Australian Unity Home Care - South East Melbourne

Performance Report

271 Spring Street   
MELBOURNE VIC 3000  
Phone number: 03 8682 6214

**Commission ID:** 300015

**Provider name:** Australian Unity Retirement Living Management Pty Ltd

**Quality Audit date:** 5 January 2022 to 7 January 2022

**Date of Performance Report:** 23 March 2022

# Performance report prepared by

M Murray 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:**

* Northern Region Home Care Victoria, 22809, 271 Spring Street, MELBOURNE VIC 3000
* Australian Unity Community Care Eastern Metro EACH, 18647, 271 Spring Street, MELBOURNE VIC 3000
* Eastern Metropolitan Region, 18786, 271 Spring Street, MELBOURNE VIC 3000
* Australian Unity Community Care - SMR, 19331, 271 Spring Street, MELBOURNE VIC 3000

**CHSP:**

* Allied Health and Therapy Services, 4-7XMO8NX, 271 Spring Street, MELBOURNE VIC 3000
* CHSP - Domestic Assistance, 4-7XNVF8Y, 271 Spring Street, MELBOURNE VIC 3000
* CHSP - Personal Care, 4-7XMO8YX, 271 Spring Street, MELBOURNE VIC 3000

**Short Term Restorative Care**

* Short Term Restorative Care, STRC, 271 Spring Street, MELBOURNE VIC 3000

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
|  | | STRC | | | Compliant |
| Requirement 1(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 1(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 1(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 1(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 1(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 1(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | HCP | Not Compliant | | |
|  | | | CHSP | Compliant | | |
|  | STRC | | Compliant | |
| Requirement 2(3)(a) | | HCP | | | Not Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 2(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 2(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 2(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 2(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Standard 3 Personal care and clinical care | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
|  | STRC | | Compliant | |
| Requirement 3(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 3(3)(g) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Requirement 4(3)(g) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
|  | | STRC | | | Compliant |
| Standard 5 Organisation’s service environment | | | | | | |
|  | | HCP | | | Not Assessed |
|  | | CHSP | | | Not Assessed |
|  | | STRC | | | Not Assessed |
| Requirement 5(3)(a) | | HCP | | | Not Assessed |
|  | | CHSP | | | Not Assessed |
|  | | STRC | | | Not Assessed |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Requirement 5(3)(b) | HCP | | | Not Assessed |
|  | CHSP | | | Not Assessed |
|  | STRC | | | Not Assessed |
| Requirement 5(3)(c) | HCP | | | Not Assessed |
|  | CHSP | | | Not Assessed |
|  | STRC | | | Not Assessed |
| Standard 6 Feedback and complaints | | HCP | Compliant | | |
|  | | CHSP | Compliant | | |
|  | STRC | | Compliant | |
| Requirement 6(3)(a) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 6(3)(b) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 6(3)(c) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 6(3)(d) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Standard 7 Human resources | | HCP | Compliant | | |
|  | | CHSP | Compliant | | |
|  | STRC | | Compliant | |
| Requirement 7(3)(a) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 7(3)(b) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 7(3)(c) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 7(3)(d) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 7(3)(e) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Standard 8 Organisational governance | | HCP | Not Compliant | | |
|  | | CHSP | Compliant | | |
|  | STRC | | | Compliant |
| Requirement 8(3)(a) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 8(3)(b) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 8(3)(c) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 8(3)(d) | HCP | | | Not Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | Compliant |
| Requirement 8(3)(e) | HCP | | | Compliant |
|  | CHSP | | | Compliant |
|  | STRC | | | 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; 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 10 February 2022.

# STANDARD 1 Consumer dignity and choice

|  |  |
| --- | --- |
| HCP | Compliant |
| CHSP | Compliant |
| STRC | 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

All consumers and representatives indicated they are treated with dignity and respect and described how this is reflected in the delivery of care and services. Most consumers indicated care and services meet their cultural needs, staff know their backgrounds and will adjust care to reflect these needs and preferences.

Consumers and representatives reported the service supports them to make decisions on the way care and services are delivered, including selecting those involved in their care and preferred ways to communicate. Consumers said they are supported to maintain relationships with people important to them. Most consumers and representatives indicated that information, including the services monthly financial statements, are clear and easy to understand. Consumers described feeling comfortable around staff and reported their privacy is always respected by staff.

Staff consistently spoke about consumers in ways that conveyed respect and an awareness of what was important for the consumer. Staff described the importance of supporting consumers in their choices, including when risk is involved. Staff have received cultural safety and diversity training.

This Quality Standard for the Home Care Packages program, the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for each program.

**Assessment of Standard 1 Requirements**

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

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

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

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

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

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

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

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

# STANDARD 2 Ongoing assessment and planning with consumers

|  |  |
| --- | --- |
| HCP | Non-Compliant |
| CHSP | Compliant |
| STRC | 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

All consumers and/or their representatives interviewed confirmed assessments are undertaken in partnership with the consumer.

The service demonstrated care and services are generally reviewed for effectiveness when consumers’ circumstances change and when incidents occur.

While the service’s assessment processes for consumers in receipt of home care packages are generally adequate, important information regarding consumers’ assessed needs, risks and related risk management strategies, are inconsistently documented. This was not the case for the other programmes.

This Quality Standard for the Home Care Packages program is assessed as Non-Complaint as the organisation did not comply with Requirement 2(3)(a).

This Quality Standard for the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for each program.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP | Non-Compliant |
|  | CHSP | Compliant |
|  | STRC | Compliant |

*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.*

The Assessment Team’s review of care documentation for consumers on a home care package noted significant variability in the level of detail in consumer goals and preferences resulting in generalised information that does not inform tailored care and service delivery.

Nursing assessments were not consistently uploaded to the consumer information management system and therefore staff are not fully informed of current clinical risks.

Incidents that occur do not always result in a re-assessment to identify any new care risks to the consumer’s health and wellbeing.

The approved provider’s response notes the service has an active mentoring program in operation with senior, more experienced staff proactively working to support newer staff to build consistency in the standard of assessment and care planning delivered by the service. Audits are also undertaken and staff have a strong understanding of consumers’ care needs and risks to their wellbeing.

I acknowledge the oversight systems outlined by the approved provider, however, the response has not provided evidence to demonstrate that the Assessment Team’s report of the findings of their file reviews is inaccurate. Evidence of the further assessments subsequent to the incidents the Assessment Team described were not provided.

Based on all the evidence (summarised above) the approved provider does not comply with this Requirement. It is more likely that staff are relying on their own experience with the consumer to understand risks to the consumer’s health and well-being, rather than clinical and other assessments that have been undertaken.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | 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 |
|  | CHSP | Compliant |
|  | STRC | 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.*

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

Overall consumers considered they receive personal and clinical care that meets their needs and it is delivered safely. Representatives and consumers were satisfied that if consumers are unwell or deteriorating that staff are responsive. The service was able to demonstrate that, where risk is identified, there is effective management both for individual consumers, and more broadly.

Care planning documents demonstrated deterioration or changes in the consumer’s condition or health status is reported and responded to. Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. While there is the capability for sharing information, the Assessment Team noted that information was not always uploaded to be communicated internally. Nevertheless, care staff knew the care needs and had developed strategies to meet the current needs of consumers and no consumer expressed concerns that the care they receive is not current and effective.

The service demonstrated appropriate referrals to individuals, other organisations and providers of other health related services occur in a timely manner.

The service has systems and processes to maintain appropriate infection control and minimise the risk of COVID-19.

This Quality Standard for the Home Care Packages program, the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for each program.

**Assessment of Standard 3 Requirements**

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(c) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | 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 |
|  | CHSP | Compliant |
|  | STRC | 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 |
|  | CHSP | Compliant |
|  | STRC | 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.*

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

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

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

The service demonstrated that consumers receive effective and appropriate services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life. Services and supports for daily living cover a wide range of options for consumers to support them to live as independently as possible, to do things of interest, maintain relationships and connect with their local community.

Consumers and representatives indicated in various ways that staff know them well, understand their needs and preferences in relation to their everyday life activities and expressed satisfaction with lifestyle supports they receive from the service.

The Assessment Team notes that there was variable detail in the assessment documentation in relation to the consumer’s life story and how this information might be used to support consumers in their wellbeing and independence. However, this was countered by the strong understanding of staff of the needs and preferences of the consumer, and their strategies to provide support.

Staff demonstrated how they understand how to ensure equipment is maintained, effective and clean, including using the process for reporting when there is a concern with equipment that may require servicing.

This Quality Standard for the Home Care Packages program, the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for each program.

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | 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.*

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

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(f) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | Compliant |

*Where meals are provided, they are varied and of suitable quality and quantity.*

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

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

# STANDARD 5 Organisation’s service environment

|  |  |
| --- | --- |
| HCP | Not Assessed |
| CHSP | Not Assessed |
| STRC | Not Assessed |

### 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

The service does not operate a service environment. Standard 5 does not apply. The Standard has not been assessed.

# STANDARD 6 Feedback and complaints

|  |  |
| --- | --- |
| HCP | Compliant |
| CHSP | Compliant |
| STRC | 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

Most consumers and representatives demonstrated an awareness of how to provide feedback and raise any concerns with the service and indicated an awareness of external avenues and supports available to them.

The majority of consumers indicated the service provided a timely response when they had a concern around their care and services and an apology was offered. However not all consumers and representatives were satisfied with communication from the service in relation to the complaints they had raised.

Care workers followed up on any concerns raised by consumers and said the coordination staff ask the consumer if they have any concerns during visits and phone calls.

Staff receive education on feedback and complaints processes and how they can support and encourage consumers to provide feedback. Staff described, and documentation indicated responsiveness to feedback and an open disclosure approach is used.

Management discussed how the service supports and encourages consumers to provide internal and external feedback and discussed improvements because of consumers’ feedback.

Feedback and complaints information is investigated, reviewed and trends collated.

This Quality Standard for the Home Care Packages program, the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for each program.

## Assessment of Standard 6 Requirements

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

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

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

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

# STANDARD 7 Human resources

|  |  |
| --- | --- |
| HCP | Compliant |
| CHSP | Compliant |
| STRC | 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 majority of consumers and representatives expressed positive comments around services, saying staff have time to complete tasks and were not rushed. All consumers and representatives commented that staff are kind, caring and respectful.

Care workers are familiar with consumers and spoke about them in kind, respectful ways. Care workers reported having enough time and felt supported in their roles.

Staff, including care workers indicated in various ways confidence in their abilities to perform effectively in the role, mandatory training needs, access to care information and availability of supervisory support as required. Staff complete buddy shifts prior to working with consumers unsupervised. Staff are satisfied with the availability of managers, training and support provided by the service

Management discussed recruitment and interview screening including monitoring of how staff present themselves and respond to questions to ensure they attract kind, caring staff. Staff complete code of conduct training and recently attended ‘reconciliation- it begins with understanding.’

Management discussed, and evidenced staff competencies are completed during the initial training program and on an annual basis. For example, these included domestic care practicals, showering a consumer, dementia care, food handling and medication prompting.

The service provides informal and formal supervision to staff and have staff management policies and procedures to guide managers of staff.

This Quality Standard for the Home Care Packages program, the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for each program.

## Assessment of Standard 7 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | 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.*

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

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(d) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | Compliant |

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

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

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

# STANDARD 8 Organisational governance

|  |  |
| --- | --- |
| HCP | Not Compliant |
| CHSP | Compliant |
| STRC | 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 and representatives interviewed variously expressed that the organisation is well run and that they can partner in improving the delivery of care and services. Consumers are satisfied they receive care and services to meet their needs and felt the service was generally well run. Consumers and representatives understood the process if they wanted to raise a concern.

Consumers have input into the service through several feedback mechanisms that includes the consumer and representative surveys, informal and formal feedback, the care plan process and consumer reference group.

The governance system is based on systems of regular reporting and escalation of key issues from the service level to the governing body and directives from the governing body and executive to program management and service.

However, the Assessment Team found that the service’s response to two reports relating to the potential harm of consumers which was known to the service was not actioned or responded to in a timely way.

This Quality Standard for the Home Care Package program, is Not Compliant as the service has failed to comply with Requirement 8(3)(d).

This Quality Standard for the Commonwealth Home Support Program and the Short-term Restorative Care Program is assessed as Compliant as all the Requirements of the Standard have been assessed as Compliant for both programs.

## Assessment of Standard 8 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | 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 |
|  | CHSP | Compliant |
|  | STRC | 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 |
|  | CHSP | Compliant |
|  | STRC | 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 | Not Compliant |
|  | CHSP | Compliant |
|  | STRC | 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.*

The Assessment Team identified two instances where information available to the service should have made the clinical team alert to actual or suspected abuse of two consumers. Management of the consumers’ wellbeing was not evident to the Assessment Team and an outline of how the service responded to each instance was not provided by management.

The approved provider’s response does not provide evidence that the information was acted upon when first available. A continuous improvement plan was submitted with actions including education for nurses on identifying clinical risk, reporting through the risk management system and next steps to reduce the risk as well as a learning package for care staff.

Based on all the evidence (summarised above) the approved provider does not comply with this sub-Requirement (ii) and as a result, does not comply this Requirement overall. This failure relates specifically to the Home Care Package Program.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | HCP | Compliant |
|  | CHSP | Compliant |
|  | STRC | 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 2(3)(a)**

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.

* Ensure the system of assessment and planning captures risks to / and the care needs of each consumer, to the point that staff do not need to come to know these through their individual interactions with consumers and can rely on validated assessments undertaken by the service.

**Requirement 8(3)(d) Sub-Requirement (ii)**

Effective risk management systems and practices. Identifying and responding to abuse and neglect of consumers;

* Complete planned training in identifying and escalating concerns of abuse or neglect of consumers.
* Ensure training is evidence based.
* Monitor that staff who are accountable for responding to needs of vulnerable consumers are alert to individual circumstances and where a serious concern is raised that appropriate actions are taken.
* Demonstrate the governing body has line of sight to concerns of abuse of neglect occuring as soon as practicable to support them to guide the response of the service and ensure any reporting obligations are met.