Inclusive Service Standards Tip Sheet

Aligning Inclusive Service Standards Performance Measures with Aged Care Quality Standards

The Australian Aged Care Quality and Safety Commission references the Inclusive Service Standards as a key resources in assisting providers to comply with the Aged Care Quality Standards. As such, meeting some or all of the performance measures in the Inclusive Service Standards provides evidence that an organisation is working to embed an inclusive non-discriminatory approach to its delivery of care and services.

The table below aligns each performance measure with the relevant Aged Care Quality Standards requirements as set out in the 'Guidance and Resources for Providers to Support the Aged Care Quality Standards' published by the Aged Care Quality and Safety Commission.

Inclusive Service Standards Performance Measure	Aged Care Quality Standard
1.1 Key organisational documents such as commitment statements, strategic plans and polices demonstrate a commitment to inclusive service provision.	Standard 8: Organisational governance 8 (3) (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.
1.2 The organisation's commitment to inclusive service provision is promoted to all key stakeholders.	Standard 8: Organisational governance 8 (3) (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.
1.3 Quality and continuous improvement processes include the monitoring of inclusive service strategies.	Standard 8: Organisational governance 8 (3) (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.
1.4 The organisation identifies key roles and responsibilities which drive and promote inclusive service provision.	Standard 8: Organisational governance 8 (3) (c) Effective organisation wide governance systems



Inclusive Service Standards Tip Sheet

1.5 Service provision procedures reflect an inclusive service approach	Standard 1: Consumer dignity and choice 1 (3) (a) Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. 1 (3) (b) Care and services are culturally safe.
	Standard 2: Ongoing assessment and planning with consumers 2 (3) (B) Assessment and planning identifies and addresses the consumer's current needs, goals and preferences, including advanced care planning and end of life planning if the consumer wishes.
	Standard 3: Personal care and clinical care 3 (3) (c) The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.
	Standard 4: Services and supports for daily living 4 (3) (a) Each consumer gets safe and effective services and supports for daily living that meet the consumer's needs, goals and preferences and optimize their independence, health, well-being and quality of life.
	Standard 5: Organisation's service environment 5 (3) (a) The service environment is welcoming and easy to understand, and optimises each consumer's sense of belonging, independence, interaction and function.
1.6 The organisation's printed and online collateral is reflective of a commitment to delivering services in an inclusive way.	Standard 8: Organisational governance 8 (3) (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.
2.1 The organisation undertakes an analysis of strengths, gaps, capabilities and readiness to implement and maintain an inclusive approach to service delivery.	Standard 8: Organisational governance 8 (3) (b) The organisation's governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. 8 (3) (c) Effective organisation wide governance systems
2.2 Stakeholder consultation processes include and facilitate consultation with special needs groups.	Standard 6: Feedback and complaints 6 (3) (b) Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. 6 (3) (d) Feedback and complaints are reviewed and used to improve the quality of care and services.
2.3 The organisation has mechanisms for identifying and removing barriers that consumers from special needs groups may experience in accessing services (e.g. language barriers, lack of information, physical barriers and affordability).	Standard 1: Consumer dignity and choice 1 (3) (c) Each consumer is supported to exercise choice and independence.



Inclusive Service Standards Tip Sheet

2.4 A system is in place for receiving feedback from	Standard 6 : Feedback and complaints
consumers from special needs groups and for using this	6 (3) (b) Consumers are made aware of and have access
feedback to improve services	to advocates, language services and other methods for
reedback to improve services	raising and resolving complaints.
2. E. The organization's communication	Standard 6 : Feedback and complaints
2.5 The organisation's communication	·
strategies include specific actions to target special needs	6 (3) (b) Consumers are made aware of and have access
groups.	to advocates, language services and other methods for
	raising and resolving complaints.
3.1 The organisation identifies key skills required for	Standard 7: Human resources
management and staff to be able to fulfil their	7 (3) (a) The workforce is planned to enable, and the
responsibilities in implementing inclusive service	number and mix of members of the workforce deployed
provision.	enables, the delivery and management of safe and
	quality care and services.
	7 (3) (b) Workforce interactions with consumers are
	kind, caring and respectful of each consumer's identity,
	culture and diversity.
	7 (3) (c) The workforce is competent and members of
	the workforce have the qualifications and knowledge to
	effectively perform their roles.
3.2 Management and staff have access to up-to-date	Standard 7: Human resources
training, information, tools and resources to effectively	7 (3) (a) The workforce is planned to enable, and the
respond to the diverse needs of consumers from special	number and mix of members of the workforce deployed
needs groups.	enables, the delivery and management of safe and
	quality care and services.
	7 (3) (b) Workforce interactions with consumers are
	kind, caring and respectful of each consumer's identity,
	culture and diversity.
	7 (3) (c) The workforce is competent and members of
	the workforce have the qualifications and knowledge to
	effectively perform their roles.
3.3 Management and staff key performance indicators	Standard 7: Human resources
include meeting inclusive service standards.	7 (3) (e) Regular assessment, monitoring and review of
G	the performance of each member of the workforce.
3.4 Induction and ongoing professional development	Standard 7: Human resources
reflects the organisational commitment to inclusive	7 (3) (d) The workforce is recruited, trained, equipped
services.	and supported to deliver the outcomes required by these
30.1.003.	standards.
3.5 The organisation allocates budget items that support	Standard 8: Organisational governance
the development and	8 (3) (c) Effective organisation wide governance systems
implementation of inclusive service provision (e.g.	5 (5) (6) Effective organisation wide governance systems
interpreter services, translations, inclusive service	
training and targeted media campaigns).	

Disclaimer: This resource has been developed by the Centre for Cultural Diversity in Ageing as a starting point for your organisation and should be tailored according to the organisation's service type(s) and specific requirements. Every attempt has been made to ensure the accuracy and currency of this information, however it is not intended to be comprehensive nor does it constitute legal advice. This information was correct at time of publication. LAST UPDATED: June 2021

