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Number 4

Developing quality measures for home and community care

Prepared for the HACC Officials Standards Working Group

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**Australian Institute of Health and Welfare
Canberra**

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The project was also made possible by the assistance of government officers from each of the participating States and Territories: the Australian Capital Territory, New South Wales, the Northern Territory, Queensland, South Australia, Victoria and Western Australia. In addition to the large task of liaising between the Institute team and the participating service providers, those who acted as assessors contributed many hours of their time: familiarising themselves with the Instrument and assessment process; conducting assessment interviews; and participating in debriefing sessions with Institute staff. The validity of the study has been strengthened by their willingness to share their knowledge of regional services and circumstances and their experience in using the HACC Service Standards Instrument.

This project has also been enriched by those representatives of consumer and community groups and services providers who joined together with representatives of local, State and Commonwealth government offices, to participate in editorial and discussion groups in New South Wales, South Australia, and the Australian Capital Territory.

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We would like to acknowledge the members of the HACC Officials Standards Working Group (listed in appendix E), under whose auspices this project was undertaken and the sub-working group (the Outcomes Working Group) which developed the first draft of the Instrument. We thank them for their assistance and cooperation throughout.

Disclaimer

In the presentation of its findings, this report compiles the views of HACC consumers, service providers, and local, State and Commonwealth government officers. The sources of reported opinions are clearly referenced within the report. As such, not all of the individual opinions expressed within the report reflect the views of the Institute, Standards Working Group or the official views of the participating Commonwealth Government and State and Territory Governments.

Project team

This project required the combined skills of a number of people to bring it to a successful conclusion. In part, this has been a reflection of the multitude of varied skills required by the complex task of testing and refining both Instruments and processes for the implementation of a national system of quality appraisal for HACC agencies. In part, too, it has been a reflection of the more pragmatic fact of staff turnover that characterises any research project of a reasonable duration. The following members of the research team, listed in alphabetical order, have made significant contributions to the project:

Elizabeth Butkus was responsible for the comparison of the HACC Service Standards with other systems of quality appraisal (CHASP, ACHS etc.). She was a key member of the project team for much of the life of the project, being involved in project administration, fieldwork management, desk audits, training, debriefing sessions and Instrument testing. Elizabeth left the Institute in July 1997 to take up a position in the Aged and Community Care Division of the Department of Health and Family Services.

Diane Gibson provided management support, advice and supervision on all aspects of the project, and was particularly involved in the design of the project methodology. She was also responsible for project management during Anne Jenkins' leave of absence in early 1997 (to complete her PhD). She is Head of the Aged Care Unit, the base from which the HACC National Service Standards Project was conducted.

Bella Holmes provided administrative, editorial and research assistance. She was also involved in project fieldwork.

Anne Jenkins was the Project Manager for the HACC Service Standards Project and, as such, was responsible for overall project coordination. She was heavily involved in the fieldwork stage of the project (testing, training and debriefing) and the revision of both the Instrument and the consumer questionnaire. She was responsible for the statistical design work and associated project methodology. Anne also undertook the bulk of the statistical analyses and interpretation, as well as the preparation of this report.

Sushma Mathur assisted with statistical analyses and field testing of the Instrument.

Kalya Ryan provided administrative and research assistance and, in particular, was responsible for the qualitative analyses of the Service Provider Survey, the Consumer Survey, the Assessment of Review Process Survey, and the material recorded during the assessment debriefings.

Patricia Ryan provided advice and management support for a period in her capacity as Acting Head of the Aged Care Unit (during Diane Gibson's leave of absence in late 1997).

Sam Mattila provided administrative and research assistance, with particular responsibility for the pre-pilot testing of the consumer questionnaire.

List of abbreviations

ACHA	Australian Community Health Association
ACHS	Australian Council of Healthcare Standards
AIHW	Australian Institute of Health and Welfare
ATSI	Aboriginal and Torres Strait Islander
CHASP	Community Health Accreditation and Standards Program
CIARR	Client Information, Assessment and Referral Record
COA	Commonwealth of Australia
DCS	Department of Community Services
DHSH	Department of Human Services and Health
DSS	Disability Service Standards
HACC	Home and Community Care
HRSCCA	House of Representatives Standing Committee on Community Affairs

Executive summary

Objectives

The objectives of the project were:

- to produce a refined quality assessment instrument for use in appraising community care agencies against the HACC National Service Standards;
- to provide advice on the use of the Instrument in terms of validity, accuracy and reliability;
- to provide advice on the use of the Instrument concerning appropriate scoring;
- to provide advice on the use of the Instrument with regard to data collection;
- to advise on methods for obtaining valid and reliable consumer input and its incorporation into the Instrument; and
- to undertake a comparison of the Instrument with other existing service appraisal methods that HACC-funded agencies may have completed.

Overall findings

The principal findings of the consultancy were as follows:

- that the Instrument could be reliably and validly applied to the assessment of performance against the HACC National Service Standards for a wide range of HACC-funded agencies;
- that, provided an effective method of assessment is applied, and incorporates the refinements to the Instrument recommended in this report, the Instrument is of sufficient reliability and validity to obtain scores against the HACC National Service Standards for compliance and comparison purposes; and
- that, notwithstanding the need to shorten the Instrument, service providers generally responded favourably to the Instrument.

Main findings of quality measures Instrument

Effectiveness of the Instrument

There was a very high level of agreement among service providers that all of the standards and their performance information were clear, practical, desirable and appropriate. On average:

- standards were considered clear by 95% of service providers;
- standards were considered practical by 91% of service providers;
- standards were considered desirable by 99% of service providers; and

- standards were considered appropriate by 94% of service providers.

Many service providers indicated that the Instrument was unnecessarily long and repetitive. The changes to the Instrument recommended in this report reduce its length by deleting repetitive requests for performance information.

On average, agencies participating in the pilot rated well against the standards. Agency performance against the standards was highest for Objective 1 (Access to services) and Objective 4 (Coordinated, planned and reliable service delivery). Agencies performed least well against the standards under Objective 5 (Privacy, confidentiality and access to personal information) and Objective 7 (Advocacy).

The best method for the collection of Instrument data

Overall, of the assessment approaches tested (see below), the approaches that included a visit to the agency had the highest reliability.

The methods of assessment trialled in the pilot were:

- joint assessment*, in which agencies and assessors (who were regional government HACC officers) completed the Instrument and ratings against the standards together during an assessment interview;
- self-assessment with verification*, in which the agency completed the Instrument and ratings, and assessors (regional government HACC officers) later visited the agency to verify those ratings;
- self-assessment*, in which agencies completed the Instrument and ratings on their own and were randomly selected for a verification visit by an assessor, who was a regional government HACC officer, after submission of the Instrument;
- independent/external assessor assessment*, in which verification visits or joint assessments were carried out by assessors who were external to and independent of the HACC government or service provider system; and
- peer review*, in which assessments were carried out by assessors who were HACC service provider peers. For the most part, peer review assessments relied on the completed Instrument and accompanying documentation and did not include a visit to the agency as part of the assessment.

Other key findings from the pilot testing of the Instrument are listed below:

- the joint assessment method was seen as particularly beneficial to new or small agencies;
- for the self-assessment with verification method, receiving the agency's completed documentation prior to the visit would have benefited assessors;
- while independent or external assessors had the advantage of lending greater objectivity to the assessment process, it was also felt to be the case that regional government project officers brought to the assessment process the benefits of familiarity with services and their environments; and
- the peer review process was seen to have great potential benefit to agencies by encouraging closer service provider networking and information sharing, particularly if assessments were to include an agency visit. It was, however, considered to require substantial resource commitments by participants.

Implementation issues

Training

Training prior to the implementation of the HACC National Service Standards Instrument, for both agencies and assessors, is recommended. Training for service providers would assist them in completing the Instrument and would reduce the time required of assessors for assessments. Training for assessors would assist in improving the consistency with which different assessors apply the Instrument to agencies. Ongoing training is also recommended to provide a venue in which quality assessment challenges across the range of HACC-funded agencies could continue to be addressed.

Agency capacity for self-assessment

The ability of an agency to complete the Instrument adequately on their own should be taken into account in determining whether the agency should be assessed by the joint assessment method or by the self-assessment with verification method.

Recommendations for further work

The Instrument does not specifically address the characteristics of agencies providing services for Aboriginal and Torres Strait Islanders, particularly in more remote regions where Indigenous culture strongly affects service provision. It is recommended that further work on this be considered.

Conclusions

The choice of assessment method should take into account the needs and resources of the agency. Nevertheless, the inclusion of an agency visit by an assessor during the assessment process is highly recommended for the following reasons:

- service providers were more likely to find the standards or performance information appropriate to their agency when the assessment method involved service providers completing the Instrument with the assistance of an assessor;
- agreement on ratings between agencies and assessors was highest when assessment was a joint process between the agency and the assessor; and
- inter-rater reliability was highest when the Instrument was rated by assessors who undertook a visit to the agency (joint assessments or self-assessment with verification).

Summary of findings for obtaining reliable and valid consumer input

Of the two methods of collecting consumer feedback trialled in the pilot, telephone interviews, rather than mailout surveys, were found to be a more effective means of obtaining valid consumer feedback. Findings in support of this were as follows:

- the overall consumer participation rate for the telephone interviews (94%) was far higher than that of the mailed survey (34%);

- the response rate to individual items was superior for the telephone interviews compared to the mailed surveys. Averaging over items, missing data occurred in 15% of cases for the mailed surveys but there was no missing data for the telephone interview items;
- some consumers indicated that they had difficulty understanding some questions. These questions could be answered immediately in the telephone interviews. In the mailed survey this may have been responsible for the high proportion of missing data. Moreover, responses were sometimes given to items on the mailed survey which were irrelevant, suggesting some compromise in the validity of consumer responses; and
- the telephone interviews were considered more effective than mailed surveys in eliciting consumer feedback that concurred with agency assessments.

Consumer feedback information should not be incorporated into a scoring system for agencies against standards at this stage, but rather used as a means of identifying problems to be addressed. Consumer feedback is an important aspect of service quality assessment. It can be used both to identify agencies that may be performing poorly against some standards, and to inform assessors, prior to an agency visit, of potential problems in service quality.

The telephone interviews and mailed surveys were representative of the national profile of HACC consumers with regard to the proportions in each category of age and sex but not with regard to proportions from non-English-speaking background and Aboriginal and Torres Strait Islander descent.

Recommendations for further work

In the pilot, a relatively small sample of consumers (75) participated in telephone interviews. Despite the finding that this was the most effective method of obtaining consumer feedback trialled, a number of key questions regarding service quality did not show a relationship with assessors' ratings of agencies. This may have been because of weaknesses in the consumer survey method or consumer survey items in eliciting accurate information on consumer viewpoints. However, it should be recognised that consumer feedback may be important input to agency assessment even where negative comments come from only one or two consumers. Therefore, items that do not show a substantial association with assessment results obtained using the Instrument should remain in the survey. They provide an alternative perspective and, in particular, one that allows for input by a minority of clients.

It is recommended that the consumer feedback instrument be subject to further testing with a larger sample of consumers using telephone interviews. In this way, it may be possible to develop a strategy for obtaining important service information from consumers on key aspects of quality.

Summary of findings for the comparison of standards to other quality appraisal approaches

As part of the project, a detailed study was undertaken comparing the HACC Service Standards with Community Health Accreditation and Standards Program standards (CHASP), Australian Council of Healthcare Standards (ACHS), and Disability Service

Standards (DSS) (Butkus 1997). This comparison focused on the content of the standards and did not attempt to review or compare their processes of implementation. It was found that while there were areas of overlap, there were also a number of areas in which the standards of these other quality appraisal systems did not adequately address the HACC Service Standards. The DSS were most compatible with the HACC Service Standards in terms of content, and the least compatible were the ACHS.

The findings of the comparison of HACC standards with CHASP and DSS revealed that, despite their similarity, no meaningful comparative score could be obtained. While there was some overlap in the areas of service quality measured by these methods, it would be necessary for agencies to address additional issues of quality not raised in either CHASP or DSS if they were to be fully appraised against the HACC standards.

The findings of the comparison of HACC standards with ACHS revealed that no meaningful comparative score could be obtained, and that none of the HACC objectives were completely covered by the ACHS standards. Agencies that had undertaken an ACHS review would need to address issues of quality under each of the HACC objectives, precluding the use of an abridged Instrument for these agencies.

For agencies that have undergone a review under another scheme, it is recommended that they fully complete the HACC National Service Standards Instrument at their first review, referring to other appraisal method results as appropriate. This would allow the performance of these agencies to be compared to other HACC agencies completing the Instrument. Subsequent reviews or reassessments may draw more heavily on the results of other appraisal methods.

Products of the HACC National Service Standards Instrument Pilot Project

As a result of the work undertaken for the HACC National Service Standards Instrument Pilot Project (described in this report), the HACC National Service Standards Instrument and the Consumer Survey were extensively revised. This resulted in the production of:

- a shortened and refined HACC National Service Standards Instrument for use in quality assessment of HACC agencies against the HACC National Service Standards. The refined Instrument contains 25 performance information requests pertaining to 27 standards (down from 31 in the original Instrument) and can be found in appendix A;
- a method for scoring agencies against the HACC National Service Standards to produce an overall Instrument Score that summarises agency performance, ranging from 0 (the poorest performance) to 20 (the highest performance);
- a method for calculating a compliance score that gives a summary rating of agency performance against each of the seven major objectives around which the HACC National Service Standards are organised, ranging from 0 (poorest performance) to 2 (highest performance); and
- a shortened and refined version of the consumer feedback questionnaire which generates information that can be mapped to the HACC National Service Standards. A copy of the final version of the consumer questionnaire is found in appendix B.

1 Introduction

1.1 Background

In 1988 HACC ministers agreed on the need for a strategy which would assure quality of care and consumer rights for consumers of HACC-funded services. A consultation process concerned with these issues commenced in 1989. Emerging from this were the Guidelines for the Home and Community Care Program National Service Standards, released by the relevant Commonwealth and State and Territory ministers in 1991. The National Service Standards were grouped around seven broad objectives: accessibility; information and consultation; efficiency and effectiveness; coordination, planning and reliable service delivery; privacy, confidentiality and access to personal information; complaints and disputes; and advocacy. A complete list of the 27 Service Standards is included later in the report (Box 3.1).

The responsibility for implementing these standards lay with the States and Territories and continued to be an issue of concern. In 1994, the Report on the Home and Community Care Program presented to the House of Representatives Standing Committee on Community Affairs indicated that while some States had made considerable progress in training service providers on the standards, others were still working out their implementation strategy (HRSCCA 1994). Tasmania was the first State to introduce a monitoring program for the standards. The Tasmanian Government, working with the Australian Community Health Association, had, by 1994, piloted a program for monitoring quality of HACC services using a service review model based on those used by the Community Health Accreditation Standards Project (CHASP).

Among the recommendations of the Efficiency and Effectiveness Review of the Home and Community Care Program (DHS 1995) was the need to ensure the accountability of service providers with regard to the quality of the services they provide. A particular focus was on outcomes for clients. To this end, the Standards Working Group was set up by HACC officials with objectives which included: developing outcome measures for the National Service Standards; developing a consistent national method for obtaining outcome measures on the standards; and considering methods for obtaining consumer input in the assessment of quality in HACC services.

From this group a subgroup was formed (the Outcomes Working Group) with the charter of further developing measurable outcomes. This group produced a draft Quality Measures Instrument for the measurement of quality outcomes in HACC-funded agencies. This Instrument was originally intended to be used by service providers for self-assessment. As it developed, however, it came to include consumer feedback (to be incorporated into assessment scores) and both quantitative and qualitative questions regarding service quality. As such, the Outcomes Working Group saw that it was necessary to involve a third party to score agencies against standards

according to the qualitative information and consumer input provided regarding the agency. This third party is referred to in this report as an assessor and may be a government project officer, a service provider from another agency, or an independent examiner with no previous involvement with HACC service providers in the region. To this point, the Quality Measures Instrument had not been trialled in agencies, and no method for either collecting the data required by the Instrument, or appraising the data, or scoring agencies against the standards had been developed.

1.2 Objectives of the project

In 1996, the Australian Institute of Health and Welfare was asked by HACC officials to undertake further development and refinement of the HACC Quality Measures Instrument, referred to in this report as the HACC National Service Standards Instrument. In particular, the Institute was required to:

- produce a refined, quality measures Instrument based on pilot test results;
- provide advice on the use of the Instrument in terms of validity, accuracy and reliability, including advice on appropriate scoring and data collection;
- provide methodological advice on ways of obtaining valid and reliable consumer input and incorporating this into the Instrument; and
- undertake a comparison of the HACC National Service Standards Instrument with other existing methods of measuring service quality.

This report documents the process and findings of the pilot test of the HACC National Service Standards Instrument.

1.3 Preliminary work

Prior to commencing this pilot test, preliminary interviews were conducted with a range of service providers to test the quality of the original draft Instrument provided by the Outcomes Working Group. As a result of these pre-pilot interviews, the draft Instrument was divided into two parts. Information to be obtained from agency records and information to be obtained from consumer feedback were separated, creating two distinct documents for the collection of quality assessment information: one, an Instrument to be completed by agencies, and the other, a questionnaire to be completed by consumers. This report describes the testing of each of these distinct documents. Pre-pilot interviews assisted in identifying individual items that failed to elicit useful performance information and areas in which further data were needed. Modifications, deletions and additions were made to compensate for these items. This ensured that the versions trialled in the pilot were most likely to glean useful performance information against each of the standards.

Pre-pilot interviews also confirmed the need to involve assessors in the process of scoring agency performance against the standards. From the information provided by agencies regarding their activities, goals, policies and objectives, a decision was to be made on whether the agency 'met', 'partly met', or had 'not met' the standards. The

diverse nature of HACC-funded agencies precluded the development of detailed and prescriptive guidelines for scoring all agencies in this manner. In providing a fair judgment of agency performance against the standards it was often necessary to take into account the service type, clientele or other individual circumstances of the agency. Overly prescriptive guidelines would have negated the assessor's ability to be flexible in this way. Without this flexibility, judgments of the quality of services provided in some agencies were at risk of being invalid and unreliable: the more specific the guidelines to assess an agency's standards, the less generalisable the guidelines were across different agency types. In addition, providing greater detail ran the risk of reducing the relevance of the guidelines over time, as agencies' practices and clientele change and evolve.

With this in mind, guidelines for assessors were developed that could be applied to the greatest range of HACC-funded agencies but which did not provide detailed and prescriptive checklists of things to look for to make rating decisions against the standards. A similar approach, employed in the nursing home and hostel outcome standards monitoring program operative in Australia from 1987 to 1997, proved, in a large scale international evaluation, to generate ratings with a high degree of both validity and reliability (Braithwaite et al. 1991; Braithwaite & Braithwaite 1995). The training of assessors was integral to the assessment process. This training stressed the need for assessors to allow agencies to explain their circumstances. It encouraged assessors to use their judgment in interpreting the guidelines, applying their knowledge of a specific agency's conditions. In this way the reliability and validity of the Instrument was supported by the communication between the agency and the assessor and by the assessor's experience and knowledge. A generalisable Instrument and scoring guidelines could thus be generated with informed assessors facilitating the specific interpretation of the meaning of standards and scores for individual agencies.

1.4 Report overview

Data of both a qualitative and quantitative nature were employed in meeting the requirements of this consultancy. In testing and refining the Instrument three approaches were taken:

- service providers and government officers involved in assessment in each of the participating States and Territories were asked to comment on the Instrument. Unstructured interviews and structured questionnaires were used to elicit this information.
- a quantitative study of the reliability of the Instrument was undertaken by comparing the scores given to agencies by their own managers or coordinators, by an assessing government officer (or peer in South Australia), and by an independent assessor.
- statistical analyses of the interrelationships between scores against standards were used to identify the reliability with which items in the Instrument measure quality as a whole in HACC-funded services as well as identifiable aspects of quality as defined by the objectives.

In investigating the best method for the collection of Instrument data several assessment approaches were trialled and subjected to comparison by both qualitative and quantitative means. These assessment approaches entailed different levels of involvement by assessors during the assessment process. Assessors were drawn from different sources: a small number of assessors were HACC service providers, some were officers based in the central office of the State Government, and the majority were drawn from the regional offices of the State Government in the service providers' local areas.

The comparison of methods of assessment involved:

- a statistical comparison of agency versus assessor Instrument Scores;
- a statistical comparison of the inter-rater reliability of each method; and
- qualitative analysis of service provider and assessor opinion of the assessment methods.

Each of the items of the consumer feedback questionnaire were designed to be incorporated into agency assessments against particular standards. It was possible to evaluate the viability of incorporating this feedback into the scoring of the Instrument by examining the quality and consistency of responses to the questionnaire and by statistically comparing consumer feedback with scores on the Instrument as determined by the agency and by the assessor. The consumer feedback questionnaire was trialled by telephone interviews and mailed surveys.

The relative value of each of these methods was evaluated in the following ways:

- by comparison of the response rates and the representativeness of the sample of respondents for each method;
- by consumer and service provider comment on the process; and
- by comparison of the relative statistical convergence of consumer appraisals (measured in each of the two methods) with scores on the Instrument.

The comparison of the HACC National Service Standards Instrument with other existing methods of measuring service quality was undertaken by a qualitative content analysis of each method under examination.

As a result of the extensive field testing and detailed qualitative and quantitative analyses described in this report, and in consultation with members of the HACC Officials Standards Working Group, a revised HACC Service Standards Instrument has been developed for use in appraising HACC agencies against the National Service Standards. It is included in appendix A. On the basis of more preliminary testing and analyses, a revised consumer feedback questionnaire was also constructed; this Instrument is included in appendix B.

2 Method

2.1 The HACC National Service Standards Instrument

2.1.1 Development and structure

The HACC National Service Standards Instrument was adapted from the Quality Measures Instrument developed by the HACC Outcomes Working Group. A major alteration was to split the Quality Measures Instrument into two components: one directly addressing outcomes according to the consumers they affect; and the other using agency-provided information to assess that standards were being upheld. The HACC National Service Standards Instrument is the latter of these two and will be referred to simply as the Instrument. Further modifications to the original Instrument were made as a result of pre-pilot testing and were necessary to better evoke useful performance information against each of the standards.

The pre-pilot test involved semi-structured interviews with a wide range of service providers aimed at obtaining feedback about the practicality, clarity, appropriateness, desirability and comprehensiveness of the standards, and their related consumer outcomes. Thirty-six agencies were included in this stage, covering a range of service types, sizes and locations. Successive refinements were made to the Instrument based on the information obtained during discussions with these service providers. Assessor guidelines to accompany the Instrument were also developed during this phase of the project. The pre-pilot testing of preliminary versions of the Instrument and assessor guidelines enabled maximum benefit to be gained from the pilot stage.

The revised Instrument and the assessor guidelines received the approval of the HACC Officials Standards Working Group before the commencement of the pilot test.

The Instrument comprised seven sections, each concerned with one of the seven objectives. Standards relating to the objectives were contained in these sections. There were 27 standards in total. Performance information requests were listed under each of the standards in order to address the relevant quality issues. Thus, for each standard there were one or more performance information requests for data of a quantitative and/or qualitative nature. The agency was asked to supply supporting documentation where possible and appropriate. Notes explaining what sort of information agencies should provide accompanied each performance information request. At the end of each section pertaining to a standard were check boxes for one of three ratings: 'met', 'partly met' and 'not met'. Agencies were to indicate which rating was appropriate for their agency for each standard. The Instrument concluded with a question asking for an overall rating of agency performance against the standards and with an action plan for meeting standards that had not been adequately met. A copy of the Instrument, in the

form tested in the pilot, is included in a supplementary report (*Developing Quality Measures for Home and Community Care: Technical Appendixes* provided on CD in the back of this report).

2.1.2 Supporting Instruments

The development and testing of the HACC Service Standards Instrument required the concomitant development of a number of supporting Instruments in order to:

- facilitate implementation in the pilot phase (the assessor guidelines);
- test the validity, reliability and comprehensiveness of the quality appraisal process (the Ratings Summary Form, the Assessment of Review Process Survey, the Service Provider Survey); and
- test the clarity, desirability, practicality and appropriateness of the standards (the Assessment of Review Process Survey, the Service Provider Survey).

Each of these supporting instruments is described below.

Assessor guidelines

Purpose: To assist assessors in rating agencies.

During pre-pilot testing of the Instrument, guidelines were developed to assist all assessors in deciding on agency ratings against the standards. The guidelines were developed to be applied to the greatest possible range of HACC funded agencies. As such, they did not include detailed and prescriptive checklists of 'things to look for' to make ratings decisions against the standards. Instead, they relied on assessor training in the application of the guidelines and service standards and upon assessors using their experience of quality of service across agencies to arrive at a score for the agency against each standard. By this method the performance indicators against the standards could exist as more general non-prescriptive indicators, allowing the knowledge and experience of the project officer to aid in the application, reliability and generalisability of the appraisal process. This method has been shown to be a reliable measure of compliance with service standards in nursing homes (Braithwaite et al. 1991; Braithwaite & Braithwaite 1995). A copy of the original assessor guidelines as used in the pilot is included in a supplementary report provided on CD in the back of this report (*Developing Quality Measures for Home and Community Care: Technical Appendixes*). In the revised version of the Instrument, the assessor guidelines have been incorporated and no longer exist as a distinct entity.

Assessment of review process

Purpose: To provide assessor input concerning the validity of the Instrument and concerning the effectiveness of the assessment process.

The Assessment of Review Process questionnaire was given to assessors after they had completed their assessment interviews with agencies. In this questionnaire assessors were asked to indicate the level of difficulty they experienced in rating each of the standards and were asked to indicate how appropriate the standards were to the agencies they assessed. Assessors were also asked to comment on the Instrument's comprehensiveness and balance.

Seventeen Assessment of Review Process questionnaires were returned to the Institute from the 53 assessors who participated in the pilot. A copy of the Assessment of Review Process questionnaire is included in a supplementary CD (*Developing Quality Measures for Home and Community Care: Technical Appendixes*).

Service provider survey

Purpose: To provide service provider input concerning the reliability and validity of the Instrument.

After they had completed the Instrument and, where appropriate, their assessment interview, agencies were asked to complete the Service Provider Survey. This questionnaire asked service providers to indicate standards' ratings that they disagreed with and to comment on the reason for their disagreement. Service providers were asked to indicate whether they considered the standards to be clear, desirable, practical and appropriate. They were asked to comment on whether they considered the Instrument sufficiently comprehensive and were also asked a number of questions as to whether they believed that the standards were achievable. The survey also collected some descriptive data concerning the agency, such as the number of clients, the time in operation, and their membership in a chain or group of agencies under one auspicing body.

Of the 145 Service Provider questionnaires sent out, 102 were returned to the Institute. A copy of the Service Provider questionnaire is included in a supplementary CD (*Developing Quality Measures for Home and Community Care: Technical Appendixes*).

Ratings summary form

Purpose: To provide data for analyses of the Instrument's reliability.

When assessors had decided on the ratings the agency should receive against the standards, they were asked to record these ratings on the Ratings Summary Form. These ratings took the same form as those in the Instrument: a choice of one of three ratings, 'met', 'partly met' or 'not met'. One additional summary item asked for an overall appraisal of agency performance. Assessors were also given the opportunity to write comments against standards ratings, indicating what action they thought the agency must take to meet the standards. These actions were then to be used to add to or alter the forward action plan at the end of the Instrument.

Assessors received Ratings Summary Forms for each assessment they undertook. Of the 94 Ratings Summary Forms were sent out to assessors, 74 forms were returned to the Institute. A copy of Ratings Summary Form is included in a supplementary CD (*Developing Quality Measures for Home and Community Care: Technical Appendixes*).

2.1.3 Sample

Given the project's aim of developing an Instrument applicable across the diverse range of HACC service types, the sample of agencies for the pilot was selected to be representative of agencies according to agency size, service type, location and outlet type. Representation of other characteristics was also sought in participating agencies.

These included:

- agencies that were providing services in rural and remote locations;
- agencies that were providing services in lower socioeconomic areas;
- agencies that were providing services specifically to people of a non-English-speaking background or to Aboriginal and Torres Strait Islander peoples; and
- agencies which had been reviewed through quality appraisal processes such as the Disability Services Standards, Community Health Accreditation and Standards Program (CHASP) or Australian Council of Healthcare Standards (ACHS).

The selection of agencies according to these characteristics was constrained by a number of factors. The most influential were, firstly, the ability of each State to provide assessors to conduct the assessment interviews as required and, secondly, conflict with other HACC program activities in particular areas and at particular times. Given these constraints, States were asked to select agencies for the pilot themselves but with certain conditions. Agencies were to fall into the categories determined by the project team (listed in the tables that follow), and they were to represent the range of service quality (that is, they were not to be selected on the basis of their likely performance against the standards in the pilot).

Five agencies withdrew from the pilot prior to commencement, leaving 162 available to participate in the pilot. Completed Instruments were received from 145 of these.

Agencies were selected from the following States and Territories: the Australian Capital Territory, the Northern Territory, Queensland, New South Wales, South Australia, Victoria and Western Australia. Tasmania did not take up the option to be part of the pilot project. The number and proportion of agencies involved in the pilot, selected on the basis of the specified criteria, are shown in the following tables (Tables 2.1 to 25).

Table 2.1: Agencies participating by size

Size	Number	Proportion
Small	37	25.5%
Medium	53	36.6%
Large	34	23.4%
Unspecified	21	14.5%
Total	145	100%

Table 2.2: Agencies participating by outlet type

Outlet type	Number	Proportion
Agency	113	77.9%
Council	22	15.2%
Hospital	10	6.9%
Total	145	100%

Table 2.3: Agencies participating by service type

Service type	Number	Proportion
Multiple services	38	26.2%
Home help/personal care	18	12.4%
Community nursing	13	9.0%
Allied health	5	3.4%
Respite	36	24.8%
Home maintenance/ modification	3	2.1%
Transport	5	3.4%
Meals	14	9.7%
Case coordination/ management	10	6.9%
Social support	3	2.1%
Total	145	100%

Table 2.4: Agencies participating by review type (n=145)

Review type	Number	Proportion
Disability Services Standards	20	13.8%
ACHS	12	8.3%
CHASP	12	8.3%
Unspecified	106	73.1%

Notes

1. Unspecified indicates cases where it was not known where agencies had undertaken a review, or it was not known what type of review they had undertaken.
2. Total number in table is greater than 145 because some agencies had undertaken more than one type of review.

Table 2.5: Agencies participating by other specified criteria (n=145)

Other specified criteria	Number	Proportion
Services to Non-English-speaking background people	8	5.5%
Services to Aboriginal and Torres Strait Islander people	3	2.1%
Low socioeconomic areas	4	2.8%
Rural areas	10	6.9%
Remote areas	11	7.6%
Unspecified	109	75.2%

The sample was further divided according to the method of assessment employed for the service appraisal (see Section 2.2). The breakdown by assessment type and State or Territory is presented in Table 2.6.

The number of agencies participating in each assessment method was constrained by the availability of assessors to participate. As the participating States and Territories were required to provide assessors, they determined the number of agencies assessed by each method according to their resources. States and Territories also chose to trial only those methods they believed they were likely to implement. The number of agencies in each assessment method reflects these constraints, in combination with the need to obtain enough agencies in each category to allow for the application of statistical tests of significance, and the concern to reflect a range of likely agency quality in each assessment category.

Table 2.6: Method of assessment by jurisdiction

State	Approaches piloted	No. of agencies selected for the pilot	No. of Instruments returned	No. of agencies withdrawn
New South Wales	Self-assessment	79	69	2
Victoria	Self-assessment with verification	8	8	0
	Joint assessment	4	4	0
	Independent assessment	3	2	1
Queensland	Self-assessment with verification	14	13	0
	Joint assessment	8	6	0
	Independent assessment	3	3	0
Western Australia	Self-assessment with verification	10	9	1
	Joint assessment	4	4	0
South Australia	Peer review	18	18	0
Australian Capital Territory	Self-assessment	8	6	0
Northern Territory	Peer review	8	3	1
Total		167	145	5

2.1.4 Procedure

Once State or Territory representatives had selected agencies for inclusion in the sample and confirmed their ability to participate, the contact and postal details were forwarded to the project team.

The project team distributed the Instrument to agencies according to the contact details supplied by the coordinating State and Territory authorities. An accompanying cover letter described the purpose of the pilot and the method of assessment the agency was to follow. Agencies were allowed a minimum of one week to complete the Instrument.

Assessors then completed their appraisal of the agencies according to the pre-determined assessment method. Assessor ratings against standards were recorded on

the Ratings Summary Forms. Assessors returned the completed Instruments and their completed Ratings Summary Forms to the Institute when the assessment interview had been completed.

2.1.5 Methods of assessment

Five methods were tested in which agencies were assessed against the standards using the Instrument. These methods were born of methodological and practical considerations. One method considered to be less methodologically sound (self-assessment) nevertheless was viewed by jurisdictions as practical to implement given likely resource constraints (this method did not involve a visit to the agency during assessment). Rather than dismiss any of the potential assessment methods without adequate testing, it was determined that they should be included in the pilot to facilitate more rigorous comparison. Five approaches to quality appraisal were thus trialled: self-assessment, self-assessment with verification, joint assessment, peer review assessment, and independent/external rater assessment.

Self-assessment

Agencies were required to fully complete the Instrument without the assistance of an assessor. This included the individual standards ratings, overall appraisal (with the exception of the comments and date of next review) and the forward action plan (with the exception of the time frame and the person to complete the task). To assist in this process, a short guide to completing the Instrument was sent to agencies along with the Instrument. This guide outlined what the Instrument required and concisely described how to arrive at scores against the standards. Box 2.1 shows an extract from this guide. When agencies had completed the Instrument according to these instructions they then mailed the completed Instruments to the Institute.

Seventy-nine agencies were selected for self-assessment. Of these, 69 returned Instruments to the Institute within the time frame of the pilot. Two agencies withdrew, one had closed during the time of the pilot and the other failed to receive the Instrument due to incorrect postal addressing.

The cover letter sent to self-assessing agencies indicated that a proportion of agencies would later be selected to undertake a random verification interview. At the time of completing the Instrument the agencies did not know whether they would be a part of this sub-sample. The project team selected these agencies randomly within categories of service type. When Instruments had been returned, the selected agencies were contacted and an assessment interview was scheduled. Assessors were forwarded the agencies' completed Instruments in preparation for this interview.

During the verification interview, the assessor discussed the agency's responses against the Instrument and viewed the relevant documentation. The assessor completed the Ratings Summary Form, and returned the Instrument and the Ratings Summary Form to the Institute.

In the Australian Capital Territory, four agency self-assessments were verified. In New South Wales, 20 agency self-assessments were scheduled for verification, but only 10 of these were completed within the time frame of the pilot.

Box 2.1 Excerpt from the guide to scoring given to agencies undertaking a self-assessment

'Not met' rating

A 'not met' rating is appropriate where your agency does not satisfy the consumer outcome at its most basic level. For example, Consumer Outcome 6.1 states that 'Consumers are aware of the complaints process'. A 'not met' would be appropriate if your agency did not take steps to ensure that consumers received information about the complaints process and a 'not met' would be appropriate if your agency did not take some action to facilitate consumer understanding of this information.

'Partly met' rating

A 'partly met' rating would be appropriate where the consumer outcome is satisfied at its most basic level but where a number of other factors should be changed to achieve a better outcome under the standard. The Instrument provides prompts for what these factors may be for each standard on the page opposite to the one where you complete your performance information. Using Consumer Outcome 6.1 as an example again, if your agency satisfies the outcome at its most basic level but no action is taken to periodically remind consumers of the complaints process and inadequate provision is made for special needs groups in informing consumers of the complaints process, then a 'partly met' rating would be appropriate.

'Met' rating

A 'met' rating is appropriate where your agency has satisfied the consumer outcome and has been able to respond positively to each of the points listed in the Instrument. The 'met' rating is not, however, intended to be the equivalent of a score of 100% against a standard, nor is it intended to reflect the notion of best practice. Rather, an agency may have satisfied the standard and the majority of points under the consumer outcome, but may still be able to make changes to improve the quality of service. For example, under Consumer Outcome 6.1 your agency may have been able to answer positively against each point but may have found some scope for improving the awareness of the complaints process for a particular non-English-speaking background group.

Two measures of your agency's overall rating against the standards are requested on this form. The numerical score is obtained by adding the scores made against each standard. As the Instrument indicates, a 'met' rating scores 2, a 'partly met' scores 1, and a 'not met' scores 0.

The second measure of overall performance requires that you make a judgment about how well you think your agency has performed against the standards; whether it meets the standards to an exemplary level, to a good standard, to a minimal or basic standard, or whether it fails to meet the standards. Your decision about this rating should reflect your own opinion about your agency's performance against the standards, irrespective of the numerical score calculated in the previous question. Your responses to this question will be used as a check on the validity of the standards scoring system.

Self-assessment with verification

The self-assessment with verification method also required agencies to fully complete the Instrument including ratings against the standards, overall appraisal and action plans, without the assistance of an assessor. They did not receive the short guide to scoring distributed to agencies undertaking self-assessment. The ratings they gave themselves were considered to be draft ratings. When they had completed the Instrument the agency received a visit from an assessor. Using the assessor guidelines, assessors discussed the agency's responses against the Instrument and viewed the agency's relevant documentation in order to reach final ratings for each standard. Assessors recorded the ratings they believed the agency should receive on the Ratings Summary Form. Where assessors and agencies continued to disagree after discussion this was simply recorded as conflicting entries on the Instrument (containing the agency's self-ratings) and the Ratings Summary Form (completed by the assessor). After the assessment interview, the assessor returned the Instrument and the Ratings Summary Form to the Institute.

Thirty-two agencies were selected for self-assessment with verification in Victoria, Queensland and Western Australia. One agency in this group withdrew from the pilot due to management changes and another did not complete the self-assessment with verification process within the time frame of the pilot.

Joint assessment

Joint assessments did not require agencies to complete the ratings against the standards, the overall appraisals, or action plans prior to an assessment visit. They were required to write answers against the performance information requests and to gather together relevant documentation. Making use of the assessor guidelines, assessors were to interview agencies and, in discussion with the service provider, come to a joint decision about the ratings that it had achieved under the standards. These jointly determined ratings were recorded on the Instrument by the service provider and the Ratings Summary Form by the assessor. Where the agency and the assessor continued to disagree about ratings after discussion, they were instructed simply to record their differing ratings on their respective forms. The assessor returned the Instrument and the Ratings Summary Form to the Institute after the interview.

Sixteen agencies were selected for joint assessments. Two Instruments were not returned within the time frame of the pilot.

Independent or external assessor

This assessment method differed from the others tested in that it used assessors who were independent of or external to the regional HACC program. These assessors thus did not have prior knowledge of the agencies they assessed, but did have some HACC program knowledge. The two independent raters involved in the pilot were State government officers whose duties did not normally involve dealing with regional HACC agencies. Both had extensive experience in the area of quality appraisal.

Independent raters carried out assessments as either self-assessments with verification or joint assessments. Independent raters used the Ratings Summary Form to record

their ratings of agency performance. This form was completed during the assessment interview.

Six agencies were selected for independent rater assessments. One agency withdrew from the pilot.

Peer review assessment

Peer review assessments were conducted in both the Northern Territory and South Australia. The methods employed were, however, quite different in the different States. In the Northern Territory, peer review assessment differed from the other methods tested in that it used assessors who were staff members of other HACC agencies. Agencies to be assessed completed the Instrument following either the joint or self-assessment with verification method and discussed their responses with peer assessors in an interview. Instruments completed by the agencies, and Ratings Summary Forms completed by the assessors, were then sent on to the Institute.

Of the eight agencies selected to have a peer review assessment in the Northern Territory, one withdrew from the pilot. Seven assessments were conducted with agencies. Three Instruments were returned to the Institute.

Peer review assessments in South Australia were conducted as desk audits of completed agency Instruments. Agencies fully completed the Instrument including ratings and forward action plans. This was done without the assistance of an assessor and without the short guide to scoring distributed to agencies undertaking self-assessment. Completed Instruments were then sent to a peer review panel.

Peer review panels were three-member teams composed of staff members of other HACC agencies. Each three-member peer review team conducted six agency assessments. Panels met together away from the agency being assessed to view and discuss the completed Instruments and provided documentation. Using the assessor guidelines, the peer review panels reached final ratings for each standard. Panel members recorded the ratings they believed the agency should receive on the Ratings Summary Form. The panel then contacted the agency to provide feedback on their appraisal. Instruments and Ratings Summary Forms were then sent on to the Institute. Agencies were not given the opportunity to change their ratings.

Eighteen agencies were assessed by peer review in South Australia. All Instruments were returned to the Institute.

2.1.6 Training of assessors

Prior to their first assessment interview, assessors participated in a one-day training session to become familiar with the Instrument, the assessor guidelines and the assessment process. The assessor guidelines and Ratings Summary Forms were distributed to assessors in this session.

The method of using the assessor guidelines to arrive at scores for agencies against each of the standards was discussed during training. While the assessor guidelines provided criteria against which agencies could be assessed, assessors were also explicitly instructed to use an '80/20 rule'. According to this rule, 'met' was not presented as the equivalent of 100% or the best possible performance, but rather that 80% or more of the

listed criteria had been achieved by the agency. The agency must also have met any specified basic criteria for the standard but, in other respects, the assessor was to follow the 80% rule, that is, they may observe that the agency has four out of five things in place. 'Not met' was appropriate where an agency failed the basic criteria where these were specified as such in the guidelines. Where basic criteria were not specified, a 'not met' rating was appropriate where 80% of criteria listed under the standard were not achieved, that is, the agency had failed to achieve four out of five criteria. A 'partly met' was advised where an agency satisfied the specified basic criteria but perhaps only half of other criteria, that is, the agency achieved somewhere between 20% and 80% of the listed criteria. This rule was devised with the intention of allowing assessors some leeway to exercise their judgment and knowledge of the agency's circumstances when interpreting the requirements of the standards.

A role-play and assessment exercise using a fictitious agency's response to the Instrument provided a medium for introducing both the Instrument and the scoring method. Group discussion after each of these exercises clarified the scoring method, the assessor's role and the purpose of the pilot. It was emphasised that, although the assessor guidelines would provide some indication of appropriate ratings, the assessors themselves were to use their judgment and knowledge of the agency's circumstances to come to a scoring decision. In this way, the Instrument could be applied to a wide variety of HACC agencies.

The process of each of the relevant assessment methods was described, highlighting what was required of assessors in each.

2.1.7 Feedback regarding the pilot

Feedback regarding the Instrument and the assessment process was sought from both assessors and agencies. As noted in Section 2.1.2, when the assessment process was completed Service Provider Surveys were distributed to agencies. Of the 145 Service Provider questionnaires sent out, 102 were returned to the Institute.

The main source of feedback from assessors was from debriefing meetings. During these meetings, assessors in each State met with members of the consultancy team to discuss their experiences during the pilot. Almost all assessors were able to attend these debriefing sessions. An Assessment of Review Process survey form was also distributed during these meetings to obtain quantitative feedback from assessors regarding the Instrument and assessment process. Fifty-three assessors participated in the pilot test of the Instrument. Of these, 17 returned an Assessment of Review Process Survey. Part of the reason for this low response rate was that peer review teams provided their own comprehensive written reports of the peer review process. Of the 38 non-peer review assessors attending debriefing sessions, 45% returned the Assessment of Review Process Survey.

2.1.8 Reliability study

A reliability study was conducted to ensure that the Instrument would produce ratings for agencies that did not vary when different people conducted the assessment. To test this, members of the consultancy team conducted a second assessment on a sample of agencies. Two methods of testing inter-rater reliability were used. Desk audits involved

assessing agencies using their provided documentation and written answers on the Instrument only. Reliability assessment visits involved a member of the consultancy team undertaking a visit to agencies after the assessor had conducted their assessment interview with the agency. In this way the veracity of two assessment methods could be tested: assessment by visit and assessment by documentation alone.

Desk audits were conducted for 10 New South Wales agency Instruments. These agencies had undertaken self-assessments (see Section 2.2) that had been verified by assessors.

Reliability visits to agencies were conducted for 15 agencies in South Australia, Queensland, Victoria and Western Australia. Of these 15 agencies, five had been assessed using the self-assessment with verification method, five with peer review assessment, and five had undergone a joint assessment.

These reliability studies were conducted after assessors had returned all agency Instruments and accompanying documentation to the Institute. In both tests of inter-rater reliability, the second rater did not have knowledge of the ratings given to the agency by the assessor. That is, they did not view the Ratings Summary Forms for agencies. The agency's self-ratings had been recorded on the Instrument that the reliability raters were using as the basis of their assessment. As such, they were aware of the agency's own opinion of what ratings they deserved, thus placing the reliability raters in possession of the same written information as the assessors who conducted the assessment interview with the agency. The important aspect of the reliability study was that reliability raters should decide on ratings for agencies independently of the previous assessor.

For both methods, reliability raters recorded their ratings on a Ratings Summary Form. Quantitative analyses later compared Ratings Summary Form responses of reliability raters and assessors to establish the inter-rater reliability coefficient and per cent agreement.

2.1.9 Testing for validity and reliability

Testing and refining the HACC National Service Standards Instrument required an assessment of its reliability and validity. The validity of the Instrument refers to the how effectively the Instrument measures what it is intended to measure – quality consumer service in HACC-funded agencies. Reliability refers to whether the Instrument will produce the same results for agencies under different conditions of administration. Tests were made of the face and content validity of the Instrument, its internal consistency, and its inter-rater reliability.

Face and content validity

Content validity is concerned with the extent to which the Instrument adequately covers the domain of service quality that it is intended to cover, that is, the extent to which it is sufficiently comprehensive and balanced. The face validity of the Instrument refers to the extent to which 'on the face of it' the Instrument provides a measure of quality in HACC-funded services. Hence its measures should have some meaning to those in the community care sector. Prior to pilot testing, discussions were held with service providers to gain their opinions on ways in which the Instrument could be

made more comprehensive and useful for the assessment of quality in their agency. After pilot testing of the Instrument a more quantitative examination was conducted, via the Service Provider Survey, of service providers' opinion on whether the service standards and their associated performance information requests were clear, desirable, practical and appropriate. At this time, assessors were asked to indicate how appropriate they found the Instrument to the agencies with which they conducted assessments and were asked which standards they found difficult to rate (the Assessment of Review Process Survey). Service providers who had had assessors rate their agencies were also asked which standards ratings they were critical of and why. Just as the Instrument must appear to collect valid indicators of quality performance, the assessment process must also be free from apparent flaws in its validity. Qualitative data, obtained from assessors during the debriefing sessions, were used to evaluate the face validity of each of the assessment methods.

Internal consistency

The HACC National Service Standards Instrument is intended to provide a measure of quality. Internal consistency addresses whether each of the various components of the Instrument contributes to a sensible and coherent measure of this quality. Internal consistency is assessed by statistical methods. The results of factor analyses of the ratings against the standards were examined, as were alpha reliability coefficients for the groups of standards that related to each of the seven objectives. Correlations between objectives indicate whether each of the objectives is sufficiently related to another to be considered as contributing to the measurement of a single construct.

Concurrent validity

When two different measures of the same or similar construct agree they are said to have concurrent validity. Their agreement provides evidence to confirm that the measures are tapping into the same underlying factors. The concurrent validity of the Instrument was tested by comparing the ratings against the standards with an overall appraisal of agency performance as perceived by assessors and agencies. The correspondence between agency self-ratings and assessor ratings also provided a measure of concurrent validity.

The degree to which agencies' and assessors' ratings converged provided evidence of the concurrent validity of the Instrument. Examination of this agreement within and across assessment methods provided an indication of the degree to which each of the methods supported this concurrent validity. Similar comparisons were made across assessment methods for the concurrent validity of Instrument Scores and the overall appraisal of agency performance.

Inter-rater reliability

The HACC National Service Standards Instrument tested in the pilot contained performance information that required that a third party, an assessor, use his or her judgment and knowledge of the service to decide on ratings against the standards appropriate for the agency. An important question arising from this circumstance is

whether the ratings an agency received would depend more on the assessor than on the quality of service in the agency. Assessors received training on the use of the Instrument and guidelines to assist them in making ratings decisions. These methodological processes were designed to support inter-rater reliability. Nevertheless, some assessors could have been perceived as tougher than others or some more sophisticated in their approach to assessment. Assessors varied in their level of experience in dealing with or working in HACC-funded agencies: some were government officers, others were peers of the service providers. An important aspect of the study, therefore, was to determine the level of reliability between raters. Two methods of reliability assessment were used: one involved a second appraisal by a reliability rater with 15 agencies; the other involved 10 desk audits of agency-completed Instruments. In both cases, a second set of ratings were generated and then compared with those given to the agency by the first assessor (see Section 2.2.3).

Inter-rater reliability refers to the tendency for the Instrument to be applied consistently by different raters. The method of assessment may also have affected this reliability. The use that assessors made of the Instrument and the tendency for their own biases and assessment styles to enter the assessment process may have been affected by assessment method. Although the sample size was small, comparisons of inter-rater reliability were made across assessment methods. These comparisons were based on the results of the second interview conducted by the reliability assessor with 15 agencies. Five of these agencies had previously undergone peer review, five had undergone self-assessment with verification, and five had cooperated in a joint assessment.

Inferential tests of the difference between methods

Agencies were selected for the pilot using criteria which sought to involve agencies of the full range of service quality. The choice of assessment method to be used with agencies also was not to be determined by the agency's expected performance but was intended to vary across the full range of agency quality.

By this selection method it can be assumed that when agencies are grouped by assessment type, the true service quality of agencies in each group should not, on average, vary substantially. If the assessment methods are each equally effective at reflecting the true service quality of agencies and the Instrument is reliable, then the Instrument should produce the same average performance scores for the group of agencies using each different assessment method (within a degree of error to be expected by chance).

All other things being equal, it can be assumed that if differences occur between the average performance of the agencies in each assessment type, then this difference is likely to be the result of factors associated with the assessment method.¹ Significance tests were conducted on the differences between the mean scores for each group of agencies according to assessment method.

1. This assumption is somewhat compromised by the absence of a properly randomised sample.

2.2 The consumer survey

2.2.1 Development and structure

Pre-test

The original draft Quality Measures Instrument developed by the Outcomes Working Group did contain items requiring consumer feedback, but these were not constructed to form part of a consumer survey. It was therefore necessary to design a consumer questionnaire and to devise a method for its implementation.

An editorial sub-committee for the HACC Officials Standards Working Group drafted a set of consumer questions. This group consisted of a consumer representative, a service provider representative, members of the HACC Standards Working Group, and a member of the consultancy team.

The items were tested and refined in three iterations conducted in the Australian Capital Territory: the first test consisted of five face-to-face interviews, the second of five telephone interviews, and the third of 10 mailed questionnaires. After each test, the questionnaire was modified to better collect consumer views of agency service quality. Formatting and layout of the mailed version were altered to aid readers in replying to the questions. Where appropriate, open-ended questions were replaced with fixed multiple-choice options. Some changes were made to language to avoid technical or bureaucratic terminology which may have compromised clarity and comprehension for general service users. Additional information was supplied for issues that were found to be confronting or confusing to consumers. Redundant questions were eliminated. A small number of items were added to collect demographic data on respondents.

The agreement of the HACC Officials Standards Working Group was received for the revisions. The final Consumer Survey Form also received the clearance of the Australian Institute of Health and Welfare Ethics Committee before distribution to consumers.

2.2.2 Instrument

The consumer survey tested in the pilot contained questions listed under five sections: Provision of Services; Rights and Information; Satisfaction with Services; Advocacy; and General Information. Each question in the first four sections was specifically designed to measure agency performance as it related to a particular standard. In this way, consumer appraisals could be matched directly to agency performance against the standards. Four questions, listed under General Information, sought information on characteristics of the respondents, including their age, sex, carer status, and membership of a special needs group.

Two methods of receiving consumer feedback regarding agency performance were tested and compared: telephone interviews and mailed surveys. There were some minor differences between the questionnaires trialled in the telephone interview and mailed survey. To assist consumers, the format and layout of the mailed survey differed from that of the telephone interview schedule. The mailed survey also contained three additional questions. These additional questions aided clarity, sought

further information and aided the translation of the telephone interviews into the less interactive medium of the mailed survey. One repetitive question was also dropped from the mailed survey.

The telephone interview schedule contained a total of 47 questions related to performance against the standards. The mailed questionnaire contained 49 performance-related questions. These questions are listed in Chapter 5. A copy of the questionnaire used in the mailed survey is included in a supplementary CD (*Developing Quality Measures for Home and Community Care: Technical Appendixes*).

The HACC Officials Standards Working Group member in each State and Territory determined the method of collecting consumer feedback in his or her own jurisdiction. Potentially, four methodologies for using the questionnaire were available for pilot testing – focus groups, individual face-to-face interviews, telephone interviews and mailed questionnaires. Only telephone interviews and mailed questionnaires were tested during the project.

2.2.3 Sample

Telephone interviews

Telephone interviews were conducted with HACC consumers in South Australia only. The Government of this State employed a research agency to undertake interviews with consumers. The data obtained from these interviews were then provided to the project team. Of the 18 agencies in this State that had participated in the pilot test of the Instrument, five volunteer agencies were sought, and obtained, to undertake a trial of the consumer survey.

Consumers were randomly selected from the participating agencies. Interview data were obtained from a total of 75 consumers from five different agencies, representing a response rate of 94%.

Mailed surveys

Mailed consumer surveys were trialled in Queensland, Western Australia, New South Wales, Victoria and the Australian Capital Territory. Five agencies were to be selected in each State. These five agencies were to be chosen to satisfy two general criteria. Where different assessment methods were used within the State, consumer feedback was to be obtained from at least one agency using each different type of assessment method. Where possible, agencies selected for consumer feedback were to represent a range of service types. Using these criteria, the government officials responsible for coordinating the pilot in each State selected the agencies to participate.

Agencies were asked to randomly select 50 consumers by selecting every '*n*th' consumer from their list of current consumers, calculating '*n*' by dividing the total number of consumers by 50 and rounding to a whole number. For agencies with fewer than 50 clients, all consumers were to be selected.

The overall response rate for the mailout survey was 34%. The following table shows the number of agencies which participated in pilot testing the consumer survey by mailed questionnaire in each jurisdiction, and the number of responses obtained.

Table 2.7: Response rate to the mailed survey

	NSW	Vic	Qld	WA	ACT	Total
Number of agencies	10	2	5*	3	6	26
Number of forms sent out	481	100	230	150	300	1261
Number of responses	117	47	90	69	108	431

* No responses received from clients of one of these agencies, a transport service.

2.2.4 Procedure

Telephone interviews

In South Australia a subcontracted research company, sponsored by the South Australian Government, conducted telephone interviews. Selected consumers were first contacted by the agency from which they were receiving services. Agreement was sought from each selected consumer to being questioned about the quality of the HACC services that they were receiving by an independent telephone interviewer. If the consumer agreed, his or her telephone number was supplied to the research company. Interviewers recorded consumer responses on the questionnaires provided by the project team. The research company then entered these responses into a data file and forwarded them to the Institute.

Mailed questionnaires

Queensland, Western Australia, New South Wales, Victoria and the Australian Capital Territory chose to trial the mailed questionnaire, on the basis that this method was the only one likely to be possible within resource constraints in any future full-scale implementation of the National Service Standards appraisal process. The government officials responsible for coordinating the pilot in each State contacted the selected agencies and sought their agreement to participate. The contact details of these agencies were then passed on to the project team.

The project team forwarded to each of the participating agencies 50 packages for consumers. These packages contained a reply paid envelope (addressed to the Institute), a survey form, and a covering letter explaining the purpose of the pilot, the voluntary nature of the survey, and contact details of the project team. These packages were then sent out by the agencies to the consumers in the randomly selected sample.

Consumers returned their anonymous forms direct to the Institute. On receipt of these forms, the project team undertook quantitative and qualitative analysis of responses.

2.2.5 Testing for validity and reliability

Representativeness

The reliability and validity of a method for collecting consumer feedback is dependent on whether it facilitates the involvement of all HACC consumers. In other words, respondents should be representative of the total HACC population. A particular

method should not put any group of consumers at a disadvantage in providing their feedback. The representativeness of the sample obtained was assessed in two ways: by comparison of the profiles of survey respondents to those of the total HACC population; and by calculation of the overall response rate to the two collection methods.

Item response

The usefulness of the consumer survey as a tool for gaining performance information is limited by the degree to which respondents reply to the questions asked of them. High rates of non-response may indicate that the questions are inappropriate to particular respondents, or it may be a symptom of the lack of clarity in the questions asked. The validity of the consumer survey to its target population was thus tested by examination of the response rate to particular items.

Comparison of the item response rate across survey methods allowed examination of the relative validity of each method. Where survey items are themselves ineffective, poor responses will be noted regardless of the method employed. Where the method of collecting consumer feedback was ineffective, non-responses would be more frequent even for questions that may otherwise have effectively elicited responses.

Concurrent validity

The consumer feedback Instruments were devised as measures of agency performance from the viewpoint of the consumer. The concurrent validity of both the consumer surveys and the Instrument is supported when all measures converge on the same performance appraisals for agencies. Concurrent validity indicates that the assessment tools are measuring the same thing, in this case, agency service quality. Examination of correlations between Instrument ratings and consumer appraisals indicate the relative concurrent validity of the respective measures. Consumer feedback from both mailed surveys and telephone interviews was compared with agency self-ratings and assessors ratings against the Instrument.

2.3 Comparison of quality appraisal mechanisms

Some Home and Community Care agencies have opted or been required to undertake quality appraisal processes, such as Disability Services Standards reviews, or processes associated with accreditation programs such as the Community Health Accreditation and Standards Program (CHASP) or the Australian Council of Healthcare Standards (ACHS). It was therefore desirable to explore the similarities and differences between these processes to determine whether a HACC National Service Standards review of agencies that have already undergone review through one of these other processes would constitute unnecessary duplication and an inefficient use of resources.

A comparative content analysis of the standards contained in the review processes listed above was undertaken. This analysis has been separately published as:

- Butkus E 1997. Home and Community Care National Standards: Comparison with the Disability Service Standards, Community Health Accreditation and Standards Program, and the Australian Council of Healthcare Standards. Canberra: AIHW (Welfare Division Working Paper no. 14).

This material compares the content of the standards, but does not compare their processes of implementation. Section 6 of this report both summarises some of the key findings and outlines the difficulties that arise in attempting to extend a comparison of quality appraisal mechanisms beyond the content of the standards.

3 Testing the HACCC National Service Standards Instrument

This chapter examines the validity and reliability of the HACCC National Service Standards Instrument as tested in the pilot project and proposes a method of scoring agencies against the standards. The analysis begins by presenting how agencies scored against each of the standards in the pilot test and which of the 27 standards most often received 'met', 'not met' and 'partly met' ratings.

Section 3.2 examines the face and content validity of the Instrument. It discusses the clarity, desirability, practicality and appropriateness of the standards and their associated performance information in the Instrument. This section draws on feedback from service providers (from the Service Provider Survey and comments written on agency Instruments themselves) and comments from assessors (from debriefing sessions and the Assessor Survey).

The section on internal consistency (Section 3.3) presents the findings of a range of statistical analyses of pilot test data. The results of these analyses indicated that certain changes to the Instrument would be likely to improve its validity and reliability, particularly in relation to scoring. The results of an analysis of pilot test data that incorporates recommended changes to the Instrument are also presented.

The validity of using an Instrument Score, calculated by adding individual ratings against standards, is supported by tests of its concurrent validity. Section 3.4 makes a test of the Instrument's concurrent validity by comparison with the overall appraisals of agency performance. These global measures of perceived quality of service were provided at the same time as the Instrument's ratings. Comparison is also made between agency self-ratings and assessor ratings.

Finally, a key aspect of the reliability of the Instrument concerns the consistency with which different raters would rate the same agency against the standards. Ideally, by using the guidelines and following the performance information contained in the Instrument, each standard would be rated the same when different raters assess the same agency. The results of inter-rater reliability assessments undertaken by consultancy team members for 25 agencies are presented in Section 3.5. These results contribute to an assessment of the adequacy of the Instrument used in the pilot test.

Box 3.1 The HACC National Service Standards

Objective 1: ACCESS TO SERVICES

- 1.1 *Assessment occurs for each consumer.*
- 1.2 *Consumers are allocated available resources according to prioritised need.*
- 1.3 *Access to services by consumers with special needs is decided on a non-discriminatory basis.*
- 1.4 *Consumers in receipt of other services are not discriminated against in receiving additional services.*
- 1.5 *Consumers who reapply for services are assessed with needs being prioritised.*

Objective 2: INFORMATION AND CONSULTATION

- 2.1 *Consumers are aware of their rights and responsibilities.*
- 2.2 *Consumers are aware of services available.*
- 2.3 *Consumers are informed of the basis of service provision, including changes that may occur.*

Objective 3: EFFICIENT AND EFFECTIVE MANAGEMENT

- 3.1 *Consumers receive appropriate services provided through the processes of ongoing planning, monitoring and evaluation of services.*
- 3.2 *Consumers receive services from agencies that adhere to accountable management practices.*
- 3.3 *Consumers receive services from appropriately skilled staff.*

Objective 4: COORDINATED, PLANNED AND RELIABLE SERVICE DELIVERY

- 4.1 *Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.*
- 4.2 *Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.*
- 4.3 *Consumers' cultural needs are addressed.*
- 4.4 *The needs of consumers with dementia, memory loss and similar disorders are addressed.*
- 4.5 *Consumers receive services which include appropriate coordination and referral processes.*

Objective 5: PRIVACY, CONFIDENTIALITY AND ACCESS TO PERSONAL INFORMATION

- 5.1 *Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.*
- 5.2 *Consumers have signed confidentiality release forms.*
- 5.3 *Consumers are able to gain access to their personal information.*

Objective 6: COMPLAINTS AND DISPUTES

- 6.1 *Consumers are aware of the complaints process.*
- 6.2 *Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution.*

- 6.3 *Services are modified as a result of 'upheld' complaints.*
- 6.4 *Each consumer receives assistance, if requested, to help with the resolution of conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer.*

Objective 7: ADVOCACY

- 7.1 *Each consumer has access to an advocate of his or her choice.*
- 7.2 *Consumers know of their rights to use an advocate.*
- 7.3 *Consumers know about advocacy services – where they are and how to use them.*
- 7.4 *The agency involves advocates with respect to representing the interests of the consumer.*

3.1 How agencies scored against the standards

This section looks at how agencies scored against the standards, using the performance information and the guidelines provided for the Instrument applied in the pilot test. A list of the 27 standards is provided in Box 3.1. The performance information required from agencies under each standard is part of the HACC National Service Standards Instrument as used in the pilot (a copy is included in appendix A of the supplementary report *Developing Quality Measures for Home and Community Care: Technical Appendixes*). Agencies received specific instructions on how to complete the performance information within the Instrument while assessors (whether government officers or peers) were given additional assistance to help with scoring agencies against the standards in the form of the assessor guidelines.

Agencies were asked to give themselves a rating against each standard and to write this rating on their copy of the Instrument. The assessor for the agency was asked to mark his or her ratings on a separate Ratings Summary Form. Figures 3.1, 3.2 and 3.3 graphically show these ratings for the total sample of Instruments and Ratings Summary Forms received. Figure 3.1 shows the proportion of agencies that believed that their agency met each standard and the proportion of agencies that assessors believed met each standard. Figure 3.2 shows the proportion of agencies that believed that their agency partly met each standard and the proportion of agencies that assessors believed partly met each standard, and Figure 3.3 shows proportions from both these sources giving a 'not met' rating.

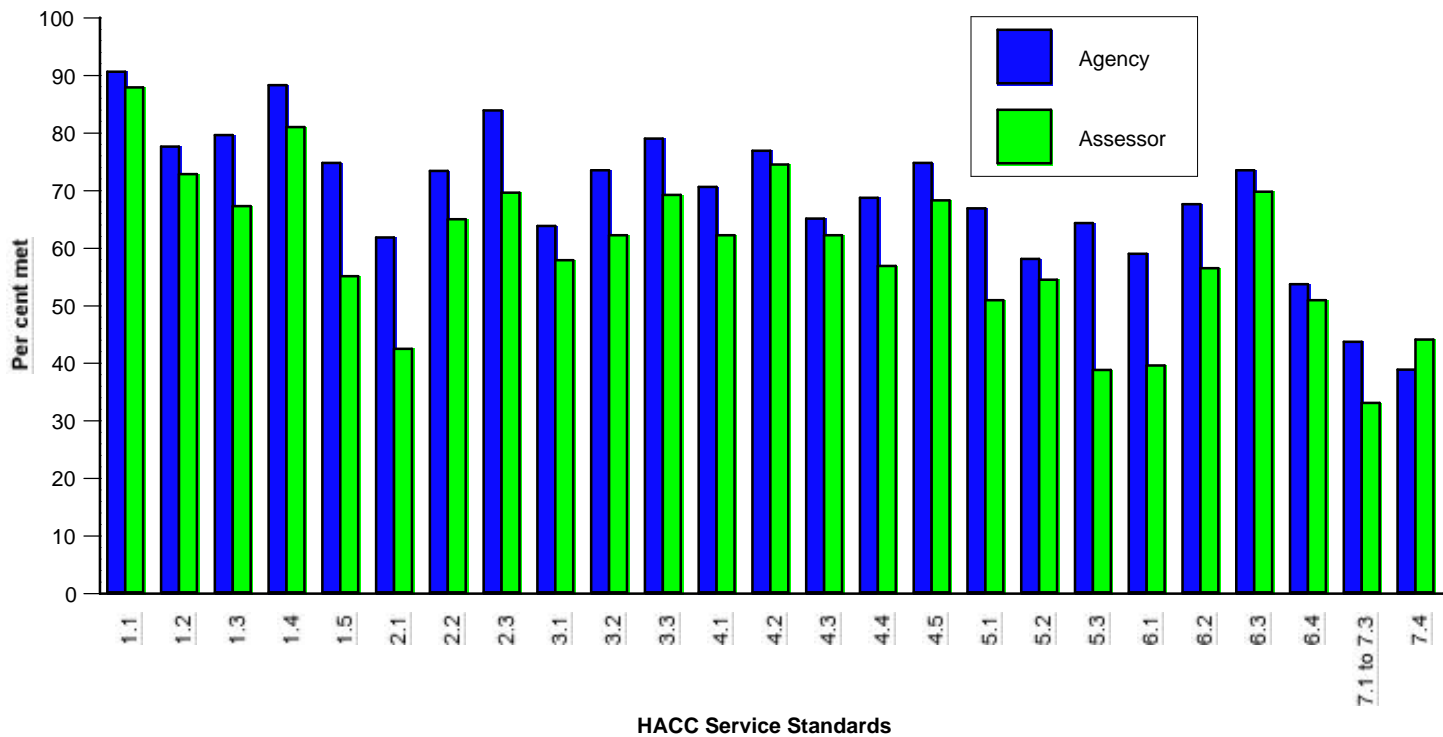


Figure 3.1: Percentage of agencies given a 'met' rating by the agency representative and by assessing person

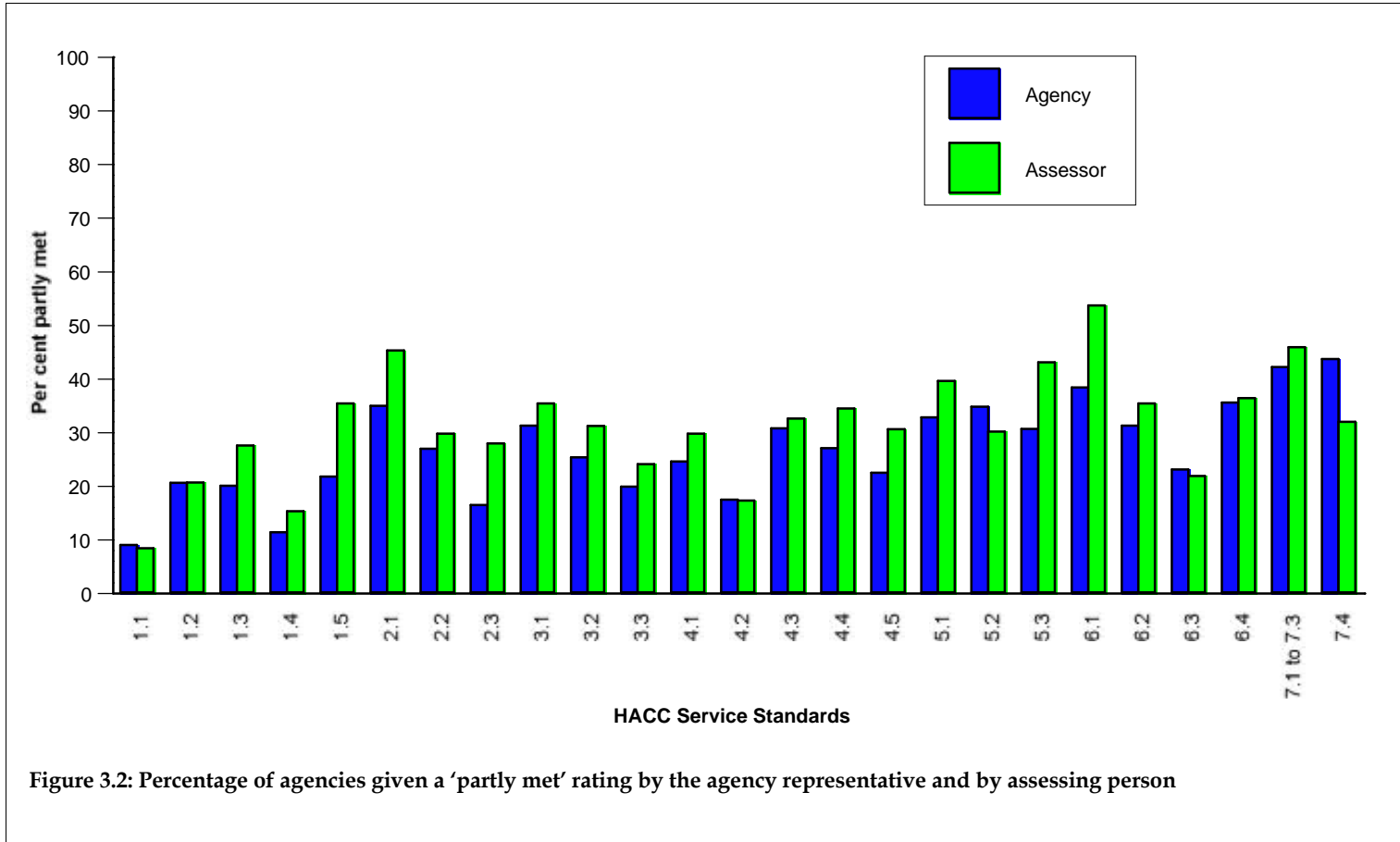


Figure 3.2: Percentage of agencies given a 'partly met' rating by the agency representative and by assessing person

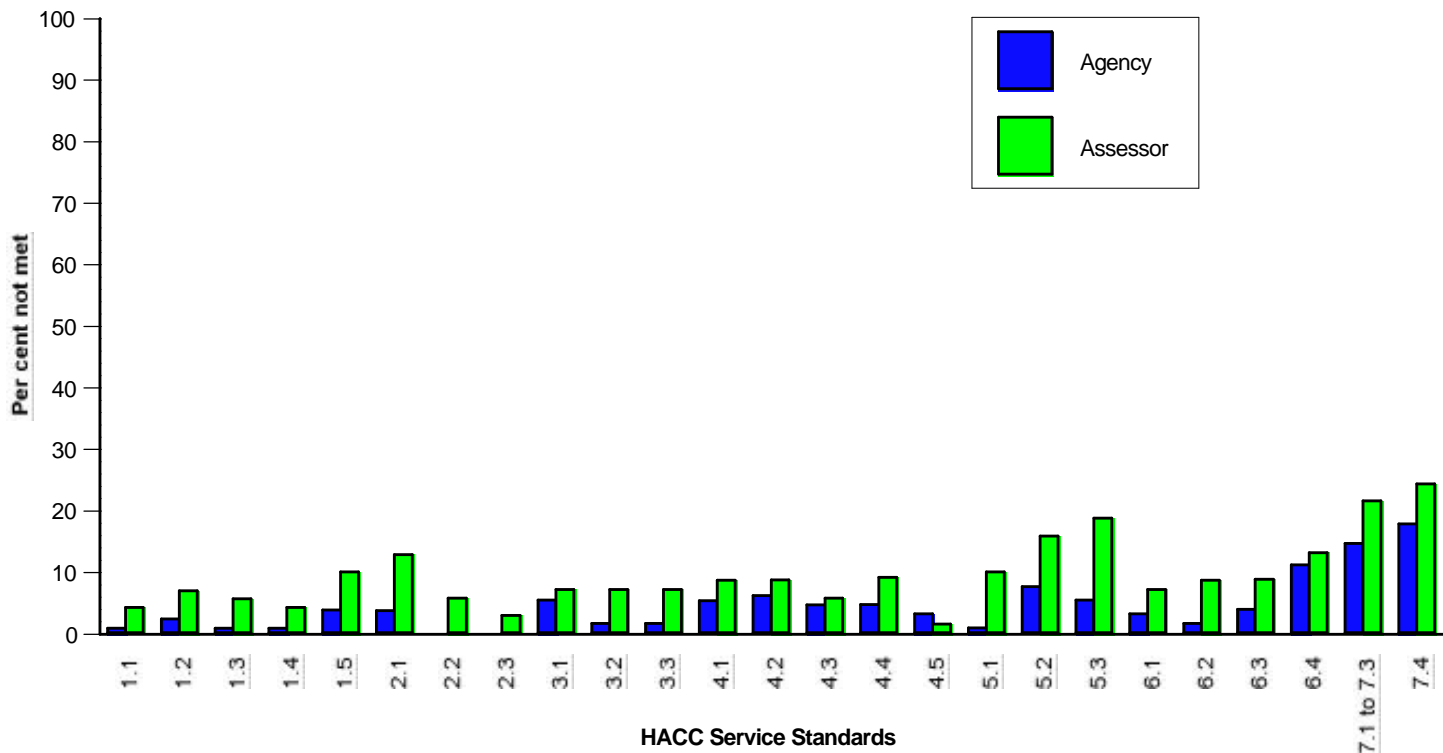


Figure 3.3: Percentage of agencies given a 'not met' rating by the agency representative and by assessing person

3.1.1 Standards against which agencies did not perform well

The lowest proportions of 'met' ratings occurred for the standards listed under Objective 7 (Advocacy). Eighteen per cent of agencies believed that they did not meet the standard regarding the involvement of advocates (7.4), and 15% believed they did not meet the standards regarding consumer information (7.3), consumer knowledge of rights (7.2), and consumer access to an advocate (7.1).

According to assessor ratings, a quarter (24%) of agencies did not meet the standard regarding the involvement of advocates and 21% did not meet the standards regarding consumer information, consumer knowledge of rights, and consumer access to an advocate.

According to agency responses on the Instrument, the reasons for the low rate of 'met' ratings included the lack of policy and standard procedure regarding advocacy, a lack of information available to consumers and a lack of staff training. Rural and remote agencies reported having limited access to formal advocacy services and limited access to information about advocacy. Formal advocacy services specifically for older people were reported to be unavailable in some areas. Service type was also raised as a factor. For a number of agencies providing transport, giving this information to all consumers in the same way as other HACC agencies was considered too costly.

The next lowest proportions of 'met' ratings, according to both assessors and agencies, occurred under Objective 6 (Complaints and Disputes). According to assessor ratings, the lowest proportion of 'met' ratings was recorded for Standard 6.1 (Consumers are aware of the complaints process). Only 39% of agencies were given a 'met' rating for this standard. The most common reason for agencies failing to obtain a 'met' rating was that the explanation to consumers of the complaints process was often only verbal and not written. The guidelines for assessors specified that both should occur to warrant a 'met' rating. Other reasons for agencies not meeting this standard were that they failed to provide reminders, failed to provide brochures in languages other than English, or were unable to provide an adequate policy or description of procedure on the matter.

According to agency ratings, the next lowest proportion of 'met' ratings was recorded for Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of a conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer). (See Section 3.6 for further discussion.) Only 54% of agencies gave themselves a 'met' rating for this standard. Many agencies expressed the belief that it was not their role to become involved in such conflict resolution. Eleven per cent of agencies believed they had not met the standard. Agencies which believed they had partly met the standard indicated that they would attempt some level of resolution followed by referral if there was no successful resolution. These procedures were often not formalised in policy or described and passed on to staff as standard practice in any way. As such, agencies would not agree that the standard was 'not met' but neither would they propose that they had fully addressed the issue.

Apart from the objectives grouped under Objectives 6 and 7, there were three further individual standards against which agencies did not perform particularly well. These were Standard 5.3 (Consumers are able to gain access to their personal information),

Standard 2.1 (Consumers are aware of their rights and responsibilities), and Standard 5.2 (Consumers have signed confidentiality release forms). Nineteen per cent of agencies were scored as 'not met' against Standard 5.3. The most common failure reported by agencies was that no formal advice was given to consumers regarding access to personal information or agency responsibilities. Agencies also reported a lack of appropriate policies, failure to inform consumers of what was kept, or failure to have a policy regarding who was appropriate to access it.

For Standard 2.1 (Consumers are aware of their rights and responsibilities), assessors rated 13% of agencies as 'not met'. This relatively high proportion was due to many agencies failing to make provision for people from non-English-speaking backgrounds to understand their rights and responsibilities. The guidelines to assessors required that this factor be satisfied in order to avoid a 'not met' rating.

The pilot test of the Instrument revealed some more general difficulties with appropriately measuring agency performance in relation to special needs groups, and particularly people from a non-English-speaking background. (See Section 2.6 for further discussion and some suggestions for overcoming the apparent undue influence of an agency's failure to meet Standard 2.1 on their scores for other standards.)

Greater clarity about the HACC program's policy on gaining consumers' permission to release personal information would assist with redrafting the guidelines for Standard 5.2 (Consumers have signed confidentiality release forms). Standard 5.2 had a relatively high level of 'not met' ratings given to agencies by assessors (16%). These ratings were largely the result of agencies not obtaining written approval from consumers for the release of information. The guidelines were not sufficiently clear on what would constitute a 'not met' rating against this standard. Hence, some assessors gave agencies that did not obtain written approval a 'partly met'. Clarification of the extent to which a consent form signed by the consumer at one point in time (say, at referral as recorded on the CIARR, or Client Information, Assessment and Referral Record) is sufficient to cover all instances of subsequent information sharing is required.

3.1.2 Standards against which the agencies performed well

The highest proportion of 'met' ratings given by assessors occurred for Standards 1.1 (88%), 1.4 (81%), 4.2 (74%) and 6.3 (70%). The reasons for agencies being given a 'met' rating by assessors were not documented on the Ratings Summary Forms. By viewing agency responses and following the guidelines, it is reasonable, however, to conjecture why this might be so. In some cases, the absence of clear definitions for key elements of standards may have resulted in very high scores. For example, without a definition of what constitutes an 'assessment' or a 'care plan', agencies may have been able to confidently report very high compliance with such standards. The requirements of Standards 1.1 and 4.2 are such that it is relatively easy for agencies to provide tangible evidence.

Standard 1.1 (Assessment occurs for each consumer) requires that agencies calculate the proportion of consumers formally assessed and account for those not assessed. However, no information was given on what constitutes a 'formal' assessment or, in

fact, which type of assessment is the subject of the standard – for example, it may refer to assessment for service eligibility or assessment to determine functional dependency or to service specific assessments of need. This performance information was frequently satisfied with responses of, or close to 100%. However, the more difficult questions regarding the agency’s assessment method followed under Standard 1.2 (Consumers are allocated available resources according to prioritised need). This second standard received a higher proportion of ‘partly met’ ratings (21%) and a lower proportion of ‘met’ ratings (73%) according to assessors.

Similarly, Standard 4.2 (Each consumer has a service delivery/care plan that is tailored to individual need and outlines the service he or she can expect to receive) requires that agencies indicate the proportion of consumers with a service delivery/care plan. Again, for most agencies the response was simply 100%. This standard also required detail of how staff and clients were informed of this plan, which may have accounted for the somewhat lower proportions of ‘met’ ratings than Standard 1.1 (74% compared with 88%).

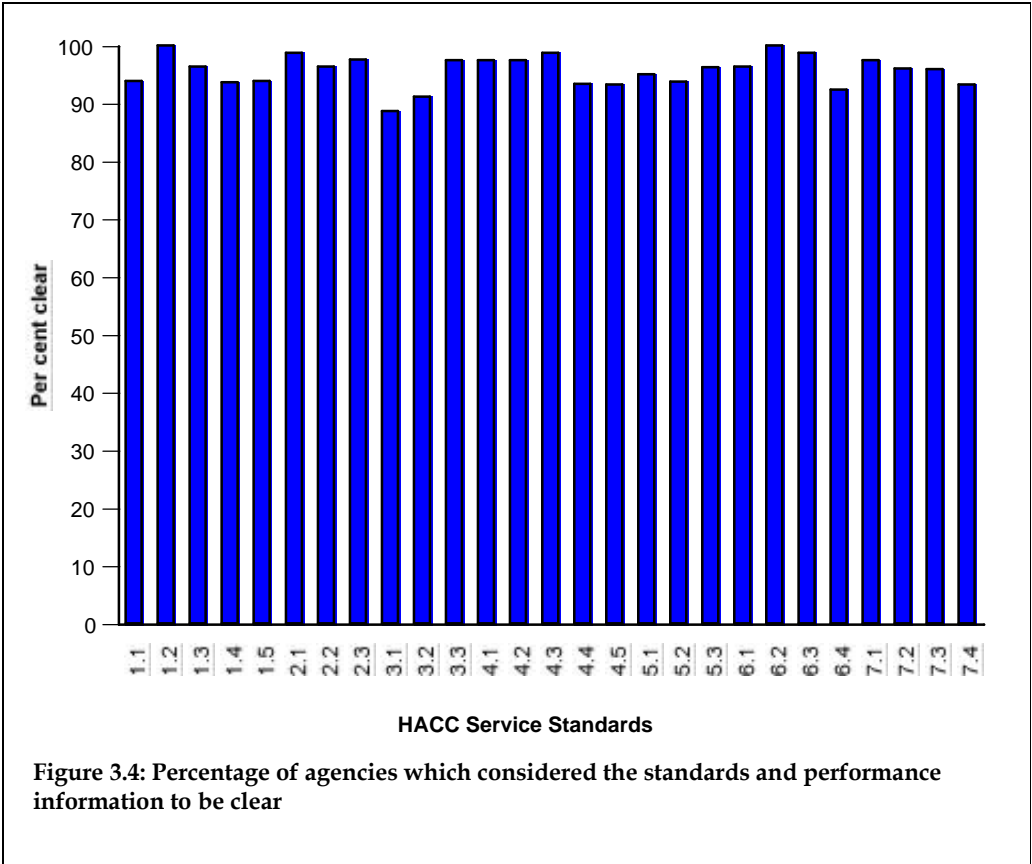
Standard 6.3 (Services are modified as a result of ‘upheld’ complaints) required agencies to document an instance in which this occurred. This standard may have been difficult to assess accurately without directly consulting consumers. The assessor would have been entirely dependent on the agency’s description of successful examples of upholding complaints. The Instrument alone would provide no evidence of complaints that were unfairly not upheld.

Standard 1.4 (Consumers in receipt of other services are not discriminated against in receiving additional services) required the agency to describe how it ensured that this did not happen. Agency responses to this question generally fell into two categories: (1) the types of services provided by other agencies were not of relevance to the service they provided and were therefore not taken into account; or (2) they were able to communicate with other agencies to provide a coordinated service based on assessed client need. In both cases, it could reasonably be claimed that unfair discrimination was not occurring. Again, this may have been another standard where it was difficult for assessors to determine if agencies were discriminating unfairly without asking consumers and assessing individual cases.

3.2 Face and content validity

3.2.1 Clarity of the Instrument

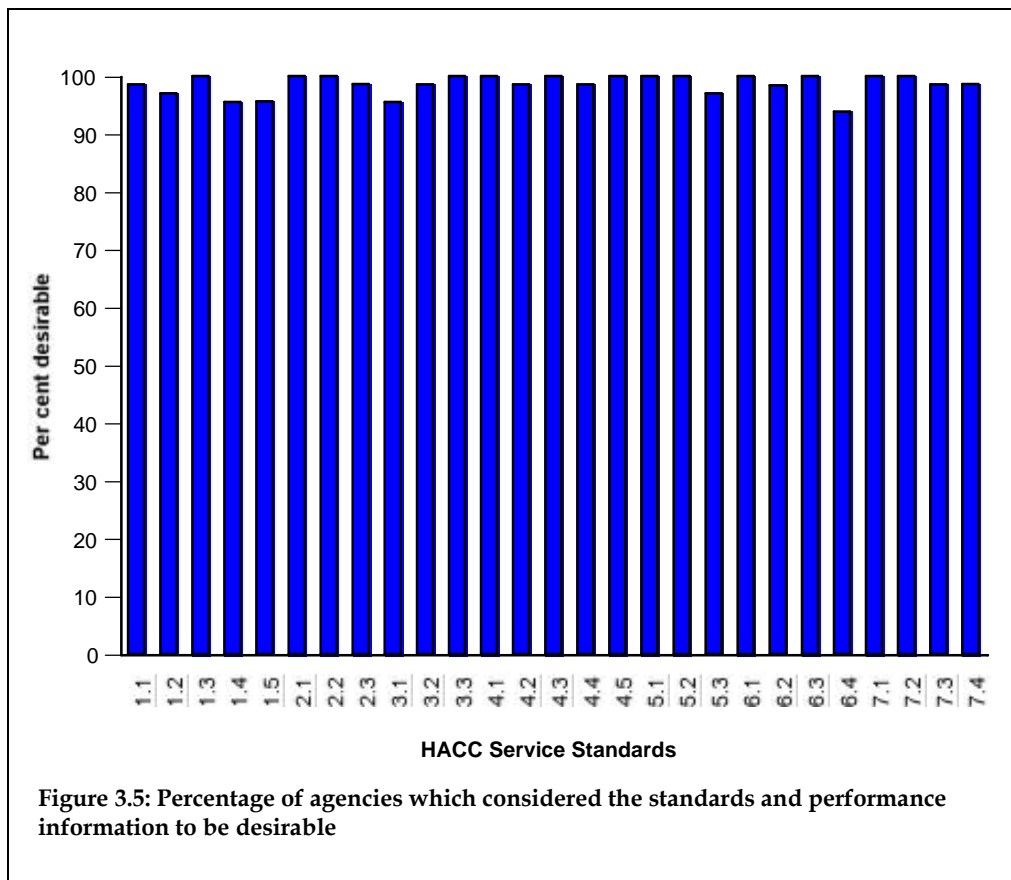
Service provider feedback on the clarity of the Instrument was gained through the Service Provider Survey. Service providers were asked, ‘Are there any standards or performance information items that were unclear?’. Figure 3.4 indicates that the majority of agencies believed the standards and their performance information as described in the Instrument to be clear. Averaging over the 27 standards, 95% of service providers agreed they were clear.



For 17 standards at least 95% of service providers agreed that standards were clear. A further nine standards were considered clear by between 90% and 95% of service providers. Standards considered least clear were those concerning efficient and effective management. Standard 3.1 (Consumers receive appropriate services provided through the processes of ongoing planning, monitoring, and evaluation of services) was considered unclear by 11% of service providers. Standard 3.2 (Consumers receive services from agencies that adhere to accountable management practices) was considered unclear by 9% of service providers. Standard 3.1 in particular requires of agencies a relatively high level of organisational acumen and resources, including planning, monitoring and evaluation of services in response to community needs at a higher level. Such planning and service development is difficult to achieve among agencies with limited resources and those still struggling to establish service delivery. Three agencies in rural or remote settings were unclear on how to address this standard. As one remote area assessor put it: 'Often if one can get a service going in an area it is a remarkable achievement'.

3.2.2 Desirability of the Instrument

The Service Provider Survey asked ‘Are there any standards or performance information items that were undesirable?’. Figure 3.5 indicates that the majority of agencies believed the standards and their performance information as described in the Instrument to be desirable. Averaging over the 27 standards, 99% of service providers agreed they were desirable.



Thirteen standards were considered to be desirable by all service providers surveyed. A further eight standards were considered undesirable by only one service provider.

The standard least likely to be considered desirable was Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of a conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer). Six per cent of service providers found this standard to be undesirable. These agencies included a home nursing service, a respite service, a home visiting and dementia support service, and a multi-service agency offering home visiting, transport, shopping, home maintenance and cleaning.

Standards 1.4 (Consumers in receipt of other services are not discriminated against in receiving additional services), 1.5 (Consumers who reapply for services are assessed with needs being prioritised) and 3.1 (Consumers receive appropriate services provided through the processes of ongoing planning, monitoring and evaluation of services) were considered undesirable by three service providers. Standard 1.4 was believed to be undesirable because of the need to discriminate against consumers already receiving a service, particularly when the service is scarce and required by others of greater need. Standard 1.5 was seen as undesirable by agencies for whom it was not appropriate to take into account previous refusals when prioritising need. It was also not considered to be a desirable standard for an agency that never refused service to consumers. Standard 3.1 was not seen as desirable by service providers who believed that it was beyond their charter and capabilities to undertake monitoring of community need. The lack of need to refuse service was also cited as a reason for regarding Standard 1.2 as undesirable. A respite agency and a transport service believed that prioritising consumer need was unnecessarily time- and resource-consuming when all requests could be adequately met.

3.2.3 Practicality of the Instrument

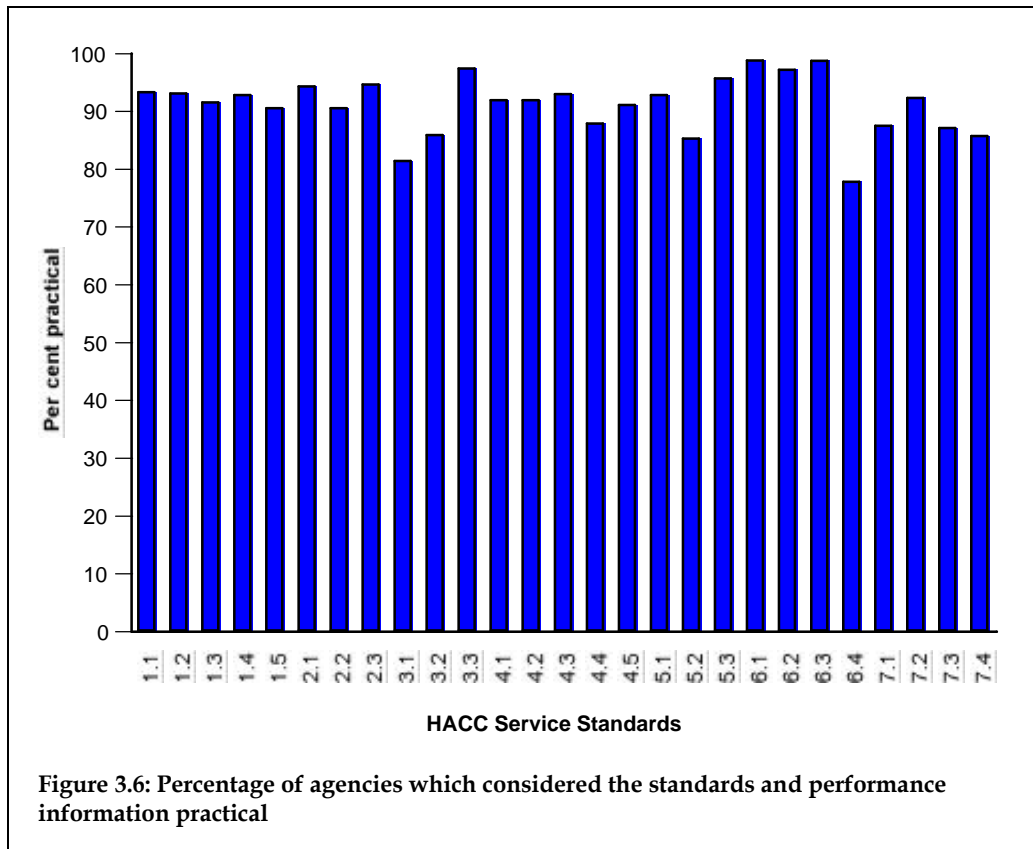
If there was any area in which the standards were seen to be relatively lacking it was in the area of practicality. The Service Provider Survey asked, 'Are there any standards or performance information items that were impractical?'. On average, 91% of service providers agreed that the standards were practical. Figure 3.6 illustrates service providers' beliefs about the practicality of standards and performance information as described in the Instrument.

Only five standards were rated as practical by at least 95% of service providers, with a further 20 being rated as practical by between 85% and 95%. The standards rated as practical by less than 85% of service providers were Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of a conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer) and Standard 3.1 (Consumers receive appropriate services provided through the processes of ongoing planning, monitoring, and evaluation of services).

Twenty-two per cent of service providers surveyed believed Standard 6.4 was impractical. Most commonly this was because agencies saw their role as meeting a specific defined need of consumers, not as determining the appropriate balance of resolved needs between carers and care recipients. To undertake such a role was perceived to be more in the line of case management or advocacy. Nineteen per cent of service providers believed that Standard 3.1 was not practical. Agencies operating out of larger organisations stated that it was difficult to separate planning for one team service from that of an entire organisation, particularly when routine planning occurred at the broader level. It was also considered impractical in so far as agencies felt there was insufficient funding to spend time doing the kind of analysis requested by this standard.

The objective that was most frequently criticised as being impractical was Objective 7 (Advocacy). On average, the standards under Objective 7 were considered to be impractical by 12% of agencies. The difficulties in the practicality of these standards was largely due to the lack of available advocacy services in the agency's area and the tendency for consumers to ask the agency to act as an advocate whether or not it was a

formally recognised function of the agency. Service providers argued that it made more sense to rely on advocacy services to supply the agency with information about their own services, although this was not always forthcoming. It was also considered impractical to supply consumers with information about advocacy at first contact since so many other pieces of information were being exchanged at this time. Some agencies considered it more practical to give this information to consumers as the need arose.



3.2.4 Appropriateness of the Instrument

The Service Provider Survey asked ‘Are there any standards or performance information items that were inappropriate?’. The appropriateness of the standards and their performance information was primarily determined by the type of service provided by the agency completing the Instrument. Other agency characteristics which affected the perceived appropriateness of the Instrument included the type of clients accessing the service, the geographic location of the agency, the structure and maturity of the organisation, the economic and social environment surrounding the agency and the available service provider networks.

Figure 3.7 shows that the majority of agencies considered the standards appropriate; averaging over standards, 94% of agencies believed the standards to be appropriate.

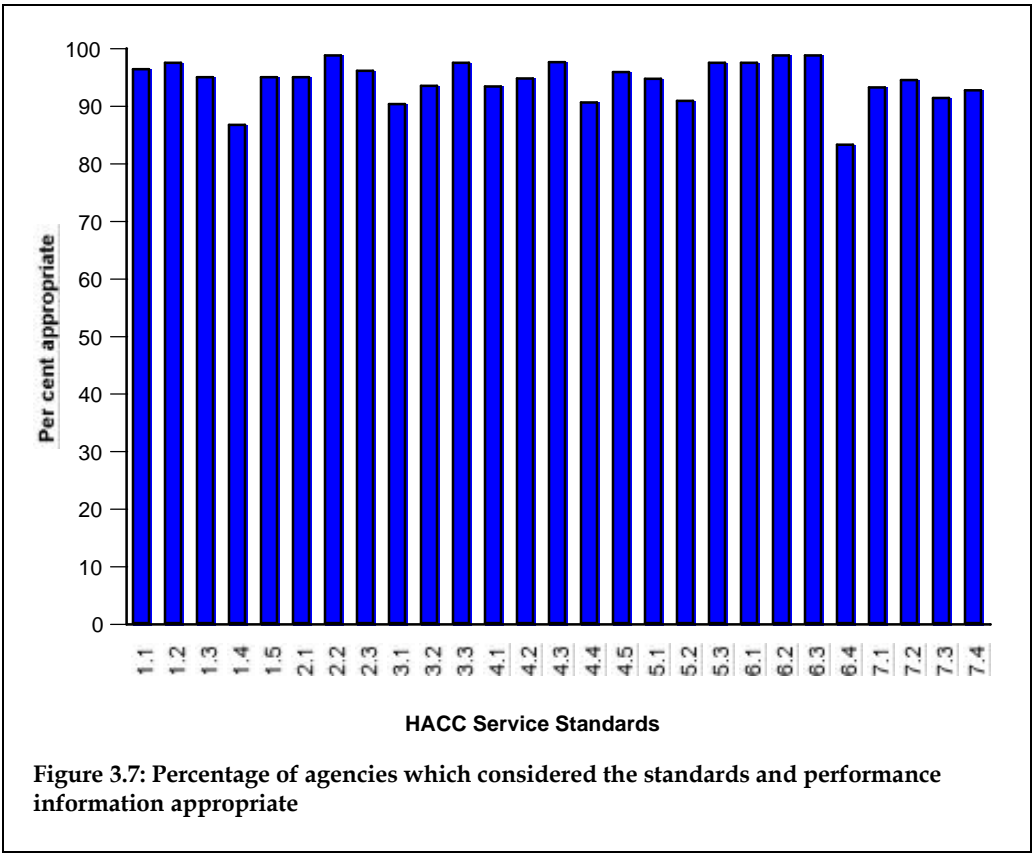
For 25 standards at least, 90% of agencies regarded them to be appropriate. Two standards were considered appropriate by less than 90% of service providers.

Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of a conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer) was considered appropriate by only 83% of service providers. These service providers generally considered that it was not their role to become involved in such disputes. Standard 1.4 (Consumers in receipt of other services are not discriminated against in receiving additional services) was not considered appropriate by 14% of service providers because the issue of discrimination was considered irrelevant. Agencies either did not think it relevant to take into account any other services provided when determining their own service provision or, alternatively, services were provided according to a case coordination model in which discrimination was appropriate.

Two other standards considered inappropriate across a range of service types and circumstances were Standard 3.1 and Standard 5.2. The performance information requested under Standard 3.1 (Consumers receive appropriate services provided through the processes of ongoing planning, monitoring and evaluation of services) was not considered appropriate to 10% of agencies. A question under this standard sought information about how the agency monitored community need for services. Some agencies believed that it was difficult for individual service providers to accurately assess community need, particularly unmet need. In addition, some agencies believed they were unable to alter service delivery in response to such assessments because of their particular funding agreements. Nine per cent of service providers believed Standard 5.2 (Consumers have signed confidentiality release forms) was inappropriate. This requirement was not seen to be appropriate for some agencies, particularly those providing services where little or no information about clients is recorded. Other objections to the performance information required were that consumers would find such forms difficult to follow. Some service providers believed that it was not always possible to know to whom information would need to be released.

On average, 7% of agencies did not believe that the standards under Objective 7 (Advocacy) were appropriate to them. Some services did not believe it was their role to advise clients of the range of advocacy services available to them. They argued it was inappropriate to do this because clients should obtain their advocates from outside the organisation. It was also felt that to overemphasise a consumer's need for an advocate may implicitly disempower the client.

The following discussion examines the particular types of agencies for whom the appropriateness of standards and performance information was problematic. It identifies agencies for whom either exemption or more specific interpretation of the Instrument may be required. The effect of type of assessment on the perceived appropriateness of the Instrument is also discussed.



Types of service

Community nursing, allied health

Of the agencies responding to the Service Provider Survey, the agencies which most frequently found that standards were inappropriate were those providing community nursing or allied health services: 56% of these agencies found at least one standard inappropriate. The standard of most frequent concern for this agency type was 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed). Agencies that reported this standard as inappropriate argued that consumers were not differentiated according to the presence or absence of dementia or related disorders, and that clients suffering such conditions were treated as any other client with their care modified accordingly. One agency argued that the standard was not specific enough for a nursing service since it did not take into account the physical aspects of their care or issues concerning safety within the environment.

For many community nursing agencies, services to clients were provided for a defined period based on the assessment and referral of another body such as a hospital or general practitioner. This episodic nature of service provision meant that Standard 4.1 (Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account) was considered not applicable. Similarly, Standard 1.5 (Consumers who reapply for services are assessed with needs being prioritised) was

not considered appropriate by these agencies since clients, managed by another agency, came to them through referrals for a defined period. Moreover, because care was provided to address a current problem and not an ongoing one, Standard 2.3 (Consumers are informed of the basis of service provision, including changes that may occur) was not seen to be appropriate from the perspective that the service was not altered within the episode of care.

Transport

Standards considered particularly inappropriate for transport agencies included 1.2, 1.5 and 4.2. Regarding Standard 1.2, agencies argued that where all consumer need could be met it was inappropriate, unnecessarily intrusive and time consuming to assess and prioritise consumer need. Regarding Standard 1.5, an agency providing occasional one-off services to a pool of previously assessed consumers did not believe it appropriate to reassess each time these consumers called for assistance. In relation to Standard 4.2, the nature of transport services frequently meant that care plans were not appropriate.

Meals

Agencies that provide meals did not feel it was appropriate for them to take into account the other services received by a consumer (Standard 1.4: Consumers in receipt of other services are not discriminated against in receiving additional services). Given the role of these agencies in the service provider network, meals agencies did not feel it was appropriate for them to ensure that their clients were representative of the ethnic groups within the community by constructing and monitoring community profiles and client profiles (Standard 1.3: Access to services by consumers with special needs is decided on a non-discriminatory basis). Similar views were expressed with regard to Standard 3.2 (Consumers receive services from agencies that adhere to accountable management practices). Due to the limited record holdings of this type of agency, it was considered inappropriate to enter into explanations with clients about privacy, confidentiality and client rights in relation to these (Standard 5.1: Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures). They did not consider that a referral role was appropriate, other than accepting those sent to them (Standard 4.5: Consumers receive services which include appropriate coordination and referral processes). Care plans or service delivery plans were not always considered appropriate (Standard 4.2: Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive). Prioritising need was not seen as appropriate, as it was considered more efficient to service all who meet HACC program eligibility criteria without intrusive and time-consuming assessment processes (Standard 1.2: Consumers are allocated available resources according to prioritised need).

Home maintenance and modification

Home maintenance and modification agencies had difficulty with the appropriateness of the Instrument because the services provided by them tended to be more of the nature of 'one-off' services or 'on demand' services. They also felt that the seasonal nature of their work was less well addressed by the Instrument. Standards that were not always considered appropriate for home maintenance and modification consumers were 1.1 and 4.1, since formal assessment and reassessment were not generally appropriate activities for home maintenance/modification staff. Similarly,

regarding Standard 4.2, clients did not receive a care plan, but rather a document stating what modification or maintenance was performed. For 'one-off' jobs these agencies did not generally distribute or explain all of the HACC consumer rights and responsibilities as they did not feel this was appropriate given the nature of the service (Standard 2.1). Standards 4.3 and 4.4 refer to the special needs of consumers with regard to dementia and memory loss and with regard to cultural needs. Home maintenance and modification agencies argued that the nature of their services was such that it was not appropriate to provide services to these groups any differently than to other consumers.

Services for specific types of client

Services for young people with a disability

Standard 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed) was not considered appropriate to services for younger people with a disability, especially by those services caring for clients who are mainly children. As such, dementia was not seen as an issue for these services, although behavioural difficulties may be.

Agencies also argued that the disability or illiteracy of some consumers may mean that it is not appropriate to supply them with brochures on rights and responsibilities. This characteristic of clients was relevant to Standard 5.1 (Consumers are informed of the privacy and confidentiality procedures and understand their rights and responsibilities in relation to these procedures). Six per cent of agencies did not believe that this standard was appropriate. Similarly, for Standard 2.3 (Consumers are informed of the basis of service provision, including changes that may occur) 6% of agencies believed the standard to be inappropriate, arguing that consumers may not always understand the basis of the decision, despite repeated explanations.

Dementia-specific services

Informing clients with dementia of the issues covered in Standards 2.1, 2.2, 2.3, 5.1, 6.1, 7.2 and 7.3 was considered to be not always practical. In some cases, clients were considered unable to understand the information being given to them. In others, agencies believed that clients may be feeling overloaded with information, or they may be stressed or else too ill to deal with interpreting the information.

Providing information to and requiring signatures from clients affected by dementia was not seen as appropriate (Standards 4.5, 5.2 and 5.3). From the total sample of agencies surveyed, 7% of service providers believed it was inappropriate to ask their clients to be involved in service management (Standard 3.2: Consumers receive services from agencies that adhere to accountable management practices). This was largely because they believed they were either 'not interested' or 'don't understand'. Services caring for those with dementia were represented in this group.

Standard 4.4 was not considered detailed enough by allied health and nursing agencies to address the issues of dementia as it affected their service provision (see discussion on previous page).

Services for people from a non-English-speaking background

Standard 1.3 concerning access to services by people of non-English-speaking backgrounds was not considered to provide a relevant measure of quality for services specifically targeted to these groups. It was felt that a more appropriate measure was required to indicate how agencies facilitate access for these groups.

A number of agencies working in communities with few people or none from a non-English-speaking background argued that it was not appropriate to be penalised for failing to provide information for potential members of these groups (Standards 2.1, 2.2, and 6.1). It was also argued that written material was sometimes not appropriate as older people from a non-English-speaking background may not be literate in their first language.

Services for Aboriginal and Torres Strait Islander peoples

Agencies that provide services to consumers who are of Aboriginal and Torres Strait Islander descent can face particular challenges in meeting service delivery standards. The transitory nature of service use among these consumers in some regions, high dependency, and levels of illiteracy are among some of the characteristics that require a different approach to assessment against the standards. The demand for 'one-off' and emergency services operated against agency ability to regularly conduct assessments (Standard 1.1) and keep care plans (Standard 4.2). Illiteracy among clients meant that Standard 5.2 regarding signed confidentiality release forms was not meaningful, and the right to access information (Standard 5.3) was not often seen as an issue for these consumers.

While many Aboriginal and Torres Strait Islander-specific services are appropriately assessed using the current Instrument, it is recommended that an Instrument be developed which specifically addresses the characteristics of this group, particularly in more remote regions where Indigenous culture more strongly affects service provision. The use of resources such as the *Optional Standards of Care for Frail Aged Aboriginal People* (Harrison 1995) may assist in this endeavour.

The challenges faced by services to Aboriginal and Torres Strait Islanders are often compounded by those faced by agencies in remote locations. These difficulties are discussed below.

Rural and remote agencies

In very remote regions the Instrument was found to be of limited applicability. In these areas the more basic requirement was simply to keep services operating. Many of these services run under adverse conditions and time spent in administrative quality assurance tasks, which were considered to be of limited assistance to service delivery, were not considered useful. In these locations the decision to apply the Instrument may be based, in part, on the level of funding to the agency and its ability to invest time in quality assurance issues.

The isolation of clients, the remoteness from other services, the lack of availability of staff, limited sources of funding and adverse weather conditions are seen as some of the factors which affect the ability of these agencies to meet many of the standards. The ability of services to attract adequately skilled staff is limited in remote and rural locations, presenting difficulties for agencies to meet Standard 3.3. Similarly, the

continuing training and education of staff is limited by the agency's resources and access to trainers and appropriate training programs. The lack of staff resources to spend time on administrative tasks also affects these agencies' ability to meet Standard 3.1.

In small communities in remote and rural locations the processes by which information is distributed are different to those in metropolitan areas. Community knowledge of people and services assists with such standards as 2.2 (regarding information about services), 2.3 (regarding information about the basis of service provision and changes that may occur) and 3.3 (regarding the screening of staff and volunteers). Access to formal advocates may not be possible or desired by consumers of remote services, but friends, family and council members were more likely to undertake this role.

Standard 3.2 and its performance information presented additional difficulties for remote agencies. The performance information under this standard requested agencies to show how consumers are involved in service management. The remote environment, distance and the disabilities of clients were argued to act against active consumer involvement in service management. The isolation of clients was also considered to affect the agency's ability to conduct regular reassessments (Standard 4.1).

Type of assessment

The type of assessment also had an effect on the likelihood of agencies indicating that certain standards were not appropriate to them. Of the agencies that had undertaken a joint assessment, 100% indicated that every standard was appropriate to them. Of the agencies that had undertaken a self-assessment, 71% indicated that all of the standards were appropriate. Fifty-eight per cent of agencies who had undertaken a self-assessment with verification indicated that all of the standards were appropriate. Agencies that were assessed by peer review were most likely to indicate that not all the standards were appropriate to them. Only 47% of peer-reviewed agencies indicated that all of the standards were appropriate to their agency.

These results do not indicate a clear relationship between the characteristics of the assessment methods and the degree of perceived appropriateness of the standards. It can be concluded however, that the most collaborative method of assessment, joint assessment, results in the greatest acceptance of the standards by agencies as appropriate to their service.

3.3 Internal consistency

3.3.1 The interrelationship of standards and objectives

This section addresses the issue of whether the standards provide satisfactory information against the seven objectives and whether the seven objectives are sufficiently related to one another to justify adding scores across them. A range of possible uses for Instrument Scores, as well as appropriate methods for calculating scores to answer particular questions potentially of interest to different stakeholders in the appraisal process, are presented.

The first approach to the issue of whether the standards provide a valid and reliable indication of performance against their objectives, sufficient to justify their inclusion in a scale of measurement, is to ask agencies and assessors to comment on them. This was the subject matter of Section 3.2 in which service providers' opinions of the clarity, desirability, practicality and appropriateness of the standards were discussed.

A second approach is to analyse the reliability of the standards in terms of whether different raters interpret the standards in the same way. If different raters interpret standards and performance information differently, then it is impossible to be sure that standards are adequately providing information about their objective. This approach is covered under Section 3.5 (Rater reliability).

A third approach, to examine the interrelationships among standards within objectives and the interrelationships across objectives, is the subject matter of this section.

If all of the objectives are related to one another, such that an agency that performs well on one objective will tend to perform well on the others, then there is a case for adding scores.¹ In this case, all of the objectives combined produce a coherent measure of quality of service in HACCC agencies. However, if there were a one-to-one correspondence between performance on one objective and performance on another, then it would be necessary to measure only one objective; hence, adding scores across objectives would be meaningless. If agency performance on one objective is consistently unrelated to agency performance on others, then it may be more informative and fairer to report performance against this objective separately. For example, if agency performance on the Complaints and Disputes Objective is consistently unrelated to performance on all other objectives then it would be beneficial to report this objective separately.

Before objectives can be added together, it must be established that standards within objectives can be added together. To do this, each standard under the objective should be related to other standards within the objective, in such a way that it both informs and confirms our knowledge of the objective. Standards that represent a particular objective should have something in common with each other and have less in common with other standards representing other objectives. The following discussion examines the relationship between standards within objectives and, in the light of comments by agencies and assessors, addresses the question of whether each standard provides a satisfactory measure against its objective. The ratings of assessors are the data used for the quantitative analysis performed here, since these individuals were given guidelines and training to support the reliability and validity of assessment.

Objective 1: Access to services

To summarise comments by agencies and assessors on this objective: all of the standards under Objective 1 were considered clear by at least 94% of agencies and close to 100% considered these standards desirable.

1. Standards are rated in the following way: 0 (*not met*), 1 (*partly met*), 2 (*met*). Hence qualitative ratings are translated to numerical scores that can be added across standards.

Concerns were raised about the appropriateness of Standard 1.4 (Consumers in receipt of other services are not discriminated against in receiving additional services), with 14% of service providers not considering it to be appropriate. The focus of this standard appears contradictory to the current aim of HACCC to provide coordinated services with other agencies, that is, to provide services in a manner that discriminates appropriately according to need. The content of this standard was also mainly covered by Standards 1.2 and 1.5 ($r = 0.54$ and 0.52 respectively, see table 3.1). However, these correlations were not large enough to consider that Standard 1.4 provided no new information regarding service quality. Definitional improvement of the performance information under this standard may improve its contribution to the measurement of this objective.

Table 3.1: Correlation coefficients for standards under Objective 1

	1.1	1.2	1.3	1.4
1.2	0.58			
1.3	0.32	0.52		
1.4	0.30	0.54	0.48	
1.5	0.33	0.41	0.44	0.52

Standard 1.5 (Consumers who reapply for services are assessed with needs being prioritised) was seen as impractical by 10% of agencies and unclear by 6% of agencies. These agencies requested clearer guidelines on what was required of them. These were agencies for whom full assessments were conducted by another agency, for whom services were provided in single occasions of need, or for whom consumer eligibility is not likely to change (such as belonging or not belonging to the category of young person with a disability). An analysis of the correlations among the standards relating to Objective 1 show no evidence, however, that the issues associated with Standard 1.5 caused it to operate differently to the other standards or to bring up issues unrelated to the other standards.

Table 3.2: Rotated factor loadings for the HACC National Service Standards as measured by the Instrument

Standard	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5	Factor 6
1.1	-0.03	0.04	0.46	0.37	0.71	0.00
1.2	0.45	0.30	0.29	0.10	0.47	-0.03
1.3	0.47	0.48	0.24	0.03	0.19	0.35
1.4	0.66	0.29	0.21	-0.03	0.15	0.23
1.5	0.48	0.18	0.40	0.21	0.22	0.21
2.1	0.36	0.14	0.25	0.55	0.10	0.44
2.2	0.19	0.83	0.16	0.28	0.11	-0.04
2.3	0.33	0.30	0.09	0.08	0.64	0.22
3.1	0.24	0.41	0.53	-0.08	0.04	0.29
3.2	0.14	0.64	0.37	-0.08	0.12	0.30
3.3	0.14	0.07	0.57	0.13	0.52	0.22
4.1	0.23	0.07	0.72	0.13	0.10	0.15
4.2	0.25	0.17	0.06	-0.03	0.70	0.26
4.3	0.22	0.86	0.16	0.06	0.09	0.13
4.4	0.21	0.64	-0.19	0.23	0.33	0.09
4.5	0.26	0.23	0.67	0.16	0.18	-0.02
5.1	0.49	0.14	0.02	0.62	0.21	0.27
5.2	-0.07	0.02	0.45	0.73	0.16	0.00
5.3	0.22	0.19	-0.03	0.76	0.01	0.08
6.1	0.58	0.34	0.28	0.34	0.02	0.27
6.2	0.79	0.17	0.12	0.19	0.20	0.13
6.3	0.81	0.13	0.15	0.15	0.14	0.05
6.4	0.15	0.45	0.17	0.30	0.32	0.34
7.1, 2, 3	0.16	0.08	0.13	0.31	0.14	0.82
7.4	0.17	0.19	0.10	0.00	0.20	0.82

The correlations among the standards of Objective 1 are all positive and, with the exception of Standard 1.1 (Assessment occurs for each consumer), indicate a high degree of cohesiveness. A factor analysis,² presented in Table 3.2, identified

2. A factor analysis was performed to verify that the associations between standards reflected their objectives. The 25 ratings were factor analysed using principal components factor analysis. A varimax rotation was applied to the factor solution for the purpose of uncovering subsets of standards that were highly related but relatively independent of other subsets.

Standard 1.1 as operating least well as a predictor of this objective. As noted earlier, 88% of agencies received a 'met' rating on this standard. The ease with which agencies could satisfy the requirements of this standard contributed to its failure to operate as a strong predictor of performance against the objective. Standard 1.2 concerns the allocation of agency resources according to the prioritised need of consumers accessing the service. The critical content of Standard 1.1 may be covered by Standard 1.2, with which it is highly correlated ($r = 0.58$).

A number of agencies indicated that Standard 1.3 (Access to services by consumers with special needs is decided on a non-discriminatory basis) was not well measured by the performance information used. Nine per cent of agencies believed this standard, and its performance information, were impractical. The performance information listed under this standard required that agencies compare the profile of their client base with the profile of likely need in the community. The reason this was considered impractical was that it was too time consuming for agencies to get statistics regarding population profiles. Government HACC officers did not always have these statistics available for agencies and agencies believed that they should be assessed against this standard in some other way. A high correlation ($r = 0.73$) was found between Standard 1.3 and 4.3 (Consumers' cultural needs are addressed), indicating that Standard 1.3 did not supply any more information than 4.3 in terms of addressing issues associated with special needs groups. (A table of correlations among all standards can be found in Appendix D.)

Objective 2: Information and consultation

At least 96% of agencies considered the standards under Objective 2 to be clear, and close to 100% considered them to be desirable. The most common complaints were that Standards 2.1 (Consumers are aware of their rights and responsibilities) and 2.2 (Consumers are aware of services available) were impractical from the perspective of overloading consumers with information. Six per cent of service providers argued that Standard 2.1 was impractical and 10% of service providers argued that Standard 2.2 was impractical.

Table 3.3: Correlation coefficients for standards under Objective 2

	2.1	2.2
2.2	0.36	
2.3	0.39	0.46

The correlations between the standards in Objective 2 indicate that the standards are cohesive in measuring information and consultation issues but, among themselves, are not so highly correlated as to be redundant. Standard 2.1 correlates very highly with several other standards ratings. With Standard 5.1 (Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures) the correlation was $r = 0.65$. With Standard 6.1 (Consumers are aware of the complaints process) the correlation was $r = 0.57$, and with Standards 7.1,

7.2, and 7.3 (concerning advocacy), the correlation was $r = 0.57$. These standards also deal with awareness of rights in relation to privacy, confidentiality, complaints and advocacy. The high correlations between these items suggest that they could be more efficiently and just as effectively measured under one performance information request.

Standard 2.2 (Consumers are aware of services available) shows higher correlation with standards from other objectives than any other standard. Its correlation with Standard 1.3 (Access to services by consumers with special needs is decided on a non-discriminatory basis) is $r = 0.62$. With Standard 4.3 (Consumers' cultural needs are addressed) its correlation is as high as $r = 0.82$, and with Standard 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed) its correlation is $r = 0.62$. For these standards, the assessor guidelines emphasised the need to facilitate service provision to those of non-English-speaking background and Aboriginal and Torres Strait Islander background. As such, for each of these standards a 'met' rating could not be obtained unless consideration was given to these groups. These correlations are the likely result of such an emphasis. The internal consistency of the standards under this objective may be improved and the degree of repetitive measurement across objectives reduced if the major issues relating to service provision to Aboriginals and Torres Strait Islanders and people of non-English-speaking background are drawn together so that they constitute minimum criteria for a 'met' rating on one particular standard.

Standard 2.3 (Consumers are informed of the basis of service provision, including changes that may occur) shows a strong correlation ($r = 0.56$) with Standard 4.2 (Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive). Informing consumers of their care or service delivery plan very often was said to occur during the same process as the explanation of the basis of service provision. The size of the correlation suggests the information gained from these two standards may be complementary rather than redundant.

Objective 3: Efficient and effective management

While the standards of Objective 3 were seen as desirable by at least 96% of service providers, of all the standards they were most likely to be considered unclear, with, on average, 92% of service providers rating the standards of this objective as clear. These standards were also seen as impractical and inappropriate by a substantial minority (13% and 7% on average, respectively). The standard that was rated highest under this objective on clarity, desirability, practicality and appropriateness was Standard 3.3, with at least 97% of service providers agreeing that it fulfilled each of these requirements.

Table 3.4: Correlation coefficients for standards under Objective 3

	3.1	3.2
3.2	0.51	
3.3	0.44	0.47

Assessors reported difficulty combining the two pieces of performance information into one rating against Standard 3.2. Nevertheless, these standards correlated strongly with one another within the objective, indicating that they appear to be each contributing to the measurement of quality with regard to efficient and effective management.

Results of the factor analysis indicated that the three standards tended to load primarily on one underlying factor, with some cross-loading on only one other factor. Standard 3.3 (Consumers receive services from appropriately skilled staff) showed a strong correlation ($r = 0.65$, see Table 3.2) with Standard 1.1 (Assessment occurs for each consumer). This possibly reflected the tendency for more comprehensive assessments to be undertaken by agencies with highly skilled and qualified staff. The presence of this correlation adds weight to the argument for eliminating the performance information required by Standard 1.1, since an important associated quality factor is measured by Standard 3.3.

Objective 4: Coordinated, planned and reliable service delivery

All of the standards under Objective 4 were considered clear by at least 93% of agencies and close to 100% considered these standards desirable. They were somewhat less likely than standards under other objectives to be considered practical and appropriate, however – with an average of 91% believing the standards under this objective to be practical and an average of 94% believing the standards under this objective to be appropriate.

The standard in Objective 4 that showed least coherence in measuring the domain of coordinated, planned and reliable service delivery was 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed). This standard had a correlation of only $r = 0.22$ with Standard 4.5 (Consumers receive services which include appropriate coordination and referral processes) and a correlation of only $r = 0.25$ with Standard 4.1 (Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account). Standard 4.4 was also considered impractical and inappropriate by a minority of agencies (8% and 7% respectively).

The information on the performance of agencies against Standard 4.4 was, in many of cases, the same as that gained from Standard 4.3 (Consumers' cultural needs are addressed). This is evidenced by the high correlation between the two standards ($r = 0.65$). This may be partly due to the emphasis in Standard 4.4 on addressing the needs of dementia sufferers from a non-English-speaking background. Standard 4.4 also correlated highly with Standard 2.2 (Consumers are aware of services available) ($r = 0.62$). The overlap between these two standards can be explained by the reference in both to the need for the agency to be aware of other services available, including those providing support to dementia sufferers as specified in Standard 4.4. Both standards also require agencies to make special provision for those from Aboriginal and Torres Strait Islander backgrounds and non-English-speaking backgrounds.

The factor analysis shown in Table 3.2 reveals that the standards of Objective 4 do not load consistently on any one factor. Standard 4.3 (Consumers' cultural needs are addressed) is correlated with standards from three other objectives: Standard 1.3 (Access to services by consumers with special needs is decided on a non-discriminatory basis, $r = 0.73$); Standard 2.2 (Consumers are aware of services available, $r = 0.82$); and Standard 3.2 (Consumers receive services from agencies that adhere to accountable management practices, $r = 0.60$). Again, these correlations are likely to be the result of an emphasis in each of these standards on providing services in such a way as to facilitate service provision to those of non-English-speaking backgrounds and Aboriginal and Torres Strait Islander backgrounds.

Table 3.5: Correlation coefficients for standards under Objective 4

	4.1	4.2	4.3	4.4
4.2	0.34			
4.3	0.39	0.39		
4.4	0.25	0.46	0.65	
4.5	0.40	0.37	0.37	0.22

Notwithstanding the cross-loading of Standard 4.3 with other objectives, and excluding Standard 4.4, the standards of Objective 4 show an appropriate level of intercorrelation to suggest that they relate together sufficiently to be considered as measuring the domain associated with coordinated, planned and reliable service delivery.

Objective 5: Privacy, confidentiality and access to personal information

On average, the standards under Objective 5 were considered desirable by 99% of service providers. At least 94% of service providers considered these standards to be clear. The poorest performance of these standards was in the area of practicality and appropriateness. At least 85% of service providers considered the standards under Objective 5 to be practical and at least 91% of service providers considered the standards under Objective 5 to be appropriate.

The standard of most concern to agencies under this objective was Standard 5.2 (Consumers have signed confidentiality release forms). The impracticality and inappropriateness of obtaining signed confidentiality release forms was an issue for a range of agencies. Nevertheless, the concern of this standard with access to and control of personal information related it strongly to the other standards under this objective.

The correlations among the standards under this objective were moderate, suggesting that they each tap a different aspect of the objective. The factor analysis confirmed that these items covered a common domain as evidenced by each standard loading on a single factor.

Table 3.6: Correlation coefficients for standards under Objective 5

	5.1	5.2
5.2	0.34	
5.3	0.55	0.46

As would be expected, Standard 5.1 correlated with two other standards concerned with consumer rights. The correlation between Standard 5.1 (Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures) and Standard 2.1 (Consumers are aware of their rights and responsibilities) was high at $r = 0.65$. Standard 6.1 (Consumers are aware of the complaints process) was also highly correlated with Standard 5.1 ($r = 0.59$).

Objective 6: Complaints and disputes

The complaints and disputes standards were considered practical, clear, appropriate and desirable by between 99% and 100% of service providers for all of the standards under this objective except Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer). This role was seen to be quite different from that required from agencies in dealing with complaints about their own service. The role of advocate or mediator that this standard was seen to request was not seen as appropriate. The correlations reported in Table 3.7 suggest that Standard 6.4 was also rated differently to the other standards belonging to this objective: the correlations for this standard are among the lowest in the group. Indeed, inspection of the correlation of all standards presented in Appendix D reveals that, compared with its correlation with all other standards, Standard 6.4 is least associated with the complaints standards under Objective 6. Standard 6.4 was most strongly correlated with Standard 3.2 (Consumers receive services from agencies that adhere to accountable management practices, $r = 0.59$). This suggested that Standard 6.4 may be more concerned with well-organised policies and comprehensive guidelines for accountability than with the resolution of complaints.

Table 3.7: Correlation coefficients for standards under Objective 6

	6.1	6.2	6.3
6.2	0.58		
6.3	0.55	0.76	
6.4	0.33	0.41	0.33

Standard 6.3 (Services are modified as a result of ‘upheld’ complaints) correlates very highly with 6.2 (Each consumer’s complaint about a service, or access to a service is dealt with fairly, promptly, confidentially and without retribution, $r = 0.76$), suggesting that information may be more efficiently taken using only one of the standard’s performance information. Standard 6.3 received a high level of ‘met’ ratings and was

noted by assessors to be difficult to rate accurately without consumer feedback. The performance information for Standard 6.2 may be sufficient for these two standards.

Objective 7: Advocacy

While agencies believed that the advocacy standards were desirable (at least 99% of service providers believed these standards were desirable), not all saw them as practical or clear, particularly with regard to Standard 7.4 (The agency involves advocates in respect to representing the interests of the consumer). On average 93% of service providers believed these standards were appropriate while, on average, 88% believed they were practical. A difficulty faced by agencies with regard to these standards concerned their own role as advocates for their consumers. Issues of practicality concerned the absence of advocacy services in the area covered by the agency or failure of these advocacy agencies to disseminate information about themselves.

In the Instrument tested in the pilot, one rating was given for the three standards: 7.1, 7.2 and 7.3. There was a high correlation between the rating of Standard 7.4 and the single rating given for Standards 7.1 through 7.3 ($r = 0.67$), suggesting that both ratings addressed the objective of advocacy. The size of this correlation suggests that advocacy may just as efficiently be covered by one of these pieces of performance information. The ratings for Standards 7.1 through 7.3 were also strongly correlated with Standards 2.1 (Consumers are aware of their rights and responsibilities, $r = 0.57$), Standard 5.1 (Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures, $r = 0.55$) and 6.1 (Consumers are aware of the complaints process, $r = 0.53$) – all standards concerned with consumer information and rights. It is likely that little performance information would be lost if the assessment of Standards 7.1 to 7.3 was incorporated into another standard to which they were related, such as Standard 2.1. The redundant questions could then be dropped from the Instrument.

3.3.2 Overall scores

An alpha reliability coefficient represents the degree of cohesiveness of the standards representing each objective. The highest alpha possible is an alpha coefficient of one, which would be obtained if standards were answered identically in every instance. These coefficients are presented for each objective in the diagonal of Table 3.8.

The alpha coefficients show a high level of cohesiveness among the standards representing each objective. Therefore, to obtain a single measure for each objective, the scores for each group of standards can be summed. So, for instance, to obtain a single measure for Objective 1, scores across the five standards would be summed. Single measures for each objective were calculated for each agency in this way and these measures were correlated. The results are presented below the diagonal in Table 3.8.

A comparison of the size of the correlations between objectives and the alpha reliability coefficients indicates that, in some cases, the relationship of standards across objectives is stronger than within objectives. This confirms that there is considerable repetition within the Instrument. The same measures of quality have been used to assess different standards across objectives. This means that the Instrument contains more items than it needs to in order to make a measurement of service quality. It suggests that standards

do not comprehensively cover the domain of their own objective without unduly overlapping with the domains of other objectives. Reducing overlap across objectives and comprehensively assessing quality within objectives is critical to forming an accurate additive scale across standards.

When the objectives were examined in the previous section, a number of standards were identified as contributing little to the assessment of performance against the standards and some standards were seen to be more closely related to standards in other objectives. The question to be addressed is whether the performance information required under some standards should be eliminated, or whether some standards would be better grouped or subsumed under different objectives.

Table 3.8: Correlations and alpha reliability coefficients for the seven objectives

Objectives	1	2	3	4	5	6	7
1. Access to services	0.80						
2. Information and consultation	0.74	0.66					
3. Management	0.71	0.58	0.73				
4. Service delivery	0.74	0.78	0.78	0.75			
5. Personal information	0.49	0.61	0.33	0.45	0.71		
6. Complaints and disputes	0.72	0.66	0.56	0.68	0.58	0.79	
7. Advocacy	0.51	0.53	0.50	0.46	0.36	0.52	0.80

Note: Alpha reliability coefficients in the diagonal; correlations between objectives below the diagonal.

Standards found to contribute little to the measurement of service quality once other standards were taken into account included: 1.1 (Assessment occurs for each consumer), 1.3 (Access to services by consumers with special needs is decided on a non-discriminatory basis), 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed) and 6.3 (Services are modified as a result of ‘upheld’ complaints). Standards 2.1 (Consumers are aware of their rights and responsibilities), 5.1 (Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures) and the first three standards under Objective 7 all deal with consumer awareness of their rights and may be more effectively measured together rather than individually in their respective objectives.

Standard 6.4 did not relate strongly with other standards within its own objective. The performance of agencies against this standard is not associated with their performance on other measures of quality service regarding complaints. It was more closely related to issues of accountability and responsibility. This standard may require industry education to incorporate it into the quality assurance process of all HACC agencies. It can be considered as a factor in the measurement of service quality, but should not be included as an indicator of performance against Objective 6, since of all the standards it is least related to those concerned with complaints.

3.3.3 Recommended changes to scoring

Summary of recommended changes to facilitate scoring of the Instrument:

1. Objective 1 should be limited to the performance information of Standards 1.2, 1.4 and 1.5.

2. Objective 2 should be extended to include performance information covered by 5.1 and 7.1, 7.2, and 7.3 under Standard 2.1.
3. Objective 3 should remain as it is.
4. Objective 4 should be limited to the performance information of Standards 4.1, 4.2, 4.3 and 4.5.
5. Objective 5 should be limited to the performance information of Standards 5.2 and 5.3.
6. Objective 6 should be limited to the performance information of Standards 6.1 and 6.2 with separate consideration given to Standard 6.4.
7. Objective 7 should be limited to the performance information of Standard 7.4.

Table 3.9 shows the alpha reliability coefficients and the intercorrelations for objectives when these adjustments are made. Standard 6.4 is listed separately because it did not correlate strongly with standards within its own objective and it was more highly correlated with a standard in another objective. The balance of the internal consistency of objectives to cross association with other objectives is improved by the changes listed above: the alpha coefficients now tend to be higher than the correlations between objectives. This means that the standards with these adjustments are more likely to represent quality associated with their objective rather than quality associated with another objective.

Table 3.9 Correlations and alpha reliability coefficients for the seven revised objectives

Objectives	1	2	3	4	5	6	7
1. Access to services	0.75						
2. Information and consultation	0.66	0.66					
3. Management	0.63	0.58	0.73				
4. Service delivery	0.64	0.76	0.75	0.70			
5. Personal information	0.32	0.48	0.26	0.36	0.63		
6. Complaints and disputes	0.64	0.65	0.46	0.57	0.38	0.73	
7. Advocacy	0.46	0.45	0.48	0.49	0.11	0.42	*
Standard 6.4	0.50	0.54	0.61	0.53	0.44	0.42	0.53

* Coefficient cannot be calculated as there is only one standard under this objective.

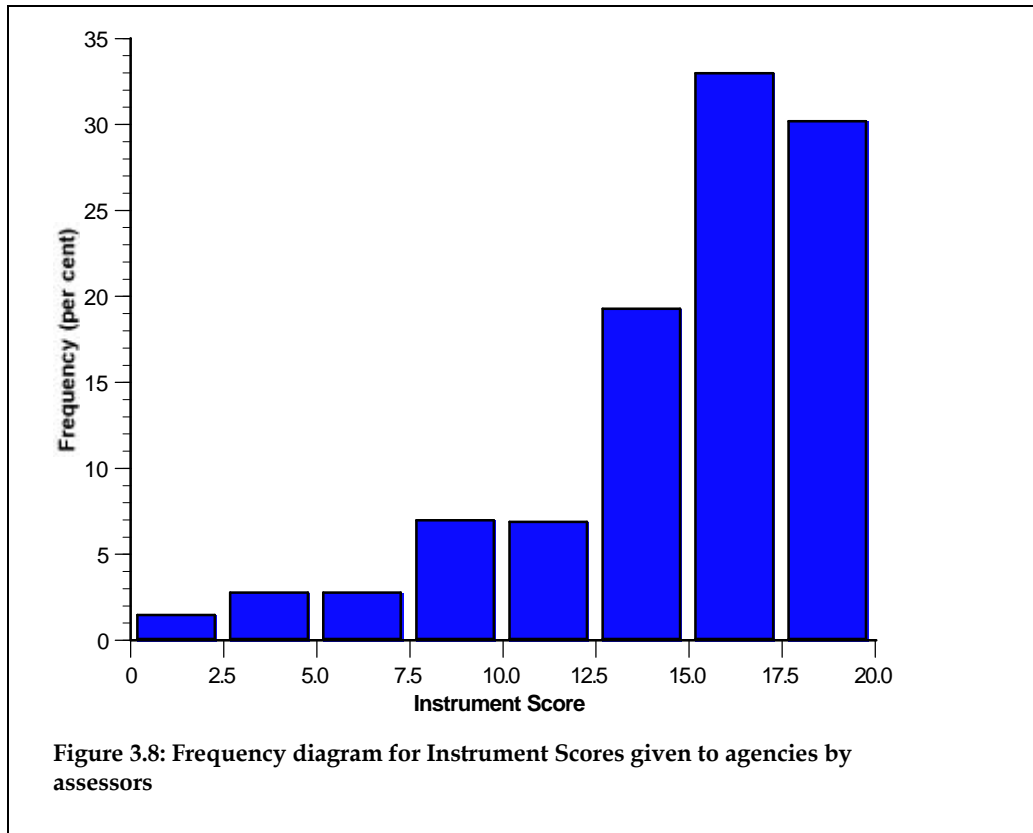
All of the analyses presented so far in this chapter converge on the conclusion that scores can be added across all standards to give a total score for quality assessment against the HACC National Service Standards. Across the whole Instrument, no one standard stands out as unrelated to the other standards and relationships between objectives are almost as high as the relationships of standards within objectives. This suggests that there is one basic theme to the 27 standards: they are cohesively related to quality in a diversity of HACC agencies.

3.3.4 Finding the Instrument Score

Using the revised scoring system (which reduced the total number of standards to be scored to 19), on average, agencies in the pilot scored 28.7 out of a maximum possible

score of 38. The range of total agency scores was large; some agencies scored the maximum possible, some scoring as low as 5 and 6 out of 38. The standard deviation of total agency scores was 7.6.

Summed scores for the Instrument and individual objectives were calculated using assessor scores. Although assessor scores were available for 74 agencies, summed scores were calculated only for 60 of these. This was because agencies with any unscored standards were excluded from the sample. Exclusion of cases with missing ratings is necessary at this stage since comparison of agency's added scores is dependent on each being rated by an equivalent number of standards.



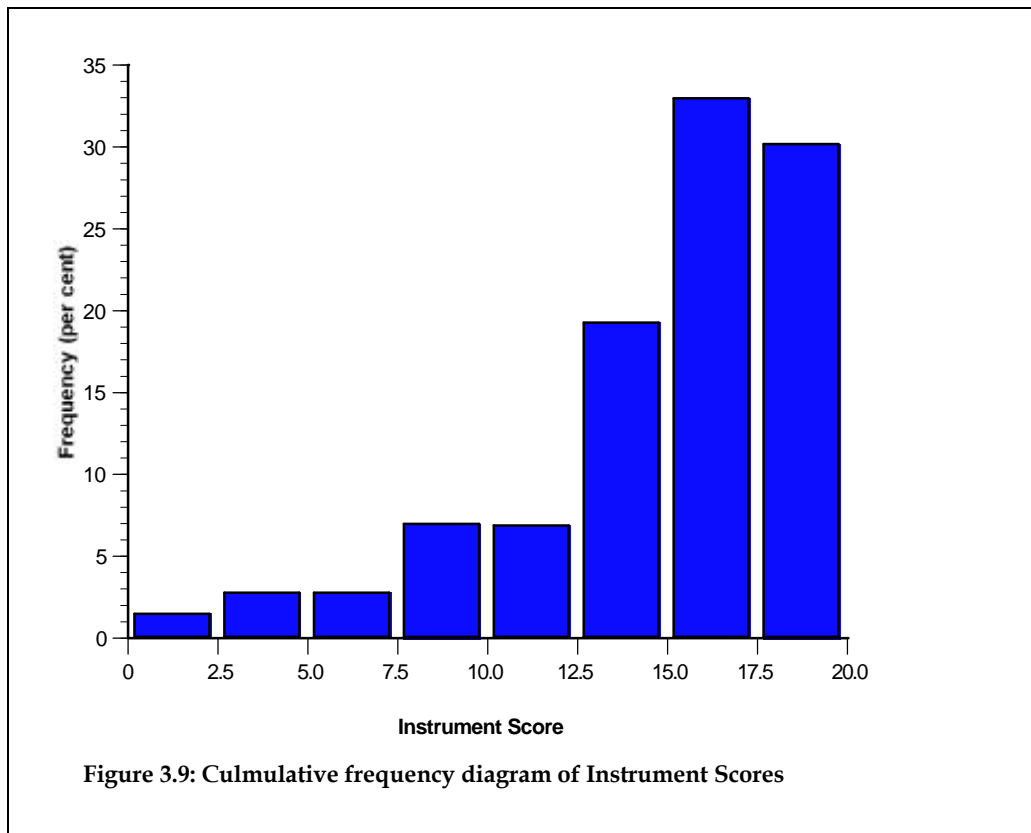
It was recognised that in some cases (e.g. Standard 4.4 in the pilot test) it may be necessary for an agency to have no score against a standard. This causes a problem if scores are simply added, because agencies which are legitimately excluded from assessment against a particular standard lose the value of a score for that standard.

To eliminate this problem, and to facilitate comparison of performance between agencies, an agency's scores for each standard are added together. This total is then divided by the number of applicable standards to arrive at an average score for each agency. Multiplying this score by 10 produces an Instrument Score with a range from 0 to 20. This Instrument Score is a valid way of representing an agency's performance

against the Instrument, assuming that each standard is of equal weighting. As discussed above, the recommended changes to the Instrument result in the removal of redundant performance information.

The mean Instrument Score for all agencies in the pilot test with assessor ratings is 15.0. The standard deviation is 4.0. Figure 3.8 groups agencies according to their Instrument Scores and shows the proportion within each group. Sixty three per cent of agencies obtained an Instrument Score greater than 15.0. These agencies have scored a 'met' rating for the majority of standards.

Figure 3.9 shows that the vast majority of agencies have Instrument Scores between 10.0 and 20.0—or an overall rating of between 'partly met' and 'met'. A relatively small proportion of agencies (11%) had Instrument Scores between 0.0 and 10.0 or an overall rating of between 'not met' and 'partly met'. Targeting the relatively few poor performers that are identified using this method may be one response of program managers to the outcomes of an appraisal process in their jurisdiction.

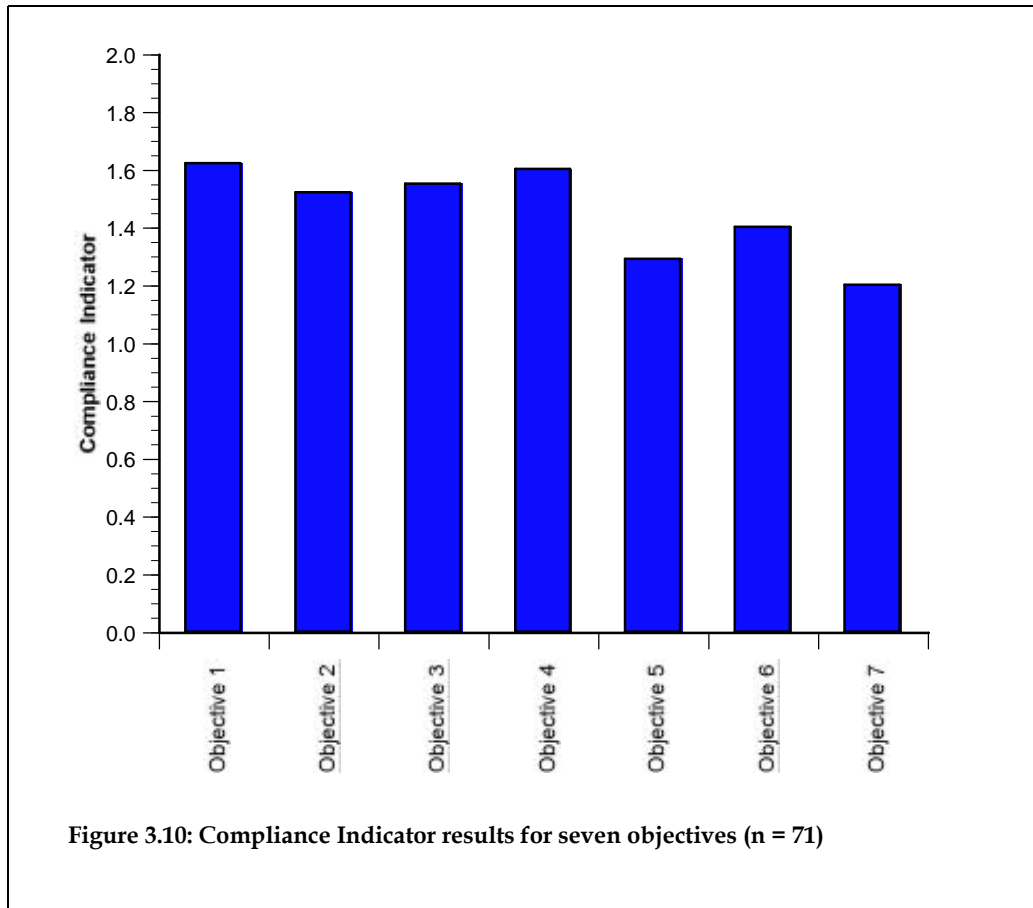


3.3.5 The Compliance Indicator

To make a comparison of performance across objectives it is necessary to calculate a Compliance Indicator. If scores were simply added across standards within an objective it would not be possible to compare performance against one objective with another.

This is because the number of standards in each objective varies. However, the following method is proposed to develop an indicator based on agency scores which allows for comparison across objectives.

To arrive at the Compliance Indicator the mean total score per objective is first calculated. For each agency, the scores against standards within an objective are added. The maximum possible score for an objective is determined by the number of standards within it. By dividing the total objective by the number of standards rated within the objective, we arrive at the Compliance Indicator, which is always expressed as a score out of 2.



For example, the Compliance Indicator of performance against Objective 1 is calculated in the following way. Using the revised version of the Instrument, three standards are used to assess Objective 1 within the Instrument. Scores for these 3 standards are added for each agency to achieve a total score for the objective. Total scores for each agency are then divided by the number of scores under the objective to obtain the Compliance Indicator. This calculation for Objective 1 produces an average Compliance Indicator of 1.63. This indicator can be calculated at the individual agency level as well as at the

aggregate level for all agencies and can be useful for comparison between objectives and agencies.

A breakdown of Compliance Indicator results against each objective, averaged over all agencies, is presented in Figure 3.10.

The objective that agencies performed most poorly on in the pilot test was Objective 7 (Advocacy). The average Compliance Index for this objective was 1.20. Agencies also performed considerably less well against Objective 5 (Compliance Indicator = 1.29). Agencies generally performed well against Objective 1 and Objective 4 (Compliance Indicator = 1.62 and Compliance Indicator = 1.61, respectively). Performance against Objectives 2, 3 and 6 were comparably high (1.52, 1.56 and 1.40, respectively).

3.3.6 Some possible uses of scores

As outlined in previous sections, with the recommended changes to the Instrument (see 3.3.3) there are various ways that scoring of the Instrument could be used. A few of the possible questions that can be answered by the scoring methods outlined in previous sections are listed below.

Question: How are HACC agencies performing against the National Service Standards?

This question could be asked in the context of Business Reporting requirements at both the national or State/Territory levels. The Instrument Scores could be used to derive an overall performance assessment for agencies. For example, the overall performance against the standards of agencies with an Instrument Score less than 10.0 could be described as poor. Scores between 10.0 and 14.9 could be described as basic, scores between 15.0 and 17.5 could be described as good, and between 17.5 and 20.0 could be described as high.

One way of measuring the aggregate performance of HACC agencies in a jurisdiction is to identify the proportion of HACC agencies that fall into these groupings associated with overall Instrument Scores. Alternatively, business reports could adopt an exception-reporting approach and ask only for the proportion of agencies that fall below an agreed level of performance and/or above a certain level of performance (e.g. below 10.0 or above 17.5 on the Instrument Score scale, respectively).

Question: Which agencies should be the subject of targeted action to assist them improve their performance against the National Service Standards?

The agency Instrument Score and the resources available for service development in a jurisdiction are factors to be considered in the choice of agencies to be reviewed. The level of resources and the number of agencies falling below an agreed point between 0.0 and 20.0 on the Instrument Score scale could be used as one basis for selection of agencies for targeted action. By looking at the distribution of agency Instrument Scores along the Instrument Score scale of 0.0 to 20.0 (see Section 3.3.4), a score below which agencies are considered appropriate for targeting could be established. Different approaches to risk management may mean that jurisdictions opt for different points along the Instrument Score scale below which an agency is considered appropriate for targeted action. The selection of this score may well be influenced by the resource implications of targeting all agencies falling below the chosen point.

Question: Where should available program development funds (at national or State/Territory levels) be directed?

An indication of where training and service development resources for improving service quality in the HACC program can be obtained by the use of the Compliance Indicator (see Section 3.3.5). This indicator relates to agency performance against each objective and, at the aggregate level, indicates the relative performance of all agencies for each objective. For example, in the pilot test, agency performance against Objective 7 (Advocacy) is the poorest of all, suggesting that this objective would be an appropriate focus for training and development activities. Decisions about program development activities would, of course, also take into account other factors, including the relative priority placed on particular objectives by the relevant jurisdiction. The Compliance Indicator does, however, provide a useful summary indicator of relative performance against particular objectives.

Where overall Compliance Indicators for each objective show that problems with one objective are common across all jurisdictions, the need for national training or development activities may be indicated. Where problems with objectives are specific to jurisdictions, they may need to address these separately through State- or Territory-specific quality improvement strategies.

3.4 Concurrent validity

Two tests of the concurrent validity of the Instrument are made in this section. The first tests the concurrent validity of the individual standards ratings. Ratings given to an agency by assessors are compared to agency self-ratings. The second test focuses on the concurrent validity of the Instrument Score. The Instrument Scores derived in the previous section are compared with the overall appraisals of agency performance requested of agencies and assessors at the end of the Instrument. Individual standards ratings are also compared with the Instrument Score to examine the relative contribution of each standard to the assessment of quality.

3.4.1 Agency and assessor agreement on ratings against individual standards

To determine the extent to which agencies and assessors were in agreement, the ratings that agencies gave themselves against individual standards in the Instrument were compared with the ratings given to them by the assessor on the Ratings Summary Form. From this information a measure of agreement was calculated. Agreement means that if the assessor rated their agency 'met', the agency also rated it as 'met'; or if the assessor rating was 'partly met', the agency rating was also 'partly met'; or if the assessor rating was 'not met' the agency rating was also 'not met'. Figure 3.11 shows these agreement measures for each standard.

There are several factors at work influencing the level of agreement between agency and assessor ratings:

- the bias of the individual rater and their tendency to be harsh or lenient in deciding on ratings;

- the consistency between the Instrument’s instructions and the assessor guidelines in terms of placing equivalent emphasis on factors associated with the standard; and
- the nature of the data used to appraise quality of service against the standards— for some standards, the evidence required to support the performance information is more difficult to obtain and assessors may be left to rely on the agency’s word.

The average percentage of agreement between agencies and assessors was 76% over all standards. The lowest level of agreement was 66% for Standard 6.1 (Consumers are aware of the complaints process). This represents a high level of concurrence given that agencies received less information than assessors regarding how to rate standards.

The highest levels of agreement were for Standards 1.1 (Assessment occurs for each consumer; 90%), 2.2 (Consumers are aware of services available; 100%), 4.2 (Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive; 86%), and 6.3 (Services are modified as a result of ‘upheld’ complaints; 84%). A common feature of Standards 1.1 and 4.2 is that they were specific about the evidence required of agencies to receive a ‘met’ rating. Respectively, these standards required proportions of consumers who had been assessed or who had a service delivery/care plan. As mentioned under Section 3.1, ratings against these standards may have been affected by the lack of a clear definition of ‘assessment’ and ‘care plan’ for the purposes of the Instrument. In addition, Standard 1.1 was largely rated as ‘met’, resulting in less variance in scores to facilitate comparison.

Standard 2.2 required that agencies describe how they provide information about other services to consumers. In addition to the consistency between the Instrument and the guidelines regarding what was required of agencies to achieve a ‘met’ rating, this standard was one able to be applied consistently to a range of agencies without difficulty. Service providers found this standard to be appropriate to their agencies in all but one case.

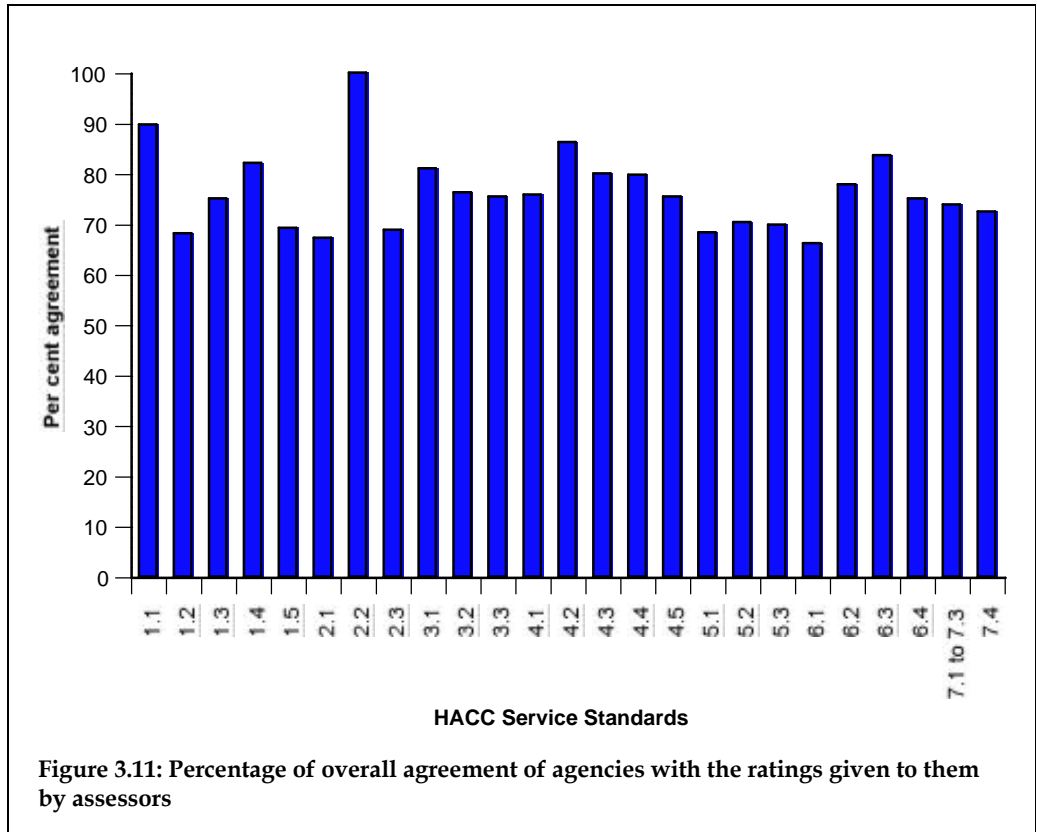
Standard 6.3 required that agencies give an example of service modifications following an upheld complaint. When agencies are able to provide evidence of such an event, with accompanying documentation, there is little assessors can do to disprove the agency’s claims regarding the standard. Unless provided with evidence that upheld complaints do not result in service changes, the assessor must take the agency’s word on the matter. In addition, assessors noted that it was difficult for them to decide on a rating when the agency reported no recorded complaints. Standard 6.2 was reported by assessors to be similarly difficult to assess when no complaints were recorded.

Sources of ratings disagreement

While in general there was a reasonably high degree of consensus between assessor and agency ratings, it is useful to examine individual standards for sources of ratings disagreement in order to further refine and improve the Instrument and the quality appraisal process.

Differences in emphasis and in the amount of information provided between the assessor guidelines and the Instrument contributed to ratings disagreement in some cases. Standards 1.5 (Consumers who reapply for services are assessed with needs

being prioritised), 2.1 (Consumers are aware of their rights and responsibilities) and 5.1 (Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures) were particularly affected by this. The percentage agreement between agency and assessor ratings for these standards was 69%, 67% and 68% respectively.



The disagreement on Standard 2.1 (Consumers are aware of their rights and responsibilities) was the result of overly prescriptive ratings directions in the assessor guidelines. A ‘not met’ rating against this standard was directed to be given if the agency made no provision to allow relevant special needs groups to understand their rights and responsibilities, including people of a non-English-speaking background and Aboriginal and Torres Strait Islander peoples. In attempting to rate themselves against this standard, agencies indicated that they believed this to be too harsh. It was also not clear to assessors how often ‘periodic reminders’ should be.

Standards where some degree of ratings disagreement occurred as a result of the difficulty of the information to be assessed included the following: 1.2 (Consumers are allocated available resources according to prioritised need); 1.3 (Access to services by consumers with special needs is decided on a non-discriminatory basis); 5.2 (Consumers have signed confidentiality release forms); 6.4 (Each consumer receives

assistance, if requested, to help with the resolution of conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer); 7.1 to 7.3 regarding knowledge of and access to advocacy services (74% agreement); and 7.4 (The agency involves advocates in respect to representing the interests of the consumer) with 72% agreement.

Standard 1.2 (Consumers are allocated available resources according to prioritised need) required an assessment of the manner in which agencies prioritised need and allocated resources. Appropriate performance information for this standard varied greatly across service types, target group, and demands on the agency. As a result, the assessor guidelines were fairly open in their description of what would constitute a 'met', 'partly met', or 'not met' rating. In some cases, agencies did not prioritise resource allocation at all because they were able to meet all demand. These factors were reported by assessors to have made rating difficult and may have contributed to the discrepancy between agency and assessor ratings. Notwithstanding these difficulties, agreement on ratings occurred 68% of the time.

Standard 1.3 (Access to service by consumers with special needs is decided on a non-discriminatory basis) was difficult to assess because of the presence of specific services for people from non-English-speaking backgrounds and Indigenous peoples in the same geographic area. Agreement on the ratings for this standard occurred 75% of the time.

For Standard 6.4, some assessors were uncertain as to whether all services should have developed protocols for dealing with conflict between carers and the frail elderly or younger person with a disability, or just for issues of abuse of older people. This standard may also have suffered from lack of clarity about the type of conflict situation to which the standard refers. That is, the standard refers to conflict between a carer and a care recipient about a service – not conflict in general, which may be more closely connected to issues of elder abuse. Agreement about ratings for this standards occurred 75% of the time.

The best practice for Standard 5.2 was also called into question by assessors. Consumers may not have wanted to sign or give blanket release. They may have preferred to deal with each case or event when it occurred. Agreement about ratings for this standard occurred 70% of the time.

More generally, standards under Objectives 2, 6 and 7 were noted to be difficult to assess without consumer feedback. Assessors reported that agencies often gave only verbal coverage to issues such as advocacy, making assessment of these standards difficult and leading to disagreement. This was also the case with complaints, particularly with regard to Standard 6.3 concerning upheld complaints. Clearer guidelines on the appropriate role of agencies acting as advocates at their clients' request were also required to resolve some of the disagreement between ratings of assessors and agencies. Agreement about the ratings for Standards 7.1 to 7.3 occurred 74% of the time and agreement about the ratings for Standard 7.4 occurred 72% of the time.

3.4.2 Validating the Instrument Score against the global assessment of quality

After assessors and agencies had completed their ratings of the agency's performance against the standards, they were asked to give the agency an overall appraisal of service

quality with respect to the standards. In particular, they were asked to answer the question, 'On the basis of information gathered in this quality appraisal, I would rate this agency against the HACC National Service Standards as:...'. Four categories: 1 (*fails to meet the HACC National Service Standards*); 2 (*meets to a minimal or basic standard*); 3 (*meets to a good standard*); and 4 (*exemplary*) were available in response. The instructions given to assessors in the training session regarding this question were that they were to give a global assessment based on their own judgment of overall service quality.

If the correlation between the global assessment and the Instrument Score was too low there would be some serious concerns about the validity of the summed Instrument Score. It would also indicate that assessors and service providers may have some doubts about the meaningfulness of the Instrument as a tool for assessing quality of service in HACC-funded agencies. If the correlation is very high, it indicates that the same assessment results could be obtained by simply asking one question from assessors and agencies, without need to individually rate standards. It may suggest that individual standards ratings are unduly subject to the same subjective judgments as the overall appraisal.

Most commonly, both agencies and assessors indicated that agency service quality fell into the third category on the global assessment measure: 'meets to a good standard'. Sixty-eight per cent of agencies were rated in this category according to both assessors and the agencies themselves. The correlation between the global assessment and the calculated Instrument Score, where both of these data items were obtained from assessors, was $r = 0.74$.³ When both of these data items were obtained from agencies the correlation was $r = 0.64$.⁴ Both of these correlations indicate a satisfactory level of concurrent validity. The lower correlation for agency assessments may reflect the fact that agencies were not provided with detailed guidelines for the rating of individual standards. Nevertheless, both agencies and assessors clearly draw some congruence between standards ratings and overall agency service quality.

3.4.3 Validating the standard ratings against the global assessment of quality

Table 3.10 shows the correlations between individual standards ratings, according to assessors, and the assessor's global assessment of the agency. Each standard shows a positive correlation with the global appraisal. This confirms the notion that each standard measures some aspect of service quality. The lowest correlations occur between the global appraisal and Standards 5.2 (Consumers have signed confidentiality release forms, $r = 0.26$) and 5.3 (Consumers are able to gain access to their personal information, $r = 0.20$). This suggests that, according to assessors, these standards are of lowest validity with respect to the assessment of overall service quality in HACC funded agencies. Standard 5.2 was considered one of the least practical and appropriate by service providers.

3. Number of cases with available data = 59

4. Number of cases with available data = 79

Standard 1.1 (Assessment occurs for each consumer) and 6.3 (Services are modified as a result of 'upheld' complaints) were also among the least strongly correlated with the global assessment. These standards were noted earlier to have the highest frequency of 'met' ratings. With almost 90% of agencies scoring a 'met' rating for Standard 1.1, there was very little variability in ratings available to produce a high correlation with a global assessment of quality. It was also noted earlier that it was difficult for assessors to adequately verify the information provided to them by agencies regarding Standard 6.3.

Standards with the highest correlations with the global assessment of quality included both 1.3 (Access to services by consumers with special needs is decided on a non-discriminatory basis) and 4.3 (Consumers' cultural needs are addressed), standards that were concerned with adequate service provision to special needs groups. Clearly, agencies that are able to provide equity in service provision are perceived by assessors to be performing well in terms of the National Service Standards. Accountable management practices were also of apparent influence in the assessor's perception of performance against the standards: ratings against Standard 3.2 correlated highly with global assessments ($r = 0.58$). Similarly, the managerial competence demonstrated under Standard 3.1 (Consumers receive appropriate services provided through the processes of ongoing planning, monitoring and evaluation of services) was strongly associated with the assessor's overall appraisal of agency performance ($r = 0.56$). Regarding the more practical aspects of service delivery, ratings against Standard 4.2 (Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive) were a strong indicator of the assessors' overall perception of agency performance against the standards.

Significantly, some standards that were considered by service providers to be of questionable clarity, desirability, appropriateness and practicality were among those that received strong validation in terms of their correlation with assessors' overall appraisals. Most notably, Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer) had been questioned by service providers on all of the above criteria but appears to be strongly associated with the global assessment ($r = 0.46$). Standard 3.2 was among the most frequent to be considered impractical and unclear by service providers, yet it is shown in Table 3.10 to be most strongly associated with a global assessment of quality ($r = 0.58$).

Table 3.10: Correlation of assessor standard ratings with global assessment of quality

	Standard	Correlation
1.1	Assessment occurs for each consumer.	0.37
1.2	Consumers are allocated available resources according to prioritised need.	0.46
1.3	Access to services by consumers with special needs is decided on a non-discriminatory basis.	0.55
1.4	Consumers in receipt of other services are not discriminated against in receiving additional services.	0.49
1.5	Consumers who reapply for services are assessed with needs being prioritised.	0.47
2.1	Consumers are aware of their rights and responsibilities.	0.51
2.2	Consumers are aware of services available.	0.47
2.3	Consumers are informed of the basis of service provision, including changes that may occur.	0.41
3.1	Consumers receive appropriate services provided through the processes of ongoing planning, monitoring and evaluation of services.	0.56
3.2	Consumers receive services from agencies that adhere to accountable management practices.	0.58
3.3	Consumers receive services from appropriately skilled staff.	0.50
4.1	Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.	0.44
4.2	Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.	0.57
4.3	Consumers' cultural needs are addressed.	0.55
4.4	The needs of consumers with dementia, memory loss and similar disorders are addressed.	0.43
4.5	Consumers receive services which include appropriate coordination and referral processes.	0.51
5.1	Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.	0.51
5.2	Consumers have signed confidentiality release forms.	0.26
5.3	Consumers are able to gain access to their personal information.	0.20
6.1	Consumers are aware of the complaints process.	0.54
6.2	Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution.	0.43
6.3	Services are modified as a result of 'upheld' complaints.	0.37
6.4	Each consumer receives assistance, if requested, to help with the resolution of conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer.	0.47
7.1	Each consumer has access to an advocate of his or her choice.	0.42
7.2	Consumers know of their rights to use an advocate.	0.42
7.3	Consumers know about advocacy services—where they are and how to use them.	0.42
7.4	The agency involves advocates in respect to representing the interests of the consumer.	0.45

Note: Correlations between the global assessment of quality and standards 7.1, 7.2 and 7.3 are the same because these three standards receive one common assessment rating.

3.5 Rater reliability

An assessment tool is of little use and can have little credibility where different assessors cannot produce the same result using it to assess the same agency. The credibility of the Instrument as a reliable tool is examined first from the perspective of the assessors who used it. Both quantitative and qualitative data on the difficulty of rating standards are discussed. The results of a reliability study are then presented to empirically test the inter-rater reliability of the Instrument.

3.5.1 Qualitative feedback from assessors

Flexibility and the 80/20 rule

In order to allow assessors flexibility in applying the Instrument to the wide variety of HACC agencies, an assessment rule was devised as a general scoring guide. Assessors were explicitly instructed during training to use an '80/20 rule' in rating standards as 'met', 'partly met' and 'not met'. This was described in more detail in Section 2.2.2.

The 80/20 rule worked well for some assessors but not for others. It was noted that the 80/20 rule may have been applied somewhat inconsistently by assessors as, although it had been part of the assessor training, it had not been included in the assessor guidelines. It was further suggested that the ratings decisions that occurred as a result of this rule may have been partly dependent on the emphasis the assessor placed on practice versus policy. This problem may have been eliminated or reduced by clearer, more specific guidelines. There was strong support for guidelines which clearly outline the essential elements in meeting a standard and provide a checklist for assessors to use in determining ratings. Open-ended questions were noted to be particularly difficult to score accurately.

As was noted earlier in this report, however, there exists a conflict between the aim to clearly specify how agencies should be scored against the standards and the aim to apply the same Instrument to all agencies. By clearly specifying how to determine ratings for an agency the Instrument's reliability is increased. However, the more detail that is used in specifying certain criteria, the less applicable the Instrument becomes across agency types. In other words, as specificity regarding requirements to meet the standards increases, the generalisability of the Instrument decreases. An Instrument that does not generalise across agencies is one that is not valid for different agency types. For these reasons a checklist approach is still not recommended.

Comments on the rating categories

'Met', 'partly met', 'not met'

The three-point rating scale used to assess agencies against each standard was seen to be unfair by some assessors. A wide range of service quality was noted to have been subsumed into the category of 'partly met'. It was seen as discouraging for those agencies who were attempting to improve the quality of their agency to receive the same score as one doing nothing. It was believed that more rating categories would make the scoring clearer and would also identify progress and give recognition to those agencies where something had been done.

It was also noted that there was no provision within the existing three-point rating scale to recognise agencies which exceeded the requirements of the standards. A number of assessors felt that questions and answers required in the Instrument and assessor guidelines did not relate to, or measure, best practice. The addition of an 'excellent' category (or equivalent) would, however, add to the complexity of scoring agencies against the standards and would raise further issues regarding the consistency between raters when deciding on how to classify an agency as 'excellent'.

Assessors noted that some agencies tended not to give themselves 'met' ratings because they could see ways their service could be improved against each standard. These agencies tended to interpret 'met' as being perfect, implying no improvement could be made. As discussed in 2.5.1, under the 80/20 rule, assessors were instructed that this 'met' category was not intended to indicate that no further improvement could be made. However, this was not clear to agencies who did not have the benefit of the assessor guidelines. Clearer instructions to agencies in relation to scoring will assist with this problem.

Assessors also noted that where there were many criteria to meet against a single standard the assessment of what rating was appropriate was more complicated, and that the assessor guidelines required clearer and more consistent direction in determining ratings.

Some assessors indicated greater difficulty in differentiating between 'partly met' and 'not met' ratings than between 'met' and 'partly met' ratings. Splitting the 'partly met' rating into two separate categories could be used to help to overcome this problem. However, this option is not recommended because of the increased complexity involved with providing guidelines sufficient to help assessors differentiate between two 'partly met' ratings. To some extent, grades within the 'partly met' category can be reflected in assessor comments contained in the Ratings Summary Form which are then transferred to the Action Plan section of the Instrument.

'Not appropriate' category

For some agencies, all the standards within the Instrument can be applied to their service only with considerable flexibility of interpretation. It was suggested that a 'not applicable' category be added to the Instrument to take into account agency diversity and to ensure that agencies were not penalised by receiving 'not met' scores on standards that were not applicable to them.

Under four of the five assessment methods trialled, however, assessors were available to agencies to interpret the standards for their service. Where assessors were involved in interpreting the standards to agencies, standards were generally found to be appropriate. Indeed, in joint assessments, all standards (except 4.4 – see next page) were found to be appropriate to all agencies. This result concurred with pre-pilot testing results which indicated that, provided assessors were flexible in their approach to understanding agency service delivery, an assessment could be made for all of the standards in the Instrument for all agency types included in the pilot.⁵

5. Agencies providing information and advocacy services were excluded from the pilot. Pre-testing of the Instrument revealed that service quality in these agencies would be more appropriately assessed by a service-specific Instrument.

One exception to this, however, is Standard 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed). This standard is clearly not appropriate to HACC services provided to the young disabled. In this case, a 'not applicable' category may be appropriate.

The more general inclusion of a 'not applicable' category is not, however, recommended. If many agencies took the opportunity provided by a 'not applicable' category to exclude their agency from measurement against standards, the level of non-response to standards would be likely to increase sharply, thus threatening the validity and reliability of the Instrument. The pre-pilot testing and the results of the pilot test indicate that inclusion of this category is not generally warranted. However, it is noted that the assistance of the assessor may be crucial to an agency's ability to interpret and understand just how each standard applies to their particular service. This is one of the reasons that inclusion of a visit from an assessor to the agency during the assessment process is highly recommended, particularly in the initial stages of implementation when agencies have less familiarity with the Instrument and the quality appraisal process.

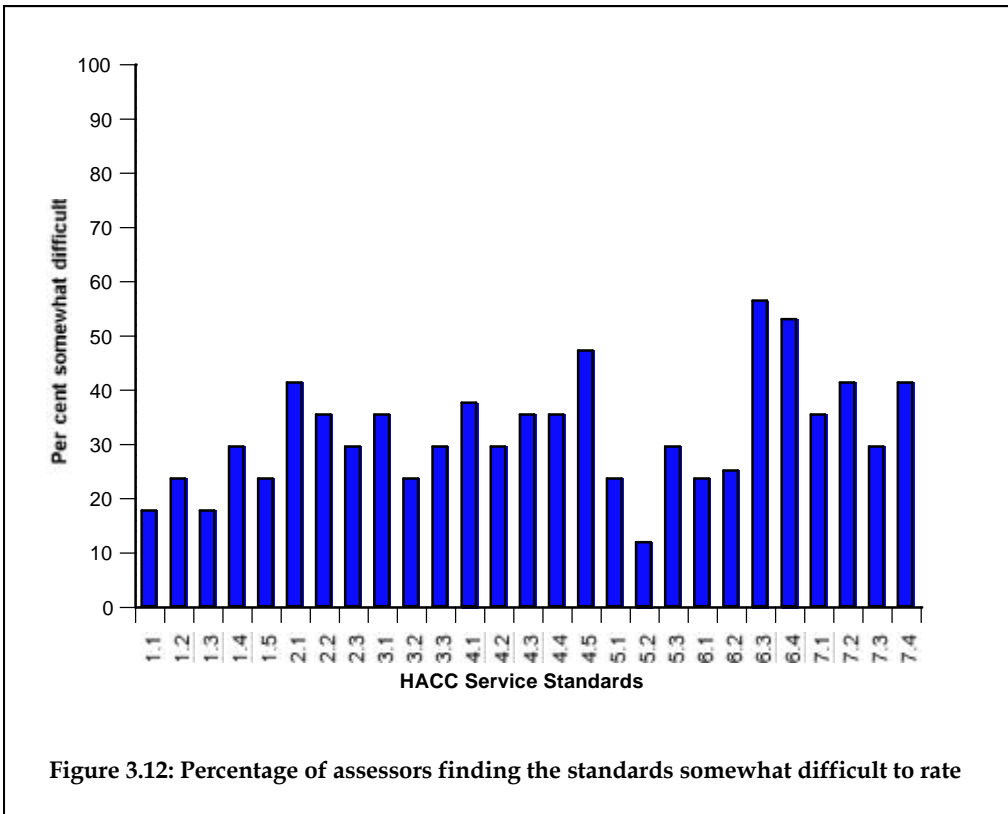
3.5.2 Assessor views on the difficulty of rating standards

Difficulty of rating the standards

An Assessment of Review Process survey was distributed to assessors after they had conducted their assessment interviews, with 17 returning completed Instruments. Assessors were asked to indicate how difficult they found each of the standards to rate using a three-point scale: 1 (*not at all difficult*); 2 (*somewhat difficult*); or 3 (*very difficult*). In general, assessors did not find the standards difficult to rate. Averaging over standards, 64% of assessors found the standards not at all difficult to rate, and only 4% found them very difficult. Given that this was their first encounter with appraising agency performance against the standards, these results are very encouraging.

Where problems occurred for assessors in deciding on how to score agencies against particular standards these were more likely to be described as making the rating process somewhat difficult rather than very difficult. The standards most frequently considered very difficult to rate were Standard 3.2 (Consumers receive services from agencies that adhere to accountable management practices), Standard 7.2 (Consumers know of their rights to use an advocate) and Standard 7.3 (Consumers know about advocacy services— where they are and how to use them). However, these standards were considered very difficult to rate by only three of the 17 assessors who responded to the survey. Standard 3.2 covered a range of issues relevant to accountable management practices without clearly specifying evidence that assessors should sight to determine the rating. The breadth of the standard left assessors unsure that they had adequately covered all of the relevant factors to arrive at a correct rating decision. The standards under Objective 7 (Advocacy) were found to be difficult to rate without knowledge of consumer experience in this regard. A further complicating factor in the task of rating against this standard was the lack of consistent agency practice in recording the involvement of advocates, particularly informal advocates. It was unclear to assessors what role and responsibilities an agency should undertake when requested by their consumers to act as advocates.

Figure 3.12 displays the proportion of assessors who considered the standards to be somewhat difficult to rate. The standard most frequently considered somewhat difficult to rate was Standard 6.3 (Services are modified as a result of ‘upheld’ complaints). Just over half the assessors considered this standard somewhat difficult to rate. As noted earlier, it was difficult for assessors to find evidence to contradict the statements made by agencies against this standard. Complaints not upheld were not necessarily recorded and reported by the agency. Consumer input reporting the outcome of complaints would be required to adequately assess this standard.



Standard 6.4 (Each consumer receives assistance, if requested, to help with the resolution of conflict about a service that arises between the frail elderly person or younger person with a disability and his or her carer) was considered somewhat difficult to rate by around half of the assessors. One assessor considered this standard very difficult to rate. Assessors questioned whether it was appropriate to apply this standard in the same way to all agencies.

Standard 4.5 (Consumers receive services which include appropriate coordination and referral processes) was also considered somewhat difficult to rate by around half the assessors. Like Standard 3.2 (Consumers receive services from agencies that adhere to accountable management practices), this standard contained two questions relating to

the standard. Assessors expressed some difficulty assigning one rating when the agency may have satisfied one question but not the other.

As noted earlier, where assessors experienced difficulty deciding on ratings, it was also more likely to be the case that agencies would disagree with the assessors' rating. Agencies were not given the assessor guidelines, however. The reliability of the Instrument is tested when assessor ratings are compared with the ratings of another individual who has been similarly trained and given the same information about the assessment process. The rater reliability study presented in the next section addresses this issue.

3.5.3 Rater reliability study

The project team members conducted reliability assessments for 25 agencies. Fifteen of these involved a visit to agencies that had undergone either a joint assessment, self-assessment with verification or peer review assessment, and 10 were done as desk audits at the Institute from Instruments and documentation sent in by agencies who had undergone self-assessment but who had also been part of a sample selected later for verification by a government officer. The examination of reliability undertaken here addresses the overall consistency between ratings given by assessors and those given by a reliability rater. This consistency is compared with consistency between ratings that agencies gave themselves and ratings given to them by assessors, and between ratings given by agencies and those given by a reliability rater.

Reliability assessed by desk audit

One member of the project team conducted desk audits for 10 agencies. These agencies had completed the Instrument as a self-assessment, with a later verification interview with a government project officer (assessor). The auditor read through the agency's Instrument and the documentation supplied and determined ratings for the agency against the 27 standards, without further consultation with the agency. The desk auditor did not view the ratings given for the agency by the assessor.

The inter-rater reliability coefficient was 0.56 (the correlation between the assessor Instrument Scores and the reliability rater's Instrument Scores). The third column of Table 3.11 lists the proportion of agreement on ratings for each standard between the assessor and the desk auditor. On average, the assessor and desk auditor agreed 47% of the time. At worst, exact agreement between the assessor and desk auditor occurred for only 22% of agencies in this reliability sample.

The first column of Table 3.11 shows the proportion of agreement between the agency and the assessor and the second column of this table shows the agreement between the agency and the desk auditor. The highest level of agreement occurred between assessors and agencies' own ratings (72% agreement on average, with complete agreement on a standard across agencies occurring more than 50% of the time, except for Standard 1.5 where agreement occurred in only 38% of cases). Agreement between the agency and the desk auditor occurred on average 52% of the time, with the lowest level of agreement on a standard being 10% of the sample (i.e. agreeing with only one agency out of the 10). The lowest level of agreement occurred between the assessor and the desk auditor, (on average 47% of the time).

Table 3.11: Per cent of agreement between ratings given by the agency, the assessor and the desk auditor (n = 10)

Standard	Agency and assessor	Agency and auditor	Assessor and auditor
1.1	78	80	78
1.2	56	60	67
1.3	67	10	22
1.4	56	50	33
1.5	38	33	44
2.1	63	50	38
2.2	67	50	33
2.3	63	56	67
3.1	67	80	44
3.2	100	67	50
3.3	63	67	56
4.1	78	30	33
4.2	100	90	100
4.3	100	44	33
4.4	88	33	33
4.5	75	63	67
5.1	63	33	22
5.2	63	56	67
5.3	88	44	44
6.1	50	44	44
6.2	86	38	22
6.3	75	33	22
6.4	100	63	38
7.1, 7.2, 7.3	63	44	50
7.4	67	75	57
<i>Mean</i>	72	52	47

These results suggest that desk audits of agency Instruments have poor reliability when compared with the ratings of an assessor who has conducted a visit. Agreement between a desk auditor and either an agency or a visiting assessor will, on average, occur only half of the time. The probability of exact agreement between ratings occurring by chance is one in three, or 33%.

Reliability assessed by visit

A member of the Institute conducted reliability visits to 15 agencies. Five of these agencies had undergone a joint assessment, five had undergone a self-assessment with verification, and five had undergone a peer review assessment. Prior to the visit, the reliability rater read through the agency's Instrument (including their self-ratings) and the documentation supplied. Additional information required to score agencies was obtained during interviews with the agencies. This method was applied to all 15

agencies visited, regardless of the type of assessment they had undergone initially. The reliability rater did not view the ratings given to the agency by the assessor.

Table 3.12: Per cent of agreement between ratings given by the agency, the assessor and the visiting reliability rater (n = 15)

Standard	Agency and assessor	Agency and rater	Assessor and rater
1.1	92	93	92
1.2	77	73	62
1.3	85	67	62
1.4	92	93	85
1.5	77	67	69
2.1	62	60	69
2.2	62	67	62
2.3	85	93	75
3.1	85	64	62
3.2	69	80	85
3.3	69	80	62
4.1	77	93	77
4.2	92	80	77
4.3	75	71	77
4.4	82	71	82
4.5	69	80	77
5.1	67	64	54
5.2	85	67	77
5.3	77	80	62
6.1	62	60	69
6.2	92	83	92
6.3	100	80	75
6.4	77	73	46
7.1, 7.2, 7.3	85	53	62
7.4	83	79	69
Mean	79	75	71

The inter-rater reliability coefficient was 0.85 (the correlation between the assessor's ratings against the standards and the reliability rater's ratings). The third column of Table 3.12 lists the proportion of exact agreement on a rating between the assessor and the reliability rater. On average, the assessor and visiting reliability rater agreed 71% of the time. At worst, exact agreement between the assessor and visiting reliability rater occurred for only 46% of agencies in this reliability sample. For only two standards (5.1 and 6.4) did the level of agreement fall below 60%.

Column one of Table 3.12 shows the proportion of agreement between the agency and the assessor, and column two shows the agreement between the agency and the reliability rater. The highest level of agreement occurred between assessors' and agencies' own ratings (79% agreement on average, with complete agreement on a

standard across agencies occurring at least 62% of the time). Agreement between the agency and the visiting reliability rater occurred on average 75% of the time, with agreement on a standard across agencies occurring at least 53% of the time. The lowest levels of agreement occurred between the assessor and visiting reliability rater.

These results suggest that for assessments involving visits, the Instrument has an acceptable level of inter-rater reliability. Desk audits did not provide an acceptable level of inter-rater reliability. It should be noted that the reliability assessments were undertaken by independent raters without industry experience. From this perspective, our method provides an extremely conservative measure of rater reliability because it relies upon the Instrument providing a guide to raters without assuming prior experience. With this in mind, it appears that the consensus that is reached during discussion between an agency and someone rating them is more influential in gaining consistent ratings than simply using the Instrument as a guideline to scoring. That the agency and assessor ratings are in agreement most of the time is not surprising, however, given that many assessors indicated that they had shared the information in their guidelines with agencies during the assessment.

3.6 Summary

3.6.1 Findings

- Most frequently, agencies received ‘met’ ratings against standards, although there were some standards that could be identified as having substantially more ‘not met’ and ‘partly met’ ratings than others. Standards under Objective 7 (Advocacy) and Standard 6.4 fell into this latter category.
- There was a very high level of agreement among service providers that all of the standards and their performance information were clear. On average, standards were considered clear by 95% of service providers.
- There was a very high level of agreement among service providers that all of the standards and their performance information were desirable. On average, standards were considered desirable by 99% of service providers.
- Service providers were somewhat less inclined to agree that the standards were practical, although the overall level of support remained high. On average, standards were considered practical by 91% of service providers.
- Service providers were also somewhat less inclined to agree that the standards were appropriate. Nonetheless, on average, standards were considered appropriate by 94% of service providers. The appropriateness of standards was affected by the type of service, the type of client, and the location of the service in terms of rural/urban/remote.
- Agencies did not find the standards or performance information inappropriate when the assessment method involved agencies completing the Instrument with an assessor to assist in interpreting the standards.
- Examination of the patterns of ratings against standards revealed that some standards provided information that was measured with equivalent effectiveness

by other standards. In these cases, the redundant performance information could be dropped without adverse effect on the coverage of the Instrument.

- In general, statistical tests suggested that the standards were satisfactorily related to their relevant objectives and that ratings against individual standards could be added to compare the performance of agencies across the seven objectives.
- The performance of agencies against Standard 6.4 was considered to be insufficiently related to performance against other standards within Objective 6 to retain it as an indicator of performance under this objective. It was, however, sufficiently related to performance against other standards within the Instrument to be included in the overall Instrument Score.
- The objectives were found to be sufficiently distinct to indicate that they measured different aspects of service quality but were sufficiently related to justify adding the ratings for standards to form an overall measure of service quality in HACC funded agencies (the Instrument Score).
- Differences in rating between agencies and assessors were noted to come from three sources: the harshness or leniency of the individual rater; consistency between information supplied to agencies in the Instruments and the information supplied to assessors in the assessor guidelines; and the ability of assessors to verify the information supplied by agencies against standards. Exact agreement on ratings between agencies and assessors was moderate, being on average 66%.
- The concurrent validity of the Instrument was supported by the correlation between the global appraisal of quality and the summed standards ratings, represented by the Instrument Score. From the appraisal of assessors, the correlation between Instrument Scores and an overall appraisal of performance was 0.74. From the appraisal of agencies, the correlation between Instrument Scores and an overall appraisal of performance was 0.64.
- Standards with the weakest validation against the global assessment of quality service were those concerned with matters of release of personal information and access to personal information under Objective 5. Standards with strong validation with this measure included those related to accountable and competent management (Standards 3.1 and 3.2), those related to the provision of services to special needs groups (Standards 1.3 and 4.3) and a standard related to service delivery/ care plans tailored to consumer need (Standard 4.2). Those standards with strong validation with this measure also included those that service providers had indicated to be impractical, inappropriate or unclear (in particular, Standard 3.2 and Standard 6.4).
- Flexibility was requested of assessors in rating agencies against the standards by asking them to apply an 80/20 rule. This was suggested to have led to some inconsistency in ratings. Nonetheless, it remains important to avoid overly prescriptive directions for appraising agencies in order to maintain the applicability of the Instrument to the variety of HACC agencies. Further clarity on the weight of certain issues and the circumstances in which exceptions should be considered should ameliorate this concern.
- The three-point rating scale was criticised by some assessors as unfair from two perspectives: (1) the 'partly met' category covered a broad middle ground that

may not have discriminated between 'poor' and 'satisfactory'; and (2) there was no provision to identify those who exceed the requirements of standards.

- Some standards were not applicable to all agencies. Both assessors and agencies found it difficult to decide on ratings against these standards. Particular types of agencies were more affected by this than others. A 'not applicable' category was proposed by some assessors.
- The inter-rater reliability of the Instrument was acceptable; a coefficient of 0.85 was obtained for reliability assessments that included a visit to the agency. Exact agreement between the reliability rater and the assessor occurred, on average, 71 % of the time.
- Desk audits of agency Instruments produced the lowest reliability between raters. Agreement on ratings occurred, on average, less than half of the time.

3.6.2 Recommendations

- Guidelines for scoring should continue to be improved and address the issues that variously affect HACC agencies. This should include both assessor training and instructions for scoring tailored to specific issues such as service type and client target groups.
- The consistency between the Instrument and the assessor guidelines should be addressed by combining these two documents into one.
- The ability to verify information supplied by agencies should be improved by the changes made to the revised Instrument, and by incorporating assessor knowledge of consumer feedback into the assessment process (see Chapter 5).
- It is recommended that an Instrument be developed which specifically addresses the characteristics of Aboriginal and Torres Strait Islander people, particularly in more remote regions where indigenous culture more strongly affects service provision.
- Agencies should be clearly advised that there is no inconsistency if their service is still able to improve performance in an area where the standard is considered to be met.
- It is recommended that the three-point rating scale be retained.
- It is not recommended that a 'not applicable' category be written in to the Instrument since, for many agencies, the standards only apply with flexible interpretation. It may occur that agencies would overuse a 'not applicable' category.
- The revised Instrument (found in Appendix A) is recommended on the grounds that it minimises the amount of repetition within the instrument while still obtaining all the relevant information required to assess agencies adequately against the standards.
- Ratings against standards should be added to obtain an Instrument Score that would provide a summary measure of agency performance against the standards. The calculation of the Instrument Score is further detailed in Appendix C.
- A Compliance Indicator of agency performance against individual objectives, calculated from the relevant standards ratings, could be used to examine how

agencies perform against one objective compared to another. Objectives characterised by poorer levels of performance for a number of HACCC agencies could be identified and training and development activities appropriately targeted. The calculation of the Compliance Indicator is further detailed in Appendix C.

- The Instrument is most reliably rated by assessors who undertake a visit to the agency. The assessment of agencies should be undertaken, where possible, by verification visits.

4 Testing methods of assessment

The assessment method used in the appraisal process may influence the reliability and validity of the measure of service quality produced by the Instrument. In this section the assessment methods trialled in the pilot are compared in terms of their reliability, validity and appropriateness.

As outlined in Chapter 2, there were five methods for the assessment of agencies against the HACC National Service Standards. The most commonly used methods were self-assessment, self-assessment with verification and joint assessment. Some assessments were carried out by a peer review method and a few assessments used an independent or external assessor. Each of these methods involved a different level of interchange between the assessor and the agency. They also involved differences in the timing and context of data collection/review and the processes used to arrive at ratings. The various methods for the assessment of agencies against the standards are tested by four means in this chapter. The face validity of each method is examined by reports on the experiences of assessors. The extent to which concurrent validity is dependent on the type of assessment is tested by comparison of agency and assessor ratings and comparison of global performance appraisals and Instrument Scores. Statistical tests of inference were conducted to analyse the degree to which the assessment method affects the assessment outcome. Finally, comparisons are made of variations in rater reliability across the methods of assessment.

4.1 Face validity

4.1.1 General observations

The following comments on the apparent validity of the methods of assessment were made by assessors after they had completed the assessment process, either via the Assessment of Review Process questionnaires (described in Chapter 2, Section 2.1.2) or during debriefing sessions.

A number of observations were common across the assessment methods. Most particularly, assessors participating in all assessment methods concurred that the assessment interview was a crucial step in conducting an accurate appraisal. Assessors expressed the opinion that an in-house visit gave agencies the opportunity to challenge the process, to disagree or concur with the reviewers, to substantiate claims, and to display their efforts and achievements. During a visit, the assessor had the opportunity to pick up on agency culture and attitudes that may either confirm or belie a purely

paper-based assessment. Although it was acknowledged that agency visits were time consuming, and the need to find a balance between documentation-based and interactive assessment was recognised, assessors generally felt that the effort of visiting agencies was worthwhile and resulted in much more balanced and appropriate assessments.

In general, assessors believed that the assessment process trialled in the pilot was not sufficient to detect all difficulties in service provision. Assessors expressed the opinion that flaws in service quality may go undetected by an assessment method limited to viewing an agency's completed Instrument and documentation and discussing agency practice in an interview. This was particularly seen to be the case where an agency might not wish to disclose flaws in service quality. It was considered that obtaining data about agency performance from other sources was essential to the process. Assessors believed that a more thorough assessment would require observation of agency practice and, perhaps more importantly, that consumer input should have a place in the measurement of service quality.

Assessors expressed the opinion that the assessment process would have been made easier if agencies had received the same information as assessors regarding how ratings against the standards were derived. The Instrument which agencies received did not contain information on how to rate answers against the standards, whereas the assessor guidelines were intended to assist in rating answers. The Instrument, itself, was generally seen as too long and too repetitive but, nevertheless, was generally seen as being a well-constructed and helpful tool. Indeed, on balance, the assessment process was believed to be a positive experience for raising agency awareness of service quality issues. It was seen as important and beneficial for agencies in terms of establishing their own accountability and being able to document and substantiate how they met the standards. It was also seen to be helpful in encouraging agencies to review their own progress and evaluate the framework within which they have planned and developed their services.

The time frame of the pilot allowed agencies a minimum time of one week to complete the Instrument, although many agencies had longer than this. A common complaint to assessors was that this was not enough time, particularly where agency staff were volunteers and/or worked only part-time hours. In New South Wales, where agencies undertook the assessment more formally,¹ service providers considered that a more appropriate time to complete the Instrument with the approval of their management committees was three months.

4.1.2 Observations on individual assessment methods

The following discussion summarises assessors' comments on each of the assessment methods they that participated in. A full account of each assessment approach was given in Section 2.2.

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1. Agencies participating in the pilot in New South Wales were advised that, should the Instrument remain substantially the same after the pilot, they would not have to complete the Instrument again. They were also required to discuss the responses to the Instrument with their management committees.

Self-assessment

In this method, agencies were required to fully complete the Instrument without the assistance of an assessor, but knowing that a proportion of agencies would be randomly selected for a verification interview.

The majority of agencies which undertook a self-assessment did not participate in an assessment interview. Assessors who conducted interviews with the 14% of the self-assessed agencies in New South Wales and 50% of the self-assessed agencies in the Australian Capital Territory agreed that verification visits were important to clarify and explore issues, to provide support and education and to cooperatively develop an effective forward action plan.

Agencies undertaking self-assessment received no assistance in completing the Instrument other than the short guide to scoring outlined on page 12. Assessors who conducted the random verification interviews found that agencies would have benefited from more detailed information both prior to and in the process of undertaking assessment. In at least one case, a verification interview was conducted as a joint assessment because of the agency's difficulty in completing the Instrument. Conversely, some agencies indicated to assessors that the verification interview was unnecessary since it effectively required them to undertake assessment twice – once in completing the Instrument and once in reviewing it with the assessor. This type of assessment may be most effective when tailored to the capacity of the agency to complete the Instrument.

Self-assessment with verification

The self-assessment with verification method required agencies to complete the Instrument prior to the verification visit, but the ratings were considered to be draft ratings. Final ratings were then reached after discussion with the assessor. Assessors involved in self-assessment with verification did not receive completed agency Instruments before attending the assessment interview. Assessors generally believed that assessment visits would have been more constructive and efficient if they had the opportunity to view completed Instruments prior to this meeting. An advantage of the self-assessment with verification method was that agencies were extremely well prepared and had thoroughly completed the review, making the process less time-consuming for the assessor.

Joint assessment

In joint assessments, agency staff completed the required performance information and assembled relevant documentation prior to the visit, but did not rate their performance against the standards prior to the assessment visit.

Joint assessments were found to be very useful for service providers who were unfamiliar with the requirements of service appraisals. New agencies and those operated by staff with limited experience of such procedures were believed to have benefited most from the intensive and collaborative contact with a government officer that a joint assessment offered.

A disadvantage of joint assessment included the length of time required for the whole assessment process, particularly where there were time constraints on both parties. Estimates of the time required to complete a joint assessment varied from 3 hours to 7.5 hours, and in one case, 15 hours including travel time. Joint assessments were more time consuming for assessors because agencies had done less preparation work. In some cases this was understandable because agencies were unsure of how to prepare, but where agencies were well able to complete the Instrument a joint assessment was viewed as unnecessarily time consuming for assessors.

The majority of assessors using joint assessment were government officers whose responsibility it was to liaise regularly with the agencies they assessed. Some concern was raised by these officers that they might have been too close to the agencies to be sufficiently objective. Officers expressed some difficulty in coming down hard on agencies with good intentions who may have failed to fully satisfy standards through inexperience rather than through neglect or ill-intent. As stated elsewhere in this report, however, understanding the context in which an agency is operating and the history and circumstances of its development can be an advantage in assessing how a service is most appropriately delivered and improved.

Independent or external assessor

The independent or external assessors who participated in the pilot were State government officers with extensive experience in quality measures and appraisal, but external to the HACC program. They undertook either self-assessments with verification or joint appraisals. These assessors undoubtedly benefited the assessment process by bringing their experience to the quality appraisal interview. The small number of appraisals undertaken by independent assessors did not, however, allow for any viable statistical testing of their effect on the appraisal process.

According to these assessors, their lack of familiarity with the services they appraised was a disadvantage. Some familiarity was seen to be necessary so as not to be too prescriptive. For example, knowledge of local service provider networks is of particular relevance to the assessment of HACC agency performance against standards relating to advocacy, referral, or provision of services to special needs groups. An independent or external assessor may not possess such knowledge.

One of the independent assessors was from the State head office. This officer speculated that the anxiety or defensiveness of the agencies may have been increased by being visited by someone from head office rather than a familiar regional representative. Counterbalancing this was the advantage of objectivity that an external assessor brought to the assessment interview. A suggested alternative was that an external evaluation officer could assist a regional government officer in conducting assessments. Such a procedure may be particularly beneficial in circumstances where the appraisal process is expected to be unusually complex or problematic.

Peer review assessments

Peer review assessments were conducted by staff of other HACC agencies, employing either self-assessments with verification or joint appraisals (in the Northern Territory) or desk audits (in South Australia).

There was general agreement that the consultative and interactive aspects of the peer review process were worthwhile and positive. Assessors agreed that the process of peer review had the added value of promoting sharing of information, expertise and practices between agencies and encouraging agencies to learn from the experience of their peers. It also assisted in the development of stronger service networks through awareness of other service providers and participation in a cooperative process of service quality improvement. The agencies represented at the debriefing session stated that they were more comfortable with one of their industry colleagues evaluating them, rather than an outside consultant, because of the possibilities for sharing information and maintaining the positive, collaborative and helpful feel of the exercise.

On the other hand, the resources needed to complete an assessment and to participate in the review process were of concern to agencies participating in peer review. Small agencies and agencies in rural and remote areas were seen to be at a particular disadvantage in this regard. It was noted that, regardless of enthusiasm, small agencies do not have the capacity (in terms of either time or people) to participate in the process at the same level as do larger agencies. The ability to gain from the feedback and quality development aspects of the review was also seen as difficult for rural and remote agencies. Not only was it very time consuming to conduct peer reviews of these agencies (and vice versa), but the lack of other agencies in the area would mean that there would be little available support to improve service provision.

Service providers who had acted as assessors agreed that it was very difficult to evaluate the performance and quality of another agency without conducting a visit to the agency. In conducting the peer review process, agencies concurred that it would have been most effective to use the following method:

- review documentation which had been supplied by the agency with the Instrument;
- have a telephone conversation with the agency to discuss issues and make a time for a face-to-face interview; and
- conduct an agency visit of some duration to clarify points, substantiate claims and to get a general impression of the service.

4.2 Concurrent validity

The concurrent validity of the Instrument was examined in Chapter 3, Section 4. On average, exact agreement between assessors and agencies regarding ratings against each standard was 76%. The concurrence between the assessor's overall appraisal of agency service quality and the Instrument Score was measured as a correlation of 0.74. The equivalent correlation for agency-determined scores was 0.64. In this section, further statistical comparisons are made to test whether the assessment method affects the concurrent validity of the Instrument. Firstly, comparisons are made of the convergence of global appraisals and Instrument Scores across assessment methods. Secondly, comparisons are made of agency and assessor agreement on ratings across assessment methods.

4.2.1 Validation against a global assessment of quality

As described in Chapter 3, assessors and agencies were asked to give the agency they assessed an overall appraisal of service quality according to a four-point scale from 1 (*fails to meet the HACCC National Service Standards*) to 4 (*exemplary*).

Table 4.1 shows the correlations between global assessments and Instrument Scores according to both assessors and agencies for the five assessment methods trialled in the pilot. The numbers of cases used to calculate each correlation are listed. These numbers are very small for some assessment methods, indicating that some degree of caution should be exercised when interpreting the statistics. Numbers are limited by the size of the sample of agencies in each assessment method and by the failure of some agencies or assessors to complete the global appraisal question. The number of cases available for the independent/external assessor method are too small to consider in comparison to the others and will not be discussed.

Table 4.1: Correlations between global assessments and Instrument Scores by method of assessment

Informant	Self-assessment	Self-assessment with verification	Joint assessment	Peer review	Independent/external rater
Assessor	0.88** (n = 13)	0.59** (n = 30)	0.47 (n = 9)	0.70* (n = 7)	1.00 (n = 2)
Agency	0.68** (n = 41)	0.62** (n = 17)	0.61 (n = 10)	0.70 (n = 11)	0.28 (n = 4)

*p<0.05, ** p<0.01

The highest correlations between assessors' Instrument Scores and global assessment scores occurred for peer review ($r = 0.70$) and self-assessment ($r = 0.88$). Indeed, the correlation between the assessors' global scores and Instrument Scores for self-assessment is very close to a one-to-one correspondence. These results suggest that, for these methods, the same or similar appraisal occurs whether assessors rigorously score each standard or simply form an overall opinion of the agency based on their replies. This result throws some doubt on the validity of these assessment methods, since it suggests that ratings against standards may be heavily influenced by the assessors' general impression. According to the peer review method, ratings were determined without visiting the agency and were based solely on written responses to the Instrument and provided documentation. According to the self-assessment method, agencies had fully completed the Instrument on their own without foreknowledge of whether they would receive a verification visit, and assessors received Instruments prior to their visit to the agency, allowing them to form an opinion of the agency prior to the verification.

The lowest correlation between assessors' global assessments of agency quality and Instrument Scores occurred for the joint assessment method ($r = 0.47$). This method involved the most collaborative process for reaching decisions about ratings. The assessors' overall opinion of the agency's service quality has least relation to the ratings the agency received in the Instrument. This may suggest that in this collaborative process assessors were most likely to have been affected by their communication with the agency. They may have been more likely to take into account the special and

individual circumstances of the agencies. As assessors expressed in debriefing sessions (see Section 4.1.2), they sometimes found it difficult to be as objective as the Instrument required, making allowances for agencies such that the ratings they gave were less representative of how they actually felt the agency was doing.

The correlation between assessor-determined Instrument Scores and global assessments was $r = 0.59$ for the self-assessment with verification method. The size of this correlation indicates concurrent validity between the two scores without being so high as to suggest that assessor opinion of the agency is synonymous with the scores that they achieve for the standards. It is also not so low as to suggest that the Instrument Scores do not represent a reasonable measure of assessors' opinion of agency service quality.

The correlation between agency-determined Instrument Scores and agency global appraisal scores fell between 0.6 and 0.7 for all assessment methods (with the exception of independent/external assessor where the number in the sample was too low to obtain a reliable statistic for this comparison). The size of these correlations suggests that agency ratings may be influenced by their own opinions of the general quality of their service. This relative consistency across methods and the high correlations are to be expected since, initially, all agencies received an equivalent minimal amount of information regarding how to score themselves against the standards. Hence there is no appreciable reason why the correspondence between these scores would differ greatly across methods.

There is some evidence, however, that discussion with assessors that occurred during the assessment process was associated with some difference between agencies' individual ratings and agencies' global appraisals. The correlations for self-assessment with verification and joint assessment using agency-determined ratings ($r = 0.62$ and $r = 0.61$ respectively) were slightly lower than those for agencies which experienced peer review or self-assessment ($r = 0.70$ and $r = 0.68$ respectively). It may be surmised that the agency's own opinion of the quality of its service was somewhat less influential in the decision about appropriate self-ratings when they expected to have to take into account the views of an assessor. In both peer review and self-assessments, agencies had no contact with assessors when fully completing the Instrument and, furthermore, did not believe they would necessarily have verification interviews.

4.2.2 Agency and assessor agreement on ratings

In this section individual standard ratings given to agencies by assessors are compared to agency self-ratings for each method of assessment. As described in Chapter 3, Section 3.4.1, agreement means that if the assessor rated their agency 'met', the agency also rated it as 'met'; or if the assessor rating was 'partly met', the agency rating was also 'partly met'; or if the assessor rating was 'not met' the agency rating was also 'not met'. Table 4.1 lists the average percentage of exact agreement between agencies and assessors for each assessment method. Again, the independent/external assessor method is excluded from consideration due to the low sample size.

Table 4.2: Average proportion of exact agreement on ratings between the assessor and the agency for each assessment method

Self-assessment	Self-assessment with verification	Joint assessment	Peer review	Independent/external rater
71.4% (n = 15)	81.3% (n = 23)	92.6% (n = 10)	59.8% (n = 18)	94.0% (n = 4)

Joint assessment

In a joint assessment both the agency and the assessor (government project officer or equivalent) completed their ratings against the standards in the Instrument and on Ratings Summary Forms during their meeting together. Where possible they were asked to come to an agreement about ratings. The highest proportion of agreement between agencies and assessors occurred for this assessment method. On average, agencies and assessors agreed on the ratings for standards 93% of the time (see Table 4.2). Table 4.3 shows the mean rating given to agencies for standards for each assessment method. The average rating across all standards according to agencies was 1.71 (out of a maximum possible score of 2); the average rating across all standards according to assessors was 1.73 (see Table 4.1). A test of the significance of this result indicated that there was not a significant difference between agency and assessor average ratings ($t = -0.31$). This result is to be expected given the aims of joint assessment.

Table 4.3: Average agency rating, average assessor rating by assessment type, and significance test of the difference between average scores

Assessment type	Agency rating (mean)	Assessor rating (mean)	Significance test	
			t-test	probability
Joint assessment	1.71	1.73	-0.31	NS
Self-assessment with verification	1.64	1.68	-1.48	NS
Self-assessment	1.55**	1.43	1.85	0.01
Peer review	1.64	1.20	3.21	0.01
Independent/external rater	1.67	1.64	0.14	NS
Total sample*	1.63	1.50		

NS = Not Significant.

* Where both Instrument and Ratings Summary Form were received.

** Agency mean for the sample of self-assessed agencies which received a random verification visit. The mean for all self-assessment agencies was 1.64.

Self-assessment with verification

In a self-assessment with verification the agency completed their ratings against the standards in the Instrument prior to meeting with the assessor, and the assessor completed their ratings against the standards in the Ratings Summary Form during the meeting with the agency. Self-assessment with verification, while less collaborative than the joint assessment method, also showed a high level of agreement between agencies

and assessors. These two parties agreed on ratings an average in 81% of cases. The average rating across all standards according to agencies was 1.64; the average rating across all standards according to assessors was 1.68. This difference was not significant ($t = -1.48$).

Self-assessment

In the self-assessment method, the agency completed the Instrument, including their ratings, and sent it to the Institute. Agencies were informed that a small proportion of Instruments would be verified by a visiting government officer but were not informed whether they would be part of this sample until after they had sent in their Instrument. The average rating across standards for all agencies (i.e. with and without verification visits) which completed the Instrument as a self-assessment was 1.64.

The statistics presented in Tables 4.2 and 4.3 are for the sample of agencies which received verification visits. For this sample, government officers from the Australian Capital Territory and New South Wales were sent completed agency Instruments and supporting documentation. They subsequently completed the Ratings Summary Forms during meetings with the agencies. In the self-assessment method, agencies and assessors agreed on ratings an average of less than three-quarters of the time (71%). Table 4.3 shows that self-assessing agencies (with random verification visits) were less likely to agree with their assessors, rating themselves higher than did their assessors. The average rating across all standards according to agencies was 1.55; the average rating across all standards according to assessors was 1.43. This difference was significant ($t = 1.85, p < 0.01$).

Peer review

Agencies assessed under the peer review method completed the Instrument, including their ratings, and sent it to a peer review team. This review team completed the Ratings Summary Form on the basis of written responses and documentation supplied with the Instrument. The least agreement occurred for this assessment method, in which agencies and assessors did not work together at any stage in determining ratings. Agreement occurred on average only 60% of the time. Table 4.3 shows that peer-reviewed agencies rated themselves higher than did their assessors. The average rating across all standards according to agencies was 1.64; the average rating across all standards according to assessors was 1.20. This difference was significant ($t = 3.21, p < 0.01$).

Independent or external assessor

A small number of assessments were undertaken by independent assessors or external assessors. Table 4.3 shows that agencies gave themselves similar ratings to those the assessor gave them. The average rating across all standards according to agencies was 1.66; the average rating across all standards according to assessors was 1.64. This difference was not significant ($t = 0.14$).

4.3 Inferential tests of the difference between methods

If the assessment methods are each equally effective at reflecting the true service quality of agencies then the Instrument should produce the same average performance scores across each assessment method (within a degree of error to be expected by chance). Conversely, if differences greater than chance occur between the average performance of the agencies in each assessment type, then this difference could be proposed to be the result of factors associated with the assessment method. In this section significance tests are conducted of the differences between the means scores for each assessment method.

The rating for agencies in each assessment method, averaged over standards, is presented in Table 4.3. For all of the agencies involved in the pilot, for whom both Instruments and Ratings Summary Forms were received ($n = 74$), the average rating across standards according to agencies was 1.63 whereas the average rating across standards according to assessors was 1.50 (out of a maximum possible score of 2).

As Table 4.3 indicates, both agencies and assessors rated agencies in the joint assessment method higher than agencies overall. This difference was significant for both the agency joint assessment rating compared with the average agency rating ($t = 1.80, p < 0.05$) and for the assessor joint assessment rating compared with the average assessor rating ($t = 4.09, p < 0.005$). It is possible that the collaborative approach of this method may have resulted in agencies achieving scores higher than average and, considering the results of Section 4.2, possibly higher than their actual performance warranted.

States which carried out joint assessments and self-assessments with verification were asked to select agencies for each assessment type such that agencies were equally likely to have a joint assessment as a self-assessment with verification. It can be assumed, then, that there is no reason for joint-assessed agencies to have significantly better performance against the standards than agencies undergoing self-assessment with verification. The information sharing and cooperative process of the joint assessment may have influenced both agencies and assessors to take a more lenient approach.

Agencies which were assessed by self-assessment with verification did not rate themselves significantly higher or lower than the average for agencies in the total pilot sample. However, the assessors who conducted the verifications rated these agencies significantly higher than the average for all agencies (assessor ratings) in the pilot sample ($t = 3.71, p < 0.005$). The opportunity for information exchange between agency and assessor may have been responsible for the higher than average ratings against the standards by assessors.

Agencies undertaking self-assessment (with random verification visits) did not rate themselves significantly differently from other agencies in the pilot (the average ratings were statistically equivalent for the self-assessment group and the total sample ($t = 1.38, p < 0.10$)). Likewise, the assessors of these agencies also rated them similarly to other agencies in the pilot ($t = 1.37, p < 0.10$).

The average rating given by peer reviewers was significantly lower than the average rating given by assessors in general ($t = 5.17, p < 0.005$). The self-ratings of agencies in the peer review sample were not significantly different from the average for all agencies

in the pilot. There is no reason to believe that the performance of agencies which underwent a peer review would be substantially poorer against the standards. However, there is reason to believe that the paper-based reviews conducted by peers would not be as accurate as other methods of assessment that involved more direct contact with agencies.

The agency assessments performed by independent/external assessors were not found to be significantly different from average agency or assessor ratings. The small number of cases in this assessment method precludes drawing firm conclusions from this data.

This analysis reveals that there are significant differences in the appraisal outcomes when different assessment methods are used. Where no interview with the agency occurs in the process of assessment, assessors rate agencies lowest against the standards. Agencies obtain significantly higher ratings from assessors when assessment incorporates an interview with the agency and assessment is undertaken collaboratively, as in a joint assessment.

A number of questions are raised by the finding that the appraisal outcomes for self-assessment with verification are higher, on average, than the appraisal outcomes for the randomly verified self-assessments. For the random verification visits, assessors had received Instruments prior to their visit, allowing them to form a preliminary opinion of the agencies' performance. This was not the case for the self-assessment with verification method. This preliminary opinion may have made assessors less inclined to make allowances for the individual circumstances of agencies. There may also have been effects that flowed from the method of informing agencies that only a sample would be verified. In this case, agencies could not count on receiving the assistance of an assessor if they could not complete the Instrument. They were required to sort through all difficulties unaided. The verification process was thus less collaborative and one that may have seemed to some to be more like having an assessment twice rather than receiving valued assistance and cooperation in achieving performance goals. From the assessor's position, the random verification method may not have placed them in a position to cooperatively assist agencies, but rather required them to check ratings in a more 'police-like' manner.

4.4 The effect of assessment type on rater reliability

The method of assessment may have affected the reliability of the Instrument. An examination of rater reliability is undertaken for joint assessments, self-assessments with verification, and peer review, although results should be interpreted with some caution since only five assessments were available for analysis in each assessment type.

The reliability of ratings given by independent/external assessors is not examined due to the low number of these assessments undertaken and the difficulty of performing reliability interviews in a sufficient number of these to enable comparison.

The inter-rater reliability for agencies which undertook self-assessment but received a verification visit was examined in the previous chapter. Desk audits of these

Instruments were compared with assessor ratings, and agreement occurred less than half the time.

When inter-rater reliability is assessed by a visiting reliability rater, the highest reliability between raters occurred for those agencies which had undertaken a self-assessment with verification. Agreement between raters averaged 86% across standards. (For this method, two Ratings Summary Forms were not returned by assessors, leaving a sample of only three. Conclusions must therefore be tentative only.)

For joint assessments, the reliability between the visiting rater and the assessor, as indicated by the average agreement, was moderately high (79% averaged over all standards, with agreement as low as 40% on some standards).

Of the reliability assessments made by visiting agencies, the agreement between the reliability rater and the assessor was lowest for agencies assessed by peer review (agreement averaged 62% across standards).

4.5 Summary

4.5.1 Findings

- Assessors involved in all assessment methods highly recommend the inclusion of an agency visit in the appraisal process. Analyses of the peer review method indicate that a purely paper-based review is not as reliable, and does not produce as much agreement between assessors and agencies, as one involving more direct contact.
- Assessors believed that, while the assessments undertaken using the Instrument and visiting agencies were very beneficial, they would not necessarily reveal all problems in service quality, particularly where agencies did not want to reveal such flaws. Information about service quality from other sources was also necessary, with consumer input being one very important source.
- If there is to be a choice between assessing an individual agency via the joint assessment or self-assessment with verification method, the decision should take into account the ability of an agency to adequately complete the Instrument without assistance.
- Assessors considered that agencies would have benefited from additional information (such as that contained in the assessor guidelines) to help them decide on their own ratings.
- Agencies undertaking self-assessment would have benefited from a 'preparation' period, to provide education and training about the standards, the Instrument and the assessment process.
- The joint assessment method was seen as particularly beneficial to new or small agencies – but was seen as unnecessarily time consuming for assessors in most cases.
- Assessors considered that the self-assessment with verification method would have been less time consuming and more productive if assessors had received the agencies' completed documentation prior to the visit.

- The peer review process was seen to have great potential benefit to agencies by encouraging closer service-provider networking and information sharing. However, the resources needed to complete a peer review process were considered critical, and sometimes prohibitive, for some agencies – particularly small agencies and agencies in remote areas operating under adverse conditions.
- While the use of an external or independent assessor was seen to offer objectivity to the assessment process, familiarity with services and their environments was also seen to be important in determining agency performance.
- Assessors' overall appraisals of agency performance were in closest correspondence to the Instrument Scores for the self-assessment and peer review methods, where assessors and agencies engaged in minimal dialogue in the determination of ratings. The correspondence was such that individual standards ratings may have little validity if too heavily influenced by the assessor's general view of the quality of the agency's service. Ratings by these methods were also harshest. In joint assessments, where assessment dialogue was at a maximum, correspondence between overall appraisals and Instrument Scores was at its lowest, and assessors reported difficulties in being objective. Instrument ratings were highest by the joint assessment method. Self-assessment with verification was found to have the most acceptable level of concurrent validity between assessors' overall appraisals and Instrument Scores.
- Agreement on ratings between agencies and assessors was highest for agencies in which a visit to the agency by the assessor was an integral part of the assessment. The greatest agreement between assessors and agencies regarding ratings occurred for joint assessments. There was no significant difference between the ratings of agencies and assessors in the self-assessment with verification sample. Agencies which undertook self-assessment (with random verification visits) disagreed significantly with their assessors. The lowest agreement occurred between agency ratings and reviews done by documentation only (with no assessor visit).
- Although limited by a small sample size, a comparison of rater reliability between the joint assessment, self-assessment with verification and peer review methods revealed that the self-assessment with verification method had the highest rater reliability and peer review had the lowest.

4.5.2 Recommendations

- The Instrument should be revised to incorporate appropriate information from the assessor guidelines. This revised version can be found in Appendix A.
- It is recommended that the assessment process include a visit to the agency. In particular, the self-assessment with verification model presents as the method most likely to produce valid and reliable Instrument Scores.
- Peer review is not recommended unless the method is modified to include face-to-face contact with agencies.
- Joint assessment, while of considerable value to those agencies experiencing difficulty interpreting and completing the Instrument for the particular circumstances of their agency, should not be considered as optimal for providing reliable or valid Instrument Scores.

- A flexible approach to the selection of the most appropriate appraisal process can be adopted where necessary, with assessment methods requiring more intensive resource allocation being targeted on those agencies identified as needing most attention.
- Training for agencies in completing the Instrument and the appraisal process should be given to agencies before assessment begins.
- Wherever possible, assessors should receive copies of the agency's documentation (i.e. completed Instrument, ratings and supporting documentation) before making a visit to the agency. The Instrument received prior to the visit should not, however, be taken as the basis for determining the agency's performance appraisal. Ratings should be determined during the assessment visit with the agency's input so that the assessment process is one of consultation and education rather than 'police-like' auditing and double-checking.

5 Testing the consumer feedback Instrument

While the key task of the consultancy was envisaged as the refinement and testing of the HACC National Service Standards Instrument, the Institute was also asked to provide preliminary advice on methodological issues regarding ways of obtaining valid and reliable consumer input. This task included examining the feasibility of directly incorporating consumer feedback as a quality measure within the Instrument. After discussion with the HACC Officials Standards Working Group, it was agreed that two methods of obtaining consumer feedback would be investigated: mailed surveys and telephone interviews. Other possible avenues, in particular face-to-face interviews, were excluded on the practical grounds of their resource implications. The costs associated with implementing a full-scale national quality appraisal process, which incorporated face-to-face interviews with consumers of all HACC agencies across Australia, were deemed to be prohibitive.

The characteristics of respondents of each survey method are examined to determine how representative respondents were of the HACC population. The response rate to the methods overall and to individual items within each method are examined. This has been done to assess how well the methods and survey tools used accurately represented consumer views. The problems that arose for consumers in responding to the mail survey are discussed. Finally, the extent to which consumer feedback and agency scores cross-validate one another is examined. Each question asked of respondents provided information directly related to a particular standard within the Instrument. The extent to which these replies match with agency and assessor ratings for these standards is examined and the issues affecting this match are discussed.

5.1 Profile of respondents

5.1.1 Telephone interviews

This section presents an overall profile of the 75 consumers responding to the telephone interview survey from the five South Australian agencies involved in this aspect of the pilot. Further details of the sample and survey procedures were reported in Chapter 2. In 53% of cases the respondents were service recipients, with the remainder being carers of service recipients. Seventy per cent of those interviewed were female. The age profile of respondents is shown in Table 5.1. The largest proportion of consumers responding to the survey were in the 75- to 84-years age group. Seven per cent of respondents were from a non-English-speaking background and none reported being of Aboriginal or

Torres Strait Islander descent. Seventeen per cent reported financial disadvantage. Five per cent lived in a rural or remote area. Thirty two per cent were caring for someone with dementia.

Table 5.1: Age of HACC telephone interview respondents

Age group	Number	Percentage
0–54	13	17.3
55–64	15	20.0
65–74	16	21.3
75–84	28	37.3
85+	3	4.0
Total	75	100.0

5.1.2 Mailed surveys

This section presents an overall profile of the 431 consumers responding to the mailed survey from all 26 agencies involved in this aspect of the pilot. Further methodological details were provided in chapter 2.

In 76% of cases the services were provided to assist the person completing the questionnaire; for 10% of respondents services were provided to help the person the respondent was caring for; and, in the remaining cases, services were provided to assist the respondent as a carer. Seventy per cent of those responding were female. The age profile of respondents is shown in Table 5.2. As for the telephone interviews, the largest proportion of consumers responding to the survey was in the 75- to 84-years age group. Eight per cent of respondents were from a non-English speaking background and two respondents (0.5%) reported being of Aboriginal or Torres Strait Islander descent. Thirteen per cent reported financial disadvantage. Sixteen per cent lived in a rural or remote area. Four per cent were caring for someone with dementia.

Table 5.2: Age of HACC mailed survey respondents

Age group	Number	Percentage
0–54	55	13.4
55–64	35	8.6
65–74	104	25.4
75–84	162	39.6
85+	53	13.0
Total	409	100.0

5.1.3 Evaluation of respondent profile

The age and sex of respondents to the mailed survey and telephone interviews can be compared to the national profile of HACC service users to verify that the samples were representative. This is particularly important for the mailed surveys since the response rate was low, and there may well be a number of important factors influencing ability or desire to respond. The age and sex profile of HACC clients nationally is presented in

Table 5.3.¹ The age and sex of telephone interviewees and mailed survey respondents are generally comparable with the national profiles of HACC service users, although there were fewer respondents to the telephone survey in the 85 years and over category than might have been expected on the basis of the HACC national client profile. This difference in age profiles is at least partially explained by the proportion of survey respondents who were neither HACC clients as a result of their own frailty nor HACC clients as a result of their caring role, but were responding as the carers of service recipients (47% of the telephone interviews and 10% of the mailed questionnaires).

Table 5.3: HACC service users by age and sex for the four-week sample period, 1993–94

Age	Females		Males		Total	
	Number	% of total sample	Number	% of total sample	Number	% of total sample
0–49	2,424	5.8	1,702	4.1	4,126	9.9
50–54	555	1.3	320	0.8	875	2.1
55–59	672	1.6	379	0.9	1,051	2.5
60–64	1,179	2.8	714	1.7	1,893	4.5
65–69	2,282	5.5	1,201	2.9	3,483	8.4
70–74	4,045	9.7	1,822	4.4	5,867	14.1
75–79	5,457	13.1	2,196	5.3	7,653	18.4
80–84	6,307	15.1	2,499	6.0	8,806	21.1
85–89	3,889	9.3	1,498	3.6	5,387	12.9
90+	1,844	4.4	668	1.6	2,512	6.0
All ages	28,654	68.8	12,999	31.2	41,653	100.0

Notes

1. Number of cases with missing data = 0
2. Data collected for one month between August 1993 and May 1994.

Nationally, there are 12% of HACC consumers from a non-English-speaking background and 3% of HACC consumers of Aboriginal and Torres Strait Islander descent. In both the telephone and mailed surveys, non-English-speaking background people are under represented. Aboriginal and Torres Strait Islander people are not represented at all in the telephone survey and their representation in the mailed survey is close to none. The method of selecting agencies for the telephone survey (by volunteer) did not facilitate collecting a representative sample in this respect. Services specific to these consumers were also not selected to participate in the mailed survey, accounting for the lower than average representation of these groups. Financial status is measured nationally as the proportion of pension recipients and 93% of HACC clients nationally receive some form of pension. In the telephone and mailed surveys, 17% and 13% respectively describe themselves as having financial disadvantage. Data are not currently available to compare the survey samples with the national profiles for those living in rural or remote areas.

1. Extracted from Jenkins A 1996. Client profiles for aged care services in Australia. Welfare Division Working Paper (no. 11). Canberra: AIHW.

This comparison indicates that the surveys did not access a representative sample of HACC consumers. One reason for this is the small sample of consumers responding and agencies engaging in the consumer feedback component of this pilot. Moreover, the mailed survey was not prepared in languages other than English as this was a preliminary test of the consumer feedback tool.

Other characteristics of consumers, unmeasured by the survey, may have affected the response rate. These would include: the illness or disability of the respondent, including memory loss and confusion; illiteracy; lack of relevance of the questions if, for instance, a service was used only once; and suspicion about the purpose and use of the information, including its effect on the agency and themselves. Some consumers reported that the length of the mailed survey was problematic. This may have been a factor in the level of non-response.

5.2 Evaluation of missing data

5.2.1 Telephone interviews

The overall response rate to the telephone interviews was 94%; interview data was not obtained from only five consumers of the 80 selected.

Table 5.4 lists the proportion of missing data against questions asked in the telephone interviews. In the interview, 27 questions were asked of all consumers and 12 additional questions were asked on the condition that they were relevant to them (this was contingent on the consumer's reply to a previous question). Non-response occurred only for questions where answers were not relevant. Only one of the participants of the 80 selected failed to complete the interview (believing the questions were irrelevant) and only two refused to participate at all. One consumer could not be contacted and one record was lost in the data transfer process. This exceptionally high response rate and the absence of missing data suggest that telephone interviews provide a very effective means of obtaining consumer feedback. These interviews had the advantage of allowing consumers to clarify the questions being asked of them, to clarify their answers to questions, and to discuss the reasons for their replies. The question as to whether very elderly consumers are less well represented than other age groups in a telephone survey is worthy of further investigation, as the size of the sample in this pilot test precludes any resolution of this issue.

Table 5.4: Proportion of missing data in the telephone consumer feedback survey

Outcome standards	Missing (%)
1.1 Consumer Outcome: Assessment occurs for each consumer.	
Did someone from the agency discuss your needs with you before they began providing services?	0
Did the agency take into account all the things you and your carer might need help with?	28
2.1 Consumer Outcome: Consumers are aware of their rights and responsibilities.	
How were your rights and responsibilities explained to you? (This would include your right to access personal information, confidentiality and privacy issues.)	0

(continued)

Table 5.4 (continued): Proportion of missing data in the telephone consumer feedback survey

Outcome standards	Missing (%)
2.2 Consumer Outcome: Consumers are aware of services available.	
How would you rate the agency in providing information about ALL of their services?	0
2.3 Consumer Outcome: Consumers are informed of the basis of service provision, including changes that may occur.	
Are you happy with the way your agency currently charges you for services?	0
Have you ever asked the agency for help and been refused?	0
Did they explain why they refused to help?	97
Were you satisfied with their response?	97
3.2 Consumer Outcome: Consumers receive services from agencies that adhere to accountable management practices.	
Does the agency provide you with help in the way they said they would provide it?	0
Do you feel that you can voice your opinions to the agency about how it is being run?	0
Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?	0
3.3 Consumer Outcome: Consumers receive services from appropriately skilled staff.	
How satisfied are you with the level of performance of the staff at the agency?	0
Have you ever been concerned about your safety or security because of the actions of agency staff?	0
4.1 Consumer Outcome: Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.	
Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?	0
How often does someone from the agency contact you to see how you are getting along?	0
4.2 Consumer Outcome: Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.	
Did the agency make a clear agreement with you about the services they would provide to you?	0
Did they tell you which services, how often you would get them, and for how long?	29
Did you agree with what they proposed?	29
If no, did you discuss this with them?	91
4.3 Consumer Outcome: Consumers' cultural needs are addressed.	
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	52
4.4 Consumer Outcome: The needs of consumers with dementia, memory loss and similar disorders are addressed.	
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	52
4.5 Consumer Outcome: Consumers receive services which include appropriate coordination and referral processes.	
Do you receive more than one service from the agency?	0
Are the services provided in a coordinated fashion?	65

(continued)

Table 5.4 (continued): Proportion of missing data in the telephone consumer feedback survey

Outcome standards	Missing (%)
5.1 Consumer Outcome: Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.	
Do you have any concerns with the way the agency deals with privacy and confidentiality?	0
5.2 Consumer Outcome: Consumers have signed confidentiality release forms.	
Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?	0
5.3 Consumer Outcome: Consumers are able to gain access to their personal information.	
Do you have any concerns about the personal information the agency might keep about you?	0
Have you ever tried to get hold of the personal information that the agency has about you?	0
Did you get the information you wanted?	97
6.1 Consumer Outcome: Consumers are aware of the complaints process.	
Has the agency informed you of what to do if you're not happy with the service you get?	0
Did the agency tell you that you can voice any concerns you have about them to outside authorities?	0
6.2 Consumer Outcome: Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution.	
Have you ever had any concerns about the help you receive from the agency?	0
Did you express your concerns with the agency staff?	97
Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?	0
Do you think that things would go badly for you if you made a complaint about the agency?	0
6.3 Consumer Outcome: Services are modified as a result of 'upheld' complaints.	
Were you happy with the way the agency responded to your concerns?	97
7.1 Consumer Outcome: Each consumer has access to an advocate of his or her choice.	
7.2 Consumer Outcome: Consumers know of their rights to use an advocate.	
7.3 Consumer Outcome: Consumers know about advocacy services where they are and how to use them.	
Did you receive any information from the agency about how you could obtain an advocate?	0
Do you feel confident that you could obtain an advocate of your choice if you needed to?	0
Has the agency provided you with any information about your right to have someone speak on your behalf (an advocate)?	0
7.4 Consumer Outcome: The agency involves advocates in respect to representing the interests of the consumer.	
Have you ever had someone speak on your behalf in relation to the services you received from the agency?	0

5.2.2 Mailed surveys

As described in Chapter 1, of 1261 consumer surveys sent out, responses were obtained from 431 consumers within the time frame of the study. This response rate of 34% suggests that the majority of consumers were unable or unwilling to complete the form. It should be noted, however, that mailed surveys traditionally have relatively low rates of return when compared to telephone and face-to-face interviews. Response rates to

mailed questionnaires are typically somewhat higher for forms which are comparatively brief and easily understood, but other factors are also important. These include whether the survey is perceived to be of some relevance or value to the respondent, and the extent to which follow-up letters are sent to the respondent reminding them to complete and return the survey form.

Some gains in the level of response may be possible as a result of a more abbreviated and refined questionnaire, and perhaps the use of a general follow-up letter sent to all respondents regardless of whether they had returned the questionnaire or not. As the Institute had no record of the individual consumers to whom questionnaires were sent, and the returns were anonymous (to protect individual privacy and confidentiality), the usual strategy of sending follow-up letters to those who failed to reply was not employed in the pilot. Nonetheless, it is anticipated that the response rate would be unlikely to increase substantially even with these modifications.

Table 5.5 lists the proportion of missing data against questions asked in the mailed consumer surveys. For questions where answers were contingent on the reply to the previous question, there occurred less missing data than in the telephone interviews. Some consumers answered these questions even where they were not relevant to them. Of the 27 questions that were relevant to all consumers, the proportion of missing data was, on average, 15%. The lowest proportion of missing data was 4% on a question concerned with assessment. The highest proportion of missing data was 30% for a question concerned with advocacy.

A substantial majority of consumers had difficulty answering questions on advocacy and on their involvement in and ability to gain information about the management of the service. Consumers indicated that they found some of these questions difficult to understand. Other consumer criticisms about this survey form were that it was too long and repetitive; that it was difficult to answer some questions as either 'yes' or 'no' or according to some of the other predefined categories; that it seemed to be trying to elicit only negative appraisals of the agency; that it was not relevant to some consumers who had used a service only once; and that it was not clear what the definition of 'financial disadvantage' was. Positive appraisals of this form were that it gave both the opportunity to express concerns about the agency and the opportunity to offer compliments to the agency (albeit in the comments section at the end of the form).

No replies were received from the consumers associated with the one transport agency included in the survey. It may have been that the questions in this survey were viewed by these consumers as irrelevant to the transport service.

Table 5.5: Proportion of missing data in the mailout consumer feedback survey

Outcome standards	Missing (%)
1.1 Consumer Outcome: Assessment occurs for each consumer.	
Did someone from the agency discuss your needs with you before they began providing services?	4
Did the agency take into account all the things you and your carer might need help with?	9
2.1 Consumer Outcome: Consumers are aware of their rights and responsibilities.	
How were your rights and responsibilities explained to you? (This would include your right to access personal information, confidentiality and privacy issues.)	18

(continued)

Table 5.5 (continued): Proportion of missing data in the mailout consumer feedback survey

Outcome standards	Missing (%)
2.2 Consumer Outcome: Consumers are aware of services available.	
How would you rate the agency in providing information about ALL of their services?	6
2.3 Consumer Outcome: Consumers are informed of the basis of service provision, including changes that may occur.	
Are you happy with the way your agency currently charges you for services?	12
Have you ever asked the agency for help and been refused?	7
Did they explain why they refused to help?	89
Were you satisfied with their response?	84
3.2 Consumer Outcome: Consumers receive services from agencies that adhere to accountable management practices.	
Does the agency provide you with help in the way they said they would provide it?	9
Do you feel that you can voice your opinions to the agency about how it is being run?	29
Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?	20
3.3 Consumer Outcome: Consumers receive services from appropriately skilled staff.	
How satisfied are you with the level of performance of the staff at the agency?	7
Have you ever been concerned about your safety or security because of the actions of agency staff?	8
4.1 Consumer Outcome: Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.	
Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?	10
How often does someone from the agency contact you to see how you are getting along?	20
4.2 Consumer Outcome: Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.	
Did the agency make a clear agreement with you about the services they would provide to you?	5
Did they tell you which services, how often you would get them, and for how long?	6
Did you agree with what they proposed? If no, did you discuss this with them?	78
4.3 Consumer Outcome: Consumers' cultural needs are addressed.	
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	48
4.4 Consumer Outcome: The needs of consumers with dementia, memory loss and similar disorders are addressed.	
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	48
4.5 Consumer Outcome: Consumers receive services which include appropriate coordination and referral processes.	
Do you receive more than one service from the agency?	8
Are the services provided in a coordinated fashion?	52
5.1 Consumer Outcome: Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.	
Do you have any concerns with the way the agency deals with privacy and confidentiality?	11

(continued)

Table 5.5 (continued): Proportion of missing data in the mailout consumer feedback survey

Outcome standards	Missing (%)
5.2 Consumer Outcome: Consumers have signed confidentiality release forms.	
Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?	9
5.3 Consumer Outcome: Consumers are able to gain access to their personal information.	
Do you have any concerns about the personal information the agency might keep about you?	1
Have you ever tried to get hold of the personal information that the agency has about you?	9
Did you get the information you wanted?	89
6.1 Consumer Outcome: Consumers are aware of the complaints process.	
Has the agency informed you of what to do if you're not happy with the service you get?	27
Did the agency tell you that you can voice any concerns you have about them to outside authorities?	29
6.2 Consumer Outcome: Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution.	
Have you ever had any concerns about the help you receive from the agency?	14
Did you express your concerns with the agency staff?	81
Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?	13
Do you think that things would go badly for you if you made a complaint about the agency?	17
6.3 Consumer Outcome: Services are modified as a result of 'upheld' complaints.	
Were you happy with the way the agency responded to your concerns?	76
7.1 Consumer Outcome: Each consumer has access to an advocate of his or her choice.	
7.2 Consumer Outcome: Consumers know of their rights to use an advocate.	
7.3 Consumer Outcome: Consumers know about advocacy services, where they are, and how to use them.	
Did you receive any information from the agency about how you could obtain an advocate?	30
Do you feel confident that you could obtain an advocate of your choice if you needed to?	24
Has the agency provided you with any information about your right to have someone speak on your behalf (an advocate)?	27
7.4 Consumer Outcome: The agency involves advocates in respect to representing the interests of the consumer.	
Have you ever had someone speak on your behalf in relation to the services you received from the agency?	24

5.2.3 Evaluation of survey and item response rates

The mailed survey is clearly a less reliable source of consumer feedback. The overall response rate is relatively low and, of those surveys returned, some consumers are unable to answer all questions or answer questions not appropriate to them. In some cases, agencies indicated that consumers had asked them for help in completing the survey. In these cases, consumers would be less likely to be able to freely express their

complaints about the agency and its staff. Telephone interviews allowed consumers to discuss the questions and answers with a person not directly connected with the agency. Answers were thus more complete and more likely to be unconstrained by concerns over the agency's reaction.

Agencies providing services such as transport may be better assessed by consumer feedback items designed specifically for that service type.

5.3 Consumer feedback as a quality measure

The purpose of developing a consumer survey was to incorporate consumer feedback into the Instrument and use it as a source of performance information against particular standards. The first way to address validity of this is to determine that the method of feedback captures a representative sample of HACC consumers. The first section of this chapter indicates that this may not be the case for the methods trialled, although it should be remembered that the telephone interviews were conducted only with consumers from a small number of agencies (five agencies in total). A second issue concerns the accuracy of the consumer survey in eliciting consumers' views about agencies. How appropriate and clear the questions within the survey are to consumers has a bearing on this. The previous section indicated that consumers were better able to answer the questions put to them in a telephone interview than in a mailed survey. Telephone interviews provided the opportunity for further explanation about the interviewer's questions and greater opportunity for explanation of the respondent's answers.

A third approach is to determine if consumer views of the agencies correspond to the ratings given to agencies by assessors and whether they correspond to the agencies' own ratings. In this way the concurrent validity of the consumer feedback tool is established. Concurrent validity is established when a measure correlates with other measures of the same concept taken at the same point in time.

The first draft of the Instrument received by the project team contained questions regarding the proportions of consumers who indicated that they had experienced certain quality conditions (depending on the standard in question). This assumed that the more consumers agreed that the agency was providing quality service with respect to a certain aspect of their care, the stronger the evidence that the agency was performing well against the standard. Building on this assumption, if both the consumer survey tool and the standards ratings are measuring the same thing, that is, quality of service in HACC agencies, then the measures should be correlated. This assumption will be tested in the section that follows, although later it will be argued that it may be more appropriate to consider that a small number of consumer complaints should have as much significance for some standards as if all consumers had complained.

The section that follows examines the correlations between consumer responses to individual survey items and the ratings against the standards that these items were designed to inform. This analysis is undertaken for the telephone and consumer surveys separately and a comparison of the results of both follows.

5.3.1 Telephone interviews

Relationship of consumer items with ratings against standards

In Table 5.6, items from the telephone survey are listed under the standard to which they relate. The right hand columns of this table show the correlation between the consumers' responses and agency and assessor ratings against the standards. (Note that these correlations should be interpreted with caution as a result of the small sample size. There were only 75 consumers, and only five agency and assessors' scores to correlate against. The degree of error in the estimate of association is thus very high.) The correlations in Table 5.6 which are above 0.25 are highlighted. In social research, correlations of around 0.3 and above are often considered to be an indication of important association. A number of correlations could not be calculated. This was due to the small sample size of the telephone survey and the lack of variability in the data. For instance, where all agencies in the sample scored a 'met' for a standard a correlation could not be calculated. A more rigorous study of the association between consumer feedback and agency performance against the standards would require a larger sample, both of agencies and consumers.

The correlations between assessors' ratings and consumer items are generally higher than between agency ratings and consumer items (the average correlation was $r = 0.18$, compared to $r = 0.13$). In other words, consumers agree less with the agency's opinion than with the assessors' opinion about how well the agency is doing. This suggests that assessors' ratings may be painting a more accurate picture of agency service quality than the agency is. This result is a caution against relying solely on agency self-ratings as measures of quality outcomes for consumers. The case is particularly strong for these data, since the assessors' ratings for this sample were those considered to have the lowest reliability and perhaps the most questionable validity of all the methods of assessment. The assessors for agencies participating in the telephone survey conducted paper reviews: an assessment method noted in Chapter 3 to have the lowest reliability and noted in Chapter 4 to result in the greatest difference between agency and assessor ratings.

Table 5.6: Correlations between telephone consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
1.1 Consumer Outcome: Assessment occurs for each consumer.		
Did someone from the agency discuss your needs with you before they began providing services?	*	*
Did the agency take into account all the things you and your carer might need help with?	*	*
2.1 Consumer Outcome: Consumers are aware of their rights and responsibilities.		
How were your rights and responsibilities explained to you? (This would include your right to access personal information, confidentiality and privacy issues.)	0.00	-0.20

(continued)

Table 5.6 (continued): Correlations between telephone consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
2.2 Consumer Outcome: Consumers are aware of services available.		
How would you rate the agency in providing information about ALL of their services?	0.06	0.14
2.3 Consumer Outcome: Consumers are informed of the basis of service provision, including changes that may occur.		
Are you happy with the way your agency currently charges you for services?	*	0.14
Have you ever asked the agency for help and been refused?	*	-0.12
Did they explain why they refused to help?	*	*
Were you satisfied with their response?	*	*
3.2 Consumer Outcome: Consumers receive services from agencies that adhere to accountable management practices.		
Does the agency provide you with help in the way they said they would provide it?	0.07	0.07
Do you feel that you can voice your opinions to the agency about how it is being run?	-0.07	-0.07
Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?	-0.21	-0.21
3.3 Consumer Outcome: Consumers receive services from appropriately skilled staff.		
How satisfied are you with the level of performance of the staff at the agency?	*	0.01
Have you ever been concerned about your safety or security because of the actions of agency staff?	*	-0.08
4.1 Consumer Outcome: Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.		
Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?	-0.15	-0.24
How often does someone from the agency contact you to see how you are getting along?	-0.29	-0.30
4.2 Consumer Outcome: Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.		
Did the agency make a clear agreement with you about the services they would provide to you?	0.15	0.11
Did they tell you which services, how often you would get them, and for how long?	-0.15	-0.17
Did you agree with what they proposed?	0.10	0.11
If no, did you discuss this with them?	0.35	0.35
4.3 Consumer Outcome: Consumers' cultural needs are addressed.		
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	0.07	-0.18
4.4 Consumer Outcome: The needs of consumers with dementia, memory loss and similar disorders are addressed.		
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	-0.26	-0.11

(continued)

Table 5.6 (continued): Correlations between telephone consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
4.5 Consumer Outcome: Consumers receive services which include appropriate coordination and referral processes.		
Do you receive more than one service from the agency ?	*	0.00
Are the services provided in a coordinated fashion?	*	0.16
5.1 Consumer Outcome: Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.		
Do you have any concerns with the way the agency deals with privacy and confidentiality?	*	-0.24
5.2 Consumer Outcome: Consumers have signed confidentiality release forms.		
Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?	0.09	-0.07
5.3 Consumer Outcome: Consumers are able to gain access to their personal information.		
Do you have any concerns about the personal information the agency might keep about you?	*	*
Have you ever tried to get hold of the personal information that the agency has about you?	-0.17	-0.11
Did you get the information you wanted?	*	*
6.1 Consumer Outcome: Consumers are aware of the complaints process.		
Has the agency informed you of what to do if you're not happy with the service you get?	-0.10	-0.33
Did the agency tell you that you can voice any concerns you have about them to outside authorities?	-0.18	-0.35
6.2 Consumer Outcome: Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution.		
Have you ever had any concerns about the help you receive from the agency?	-0.13	0.06
Did you express your concerns with the agency staff?		
Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?	0.02	-0.25
Do you think that things would go badly for you if you made a complaint about the agency?	-0.16	0.26
6.3 Consumer Outcome: Services are modified as a result of 'upheld' complaints.		
Were you happy with the way the agency responded to your concerns?	*	*
7.1 Consumer Outcome: Each consumer has access to an advocate of his or her choice.		
7.2 Consumer Outcome: Consumers know of their rights to use an advocate.		

(continued)

Table 5.6 (continued): Correlations between telephone consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
7.3 Consumer Outcome: Consumers know about advocacy services, where they are, and how to use them.		
Did you receive any information from the agency about how you could obtain an advocate?	-0.04	-0.28
Do you feel confident that you could obtain an advocate of your choice if you needed to?	0.09	-0.17
Has the agency provided you with any information about your right to have someone speak on your behalf (an advocate)?	0.11	0.07
7.4 Consumer Outcome: The agency involves advocates in respect to representing the interests of the consumer.		
Have you ever had someone speak on your behalf in relation to the services you received from the agency?	0.06	0.01

*Coefficient could not be calculated due to insufficient variance in scores.

Note: Consumer survey items are coded as described in the pilot telephone interview consumer survey form, included in the *Developing Quality Measures for Home and Community Care: Technical Appendixes* Positive and negative correlations reflect these coding patterns. In general, an answer in the affirmative was scored low and an answer in the negative was scored high.

Some categories within items were recoded to appropriately assign missing data (where respondents could not remember or the item was irrelevant) or to better approximate a graduated interval scale.

Seven interview questions were found to be associated with the ratings, given by assessors, against the standards they were intended to inform. Generally, the more frequently consumers indicated that the agency contacted them to see how they were getting along, the more likely the agency was to score well against Standard 4.1 (Each consumer receives ongoing assessment that takes all support needs into account). Responses to this consumer item should not, however, be considered to be directly associated with agency quality of service; some agencies can present legitimate reasons why reassessment should occur infrequently; and, in some cases, consumers may not wish the agency to contact them frequently. The appropriate frequency of agency contact should be judged on a case by case basis. Nevertheless, this consumer item appears to work as well as any other to predict the performance of agencies overall in this domain.

A question regarding whether consumers discussed their disagreement about their service delivery or care plan was negatively correlated with the assessors rating for Standard 4.2 (Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive). This result is not surprising since it indicated that, if respondents discussed their disagreement, the agency was also likely to have scored well as tailoring service delivery/care plans to individual needs. It appears that consumers did not feel free to discuss their disagreements with agencies which did not negotiate on service provision.

Consumers who indicated that the agency had informed them of what to do if they were not happy with the services they received were more likely to receive service from an agency scoring well against Standard 6.1 (Consumers are aware of the complaints process). Consumers who indicated that the agency had informed them that they could voice their concerns to outside authorities were also more likely to receive service from

an agency scoring well against Standard 6.1. Consumers who indicated that the agency had informed them of how to obtain an advocate were more likely to receive service from an agency scoring well against Standards 7.1 to 7.3. These results are contrary to assertions that consumer information about these standards would be too unreliable. In pre-pilot interviews, some agencies had argued that consumers would not remember these details, or that they only tended to pay attention to them when they needed to. While this may be the case in some instances, the trends that emerge from a sample of consumers provide an indication of whether an agency is indeed making an effort in these areas.

Consumers were asked if they felt that things would go badly for them if they made a complaint. This question asks for a subjective judgment and is phrased negatively. There was some criticism from consumers that the survey seemed to be trying to elicit a negative response. It could also be argued that consumers would be unlikely to express such fears. Yet this item showed itself to be a useful predictor of agency performance against Standard 6.2 (Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution). Agency performance against this standard was also predicted by the consumer responses to the question concerning consumer confidence that the agency would listen to concerns and deal with them properly.

One item was associated with agency ratings for the relevant standard but not assessor ratings. This was an item asking consumers if the agency was responsive to their needs as a member of a special group. It was associated with the agency score against Standard 4.4 (The needs of consumers with dementia, memory loss and similar disorders are addressed). This consumer question was relevant to a large proportion of the telephone interviewees who were caring for someone with dementia. That assessor ratings did not match consumer assessments but agency ratings did suggest that assessors should receive consumer input to rate this standard.

Relationship of consumer items with objective scores

Table 5.7 shows the correlation between each telephone consumer survey item and the objective to which it relates. Scores for objectives were calculated by taking the mean rating across each of the standards under the objective; the column on the far right shows the correlation between the average assessor score for standards under the objective and the consumer survey item, and the column to the left of this shows the correlation between the average agency score for standards under the objective and the consumer survey item.

Ten items were moderately associated with the objectives they were designed to inform. Seven of these were the same items found to be predictive of individual standards in the previous analysis, although the associations were generally somewhat weaker between consumer items and objective scores than between consumer items and individual standard scores.

Three items showing substantial relationship with the objective were more strongly related to the objective than the individual standard they were intended measure. The consumer item: 'Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?' is associated with agency scores for

Objective 4 (Coordinated, planned, and reliable service delivery) ($r=0.43$). This suggests that, while this item provides information about the occurrence of ongoing assessment (see Table 5.6), it is also a strong indicator of service delivery quality generally. Similarly, in relation to consumers receiving more than one service, the question: 'Are the services provided in a coordinated fashion?' was more strongly associated with general service delivery quality (Objective 4) than it was to the specific standard related to coordination and referral processes (see Table 5.6).

The consumer item: 'Is the agency sensitive and responsive to your different requirements as a member of one of these groups?' is also associated with agency scores for Objective 4. Consumer responses to this question were more consistently related to general service delivery quality than to ratings agencies received for the relevant individual standards. A possible explanation for this is that the consumer item relates to a number of special needs groups, including: those of non-English-speaking background, Aboriginal and Torres Strait Islander descent, the financially disadvantaged, those living in a rural or remote location, or those caring for someone with dementia. In contrast, the standards relate to specific groups within the special needs category. The lack of direct association between this consumer item and individual standards may have been caused by the broad domain covered by the consumer item.

Table 5.7: Correlations between telephone survey items and scores against objectives according to agency ratings and assessor ratings

Objective/Consumer Survey Item	Agency scores	Assessor scores
Objective 1: Access to services		
Did someone from the agency discuss your needs with you before they began providing services?	0.05	0.06
Did the agency take into account all the things you and your carer might need help with?	-0.22	-0.23
Objective 2: Information and consultation		
How were your rights and responsibilities explained to you? (This would include your right to access personal information, confidentiality and privacy issues.)	0.03	-0.15
How would you rate the agency in providing information about ALL of their services?	0.09	0.14
Are you happy with the way your agency currently charges you for services?	0.02	0.16
Have you ever asked the agency for help and been refused?	0.00	-0.09
Did they explain why they refused to help?	*	*
Were you satisfied with their response?	*	*
Objective 3: Efficient and effective management		
Does the agency provide you with help in the way they said they would provide it?	0.13	0.09
Do you feel that you can voice your opinions to the agency about how it is being run?	0.09	-0.15
Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?	0.06	-0.23

(continued)

Table 5.7 (continued): Correlations between telephone survey items and scores against objectives according to agency ratings and assessor ratings

Objective/Consumer Survey Item	Agency scores	Assessor scores
How satisfied are you with the level of performance of the staff at the agency?	0.06	0.08
Have you ever been concerned about your safety or security because of the actions of agency staff?	0.02	-0.07
Objective 4: Coordinated, planned, and reliable service delivery		
Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?	-0.11	-0.43
How often does someone from the agency contact you to see how you are getting along?	0.25	-0.25
Did the agency make a clear agreement with you about the services they would provide to you?	0.24	-0.07
Did they tell you which services, how often you would get them, and for how long?	-0.08	-0.18
Did you agree with what they proposed?	0.18	-0.03
If no, did you discuss this with them?	0.75	0.35
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	-0.19	-0.25
Do you receive more than one service from the agency?	0.17	0.09
Are the services provided in a coordinated fashion?	-0.33	-0.25
Objective 5: Privacy, confidentiality, and access to personal information		
Do you have any concerns with the way the agency deals with privacy and confidentiality?	0.16	0.15
Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?	0.05	-0.04
Do you have any concerns about the personal information the agency might keep about you?	*	*
Have you ever tried to get hold of the personal information that the agency has about you?	-0.17	-0.04
Did you get the information you wanted?	*	*
Objective 6: Complaints and disputes		
Has the agency informed you of what to do if you're not happy with the service you get?	-0.26	-0.29
Did the agency tell you that you can voice any concerns you have about them to outside authorities?	-0.30	-0.30
Have you ever had any concerns about the help you receive from the agency?	-0.12	0.00
Did you express your concerns with the agency staff?	*	*
Were you happy with the way the agency responded to your concerns?		
Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?	-0.06	-0.27
Do you think that things would go badly for you if you made a complaint about the agency?	-0.02	0.30

(continued)

Table 5.7 (continued): Correlations between telephone survey items and scores against objectives according to agency ratings and assessor ratings

Objective/Consumer Survey Item	Agency scores	Assessor scores
Objective 7: Advocacy		
Did you receive any information from the agency about how you could obtain an advocate?	-0.12	-0.25
Do you feel confident that you could obtain an advocate of your choice if you needed to?	-0.03	-0.09
Has the agency provided you with any information about your right to have someone speak on your behalf (an advocate)?	0.10	0.12
Have you ever had someone speak on your behalf in relation to the services you received from the agency?	0.06	0.01

* Coefficient could not be calculated due to insufficient variance in scores.

Note: Consumer survey items are coded as described in the pilot telephone interview consumer survey form, included in the *Developing Quality Measures for Home and Community Care: Technical Appendixes*. Some categories within items were recoded to appropriately assign missing data (where respondents could not remember or the item was irrelevant) or to better approximate a graduated interval scale.

5.3.2 Mailed surveys

Relationship of consumer items with ratings against standards

In Table 5.8, items from the mailed survey are listed under the standard to which they relate. The right hand columns of this table show the correlation between the consumers' responses and agency and assessor ratings against the standards. Overall, both of these sets of correlations were low, indicating that mailed surveys provide poor concurrent validation of either agency or assessor ratings (the average correlation of consumer items with assessor ratings was $r = 0.09$, compared with $r = 0.10$ for the correlation between consumer items and agency ratings).

Only two items showed a correlation of substantial size. Consumers who indicated that the agency explained why they had refused service were more likely to have received service from an agency which was rated as 'met' by an assessor for Standard 2.3 (Consumers are informed of the basis of service provision, including changes that may occur).

Table 5.8: Correlations between mailout consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
1.1 Consumer Outcome: Assessment occurs for each consumer.		
Did someone from the agency discuss your needs with you before they began providing services?	*	-0.16
Did the agency take into account all the things you and your carer might need help with?	*	-0.16

(continued)

Table 5.8 (continued): Correlations between mailout consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
2.1 Consumer Outcome: Consumers are aware of their rights and responsibilities.		
How were your rights and responsibilities explained to you? (This would include your right to access personal information, confidentiality and privacy issues.)	-0.13	-0.20
2.2 Consumer Outcome: Consumers are aware of services available.		
How would you rate the agency in providing information about ALL of their services?	0.08	0.01
2.3 Consumer Outcome: Consumers are informed of the basis of service provision, including changes that may occur.		
Are you happy with the way your agency currently charges you for services?	0.07	0.01
Have you ever asked the agency for help and been refused?	0.11	0.12
Did they explain why they refused to help?	0.18	-0.37
Were you satisfied with their response?	0.20	0.18
3.2 Consumer Outcome: Consumers receive services from agencies that adhere to accountable management practices.		
Does the agency provide you with help in the way they said they would provide it?	0.03	-0.02
Do you feel that you can voice your opinions to the agency about how it is being run?	-0.11	-0.10
Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?	0.07	0.12
3.3 Consumer Outcome: Consumers receive services from appropriately skilled staff.		
How satisfied are you with the level of performance of the staff at the agency?	0.01	-0.04
Have you ever been concerned about your safety or security because of the actions of agency staff?	-0.06	-0.05
4.1 Consumer Outcome: Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.		
Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?	-0.09	-0.18
How often does someone from the agency contact you to see how you are getting along?	-0.06	-0.02
4.2 Consumer Outcome: Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.		
Did the agency make a clear agreement with you about the services they would provide to you?	0.02	-0.25
Did they tell you which services, how often you would get them, and for how long?	-0.10	-0.11
Did you agree with what they proposed?	0.00	-0.05
If no, did you discuss this with them?	-0.16	-0.13
4.3 Consumer Outcome: Consumers' cultural needs are addressed.		
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	-0.09	0.08

(continued)

Table 5.8 (continued): Correlations between mailout consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
4.4 Consumer Outcome: The needs of consumers with dementia, memory loss and similar disorders are addressed.		
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	0.14	0.14
4.5 Consumer Outcome: Consumers receive services which include appropriate coordination and referral processes.		
Do you receive more than one service from the agency?	0.03	-0.08
Are the services provided in a coordinated fashion?	0.11	-0.04
5.1 Consumer Outcome: Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.		
Do you have any concerns with the way the agency deals with privacy and confidentiality?	0.01	0.00
5.2 Consumer Outcome: Consumers have signed confidentiality release forms.		
Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?	0.14	-0.01
5.3 Consumer Outcome: Consumers are able to gain access to their personal information.		
Do you have any concerns about the personal information the agency might keep about you?	0.13	0.09
Have you ever tried to get hold of the personal information that the agency has about you?	0.15	0.05
Did you get the information you wanted?	0.22	0.04
6.1 Consumer Outcome: Consumers are aware of the complaints process.		
Has the agency informed you of what to do if you're not happy with the service you get?	0.07	-0.02
Did the agency tell you that you can voice any concerns you have about them to outside authorities?	-0.07	0.04
6.2 Consumer Outcome: Each consumer's complaint about a service, or access to a service, is dealt with fairly, promptly, confidentially and without retribution.		
Have you ever had any concerns about the help you receive from the agency?	0.04	-0.02
Did you express your concerns with the agency staff?	0.17	-0.10
Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?	0.06	-0.07
Do you think that things would go badly for you if you made a complaint about the agency?	-0.18	-0.09
6.3 Consumer Outcome: Services are modified as a result of 'upheld' complaints.		
Were you happy with the way the agency responded to your concerns?	-0.22	-0.02

(continued)

Table 5.8 (continued): Correlations between mailout consumer survey items and scores against the standards according to agency ratings and assessor ratings

Outcome standards/Consumer interview questions	Agency scores	Assessor scores
7.1 Consumer Outcome: Each consumer has access to an advocate of his or her choice.		
7.2 Consumer Outcome: Consumers know of their rights to use an advocate.		
7.3 Consumer Outcome: Consumers know about advocacy services where they are and how to use them.		
Did you receive any information from the agency about how you could obtain an advocate?	-0.07	-0.11
Do you feel confident that you could obtain an advocate of your choice if you needed to?	-0.10	-0.09
Has the agency provided you with any information about your right to have someone speak on your behalf (an advocate)?	-0.03	-0.03
7.4 Consumer Outcome: The agency involves advocates in respect to representing the interests of the consumer.		
Have you ever had someone speak on your behalf in relation to the services you received from the agency?	-0.13	0.16

* Coefficient could not be calculated due to insufficient variance in scores.

Note: Consumer survey items are coded as described in the pilot telephone interview consumer survey form, included in the *Developing Quality Measures for Home and Community Care: Technical Appendixes*. Some categories within items were recoded to appropriately assign missing data (where respondents could not remember or the item was irrelevant) or to better approximate a graduated interval scale.

Consumers who indicated that the agency had made a clear agreement with them about the services they would provide were more likely to have received service from an agency which was rated as 'met' by an assessor for Standard 4.2 (Each consumer has a service delivery/ care plan which is tailored to individual need and outlines the service he or she can expect to receive).

Relationship of consumer items with objective scores

Table 5.9 shows the correlation between each mailout consumer survey item and the objective to which it relates. Correlations with both agency ratings and assessor ratings are shown.

Table 5.9: Correlations between mailout consumer survey items and scores against the objectives according to agency ratings and assessor ratings

Objective/Consumer Survey Item	Agency scores	Assessor scores
Objective 1: Access to services		
Did someone from the agency discuss your needs with you before they began providing services?	0.01	-0.15
Did the agency take into account all the things you and your carer might need help with?	-0.08	-0.11

(continued)

Table 5.9 (continued): Correlations between mailout consumer survey items and scores against the objectives according to agency ratings and assessor ratings

Objective/Consumer Survey Item	Agency scores	Assessor scores
Objective 2: Information and consultation		
How were your rights and responsibilities explained to you? (This would include your right to access personal information, confidentiality and privacy issues.)	-0.12	-0.13
How would you rate the agency in providing information about ALL of their services?	0.01	-0.05
Are you happy with the way your agency currently charges you for services?	0.09	0.04
Have you ever asked the agency for help and been refused?	0.06	0.04
Did they explain why they refused to help?	0.28	-0.48
Were you satisfied with their response?	0.00	0.12
Objective 3: Efficient and effective management		
Does the agency provide you with help in the way they said they would provide it?	-0.05	-0.09
Do you feel that you can voice your opinions to the agency about how it is being run?	-0.15	-0.10
Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?	0.06	0.06
How satisfied are you with the level of performance of the staff at the agency?	-0.05	-0.06
Have you ever been concerned about your safety or security because of the actions of agency staff?	-0.09	-0.07
Objective 4: Coordinated, planned, and reliable service delivery		
Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?	-0.11	-0.13
How often does someone from the agency contact you to see how you are getting along?	-0.12	0.01
Did the agency make a clear agreement with you about the services they would provide to you?	-0.04	-0.18
Did they tell you which services, how often you would get them, and for how long?	-0.06	0.00
Did you agree with what they proposed?	-0.01	-0.01
If no, did you discuss this with them?	-0.23	-0.26
Is the agency sensitive and responsive to your different requirements as a member of one of these groups?	-0.01	0.01
Do you receive more than one service from the agency?	0.04	-0.11
Are the services provided in a coordinated fashion?	-0.04	0.01
Objective 5: Privacy, confidentiality, and access to personal information		
Do you have any concerns with the way the agency deals with privacy and confidentiality?	0.10	0.06
Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?	0.12	0.05
Do you have any concerns about the personal information the agency might keep about you?	0.06	0.05

(continued)

Table 5.9 (continued): Correlations between mailout consumer survey items and scores against the objectives according to agency ratings and assessor ratings

Objective/Consumer Survey Item	Agency scores	Assessor scores
Have you ever tried to get hold of the personal information that the agency has about you?	0.03	0.11
Did you get the information you wanted?	0.27	0.08
Objective 6: Complaints and disputes		
Has the agency informed you of what to do if you're not happy with the service you get?	0.10	0.00
Did the agency tell you that you can voice any concerns you have about them to outside authorities?	0.02	-0.02
Have you ever had any concerns about the help you receive from the agency?	0.03	-0.05
Did you express your concerns with the agency staff?	0.15	-0.17
Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?	0.10	-0.01
Do you think that things would go badly for you if you made a complaint about the agency?	-0.19	-0.10
Were you happy with the way the agency responded to your concerns?	-0.09	0.03
Objective 7: Advocacy		
Did you receive any information from the agency about how you could obtain an advocate?	-0.05	-0.07
Do you feel confident that you could obtain an advocate of your choice if you needed to?	-0.16	-0.05
Has the agency provided you with any information about your right to have someone speak on your behalf (an advocate)?	-0.06	-0.03
Have you ever had someone speak on your behalf in relation to the services you received from the agency?	-0.13	0.16

Note: Consumer survey items are coded as described in the pilot telephone interview consumer survey form, included in the *Developing Quality Measures for Home and Community Care: Technical Appendixes*. Some categories within items were recoded to appropriately assign missing data (where respondents could not remember or the item was irrelevant) or to better approximate a graduated interval scale.

Two items were moderately associated with the assessor ratings for the objectives they were designed to inform. One of these was the same item found to be predictive of an individual standard in the previous analysis. This item: 'Did they explain why they refused to help?', referring to a refusal of service, was more strongly related to Objective 2 (Information and Consultation) ($r = -0.48$) than it was to Standard 2.3 (Consumers are informed of the basis of service provision, including changes that may occur) ($r = -0.37$). This indicates that this item is a strong predictor of agency performance against Objective 2 (A relationship is also evident between agency ratings and the consumer item).

Regarding consumer agreement with the agency's proposed care plan, the consumer survey item: 'Did you discuss this with them?' predicted performance against Objective 4 (Coordinated, planned and reliable service delivery) ($r = -0.26$) but was not strongly associated with the standard relating to service delivery/care plans tailored to individual need (see Table 5.8).

The consumer item: 'Did you get the information you wanted?', regarding gaining access to personal information, was associated with agency scores against Objective 5 (Privacy, confidentiality, and access to personal information); it was not associated with assessor scores against this objective. Table 5.7 shows this item to better predict agency ratings against Standard 5.3 (Consumers are able to gain access to personal information). It may be that agencies are better judges of their performance against this standard than assessors, since their assessments concur best with consumer opinion.

5.3.3 Comparative validity

Of the two methods trialled, the telephone interview was the more effective method of obtaining consumer feedback that provided concurrent validity with the ratings obtained by agencies. Of the 39 questions analysed from telephone interviews, six demonstrated a modest but noteworthy association with the appraisal of the agency given by an assessor against the relevant standard. For the mailed survey, of the 39 analysed, only two questions to consumers showed a modest association with the assessor's appraisal of the agency against the standard.

The correlations between the telephone consumer interview items and the assessor ratings confirm that both of these methods are measuring the same phenomenon, in this case, quality of service in HACC agencies. The noteworthy correlations that occur between standards and telephone interview questions are not so strong, however, that one could be used to predict the other. For example, the item: 'Has the agency informed you of what to do if you are not happy with the service you get?' has a correlation with assessor scores for Standard 6.1 of -0.33 . This means that the answers to this questionnaire item account for only 11% of the variability in ratings against Standard 6.1. The questionnaire item does predict agency performance against the standard, but only part of the time.

There are a number of reasons why questions to consumers, that should be good predictors of agency performance, show only modest association with the standards' ratings. Firstly, the agency or assessor ratings may be inaccurate; indeed, the rater reliability study (Chapter 3) and the level of agreement between agencies and assessors (Chapter 4) indicate that there is a margin of disagreement about ratings. Other reasons are those associated with the consumer. Poor agency performance against a standard may only negatively affect a portion of their consumers. We rely, then, on this affected portion of consumers being selected to participate in consumer feedback. We then rely on this portion being able to respond – a factor which may be limited by their physical condition or their circumstances. We then rely on their desire to respond and to discuss the issue that negatively affects them. Some consumers may feel that their services will be removed if they complain; others are simply too grateful for what they receive to want to criticise it in any way. Others may simply not be bothered. What consumers see as problematic and unfair may be different to what the Instrument describes in this way. All of these factors, and perhaps numerous others, act to diminish the direct statistical relationship between consumer responses and an agency performance indicator.

There is a further problem with using all consumer responses to verify agency ratings. In some cases, poor agency practice with regard to a standard may have affected only one or two consumers. For example, if staff have not been advised on confidentiality

issues this may not result in *all* staff engaging in breaches of confidentiality, but perhaps only one (and possibly then only in regard to one or two consumers). If these one or two consumers were to indicate a problem, the many other consumers who expressed no difficulty with the agency in this regard might overshadow their responses. Yet there is a case to argue that the breach of confidentiality should be considered as seriously if it occurred for one consumer as if it occurred for all consumers. Clearly, some consumer items should continue to be asked, whether or not they have been shown in this analysis to be associated with agency quality.

Collapsing ratings against standards down to objective scores did not give the mailout consumer survey items or the telephone interview questions greater power in predicting agency performance. It does, however, identify consumer items that are indicative of agency performance against an objective as a whole rather than just an individual standard.

5.4 Uses of consumer feedback

How should consumer feedback be built into an agency appraisal process? Two factors may be considered. Firstly, that correlations between standards ratings and consumer items and between objectives and consumer items were only modest, and, secondly, that for some issues a single consumer complaint should have as much significance as if all consumers had complained. It is not reasonable therefore to propose that consumer items be directly incorporated into the Instrument in such a way that proportions of responses contribute to the agency rating against a standard or objective in some fixed way. Rather, it may be more informative for an assessor to view consumer feedback for an agency before undertaking a verification or joint assessment. In Chapter 2 it was noted that assessors found it difficult to make an accurate assessment of the standards under Objectives 2, 6, and 7 without consumer feedback. Consumer feedback, considered in the context of agency characteristics, such as what service it provides, where it operates and how capable its consumers are of responding, may fill this information gap for assessors.

At a broader level, consumer feedback may provide a means of identifying agencies that require verification visits. For some consumer items these agencies may be identified by the number of consumers indicating a problem; for other items, these agencies may be identified if a single consumer indicates a problem. Consumer items which may fall into this latter category are listed in Box 5.1.

What proportion of negative consumer responses should identify an agency for verification? In general, this proportion might be one set by the available resources in the program to conduct verification visits. Ideally, all cases of negative comment against an agency would be investigated. Failing this, however, a proportion may be set at a level that it is feasible for the program to support in resource terms. The limited size of the pilot work reported here does preclude, however, any indication of what such a level might be; additional testing with a larger sample of both agencies and consumers would constitute a more informed input into such policy decisions.

5.5 The revised consumer survey form

A revised consumer survey should include the items listed in Box 5.1 (described as those items that indicate that the agency should receive attention if only one consumer indicates a problem) and all items from the telephone interviews and mailed surveys which produced correlations with objectives higher than 0.20. It should also include all items from the telephone interviews which produced correlations with assessor scores for the standards higher than 0.20. As was stated earlier, the small sample size of the consumers taking part in telephone interviews meant that some correlations could not be calculated. In the larger sample of the mailed survey, these correlations were able to be calculated. Where there are correlations of 0.15 or greater between consumer mail survey items and assessor scores for the standards, these items could also be included in the revised consumer survey.² This is proposed on the assumption that, had the telephone survey been conducted using a larger sample, these items would have produced more valid results. In any case, given the limitations of the consumer feedback methods tested in this study, it seems premature to dismiss these items without further testing. Including open ended questions and questions that lead into another, the revised consumer survey thus contains 35 items. Each of the objectives is covered by at least one question asked of consumers. The revised consumer survey items are included in Appendix B.

Box 5.1 Consumer items indicating that attention to the agency is required if a single consumer provides a negative response

Does the agency provide you with help in the way they said they would?

Have you ever been concerned about your safety or security because of the actions of agency staff?

Do you have any concerns with the way the agency deals with privacy and confidentiality?

Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?

Do you think that things would go badly for you if you made a complaint about the agency?

Do you have any concerns about the personal information the agency might keep about you?

-
2. One item with a correlation of 0.16 was not included. The item ('Have you ever had someone speak on your behalf in relation to the services you receive from the agency?') was negatively correlated with the standard, indicating that consumers who had never used an advocate received service from agencies that scored well against the standard relating to involving encouraging the involvement of advocates. It appears that the involvement of advocates is more likely to be associated with poor agency performance than good agency performance. The contradictory implications of answers to this item suggest it is better left out.

5.6 Summary

5.6.1 Findings

- The telephone interviews and mailed surveys were reasonably representative of the national profile of HACC consumers with regard to age (with the possible exception of those aged 85 years and over for telephone interviews) and sex – but not with regard to the proportions from non-English-speaking backgrounds and of Aboriginal and Torres Strait Islander descent. This may, however, have been affected by the nature of the agencies selected for this small pilot test.
- The response rate to the telephone interviews was far higher than that of the mailed survey, both in terms of overall consumer participation and responses to individual items.
- Some consumers indicated that they had difficulty understanding some questions. These were able to be clarified in the telephone interviews. In the mailed survey this may have been responsible for the high proportion of missing cases on some questions, such as those related to advocacy. In addition, responses to items on the mailed survey were sometimes given where the items should have been irrelevant. This indicates that the validity of consumer responses to the mailed survey may have been compromised to an unknown degree.
- The finding that agency ratings were validated by modest correlations with some consumer items indicated that informative consumer input can be obtained, provided an effective method is used to obtain this input.
- Telephone interviews were more effective than mailed surveys in eliciting consumer feedback that validated agency assessments.
- The correlations between agency performance and consumer feedback items are relatively low. This is not unexpected, given that an adverse experience for a relatively small number of consumers may be indicative of poor actual performance against the standards, and yet be ‘swamped’ in the overall pattern of responses generated by the consumer survey. Thus, negative consumer responses may be best employed not as irrefutable evidence of consistently poor agency performance but rather as indicators of possible problem areas.

5.6.2 Recommendations

The size and scope of the pilot work undertaken on the generation of consumer input into the quality appraisal process was limited by resource constraints. The following preliminary recommendations are put forward, while recognising the need for further developmental work in this area.

- Specific approaches should be devised to incorporate the feedback of consumers from a non-English-speaking background and those of Aboriginal and Torres Strait Islander descent.
- Telephone interviews, rather than mailout surveys, are recommended for use in obtaining consumer feedback.

- Consumer feedback surveys should be developed to address the quality issues specific to clients of transport agencies, meals agencies and home maintenance agencies. Many items in the current survey are not relevant to these clients and others may be more appropriate.
- In performance appraisal based on consumer feedback, the same importance may be placed on negative comment from *one consumer only* as from many consumers. These items should remain in the survey despite the absence of a substantial association with performance appraisals.
- Consumer feedback information should not be incorporated into a scoring system for agencies against standards but rather used as a means of identifying problems to be addressed. Consumer feedback could be used to identify agencies that may be performing poorly against some consumer outcomes, and it could be usefully applied to informing assessors, prior to an agency visit, of potential problems in service provision.
- It is recommended that selected consumer feedback items be tested further with a larger sample of consumers and a larger sample of agencies, using telephone interviews. In this way, it may be possible to further establish the appropriateness, validity and reliability of items that could not be tested adequately given the budgetary and time constraints on the present study.

6 Comparison with like assessments

6.1 Review of issues

One of the issues to be considered by the HACC Officials Standards Working Group in implementing the HACC National Service Standards Instrument is the comparability of the HACC Instrument with other quality appraisal mechanisms applied to HACC agencies.

To inform these deliberations, a study comparing the HACC National Service Standards with the Disability Services Standards, the Community Health Accreditation and Standards Program (CHASP) Standards, and the Australian Council of Healthcare Standards (ACHS), was undertaken and a working paper published in January 1997 (Butkus 1997).

At that time, it was noted that difficulties arise in attempting to make direct comparisons between distinct quality appraisal mechanisms based on the content of their standards, given differences in both their interpretation and the processes through which they are implemented within the field. Comparing an agency's performance against the HACC National Service Standards and CHASP is difficult, unless one is able to take into account the possible differences in method and approach, and the level at which 'well met' is set. For example, in the pilot test of the HACC National Service Standards Instrument, agencies generally spent a number of days completing the Instrument and preparing for their review by an assessor, which took from one-half to an entire day. In contrast, agencies undergoing a CHASP appraisal spend three to six months in self-assessment and preparation, compiling in the process vast quantities (one agency mentioned 10 ring binders) of materials for the reviewers to examine. The review teams then spend one to four days in the service examining the information provided by the agency, observing activities, and speaking to staff and consumers. A comprehensive analysis of the processes involved in these various quality appraisal mechanisms, as opposed to the Instrument, is outside the scope of this project.

Comparing the performance of a particular agency against various quality appraisal mechanisms is also made difficult because of the differences in purpose and development of these mechanisms. The Disability Service Standards are designed to assess the quality of services in terms of their compliance with the Disability Services Act, while CHASP and ACHS were developed within the health field, aimed at accrediting agencies against prescribed standards with clearly defined indicators. In contrast, the role of the HACC National Service Standards Instrument and review process as a regulatory mechanism is not yet clearly defined. Interpretation of the various program standards is made more complex by the particular nature of the language used, reflecting as it does the values and principles of the fields in which the quality appraisal tools have been developed.

It was hoped that analysis of the data collected during the pilot test of the HACC National Service Standards Instrument might provide an opportunity to compare the outcomes of the review processes described in the working paper. However, the significant differences between the various processes used to operationalise different quality appraisal Instruments preclude a meaningful comparative score (Butkus 1997). In fact, the other systems under consideration apply no such single score as that used in the HACC system. It is also difficult to meaningfully compare the number of 'met' standards an agency has achieved in each process, given the differences in the number, nature and structure of the standards and indicators used by the four systems, and the differences in the ratings scales employed by each.

A shared feature of the appraisal processes under review is that all result in the development of action plans, either by the agency itself as a result of its self-assessment (HACC National Service Standards and Disability Service Standards), or in the form of recommendations by the person surveying the agency (ACHS or CHASP). During the pilot test of the HACC National Service Standards Instrument, few agencies rigorously developed and returned their forward action plans to the project team. Action plans were not central to the aim of the pilot – to test the validity and reliability of the Instrument. However, if action plans were to be more rigorously collected, it might be useful to examine the plans developed by or recommended to single agencies involved in more than one quality appraisal, with a view to gaining information about the comparability of the outcomes of the various quality appraisal processes.

The following summary briefly outlines the different sets of standards discussed, and the general mechanisms by which agencies are assessed in relation to these standards. A more detailed version of this analysis is available as an Institute working paper (Butkus 1997).

6.2 Summary of like assessment mechanisms

6.2.1 Community Health Accreditation and Standards Program

The CHASP standards comprise 414 standards or indicators grouped according to 58 objectives, which in turn are organised into 10 sections (ACHA 1993):

1. Assessment and care
2. Early identification and intervention
3. Health promotion
4. Community liaison and participation
5. Rights of consumers
6. Client health and program records
7. Education, training and development
8. Planning, quality improvement and evaluation
9. Management
10. Work and its environment

The review process consists of four phases:

1. An internal assessment phase, over three to six months, involves all staff and management.
2. A review team consisting of a trained internal reviewer and two or three external reviewers spends one to four days in the service collecting information from a range of sources which includes staff, management, consumers, documents, sample records, and an inspection of the facilities.
3. The review team provides a written report to the service on its attainment of the standards.
4. Services develop action plans, which must be formally agreed with CHASP if the agency is seeking accreditation.

The scoring system used is a four-point scale, where standards may be:

1. Exceeded
2. Met
3. Met in part
4. Not met.

6.2.2 Disability Services Standards

The Disability Services Standards comprise 22 minimum, 65 enhanced and 14 eligibility supporting standards, grouped into 11 sections (Commonwealth of Australia 1994):

1. Service access
2. Individual needs
3. Decision-making and choice
4. Privacy, dignity and confidentiality
5. Participation and integration
6. Valued status
7. Complaints and disputes
8. Service management
9. Employment conditions
10. Employment support
11. Employment skills development.

The review process in New South Wales (DCS 1995) consists of:

1. A yearly self-assessment by agencies, in conjunction with their consumers, to ensure that their transition plans are being implemented, or that they are continuing to conform to the Disability Services Standards.
2. Independent assessments:
 - every three years, for all services, whether conforming or in transition;
 - where a conforming service wants to enter or renew a three-year funding agreement;
 - where a service wants to move from non-conforming status to conforming status; or
 - when requested by consumers or other concerned people.

In the self-assessment tool, the scoring system used is a three-point scale where outcomes may be:

1. Achieved
2. Partly achieved
3. Not achieved at all

6.2.3 Australian Council of Healthcare Standards

The ACHS standards comprise 160 standards or indicators grouped according to 22 objectives, which are in turn organised into six sections (ACHS 1996). They are:

1. Continuum of care
2. Leadership and management
3. Human resources management
4. Information management
5. Safe practice and environment
6. Improving performance.

The review process consists of three phases:

1. A self-assessment is completed by the organisation.
2. An ACHS surveyor team appraises the organisation, drawing on information presented by the organisation to demonstrate its achievements, verification of these by the surveyors, and a discussion and summary of the surveyors findings. Verification of agency achievements is done through reviewing documentation, observing the organisation and its services, and through discussion with staff, clients and carers.
3. The organisation, in consultation with the surveyors, develops a quality action plan based on the surveyors' recommendations. Organisations may be accredited.

The scoring system used is a five-point rating scale, where standards may be:

1. Not applicable (NA)
2. Little achievement (LA)
3. Some achievement (SA)
4. Moderate achievement (MA)
5. Extensive achievement (EA)

Additionally, surveyors may apply a rating of:

Achievement with commendation (AC)

6.3 Summary

6.3.1 Findings

- The comparison of standards as assessed by the HACC National Service Standards Instrument with Community Health Accreditation and Standards Program Standards (CHASP), with Australian Council of Healthcare Standards (ACHS) and with Disability Service Standards (DSS) found areas of overlap for each comparison. However, in a number of areas, these other quality appraisal methods did not adequately address the HACC National Service Standards. The least compatible was ACHS.

- Further comparison was not undertaken in the pilot for three reasons. Firstly, it would have required a comparison of the process of assessment for each appraisal system. Secondly, this comparison was made difficult because of the different purposes of each of the appraisal methods; and, thirdly, a quantitative comparison was precluded because of incompatible ratings systems across methods.

6.3.2 Recommendations

- Further work comparing the HACC National Service Standards Instrument with other quality appraisal methods should be undertaken. This could usefully include comparison of the action plans that result from the appraisal methods.
- The findings of the detailed comparison of HACC standards with CHASP and DSS (Butkus 1997) revealed that no meaningful comparative scores could be constructed. While there was some overlap in the areas of service quality measured by these methods, it would be necessary for agencies to address issues of quality raised in the HACC standards that were not raised in either CHASP or DSS.
- The findings of the comparison of HACC standards with ACHS revealed that no meaningful comparative scores could be constructed, and that there was no HACC objective that was completely covered by the ACHS standards. Agencies that had undertaken an ACHS review would need to address issues of quality under each of the HACC objectives, precluding the use of an abridged Instrument for these agencies.
- For agencies that have undergone a review under another scheme, it is recommended that they fully complete the HACC National Service Standards Instrument at their first review, referring to other appraisal method results as appropriate. This would allow the performance of these agencies to be compared with other HACC agencies completing the Instrument. Subsequent reviews or reassessments may draw more heavily on the results of other appraisal methods.

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Appendix A

HACC National Service Standards Instrument

Revised as a result of pilot testing

**Home
and
Community Care**

**National
Service Standards**

Instrument

Please complete:

Agency name:

State:

The next page contains a list of the questions that are contained in the Instrument. You may wish to use this page as a guide while completing the Instrument, to assist you in determining the breadth of information to be included in response to each question.

Objective 1

How does your agency prioritise need and allocate available resources?

How can your agency demonstrate that access to services by special needs groups occurs on a non-discriminatory basis?

How does your agency ensure that a consumer's previous refusal of a service does not prejudice future attempts to access your agency's services?

Objective 2

How does your agency ensure that consumers are aware of their rights and responsibilities?

How does your agency ensure that consumers are informed about available services?

How does your agency ensure that consumers are informed about the basis of service provision, including any changes that may have to occur?

Objective 3

What information on the level of need in your community does your agency collect?

How can you show that your agency builds this information into service development?

How can your agency show that as a consequence of service evaluation, services are changed or modified?

How can your agency show that it involves consumers in service management?

How can you show that your agency practices accountable management?

How does your agency ensure that staff are appropriately skilled/competent to carry out services for consumers?

Objective 4

How does your agency ensure that it regularly monitors consumer needs? How often does your agency conduct formal reviews of clients and how is the time for formal review determined?

How do you inform clients and staff of the individually tailored service or care which clients should receive?

How does your agency ensure that consumers' cultural needs are taken into account when providing care/support?

How does your agency ensure that the special needs of consumers with dementia, memory loss and similar disorders and their carers are taken into account?

How does your agency ensure that the special needs of consumers with intellectual disabilities are taken into account?

Describe the referral process used by your agency, including factors taken into consideration, and any follow up action taken by your agency.

How does your agency cooperate with other agencies in order to meet consumer needs?

Where appropriate – How is case coordination determined in your service system – how can you show that this happens?

Objective 5

How does your agency ensure that the release of consumer information occurs with the consent of the consumer or their advocate or legal guardian?

Does your agency enable consumers to access their personal information upon request?

Objective 6

How does your agency ensure that consumers are aware of the complaints process?

How can your agency demonstrate that consumer complaints are dealt with fairly, promptly, confidentially, and without retribution?

How can your agency demonstrate that it can offer assistance to help with the conflict about a service between a client and his/her primary carer?

Objective 7

How does your agency ensure that advocates are involved in representing the rights and concerns of consumers?

As the HACC target group includes frail aged people, younger people with disabilities, and the primary carers of both of these groups of people, the word 'consumer' in the HACC National Service Standards can be taken to refer to any or all of these groups of people.

Where agency documentation provides appropriate answers against the performance information required in the Instrument, you should attach these documents and refer to them in your answers. Some questions may be answered by reference to agency policy. Attach this document and indicate the relevant pages and sections. In addition, indicate how these policies operate in practice.

In line with principles regarding the protection of privacy and confidentiality, client records should not be individually identified in completing this Instrument.

It is recognised that agencies must operate within the resources made available to them by Governments and this will be taken into account in monitoring the implementation of these standards.

IF YOUR AGENCY IS ONE IN WHICH HACC FUNDING RELATES TO ONLY SOME OF YOUR CONSUMERS it is only necessary that your answers relate to the procedures you have in place for these consumers. However, if service provision to HACC-funded and non-HACC-funded consumers is not readily distinguished answers may relate to both groups without discrimination between the two.

Evaluating your agency against the HACC National Service Standards

Performance against the standards

The HACC National Service Standards Instrument provides a means to assess the extent to which agencies are complying with the HACC National Service Standards. There are seven objectives in the HACC National Service Standards, which are listed in the Instrument. These are:

- 1 Access to services;
- 2 Information and consultation;
- 3 Efficient and effective management;
- 4 Coordinated, planned, and reliable service delivery;
- 5 Privacy, confidentiality, and access to personal information;
- 6 Complaints and disputes; and
- 7 Advocacy.

Each of the above Objectives has a number of service standards, which in the Instrument, are accompanied by questions to be answered by agencies. Overall, there are 27 service standards and 29 questions relating to these standards.

The Instrument is divided into seven sections according to the seven HACC Objectives. Each section lists:

- the Objective;
- the service standards and questions to be answered against them;
- two levels of performance criteria: – minimum criteria
– further requirements; and
- information on how to answer the performance information (called 'Replying to the performance information').

In each section you will be asked to provide information about your agency's performance as it relates to the standards.

Your answers will be used to determine your agency's level of compliance against the HACC National Service Standards. The three level of compliance are:

- met;
- partly met; and
- not met.

This assessment is based on the extent to which your agency satisfies the performance criteria listed with each question.

There are two levels of performance criteria:

- *Minimum Criteria* are those that must be satisfied in order to avoid a not met rating;
- *Further Requirements* are those that must be satisfied in order to achieve a met rating.

In some instances, a rating is based on the responses to more than one question. The *minimum criteria* listed for each question must be satisfied to avoid a not met rating, and the further requirements listed for each question must be satisfied to achieve a met rating.

There is no inconsistency if your service is still able to improve performance in an area where the standard is considered to be met. Similarly, a not met rating does not indicate that an agency has met none of the *Minimum Criteria*. Furthermore, it is acknowledged that, as a result of the ongoing commitment of many HACC-funded agencies to quality assurance, some agencies provide service of quality far exceeding that described in this Instrument.

The HACC National Service Standards Instrument has been designed to be relevant to all HACC-funded agencies with the exception of those solely providing advocacy, information, and/or education services. In a few cases, however, one or more criteria listed as *Further Requirements* or even as *Minimum Criteria* will not be relevant to an agency. In a few cases criteria may be relevant but only to a limited extent or in a modified manner.

Recognising the diversity inherent in the delivery of HACC-funded services, *Special Considerations* lists areas for which it is recognised that performance requests may apply only in part, not at all, or with flexible interpretation to an agency. There may be other issues, not listed under *Special Considerations*, which affect the relevance of the performance criteria to your agency.

The extent to which your agency must satisfy the performance criteria to receive a met, partly met or not met rating is necessarily a matter requiring knowledge of and judgments about the individual circumstances of your agency. The HACC National Service Standards Instrument is not intended as a rigid prescriptive tool for agency practice. Rather it is intended as a guide for agencies to ensure that service is provided in a way that promotes quality outcomes for consumers. It should be interpreted so as to be applicable to the charter and circumstances of every agency, as varied as they may be.

Calculating the Instrument Score

The Instrument Score represents the overall performance of your agency against the HACC National Service Standards as they are measured in the Instrument.

The Instrument Score is calculated in the following way:

- Performance against the standards is assessed according to a rating of met, partly met or not met, as described previously. As indicated in the Instrument, a met rating receives a score of 2, a partly met receives a score of 1, and a not met receives a score of 0.

Individual ratings are added together to achieve a summed score with a possible range of 0 to 42.

- This summed score is then divided by the number of ratings used to calculate it, that is, the number of ratings received in the Instrument, and then multiplied by 10. This figure represents the Instrument Score and is the average of the ratings achieved by your agency. The Instrument Score has a possible range of 0 to 20.

The Instrument Score is used to find the extent to which the agency meets the standards in the following manner:

Instrument Score	Overall performance against the Standards
Less than 10	Poor
10 to 14.9	Basic
15.0 to 17.4	Good
17.5 to 20.0	High

For a minority of agencies, one or more standards and their associated performance information may be inappropriate to be included as a part of quality of service assessment. In these cases, it may be necessary to have no score recorded in the categories of met, partly met or not met. If scores were simply added these agencies would lose the value of a score for that standard, in the same way as if they had scored a not met. The method of calculating the average rating ensures that these agencies are not be unfairly penalised in this manner. Their Instrument Score is only based on applicable standards but allows all agencies to be compared according to a common scale, regardless of the number of standards applicable to each.

Example 1:

Agency A received 16 met ratings, 3 partly met ratings, and 2 not met ratings.

1. Ratings are added together to form a summed score:
 $(16 \times 2) + (3 \times 1) + (2 \times 0) = 35$
2. The summed score is divided by the number of applicable ratings, in this case, 21 and is then multiplied by 10.
 $35/21 \times 10 = 16.7$
3. With an Instrument Score of 16.7, the overall performance of Agency A against the standards is good.

Example 2:

Agency B received 8 met ratings, 9 partly met ratings, and 3 not met ratings. One standard and its associated performance information were not applicable.

1. Ratings are added together to form a summed score:
 $(8 \times 2) + (9 \times 1) + (3 \times 0) = 25$
2. The summed score is divided by the number of applicable ratings, in this case, 20 and is then multiplied by 10.
 $25/20 \times 10 = 12.5$
3. With an Instrument Score of 12.5, the overall performance of Agency A against the standards is basic.

Objective 1: ACCESS TO SERVICES

*To ensure that each consumer's access to a service
is decided only on the basis of relative need.*

- 1.1 **Consumer Outcome:** Formal assessment occurs for each consumer.
- 1.2 **Consumer Outcome:** Consumers are allocated available resources according to prioritised need.
- 1.3 **Consumer Outcome:** Access to services by consumers with special needs is decided on a non-discriminatory basis.
- 1.4 **Consumer Outcome:** Consumers in receipt of other services are not discriminated in receiving additional services.
- 1.5 **Consumer Outcome:** Consumers who reapply for services are assessed with needs being prioritised.

How does your agency prioritise need and allocate available resources?

Minimum Criteria

The agency should be able to demonstrate that it has assessment criteria that is clear and appropriately comprehensive for the service it provides and the circumstances under which it operates.

Assessment tools should provide the basis for determining the ongoing relative need and priority of each consumer, as appropriate to the service.

All consumers should undergo a comprehensive formal assessment prior to or at commencement of service. Some agencies may legitimately not routinely conduct comprehensive assessments of consumer need for all clients. Where this does not occur the agency should justify this with a description of the service provided and the process by which consumers access the service, including a description of how formal assessment information is coordinated with other agencies or relevant bodies.

Further Requirements

The reasons for refusing services to potential consumers should be documented, and should consistently comply with agency guidelines.

Agencies which refuse services to potential consumers due to resource constraints should demonstrate that waiting lists, if kept, are reviewed in order to reprioritise consumer access to services as necessary.

Response times between referral and service delivery and between initial assessment and service delivery should be appropriate to clients needs.

Replying to the performance information

Describe the assessment tools used by your agency, attaching appropriate forms where available. Indicate (where appropriate) whether these assessment tools take into account the consumer's:

- severity of disability, including the difficulties they experience with tasks of daily living;
- the presence of dementia, memory loss, and related disorders;
- requirements for medical or nursing help;
- safety of their physical environment;
- geographical isolation;
- financial disadvantage;
- cultural background;
- social contacts; and
- the availability of a carer.

Describe the information you record about the carer's level of need. Comment on what information you collect on:

- condition of the carer physically;
- condition of the carer psychologically;
- condition of the carer financially;
- the social support available to the carer; and
- the carer's competing commitments such as employment.

Comment on how you use your assessment criteria to prioritise consumer need and how these criteria are suitable to your agency's target group.

In describing how your agency allocates resources you should show how you go about determining differences in service delivery between consumers. This should include details about:

- the amount of service provided given the assessment outcome;
- the response time you allow between referral and service delivery or between initial assessment and service delivery depending on the clients needs;
- the criteria used to determine which consumers are refused service or put on a waiting list; and
- if applicable, how often waiting lists are reviewed in order to reprioritise consumer access to services.

How can your agency demonstrate that access to services by special needs groups occurs on a non-discriminatory basis?

Minimum Criteria

To meet this standard at the minimum level the agency should demonstrate that its services are accessible to all identifiable groups within the target population as appropriate. The agency should be able to demonstrate that it has considered and taken action to overcome barriers to access to services for special needs groups.

Bearing in mind the agency's target group, special needs groups that the agency should have considered when promoting access to services include the following:

- a) people of non-English-speaking background and, where appropriate, sub-groups within the larger ethnic groups;
- b) people of Aboriginal or Torres Strait Islander descent;
- c) rurally isolated people;
- d) people with dementia; and
- e) financially disadvantaged people.

Further Requirements

Information in regard to the number of consumers with special needs accessing the service should be collected, and an attempt made to compare these numbers with the proportions of special needs groups in the community. Where special needs groups appear under-represented among the agency's consumers, it should demonstrate that it has explored the reasons for this and is attempting to address them where appropriate. The agency should be able to demonstrate that it has links with other service providers whose target groups are those in special needs groups and that the agency cooperates with these through such processes as referral.

Special Considerations

Some HACC-funded agencies may be designed to provide services only to a specific target population, making access to their services inappropriate for some consumers. In such cases, agencies should have sufficient service network links to refer consumers to agencies more appropriate to them.

Replying to the performance information

Your agency should be able to demonstrate that the needs of special needs groups are taken into account in facilitating their access to services.

Describe what action your agency has taken to facilitate access to services by the following special needs groups:

- a) non-English-speaking background people and, where appropriate, sub-groups within the larger ethnic groups;
- b) people of Aboriginal or Torres Strait Islander descent;
- c) rurally isolated people;
- d) people with dementia; and
- e) financially disadvantaged people.

If you are able to compare the profile of your client base with the profile of persons likely to be in need of assistance in the community (through the use of demographic profiles) you should show how these profiles match for these groups.

Other agencies in your region may provide services to special needs groups. If so, indicate how you coordinate with them in the delivery of services to these groups, for example, through referral or case coordination. In addition, if your agency does not target the special groups listed here please provide an explanation of why this is not done.

How does your agency ensure that a consumer's previous refusal of a service does not prejudice future attempts to access your agency's services?

Minimum Criteria

Where a consumer declines an offer of service, or the agency refuses a service to a potential consumer, information should be provided to that person about when, and under what circumstances, the person could reapply for service.

Information should be provided to consumers about their right to refuse a service.

The agency should have clear guidelines for ensuring that consumers understand the reason for refusal of a service.

Further Requirements

The agency should have written policies and procedures to ensure that a consumer's refusal of a service does not affect their future access.

Where an agency keeps a waiting list for services, it should adequately inform clients of how this process works.

Special Considerations

For some HACC-funded agencies the issue of previous refusal of a service may be of limited relevance; for example, where services are generally only provided once or where another agency determines eligibility for service. For these agencies, the criteria outlined above should only be applied as far as is appropriate and assessment should be made accordingly. Where none of the listed criteria and further requirements are appropriate, no rating should be given against this question.

Replying to the performance information

To answer this question show how agency policy supports the right of consumers to refuse a service and describe how this is reflected in practice, including how your agency reassures consumers they can come back to the agency after they have refused or ended a service.

Show how your agency reassures consumers they can come back to the agency after your agency has refused them a service.

Describe the procedures your agency has in place to ensure that consumers understand the reason for refusal of a service by your agency.

Where appropriate, indicate what practices occur to inform clients of waiting list procedures after immediate delivery of a service has been refused.

Objective 2: INFORMATION AND CONSULTATION

To ensure that each consumer is informed about his or her rights and responsibilities and the services available, and consulted about any changes required.

- 2.1 Consumer Outcome:** Consumers are aware of their rights and responsibilities.
- 2.2 Consumer Outcome:** Consumers are aware of services available.
- 2.3 Consumer Outcome:** Consumers are informed of the basis of service provision, including changes that may occur.

How does your agency ensure that consumers are aware of their rights and responsibilities?

Minimum Criteria

The agency should explain the means by which it ensures that consumers are made aware of their rights and responsibilities. It is expected that, to meet this standard at its minimal level, the agency will both provide the consumer with a written copy of their rights and responsibilities, and explain these to the consumer verbally.

The agency should demonstrate that it provides information about privacy and confidentiality procedures in writing to consumers, and that it explains these procedures to consumers at the time of their commencement with the service.

The agency should demonstrate that it provides information to consumers at the time service delivery begins about what an advocate is, how to obtain one, and their right to use one.

Further Requirements

The agency should periodically remind consumers of their rights and responsibilities.

The agency should be able to demonstrate that staff and volunteers are also made aware of issues relating to consumer rights and responsibilities.

When explaining rights and responsibilities to consumers, agencies should be sensitive to any special linguistic, cultural, physical or intellectual requirements.

Special Considerations

For the consumers of some agencies' services, written versions of rights and responsibilities may be inappropriate, for example, where clients are unable to read.

Where standard written information is not appropriate to the consumer the agency should be able to demonstrate that it makes provision to inform these consumers about their rights and responsibilities.

Replying to the performance information

Outline the procedures your agency has in place to ensure that consumers, including carers, are aware, and are reminded, of their rights and responsibilities, including privacy and confidentiality and their right to an advocate of their choice.

Where your agency has a policy relating to this standard indicate what this is and show how this is implemented in agency practices.

Where available, attach examples of fliers or brochures your agency uses to inform clients of their rights.

Describe how your agency's staff and volunteers are made aware of issues relating to consumer rights and responsibilities.

Indicate how your agency is sensitive to any special linguistic, cultural, physical or intellectual requirements of consumers when explaining rights and responsibilities.

Give examples of how your agency seeks to overcome the difficulties that some clients may have in hearing about or understanding their rights.

How does your agency ensure that consumers are informed about available services?

Minimum Criteria

Consumers should be made aware of what services are available from the agency either in writing or through verbal explanation.

How much information is provided to consumers about services from other agencies may depend upon the needs of consumers, however the agency should be equipped to provide this information when necessary. To this end, the agency should be aware of other support services available in the region.

Further Requirements

The agency should make provision for consumers to be aware of services available from other agencies.

The agency should keep consumers informed of services available by regular reminders.

Staff should be aware of the service choices available for consumers.

Replying to the performance information

Detail the means by which your agency provides information to consumers about the services available from your agency and, where relevant, from other agencies. Where available, attach agency brochures or information booklets.

Describe how your agency regularly reminds consumers of what services are available and how often this is done.

Describe how your agency keeps relevant staff and volunteers abreast of the service options available to consumers and the services offered by other agencies.

How does your agency ensure that consumers are informed about the basis of service provision, including any changes that may have to occur?

Minimum Criteria

The agency should clearly advise all consumers, upon commencement, how it has reached its decision about what services the agency will provide to them and for how long.

The agency should inform consumers about the circumstances in which a service may no longer be provided or may need to change.

The agency should clearly advise all consumers of their right to appeal a service provision decision.

The agency should clearly discuss any changes to service provision with consumers, and explain, in writing where appropriate, the changes to be made and the reasons for them.

The agency should advise its consumers of its fee system and how charges, if any, will be applied to the consumer.

Further Requirements

The agency should indicate that consumers were involved in making decisions about the service provided to them.

The agency should demonstrate that when assessing consumers' needs, relevant information is provided to consumers in regard to the service options which they may choose from. This should include presenting consumers with options in relation to service delivery, not only in regard to the types of services available but the choice of staff and choice of service delivery times.

Where an agency ends a service to a consumer it should inform consumers of any available alternative services and inform consumers of the circumstances in which the agency may again be able to assist him or her.

Replying to the performance information

Indicate the way in which your agency informs clients of how decisions were made about the service which is provided to them. This should relate to decisions about the types of services they will receive and the length of time they will be receiving them. Include, where applicable, how clients are informed of the fees and charges which your agency applies.

Describe how you allow consumers to have a voice in determining their service provision.

Indicate how you accommodate consumer choice of staff and service strategies within the constraints of available resources.

Detail the procedures your agency follows when a change is made to the service being provided to a consumer, for instance, whether you give notice in writing of the proposed reduction or end of a service with an accompanying explanation.

Comment on whether you inform consumers of the option for appeal before the service is changed or ended, whether you inform consumers of any available alternative services, or whether you inform consumers whose service is due to cease of the circumstances in which your agency may again be able to assist him or her.

Describe how your agency responds to a request from a consumer to make a change to the service they receive. Detail the processes that occur and give an estimate of how quickly your agency is able to respond to such requests.

Objective 3: EFFICIENT AND EFFECTIVE MANAGEMENT

*To ensure that consumers receive the benefit
of well-planned, efficient and accountable management.*

- 3.1 Consumer Outcome:** Consumers receive appropriate services provided through the processes of ongoing planning, monitoring and evaluation of services.
- 3.2 Consumer Outcome:** Consumers receive services from agencies that adhere to accountable management practices.
- 3.3 Consumer Outcome:** Consumers receive services from appropriately skilled staff.

What information on the level of need in your community does your agency collect?

How can you show that your agency builds this information into service development?

How can your agency show that as a consequence of service evaluation, services are changed or modified?

Minimum Criteria

The agency should make an assessment of need in the community it is intended to service. This may include investigation of the unmet need in the community and estimation of future need but should, at the very least involve a study of the characteristics of those currently accessing its services, those on waiting lists and those being turned away from the service.

The agency should regularly review this information and evaluate its services in relation to this information. This may take place in planning workshops and staff meetings from which minutes may be available.

The agency should change or modify services as a result of service evaluation. This may involve following up on decisions made at staff and planning meetings.

The agency should have a review system to measure the effectiveness of service changes made as a consequence of service evaluation.

Further Requirements

The agency should consult with consumers through forums, surveys or other methods of receiving information about consumer need, in this way ensuring that the services it provides are relevant and appropriate.

The agency's assessment of need in the community it is intended to service should include consideration of special needs groups: people of non-English-speaking background; people of Aboriginal or Torres Strait Islander descent; rurally isolated people; people with dementia; and financially disadvantaged people.

Special Considerations

The ability of an agency to gain information on the level of need in the community will depend upon factors such as the resources available to it and the strength of its service network. What can be expected from an agency in relation to this standard will vary according to these factors but, at a minimum, all agencies should be able to demonstrate that they have been resourceful in obtaining this information within their means.

Replying to the performance information

For this standard you should provide detail on what information on the level of need in your community your agency collects. This may include how you evaluate the characteristics and needs of consumers, including carers. It may include how your agency estimates the amount of unmet need in your region, taking into account services provided by other agencies in the region. It may also include how your agency makes use of the information gathered in the process of assessment, and reassessment, through consumer surveys, or through analysis of information on those to whom you have refused service.

If your agency does not undertake analysis of the level of need for services in the community please explain why this is so.

Replying to the performance information

This standard asks that you demonstrate how your agency builds information on community need into service development plans. Provide detail on how information on consumer need is used to monitor service provision, distribution and service gaps. You may wish to detail how your agency estimates future need for its services.

Minutes from meetings, or planning workshops in which these issues were discussed may be an information source used to answer this question.

Replying to the performance information

To answer this question, give examples of new or modified projects or shifts in resources which were made in response to a need identified during service evaluation. For example, if you identified a group growing in need, indicate what implications this had for service delivery. You may also wish to outline the plans your agency has for adapting to the future needs of consumers.

Provide detail on the review system your agency uses to measure the effectiveness of service changes.

If your agency has identified a community need but has been unable to respond to it please explain why this is so.

How can your agency show that it involves consumers in service management?

Minimum Criteria

The agency should demonstrate that it actively encourages the involvement of consumers in agency management and provide details of how this is done. For example, consumer advisory groups or participation on the management board.

Further Requirements

The extent of consumer involvement in management may depend upon many factors, such as the level of disability of the consumers. For very disabled consumers, involvement in agency management may only be practically addressed through consumer surveys. The agency should demonstrate that it has considered consumers' circumstances when seeking their involvement in service management.

Replying to the performance information

Consumer participation in planning and decision making may occur in a number of ways. For example, by having consumer representation on management committees, by routinely asking consumers for feedback, verbally or in writing, about the service and recognising this input in service development, or by publishing management plans and inviting consumers to comment or participate. This standard asks that you describe how consumer participation occurs in your agency.

How does your agency take into account such factors as consumer disability, isolation or communication difficulties in seeking their involvement in service management?

How can you show that your agency practices accountable management?

Minimum Criteria

This question is directed at aspects of organisational level management rather than at the level of management of services to individual clients. At the broadest level, the agency should show how it monitors its activities and evaluates whether it is meeting its organisational objectives, including those set out in the Funding and Service Agreement.

The agency should demonstrate that it follows appropriate financial management/accounting procedures and maintains appropriate records.

The agency should demonstrate that it complies with relevant State/Territory and Commonwealth award and legislative requirements, including those related to the premises occupied by the agency (building access and safety issues and leasing requirements).

The agency should demonstrate that it has developed comprehensive policies to guide decision making and service delivery practices within the agency, and that these are adequately conveyed to staff.

The agency should demonstrate that it clearly conveys the lines of responsibility and accountability to all staff, including volunteers.

Further Requirements

The agency should show how it monitors the quality of services purchased by the agency from a third party.

Special Considerations

In circumstances where financial management/accounting procedures and other aspects of service management are compiled at another branch of the organisation, the agency should provide details of the information it sends on.

Replying to the performance information

At the broadest level, show how your agency monitors its activities and evaluates whether it is meeting its organisational objectives, including those set out in your Funding and Service Agreement.

Some of the management policies and practices which you may wish to detail (if they have not been covered elsewhere) include:

- how your agency deals with fees, means testing, donations.
- how you inform the community and government authorities of the operation of the agency including the services which you provide.
- details of compliance with the relevant State/Territory and Commonwealth award and legislative requirements.
- how your agency ensures that subcontractors enlisted by your agency provide quality services to consumers.
- how your agency informs staff of their roles, the administration of the agency and accountability for their work.
- how your agency makes sure that information about positions of authority within the agency is publicly available and provided to consumers.
- where relevant, how your management committee is selected and operates.
- how your agency ensures that premises occupied by it are of an appropriate standard (for example, facilitates access for people with disabilities, meets State regulations and leasing requirements).

Documentation which may be usefully cited to reply to this standard include: your Funding and Service Agreement and records indicating how this is being met; financial reports; annual reports; where applicable, licenses and other legal requirements such as those relating to Occupational Health and Safety; and outcomes of other reviews or accreditation processes your agency may have undertaken.

How does your agency ensure that staff are appropriately skilled/competent to carry out services for consumers?

Minimum Criteria

The agency should have procedures in place to ensure that staff with appropriate skills are recruited. Staff should be selected with careful thought to the tasks they must perform and the clients they serve.

The safety and security of consumers should be upheld by adequate selection and training procedures, for example: police checks; character references; and training in health and safety issues.

The agency should maintain the skills and competence of its staff by facilitating training.

Further Requirements

The agency should consider the requirements of special needs groups when selecting staff, for example, by obtaining staff with the ability to speak a second language or staff with experience working with those with dementia.

The agency should ensure ongoing skill development of staff, for example, through training needs assessments and provision for study leave.

The agency should demonstrate that it has strategies in place to ensure that staff:

- a) remain abreast of current issues in service delivery, for example, infection control, occupational health and safety;
- b) are aware of issues relevant to people of non-English-speaking background, Aboriginal or Torres Strait Islander peoples, rurally isolated people, and financially disadvantaged people;
- c) are trained in dealing with people with dementia, memory loss and similar disorders; and
- d) are aware of their responsibilities in regard to client rights.

Where volunteers are active in service delivery, the agency should be able to show that training is available to volunteers which is appropriate to the tasks they undertake.

Replying to the performance information

Given the services which your agency provides and the tasks which your staff undertake in relation to those services, describe how your agency ensures that staff are adequately skilled or competent.

Provide detail on how your selection procedures and your staffing profile are tailored to the services your agency provides and type of clientele you service. Where available, provide duty statements and selection criteria for staff which are appropriate to the roles they must perform and evidence that staff are recruited in accordance with these.

Comment on how your agency undertakes analysis of the training needs of staff.

Provide detail on what training is made available, with comment on how you ensure that staff:

- a) remain abreast of current issues in service delivery, for example, infection control, occupational health and safety;
- b) are aware of issues relevant to people of non-English-speaking background, Aboriginal or Torres Strait Islander peoples, rurally isolated people, and financially disadvantaged people;
- c) are trained in dealing with people with dementia, memory loss and similar disorders; and
- d) are aware of their responsibilities in regard to client rights.

Describe how training is made accessible to staff.

Indicate what proportion of your staff have received training and how regularly staff knowledge and skills are updated in this way.

If your agency makes use of volunteers, describe how the training needs of this group are met.

**Objective 4: COORDINATED, PLANNED AND RELIABLE
SERVICE DELIVERY**

*To ensure that each consumer receives
coordinated services that are planned, reliable
and meet his or her specific ongoing needs.*

- 4.1 Consumer Outcome:** Each consumer receives ongoing assessment (formal and informal) that takes all support needs into account.
- 4.2 Consumer Outcome:** Each consumer has a service delivery/care plan which is tailored to individual need and outlines the service he or she can expect to receive.
- 4.3 Consumer Outcome:** Consumers' cultural needs are addressed.
- 4.4 Consumer Outcome:** The needs of consumers with intellectual difficulties, including dementia, memory loss and similar disorders, and intellectual disabilities are addressed.
- 4.5 Consumer Outcome:** Consumers receive services which include appropriate coordination and referral processes.

How does your agency ensure that it regularly monitors consumer needs? How often does your agency conduct formal reviews of clients and how is the time for formal review determined?

Minimum Criteria

The agency should demonstrate that the interval between reassessments is appropriate to the client group and that a substantial proportion, if not all clients are reassessed within the determined period.

The agency should be able to justify why their reassessment interval is deemed appropriate.

The comprehensiveness of the reassessment process should be appropriate to the potential needs of clients.

The agency should demonstrate that any information it gains through either formal or informal reassessment is used to ensure that the services it provides to consumers continue to be appropriate.

Changing care needs of consumers should be reflected in amended service delivery or care plans.

The management of client information should be such that staff and, where appropriate, volunteers are kept informed of changes to client service delivery or care plans.

Further Requirements

The agency should also demonstrate that it takes advantage of its contact with clients to informally reassess or monitor their needs.

Special Considerations

Where an agency largely relies on informal reviews and it cannot demonstrate that it has a determined process for dealing with this information appropriately it should receive a 'not met' rating.

Where assessment and reassessment are conducted by another agency designated as responsible for case management, the agency should be able to demonstrate that it is appropriately informed of changes in the consumer's needs.

Replying to the performance information

Describe the processes, both formal and informal, that your agency has in place to monitor consumer needs. Show how results of reassessment are incorporated into service delivery or care plans. Outline the procedures your agency uses to take action on reassessments when changes are required to service delivery or care plans. For instance, how is this information made available to the relevant staff, and how are the changes monitored to ensure they are appropriate for the consumer.

In commenting on how your agency ensures that it regularly monitors consumer needs, detail how your agency decides on the appropriate length of time between formal reassessments. Give an indication of how many of your clients are formally reassessed in your determined reassessment interval. Comment on how fully the support needs of the client are assessed in this process.

Apart from formal reassessments, how does your agency ensure that the needs of consumers are regularly heard and can affect service delivery? Comment on how frequently clients are informally reassessed. If informal reassessment forms a substantial component of assessment in your agency, how does your agency ensure that staff understand the processes by which this information informs service delivery and their role in participating in this.

Similarly, for formal reassessment, how does your agency ensure that staff understand the reassessment policy and associated procedures. If your agency does not undertake formal reassessment of clients please indicate why and outline how the changing needs of clients are taken into account.

How do you inform clients and staff of the individually tailored service or care which clients should receive?

Minimum Criteria

The agency should deliver services to consumers that are determined by consumers' needs and, where possible, preferences.

Both consumers and staff should be kept informed of changes to service delivery or care plans.

The agency should provide service delivery/care plans to all consumers or the agency should be able to give reasonable account for those clients who did not have one.

Further Requirements

The agency should thoroughly discuss service delivery or care plans with consumers before implementation, and should give consumers options, within service constraints, from which to choose.

Consumer service delivery/care plans should be prepared in a timely manner.

Special Considerations

Some agencies may not provide services that require a service delivery plan or care plan, for example, those providing home maintenance and modification. These agencies should inform consumers of the work performed through other means such as job sheets or invoices.

Where the agency does not have a service delivery/care plan or equivalent, they should be able to demonstrate why it is reasonable that this has not been done. For instance, care plans may not have been drawn up for clients serviced in a crisis situation, or another agency may be case-managing the client.

For some services which are delivered on a one-off or crisis basis, a written agreement may not be practical. In these circumstances, verbal agreements may be sufficient, but these should also provide information to consumers about the service which they can expect to receive, and the basis upon which it is delivered.

Replying to the performance information

Service delivery or care plans should be clearly outlined to consumers. Detail how your agency provides this information to consumers.

Describe the process in which service delivery or care plans are discussed with consumers before implementation, and how consumers are given options, within service constraints, from which to choose.

Describe how staff are kept informed of the changing service needs of clients.

What proportion of clients currently receiving your services have an individually tailored and negotiated plan?

On commencing with your service, how soon are consumers informed of their service delivery/care plan?

In circumstances where you feel that it is not appropriate for your agency to have a formal service delivery or care plan with its clients, for example, because of the transient nature of client contact, these circumstances should be explained.

How does your agency ensure that consumer's cultural needs are taken into account when providing care/support?

Minimum Criteria

The agency should provide evidence that it has specific processes and practices in place which will ensure that consumers' cultural, linguistic and religious needs are addressed. For example, information available in languages other than English, use of interpreters, and staff training in cultural issues.

The agency should have procedures in place for indicating to staff what the individual client's needs and preferences are in relation to their cultural background. For instance, this may be indicated in the client's care plan.

The agency's services should be structured in such a way as to promote access to services by special needs groups.

The agency should make provision to allow relevant special needs groups to understand their rights and responsibilities, including their right to an advocate, and their rights in relation to privacy and confidentiality,

The agency should make provision to allow relevant special needs groups to be aware of other services available. Information about the complaints process should also be accessible to consumers of non-English-speaking background.

Further Requirements

The agency should be able to demonstrate that it actively encourages the participation of consumers of non-English-speaking background or who are Aboriginal and Torres Strait Islander peoples. This may involve such measures as promoting the voice of these consumers in how their services are delivered or promoted.

Special Considerations

If the agency does not provide services tailored to certain cultural groups it should indicate why this is not done or how it coordinates with other agencies that target these groups.

Replying to the performance information

Describe the procedures your agency has in place for identifying the special cultural needs of consumers.

Describe how your agency takes into account cultural needs, commenting on:

- a) information available in languages other than English;
- b) use of interpreters;
- c) staff training in cultural issues;
- d) you may also like to include specific examples of how care plans have been designed in consultation with clients to ensure that their cultural needs have been addressed in the provision of care/support.

Show how your agency makes provision to allow relevant special needs groups to understand their rights and responsibilities, including their right to an advocate and their rights in relation to privacy and confidentiality.

Show how your agency makes provision to allow relevant special needs groups to be aware of other services available.

Show how your agency makes provision for relevant special needs groups to be informed about the complaints process.

Indicate how your agency informs staff of the individual client's needs and preferences in relation to their cultural background.

How does your agency promote the participation of consumers of non-English-speaking background or who are Aboriginal and Torres Strait Islander peoples. For example, how is their participation in the development of service delivery/care plans encouraged, or more broadly, how is their participation in service development and management encouraged?

If your agency does not provide services tailored to certain cultural groups, indicate why this is not done or how you coordinate with other agencies that target these groups?

How does your agency ensure that the special needs of consumers with dementia, memory loss and similar disorders and their carers are taken into account?

Minimum Criteria

People with dementia and those with related disorders have additional needs which agencies should take into account. At a minimal level this should be reflected in the development of care plans which recognise the individual circumstances and background of this person. Where appropriate, physical environments should be conducive to maintaining independence and quality of life and services should be appropriately modified to take into account their spiritual, emotional, social, cultural, physical, intellectual and psychological needs.

Agencies with clients with dementia and similar disorders should have protocols in place to identify an appropriate person to act as an advocate for the person with dementia. Where possible, this person should be the client's choice and the client's consent to share information with this person should be obtained. This key person should be consulted in the development of care plans and kept informed of service provision arrangements and changes that occur to this.

Further Requirements

Staff and, where appropriate, volunteers should receive training and information about the additional needs of this group of consumers.

Staff should be aware of the protocols the agency follows to refer people suspected of having dementia for appropriate assessment.

The agency should be able to show that it responds to the additional stress placed on carers of people with dementia and similar disorders. It should be able to show that carers of those with dementia or similar illness are informed of the additional care options available to them, including respite and local support groups. In addition, the needs of carers should be taken into account when planning services for the person with dementia.

Special Considerations

This question may not be appropriate to agencies providing services to the young disabled. In this case it is not necessary for the agency to provide information against this question.

Replying to the performance information

Describe how your agency takes into account the additional needs of clients with dementia, memory loss and similar disorders and their carers, including, where appropriate, descriptions of special protocols or procedures that you have in place for this group.

Comment on how the additional needs of this group are taken into account in the development of care plans.

What steps are taken to identify advocates or persons known and trusted by the person with dementia or similar illness and how this person or persons are used in the ongoing process of care planning and delivery.

Describe the ways in which your staff and volunteers are informed of the additional needs of this group of consumers and how their knowledge and skills are kept up to date in this regard. Among the protocols you should describe are those staff use to refer people suspected of having dementia for appropriate assessment.

Provide details of how the carers of those with dementia or similar illness are informed of the additional care options available to them, including respite and local support groups and describe how the needs of carers are taken into account when planning services for the person with dementia.

How does your agency ensure that the special needs of consumers with intellectual disabilities are taken into account?

Minimum Criteria

The special needs of people with intellectual disabilities should be reflected in the services provided to them. Services should be tailored in such a way as to satisfy the individual needs and personal goals of the person with an intellectual disability.

Support should be flexible to meet the changing needs of consumers with an intellectual disability.

Service delivery/care plans for meeting such goals and needs should be developed in consultation with the consumer. Consumers should be encouraged to participate as fully as possible in decisions and choices relating to the services they receive. This choice should be facilitated in the ongoing course of service provision.

The role of key persons including advocates, families, carers or others should be recognised by agencies. The agency should facilitate the involvement of such persons where it is the wish of the consumer.

Further Requirements

The agency should encourage and support access to other services to meet the needs of consumers with an intellectual disability. Information and support should be offered to access mainstream services and other specialist services as appropriate.

Staff and, where appropriate, volunteers should be aware of relevant community and mainstream services.

Where possible, staff should be matched to individual consumers to best meet the consumers needs.

Special Considerations

This question is of most relevance to agencies providing services to the young disabled. It is not necessary for agencies providing services to older persons to provide information against this question if none of their clients have an intellectual disability.

Replying to the performance information

Describe how your agency takes into account the individual needs and goals of consumers with an intellectual disability in the development and delivery of services. Describe the process of consumer consultation in the development of service delivery/ care plans.

How does this process allow for changing consumer needs and individual consumer choice and decision making? What flexibility in service delivery exists to accommodate for such changing needs and choices?

What steps are taken to identify and involve advocates, family, carers or other key persons in the ongoing process of care planning and delivery?

Describe the ways in which your staff and volunteers are informed of the community and mainstream services available to consumers with an intellectual disability.

Provide details of how consumers with intellectual disabilities are informed of and supported in their use of other services available to them in the community.

Describe the referral process used by your agency, including factors taken into consideration, and any follow up action taken by your agency.

How does your agency cooperate with other agencies in order to meet consumer needs? Where appropriate—How is case coordination determined in your service system—how can you show that this happens?

Minimum Criteria

The agency should show that consumers are involved and informed of the referral process. Client preferences and care needs should be the principal factors taken into consideration when making referrals.

Agencies should undertake coordinated service delivery at the individual level. This may be demonstrated by:

- a) comprehensive assessments, which take into account all support needs resulting in referrals to other agencies where appropriate;
- b) maintenance of a comprehensive list of other agencies in the area, which is regularly updated in regard to coordinators' names and service activities, to ensure the appropriateness of referrals made;
- c) demonstration of a cooperative approach to assessment by utilising assessments made by other agencies, or by carrying out joint assessments with other agencies; and
- d) demonstration that the agency takes steps where multiple agencies are involved to identify the agency responsible for case management.

Further Requirements

Follow up for both clients referred to the agency and clients referred on to other agencies should occur in a timely manner.

Assessment or reassessment should occur in such a way that the agency can identify client need and eligibility for HACC services even where the agency itself may not be able to assist.

The agency should inform other agencies of the services which it provides, and take steps to obtain information and feedback from other agencies

The agency should demonstrate that it works with other agencies to coordinate service delivery at the regional level by participation in activities such as regional HACC coordination meetings.

Special Considerations

Some aspects of this standard may not be relevant to agencies that provide services to consumers based on the referral of another agency or body and who do not undertake their own comprehensive assessments.

Replying to the performance information

In the process of assessment, reassessment, or informal reassessment your agency may identify client needs which the agency itself cannot fulfil. With the client's permission, HACC-funded agencies should coordinate with other agencies in meeting the service needs of clients.

Describe the referral process used in your agency, including how consumers are involved and informed of this process. Where available, refer to agency policy and demonstrate how this is translated into agency procedure by providing examples of referral forms and detailing how these are used.

Outline how client preferences are taken into account in the referral process. For instance, how your agency deals with cases in which clients do not want involvement from another specific agency.

Detail the factors that your agency takes into account when considering referral of clients. These should include how you decide on their eligibility for services, whether you make an assessment of their relative need, and how you assess the appropriateness to the client of your services in relation to other available services.

Provide detail on what information you keep on other agencies that would be appropriate for client referral.

Outline the processes followed by agency staff in following up on referrals. These may include descriptions of established procedures you have for linking with and referring to other agencies and procedures for keeping in touch with clients during these processes. If they are established, how does your agency link with and participate in agency/service provider networks? Describe the documentation your agency keeps on responses to referrals, including referrals from other agencies and referrals from your own agency to others.

Comment on the time taken between referral of clients from other agencies until assessment and service delivery in your agency.

Replying to the performance information

If there is more than one agency providing care to your clients, describe how these services are coordinated. How is case management decided? How are the assessments and care plans of other agencies taken into account and responsibility for service delivery made clear to all parties?

If your agency needs to reduce or end a service, does consultation with other relevant agencies occur before the service is reduced or ended? Where further referral is necessary are all agencies informed?

**Objective 5: PRIVACY, CONFIDENTIALITY AND
ACCESS TO PERSONAL INFORMATION**

*To ensure that each consumer's rights to
privacy and confidentiality are respected, and he or she has
access to personal information held by the agency.*

- 5.1 Consumer Outcome:** Consumers are informed of the privacy and confidentiality procedures and understand their rights in relation to these procedures.
- 5.2 Consumer Outcome:** The release of consumer information occurs with the consent of the consumer or their advocate or legal guardian.
- 5.3 Consumer Outcome:** Consumers are able to gain access to their personal information.

How does your agency ensure that the release of consumer information occurs with the consent of the consumer or their advocate or legal guardian?

Minimum Criteria

The release of information about clients to other agencies should only occur with their consent or, where relevant, the consent of their advocate or legal guardian. The agency should demonstrate that it has procedures in place to ensure that a consumer's agreement is gained before information about that person is passed on to another agency or person.

Further Requirements

The agency should have obtained written consent (for example, by having clients sign a confidentiality release form) or, if more appropriate, the agency should have obtained verbal consent at the time a referral or other exchange of information is being considered.

Where an agency has consumers sign confidentiality release forms at the time of their assessment the agency should also indicate that consumers are informed of who information will be released to on the basis of these forms.

The agency should inform consumers of their right to withdraw consent to release personal information.

Special Considerations

Some agencies may not be routinely involved in the exchange of client information with other agencies. In such circumstances, signed confidentiality release forms may not be appropriate.

For some agencies it may be necessary to release information about a consumer in response to an emergency situation. Where there is the potential for this to occur, the agency should have made provision to release information with the consumer's prior consent.

Replying to the performance information

Please state whether it is ever necessary for your agency to pass on personal information to another agency or person about consumers, for example, when making referrals. If this is the case, how do you ensure that consumers agree that the agency may pass on information about them in each circumstance?

What are the procedures that your agency follows governing the exchange of information with other agencies?

Provide detail on the number of consumers who have signed confidentiality release forms expressed as a percentage of the number of consumers for whom personal information was released.

What provisions are made for the release of consumer information in the case of an emergency?

What provisions are made for the release of consumer information in cases where consumers are unable to sign.

If your agency gains the consent of consumers to release information, how do you inform them and give them a choice of who this information is going to.

Does your agency enable consumers to access their personal information upon request?

Minimum Criteria

Where the agency holds client records it should demonstrate that it has a policy on granting access to this personal information by consumers, and that consumers are clearly advised of this.

The agency should demonstrate that it has procedures in place to determine whether a person is an appropriately authorised representative of a consumer and should be granted access to that consumer's records.

Further Requirements

The agency should inform consumers of the types of personal records kept by the agency and of the legal responsibility of the agency to safeguard this information.

Replying to the performance information

Outline or cite your agency's policy in relation to allowing consumer's access to their personal information.

Describe how your agency informs clients of what information your agency holds about them and their right to access this information.

Describe the circumstances in which a request for information would be denied.

If your agency does not have a formal policy, the nature of the records kept by your agency should be described.

Objective 6: COMPLAINTS AND DISPUTES

To ensure that each consumer has access to fair and equitable procedures for dealing with complaints and disputes

- 6.1 Consumer Outcome:** Consumers are aware of the complaints process.
- 6.2 Consumer Outcome:** Each consumer's complaint about a service, or access to a service is dealt with fairly, promptly, confidentially and without retribution.
- 6.3 Consumer Outcome:** Services are modified as a result of 'upheld' complaints.
- 6.4 Consumer Outcome:** Each consumer receives assistance, if requested, to help with the resolution of a conflict about a service that arises between the frail elderly person or younger person with a disability and his/her carer.

How does your agency ensure that consumers are aware of the complaints process?

Minimum Criteria

The agency should demonstrate that it provides information about the complaints process to consumers, and that it explains these procedures to consumers at the time of their commencement with the service. Such information should include details of who to contact in the agency and what position of authority they hold.

Further Requirements

The agency should be made aware of how they can express their informal concerns to the agency about the service they received.

The agency should demonstrate that it takes some action to periodically remind all consumers of these procedures.

The agency should inform consumers of the external bodies within the State or Territory to whom complaints can be taken.

Replying to the performance information

In detailing how your agency ensures that consumers are made aware of the complaints process, attach relevant handouts and cite relevant policy documents or client handbooks where appropriate.

Describe how your agency informs consumers of your agency's internal processes for handling complaints including which person in the agency they can approach and what position of authority they hold.

Discuss the means by which your agency ensures that consumers are aware of methods for informally having their concerns resolved.

How often does your agency remind consumers of your complaints process?

Describe how your agency informs consumers of the external processes for handling complaints available within the State or Territory.

How can your agency demonstrate that consumer complaints are dealt with fairly promptly confidentially and without retribution?

Minimum Criteria

To meet this standard at a minimal level the agency should demonstrate that it has a complaints process which is designed to be fair and enable a timely response, (for example, the person affected by a decision should be informed of all facts against him or her and given an opportunity to put his or her case), the decision maker should act fairly and without bias, and the decision making process should occur within a specified time frame.

The agency should have processes for ensuring confidentiality and non-discriminatory treatment of consumers who make a complaint.

Further Requirements

The agency should be able to outline the process by which 'informal complaints' or concerns are dealt with, again demonstrating that it is fair, timely, treated confidentially, and does not result in discriminatory treatment of the client involved. Staff should be aware of both the formal and informal procedures for dealing with consumer complaints and should received training in resolving complaints and disputes.

Replying to the performance information

Describe your agency's complaints policy and process. This description of your complaints policy and process should indicate that your agency's complaints process is fair. For instance, the person affected by a decision should be fully informed of all facts against him or her; a person affected by a decision should be given an opportunity to put his or her case; and the decision maker should act fairly and without bias.

Processes for ensuring confidentiality and continued non-discriminatory treatment should be explained.

Give an indication of how quickly your agency acts on complaints which it receives. Staff training in dealing with complaints should be detailed.

Give examples of how your agency goes about the resolution of less formally stated concerns expressed by consumers.

How can your agency demonstrate that it can offer assistance to help with the conflict about a service between a client and his/her primary carer?

The term 'carer' refers to the primary carer of the frail elderly person or younger person with a disability. Service providers have a responsibility to mediate and attempt to negotiate a solution if conflict about a service arises between the carer and the frail elderly person or younger person with a disability. For example, the primary carer may wish to have some hours of respite care in which the person they care for attends centre day care. The person being cared for may not wish to do this.

Minimum Criteria

While some agencies may not have formal policies relating to this issue, the agency should be able to demonstrate that it has a clear and appropriate way of dealing with such situations. In general:

- a) agencies should encourage early, open discussion of any potential difficulties;
- b) the use of advocates should also be encouraged, preferably at an early stage. The agency should provide advice to this effect; and
- c) referrals to advocacy or counselling services should be arranged if requested.

Staff should be aware of the policies and procedures relevant to conflict about a service arising between the carer and the frail elderly person or younger person with a disability.

Further Requirements

The agency should be able to demonstrate that it is aware of the special needs of some groups in relation to this standard, for example, consumers with dementia and their carers.

Replying to the performance information

Provide detail of your agency's policies and procedures with regard to dealing with situations of conflict about a service between a frail elderly person or younger person with a disability and their carer.

Outline the circumstances under which your agency would offer assistance in a conflict between a consumer and his or her primary carer.

Outline what type of action your agency might take when a conflict about a service arises (for example, referral to or provision of mediation/conflict resolution services or support services or whether your agency informs both parties to a dispute of other alternatives for conflict resolution).

Comment on how your agency policy on this matter is appropriate and available to different special needs groups, for example, consumers with dementia and their carers.

If you do not have a formal policy covering this situation, describe the action your agency would take or has taken in the past.

Objective 7: ADVOCACY

*To ensure that each consumer has access to
an advocate of his or her choice.*

- 7.1 **Consumer Outcome:** Each consumer has access to an advocate of his/her choice.
- 7.2 **Consumer Outcome:** Consumers know of their right to use an advocate.
- 7.3 **Consumer Outcome:** Consumers know about advocacy services – where they are and how to use them.
- 7.4 **Consumer Outcome:** The agency involves advocates in respect to representing the interests of the consumer.

How does your agency ensure that advocates are involved in representing the rights and concerns of consumers?

Minimum Criteria

The agency should demonstrate that it has policies and procedures in place to encourage the use of an advocate where that is the wish of the consumer.

The agency should demonstrate that it provides information to consumers about what an advocate is, how to obtain one, and their right to use one.

The agency should be aware of the types of service provided by advocacy groups in their area.

Further Requirements

The agency should also demonstrate that it takes some action periodically to remind all consumers about advocacy, and in particular, takes steps to convey this information to consumers who may appear to have a particular need for it.

The agency should have established links with advocacy groups in their area. Inviting advocacy agencies to speak to staff and consumers may be one demonstration of establishing such links.

The agency should have taken steps to inform staff of advocacy services and train them on the involvement of advocates.

Special Considerations

If the agency is one which provides advocacy services for consumers, it should ensure that clients are aware of their rights in relation to these services, including the option to change advocates and obtain one from another service if desired.

Replying to the performance information

Describe the means by which your agency ensures that consumers receive and understand information about their rights to use an advocate and how to access advocacy services. Attach relevant documents and handouts where available.

Indicate whether your agency makes it clear to consumers that they are free to ask a family member, friend or other person to advocate on their behalf, and that the agency would welcome the involvement of this advocate.

Does your agency ensure that consumers are aware that they can change their nominated advocate at any time?

Describe how your agency promotes the involvement of advocates. What are your agency's policies and procedures on the involvement of advocates (cite relevant agency policy or client handbook, etc.)?

Comment on the links your agency has established with advocacy groups in the area who may assist consumers.

What action does your agency take to periodically to remind all consumers about advocacy, and in particular, does your agency take steps to convey this information to consumers who may appear to have a particular need for it?

Describe the measures your agency takes in informing and training staff on involving advocates.

If your agency provides advocacy services for consumers describe how you make clients aware of their rights and responsibilities in relation to your services and how they are made aware of their right to choose another advocate.

Agency Appraisal Summary Form

This form consists of two parts:

1. a summary of the agency's appraisal; and
2. a forward action plan.

Part 1

Date of appraisal:

Type of appraisal:

Name of agency:

Contact person and phone no.:

Participants:

Overall rating for the agency against the National Service Standards

Objective	Rating	Number of applicable ratings
1. Access to services		
2. Information and consultation		
3. Efficient and effective management		
4. Coordinated, planned and reliable service delivery		
5. Privacy, confidentiality and access to personal information		
6. Complaints and disputes		
7. Advocacy		
Total score		

On the basis of the information gathered during the appraisal of the agency, the agency is considered to have: (please tick the appropriate box)

More than 1.75
High Standard

Between 1.50 and 1.74
Good Standard

Between 1 and 1.49
Basic Standard

Less than 1.00
Poor Standard

Forward action plan completed: Yes No

Date(s) for reviewing action plan outcomes:

Date of next appraisal:

Comments:

Signature of committee members and funding authority representative:

Appendix B

**Revised consumer feedback questionnaire
(version mailed to consumers)**

HACC consumer feedback interview schedule

The following questions are about the services and assistance you have been receiving from your local Home and Community Care (HACC) agency.

It is important that all government agencies providing assistance of this type receive some kind of feedback on their services. The Federal and State Governments also need to know that the quality of service you are receiving is of an acceptable level.

Your participation in this interview is entirely voluntary. Please indicate if there are any questions you would rather not answer. Your replies to the interview questions will be completely confidential. No information about you or your answers will be passed back to the agency providing your services.

Thank you for your time.

If the main client of the service is unable to complete this interview, a carer or household member may do so on his or her behalf.

Name of agency

1: Provision of services

1 Did someone from the agency discuss your needs with you before they began providing services?

- Yes..... 1
- No..... 2
- Unsure..... 3

2 *If the agency discussed your needs with you, did they take into account all the things you and your carer might need help with?*

- Yes..... 1
- Mostly..... 2
- Can't remember..... 3
- No..... 4

3 Do you receive more than one service from the agency ?

- Yes..... 1
- No..... 2

4 *If you do receive more than one service from the agency, are they provided in a coordinated fashion?*

- Yes..... 1
- Partly..... 2
- No..... 3

5 What type of assistance do you receive from the agency?

.....

.....

.....

.....

6 Did the agency make a clear agreement with you about which services (they would provide to you), how often you would get them and for how long?

- Yes..... 1
Some of this information..... 2
No, none of this information..... 3

7 Do you think that the services the agency said they would provide were the right services (or the right amount of services) for you?

- Yes..... 1
No..... 2

8 *If you did not think the services were right, did you discuss this with the agency?*

- Yes..... 1
No..... 2

9 Does the agency provide you with help in the way they said they would provide it?

- Yes..... 1
Most of the time..... 2
No..... 3

2: Rights and information

1 How were your rights and responsibilities explained to you? (this would include your right to access personal information, confidentiality of personal information and privacy issues)

- Verbally explained..... 1
Information provided (leaflets etc.)..... 2
Already familiar with information..... 3
Not explained..... 4

2 Do you have any concerns with the way the agency deals with privacy and confidentiality of information?

- Yes..... 1
No..... 2

3 Do you have any concerns about the personal information the agency might keep about you?

- Yes..... 1
No..... 2

4 Are you aware of any occasions when the agency may have passed on information about you without asking for your permission first?

- Yes..... 1
No..... 2

5 Have you ever tried to get hold of the personal information that the agency has about you?

- Yes..... 1
No..... 2

6 *If you have tried to obtain personal information, did you get the information you wanted?*

- Yes..... 1
Mostly..... 2
No..... 3

3: Satisfaction with services

1 How satisfied are you with the performance of the staff at the agency?

- Very Satisfied..... 1
- Moderately Satisfied..... 2
- Unsatisfied..... 3
- Unsure..... 4

Please comment/explain if you wish

.....

.....

.....

.....

2 Have you ever been concerned about your safety or security because of the actions of agency staff?

- Yes..... 1
- No..... 2

3 Does anyone from the agency discuss with you the need to change or increase the amount of help you receive?

- Yes..... 1
- Yes, but not as often as I would like..... 2
- No..... 3

4 How often does someone from the agency contact you to see how you are getting along?

- At least weekly..... 1
- At least every two weeks..... 2
- At least every two months..... 3
- At least every 6 months..... 4
- About once a year..... 5
- Not at all..... 6

5 Do you feel that you could gain access to documents about the way the agency is run, if you wanted to?

- Yes..... 1
- Unsure..... 2
- No..... 3

6 Have you ever asked the agency for help and been refused?

Yes..... 1
No..... 2

7 If you have been refused help, what help did you ask for?

.....
.....
.....
.....

8 Did the agency explain why they refused to help ?

Yes..... 1
No..... 2

9 Were you satisfied with their response?

Yes..... 1
Partly..... 2
No..... 3
Not applicable..... 5

10 Has the agency informed you of what to do if you're not happy with the service you get?

Yes..... 1
Unsure..... 2
No..... 3

11 Did the agency tell you that you can voice any concerns you have about them to outside authorities?

Yes..... 1
No..... 2

12 Do you feel confident that the agency will listen to any concerns you have, and deal with them properly?

Yes..... 1
Unsure..... 2
No..... 3

13 Do you think that things would go badly for you if you made a complaint about the agency?

- Yes..... 1
- Unsure..... 2
- No..... 3

14 What do you think would happen if you made a complaint about the agency?

.....

.....

.....

.....

4: Advocacy

An advocate is a person you can choose to represent your rights, and negotiate on your behalf. This may be a friend, a family member or an advocacy service.

1 Did you receive any information from the agency about how you could obtain an advocate?

- Yes..... 1
- Unsure..... 2
- Previously had information..... 3
- No..... 4

5: General Information

1 You are...

- Male..... 1
Female..... 2

2 You are aged between...

- 0-54 years..... 1
55- 64 years..... 2
65-74 years..... 3
75-84 years..... 4
85 and over..... 5

3 The services you are receiving are primarily...

- to help you..... 1
to help the person you are caring for..... 2
to help you as a carer..... 3

4 You are... (Please feel free to tick more than one box)

- From a non-English speaking background..... 1
Of Aboriginal or Torres Strait Islander descent..... 2
A pension recipient or otherwise financially disadvantaged..... 3
Living in a rural or remote area..... 4
Caring for someone with dementia..... 5
None of the above..... 6

5 Is the agency sensitive and responsive to your different requirements as a member of one of these groups?

- Yes..... 1
Partly..... 2
No..... 3

Appendix C

Guide to scoring for assessors (developed after the pilot)

Includes instructions on the calculation of the Instrument Score and the Compliance Indicator.

HACC National Service Standards Instrument

Guide to scoring

Performance against the standards

The HACC National Service Standards Instrument provides a means to assess the extent to which agencies are complying with the HACC National Service Standards. There are seven objectives in the HACC National Service Standards, which are listed in the Instrument. These are:

- 1 Access to services;
- 2 Information and consultation;
- 3 Efficient and effective management;
- 4 Coordinated, planned, and reliable service delivery;
- 5 Privacy, confidentiality, and access to personal information;
- 6 Complaints and disputes; and
- 7 Advocacy.

Each of the above objectives has a number of service standards, which in the Instrument, are accompanied by questions to be answered by agencies. Overall, there are 27 service standards and 29 questions relating to these standards.

The Instrument is divided into seven sections according to the seven HACC objectives. Each section lists:

- the objective;
- the service standards and questions to be answered against them;
- two levels of performance criteria: – minimum criteria
– further requirements; and
- information on how to answer the performance information (called 'Replying to the performance information').

In each section agencies are asked to provide information about their performance as it relates to the standards.

These answers must be used to determine the agency's level of compliance against the HACC National Service Standards. The three levels of compliance are:

- met;
- partly met; and
- not met.

This assessment is based on the extent to which the agency satisfies the performance criteria listed with each question.

There are two levels of performance criteria:

- *Minimum Criteria* are those that must be satisfied in order to avoid a not met rating;
- *Further Requirements* are those that must be satisfied in order to achieve a met rating.

In some instances, a rating is based on the responses to more than one question. There is no inconsistency if a service is still able to improve performance in an area where the standard is considered to be met. Similarly, a not met rating does not indicate that an agency has met none of the *Minimum Criteria*. Furthermore, it is acknowledged that, as a result of the ongoing commitment of many HACC-funded agencies to quality assurance, some agencies provide service of quality far exceeding that described in this Instrument.

The HACC National Service Standards Instrument has been designed to be relevant to all HACC-funded agencies with the exception of those solely providing advocacy, information, and/or education services. In a few cases, however, one or more criteria listed as *Further Requirements* or even as *Minimum Criteria* will not be relevant to an agency. In a few cases criteria may be relevant but only to a limited extent or in a modified manner.

Recognising the diversity inherent in the delivery of HACC-funded services, *Special Considerations* lists areas for which it is recognised that performance requests may apply only in part, not at all, or with flexible interpretation to an agency. There may be other issues, not listed under *Special Considerations*, which affect the relevance of the performance criteria to your agency.

The extent to which the agency must satisfy the performance criteria to receive a met, partly met or not met rating is necessarily a matter requiring knowledge of and judgments about the individual circumstances of the agency. The HACC National Service Standards Instrument is not intended as a rigid prescriptive tool for agency practice. Rather it is intended as a guide for agencies to ensure that service is provided in a way that promotes quality outcomes for consumers. It should be interpreted so as to be applicable to the charter and circumstances of every agency, as varied as they may be.

Calculating the Instrument Score

The Instrument Score represents the overall performance of the agency against the HACC National Service Standards as they are measured in the Instrument.

The Instrument Score is calculated in the following way:

- Performance against the standards is assessed according to a rating of met, partly met or not met, as described previously. As indicated in the Instrument, a met rating receives a score of 2, a partly met receives a score of 1, and a not met receives a score of 0.
- Individual ratings are added together to achieve a summed score with a possible range of 0 to 42.
- This summed score is then divided by the number of ratings used to calculate it, that is, the number of ratings received in the Instrument and then multiplied by 10.

This figure represents the Instrument Score and is the average of the ratings achieved by your agency. The Instrument Score has a possible range of 0 to 20. The Instrument Score is used to find the extent to which the agency meets the standards in the following manner:

Instrument Score	Overall performance against the Standards
Less than 10.0	Poor
10.0 to 14.9	Basic
15.0 to 17.4	Good
17.5 to 20.0	High

For a minority of agencies, one or more standards and their associated performance information may be inappropriate to be included as a part of quality of service assessment. In these cases, it may be necessary to have no score recorded in the categories of met, partly met or not met. If scores were simply added these agencies would lose the value of a score for that standard, in the same way as if they had scored a not met. The method of calculating the average rating ensures that these agencies are not be unfairly penalised in this manner. Their Instrument Score is only based on applicable standards but allows all agencies to be compared according to a common scale, regardless of the number of standards applicable to each.

Example 1:

Agency A received 16 met ratings, 3 partly met ratings, and 2 not met ratings.

- Ratings are added together to form a summed score:
 $(16 \times 2) + (3 \times 1) + (2 \times 0) = 35$
- The summed score is divided by the number of applicable ratings, in this case, 21 and then multiplied by 10.
 $35/21 \times 10 = 16.7$
- With an Instrument Score of 16.7, the overall performance of Agency A against the standards is good.

Example 2:

Agency B received 8 met ratings, 9 partly met ratings, and 3 not met ratings. One standard and its associated performance information were not applicable.

- Ratings are added together to form a summed score:
 $(8 \times 2) + (9 \times 1) + (3 \times 0) = 25$
- The summed score is divided by the number of applicable ratings, in this case, 20 and then multiplied by 10.
 $25/20 \times 10 = 1.25$
- With an Instrument Score of 12.5, the overall performance of Agency A against the standards is basic.

Calculating the Compliance Indicator

The Compliance Indicator represents the performance of the agency against the individual objectives of the HACC National Service Standards.

The Compliance Indicator is calculated in the following way:

- Performance against the standards is assessed according to a rating of met, partly met or not met; a met rating receives a score of 2, a partly met receives a score of 1, and a not met receives a score of 0.
- The scores for individual ratings of met, partly met and not met are added together within each objective.
- These summed scores are then divided by the number of ratings used to calculate them, that is, the number of ratings received for each objective. This figure represents the Compliance Indicator and is the average of the ratings achieved by the agency for each objective. The Compliance Indicator has a possible range of 0 to 2.

The number of standards in each objective varies. If scores were simply added across standards within an objective it would not be possible to compare agency performance against one objective with performance against another. The method of dividing the summed score by the number of relevant ratings allows performance against objectives to be compared according to a common scale.

Example 1:

Agency A received 1 met ratings and 2 partly met rating under Objective 2.

1. Ratings are added together to form a summed score:

$$(1 \times 2) + (2 \times 1) = 3$$

2. The summed score is divided by the number of applicable ratings, in this case, 3.

$$3/3 = 1.00$$

Example 2:

Agency A received 3 met ratings and 1 not met rating for Objective 4. One standard and its associated performance information under this objective was not applicable to Agency A.

1. Ratings are added together to form a summed score:

$$(3 \times 2) + (0 \times 1) + (1 \times 0) = 6$$

2. The summed score is divided by the number of applicable ratings, in this case, 4.

$$6/4 = 1.50$$

Appendix D

Table A.1: Intercorrelations for the HACC National Service Standards as measured by the Instrument

Standard	1.1	1.2	1.3	1.4	1.5	2.1	2.2	2.3	3.1	3.2	3.3	4.1
1.2	0.58											
1.3	0.32	0.52										
1.4	0.30	0.54	0.48									
1.5	0.33	0.41	0.44	0.52								
2.1	0.34	0.35	0.47	0.44	0.50							
2.2	0.35	0.46	0.62	0.42	0.35	0.36						
2.3	0.50	0.51	0.48	0.48	0.39	0.39	0.46					
3.1	0.34	0.42	0.48	0.51	0.27	0.24	0.42	0.41				
3.2	0.36	0.40	0.43	0.50	0.39	0.31	0.47	0.39	0.51			
3.3	0.65	0.43	0.46	0.38	0.46	0.36	0.36	0.40	0.44	0.47		
4.1	0.43	0.34	0.42	0.38	0.36	0.43	0.34	0.30	0.42	0.28	0.41	
4.2	0.42	0.35	0.41	0.40	0.24	0.28	0.37	0.56	0.37	0.37	0.52	0.34
4.3	0.34	0.47	0.73	0.44	0.36	0.38	0.82	0.45	0.49	0.60	0.39	0.39
4.4	0.36	0.36	0.46	0.38	0.27	0.32	0.62	0.50	0.41	0.44	0.38	0.28
4.5	0.48	0.43	0.31	0.35	0.50	0.34	0.43	0.42	0.54	0.44	0.48	0.40
5.1	0.31	0.43	0.43	0.41	0.47	0.65	0.42	0.38	0.21	0.25	0.38	0.28
5.2	0.47	0.27	0.08	0.09	0.24	0.40	0.25	0.14	0.16	0.05	0.28	0.35
5.3	0.26	0.29	0.21	0.28	0.19	0.41	0.34	0.21	0.24	0.19	0.13	0.14
6.1	0.19	0.43	0.51	0.48	0.45	0.57	0.47	0.47	0.42	0.40	0.26	0.39
6.2	0.26	0.50	0.51	0.51	0.44	0.46	0.34	0.37	0.37	0.25	0.25	0.33
6.3	0.25	0.49	0.41	0.49	0.46	0.34	0.32	0.32	0.27	0.24	0.30	0.33
6.4	0.45	0.45	0.42	0.41	0.37	0.37	0.51	0.38	0.43	0.59	0.43	0.30
7.1, 7.2, 7.3	0.22	0.22	0.43	0.30	0.36	0.57	0.23	0.40	0.37	0.37	0.29	0.24
7.4	0.28	0.33	0.53	0.40	0.40	0.47	0.31	0.33	0.40	0.36	0.37	0.32

Standard	4.2	4.3	4.4	4.5	5.1	5.2	5.3	6.1	6.2	6.3	6.4	7.123
4.3	0.39											
4.4	0.46	0.65										
4.5	0.37	0.37	0.22									
5.1	0.33	0.27	0.38	0.36								
5.2	0.16	0.13	0.14	0.31	0.34							
5.3	0.24	0.17	0.24	0.24	0.55	0.46						
6.1	0.26	0.47	0.36	0.46	0.59	0.26	0.34					
6.2	0.33	0.39	0.39	0.31	0.40	0.22	0.34	0.58				
6.3	0.36	0.39	0.36	0.35	0.36	0.30	0.24	0.55	0.76			
6.4	0.42	0.43	0.46	0.36	0.48	0.27	0.48	0.33	0.41	0.33		
7.1, 7.2, 7.3	0.32	0.25	0.25	0.26	0.55	0.23	0.31	0.53	0.25	0.20	0.40	
7.4	0.38	0.43	0.33	0.24	0.38	0.08	0.12	0.37	0.38	0.28	0.53	0.67

Appendix E

Members of the HACCC Officials Standards Working Group

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Appendix F

Glossary of statistical terms

Alpha reliability coefficient

Also known as Cronbach's Alpha coefficient, an Alpha reliability coefficient is a numerical expression of the degree of relationship between items that are intended to measure the same phenomenon. When these related items are added to form a scale the reliability coefficient indicates the extent to which the scale yields a dependable measure of the phenomenon, that is, it measures aspects of the same underlying phenomenon with each item of the scale. A high Alpha of around 0.80 would occur if items measured almost identical aspects; an Alpha of around 0.70 would indicate a reliable scale with items that measured overlapping but not completely identical aspects of the phenomenon.

Correlation

A correlation is a relationship between two variables such that a systematic change in one variable is accompanied by a systematic change in another. Where the correlation coefficient is positive, an increase in the magnitude of one variable is accompanied by an increase in the magnitude of the other. Where the correlation coefficient is negative, an increase in the magnitude of one variable is accompanied by a decrease in the magnitude of the other. A correlation coefficient of zero indicates no relationship between two variables. A correlation coefficient of one indicates a perfect relationship between two variables such that a change in one is always associated with an equivalent change in the other.

A correlation between two variables describes the strength of association between them. For example, for the consumer survey item 'Did the agency tell you that you can voice any concerns you have about them to outside authorities?', a *yes* response was coded as 1 and a *no* response was coded as 2. The standards were scored with 'not met' coded as 0, 'partly met' coded as 1, and 'met' coded as 2. The correlation of this item with Standard 6.1 was -0.33 . Hence where consumers indicate that the agency has not told them they could complain to outside authorities, it can be said to be somewhat likely that the agency will score poorly against Standard 6.1 (consumers are aware of the complaints process).

When correlations are high they can be used to make predictions about the expected size of one variable given the size of another. The correlations obtained for the data in this study, however, are generally not high enough to make accurate predictions. A correlation of 0.33 would explain only 11% of the variance in the predicted variable – a large margin of error since 89% of variation in scores against the standard can not be explained by the relationship with the consumer responses.

It should be noted that a correlation does not imply a causal relationship. If two measures, A and B, are correlated, it may be that A causes B, that B causes A, or that A and B are both caused by a third factor.

Factor analysis

A factor analysis is a statistical procedure which identifies a smaller number of dimensions or factors within a larger set of items by examination of correlation coefficients. Variables that correlate highly together are identified as representing a factor. This emergent factor may be considered as a source variable that accounts for the inter-relations between the variables. Variables that do not correlate with each other are identified as representing independent factors, that is, different underlying dimensions. The factors that emerge from a factor analysis represent underlying regularities in the data, but the meaning of these regularities must be inferred by subjective examination. They may reflect a theoretically expected dimension or they may occur as a result of some other unanticipated phenomenon.

Mean

The mean is calculated by adding together all the item values in a series and dividing the total by the number of items in that series.

Standard deviation (SD)

The standard deviation is calculated by subtracting each item value from the mean item value in the series, to give a measure of each item's distance from the mean. This score is then multiplied by itself (squared). These squared distance scores are then summed for all items and divided by the number of items in that series minus one (for estimating to a population). The standard deviation is calculated when the square root of this term is taken.

The standard deviation represents the variability of scores around the mean. For data that is normally distributed (as is the data in this study) approximately 68% of scores fall within one standard deviation of the mean.¹ For example, if the mean Instrument Score for all HACC agencies is 1.56 and the standard deviation is 0.39, then approximately 68% of HACC agencies have Instrument Scores that fall between $(1.56 - 0.39) = 1.17$ and $(1.56 + 0.39) = 1.95$.

t-test

A *t*-test provides a method of determining whether the scores of two groups differ more than would be expected by chance. Taking into account the standard deviation of scores within each group and the number of members in each group, a comparison is made of

1. Aczel A D 1989. Complete business statistics. Second edition. Irwin: Homewood, IL.

the mean scores for each of the two groups. The calculated t statistics allows this comparison. The value of this statistic has an associated probability of occurrence. Values of t considered to be significant are those where the probability of occurrence by chance is less than 5% ($p < 0.05$).

For example, the mean Instrument Score for agencies which undertook peer review was 1.64 according to agency ratings, and 1.20 according to assessor ratings. The t -test for the comparison of these means was 3.21 with an associated probability of 0.01. This is a statistically significant result. In other words, there is a consistent difference between Instrument Scores given by a peer review assessor and those given by the agencies; one that is unlikely to be a product of chance. The likelihood of this difference occurring by chance is less than 5% (the conventionally determined cut-off for significance tests).