Boronia House

Performance Report

183 - 197 Boronia Road   
ST MARYS NORTH NSW 2760  
Phone number: 02 9833 5600

**Commission ID:** 1025

**Provider name:** Thompson Health Care Pty Ltd

**Site Audit date:** 18 February 2020 to 20 February 2020

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-Compliant** |
| Requirement 2(3)(a) | Non-Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Non-Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | 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 Site Audit; the Site 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 Site Audit report received 16 March 2020.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### 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

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

For example:

* Consumers interviewed confirmed that they are treated with respect by staff all or most of the time. Many said that staff really know who they are and some said staff feel like family.
* Consumers interviewed confirmed that they are encouraged to do things for themselves with many saying they are free to come and go as they please from the service. Several consumers go outside the service on a weekly basis to attend religious activities or go across the road to the club for lunch.
* Consumers interviewed confirmed that their personal privacy is respected. A married couple who shared a room said staff always give them a lot of privacy.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

* Care plans reviewed details the preferences of each consumer for example when they prefer personal care to be delivered and food likes and dislikes. Staff interviewed were able to talk to the personal care preferences of consumers sampled.
* The Assessment Team reviewed multiple ways where consumers and representatives are kept informed – including regular case conferences, resident and relative meetings and newsletters. Menus and activity calendars were observed to be updated regularly and available to all consumers.

The Assessment Team found that five of six specific requirements were met.

The service was unable to demonstrate that staff understood each consumer’s culture and were actively aware of them when delivering care and services. Several care plans of sampled consumers did not contain cultural information important to the consumer and their life story.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

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

### Requirement 1(3)(b) Compliant

Care and services are culturally safe.

The assessment team found that consumers sampled were satisfied that staff respected them and they did not expect staff to promote their cultural identities. However, the assessment team found that the service was unable to demonstrate that staff understood each consumer’s culture and were actively aware when delivering care and services. Several care plans of sampled consumers did not contain cultural information important to the consumer and their life story.

The response from the approved provider provided further information about the consumers sampled and their cultural needs and how these are being met as well as the consumers expectations of the service with regard to acknowledging their diversity. I am of the view that the approved provider has demonstrated that this requirement is met.

The approved provider does comply with this requirement each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

### Requirement 1(3)(c) 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

make connections with others and maintain relationships of choice, including intimate relationships.

### Requirement 1(3)(d) Compliant

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

### Requirement 1(3)(e) 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) Compliant

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

# 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

Overall sampled consumers confirmed that they feel like partners in the ongoing assessment and planning of their care and services.

For example:

* Consumers sampled confirmed either they or their chosen representatives are involved in their care planning.
* While the service demonstrates outcomes of assessment and planning are communicated to consumers/or their representatives, this does not align with consumer feedback. Consumers are not aware of care plans or that their care plans are readily available to them.
* Some consumers/representatives are not aware of what a care plan is, however they said they have discussed their care at case conferences. To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewing their care planning documents in detail, asking consumers about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.
* While most care planning documentation reviewed identified accurate assessment of consumers’ needs, goals and preferences, some care plans contained information which did not align with feedback received from consumers. The Assessment Team identifies some changes in consumers’ needs, goals and preferences are not included in care plans.

The Assessment Team found that two of five specific requirements were met.

The Assessment Team found that while assessment and planning identifies advanced care planning and end of life wishes; is based on partnership; includes other providers of services; outcomes are communicated to the consumer and documented; and is regularly reviewed, some consumers’ assessments and care planning does not align with their needs, goals and preferences.

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

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Non-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.

While generally information in assessments and care planning documents informs the safe and effective delivery of care, the Assessment Team identified several care plans that did not reflect consumer’s needs including consideration of risks to their health and well-being. For one consumer, whilst incident forms had been completed which recorded follow-up care and interventions, this information had not been translated into their care plan. For another consumer, information about his mental state recorded in progress notes had not been translated into the care plan. When the consumer’s needs had changed there was evidence that some interventions had been put in place but it was unclear what assessment and planning activity had occurred to consider risks to the consumer’s health and well-being. These gaps were discussed with management during the site visit who responded immediately to rectify issues raised.

The response from the approved provider acknowledged the issues identified and queried whether identified care needs must be recorded in the consumer’s care plan. Whilst I acknowledge the provider’s view, I disagree, taking the view that the outcomes of assessment and planning activity, including consideration of risks to the consumer’s health and well-being, should be reflected in the consumer’s care plan as this is the primary document that outlines care and services to be provided.

The approved provider does not comply with this requirement as cannot demonstrate that 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) 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 service demonstrates comprehensive systems to assess and plan for consumers’ advanced care planning and end of life planning, however the Assessment Team identified gaps in documentation addressing consumer’s current needs, goals and preferences. These gaps were predominately around documenting consumer’s cultural care needs.

The response from the approved provider provided further clarification about the cultural needs of consumers cited in the report. I am, therefore, satisfied that assessment and planning processes do address consumer’s needs, goals and preferences.

The approved provider does comply with this requirement as 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) 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) Non-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.

While the service demonstrates outcomes of assessment and planning are communicated to consumers/or their representatives, consumers are not aware they have a care plan or that their care plans are readily available to them. Management said consumers were informed they can have access to their care plans and care plans are shown to consumers and their nominated persons involved at the time of case conferences. These mechanisms have not been successful as consumers are unaware that a copy of their care plan is readily available to them.

The response from the approved provider acknowledged consumers feedback and undertook to discuss this issue at the next resident and relative meeting and include in the upcoming edition of the facility newsletter.

The approved provider does not comply with this requirement as the outcomes of assessment and planning are not 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) 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 COMPLIANT Personal care and clinical care

### 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 sampled consumers did consider that they receive personal care and clinical care that is safe and right for them.

For example:

* All consumers sampled said they get care that they need. Consumers expressed confidence the staff knew their needs and preferences regarding clinical care.
* Consumers are satisfied they have access to their doctors and other allied health professionals including the physiotherapist and occupational therapist.
* Consumers generally said they felt confident staff would look after them well if they became unwell.
* To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed and staff were asked about how they ensure the delivery of safe and effective care for consumers. The team also examined relevant documents. The service demonstrates effective systems to identify and manage consumers’ personal and clinical care needs, goals and preferences. Policies and procedures underpin delivery of care. Staff recruitment and training supports assessment and planning and delivery of personal and clinical care. Organisational and service review processes monitor personal care and clinical care systems to support positive outcomes for consumers.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) 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) Compliant

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

### Requirement 3(3)(c) 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) 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) 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) Compliant

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

### Requirement 3(3)(g) 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 COMPLIANT Services and support for daily living

### 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

Overall sampled consumers confirmed that they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do.

For example:

* Consumers interviewed confirmed that they are supported by the service to do the things they like to do. For example, if they wanted to go outside the service to attend religious, medical or hairdressing appointments staff were able to assist where required.
* Most consumers interviewed said they have family who visit them regularly and there are plenty of spaces around the service where they can host them.
* Consumers interviewed could not fault the quality or quantity of food at the service. However, several consumers indicated that the menu was more multicultural and modern than what they wanted. Other consumers said they were very happy with the food.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

* While care plans did not always reflect the most up to date consumer preferences, staff were generally able to correctly speak to the individual preferences of consumers sampled when it came to their care and lifestyle supports and food.
* The service demonstrated that it has sought out the feedback of its consumers in updating its activities calendar and menu.
* The Assessment Team identified there are areas for the service to be more responsive to consumer feedback such as wanting more exercises, bus trips and opportunity to converse with external visitors.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) 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) Compliant

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

### Requirement 4(3)(c) 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.

Most consumers are satisfied with the level of engagement they have with the outside community, social and personal relationships and say they have things to do of interest to them. However, the Assessment Team identified some consumers wanted more exercise classes, bus trips and the opportunity to converse with external visitors.

The response from the approved provider provided further information about the 7 day a week activities schedule of varied activities on offer including exercise classes, bus outings, external guests as well as activities exclusively for male consumers. The provider undertook to review the activities on offer based on feedback from some consumers who would like more of what is offer already.

I find this requirement met based on feedback from consumers who are largely satisfied with the activities provided and the willingness of the provider to review the activities on offer.

The approved provider does comply with this requirement as services and supports for daily living assist each consumer to: participate in their community within and outside the organisation’s service environment; and have social and personal relationships; and do the things of interest to them.

### Requirement 4(3)(d) 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) Compliant

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

### Requirement 4(3)(f) Compliant

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

### Requirement 4(3)(g) Compliant

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

# STANDARD 5 COMPLIANT Organisation’s services environment

### 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

Overall sampled consumers indicated that they feel they belong in the service, and feel safe and comfortable in the service environment.

For example:

* Consumers interviewed confirmed they feel safe at the service and when staff are using equipment to help move them.
* Consumers interviewed confirmed that they feel at home, with common feedback being they like the spaciousness of the service and the beautiful gardens. The service has many social spaces where consumers can catch up with their families.
* Consumers interviewed were particularly happy with how clean and well maintained the service is.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

* The maintenance log was reviewed showed that tasks are reviewed daily and prioritised and responded to in a timely manner. There were no outstanding maintenance issues.
* The service has an extensive preventative maintenance schedule. Environment and room audits are performed at a weekly, monthly and quarterly basis. The Assessment Team reviewed documentation to see that everything from checks on fixtures, food trolleys, water, equipment like wheelchairs and walkers, drains, call bells and air conditioning are monitored and reviewed on a regular basis.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) 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) 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) Compliant

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

# STANDARD 6 COMPLIANT Feedback and complaints

### 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

Overall consumers confirmed that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

For example:

* Consumers and representatives interviewed about the feedback system were aware of the secure box that can be used to lodge complaints confidentially and the locations of feedback forms. Consumers were able to describe being comfortable to take concerns to registered nurses or management.
* When asked about examples of feedback, most of the consumers or representatives spoke about the consumers meeting. The most featured feedback comments were related to food. Management use a consultative approach to work with consumers and the catering team to make improvements to the food to meet consumers preferences.
* Consumers who had made formal complaints using the feedback system who were interviewed indicted they were satisfied the issue had been managed well and resolved.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

* All suggestions and complaints documented through the feedback system, received as verbal feedback or in writing had been thoroughly investigated and the person raising the complaint was involved in identifying if the solution was satisfactory. Feedback received at meetings was also followed through to resolution.
* Consumer surveys are used to gain consumer feedback. Members of the board visit the service regularly to talk to consumers and seek their feedback directly.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

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

### Requirement 6(3)(b) 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) Compliant

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

### Requirement 6(3)(d) Compliant

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

# STANDARD 7 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

Overall sampled consumers indicated that they get quality care and services when they need them and from people who are knowledgeable, capable and caring.

For example:

* All consumers interviewed confirmed that staff are kind and caring. One consumer stated, “we are too well looked after here”.
* All consumers interviewed confirmed that staff know what they are doing and are satisfied with the quality of care and services they receive.
* All consumers interviewed confirmed that they feel that there are adequate staff at the service. Some consumers stated that at times staff are busy but they are always available to support consumers.

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

* The Assessment Team observed staff to be skilled and knowledgeable in their roles. Staff were observed to be respectful and demonstrated a knowledge of consumers individual needs and preferences. Management demonstrated effective systems to ensure that staff are well trained and are monitored for their competence in their roles.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) 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) Compliant

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

### Requirement 7(3)(c) 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) Compliant

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

### Requirement 7(3)(e) Compliant

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

# STANDARD 8 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

Overall sampled consumers indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* The majority of consumers interviewed confirmed that the service is well run and that management communicate effectively with them.
* Management demonstrated how consumers are actively supported and engaged in evaluation of care and services, however the Assessment Team identified the service does not demonstrate consumers are actively involved in development and delivery of care and services at an organisational level. For example; consumers are not currently represented at the Board level, and not involved in policy and procedure development, organisational planning or staff recruitment.
* Feedback from consumers is sought through meetings, surveys and feedback forms. Consumers confirmed that they are aware of how to provide feedback and that management address concerns in a timely manner.
* Board members attend the service regularly. Consumers confirmed that board members and senior management engage with them directly to ensure that their needs are met effectively.
* The service has policies and procedures in place for clinical governance and to meet legislation.

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

The organisation has effective governance systems in place to ensure that service management and the board are aware of any risks to consumers or areas that require improvement.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

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

The assessment team identified that the service provides opportunity for sharing information regarding care and service provided with consumers. Consumers are engaged in feedback opportunities through consumer/representative meetings, feedback mechanisms and meetings to evaluate care and services. The assessment team noted that service did not have an organisation wide approach to involving consumers at a more strategic level in developing, delivering and evaluating services. I note that the consumer advocate group commenced in 2019 is currently not active as previous members were not able to continue. The response from the approved provider provided further information about how the service is currently recruiting new members so that this group can continue.

I am satisfied having reviewed information in both Standard 6 and Standard 8 that the service has a range of mechanisms in place to provide opportunity for consumers to actively be involved in development and delivery of care and services.

The approved provider does comply with this requirement as consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

### Requirement 8(3)(b) 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) 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) 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.

### Requirement 8(3)(e) 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 assessment and planning, including the consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.

### Requirement 2(3)(d)

*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.*

Ensure all consumers can access a care and services plan that is readily available to them, where care and services are provided.