

# Quality indicators in public sector residential aged care services

## Information for board directors and executives

In Victoria, every public sector residential aged care service (PSRACS) is invited to participate in the quality indicator program.

The program is recognised both nationally and internationally and provides practical, meaningful measures to assist services improve resident care. It focuses on one of the many dimensions of quality, namely safe care and measures five important areas:

- pressure injuries
- falls and fall-related fractures
- physical restraint
- use of nine or more medications
- unplanned weight loss.

These areas can all have serious and potentially catastrophic impacts on health and quality of life for residents. Monitoring and measuring performance in these areas is vital to support quality care and continuous improvement.

The quality indicators are calculated as a rate by counting how often an event (for example, physical restraint) occurs over a period of time in each PSRACS. The rates for each quality indicator are compared internally, externally with all PSRACS across Victoria, and against a pre-determined reference range.

Every three months, each PSRACS submits quality indicator information to the Victorian Department of Health and Human Services. The department collates and calculates the quality indicator rates and summarises the information for each PSRACS and the Victorian PSRACS state rate. Each PSRACS receives a series of detailed reports about the five the quality indicators.

The program complements the many other resident safety, risk, quality improvement, accreditation and innovation activities. It does not replace any of those activities.

The program does not and cannot say whether the care in the PSRACS is right or wrong; or whether it is good or bad. It only tells us if rates change or are different in other PSRACS.

The department does not use the quality indicator data for individual services as part of any performance framework. Any interpretation and response to each service's data requires the consideration of local issues and circumstances that may be influencing performance.

It is therefore the responsibility of each service to monitor and respond to quality indicator data as a part of their usual accountability for quality care and service improvement.

## Information sources

Most PSRACS have a staff member who coordinates the collection and reporting of quality indicator information (usually the manager or the quality coordinator).

Information is gathered from residents' progress notes, care plans, observation and medication charts and incident reporting systems. Privacy is protected as information submitted to the department does not contain identifying information about any resident.

## The role of the board and executive

The board and executive are responsible for the governance, leadership and oversight of safe, high quality resident care.

This includes ensuring that organisational responses to the quality data are appropriate, so:

- be familiar with the quality indicators, the program and the reference ranges developed for each indicator
- ensure your organisation is an active participant in the program
- ask to see a full series of the quality indicator reports, and ask questions
- question whether the data collection systems and supports available to staff are sufficient to ensure accurate and reliable information is being reported and acted on
- ensure that targets are set to determine priorities for action along with realistic timelines for achieving the desired level of performance. Optimal care requires setting an aspirational target, which requires planning and focused effort over time to achieve, and
- be aware that the resources developed by the department to assist services understand the quality indicator program include a risk-management framework for each indicator to guide efforts towards improving care.

## Additional information

The board and executive will need information beyond that provided by the quality indicator program.

The five quality indicators cover a limited number of areas. They were chosen as the high-priority risk areas for older people living in PSRACS by consultation and research evidence.

There are other care risk areas for older people such as constipation, pain, depression and delirium that will require monitoring but are not currently part of the QI program.

Important information relating to how well care is coordinated and reflects the personal preferences of residents will need to be sourced from other information system sources in your organisation.