Afea Care Services

Performance Report

Level 6, 11 Help Street
CHATSWOOD NSW 2067
Phone number: 02 8913 6434

**Commission ID:** 201273

**Provider name:** Afea Pty Ltd

**Quality Audit date:** 16 February 2022 to 18 February 2022

**Date of Performance Report:** 12 April 2022

# Performance report prepared by

C.Athanasiou, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2038.

# Services included in this assessment

**Home Care:**

* Afea Pty Ltd, 26450, Level 6, 11 Help Street, CHATSWOOD NSW 2067

# Overall assessment of Service

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | HCP  | Compliant |
|   |  |  |
| Requirement 1(3)(a) | HCP  | Compliant |
|   |  |  |
| Requirement 1(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 1(3)(c)  | HCP | Compliant |
|  |  |  |
| Requirement 1(3)(d)  | HCP | Compliant |
|  |  |  |
| Requirement 1(3)(e)  | HCP | Compliant |
|  |   |   |
| Requirement 1(3)(f)  | HCP | Compliant |
|  |  |  |
| Standard 2 Ongoing assessment and planning with consumers |
|  | HCP  | Compliant |
|  |  |  |
| Requirement 2(3)(a) | HCP | Compliant |
|  |  |  |
| Requirement 2(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 2(3)(c) | HCP | Compliant |
|  |  |  |
| Requirement 2(3)(d) | HCP | Compliant |
|  |  |  |
| Requirement 2(3)(e) | HCP | Compliant |
|  |  |  |
| Standard 3 Personal care and clinical care | HCP  | Compliant |
|   |  |  |
| Requirement 3(3)(a) | HCP  | Compliant |
|   |  |  |
| Requirement 3(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 3(3)(c)  | HCP | Compliant |
|  |  |  |
| Requirement 3(3)(d)  | HCP | Compliant |
|  |  |  |
| Requirement 3(3)(e)  | HCP | Compliant |
|  |  |  |
| Requirement 3(3)(f)  | HCP  | Compliant |
|  |  |  |
| Requirement 3(3)(g)  | HCP  | Compliant |
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| --- |
| Standard 4 Services and supports for daily living |
|  | HCP  | Compliant |
|  |  |  |
| Requirement 4(3)(a) | HCP  | Compliant |
|  |  |  |
| Requirement 4(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 4(3)(c) | HCP | Compliant |
|  |  |  |
| Requirement 4(3)(d) | HCP | Compliant |
|  |  |  |
| Requirement 4(3)(e) | HCP | Compliant |
|  |  |  |
| Requirement 4(3)(f) | HCP  | Not Applicable |
|  |  |  |
| Requirement 4(3)(g) | HCP  | Compliant |
|  |  |  |
| Standard 5 Organisation’s service environment |
|  | HCP  | Not Applicable |
|  |  |  |
| Requirement 5(3)(a) | HCP  | Not Applicable |
|  |  |  |
| Requirement 5(3)(b) | HCP | Not Applicable |
|  |  |  |
| Requirement 5(3)(c) | HCP | Not Applicable |
|  |  |  |
| Standard 6 Feedback and complaints | HCP  | Not Compliant |
|   |  |  |
| Requirement 6(3)(a) | HCP  | Compliant |
|   |  |  |
| Requirement 6(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 6(3)(c)  | HCP | Compliant |
|  |  |  |
| Requirement 6(3)(d)  | HCP | Not Compliant |
|  |  |  |
| Standard 7 Human resources | HCP  | Not Compliant |
|   |  |  |
| Requirement 7(3)(a) | HCP  | Compliant |
|   |  |  |
| Requirement 7(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 7(3)(c)  | HCP | Compliant |
|  |  |  |
| Requirement 7(3)(d) | HCP | Not Compliant |
|  |  |  |
| Requirement 7(3)(e)  | HCP | Compliant |
|  |  |  |
| Standard 8 Organisational governance | HCP  | Compliant |
|   |  |  |
| Requirement 8(3)(a) | HCP  | Compliant |
|   |  |  |
| Requirement 8(3)(b) | HCP | Compliant |
|  |  |  |
| Requirement 8(3)(c)  | HCP | Compliant |
|  |  |  |
| Requirement 8(3)(d) | HCP | Compliant |
|  |  |  |
| Requirement 8(3)(e)  | HCP | Compliant |
|  |  |  |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Quality Audit Report; the Quality Audit Report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the provider’s response to the Quality Audit Report received 21 March 2022.

# STANDARD 1 Consumer dignity and choice

#  HCP Compliant

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

Consumers and representatives said they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live their life the way they choose to.

Consumers and representatives said that their culture and diversity is valued. They confirmed that they are supported and encouraged to be independent and staff recognise what is important to them.

The service was able to demonstrate they support cultural needs when planning and providing care in consultation with the consumer and representative. Staff have been provided training on cultural competence. Consumers and representatives interviewed confirmed they felt safe to express themselves.

Consumers and representatives said that they receive information about care and services and they understand the information provided to them. Consumers confirmed that their personal privacy is respected, and their personal information is kept confidential.

The service has policies and procedures in place that reflect an inclusive, consumer-centred approach to organisational practices and care and service delivery. Policies are in place to support consumers to take risks and demonstrate how the organisation protects privacy and confidentiality. Staff could describe how they support consumers to make informed choices about their care and services and make decisions about when others should be involved in their care and decision making. The service has committed to further strengthen their processes by creating a further policy to support consumers to take risks to live the best life they can.

The Quality Standard for the Home care packages services is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

**Assessment of Standard 1 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(a) | HCP  | Compliant  |
|  |  |  |

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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| --- | --- | --- |
| Requirement 1(3)(b) | HCP  | Compliant |
|  |  |  |

### *Care and services are culturally safe.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP  | Compliant |
|  |  |  |

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(d) | HCP  | Compliant |
|  |  |  |

### *Each consumer is supported to take risks to enable them to live the best life they can.*

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| --- | --- | --- |
| Requirement 1(3)(e) | HCP  | Compliant |
|  |  |  |

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(f) | HCP  | Compliant |
|  |  |  |

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers

#  HCP Compliant

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

Consumers said that they feel like partners in the ongoing assessment and planning of their care and services and their individual needs, goals and preferences are considered.

Consumers said that they felt supported by the service to make decisions regarding care and services. Consumers said that where they chose to have others responsible for their decision making, the service accommodates this.

Consumers and representatives said they have been provided with a copy of their care plan and confirmed care and services are reviewed when their needs change or when they request it.

Staff demonstrated where services and care needs increased to incorporate end of life planning. The service has identified through self-assessment that their advanced care planning process could be strengthened to ensure needs, goals and preferences continue to be captured and met. The service will commence this work shortly.

Assessment and care planning documentation evidenced that the consumer and those they wish to include, including allied health services, are involved in the initial assessments and on an ongoing basis through care reviews and communication.

Care planning and assessment documentation demonstrated that care and services are reviewed regularly including when consumer needs or circumstances change.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

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| --- | --- | --- |
| Requirement 2(3)(a) | HCP  | Compliant |
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*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

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| --- | --- | --- |
| Requirement 2(3)(b) | HCP  |  Compliant |
|  |  |  |

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(c) | HCP  | Compliant |
|  |  |  |

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

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| --- | --- | --- |
| Requirement 2(3)(d) | HCP  |  Compliant |
|  |  |  |

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(e) | HCP  | Compliant |
|  |  |  |

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 Personal care and clinical care

#  HCP Compliant

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

Consumers and representatives interviewed said that they were satisfied with care and services they are receiving.

Consumers and representatives receiving personal and/or clinical care said that they are satisfied with the care and services they are receiving. They said the service staff takes the time to assess and understand their care needs and design services to their individual preferences.

Care staff are trained to deliver personal care and registered nurses are available for the provision of direct clinical care services. Where clinical needs are identified a full assessment is undertaken by a registered nurse.

Consumers said that they receive regular information from the office, care manager and coordinators regularly about care and services.

Consumers said that there are current practices in place to manage risks including the management of COVID-19.

The service has systems in place for the delivery of safe and effective personal and clinical care services that meet the needs, goals and preferences of consumers. This includes identifying and managing high impact and high prevalence risks through assessment, care reviews and ongoing monitoring processes and recognising and responding to deterioration or change in health and wellbeing. The information regarding the consumer’s needs and preferences noting any changes are effectively communicated to inform the delivery of care.

Management confirmed care and services are delivered by trained care staff and all services are monitored. Care staff were able to provide examples of high impact and high prevalence risks for consumers and explained how they report any changes in the consumer’s overall health and wellbeing to ensure this is followed up in a timely manner. Consumers confirmed that any changes in their health including the identification of any risks risk are addressed in a timely manner through assessments and referrals.

The Quality Standard for the Home care packages service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

**Assessment of Standard 3 Requirements**

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| --- | --- | --- |
| Requirement 3(3)(a) | HCP  | Compliant |
|  |  |  |

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(b) | HCP  | Compliant |
|  |  |  |

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

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| --- | --- | --- |
| Requirement 3(3)(c) | HCP  | Compliant |
|  |  |  |

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(d) | HCP  | Compliant |
|  |  |  |

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(e) | HCP  | Compliant |
|  |  |  |

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

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| --- | --- | --- |
| Requirement 3(3)(f) | HCP  | Compliant |
|  |  |  |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| --- | --- | --- |
| Requirement 3(3)(g) | HCP  | Compliant |
|  |  |  |

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# STANDARD 4 Services and supports for daily living

#  HCP Compliant

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

Consumers said that they receive the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do.

Consumer and representatives said that they are supported to keep in touch with people who are important to them.

Consumers said that they access the community independently and are supported to do this. They said that they felt supported to live their life the way they choose to do so and that their preferences were considered in the delivery of care and services.

Referrals are made to external providers for services and the provision of equipment when needed. All consumers and representatives said they have access to a range of various services which meets their needs.

Staff are aware of the organisational philosophy of care. Staff provided examples of how consumers’ individual needs are met and how they are supported to live the life they want. Individual needs and preferences were evidenced in care plans.

The service demonstrated communication systems are in place to enable information about consumers to be shared with those involved in shared care such as such as social groups, food services and home maintenance. Communication with representatives were also evidenced in documentation reviewed.

Care planning documentation included consumer goals and preferences and showed evidence of the ongoing review of these.

The service demonstrated referrals are made to ensure consumers receive timely provision of care and services. Consumers and representatives interviewed were satisfied with referrals made and provided examples of when this had occurred. Care documentation reflected referrals made and documented discussions including the required follow up with the relevant service providers.

The service provider demonstrated there are systems in place to ensure any equipment the consumer is provided with through the package is suitable to their needs, maintained well and is safe for their use. Consumer feedback confirmed that they received well maintained and clean equipment.

The Quality Standard for the Home care packages service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | HCP  |  Compliant |
|  |   |  |

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

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| --- | --- | --- |
| Requirement 4(3)(b) | HCP  | Compliant |
|  |  |  |

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

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| --- | --- | --- |
| Requirement 4(3)(c) | HCP  | Compliant |
|  |  |  |

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(d) | HCP  | Compliant |
|  |  |  |

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(e) | HCP  | Compliant |
|  |  |  |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| --- | --- | --- |
| Requirement 4(3)(f) | HCP  | Not Applicable |
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*Where meals are provided, they are varied and of suitable quality and quantity.*

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| --- | --- | --- |
| Requirement 4(3)(g) | HCP  | Compliant |
|  |  |  |

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 Organisation’s service environment

#  HCP Not Applicable

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP  | Not Applicable |
|  |   |   |

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(b) | HCP  | Not Applicable |
|  |  |  |

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(c) | HCP  | Not Applicable |
|  |  |  |

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 Feedback and complaints

#  HCP Not Compliant

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

Management explained the process for managing complaints and how the service records and acts on complaints. However, the service could not provide any data or analysis to demonstrate how feedback from consumers initiates improvements across the organisation to improve the overall quality of care and services.

Management were not able to describe how the service records, acts and uses complaints information to improve the quality of care and services for consumers.

The service demonstrated they have different avenues for consumers and representatives to make a complaint. Consumers interviewed explained that they know how to make a complaint and are supported to provide feedback though regular contact from staff about supports and services they receive.

Consumers discussed actions taken and the use of open disclosure when they have raised a complaint. This included improvements made or actions taken by the service in response to the issues they have raised.

Staff described how they support consumers and representatives to provide feedback and how consumers can be supported to understand the role of advocates. Staff interviews confirmed they resolve issues identified by consumers immediately or report it through their Care Coordinator and feedback processes.

Management discussed processes to ensure consumers have access to advocates and language services.

The complaints register demonstrated that consumers and representatives are supported and have access to feedback mechanisms. Complaints documentation demonstrated open disclosure is used as part of the complaint management process.

The Quality Standard for the Home care packages service is assessed as Not Compliant as one of the four specific requirements, has been assessed as Not Compliant.

## Assessment of Standard 6 Requirements

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| --- | --- | --- |
| Requirement 6(3)(a) | HCP  |  Compliant |
|  |  |  |

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(b) | HCP  | Compliant |
|  |  |  |

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(c) | HCP  | Compliant |
|  |  |  |

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) | HCP  |  Not Compliant |
|  |   |   |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

Findings

While the service could demonstrate that feedback and complaints are reported and actioned, management were not able to describe how the service records, acts and analyses complaints to inform systemic improvements specifically for Home Care Package (HCP) consumers. The service has since advised that relevant policies and procedures will be updated to capture relevant activities taken to capture this information.

In addition, while consumers stated that resolutions and remedial actions had been taken by the service because of their complaints, there was no evidence to demonstrate that feedback and complaints collectively are regularly reviewed to inform quality improvements across the organisation. For example, the Assessment Team identified that the service’s Plan for Continuous Improvement (PCI) register which did not capture the recruitment and retention of regular staff as an item on the CPI. The service has since advised that this will be added to the PCI.

In its response the approved provider stated that, while not currently documented in its policies and procedures, its business practice is to review complaints in every function including in manager and staff one on one meetings, and team meetings. It further stated it is then escalated to Executive Leadership if needed for any trends or critical complaints and feedback for further discussion. It provided examples of how this occurred. However, it acknowledged that the evidence presented was not specific to home care packages. It also set out the measures it had or would implement to address the issues identified, including regular feedback surveys, updating the Monthly Leadership Agenda and updating its policies and procedures.

While I acknowledge these improvements and the approved provider’s information on the processes in place, I am not satisfied this demonstrated that, at the time of the Quality Audit, feedback and complaints were consistently reviewed and used to improve the quality of care and services. The improvements identified will take time to become embedded and for the approved provider to demonstrate their sustainability.

# STANDARD 7 Human resources

#  HCP Not Compliant

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

The service was able to demonstrate the workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture, and diversity. Consumers and representatives confirmed staff treat them with respect and are responsive to their needs.

The service demonstrated that the workforce is planned to enable them to deliver quality supports and services to consumers

The service was not able to demonstrate how ongoing, and relevant training is delivered according to the increasing needs of consumers. Staff have completed education and training to match their qualifications however there is no evidence of how the service are delivering, ongoing, relevant training according to the changing needs of consumers.

Consumers and representatives considered that consumers receive care and services that meet their needs and they advised the service is very responsive if contacted.

Policies and procedures are in place to support human resource management and education and training. The service has an induction training program in place and a system to regularly assess and monitor the performance of each member of the workforce.

All consumers said communication between themselves and the service’s staff was easy, acknowledged and responded to.

The Quality Standard for the Home care packages services is assessed as Not Compliant as one of the five specific requirements has been assessed as Not Compliant.

## Assessment of Standard 7 Requirements

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| --- | --- | --- |
| Requirement 7(3)(a) | HCP  | Compliant |
|  |  |  |

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

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| --- | --- | --- |
| Requirement 7(3)(b) | HCP  | Compliant |
|  |  |  |

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(c) | HCP  | Compliant |
|  |  |  |

*The workforce is competent, and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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| --- | --- | --- |
| Requirement 7(3)(d) | HCP  | Not Compliant |
|  |  |  |

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

Findings

The service was able to provide details of improvements the service has made over the last 12 months to recruit, train and support care staff to deliver the outcomes required by these standards however the service could not demonstrate how they are delivering, ongoing, relevant training according to the needs of consumers, consumers with declining health, dementia, and recognising neglect and abuse.

Management advised refresher training for dementia, identifying deterioration or recognising abuse and neglect is planned for mid-2022 however not scheduled at the time of the audit.

In its response the approved provider acknowledged the Assessment Team’s findings and stated it would develop a training schedule including strategies to identify when refresher training is required.

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| --- | --- | --- |
| Requirement 7(3)(e) | HCP  |  Compliant |
|  |   |   |

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance

#  HCP Compliant

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

Consumers said that the organisation is well run and that they are satisfied that they receive safe care and services. Consumers and representatives are satisfied with communication they receive from the service.

Consumers and representatives said that they felt that they are listened to when they have a complaint or wish to provide feedback. Consumers and representatives described ways they are involved in the development and review of care and services they receive through assessment and regular care plan review processes.

The service was able to demonstrate the governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.

The service’s governing body are accountable for the delivery of safe and quality care and services. The governance system is based on systems that regularly report key information from the whole organisation’s services to the governing body.

Reports are presented holistically can analyse further information for HCP consumer information.

The service is currently further developing its governance systems, including a clinical governance framework and risk management system.

The service described its processes for identifying managing high impact or high prevalence risks associated with the care of consumers, identifying and responding to abuse and neglect of consumers, and managing and preventing incidents. The service has a client incident management policy to guide staff practises

Process and procedures were in place in relation to open disclosure and consumer feedback.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements, has been assessed as Compliant.

## Assessment of Standard 8 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(a) | HCP  |  Compliant |
|  |  |  |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(b) | HCP  | Compliant |
|  |  |  |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(c) | HCP  | Compliant |
|  |  |  |

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) | HCP  | Compliant |
|  |  |  |

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | HCP  | Compliant |
|  |  |  |

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) | HCP  | Not compliant |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

* Demonstrate that feedback and complaints are reviewed and used to improve the quality of care and services, by recording and analysing such information and using it to inform systemic improvements specifically for Home Care Package (HCP) consumers
* Monitor and review, on an ongoing basis, the effectiveness of the systems in place

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(d) | HCP  |  Not compliant |

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

* Ensure that the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards, by, including but not limited to, delivering, ongoing, relevant training according to the needs of consumers, consumers with declining health, dementia, and recognising neglect and abuse.