Alpha Omega Consulting

Performance Report

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**Commission ID:** 201443

**Provider name:** Alpha Omega Aged Care Pty Ltd

**Assessment Contact - Site date:** 27 October 2020

**Date of Performance Report:** 22 January 2021

# Publication of report

This Performance Report **may be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(b) | Non-compliant |
| **Standard 7 Human resources** | **Non-compliant** |
| Requirement 7(3)(d) | Non-compliant |
| **Standard 8 Organisational governance** | **Non-compliant** |
| Requirement 8(3)(d) | Non-compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, 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 Assessment Contact - Site; the Assessment Contact - Site 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 Assessment Contact - Site report received 27 November 2020.

# STANDARD 2 NON-COMPLIANT Ongoing assessment and planning with consumers

### 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

To understand the consumer’s experience and how the organisation understands and applies this requirement under this Standard, the Assessment Team interviewed the consumer and/or their representative, asking them about how they are involved in assessment and care planning, reviewed their care planning documents in detail, and interviewed staff about how they use assessment and care planning documents and review these on an ongoing basis.

The Assessment Team found care plans do not consistently include all care and services required by the consumer or describe how each of the consumers assessed needs are to be met. The service is encouraging consumers and/or their representatives to complete an advanced care directive for end of life care, however, not all consumers and/or their representatives are comfortable completing the tool for cultural or personal reasons. Consumers and their representatives interviewed advised that they have discussed their current needs, goals and preferences as part of the assessment process. They have been involved in the compilation of their care plan and have been provided with a copy as is required. They confirmed they are able to request changes to their care and services and how these will be delivered in line with their preferences and changing needs. They advised that the service is flexible and responsive to their requests.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(b) Non-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.*

The Assessment Team found care plans do not consistently include all care and services required by the consumer or describe how each of the consumers assessed needs are to be met. The consumers functional capacity in undertaking tasks and managing care domains is not described in detail to guide provision of care and services. The roles and responsibilities of others involved in the care of the consumer are not consistently described in a holistic view and clarity regarding the care and services supporting the consumer’s overall health and wellbeing.

The service is encouraging consumers and/or their representatives to complete an advanced care directive for end of life care. Not all consumers and/or their representatives are comfortable completing the tool for cultural or personal reasons. The care co-ordinators acknowledged this was a challenge and they are discussing how best to approach the topic with consumers’ families who might be more willing to engage in a conversation regarding end of life care needs and welfare.

The approved provider, in their response to the Assessment Team’s report, stated they had undertaken an audit of care plans to identify any that do not accurately reflect known/assessed care needs required by each consumer and have developed a holistic care plan to encompass all. In addition, Case Managers will attend a one-day workshop to specifically be trained in the process of completing new assessment documentation.

I find that the approved provider has been unable to demonstrate that 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.

# STANDARD 7 NON-COMPLIANT Human resources

### 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

To understand the consumer’s experience and how the service provider understands and applies this requirement under this Standard, the Assessment Team interviewed consumers and/or their representatives, asking about their experiences with the staff, reviewed policies and procedures, and interviewed staff about the initial orientation, ongoing training and support provided by the service and the adequacy of staff employed to complete tasks required.

The Assessment Team found that the service was not able to adequately demonstrate that staff are provided with comprehensive training on commencement and in an ongoing way to ensure they are adequately equipped to deliver the outcomes required by these standards.

Most consumers and representatives interviewed said the staff were respectful, kind and caring. However, one consumer/representative said the staff do not have enough experience, particularly new staff.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(d) Non-compliant

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

The Assessment Team found that the service was not able to adequately demonstrate that staff are provided with comprehensive training on commencement and in an ongoing way to ensure they are adequately equipped to deliver the outcomes required by these standards.

The service has had a large turnover of key staff in the last few weeks resulting in new staff learning their role. Orientation to the service’s policies and procedures is provided and staff have ‘buddy’ shifts with an experienced staff member, however, very few staff, according to a training register viewed, have completed training on elder abuse, infection control standard precautions, manual handling tasks and work health and safety fundamentals. The register only contained the names of 37 staff out of the 63 staff currently employed by the service with only five staff have completed the training on elder abuse, infection control standard precautions, manual handling tasks and work health and safety fundamentals. Practical competencies such as hand washing have been assessed by the registered nurse, however donning and doffing of face masks and waste disposal to ensure correct procedures can be adhered to by care staff in the field has not been carried out.

The Assessment Team found staff are provided with information regarding the tasks to be completed to assist the consumer but do not have access to a copy of the care plan and ask the consumer or their representative how they would like service to be provided.

The approved provider provided a response that clarified some matters. The approved provider stated care plans and relevant information enabling staff to meet consumers’ needs is available to staff. Leadership meeting minutes August 2020 indicated that all staff had been asked to watch Mask Competency by NSW Health and, post assessment contact, all staff are undergoing further training in donning and doffing and waste disposal.

The approved provider explained there appeared to be a misunderstanding regarding the training register viewed. Some staff had enrolled voluntarily in some training that the service had made available which was not listed as essential training which is why the list did not include every Home Care staff member. It also explains why only a small number of staff have completed it at the time the list was viewed. The approved provider stated that, following the assessment contact, the service is undertaking a review of their approach to mandatory training and will be offering a range of training options for all staff in 2021 to ensure all current staff undergo Mandatory training by the end of the year. A staff Training Calendar will be devised identifying the essential training topics to be covered and sufficient training places will be available for each staff member.

I have considered the Assessment Teams report and the Approved Providers response. I note that the approved provider’s response did not provide evidence to support that all staff had indeed undertaken mandatory training at the time of the assessment contact. Additionally, it was unclear at the time of the assessment contact, what the provider’s system was for ensuring all staff received mandatory training and evidence was not provided to the Assessment Team showing all staff had undertaken this training.

The approved provider has undertaken improvement activities that have occurred since the audit. It is appropriate to review and consolidate these improvements over a period of time to consider if they have been effective and sustainable.

I find this requirement non-compliant as the approved provider has not been able to demonstrate the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards,

# STANDARD 8 NON-COMPLIANT Organisational governance

### 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

To understand the consumer’s experience and how the organisation understands and applies this requirement under this Standard, the Assessment Team interviewed consumers and/or their representatives, asking about the care and services provided, reviewed mechanisms in place to mitigate risks, sighted relevant policies and procedures, and interviewed staff to determine in relation to how they identify and respond to elder abuse and support consumers to live the best life possible.

The Assessment Team found that the service does not demonstrate effective risk management systems and practices that manage high impact or high prevalence risks associated with the care of consumers, identifying and responding to abuse and neglect of consumers, supporting consumers to live the best life they can.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Non-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.*

The Assessment Team found that the service does not demonstrate effective risk management systems and practices that manage high impact or high prevalence risks associated with the care of consumers, identifying and responding to abuse and neglect of consumers, supporting consumers to live the best life they can.

The Assessment Team found that while the service has risk management systems to manage high impact or high prevalence risks associated with the care of consumers, the approved providers systems are not effective as the information is not consistent and relies on individual staff knowing the consumers issues. With the service experiencing high turnover rates of management roles recently, information transfer such as incident management and clinical indicators and data is not consistently maintained and visible to enable management to conduct trending and analysis. It was also noted that abuse of consumer’s training has not occurred enabling staff to be able to identify abuse and neglect of consumers.

The approved provider provided a response that included correcting some information in the report including their approach to managing falls. The provider stated that will be undertaking additional training with staff regarding the management of incidents and will look at improving their monitoring of consumers who’s condition is deteriorating. The approved provider stated they will review the existing capacity of staff and ensure they are adequately trained to report the required clinical data set on high impact/high prevalence risks associated with care of each consumer as part of their Clinical Governance framework.

I have considered the Assessment Team’s report and the approved providers response and note improvement activities that have occurred since the audit. It is appropriate to review and consolidate these improvements over a period of time to consider if they have been effective and sustainable.

I find this requirement is non-compliant as the approved provider has not been able to demonstrate effective risk management systems and practices for managing high impact or high prevalence risks associated with the care of consumers, identifying and responding to abuse and neglect of consumers, and supporting consumers to live the best life they can,

# Areas for improvement

### Requirement 2(3)(b)

*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.*

* Assessment and planning processes ensure all assessments are complete and identify and address the consumer’s current needs, goals and preferences, including consideration of the risks to their health and well-beingand advanced care planning and end of life planning if the consumer wishes.

### Requirement 7(3)(d)

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

* Develop a framework for identifying training needs, monitoring training delivered and evaluating the effectiveness of that training in ensuring staff are equipped to deliver the outcomes required by these standards.

### Requirement 8(3)(d)

*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.*

* Implement robust and effective risk management systems and practices that identify and assess risks to the health, safety and well-being of consumers, minimises high impact or high prevalence risks and identifies and evaluate incidents to support consumers to live the best life they can.