

active

Brad Meehan



BACKGROUND

Experience across a wide range of leading brands



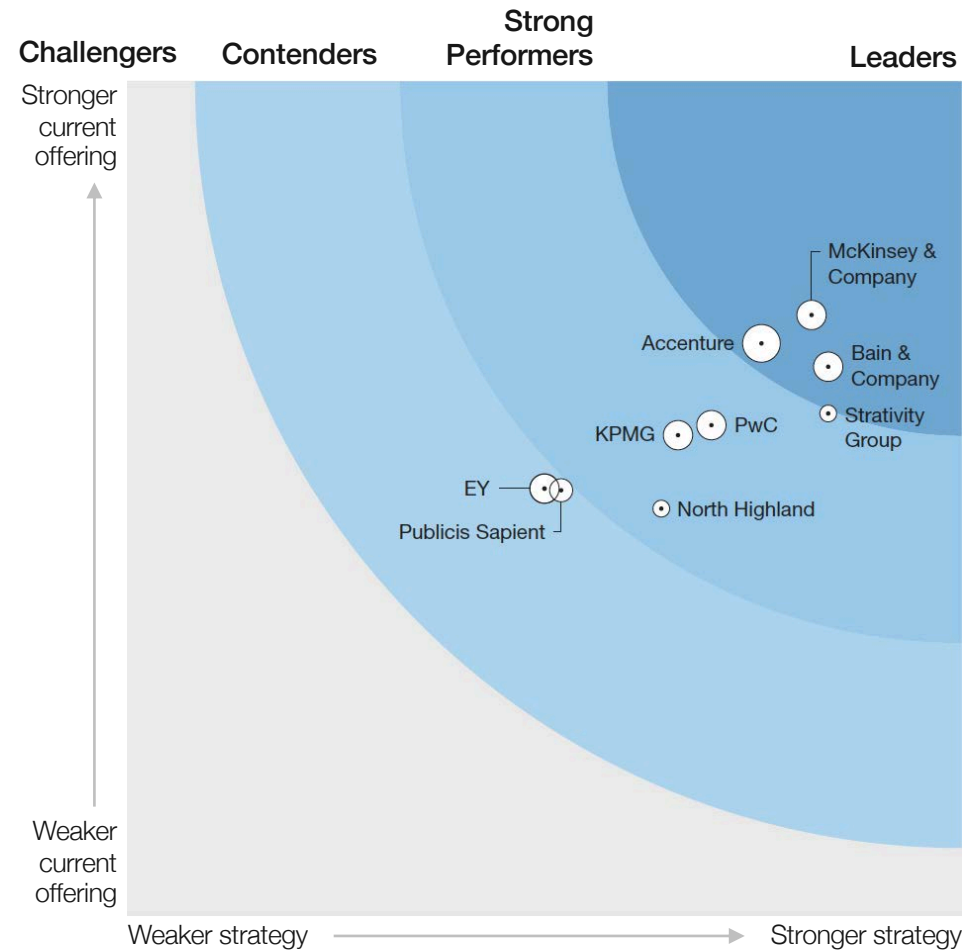
BACKGROUND

Top 4 Customer Experience Consulting Practices – Forrester

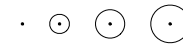
According to Forrester, Strativity Group is in the top 4 consulting practices, and on the cutting edge of CX strategy.

We are the only niche provider, punching well above our weight while bringing a passion, flexibility and value that larger competitors cannot match.

The Forrester Wave™ CX Consulting Practices: Experience Strategy And Business Transformation, Q2 2019



Market Presence



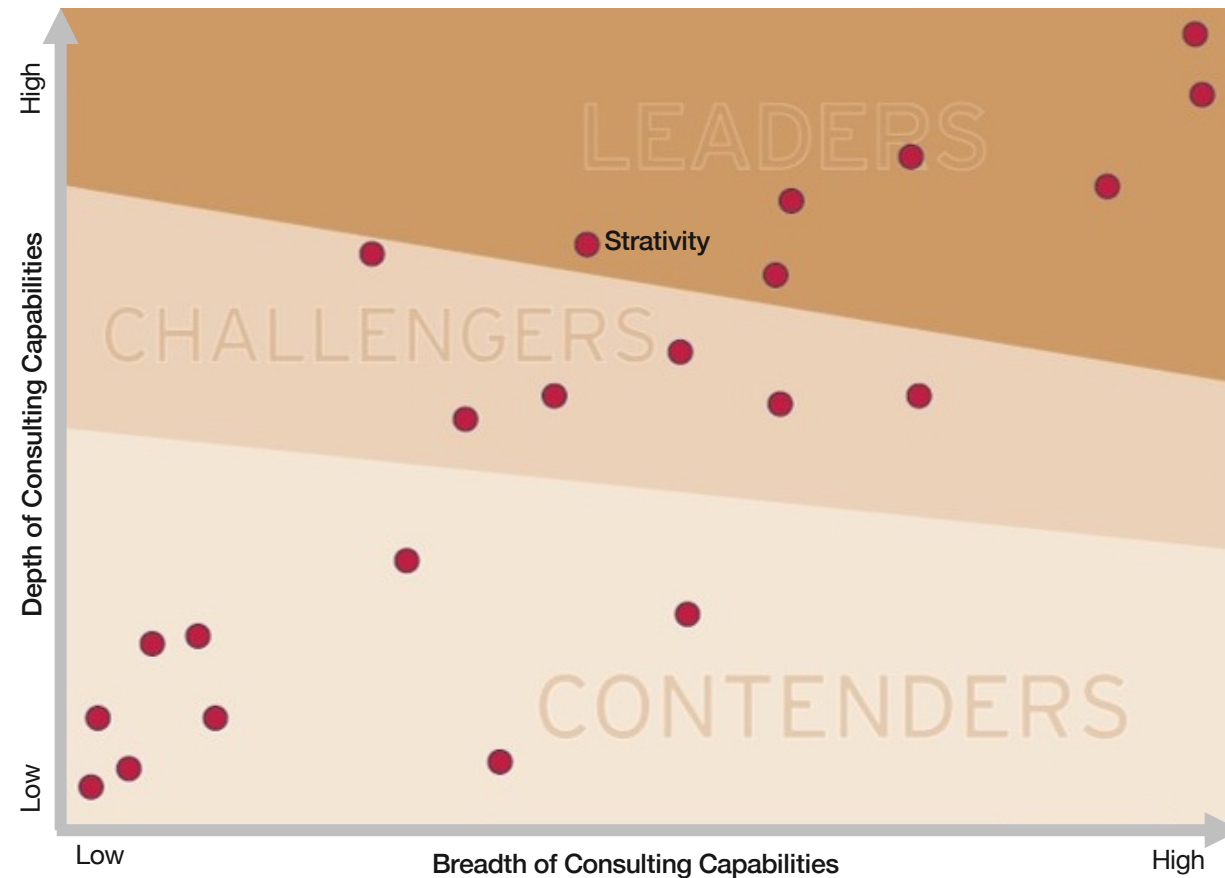
BACKGROUND

Leader in Employee Experience Consulting Practices – ALM Vanguard

As the only boutique consultancy designated a Vanguard leader, Strativity brings the same passion it has for the customer experience to the employee experience, a passion that clients find infectious, invigorating, and thoroughly engaging.

This narrow, but deep market position enables Strativity to effectively serve both the SME market and the largest global corporations.

ALM Vanguard, 2017



Source: The ALM Vanguard: Employee Experience Consulting, ALM Intelligence

BACKGROUND

Exceptional Experiences

Essence	Experience Principles	Employee Perspective
Love	Show me you genuinely care.	We show love and respect to those we serve.
Personalise	Embrace my individuality.	We do it their way. We pay attention to the small things that matter to them.
Reliable	Prove I can depend on you.	We do what we say. We deliver what we promise. We keep customers informed.
Empower	Empower me to live well.	We do it with them, not for them. We're their partners, not their directors.
Expert	Use your expertise for my benefit.	What we do is of the highest quality. We use our experience and expertise in serving and caring to proactively help customers.

Aged Care Quality Standards

agedcarequality.gov.au



Australian Government
Aged Care Quality and Safety Commission

Engage
Empower
Safeguard

[illegible]


FOUR

UNDERSTAND

The process of active listening combined with –high value questioning to empathetically understand the prospective resident's journey to the point of requiring residential aged care.



Kate then records these priorities on an enquiry wizard sheet that she has already started populating.

Target:	Emotion	Put at ease
	Memory	"That was easy and informative"
	Language	Welcoming and genuine
	Scene: <i>Kate's office</i>	
	Props: <i>Desk, Computer, Phone</i>	
	Notes: <i>Maybe have a call out on the screen of the three priorities as the conversation happens</i>	



Kate: "I will get that ACAT Reference number from you in a moment; while it will help us understand Julie's personal care needs really well Abby, our first step is to understand what your priorities are - let me ask what are the most important things you will be looking for when deciding on which home you will choose for your mum."

Abby says: "Well we want to be close as possible as I said so we can visit often but my friend said that we should always ask about staff to resident ratios, the care provided, and I also want her to be active and happy. We have heard so much stuff about nursing homes, we want to make sure that we are choosing one that is well managed and maintained."

Kate listens empathetically and responds: "Absolutely, those points you have raised are most important and no doubt there will be many more that we will work through together. Might I suggest during our phone call today we book a time for you to visit; this is always the best way to get a really good feel for our home; proximity to your home; how it is run, the level of care and the lifestyle program. We also suggest Julie comes with, as it is important for her to feel comfortable as well."

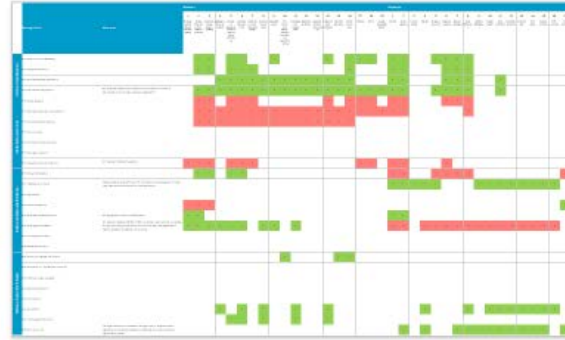
BUSINESS

Strategic Alignment

Alignment of the QSuper group strategy with the aspirational experience was assessed in a workshop with key stakeholders. Each strategic goal and associated measures were assessed against each sub-stage of the member and employer aspirational journey in terms of:

- **Green** - aligned
- **Red** - does not align

Commentary on why a specific goal does not align is provided on the following page. The matrix/heat map of strategic goal vs journey sub-stage adjacent has been provided separately in Excel format.



PEOPLE

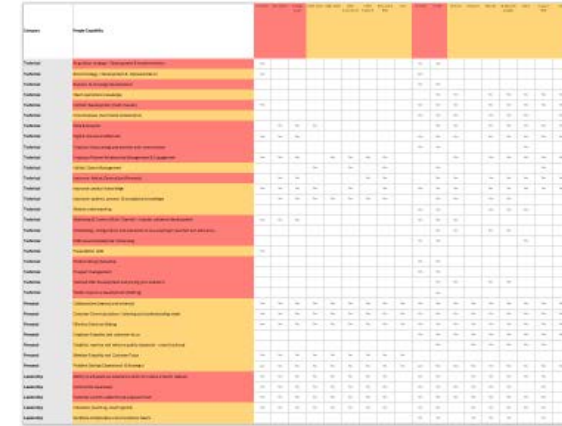
Capability Map

People capabilities were assessed in terms of the gap between current state and the capability uplift required to enable both the member and employer aspirational experience. Technical, leadership and personal attributes were assessed for each of the major member and employer journey stages and determined to require:

- **RED** – significant uplift
- **YELLOW** - moderate uplift

Additional commentary is provided by journey sub-stage in the aspirational experience definition and delivery section of this report.

The adjacent capability heat map has been provided separately in Excel format.



ORGANISATION

Capability Map

Organisational capabilities were assessed by stakeholders in terms of the gap between current state and the capability uplift required to enable both the member and employer aspirational experience. Level 3 capabilities and sub-capabilities were assessed for each of the 19 member journey sub-stages and 17 employer journey sub-stages and determined to require:

- **RED** – significant uplift
- **YELLOW** - moderate uplift
- **GREEN** (or no colour) – minor/no uplift required

Additional commentary is provided by journey sub-stage in the aspirational experience definition and delivery section of this report.

The adjacent capability heat map has been provided separately in Excel format.

The level 3 capability assessment has been mapped to the group value chain on the following page.



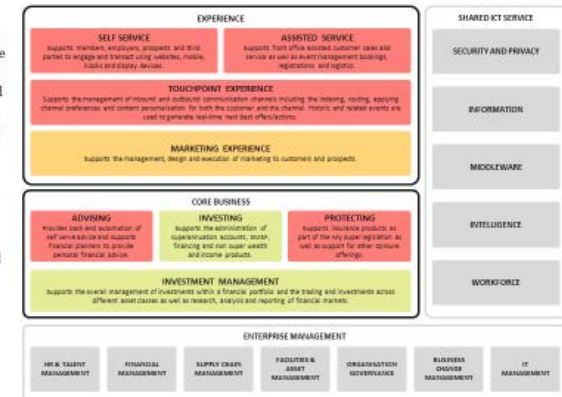
TECHNOLOGY

Platform Architecture

Each solution set of the IT application landscape was assessed by stakeholders in terms of the gap between current state and the capability uplift and investment required to enable both the member and employer aspirational experience. Each domain within a solution set is coded as follows:

- **RED** - significant uplift required
- **YELLOW** - moderate uplift required
- **GREEN** - not applicable
- **GREY** - considered in experience and core business solution sets.

Additional commentary on capability gaps for each relevant domain is provided on the following pages.





ACQA is an industry group representing a diverse range of Aged Care providers.

ACQA members work together on compliance, accreditation and improvements to service delivery, supporting one another in implementing the latest in evidence-based practice.

Our partnership with ACQA allows us to work closely with providers to rapidly respond to changes in compliance and accreditation requirements.



Active Quality is an easy to use cloud-based Continuous Quality Improvement Program

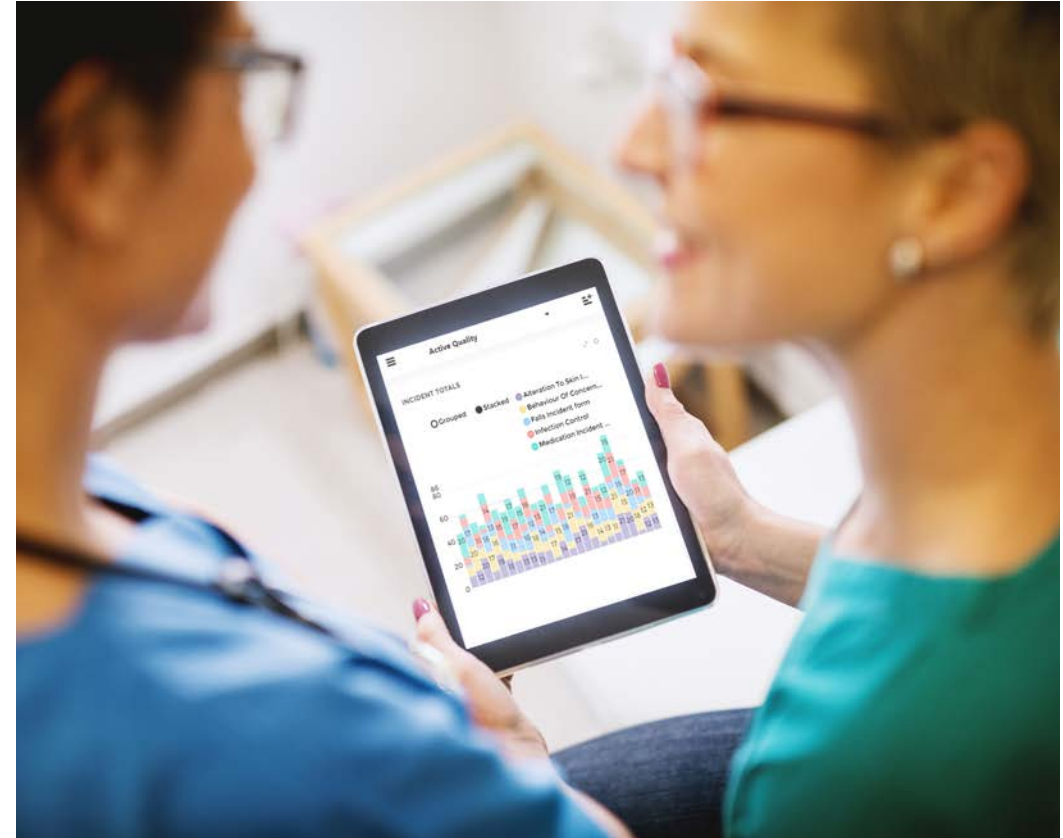
We help Aged Care and Disability Services get their compliance under control so they can focus on exceptional experience delivery and innovation.

25+ **110+** **1110+**

Clients

Care Services

Users



ACTIVE QUALITY MANAGEMENT

MONITOR

See your performance across multiple sites and services on one dashboard.

Track your performance using the clinical incidents and feedback forms.

Identify opportunities to improve.

PLAN

Leverage your insights to develop targeted and effective quality improvement strategies.

Implement continuous improvement actions on every item within the audits, clinical incidents, and feedback forms.



AUDIT

Review your policies and procedures against the new standards to get your compliance under control.

Access 11 audits.

Co-designed with experienced industry workers.

Reference new standards, diversity framework, and evidence-based practices.

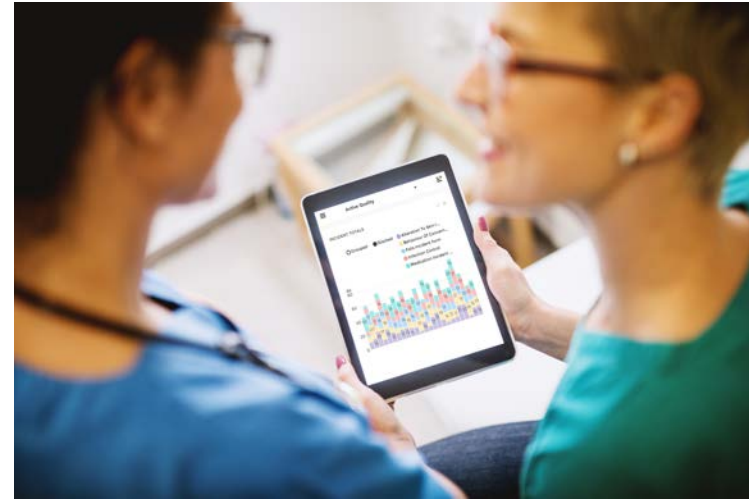
ANALYSE

Assess your results and benchmark your performance to find the gaps you need to address.

Benchmark and trend anonymously within the platform across all audits, clinical incidents, and feedback forms.

Export professional but easy to read reports.

An evolution of quality management, compliance and enhanced service delivery



Inefficient paper-based processes

- 100's of hours spent updating audits to reflect standards
- Little to no integrated action planning
- Lack of visibility
- Increased risk of non-compliance
- Behaviour change challenges

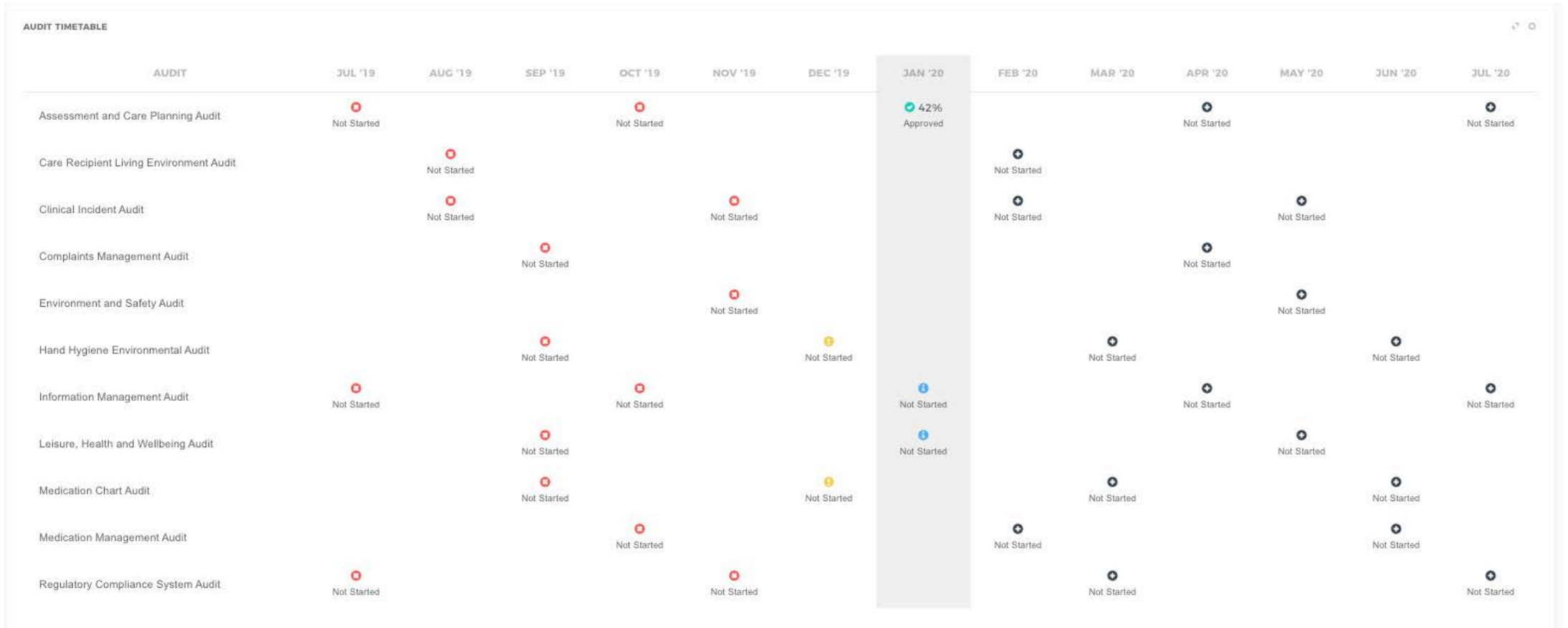
Active and automated management

- Streamlined auditing and reporting process
- Realtime visibility of compliance activities
- Enterprise level automation and confidence
- More time for leaders and employees to focus on care innovations and enhanced customer outcomes

Dashboard: Gives you visibility



Audit Timetable: Oversee and manage audits



Audits cross-referenced with the Standards

» Audits » Clinical Incident Audit » 5

Clinical Incident Audit

Rationale
To monitor the system used to report clinical incidents and to ensure that it demonstrates that incidents are actioned, analysed, tracked and fed into the continuous improvement system. To ensure that risks are assessed and minimized wherever possible.

Performance Tools

1. Reduction of the risk associated with the incident.
2. Management of Risk with Dignity
3. Each consumer is supported to take risks to enable them to live the best life they can.
4. Appropriate and timely management of incident.

Guidelines

1. **Tools:**
[Guidelines for completing audit tools](#)
2. **Quality of Care Principles**
1.1, 1.6, 2.1-2.4, 2.11, 2.13, 2.14, 3.1, 4.1-4.4
3. **Single Quality Framework**
1.3, 2.2, 3.1, 3.2, 3.3, 3.5, 3.6, 3.8, 4.1, 8.1, 8.2, 8.3
4. **Other National Standards:**
[National Safety and Quality Health Service Standards \(2012\) 2nd edition](#)
5. **Documents to be reviewed:**
Policies and Procedures, Incident Forms, Medication Charts, Progress Notes, Assessments, Care Plans and Meeting Minutes
6. **Exclusions:**
Newly admitted Care Recipients
7. **Audit Notes:**
Joanna Briggs Clinical Audit (v4) that can support the implementation of evidence based practice (Membership to JBHI Connect required) 1.Fa) assessment and intervention
8. **Sample Size:**
20% of incidents reported in last 3 months or a minimum of 10 incidents, include all samples from all incident types
9. **Date Last Reviewed:**
June, 2018

References

1. Australian Aged Care Quality Agency Assessment module July 2014
2. [Implementation Guide for Preventing Falls in Older People: Best Practice Guidelines for Australian Hospitals and Residential Aged Care Facilities 2009](#)
3. [Single Aged Care Quality Framework](#)
4. [Prevention of falls in the elderly](#)
5. [Prevention of Injury Related Deaths](#)
6. [Aged Care Act 1997](#)

2. Scheduled Date:
The date of the audit, per the timetable. Additional audits may be carried out but will not appear in the timetable.

3. Date of Audit:
The actual date that the audit was undertaken.

4. Clinical Incidents

4.1. Does staff have access to a clinical incident policy, procedure and/or guideline that is reflective of the services current systems and protocols? (QoCP: 2.2) (SQF: 7, 8)

YES NO

4.2. Does the policy, procedure and/or guideline clearly outline what a clinical incident is and when an incident is to be reported? (QoCP: 2.2) (SQF: 8)

YES NO

4.3. Does the policy, procedure and/or guideline clearly outline when an incident is to be referred to other providers, organisations and individuals? (QoCP: 2.2) (SQF: 3, 6, 8)

YES NO

4.4. Does the policy, procedure and/or guideline clearly outline when an incident is to be reported to person nominated by the consumer to be involved in the care of the consumer? (QoCP: 2.2) (SQF: 1, 3 to, 8)

YES NO

4.5. Is incident reporting included in the staff development program, orientation program and ongoing? (QoCP: 2.3, 4.3) (SQF: 7, 8)

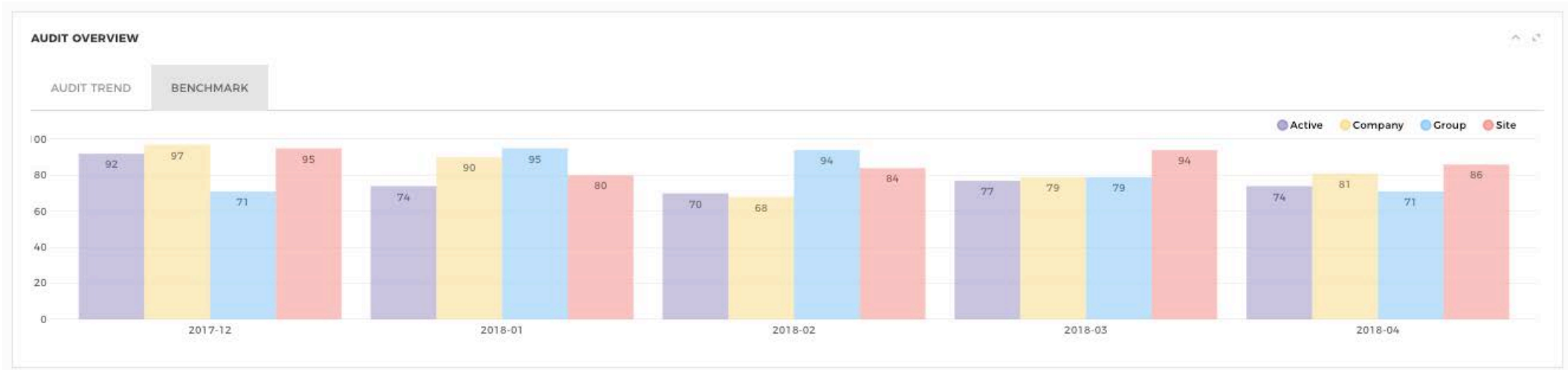
YES NO

4.6. Have all incidents been followed up by management in accordance with the organisations policy, procedure and/or guideline? (QoCP: 2.2) (SQF: 8)

YES NO

- Save time authoring audits, ours are co-designed with client nurse managers
- Audits are fully tagged against the relevant Standards
- Analyse clinical incidents and manage consumer feedback

Trend and Benchmark



- Graph your results internally or benchmark anonymously against other providers and services within the platform.

Non-compliance Reporting

Assessment and Care Planning Audit Criterion Non Compliance

Criterion	Date	2018-10-01	2019-01-01	2019-04-01	2019-07-01	2019-10-01	2020-01-01
6.20 Are all changes to Care Plans dated and signed, including staff members' printed (or electronic) name and designation? (QoCP: 1.8, 2.4) (SQF: 2)		2	3	3	1	3	
6.21 Have wound management plans been developed for all Consumers with wounds in partnership with the Consumer? (QoCP: 2.1) (SQF: 2)		1	1	1	1	4	2
6.22 Is there evidence that all Consumers' complex health care needs, preferences and management strategies are documented in their Care Plans? (QoCP: 2.5) (SQF: 2)		1	3	3	2	3	
7.1 Have wound management plans been developed by appropriately qualified staff for all Care Recipients with wounds and in partnership with Consumers? (SQF: 2)			1		1		1
7.2 Are all wound management plans current? (QoCP: 2.1) (SQF: 2)		1	2		1		
7.3 Are all treatment strategies consistent with the wound management plans? (QoCP: 2.1) (SQF: 2)		1	2	1		1	
7.4 Have all healed wounds been resolved? (QoCP: 2.1) (SQF: 2)		3	1	2			
8.1 If Advanced Care Directives are available are these documented in the care plan, and if no Advanced Care Directives have been made is this information documented? (QoCP: 2.2, 2.9, 3.9) (SQF: 2)		11	5	9	6	5	1
8.2 Does the palliative care plan include 'Assessment and Management of Pain'? (QoCP: 2.8) (SQF: 2)		3	9	14	8	7	2
8.3 Does the palliative care plan include 'Assessment and Management of Physical Symptoms'? (Refer to guidelines pages 8 & 9) (QoCP: 2.4) (SQF: 2)		3	10	14	7	10	1
8.4 Does the palliative care plan include 'Complimentary Therapies' directives? (QoCP: 2.6) (SQF: 2)		2	8	15	13	13	1

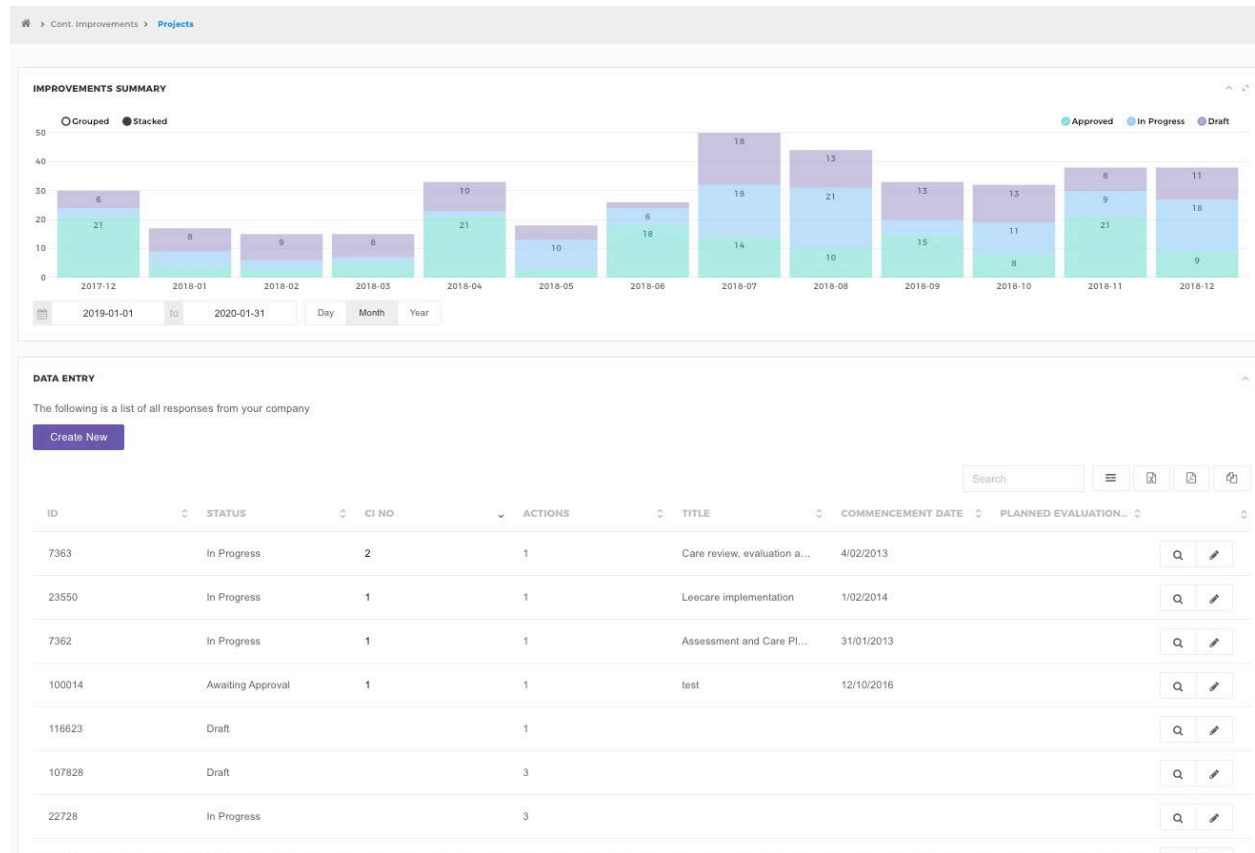
- Professional, easy to use printable reports
- Graph, trend and analyse to identify opportunities to improve
- Heat map to manage non-compliance and identify gaps

Manage Resident Feedback



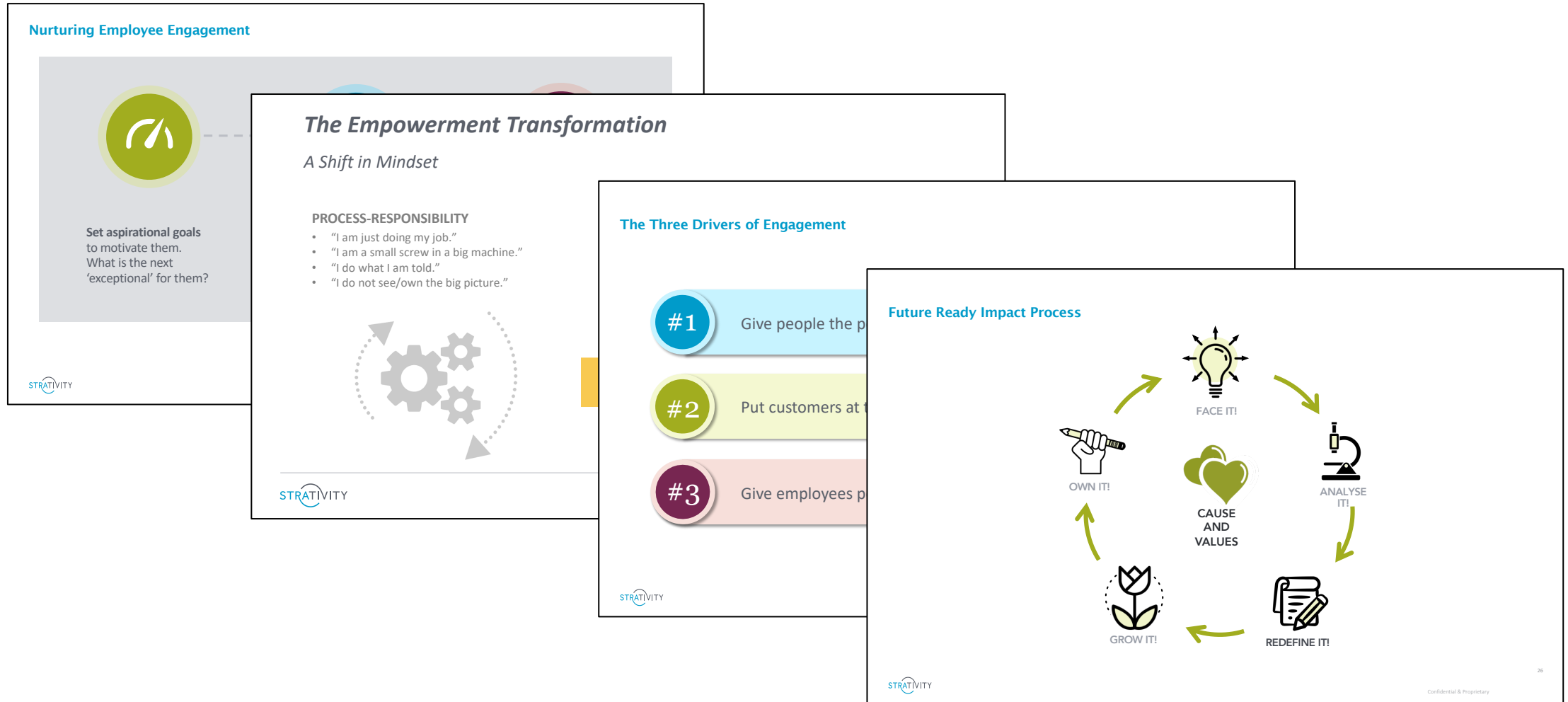
- Assess performance
- Understand and remedy issues
- Ensure confidence prior to accreditation visits

Action Planning: Collaboration and Innovation



- Integrated Continuous Improvements tagged against the relevant standards
- Useful source of evidence during the accreditation process

A holistic approach to change: From process/task to mindset/intent



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brad.meehan@activequality.com.au

Mobile: 0404470557