Brightwater at Home Services

Performance Report

Level 3 Garden Office Park, 355 Scarborough Beach Road
OSBORNE PARK WA 6017
Phone number: 08 9202 2800

**Commission ID:** 500041

**Provider name:** Brightwater Care Group Limited

**Assessment Contact - Site date:** 17 September 2020

**Date of Performance Report:** 12 November 2020

# Publication of report

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

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(c) | Compliant |

# Detailed assessment

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

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

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

* the Assessment Team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.
* the provider did not submit a response to the Assessment Team’s report.

# STANDARD 8 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

The Assessment Team assessed Requirement 8 (3) (c) in this Standard, all other Requirements in this Standard were not assessed. An overall assessment of this Standard was not completed at this Assessment Contact.

The Assessment Team has recommended Requirement 8 (3) (c) in this Standard as met. The Provider did not submit a response to the Assessment Team’s report.

Based on the Assessment Team’s report I find the provider, in relation to the service, compliant with this requirement. I have provided reasons for my decision below.

## Assessment of Standard 8 Requirements

### 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.*

Consumers are confident their care and services are well managed, and they are informed about services, fees, supports and care available through documentation provided to them, meetings and staff communication.

The service demonstrated regular communication with consumers and representatives when feedback/concerns are raised. The organisation has an information management structure to manage information flow, adherence to regulatory requirements, oversight of finance governance, workforce management and continuous improvement processes.

Recent improvements include new support care plans with a more person-centred approach, a new incident management system and the trialling of a client portal to improve real time responses to service delivery.

Policies and procedures guide staff in relation to privacy, information management, regulatory compliance and complaints management.

Staff receive ongoing support, training, professional development, supervision and feedback to perform their roles and have clear responsibility and accountability in doing so. Staff have access to the information required to perform their role, knowledge of consumer’s needs and regulatory legislative requirements. Regular staff training occurs, and staff receive updates on regulatory changes including safe practices relating to the Covid-19 environment.

There is a documented management system overseen by the organisation’s information and privacy specialist. Management personnel provide monthly reports to the leadership team and Board members for oversight and review via regular meetings.

For the reasons detailed above, I find Brightwater Care Group Limited, in relation to Brightwater at Home Services, is compliant with Standard 8 Requirement (3) (c ).

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.