Bene Aged Care - Community Services

Performance Report

Level 1, 480 Torrens Road
WOODVILLE NORTH SA 5012
Phone number: 08 8131 2000

**Commission ID:** 600063

**Provider name:** Italian Benevolent Foundation SA Inc

**Quality Audit date:** 16 February 2022 to 21 February 2022

**Date of Performance Report:** 8 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:**

* Bene Casa Home Care Packages, 18525, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012

**CHSP:**

* Allied Health and Therapy Services, 4-7XN879U, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Centre Based Respite, 4-7XNNX59, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Domestic Assistance, 4-7XNNX96, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Flexible Respite, 4-7XNNXER, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Home Maintenance, 4-7XNNXMY, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Meals, 4-7XNNXRZ, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* CHSP Personal Care, 4-7XNNXUS, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Social Support - Group, 4-7XNYJVV, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Social Support - Individual, 4-7XNYK16, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* CHSP Transport, 4-7XNYKCB, Level 1, 480 Torrens Road, WOODVILLE NORTH SA 5012
* Centre Based Respite, 4-7XNNX59, 6 Mumford Avenue, ST AGNES SA 5097
* Allied Health and Therapy Services, 4-7XN879U, 6 Mumford Avenue, ST AGNES SA 5097
* Meals, 4-7XNNXRZ, 6 Mumford Avenue, ST AGNES SA 5097
* CHSP Transport, 4-7XNYKCB, 6 Mumford Avenue, ST AGNES SA 5097

# Overall assessment of Service/s

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | HCP  | Compliant  |
|   | CHSP | Compliant  |
| Requirement 1(3)(a) | HCP  | Compliant  |
|   | CHSP | Compliant  |
| Requirement 1(3)(b) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 1(3)(c)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 1(3)(d)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 1(3)(e)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 1(3)(f)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Standard 2 Ongoing assessment and planning with consumers |
|  | HCP  | Not Compliant |
|  | CHSP | Not Compliant |
| Requirement 2(3)(a) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 2(3)(b) | HCP | Not Compliant |
|  | CHSP | Not Compliant |
| Requirement 2(3)(c) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 2(3)(d) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 2(3)(e) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Standard 3 Personal care and clinical care | HCP  | Not Compliant |
|   | CHSP | Compliant  |
| Requirement 3(3)(a) | HCP  | Compliant  |
|   | CHSP | Compliant  |
| Requirement 3(3)(b) | HCP | Not Compliant |
|  | CHSP | Compliant  |
| Requirement 3(3)(c)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 3(3)(d)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 3(3)(e)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 3(3)(f)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 3(3)(g)  | HCP | Compliant  |
|  | CHSP | Compliant  |

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| --- |
| Standard 4 Services and supports for daily living |
|  | HCP  | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(a) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(b) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(c) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(d) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(e) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(f) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 4(3)(g) | HCP | Compliant  |
|  | CHSP | Not Assessed |
| Standard 5 Organisation’s service environment |
|  | HCP  | Compliant  |
|  | CHSP | Compliant  |
| Requirement 5(3)(a) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 5(3)(b) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 5(3)(c) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Standard 6 Feedback and complaints | HCP  | Compliant  |
|   | CHSP | Compliant  |
| Requirement 6(3)(a) | HCP  | Compliant  |
|   | CHSP | Compliant  |
| Requirement 6(3)(b) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 6(3)(c)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 6(3)(d)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Standard 7 Human resources | HCP  | Not Compliant |
|   | CHSP | Not Compliant |
| Requirement 7(3)(a) | HCP  | Not Compliant |
|   | CHSP | Not Compliant |
| Requirement 7(3)(b) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 7(3)(c)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 7(3)(d) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 7(3)(e)  | HCP | Compliant  |
|  | CHSP | Compliant  |
| Standard 8 Organisational governance | HCP  | Not Compliant |
|   | CHSP | Not Compliant |
| Requirement 8(3)(a) | HCP  | Compliant  |
|   | CHSP | Compliant  |
| Requirement 8(3)(b) | HCP | Compliant  |
|  | CHSP | Compliant  |
| Requirement 8(3)(c)  | HCP | Not Compliant |
|  | CHSP | Not Compliant |
| Requirement 8(3)(d) | HCP | Not Compliant |
|  | CHSP | Not Compliant |
| Requirement 8(3)(e)  | HCP | Compliant  |
|  | CHSP | 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 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 23 March 2022.

# STANDARD 1 Consumer dignity and choice

#  HCP Compliant  CHSP 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

During interview consumers and representatives confirmed that consumers are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose.

Consumers and representatives interviewed confirmed that the culture and diversity of consumers is valued. Consumers are encouraged to do things for themselves, and staff know what is important to them.

Consumers and representatives confirmed they receive information about care and services, and they can easily understand this information. Consumers feel that their personal privacy is respected, and their personal information is kept confidential.

The service has policies and procedures in place that have an inclusive, consumer-centred approach; including supporting consumers to take risks and how the organisation protects privacy and confidentiality. Staff described 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 Quality Standard for the Home care packages services are assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

The Quality Standard for the Commonwealth home support programme services are 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  |
|  | CHSP  | Compliant  |

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

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

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

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

### *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  |

*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  |

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

# STANDARD 2 Ongoing assessment and planning with consumers

#  HCP Not Compliant CHSP Not 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

A review of documentation failed to demonstrate a compliant approach to assessment and planning for consumers. Assessment and planning did not consistently identify and address the consumer’s current needs, goals and preferences. Specifically, the service did not consistently demonstrate that consumers’ support plans were tailored to their needs, in relation to medications and behaviours of concerns management.

The service demonstrated initial and ongoing assessment and planning for care and services is undertaken in partnership with consumers and/or representatives. Advanced care planning and end of life care is addressed and planned as required.

Sampled consumers and representatives considered they are partners in initial assessment on commencement of services and in the planning of their care and services ongoing. Consumers and/or representatives confirmed the outcomes of assessment and planning had been communicated to them, and a copy of the consumer’s support plan provided.

The service has policies and processes to guide staff in relation to assessment and planning, including for referrals and involvement from other organisations. Care and services are reviewed annually and as needed.

Staff interviewed were knowledgeable about care planning and assessment process, including re-assessment, and confirmed care planning documents are readily accessible. Staff interviewed showed knowledge about consumers’ needs and risks.

The Quality Standard for the Home care packages services are assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

The Quality Standard for the Commonwealth home support programme services are 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)(a) | HCP  | Compliant  |
|  | CHSP  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) | HCP  | Not Compliant |
|  | CHSP  | Not 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.*

Findings

For the consumers sampled, the service was not able to demonstrate that all consumers’ support plans were tailored to their needs, in relation to medications and behaviour of concerns management, and that documentation was accurate in call cases.

Home Care Package

One consumer’s care plan showed the consumer displays physical behaviours during the provision of care and services however, her support plan did not include behaviour management strategies as described by staff in case notes and during interviews conducted by the Assessment Team with staff and family. Behaviour management needs were not reviewed or re-assessed, nor were any referrals initiated for specialist assessment made in response to the consumers increased challenging needs over a period of time.

One consumer who received medication management assistance had a support plan that was not reflective of the actual services being provided.

Commonwealth Home Support Programme

The care plan for one consumer with a diagnosis of dementia was not tailored to their needs in relation to behaviours of concerns management. Specifically, a number of successful strategies being implemented by staff at times when the consumer became anxious, confused and frustrated were not documented.

It is noted that service management acknowledged areas for improvement at the time of the quality review and responded proactively to the assessment team’s findings. In their formal response the service has detailed planned corrective action to ensure support planning addresses the current needs, goals and preferences for all consumers; however, at the time of the quality review, the service was not able to demonstrate compliance with this standard.

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

*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  |

*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 Not Compliant CHSP 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

At the time of assessment, the service did not demonstrate the ways in which it effectively manages high impact risks associated with the care of some consumers receiving Home Care Packages services.

At the time of assessment, care planning documents viewed for consumers receiving Commonwealth Home Support Programme services did not identify any issues in the management of high impact or high prevalence risks associated with the personal care or clinical care of consumers.

The service demonstrated that consumers receive safe and effective personal and clinical care, in accordance with the consumer’s needs to optimise their health and well-being. Sampled consumers considered that they receive personal and/or clinical care that is safe and right for them and they have continuity of care.

Care planning documents are developed from information gathered through assessment process and in consultation with consumers and/or representatives, including their needs, goals and preferences, in relation to the personal and clinical care they receive. Information about consumers’ care planning is communicated with consumers and those responsible for care provision.

The service was able to demonstrate they have effective systems and processes in relation to personal and clinical care, for monitoring deterioration or change of consumers’ mental health, cognitive and physical function and; timely referrals to other health professionals.

When consumers wish to provide their advanced care planning information, this is documented to support their needs, goals and preferences nearing their end of life. Information about advanced care planning is provided to consumers as part of their new consumer pack.

The service was able to demonstrate information about consumers’ needs, preferences and conditions is generally well documented and communicated within the service, and with other organisations where responsibility for care is shared.

The service was able to demonstrate processes to maintain appropriate infection prevention and control and minimise the risk of COVID-19.

The Quality Standard for the Home care packages services are assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

**Assessment of Standard 3 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(a) | HCP  | Compliant  |
|  | CHSP  | 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  | Not Compliant |
|  | CHSP  | Compliant  |

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

Findings

The service was not able to demonstrate effective management of high impact risks associated with the care of each consumer, specifically in relation to medication management.

The Assessment Team noted there were incidents of missed medication administration including medications for the treatment of high blood pressure, heart conditions and management of seizures, which should be taken regularly and/or at a set time each day.

One consumer missed his medication on 3 consecutive days as a result of unfilled contractor shifts, which the provider was aware of but failed to act on.

One consumer missed evening medication on one occasion due to staff not dispensing medication earlier in the day for the consumer to self-administer, as per the consumers daily routine.

The service did not demonstrate effective investigation into these incidents or where inquiries had been made to establish if similar incidents had previously occurred, for these or other consumers, and the possible risk or impact on those consumers.

Management detailed the reporting of consumers’ incidents but could not demonstrate how the process effectively informed identification of trends, such as medication incidents, and how the service used the information to inform continuous improvement.

The service was able to demonstrate effective management of high impact or high prevalence risks in relation to falls, wounds and specialised nursing for consumers receiving Home Care Packages services.

Care planning documents viewed for consumers receiving Commonwealth Home Support Programme services did not identify any issues in the management of high impact or high prevalence risks associated with the personal care or clinical care of consumers.

It is noted that in response to the assessment team’s report, the service commenced a review of incident management in relation to medication management and plans corrective action in response to that review, however at the time of the quality review, the service was not able to demonstrate compliance with this standard.

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

*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  |

*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  |

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

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

### 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

At the time of assessment, the service demonstrated supports for consumers in their daily living are provided safely with a range of options to enable consumer independence.

Consumers advised that they receive services for daily living that optimises their independence, wellbeing and quality of life, and that enable them to do things they want to do.

Consumers and/or representatives confirmed staff are attentive to consumer’s wellbeing and provide meaningful activities and services. Staff and management demonstrated how they support consumers emotionally, promote their psychological wellbeing and make appropriate referrals to other organisations in a timely manner, as required.

Consumers and/or representatives stated that the support provided for daily living assists them to take participate in the community and do things with other people that are of interest to them.

Information about consumers’ needs, preferences and conditions are documented and communicated within the organisation, and with other organisations where responsibility for consumer care is shared.

Consumers and/or representatives confirmed the provision of daily living services are consistent and they receive continuity of services.

Consumers who receive meals from the service described the way in which these meals met their nutritional requirements and individual preferences.

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

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as six of the seven specific requirements have been assessed as Compliant.

Requirement 4(3)(g) was not assessed as the service is not funded for provision of equipment under Commonwealth Home Support Programme.

**Assessment of Standard 4 Requirements**

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

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

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

*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  |

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(g) | HCP  | Compliant  |
|  | CHSP  | Not Assessed |

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

# STANDARD 5 Organisation’s service environment

#  HCP Compliant  CHSP Compliant

### 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

Observations of the service environment at the time of assessment showed it was welcoming, accessible, clean and well maintained. Consumers confirmed they felt welcome and safe at the service environment.

The service’s processes to minimise the risk of infections include regular cleaning, mandatory mask wearing, social distancing and health related screening of visitors.

Staff described, and evidence confirmed, that there are processes to ensure the service environment and equipment are clean, safe and maintained, including to minimise the risk of infections.

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

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP  | Compliant  |
|  | CHSP  | Compliant  |

*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  | Compliant  |
|  | CHSP  | Compliant  |

*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  | Compliant  |
|  | CHSP  | Compliant  |

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

**STANDARD 6 Feedback and complaints**

#  HCP Compliant  CHSP 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

The service demonstrated there are mechanisms for consumers, their family, friends, carers and others to provide feedback and make complaints. Staff explained how they support consumers and representatives to provide feedback and how consumers can be supported to understand the role of advocates and how to access advocacy and language services if required.

Consumers and representatives interviewed confirmed they knew how to provide feedback or make a complaint and described actions taken and use of open disclosure when they have raised a complaint. Improvements to their care and services as a result of their complaints were also noted.

Evidence demonstrated the service has processes in place for managing complaints including how the service records, responds to and reports complaints made by consumers.

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

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as 4 of the 4 specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

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

*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  |

*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  |

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

# STANDARD 7 Human resources

#  HCP Not Compliant CHSP 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

At the time of the assessment, the service could not demonstrate that the workforce is planned, with sufficient qualified staff to enable the delivery and management of safe and quality care and services.

Consumers and representatives considered that consumers receive quality care and services from people who are kind, capable and caring however there was dissatisfaction with staffing levels which impacted on the continuity of care being delivered in a timely manner and/or resulted in cancelled services.

The service demonstrated that the workforce receives ongoing support, training, professional development and feedback to meet the needs of aged care consumers and deliver the outcomes the Quality Standards.

The service demonstrated they regularly assess, monitor and review the performance of each member of the workforce through an effective human resources system. The service demonstrated they regularly evaluate how staff are performing their role, including staff subcontracted through brokerage arrangements.

The Quality Standard for the Home care packages services are assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

The Quality Standard for the Commonwealth home support programme services are 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)(a) | HCP  | Not Compliant |
|  | CHSP  | Not 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.*

Findings

Documentation showed ongoing staff shortages did not enable the service to fill all required shifts. Consumers and their representatives reported dissatisfaction in this area as staffing levels impacted on the continuity of care being delivered in a timely manner.

One representative stated that they are required to assist their family member with care and services when regular staff are not available, and shifts are cancelled.

One representative stated when familiar staff are not available, and an alternative staff member is sent, they are required to translate for the consumer who receives personal care, as there are insufficient Italian speaking field staff to provide care and services.

At the time of assessment, management discussed the difficulty in retaining and attracting new staff during COVID-19 and the actions already underway to address the identified staffing shortages experienced at the service. This included staff recruitment and training initiatives and ceasing the acceptance of new referrals until such time that the service is confident they can deliver safe and quality services to all consumers.

It is noted that the service has identified workforce issues as a priority in the current Strategic Plan and in response the assessment teams report is continuing to take steps to address this issue, however at the time of the quality review, the service was not able to demonstrate compliance with this standard.

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

*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  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(e) | HCP  | Compliant  |
|  | CHSP  | 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 Not 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

At the time of assessment, the organisation was not able demonstrate effective organisation wide governance systems were in place, including:

* Effective workforce governance to ensure the workforce is planned to enable the delivery and management of safe and quality care and services;
* Effective systems and processes to monitor, analyse and use feedback and complaint data to improve the quality of care and services;
* An effective continuous improvement system and processes to assess, monitor and improve the quality and safety of care and services provided by the service; and
* How the use of the incident management system (IMS) improves its performance on how it delivers quality care and services.

The organisation was able to demonstrate that effective systems were in place in relation to information management, the monitoring of regulatory compliance and financial governance.

Consumers interviews considered the organisation is well run and are satisfied with the management of the service. Consumers have input into the service through several feedback mechanisms including consumer and representative surveys, informal and formal feedback and the care planning process, to improve the delivery of care and services.

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

The service demonstrated an effective clinical governance framework and systems are in place to support the provision of clinical care.

The Quality Standard for the Home care packages services are assessed as Non-compliant as two of the five specific requirements have been assessed as Non-compliant.

The Quality Standard for the Commonwealth home support programme services are assessed as Non-compliant as two of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 8 Requirements

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

*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  | Not Compliant |
|  | CHSP  |  Not 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.*

Findings

The organisation did not demonstrate it has effective organisation wide governance systems in place for managing and governing all aspects of care and services in relation to continuous improvement, feedback and complaints and workforce governance.

**Continuous improvement**

The organisation did not demonstrate an effective continuous improvement system and processes in place to assess, monitor and improve the quality and safety of care and services provided by the service.

Feedback is provided through the assessment and care planning process, and feedback and complaints received are documented on the complaints register, however there was no evidence that the service uses the information to improve care and services.

Systems in place for managing and monitoring incidents did not exhibit effectiveness. The service is unable to demonstrate the system helps the organisation to identify where quality and safety is at risk and that information about incidents are used to inform improvements for all consumers.

#### Workforce governance

The organisation did not demonstrate effective workforce governance to ensure 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.

At the time of assessment strategies to address current workforce shortages have not been effective to ensure the reduction of unfilled shifts to enable consumers to receive safe and quality care and services.

The organisation had identified workforce planning as a continuous improvement action on both the organisational and community continuous improvement plans but neither plan had an open action to address workforce attraction and retention at the time of assessment.

The organisation advised that an external body has been contracted to undertake a risk management review and workforce management is one of the five risk-based strategies to be addressed in 2022. A business plan to attract and retain suitably trained staff in home care services was at the time of assessment, before governing board for consideration.

#### Feedback and complaints

The organisation did not demonstrate effective systems and processes to monitor, analyse and use feedback and complaint data to improve the quality of care and services.

The service was able to demonstrate that actions are taken to address individual complaints from consumers, however the service could not demonstrate how feedback and complaints trends are consistently reviewed and analysed for continuous improvement and to benefit all consumers.

The service did not demonstrate practical application of the service’s Feedback and Complaints Handling Procedure which outlines the process to ‘Consider: review outcomes for systemic improvements.’

The service was also not able to demonstrate effective reporting systems to the executive team and governing body regarding feedback and complaints or improvements made as a result of feedback and complaints.

It is noted that the service has responded proactively to the assessment team’s findings and planned prompt corrective action, including the establishment of review and analysis mechanisms within systems to inform continuous improvement, however; at the time of the quality review, the service was not able to demonstrate compliance with this standard.

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

Findings

The organisation was not able to demonstrate how the use of the incident management system (IMS) improves its performance on how it delivers quality care and services.

While incidents are consistently reported, trends and systemic issues have not been identified nor analysed through the IMS, to provide oversight of the system’s operation and ensure its effectiveness in driving continuous quality improvement.

At the time of assessment, the assessment team noted that the service does maintain a register of incidents which includes event details, action taken and outcome, however; it does not contain information about the incident investigation to enable analysis of incidents to identify root cause and prevention of future incidents occurring for other consumers. Quality reporting of incidents also did not outline actions undertaken or improvements made to services as a result of the investigations.

In response to the assessment team’s report, the service has engaged a consultant to perform a complete review of the IMS, incorporating a plan to address assessment of root cause and analysis, reporting and incident management training.

It is noted that the service responded proactively to the assessment team’s finding’s and planned prompt corrective action, however, at the time of the quality review, the service was not able to demonstrate compliance with the standard.

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

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) | HCP  | Not Compliant |
|  | CHSP  | Not 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 3(3)(b) | HCP  | Not Compliant |
|  | CHSP  | Compliant  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(a) | HCP  | Not Compliant |
|  | CHSP  | Not 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 8(3)(c) | HCP  | Not Compliant |
|  | CHSP  |  Not 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  | Not 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.*