proposed accreditation model.

During the year, we also welcomed to the Board five new directors: Kate Carnell AO, Dr Sally Goold OAM, Dr June Heinrich OAM, Dr Andrew Refshauge, and Dr Mike Rungie.

On behalf of the Board, I would also like to congratulate our Chief Executive Officer, Mark Brandon, the management and the staff for their manifest commitment to the work of the Company in its role as the accreditation body.



Jim Harrowell AM
Chairman



Message from the Chief Executive Officer

The year marked the commencement of 'round four' of accreditation as residential aged care homes went through the triennial audit cycle. In addition, we delivered the Australian Government's commitment that each home receives at least one unannounced visit each year.

This involved an unprecedented level of activity as we undertook 7,595 visits including 1,622 site audits, 104 review audits, and 5,869 support contacts, including 3,538 unannounced visits.

This was an increase on the previous year and placed significant demand on management and staff in resourcing, scheduling and decision-making. As we have done in previous accreditation rounds, we supplemented our permanent workforce with casual and contract assessors and administrative/clerical staff. We now have a pool of around 500 registered aged care quality assessors.

This was also the first full year of operation of our new "Better Business" accreditation system. This upgraded IT platform included streamlining our business processes and electronic communication with approved providers.

The accreditation round will continue into the first half of 2009/10. We will publish

an analysis of the industry's performance at the end of the cycle as we have in the past.

As an accreditation body, we also submit ourselves to external scrutiny. Our management systems have been independently certified by SAI Global as meeting the AS/NZS ISO 9001 Quality Management Systems.

Our assessor training and management program has already been accredited by the International Society for Quality in health care (ISQua) under their International Accreditation Program.

Our aim is to also achieve ISQua accreditation of the Company in early 2009/10.

At the time of writing, we have just undergone an audit by international surveyors from ISQua.



Mark Brandon
Chief Executive Officer



Part one

The Agency

Vision

To make a significant contribution to quality consumer focused aged care through accreditation and education.

Mission

To ensure the delivery of high quality aged care by:

- promoting innovation and best practice
- accrediting services that meet the Accreditation Standards
- working with services to continually improve their performance
- providing information about industry performance
- providing education directed at improving practice.

Our values

- *Protection of residents* – we focus our efforts to promote the care, safety and wellbeing of residents
- *Colleagues* – we value our colleagues and the contribution they make to our work
- *Positive working relationships* – we work together to achieve better results
- *Acceptance of responsibility* – we accept responsibility for our actions
- *Ethical conduct* – we carry out our work with integrity, fairness and a balanced consideration of evidence
- *Quality and innovation* – we aspire to do our best and improve the way we do things
- *Environment* – we actively work towards the efficient use of resources and minimising our impact on the environment.

evidence-based practice self-directed learning packages Better Practice QUEST resident care quality improvement transparency relationship quality of life relatives safety and quality framework person-centred care resident focused care quality of care residents continuous improvement consumer involvement

Part one – The Agency

Overview

The Agency is a company, limited by guarantee, wholly owned by the Australian Government, established under the *Corporations Act 2001* and the *Commonwealth Authorities and Companies Act 1997*. The Secretary of the Department of Health and Ageing has appointed the Agency as the accreditation body under the *Aged Care Act 1997*.

Role and functions

Our functions and role of the accreditation body are set out in the Accreditation Grant Principles 1999. These are:

- manage the residential aged care accreditation process using the Accreditation Standards
- promote high quality care and assist industry to improve service quality by identifying best practice, and providing information, education and training
- assess and strategically manage services working towards accreditation
- liaise with the Department of Health and Ageing about services that do not comply with the Accreditation Standards.

We fulfil our functions using processes and principles set in legislation, notably the *Aged Care Act 1997*, the Accountability Principles 1998 and the Accreditation Grant Principles 1999. The delivery of these functions is subject to a written agreement with the Department of Health and Ageing made under s.80-1 of the *Aged Care Act 1997*.

Structure and governance

Our organisational structure reflects our national role as an independent accreditation body, with divisional offices responsible for policy, procedures and corporate functions, and regional offices responsible for program and product delivery.

Executive management and divisional offices are located in Sydney. Regional offices are in Sydney (covering most of NSW and the ACT with branch offices in Newcastle and Mittagong), Melbourne (covering Victoria and Tasmania with branch offices in Hobart and Geelong), Brisbane (covering Queensland and northern rivers district of NSW), Perth (covering WA) and Adelaide (covering SA and NT). Each regional office has a senior executive responsible for its activities. Contact details for each office are in the Appendix.



Part one – The Agency

The Board of Directors has overall responsibility for our strategic direction and performance. The Board's role is corporate governance: ensuring that the Company fulfils the functions specified in its agreement with the Department of Health and Ageing and in accordance with the requirements of legislation, and ensuring proper prudential management of its funds. The Board is not involved in making accreditation decisions. Details of the Board for the period of 2008/09 are included in the Directors' Report.

The Chief Executive Officer (CEO) is responsible for the operational management of the Company and for ensuring the delivery of the core functions. The CEO reports to the Board and maintains regular communication with senior executives of the Department of Health and Ageing and other stakeholders.

The CEO and the divisional General Managers form the executive management team (EMT).

The national leadership team (NLT) meets regularly and comprises the members of the EMT along with the State Managers. The NLT meeting is the major forum for interaction, exchange of information, quality improvement and forward planning as well as providing input into significant issues.

Relationship with the Department of Health and Ageing

We contribute to the achievement of outcome four, a portfolio outcome set by the Australian Government for the Department of Health and Ageing (the Department). Outcome four is described as: "Older Australians enjoy independence, good health and wellbeing. High quality, cost-effective care is accessible to frail older people, and their carers are supported."

We report twice a year to the Department on the key performance indicators set out in the Deed of Funding. These key performance indicators are reported in part seven of this annual report under Performance.

We work with the Department to promote quality aged care by:

- liaising with the Department about homes not meeting their obligations under the Act, including providing reports about non-compliance as required under the Accreditation Grant Principles 1999
- responding to requests from the Department to conduct review audits
- reporting regularly about the status and performance of aged care homes.

The Agency and the Department have a protocol regarding actions each organisation takes where non-compliance is identified or suspected. The protocol supports coordination of actions to deal with non-compliance, with the Department and the Agency making independent assessments about appropriate action.

We inform the Department of any non-compliance with the Accreditation Standards identified during assessments. We will impose a timetable for improvement and monitor the home's progress in rectifying any identified non-compliance. Where homes fail to rectify compliance within the timetable for improvement period, the Accreditation Grant Principles 1999 require the Agency to recommend to the Department that sanctions be imposed. The Department makes an independent decision on what sanctions, if any, are imposed.

The CEO and other executives represent the Agency at Senate Estimates Community Affairs Committee hearings.

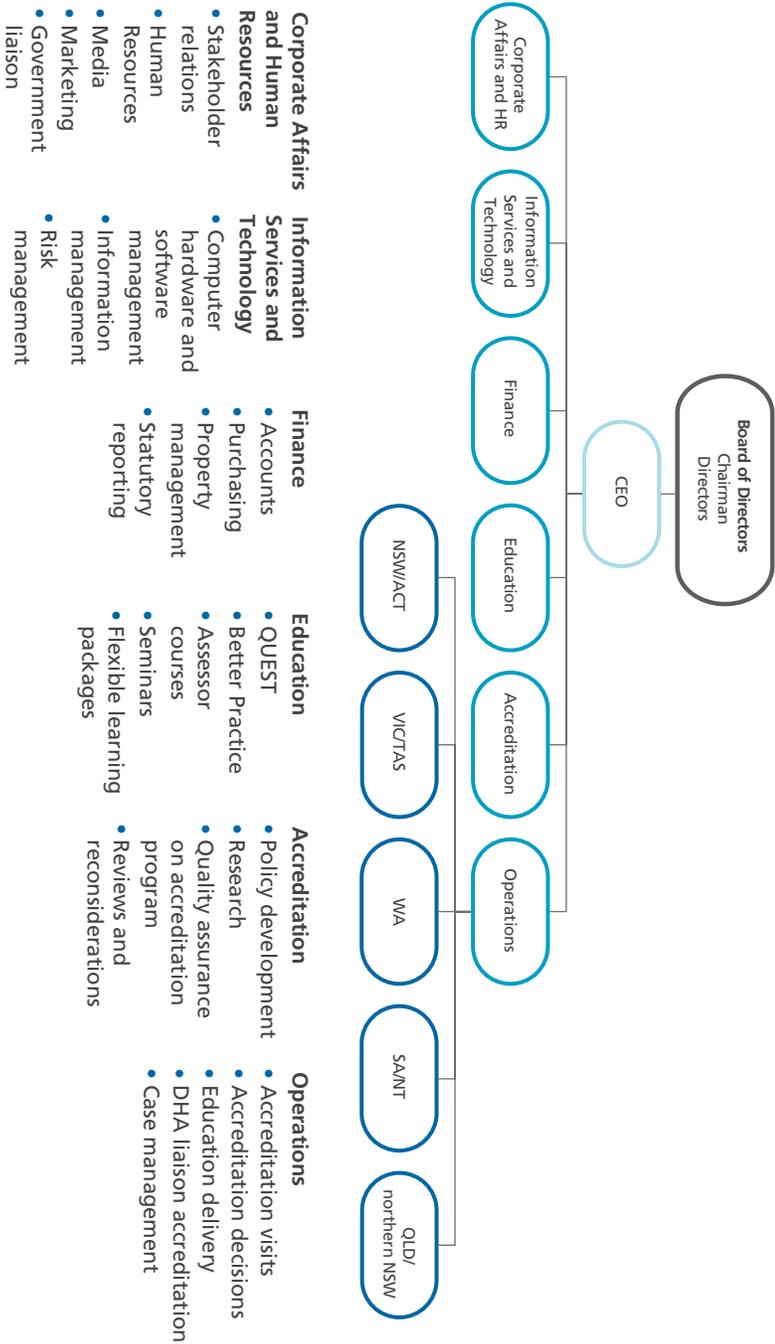
There is also a protocol between the Agency and the Department about the regular exchange of data in relation to activity and outcomes.

Relationship with the Aged Care Commissioner

The Aged Care Commissioner has a function to examine complaints concerning the conduct of the accreditation body relating to its responsibilities under the Accreditation Grant Principles 1999, or the conduct of a person or persons carrying out an audit or making a support contact. We have a protocol with the Commissioner for managing the examination of complaints.

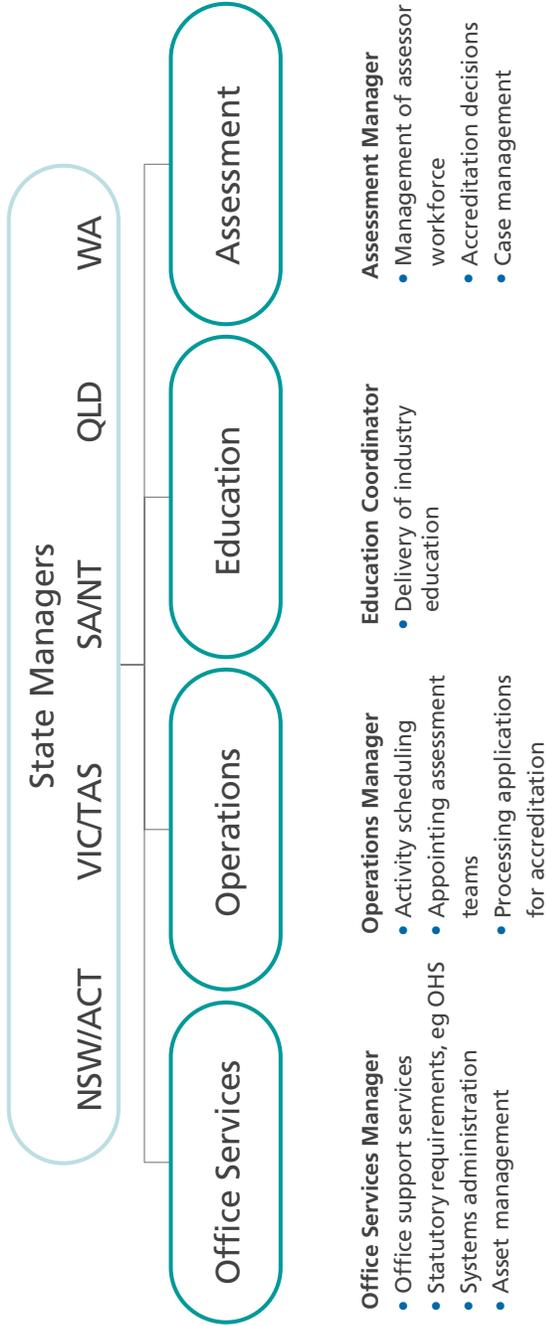
Part one – The Agency

Company organisational chart, as at 30 June 2009



Part one – The Agency

Company organisational chart regional offices, as at 30 June 2009



Part two

Accreditation and Operations

Accreditation overview

Australian Government subsidised residential aged care homes must be accredited in order to receive residential care subsidies. The main accreditation arrangements for residential aged care homes are specified in the Accreditation Grant Principles 1999 (the Principles) and are described below.

Assessing homes' performance against the Accreditation Standards

We assess the performance of all accredited residential aged care homes against the expected outcomes set out in the Accreditation Standards to ensure outcomes are achieved for residents. A case management approach is used to determine the type and frequency of contacts with aged care homes. Monitoring performance against the Accreditation Standards includes visits to homes and consideration of information, such as, information about changes at homes that may affect the provision of care and services, and information referred by the Department of Health and Ageing.

The case management approach ensures that we consider the individual circumstances of each home in order to determine the appropriate review and assessment actions. This case management approach is also used to consider the performance of homes, as a group, where an approved provider manages a number of homes.

Visits to homes to assess their performance against the Standards may be accreditation site audits, support contacts or review audits. Support contacts or review audits may be announced or unannounced.

The Australian Government requires that each home receives at least one unannounced visit each year. We have a national program of unannounced visits to ensure this requirement is met.

Part two – Accreditation and Operations

Support contacts

A support contact is a visit by registered aged care quality assessors to an aged care home for the purpose of:

- assessing performance against the Accreditation Standards
- assisting the home to undertake continuous improvement
- identifying whether there is a need for a review audit, or
- providing additional information or education.

Support contacts are usually conducted over one half to a full day by one to three assessors. However, the duration of support contacts is determined case by case taking into account the circumstances of the home. Support contacts may involve an overview of the home's performance against all the Accreditation Standards, may be focused on certain aspects of care or services, or cover one or more of the 'assessment modules'. In particular, any matters previously identified as requiring improvement will be assessed.

Following a support contact, a report is given to the home setting out the recommendations of the assessment team. The home has the opportunity to provide a response before a decision is made. A decision as to the home's compliance is made separately by a decision maker appointed by the Agency Chief Executive under section 1.5 of the Accreditation Grant Principles 1999. The decision also includes information about areas the home needs to improve and whether the home's support contact arrangements need to be varied and whether a review audit is necessary.

Assessment modules

Assessment modules have been created to assist assessors and homes assess how well a home is performing. They have been developed as a series of themes and as a whole, cover all aspects of the Accreditation Standards.

Each module identifies what themes are being considered, the process the assessors should follow, which expected outcomes are most likely to be related to the module and broader considerations to be thought about. Importantly, each module is focused on residents.

If weaknesses in the home's systems are identified, assessors will follow up to determine if there is any non-compliance in relation to the Accreditation Standards or we may decide to conduct a comprehensive review audit.

Review audits

A review audit is an assessment of the quality of care provided by a home against all 44 expected outcomes of the Accreditation Standards. Review audits occur when there are concerns about a home's compliance with the Accreditation Standards.

Review audits are carried out on-site by an assessment team made up of at least two aged care quality assessors and generally take two to four days. The assessment team reviews documents, interviews staff, residents, relatives and other relevant people and observes the environment and practices of the home.

We may arrange for an assessment team to conduct a review audit of a home if:

- we have reason to believe the home is not complying with the Accreditation Standards
- there has been a change to the home such as a change of ownership or key personnel
- there has been a transfer of allocated places
- there has been a change to the premises of the home, or
- the home has not complied with the arrangements made for support contacts.

We must arrange a review audit if requested by the Secretary of the Department of Health and Ageing.

Part two – Accreditation and Operations

New homes

Applications can be made for the accreditation of new homes (called 'commencing services' in the Principles) before residents move into the home. Accreditation applications for new homes must identify how the Accreditation Standards will be satisfied once residents are admitted and also require a commitment to undertake continuous improvement. Under the Accreditation Grant Principles 1999, new homes can only be accredited for 12 months. They are then required to make application for a further period of accreditation.

Existing homes

Accredited aged care homes must apply for a further period of accreditation before their current period expires. The application for accreditation includes a self-assessment against the Accreditation Standards. The assessment team conducts a desk audit and a site audit of the home's performance against the Accreditation Standards and makes recommendations as set out in their report.

Site audits

A site audit is an assessment of the quality of care provided by a home against all 44 expected outcomes of the Accreditation Standards. The assessment team reviews documents, interviews staff, residents, relatives and other relevant people and observes the environment and practices of the home.

A site audit is scheduled after a provider of residential aged care applies for a further period of accreditation. The provider must submit a self-assessment as part of their application, and providers must also notify residents, and their representatives, of the date of the audit so that residents and their representatives can meet with the assessment team to provide their views as to the quality of care and services provided. The assessment team is required to gather and corroborate information including the views of residents. The views of residents and their representatives represent a very important aspect of the process of assessment.

Decisions

The Accreditation Grant Principles 1999 provide that decisions of the accredited body are made by an authorised accreditation decision-maker, taking into account the assessment team's report, responses to the assessment team's report and any other information known about the home. Accreditation decision makers are staff specifically appointed to make decisions within the Agency and are appointed following a selection process and having undergone a course in decision making.

Reconsideration and review

The approved provider may seek reconsideration of decisions made about the period of accreditation awarded to a home, any variation to the period of accreditation, a decision not to accredit or to revoke accreditation. The General Manager Accreditation usually makes the reconsidered decisions. A reconsideration takes into account the information considered by the original decision maker and the circumstances of the home at the time the reconsideration decision is being made. A reconsideration decision is not a review of the original decision but a fresh decision at a later point in time.

If the provider remains dissatisfied with the decision made upon reconsideration, in most cases they may apply to the Administrative Appeals Tribunal (AAT) for review of the decision.

Reconsiderations were sought in four per cent of decisions about accreditation.

Three applications were made for review by the AAT during the reporting period. Three applications were withdrawn during the period (including two that were lodged in the previous reporting period), and two are ongoing.

Part two – Accreditation and Operations

Accreditation status of residential aged care homes as at 30 June 2009

Accreditation Period as at 30/06/2009	NSW	VIC	QLD	SA	WA	TAS	ACT	NT	Australia
Homes accredited for:-									
Less than one year	6	6	6	0	1	0	0	0	19
One year - commencing homes	13	10	8	2	2	1	1	0	37
One year - existing homes	4	11	24	14	7	0	1	2	63
More than one year but less than two years	0	4	1	1	1	0	0	0	7
Two years	22	26	32	8	3	7	1	0	99
More than two years but less than three years	0	4	3	0	1	0	0	1	9
Three years	848	719	405	247	231	77	22	11	2560
Total accredited homes	893	780	479	272	246	85	25	14	2794
Accreditation period of:-									
Less than two years	2.6%	4.0%	8.1%	6.3%	4.5%	1.2%	8.0%	14.3%	4.5%
Two years but less than three years	2.5%	3.8%	7.3%	2.9%	1.6%	8.2%	4.0%	7.1%	3.9%
Three years	95.0%	92.2%	84.6%	90.8%	93.9%	90.6%	88.0%	78.6%	91.6%
Total	100.0%								

Part three

Education

We recognise the importance of education in the improvement of quality care. The Education division provides education to industry through a range of programs including Better Practice conferences, one-day seminars, assessor courses and training delivered in homes through the Quality Education on the Standards (QUEST) program, and web-based self-directed learning packages.

Marketing needs analysis

During the year we commissioned market research to better understand the sector's needs and their perceptions of the education products and services we offer.

Awareness of our education products is very high, with Better Practice, seminars and the assessment courses more than 90% awareness rating, and 82% of respondents agreeing that our education helps achieve a higher quality of care for residents.

"Good balance of learning materials, strategies, great adult educators."

(Aged care quality assessment course participant)

"Informative and encouraged participation from all. Stimulated discussion in a range of areas."

(Seminar participant)

"Best course I have attended in a long time. Very good 'job ready' information." (Aged care quality assessment course participant)

"Valuable content and learning about accreditation process. Really enjoyed the networking with other providers." (Assessor course participant)

evidence-based practice self-directed learning packages Better Practice QUEST resident care quality improvement transparency relationship quality of life relatives safety and quality framework person-centred care resident focused care quality of care residents continuous improvement consumer involvement

Part three – Education

Better Practice events

Better Practice events were held in Sydney, Melbourne, Perth, Brisbane, Adelaide and Launceston. Better Practice events provide a dynamic forum for industry to share and discuss examples of excellence and innovation about improving the quality of life for older Australians.

1,221 delegates attended the Better Practice events over the reporting period, and feedback continues to be positive.

Education conference

A conference was held in Melbourne specifically to meet the needs of those in aged care with responsibility for education and training. The conference attracted 153 delegates from around Australia. The presentations focused on harnessing the education and training function as an integral part of a strategic approach.

Aged care quality assessment course

The aged care quality assessment course is a rigorous and challenging course so that individuals can acquire the skills and knowledge to conduct assessments as a registered aged care quality assessor. The course is part of our assessor training and management program, which has been accredited by the International Society for Quality in health care (ISQua).

A total of 207 people attended the course during the period, bringing to more than 370 the total number of people who have attended the course since it was first offered in September 2006.

During the year, the course curriculum was updated to reflect legislative changes, and the latest international developments in contemporary audit practice, with the first updated course being offered in 2009/10.

“Good balance of learning materials, strategies, great adult educators.” (Aged care quality assessment course participant)

“Best course I have attended in a long time. Very good ‘job ready’ information.” (Aged care quality assessment course participant)

We also offer a four-day course for people who wish to conduct assessments in their own aged care homes, and who want to learn more about assessment and the accreditation processes.

During the reporting period 383 people completed the four-day course.

“Valuable content and learning about accreditation process. Really enjoyed the networking with other providers.” (Assessor course participant)

Seminars

We also offer a range of one-day seminars to improve industry knowledge and practice. Seminar topics include continuous improvement, evidence-based practice and managing risk to avoid non-compliance.

During the year, we developed a new seminar, ‘Managing risk to avoid non-compliance.’ This seminar concentrates on developing aged care providers’ knowledge and skills about managing common risks that can lead to non-compliance with the Accreditation Standards. During the seminar participants explore risk management principles and approaches, and work through a number of practical industry examples, to assist them with risk identification, analysis, management and planning.

During the reporting period, 45 seminars were staged in the major capitals as well as regional centres, with 595 people attending the various seminars.

“Informative and encouraged participation from all. Stimulated discussion in a range of areas.” (Seminar participant)

“Can’t wait to implement some learned content.” (Seminar participant)

Part three – Education

QUEST (Quality education on the Standards)

This highly popular program is a free education session of up to one and a half hours delivered by an experienced assessor to front-line care staff in residential aged care homes, designed to improve understanding of standards and accreditation.

The interactive sessions are delivered to groups of around 15 participants and include group activities, discussion and questions. Some homes choose to have joint sessions with neighbouring homes.

Program topics include Accreditation overview; Assessing the Standards; Accreditation for consumers – your role in aged care; Continuous improvement for residential aged care; Turn data into action; and Using resident feedback.

Assessors have delivered QUEST sessions to more than 37,500 front-line staff to around 2,415 homes since the introduction of the program. This includes 394 QUEST sessions provided to 5,218 people from 390 aged care homes in 2008/09.

Governance and Accreditation Toolbox

We developed a Governance and Accreditation Toolbox to help boards of residential aged care organisations keep pace with the demanding governance environment. The Governance package provides board members with clear guidance on their roles and responsibilities, and contains a set of useful tools and reporting templates that can be used off the shelf or customised to suit the particular organisation.

Self-directed learning packages

There are four self-directed learning packages on our website:

- Continuous improvement
- Data and measurement
- Self-assessment
- Demystifying dementia

These free self-directed packages are some of the most consistently popular downloads from our website.



Part four

Stakeholder relationship management

Industry relations

We are committed to consultation with stakeholders, and contributing as a key participant in industry forums and working groups.

The Board has a stakeholder engagement program including a function held prior to each meeting of the Board. Directors also participate in Better Practice events as session chairs and speakers. This enables Directors to meet with a range of stakeholders and obtain direct feedback regarding the Company and gain a broader understanding of the issues facing industry.

Management and staff also participate in a number of industry committees and working groups.

The Chief Executive Officer, General Managers and State Managers also attend and make presentations to industry conferences.

The Chief Executive Officer chairs the National Agency Liaison Group and State Managers chair each of the State Agency Liaison Groups. The liaison groups comprise representatives of

industry associations, unions, and consumer groups and discuss industry trends and provide feedback.

Relationship managers have been appointed for larger providers, and for those providers whose operations cross state borders. The relationship manager is responsible for coordinating the overall relationship with the provider, and for providing internal advice on case management of the group, and homes within the group. The relationship manager meets with the approved provider at least twice a year and acts as a central point for enquiries, service planning and contact for the provider in relation to all homes within the group.

Part four – Stakeholder relationship management

The Standard

Our newsletter *The Standard* is distributed monthly and is designed to provide practical advice and information to homes which can be readily adapted or implemented, and used in staff training sessions.

Issues covered during the year included risk management, information systems, infection control, and cultural and spiritual life.

The three consecutive special editions of *The Standard* published in July, August and September 2008 focused on risk management. The editions focused on sharing information concerning risk identification we have gained through our assessment activity.

A special mail-out to all aged care homes in November included the three special editions of *The Standard*, a free copy of the *Results and processes guide* and a wall planner.

Circulation of *The Standard* has grown to almost 7,000 per month. A small number of homes also choose to receive *The Standard* electronically.

Complaints and feedback

Complaints provide valuable feedback on service quality and the effectiveness of programs and policies.

All complaints are reviewed by the Chief Executive Officer on receipt at the Agency, and are followed through by the relevant General Manager or State Manager. All complaint responses are reviewed by the General Manager Corporate Affairs and Human Resources who has overall responsibility for complaints management.

During the year, our complaints procedures were refined so that the benchmark for response to complaints is now 28 days from the date on which a complaint is received. Where further investigation is required, we keep the complainant informed of progress.

When a complaint is received, the complaint, or the particulars of the complaint, are referred directly to the person who is the subject of the complaint, and a written response to the matters is usually sought. Responding to and dealing with complaints is also a part of the corporate induction process for new employees.

Complaints are collated and analysed annually to identify improvement opportunities and to inform learning and development programs, including assessor training and QAIT sessions dealing with effective on-site relationship management during the conduct of audits and support contacts, including unannounced visits.

During the year, we received 76 complaints.

This compares with 60 the previous year, and 111 in 2006/07.

The average length of time taken to finalise complaint responses was 28 days.

Most of the complaints related to aspects of assessor conduct such as asking too many questions too quickly, not listening to the answers, not adhering to an agreed audit schedule, being prescriptive or their human interactions with home staff.

Aged Care Commissioner

The Aged Care Commissioner can examine complaints about the conduct of the accreditation body relating to its responsibilities under the Accreditation Grant Principles 1999, or the conduct of a person or persons carrying out an audit or making a support contact (but not a complaint about the merits of a decision).

The Agency has cooperated with the Commissioner's examination of complaints.

At the start of the year, there were two unresolved matters being dealt with by the Commissioner. In one case, the matters complained of were found to be unsubstantiated. In the second matter,

Part four – Stakeholder relationship management

amendments were made to the wording on our website as recommended by the Commissioner.

During the year, two complaints were lodged with the Commissioner and the examination of these matters remains outstanding.

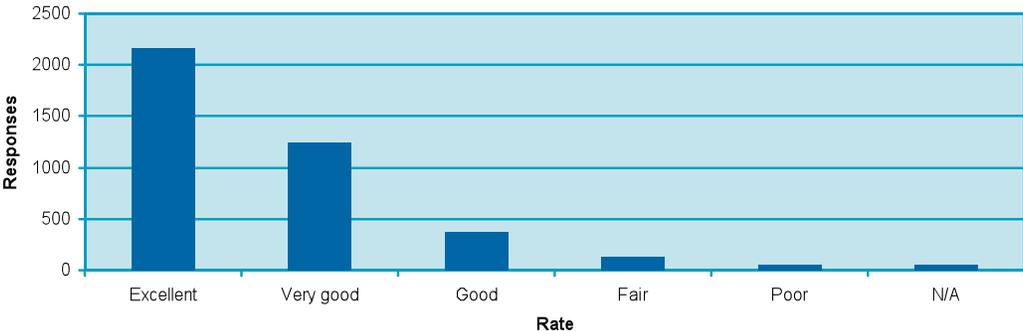
The Commissioner’s examination of complaints is supported by a protocol between the two organisations, routine exchange of data in relation to complaints reporting, and meetings between the Commissioner and the Agency’s CEO.

Feedback

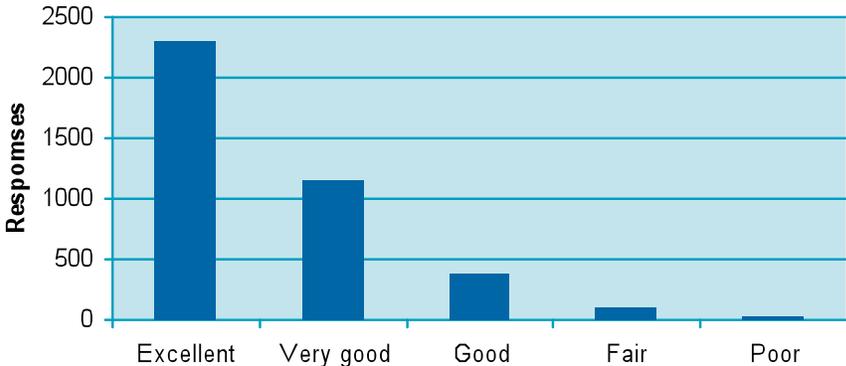
Following each visit to a home, assessors leave a feedback form which can be filled out anonymously and returned by reply-paid post to an independent company which provides a monthly report on collated and aggregated data.

During the year, we conducted 7,595 visits. 4,006 forms were returned to the collating company. The following tables set out the key outcomes from this feedback.

Overall, how would you rate the assessment team’s performance?

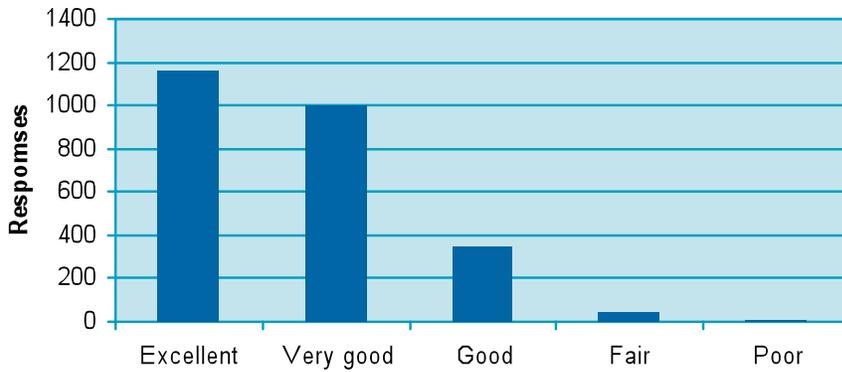


The team’s knowledge and understanding of aged care

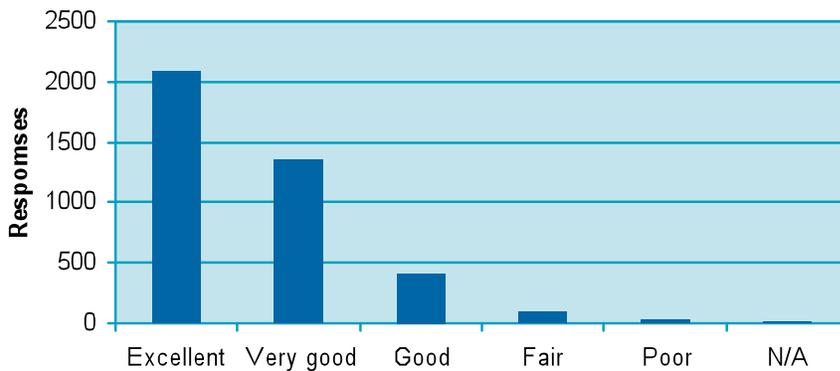


Part four – Stakeholder relationship management

The advice that the Agency provided about the home's responsibilities for the audit



Allowing care staff to continue their duties during the visit



Part five

Quality assurance and improvement

We are committed to the continuous improvement of our own processes and use the feedback provided by our stakeholders, as well as complaints information and research of other accreditation arrangements, to guide improvements.

Our staff are encouraged to submit 'improvement requests' which are logged and responded to through our quality management system.

During the year, 137 improvement requests were raised by staff and 118 were finalised during the same period. This level of staff involvement proactively assists in ensuring that our quality management system is relevant to business operations.

Our quality management system has been certified by SAI Global to ISO Standard 9001 Quality Management Systems. At the time of writing, the Agency's management systems were being assessed by the International Society for Quality in health care (ISQua) International Accreditation Program.

Our assessor training and management program became the first such program to be accredited by ISQua. The benchmark certification includes not only the training course, but also our approach to recruitment, selection and appointment of assessors, and their continuing professional development.

evidence-based practice self-directed learning packages Better Practice QUEST resident care quality improvement transparency relationship quality of life relatives safety and quality framework person-centred care resident focused care quality of care residents continuous improvement consumer involvement

Part five – Quality assurance and improvement

We place a strong emphasis on quality assurance as we recognise that our effectiveness is underpinned by the accuracy of our assessments and the quality of our decisions. This means we aim to maximise the prospects of 'getting it right' every time.

- Our selection of assessors is focused towards ensuring we have the right combination of qualifications and experience.
- When selecting teams for audits we consider the assessors' skills mix in terms of background and experience.
- Training of assessors – our assessor training and management is accredited by ISQua and provides rigorous training and assessment.
- Regular QAIT and other communication channels ensure our assessors are kept up to date on the latest information – this can cover topics from the latest legislation to interviewing and report writing techniques.
- We include observers on visits on a sampling basis to evaluate the performance of assessors and the effectiveness of audit practice to ensure consistency in our approach.
- We conduct a mandatory training program for all decision makers.
- We review accreditation decisions and audit reports to ensure conformance with our own performance standards.
- We review audit reports and reasons for changes in compliance whenever a significant change in a home's compliance with the Accreditation Standards occurs.
- We review our processes and continually update our documentation accordingly.
- We review assessor tools and guidelines to ensure currency.
- We have engaged a researcher to undertake research into accreditation and related projects with a view to improving our processes.

- We analyse the outcome of assessments on the performance of homes and provide information to industry to assist in improving the care and services for residents.

The majority of staff assessors received at least one observation during 2008/09. External (casual and contractor) assessors who complete regular work for us were also observed. Outcomes of the observers on visits program have included improvements to our documents such as the *Audit handbook* and *Results and processes guide*. Such activities also provide increased opportunity for assessors to make suggestions to improve our processes. The observers on visits program has shown assessors have a consistent approach to assessment, and have provided another avenue to monitor performance and assist with coaching less experienced assessors.

During the year our assessors were informally mentored. We have developed a formal mentoring program to be implemented in 2009/10.

We review all review audit decisions, all less than three year decisions (excluding commencing homes) and at least five per cent of all three year decisions.

Results of reviews of decisions have shown a nationally consistent approach to decision making. Reviews of reports have also shown assessors' reports are informative for decision-makers, and consistent with our processes. Outcomes of this quality assurance activity have directly fed into training for assessors and review of the assessor resources.

In 2008/09, a major review of all accreditation documentation commenced and is continuing.

We conduct regular reviews of best practice and professional guidelines, legislation and national and international human services accreditation schemes. This information has been used to improve our current processes and documents such as policies and procedures, and to inform projects aimed at improving our processes.

Part six

Our people

During the year, staff voted in favour of a collective agreement following 18 months of consultation and negotiations.

Of the staff who voted on the agreement, 92% were in favour. Following the vote, the collective agreement was approved by the Workplace Authority on 9 July 2009.

During the year, we also introduced policies on support for study, and working from home, to support staff and assist them with their individual work/life balance challenge.

We have developed a staff recognition and reward program for staff who have achieved five years or 10 years' service. During the year, 37 staff reached the five-year milestone and 12 staff reached the 10-year milestone. This is a significant achievement given the Company itself is only 11 years old.

Among our staff, we also have 11 'foundation employees' who have been with us since the first year of the Company's operation (1998). These staff are Ross Bushrod, Penny Fraser, Lorraine Baker, Tracey Clerke, Marilyn Howson, Christine Schubert, Trish Hermens, Carol Lowe, Bronwyn Thompson, Victoria Crawford and Rebecca Cross.

Staff numbers as at 30 June 2009 is 255.2 full time equivalent. This includes term-defined employees and 26 staff who are on various part-time work arrangements. The number of employed staff varies according to the accreditation workload.

Around 79 per cent of staff are female, and 79 per cent of all staff have at least one tertiary qualification.

Our corporate induction program has been redeveloped for new staff. Our performance management program has been reviewed with a new program, 'Coaching for performance – everyday', now in place. New staff learn about the program as part of their induction.

We have introduced a company-wide learning and development framework to help build organisational leadership capacity and to provide staff with clearer career paths. The framework allocates staff to defined work streams, and includes structured learning blocks as well as individual learning and development opportunities.

Managers and other staff involved in recruiting are trained in behavioural interviewing, middle management are provided with training in effective people management, and staff who may be involved in either presenting or industry training participate in facilitate group-based learning.

Managers conduct regular staff meetings, and the CEO undertakes an annual roadshow to brief staff on the year in review and the corporate plan and outlook.

evidence-based practice self-directed learning packages Better Practice QUEST resident care quality improvement transparency relationship quality of life relatives safety and quality framework person-centred care resident focused care quality of care residents continuous improvement consumer involvement

Part six – Our people

Assessor management

During the year we appointed an internal registrar, located at our Parramatta office. Previously an external registrar, RABQSA International was used.

Of the 508 assessors on the register, 163 are permanent employees. The balance are external assessors and engaged on a contract or casual basis to meet workload demands.

There are three scopes of registration for registered aged care assessors which assist us to team assessors for visits. They are:

- registered nurse
- cultural specific experience, ie. have worked with indigenous cultures or with various other cultures
- language skills.

Our assessor training and management program has been certified by the International Society for Quality in health care (ISQua).

In addition to their initial training, staff and external assessors participate in regular update training through the Quality Assessor Information and Training (QAIT) program. QAIT sessions are conducted every two months in each of the major capitals.

Topics for 2008/09 included: regulatory compliance and the role of the aged care quality assessor; evidence based practice; resident lifestyle; assessing nutrition and hydration, oral and dental care; assessing infection control and deconstructing interviewing.

OH & S

In recognition of our responsibility to safeguard the health of employees while they work, we strive to provide and maintain a safe and healthy working environment.

OH & S committees and trained first aid officers are available for each office, in accordance with state legislation.

During the year, 323 days were lost due to injury.

The environment

Our operations have a low impact on the environment. Initiatives include recycling of paper, toner cartridges, and use of electronic communication instead of paper-based wherever possible. We are a tenant in a number of buildings where the building owner/manager undertakes recycling of glass and other waste, and provides energy-efficient lighting and waste water systems.



Part seven

Agency performance



evidence-based practice self-directed learning packages Better Practice QUEST resident care
quality improvement transparency relationship quality of life
relatives safety and quality framework person-centred care
resident focused care quality of care residents
continuous improvement consumer involvement

Part seven – Agency performance

Progress against performance targets – as at 30 June 2009

Performance indicator	Performance target	Relevant activities and initiatives undertaken and outcomes achieved
Percentage of services with 44 compliant expected outcomes	To achieve 97% of services compliant, an indicative level of monitoring would be to:	Of the homes accredited as at 30 June 2009, 2.4 per cent were identified as having some non-compliance as at that date. At the start of the year, 36 homes were on a timetable for improvement and 32 of these resolved the non-compliance during the TFI period. During the year, 340 homes were placed on a TFI. Of these, 83.1% resolved the non-compliance during the TFI period and 50 homes were still on TFIs which expire in the 2009/10 reporting period.
	Conduct 100% of site audits in response to valid accreditation applications	Achieved. 2,105 applications for further periods of accreditation were received. 1,622 accreditation site audits were completed and 1,447 accreditation decisions were made. 1,278 homes have been granted three years accreditation with 167 less than three years. 2 homes were refused accreditation.
	Maintain an average visiting schedule of 1.75 visits per home per year	The Agency conducted an average of 2.7 visits per home during the financial year.
	Conduct at least one unannounced visit to each home per year	Achieved. 5,869 support contacts were conducted. Of these, 3,481 were unannounced. Every aged care home received at least one unannounced visit during the year. In addition, there were 57 unannounced review audits.
	Carry out approximately 132 review audits (pa), including 100% as directed by the Department	Review audits are carried out when there are specific reasons to do so. 104 review audits were conducted, 73 review audits initiated by the Agency and 31 review audits at the request of the Department of Health and Ageing.

Part seven – Agency performance

Performance indicator	Performance target	Relevant activities and initiatives undertaken and outcomes achieved
	<p>Daily visits by quality assessors where serious risk is identified, until the serious risk has been mitigated</p> <p>Timeliness and appropriateness of response to referrals from the Department in accordance with protocols established between the Department and the Agency</p> <p>Maintain an adequate number of suitably qualified and experienced staff to conduct audits and support contacts in a timely manner and ensure the skills of each audit team are relevant to the identified outcomes of concern</p>	<p>Achieved.</p> <p>Achieved.</p> <p>As at 30 June 2009, a pool of 508 staff and external assessors ensured that visits were conducted in a timely manner.</p>
Promotion of high quality care	<p>Provision of sector and consumer education through:</p> <p>Conferences</p> <p>Publications</p>	<p>Better Practice events held during 2008/09 were highly successful. They all featured speakers on practical applications related to accreditation outcomes. 1221 delegates attended over the year. In the evaluation 98% of respondents indicated they would recommend the event to others. An education conference aimed at those in aged care with responsibility for education and training was also held. 153 people attended.</p> <p><i>The Standard</i> monthly newsletter increased distribution and is available electronically.</p>

Part seven – Agency performance

Performance indicator	Performance target	Relevant activities and initiatives undertaken and outcomes achieved
	<p>Development of accredited training courses that meet the needs of the sector</p> <p>Inclusion of an education component in 50% of support visits</p> <p>Utilising well trained and skilled Agency staff and establishing a process to ensure ongoing training and skills development</p> <p>Provision of relevant education and training, identified by the Agency or the Department through analysis of trends in compliance against specific accreditation outcomes (eg. medication management, clinical care etc)</p>	<p>1,498 copies of the Pocket guide to the Accreditation Standards were distributed during the reporting period.</p> <p>Agency advertisements appear in all five state versions of the DPS Aged Care Guide.</p> <p>More than 8,000 self-directed learning packages were downloaded from the website during the year, including Self assessment, Continuous improvement, Demystifying dementia and Data and measurement.</p> <p>207 participants completed the aged care quality assessment course. More than 180 participants successfully completed the exam.</p> <p>QUEST (Quality education on the Standards) continues to be a popular form of education for homes. During the reporting period, sessions were conducted at 390 homes to 5,218 participants. Assessors also provide information during support contacts and audits.</p> <p>Assessors regularly attend QAIT sessions. Also, competency and skills matrixes are used to match position descriptions and ensure appropriate training and development.</p> <p>The focus for the 2008/09 seminars was continuous improvement, evidence-based practice and managing risk to avoid non-compliance. Positive feedback was received for all the seminars.</p>

Part seven – Agency performance

Performance indicator	Performance target	Relevant activities and initiatives undertaken and outcomes achieved
Effective decision-making and reporting	Timeliness and appropriateness of decisions	100% of decisions were made before the accreditation expiry date.
	Consistency of decisions across assessors and across jurisdictions	No statistically significant inconsistencies. During 2008/09, decisions following accreditation site audits were centralised.
	Quality and timeliness of reports	Review of reports undertaken through a sampling process.
	Appropriate approved provider and public access to reports	All accreditation decisions are published on the Agency's website.
Assessing and strategically managing services working towards accreditation	Timeliness and quality of support, information and education provided to:	
	Potential providers	The Agency provides potential approved providers with the application for accreditation and refers them to accreditation materials on our website. If they are unable to access the web, hard copies are sent.
	Homes granted exceptional circumstances	Homes that are granted exceptional circumstances continue to receive support contacts from the Agency and education conducted as appropriate, while awaiting a new application for accreditation.
	Commencing services	All valid commencing services receive one year's accreditation with support contacts and education as appropriate to their circumstances.
	Homes with accreditation revoked or reduced	Additional support contacts have been planned and conducted.

Part eight

Financial statements

Directors' report

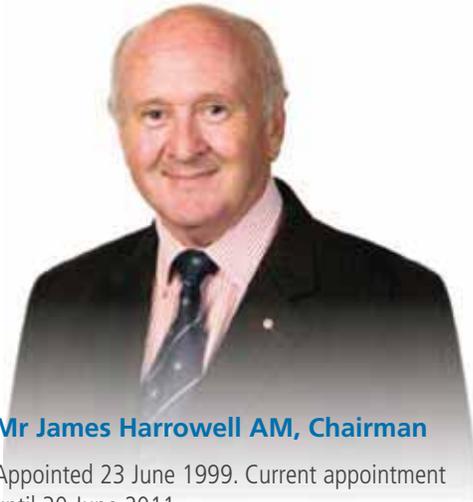
Directors submit the financial accounts of the entity for the financial year ended 30 June 2009.

Directors

The names of directors in office as at 30 June 2009 are:

- Mr James Harrowell AM (Chairman)
- Dr Michael Bollen AM
- Ms Kate Carnell AO
- Mr David Deans
- Dr Sally Goold OAM
- Mr Richard Gray
- Mr Jon Gregerson
- Dr June Heinrich OAM
- Prof Joseph Ibrahim
- Ms Sue Macri AM
- Prof Rhonda Nay
- Dr Andrew Refshauge
- Dr Mike Rungie
- Mr Douglas Strain

Part eight – Information on Directors



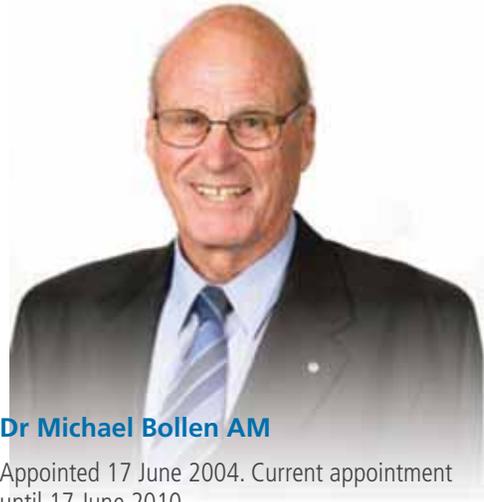
Mr James Harrowell AM, Chairman

Appointed 23 June 1999. Current appointment until 30 June 2011

- Partner and a former managing partner of Hunt & Hunt Legal Group
- Qualified lawyer and accountant
- Director and former Chairman of Interlaw Limited
- President, Australia China Business Council (NSW)
- Fellow of the Australian Institute of Company Directors
- Fellow of the Taxation Institute of Australia
- 20 years experience in litigation in all jurisdictional levels in NSW and interstate
- LLB BComm AASA AHKSA FTIA FAICD

Board meetings eligible to attend: 8

Board meetings attended: 8



Dr Michael Bollen AM

Appointed 17 June 2004. Current appointment until 17 June 2010

- Chairman of the Audit Committee
- Principal of BMP Healthcare Consulting
- Extensive experience in health care and medical education including 25 years as a general practitioner
- Chairman of the Victorian WorkCover Authority's Independent Medical Examiners Selection and Quality Assurance Committee
- Chairman of the Commonwealth Government's Complementary Medicine Implementation Advisory Group
- Chairman Civil Aviation Safety Authority's Expert Panel on Aircraft Air Quality
- AM MBBS FRACGP FAICD

Previous appointments:

- Foundation Executive Chair, Ingle Farm Community Health Centre
- Foundation Chair, Department of Primary and Emergency Care, John Hunter Hospital
- Secretary General of the Royal Australian College of General Practitioners
- Commissioner, SA Health Commission
- Board member, Medibank Private
- Member, National Health and Medical Research Council.

Board meetings eligible to attend: 8

Board meetings attended: 8

Audit committee meetings eligible to attend: 7

Audit committee meetings attended: 7

Part eight – Information on Directors



Ms Kate Carnell AO

Appointed 9 December 2008. Current appointment until 8 December 2011.

- CEO Australian Food and Grocery Council
- Director, Beyondblue
- Director, Cooperative Research Centre for Forestry
- Director, Australian Red Cross
- Committee member of Preventative Health Taskforce
- B. Pharm FAIM FAIPM AFCHSE

Previous appointments:

- Director, IFA
- Director, IOTA
- Director, NRMA
- Director, NICS
- Director, GPET
- Pharmacy owner 1981-2000
- Vice President Pharmacy Guild of Australia
- ACT Minister for Health
- ACT Chief Minister
- CEO Aust General Practice Network

Board meetings eligible to attend: 4

Board meetings attended: 3



Mr David Deans

Appointed 4 December 2006. Current appointment until 3 December 2009.

- Director, International Federation on Ageing
- Consultant to Australian Seniors Finance Ltd Board
- Recipient of Centenary of Federation Medal for services to Australians 50 and over

Previous appointments:

- Member, Public Service Medal Committee
- Chief Executive of National Seniors Association
- Director and Chairman of Audit Committee of Centrelink

Board meetings eligible to attend: 8

Board meetings attended: 7

Audit committee meetings eligible to attend: 7

Audit committee meetings attended: 5

Part eight – Information on Directors



Dr Sally Goold OAM

Appointed 9 December 2008. Current appointment until 8 December 2011

- Senior Australian of the Year 2006
- Executive Director, Congress of Aboriginal and Torres Strait Islander Nurses
- Member of National Indigenous Health Equality Council
- Australian Peak Nurses and Midwifery Forum
- Committee member of Close the Gap (life expectancy gap between Indigenous and non-indigenous Australians)
- RN RM DipNEd, BApp SC Nursing, MN St DN-HC RMIT FRCNA FCNA

Board meetings eligible to attend: 4

Board meetings attended: 3



Mr Richard Gray

Appointed 4 December 2006. Current appointment until 3 December 2009

- Director Aged Care Services, Catholic Health Australia
- Currently serves on a number of Federal Government consultative committees

Previous appointments:

- Manager regional commercial TV station and General Manager commercial radio station Melbourne
- CEO/Company Secretary, Spastic Society of Victoria
- National Executive Director, Aged Care Australia
- Board member ACROD Ltd
- Board member Villaggio Sant'Antonio Ltd
- Board member Cerebral Palsy Overseas UK
- Chair Victorian Consultative Council on Rehabilitation

Board meetings eligible to attend: 8

Board meetings attended: 7

Part eight – Information on Directors



Mr Jon Gregerson

Appointed 18 June 2007. Current appointment until 17 June 2010

- Consultant to Finlaysons Law Firm SA
- Governor of the Wyatt Benevolent Institution Inc
- Member of Law Council of Australia, Business Law Section
- Council member of Neurosurgical Research Foundation Inc
- LLB

Previous appointments:

- SA Chair of Trade Practices Committee and Resources and Energy Committee of Law Council
- Board member Adelaide Festival Centre Foundation Inc
- SA Chair of Australian Mining and Petroleum Law Association
- Member of Professional Conduct Committee

Board meetings eligible to attend: 8

Board meetings attended: 8

Audit committee meetings eligible to attend: 3

Audit committee meetings attended: 3



Dr June Heinrich OAM

Appointed 9 December 2008. Current appointment until 8 December 2011

- Chief Executive Officer, Baptist Community Services – NSW and ACT
- Director, Baptist Care Australia Ltd
- Director, Aged Care Services NSW
- BA (Hons) MSc; D Educ Centenary Medal

Previous appointments

- Director, St Vincent de Paul Society
- Aged Care Services Ltd
- Ageing Consultative Committee

Board meetings eligible to attend: 4

Board meetings attended: 3

Part eight – Information on Directors



Professor Joseph E Ibrahim

Appointed 14 November 2002. Current appointment until 8 December 2011

- Associate Director NHMRC Centre of Research Excellence in Patient Safety Department of Epidemiology and Preventive Medicine, Monash University
- Adjunct Professor, Australian Centre for Evidence Based Aged Care, Faculty of Health Sciences, La Trobe University
- Research investigator on projects researching the quality of clinical care, patient safety and performance indicators
- Consultant physician, Ballarat Health Service
- Doctorate of Philosophy investigating the relationship between quality of care and performance indicators
- MBBS GradCertHE PhD MRACMA FAFPHM FRACP

Previous appointments:

- Regional editor for the *International Journal for Quality in Health Care* (2000-2004)

Board meetings eligible to attend: 8

Board meetings attended: 8



Ms Sue Macri AM

Appointed 18 June 2007. Current appointment until 17 June 2010

- Consultant, health and aged care industry
- Director, RSL LifeCare, The War Vets Village, Narrabeen NSW
- Advisor, Kell and Rigby Living Pty Ltd NSW
- Advisor to the Guild Group of Companies
- Fellow, College of Nursing (NSW)
- Member, Royal College of Nursing Australia
- Member, Australian Institute of Company Directors
- Honorary Doctor of the Australian Catholic University for outstanding contribution to aged care and to nursing and nursing education and training

Previous appointments:

- CEO of ANHECA/ACAA federally for two years and of NSW for 13 years

Board meetings eligible to attend: 8

Board meetings attended: 8

Audit committee meetings eligible to attend: 4

Audit committee meetings attended: 3

Part eight – Information on Directors



Professor Rhonda Nay

Appointed 24 June 2002. Current appointment until 18 June 2011

- Foundation Professor of Interdisciplinary Aged Care, La Trobe University
- Director, Australian Centre for Evidence Based Aged Care
- Director, TIME for Dementia - the Australian Government funded Vic and Tas Centre
- Director, Institute of Social Participation (ISP)
- Director Australian Institute for Primary Care
- RN BA MLitt PhD FRCNA FCN FAAG

Previous appointments:

- Foundation Professor of Gerontic Nursing
- Member of the National Advisory Committee on Ageing
- Consultant Editor *Coroner's Communique*
- Regional Editor *International Journal of Older People Nursing*
- President Australian Association of Gerontology (Vic)
- Expert Advisor International Council of Nurses

Board meetings eligible to attend: 8

Board meetings attended: 6



Dr Andrew Refshaug

Appointed 9 December 2008. Current appointment until 8 December 2011

- Chair, Careflight (NSW)
- Director, Family Care Medical Services
- Director, Prince of Wales Research Institute
- Chair, Investment Committee of the NSW Aboriginal Lands Council
- MBBS FAICD

Previous appointments:

- Foundation for Research and Treatment of Alcoholism and Drug Dependence
- Evatt Foundation
- Mandela Foundation
- Deputy Premier of NSW
- Minister for Health, NSW
- Minister for Aboriginal Affairs, NSW
- Treasurer, NSW
- Medical Officer Aboriginal Medical Services, Redfern NSW

Board meetings eligible to attend: 4

Board meetings attended: 4

Part eight – Information on Directors



Dr Mike Rungie

Appointed 9 December 2008. Current appointment until 8 December 2011

- Director, Aged and Community Services SA/NT Board
- CEO, ACH Group
- Ageing Consultative Committee (Department of Health and Ageing)
- BSc. (Hons) PhD The Executive Connection Centenary Medal

Previous appointments:

- Central Northern Adelaide Health Services Board
- North Eastern Community Nursing Home Board
- Prime Minister's Australia 2020 Summit, Parliament House, Canberra, 20-21 April 2008
- Member of the Study Group on Teaching Nursing Homes Norway & Holland
- Reference Group on the Longer Term Reform of Aged Care, Department of Health and Ageing
- Innovative Care Rehabilitation Services (ICRS) National Evaluation and Steering Committee
- Australasian Journal on Ageing – Management Committee

Board meetings eligible to attend: 4

Board meetings attended: 3



Mr Douglas Strain

Appointed 4 December 2006. Current appointment until 3 December 2009

- CEO, Masonic Homes Limited
- Fellow of the Australian Institute of Company Directors
- Trustee of the Committee for the Economic Development of Australia
- Graduate of the Royal Military College, Duntroon
- MBA (Adv), BEc, BA (Mil)

Board meetings eligible to attend: 8

Board meetings attended: 7

Audit committee meetings eligible to attend: 7

Audit committee meetings attended: 7

Part eight – Financial statements

Operating results

The operating profit amounted to \$1,918,022. Dividends are not applicable for this entity, as no beneficial interest exists.

Significant changes in state of affairs

There have been no significant changes in the state of affairs of the Company during the 12 months to 30 June 2009.

After balance date events

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the Company, the results of those operations, or the state of affairs of the Company in subsequent financial years.

Areas of risk and likely development

The Company has a funding agreement with the Commonwealth Department of Health and Ageing, pursuant to which it carries out its functions in accordance with the Accreditation Grant Principles 1999.

The Deed of Funding provides funds for the Company to meet its responsibilities under the Deed and as the accreditation body appointed under the *Aged Care Act 1997*. The current Deed of Funding is due for renewal at the end of 2009/2010 financial year. The Company will seek to renegotiate the funding agreement with the Commonwealth in the upcoming financial year.

Audit Committee

The Audit Committee is established by the Board of Directors. The objective of the committee is to provide assistance to the Board concerning the Company's risk, control and compliance framework, and its external accountability responsibilities. The members are responsible to apply good analytical skills, objectivity and good judgement in relation to:

- risk management systems
- internal control systems and relevant policies and procedures
- reporting of financial information in the annual report and other reports
- legislative compliance
- the performance of the internal audit function while providing a forum for communication between the Board, senior management and internal and external audit
- external audit.

Directors' and officers' indemnification

The Company has, during or since the financial year, in respect of any person who is or has been an officer or auditor of the Company or a related body corporate:

- indemnified against a liability incurred as an officer, including costs and expenses in successfully defending legal proceedings; and
- paid or agreed to pay a premium in respect of a contract insuring against a liability incurred as an officer for the costs of expenses to defend legal proceedings.

During or since the financial year the Company has paid premiums to insure each of the directors against liabilities for costs and expenses incurred by them in defending any legal proceedings arising out of their conduct while acting in the capacity of director of the Company, other than conduct involving a wilful breach of duty in relation to the Company. The amount of the premium paid was \$17,520 for all directors and officers.

Part eight – Financial statements

Directors' benefits

No director has received or become entitled to receive, during or since the financial year, a benefit because of a contract made by the Company or a related body corporate with a director, a firm of which a director is a member or any entity in which a director has a substantial financial interest.

This statement excludes a benefit included in the aggregate amounts of emoluments received or due and receivable by directors and shown in the Company's accounts, or the fixed salary of a full-time employee of the parent entity, controlled entity or related body corporate.

Signed in accordance with a resolution of the Board of Directors.



Jim Harrowell AM
Director



Michael Bollen AM
Director

31 August 2009

Directors' declaration

The directors declare that:

- a) the financial statements and notes comply with the *Accounting Standards and Corporations Act 2001*;
- b) the financial statements and notes give a true and fair view of the financial position as at 30 June 2009 of the performance of the Company and the cashflows for the year ended;
- c) in the directors' opinion, there are reasonable grounds to believe that the Company will be able to pay its debts when they fall due and payable.



Jim Harrowell AM
Director



Michael Bollen AM
Director

31 August 2009



**AGED CARE STANDARDS AND ACCREDITATION AGENCY LTD
FINANCIAL REPORT 2008-09
AUDITOR'S INDEPENDENCE DECLARATION**

In my audit of the financial report of the Aged Care Standards and Accreditation Agency Ltd for the year ended 30 June 2009, to the best of my knowledge and belief, there have been:

- (i) no contraventions of the auditor independence requirements of the *Corporations Act 2001*; and
- (ii) no contravention of any applicable code of professional conduct.

Australian National Audit Office

P Hinchey
Senior Director
Delegate of the Auditor-General

Sydney
7 September 2009

PO Box A456 Sydney South NSW 1235
130 Elizabeth Street
SYDNEY NSW
Phone (02) 9367 7100 Fax (02) 9367 7102

Part eight – Financial statements

Income Statement

For the year ended 30 June 2009	Note	2009 \$	2008 \$
Revenue from ordinary activities	2	39,043,707	27,691,757
Employee expenses		(27,908,443)	(19,238,613)
Depreciation and amortisation		(985,990)	(540,033)
Finance costs		(9,201)	(9,955)
Other expenses from ordinary activities	2	(8,222,051)	(7,308,901)
Net operating result from ordinary activities		1,918,022	594,255
Total changes in equity		1,918,022	594,255

The accompanying notes form part of this Income Statement.

Part eight – Financial statements

Balance Sheet

As at 30 June 2009	Note	2009 \$	2008 \$
Current assets			
Cash and cash equivalents	6	18,969,626	11,534,345
Trade and other receivables	7	400,359	238,206
Prepayments		143,268	189,265
Total current assets		19,513,253	11,961,816
Non-current assets			
Property, plant and equipment	8	755,339	773,506
Intangibles	9	1,706,711	2,328,805
Total non-current assets		2,462,050	3,102,311
Total assets		21,975,303	15,064,127
Current liabilities			
Trade and other payables	10	7,305,194	3,157,797
Other current provisions	11	9,212	18,612
Employee provisions	12	2,331,086	1,414,119
Total current liabilities		9,645,492	4,590,528
Non-current liabilities			
Employee provisions	13	510,990	518,786
Other non-current provisions	14	200,046	181,445
Other payables	15	225,561	298,176
Total non-current liabilities		936,597	998,407
Total liabilities		10,582,089	5,588,935
Net assets		11,393,214	9,475,192
Equity			
Retained earnings		11,393,214	9,475,192
Total equity		11,393,214	9,475,192

The accompanying notes form part of this Balance Sheet.

Part eight – Financial statements

Cash Flow Statement

For the year ended 30 June 2009	Note	2009 \$	2008 \$
Cash flows from operating activities			
Receipts from customers and government grants		41,393,458	25,614,606
Interest received		768,206	868,153
GST received/(paid)		150,826	43,472
Payments to suppliers and employees		(34,522,280)	(26,859,577)
Finance costs		(9,201)	(9,955)
Net cash from/(used by) operating activities	5	7,781,009	(343,301)
Cash flows from investing activities			
Purchase of property, plant & equipment		(345,728)	(2,871,809)
Proceeds on disposal of property, plant & equipment		-	36,681
Net cash (used by) investing activities		(345,728)	(2,835,128)
Net increase/(decrease) in cash and cash equivalents		7,435,281	(3,178,429)
Cash and cash equivalents at the beginning of the financial year		11,534,345	14,712,774
Cash and cash equivalents at the end of the financial year	6	18,969,626	11,534,345

The accompanying notes form part of this Cash Flow Statement.

Part eight – Financial statements

Changes in Equity Statement

For the year ended 30 June 2009	Note	2009 \$	2008 \$
Opening balance			
Balance carried forward from previous period		9,475,192	8,880,937
Income and expense			
Net operating result		1,918,022	594,255
Closing balance		11,393,214	9,475,192

The accompanying notes form part of this Changes in Equity Statement.

Part eight – Financial statements

Notes to the Financial Statements

For the year ended 30 June 2009

Note 1. Statement of accounting policies

The financial report is a general purpose financial report that has been prepared in accordance with accounting standards and interpretations issued by the Australian Accounting Standards Board, and the *Corporations Act 2001*.

The financial report covers the economic entity of Aged Care Standards and Accreditation Agency Limited (the Company). The Company is a public, unlisted company limited by guarantee, incorporated and domiciled in Australia.

The financial report has been prepared on an accruals basis, and is based on historical costs and does not take into account changing money values or, except where stated, current valuations of non-current assets. Cost is based on the fair values of the consideration given in exchange for assets.

The following is a summary of the material accounting policies adopted by the Company in the preparation of the financial report. The accounting policies have been consistently applied with those of the previous year, unless otherwise stated.

Income recognition

Accreditation fees are paid on application and brought to revenue throughout the year at 25% in the month the money is received and 75% three months later. The money is shown as unearned income on the Balance Sheet until it is brought to revenue. Analysis of the year end accounts reveals that a large number of applications are received ahead of the expected date and the work will be undertaken as previously planned. Consequently the unearned income for 2008-09 has been adjusted to reflect the principle that money should be brought to revenue when the work to which it relates is undertaken.

Commonwealth Government funding and interest income is brought to account in the month it is

earned. Education income is recognised in the same period in which training is conducted. Income received from publications is recognised upon receipt.

Income tax

The Company has received a private ruling from the Australian Taxation Office exempting it from income tax.

Property, plant and equipment

Property, plant and equipment are recognised on the cost basis.

The depreciable amount for all newly acquired property, plant and equipment is depreciated over their useful lives to the Company on a straight-line basis commencing from the time the asset is held ready for use.

The current straight line rates of depreciation by category - these are unchanged from 2008:

Computers	33%
Software – internally developed	25%
Furniture and fittings	20%
Other equipment	20%
Leasehold	20% (or term of lease, whichever is shorter)

Impairment of assets

All assets were assessed for impairment at 30 June 2009. Where indicators of impairment exist, the asset's recoverable amount is estimated and an impairment adjustment is made if the asset's recoverable amount is less than its carrying amount. The recoverable amount is assessed on the basis of the expected net cash flows, which will be received from the assets employed, and subsequent disposal.

Part eight – Financial statements

The expected net cash flows have not been discounted to their present values in determining recoverable amounts.

There has been no objective evidence that impairment of assets has occurred.

Leases

Leases of plant and equipment where substantially the risks and benefits incidental to the ownership of the asset, but not the legal ownership, are transferred to the Company are classified as finance leases. Finance leases are capitalised, recording an asset and a liability equal to the present value of the minimum lease payments, including any guaranteed residual values. Leased assets are depreciated on a straight-line basis over their estimated useful lives, where it is likely that the Company will obtain ownership of the asset, or over the term of the lease. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses in the period in which they are incurred.

Lease incentives

The lease incentives derived from the negotiation of new or renewed operating leases have been recognised as the aggregate benefit of incentives, as a reduction of rental expense over the term of the lease, on a straight line basis.

Employee benefits

Provision is made for the Company's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits expected to be settled within one year together with benefits arising from wages and salaries and annual leave, which will be settled after one year, have been measured at their nominal amount. Other employee entitlements payable later than one year have been measured at the present value of the estimated future cash outflows to be made for those entitlements.

Long service leave provision continues to be provided in accordance with AASB119.

Contributions made by the Company to employee superannuation funds are charged as expenses when incurred.

Goods and services tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the Balance Sheet are shown inclusive of GST.

Statement of compliance

The financial report complies with Australian Accounting Standards, which include Australian Equivalents to International Finance Reporting Standards (A-IFRS).

Adoption of new Australian Accounting Standards requirements

No accounting standard has been adopted earlier than the application date as stated in the standard. No new accounting standards, amendments to standards and interpretations issued by the Australian Accounting Standards Board that are applicable in the current period, have had a material financial affect on the Company.

Future Australian Accounting Standard requirements

New standards, amendments to standards, and interpretations that are applicable to future periods have been issued by the Australian Accounting Standards Board. It is estimated that adopting these pronouncements, when effective, will have no material impact on future reporting periods.

Comparative figures

Where required, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

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Note 2. Operating result

Operating result from ordinary activities has been determined after:

Crediting as income

	2009 \$	2008 \$
Income from operating activities		
Government grants received	19,946,000	21,042,000
Accreditation revenue	16,922,378	4,331,945
Training revenue	1,245,097	1,439,048
Interest	761,680	833,454
Other income	168,552	45,310
Income from ordinary activities	39,043,707	27,691,757

Charging as expenses

	2009 \$	2008 \$
Depreciation of non-current assets:		
Property, plant and equipment	977,341	519,802
Makegood	8,649	20,231
Total depreciation	985,990	540,033
Other expenses		
IT	239,028	450,273
Legal	170,443	444,232
Other professional fees	109,901	175,415
Printing and stationery	489,538	461,646
Rental expense on operating leases	2,356,404	2,119,266
Seminars and conferences	62,007	54,427
Telephones and communications	339,926	295,975
Training and recruitment	283,433	441,116
Travel	3,554,247	2,300,702
Other	617,124	565,849
Total other expenses from ordinary activities	8,222,051	7,308,901

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Note 3. Remuneration of directors

	2009 \$	2008 \$
Total directors' remuneration for the financial year	309,958	285,159
\$0 - \$ 9,999	1	-
\$10,000 - \$19,999	4	1
\$20,000 - \$29,999	8	9
\$40,000 - \$49,999	1	1
Total number of directors	14	11

The names of directors who have held office during the financial year are:

Mr James Harrowell AM

Dr Michael Bollen AM

Ms Kate Carnell AO (appointed 9/12/2008)

Mr David Deans

Dr Sally Goold OAM (appointed 9/12/2008)

Mr Richard Gray

Mr Jon Gregerson

Dr June Heinrich OAM (appointed 9/12/2008)

Professor Joseph Ibrahim

Ms Sue Macri AM

Professor Rhonda Nay

Dr Andrew Refshauge (appointed 9/12/2008)

Dr Mike Rungie (appointed 9/12/2008)

Mr Douglas Strain

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Note 4. Remuneration of auditors

	2009 \$	2008 \$
Audit of financial report	39,000	37,000

No other services were provided by the Auditor-General during the reporting period.

Note 5. Reconciliation of cashflow from operations with operating profit

Cash

For the purpose of the Cash Flow Statement, cash and cash equivalents include:

- cash on hand and on call deposits with banks or financial institutions, net of bank overdrafts; and
- investments in money market instruments with less than 90 days to maturity.

Reconciliation of operating result from ordinary activities to net cash flow from operating activities

	2009 \$	2008 \$
Operating result from ordinary activities	1,918,022	594,255
Non-cash flows in operating result		
Depreciation	985,990	540,033
Loss /(gain) on sale of property, plant and equipment	-	(37,759)
Changes in assets and liabilities		
(Increase)/decrease in receivables	(162,154)	34,435
(Increase)/decrease in prepayments	45,997	133,292
Increase/(decrease) in payables	4,147,397	(1,891,508)
Increase/(decrease) in current provisions	907,567	300,142
Increase/(decrease) in non-current provisions	(61,810)	(16,191)
Net cash from/(used by) operating activities	7,781,009	(343,301)

Part eight – Financial statements

Note 6. Cash and cash equivalents

	2009 \$	2008 \$
Cash at bank and on hand	18,969,626	11,534,345

Note 7. Trade and other receivables

	2009 \$	2008 \$
Goods and services	259,150	119,674
GST receivable from the Australian Tax Office	130,287	105,095
Other	10,922	13,437
Total trade and other receivables	400,359	238,206

Note 8. Property, plant and equipment

	2009 \$	2008 \$
Furniture & fittings		
Cost		
Opening	1,065,076	1,018,020
Additions	40,926	162,266
Disposals	-	(115,210)
Closing	1,106,002	1,065,076
Accumulated depreciation		
Opening	(769,293)	(721,354)
Depreciation expense	(102,514)	(163,149)
Write back on disposals	-	115,210
Closing	(871,807)	(769,293)
Net furniture and fittings	234,195	295,783
Computers		
Cost		
Opening	1,251,059	2,097,587
Additions	281,765	209,636
Disposals	(36,877)	(1,056,164)
Closing	1,495,947	1,251,059

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Note 8. Property, plant and equipment continued

	2009 \$	2008 \$
Accumulated depreciation		
Opening	(941,033)	(1,841,847)
Depreciation expense	(189,748)	(153,350)
Write back on disposals	36,877	1,054,164
Closing	(1,093,904)	(941,033)
Net computers	402,043	310,026
Office equipment		
Cost		
Opening	432,924	463,295
Additions	23,037	10,392
Disposals	(2,680)	(40,763)
Closing	453,281	432,924
Accumulated depreciation		
Opening	(314,333)	(292,948)
Depreciation expense	(57,008)	(61,597)
Write back on disposals	2,680	40,212
Closing	(368,661)	(314,333)
Net office equipment	84,620	118,591
Leasehold improvements		
Cost		
Opening	171,669	149,038
Additions	-	22,631
Disposals	-	-
Closing	171,669	171,669
Accumulated depreciation		
Opening	(122,563)	(102,332)
Depreciation expense	(14,625)	(20,231)
Closing	(137,188)	(122,563)
Net leasehold improvements	34,481	49,106
Total property, plant and equipment	755,339	773,506

Part eight – Financial statements

Note 9. Intangibles

	2009 \$	2008 \$
Software – internally developed		
Cost		
Opening	2,478,821	-
Additions	-	2,478,821
Closing	2,478,821	2,478,821
Accumulated depreciation		
Opening	(150,016)	-
Amortisation expense	(622,094)	(150,016)
Closing	(772,110)	(150,016)
Net software	1,706,711	2,328,805

Net assets and retained earnings of \$11,393,214 include intangible assets of \$1,706,711 in non-current assets. The value of the intangible assets is sustained only so long as they contribute to the Company achieving its goals as an ongoing organisation. Their value is depreciated over four years at 25% per annum.

Note 10. Current liabilities – trade and other payables

	2009 \$	2008 \$
Lease incentives	72,460	57,225
Trade creditors and accruals	2,027,589	1,328,877
Unearned income	5,205,145	1,771,695
Total trade and other payables	7,305,194	3,157,797

Note 11. Current liabilities – other current provisions

	2009 \$	2008 \$
Makegood	9,212	18,612
Total current liabilities - other current provisions	9,212	18,612

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Note 12. Current liabilities – employee provisions

	2009 \$	2008 \$
Annual leave	1,410,944	1,030,115
Long service leave	272,996	48,557
Salary and wages	647,146	335,447
Total employee provisions	2,331,086	1,414,119

Note 13. Non-current liabilities – employee provisions

	2009 \$	2008 \$
Long service leave	510,990	518,786
Total non-current employee provisions	510,990	518,786
Aggregate employee benefit liability (refer to notes 12 and 13)	2,842,076	1,932,905

Note 14. Non-current liabilities – other non-current provisions

	2009 \$	2008 \$
Makegood	200,046	181,445
Total other non-current provisions	200,046	181,445

Note 15. Non-current liabilities – other payables

	2009 \$	2008 \$
Lease incentives	225,561	298,176
Total other payables	225,561	298,176

Note 16. Issued capital

Aged Care Standards and Accreditation Agency Limited is a public company limited by guarantee.

The Member undertakes to contribute to the assets of the Company (up to an amount not exceeding A\$5) in the event of the Company being wound up while a member of the Company, or within one year after ceasing to be a member, for payment of the debts and liabilities of the Company including the costs, charges and expenses of the winding up.

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Note 17. Expenditure commitments

	2009 \$	2008 \$
(a) Operating leases		
Non-cancellable operating leases contracted for but not capitalised in the accounts		
Payable:		
Within one year	1,529,045	1,363,544
Later than one year but not later than 5 years	3,610,873	3,853,275
Later than 5 years	-	-
	5,139,918	5,216,819
(b) Capital commitments		
Commitments contracted for plant and equipment purchases or capital expenditure projects		
Payable within one year:	212,526	32,200
	212,526	32,200

The expenditure commitment figures shown above exclude GST.

Note 18. Contingent liabilities and assets

	2009 \$	2008 \$
Estimates of the potential financial effect of contingent liabilities that may become payable:		
The Company has four Bank Security Deposit Guarantees for rental properties	247,377	190,088
	247,377	190,088

Note 19. Financial instruments

Financial assets

Cash and deposits are recognised in the Balance Sheet at their nominal value. Interest is credited to revenue as it is earned. The effective weighted average interest rate for cash deposits at 30 June 2009 was 3.13% (30 June 2008: 7.55%).

Receivables are normally settled within 30 days.

Financial liabilities

Liabilities are recognised at their nominal value in the Balance Sheet for amounts to be paid in the future for goods and services received, whether or not billed. Trade creditors are normally settled within 30 days.

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Note 19. Financial instruments continued

Interest rate risk exposures

2009	Floating interest rate \$	Non interest bearing \$	Total \$	Weighted average effective interest rate %
Financial assets				
Cash	18,969,626	-	18,969,626	3.13%
Receivables	-	400,359	400,359	
	18,969,626	400,359	19,369,985	
Total assets			21,975,303	
Financial liabilities				
Payables	-	2,027,589	2,027,589	
Other	-	2,331,086	2,331,086	
Provisions	-	72,460	72,460	
	-	4,431,135	4,431,135	
Total liabilities			10,582,089	
2008				
	Floating interest rate \$	Non interest bearing \$	Total \$	Weighted average effective interest rate %
Financial assets				
Cash	11,534,345	-	11,534,345	7.55%
Receivables	-	238,206	238,206	
	11,534,345	238,206	11,772,551	
Total assets			15,064,127	
Financial liabilities				
Payables	-	1,328,877	1,328,877	
Other	-	1,414,119	1,414,119	
Provisions	-	57,225	57,225	
	-	2,800,221	2,800,221	
Total liabilities			5,588,935	

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Net fair value

All financial assets and liabilities have been recognised at the balance date at their net fair values.

Credit risk

The Company's credit risk is limited to the value of assets carried in our Balance Sheet.

Note 20. Economic dependency

The operations of the Company are dependent on income from the Department of Health and Ageing in the form of the accreditation grant, income from education activities and fees paid by registered aged care facilities.

Note 21. Segment reporting

The Company operates in one industry (aged care) within one geographical location (Australia).



INDEPENDENT AUDITOR'S REPORT

To the members of the Aged Care Standards and Accreditation Agency Ltd

Scope

I have audited the accompanying financial report of the Aged Care Standards and Accreditation Agency Ltd (the Agency), which comprises the Directors' Declaration; Income Statement; Balance Sheet; Cash Flow Statement; Changes in Equity Statement; and Notes to the Financial Statements including a Statement of Accounting Policies.

The Directors' Responsibility for the Financial Report

The directors of the Agency are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards, including Australian Accounting Interpretations, and the *Corporations Act 2001*. This responsibility includes establishing and maintaining internal controls relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on my audit. I conducted my audit in accordance with Australian National Audit Office Auditing Standards, which incorporate Australian Auditing Standards. These Auditing Standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal controls relevant to the entity's preparation and fair presentation of the financial report to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal controls. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

PO Box A456 Sydney South NSW 1235
130 Elizabeth Street
SYDNEY NSW
Phone (02) 9367 7100 Fax (02) 9367 7102

Independence

In conducting my audit, I have complied with the independence requirements of the *Corporations Act 2001*.

Auditor's Opinion

In my opinion:

- (a) the financial report of the Aged Care Standards and Accreditation Agency Ltd is in accordance with the *Corporations Act 2001*, including:
 - (i) giving a true and fair view of the Aged Care Standards and Accreditation Agency Ltd's financial position as at 30 June 2009 and of its performance for the year ended on that date; and
 - (ii) complying with Australian Accounting Standards, including Australian Accounting Interpretations and the *Corporations Regulations 2001*;

Australian National Audit Office



P Hinchey
Senior Director
Delegate of the Auditor-General
Sydney
7 September 2009

Appendix

Aged Care Standards and Accreditation Agency Ltd

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