City of Holdfast Bay - Alwyndor Aged Care - HOVE

Performance Report

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**Commission ID:** 600049

**Provider name:** Alwyndor Aged Care - City of Holdfast Bay

**Assessment Contact - Site date:** 29 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(c) | Non-compliant |

# Detailed assessment

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

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

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

* the Assessment Team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, review of documents and interviews with staff, consumers and others.
* the provider’s response to the Assessment Contact - Site report received on 20 October 2020.

# STANDARD 3 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

The Assessment Team assessed Requirement (3)(a) in Standard 3 and recommended the Requirement as met. All other Requirements in this Standard were not assessed.

Overall consumers sampled said all staff are kind, respectful, professional and know their job, and they are satisfied with the personal and clinical care and services provided. Specific consumer feedback included:

* Seven consumers said they receive the care and services they receive to have a meaningful life. They have made new friends and enjoy the social aspect of the services.
* Four consumers said they are referred to and have ongoing access to, other health professionals, such as the Physiotherapist, Podiatrist and Dietitian.
* One consumer said they are satisfied with the way in which the service manages their wound management and catheter care.
* Two consumers said if staff are running late or cannot provide the service on the day, they are contacted by the office and can choose whether they wish to have the service that day.

Clinical staff described how they identify consumers’ goals and personal preferences, report any changes or risks in care needs and make appropriate referrals to allied health professionals. Clinical staff said consumers are involved in their initial, ongoing and annual care assessments. Changes are documented in consumers’ care plans, progress notes and staff are made aware of the changes through email.

Clinical staff and service co-ordinators said the service is part of a large organisation that has access to allied health professionals on site. The service can also access other internal and external organisations and services as required.

Clinical staff said they have access to various policies and procedures to guide staff practice, including infection control, clinical care, privacy and dignity.

Care documentation viewed by the Assessment Team showed the service has processes to monitor consumers’ personal and clinical care, including falls, wound care, and exercises classes to improve consumers’ mobility. Documentation confirmed referral to allied health professionals, such as an Occupational Therapist and Physiotherapist.

Based on the information detailed above, I find the approved provider, in relation to City of Holdfast Bay - Alwyndor Aged Care – Hove, is Compliant with Requirement (3)(a) of Standard 3.

### 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.*

# 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 (3)(c) in Standard 8 and recommended the Requirement as not met. All other Requirements in this Standard were not assessed.

The Assessment Team found the service could not demonstrate effective organisation wide governance systems relating to information management, workforce governance and regulatory compliance in relation to the management of brokerage services. In the last three months, not all brokerage arrangements have had a formal brokerage contract or agreement in place.

The service could not demonstrate an effective system for ensuring brokered providers are meeting their regulatory responsibilities and that brokered staff are competent in their role.

The service could not demonstrate there was a monitoring process in place to ensure brokered providers are providing services in accordance with the Aged Care Quality Standards.

I have considered the Assessment Team’s report and the approved provider’s response to come to a view that the service is Non-compliant with this Requirement. I have provided the reasons for my decision below.

## Assessment of Standard 8 Requirements

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

The Assessment Team was not satisfied that the service could demonstrate effective organisation wide governance systems relating to information management, workforce governance and regulatory compliance in relation to the management of brokered services. The Assessment Team was satisfied the service demonstrated effective systems to manage continuous improvement, financial governance and feedback and complaints.

The Assessment Team viewed documentation which identified that in the last three months personal and clinical care services for HCP consumers had been provided by brokered providers who did not have current Brokerage Agreements in place.

The service was unable to demonstrate there were monitoring processes to ensure brokered providers are providing care and services in accordance with the Aged Care Quality Standards and meeting their regulatory compliance obligations.

The Assessment Team provided the following findings and evidence relevance to my decision. In particular:

* The Assessment Team was provided with a spreadsheet which contained a list of brokered providers. The list identified the brokered providers who were providing personal and clinical care. The Assessment Team noted the spreadsheet did not reflect all brokered providers used by the service.
* Management said the service does not have a formal process for evaluating the performance of brokered providers.
* The service does not have monitoring processes to ensure staff are appropriately trained and qualified to provide services in accordance with the Aged Care Quality Standards.
* The service could not demonstrate brokerage providers are completing police clearances, professional registrations, and statutory declarations for all staff, or undertaking vehicle registration and vehicle safety checks.
* The service had not identified or implemented an improvement action plan in relation to consumers being provided with care and services by brokered providers with no formal contract or Agreement in place.

The approved provider submitted a response and did not agree with the Assessment Team’s findings. The approved provider submitted the following additional information and documentation:

* The approved provider said the service had identified that not all brokerage providers had a formal brokerage contract or Agreement prior to the Assessment Contact and corrective actions had been commenced.
* In July 2020 a draft ‘Alwyndor Brokerage Agreement’ proforma had been sent to the organisation’s lawyers for review. A revised agreement was in place by August 2020 and all brokerage providers were subsequently requested to enter into these Agreements.
* The approved provider stated three of the providers who entered into Agreements had not provided personal and clinical care to consumers in the past three months. However, documentation provided showed Agreements for a further two providers were not executed until after the date of the Assessment Contact visit, despite providing care and services to HCP consumers during the past three month period.
* As a requirement of the Agreement, brokered service providers are required to provide documented evidence that personnel have the required skills, expertise, mandatory training and regulatory clearances. The service said the organisation has files for each brokerage provider which contains copies of relevant documentation.
* The service conducts an Annual Brokered Service Provider Performance Review and a blank copy of the reporting proforma was provided. Regulatory responsibilities, such as police checks, professional registrations, statutory declarations and training, are reviewed as part of the annual performance review process.
* Performance of brokered providers is further assessed through interviews with consumers who receive brokered services.
* The spreadsheet shown to the Assessment Team only included those brokered providers who have a current agreement. The spreadsheet has now been updated to include all brokered providers with either Agreements or service contracts, regardless of whether there are currently providing services.

I acknowledge the organisation and the service had identified prior to the Assessment Contact that not all brokered providers had current Agreements in place, had undertaken a review of their Brokerage Agreement and had sent copies of the Agreement to providers to complete. I also acknowledge the service has made improvements to their spreadsheet to ensure all brokered providers are recorded.

However, at the time of the Assessment Contact, Agreements had not been executed with two brokered providers who had been providing personal and clinical care to HCP consumers for the past three months. It is noted the date of commencement of the Agreement was 1 July 2020; however, the Agreements between the approved provider and the brokered providers had not been executed within the three-month period.

While I acknowledge the organisation has an annual performance review process with brokered providers, there are no ongoing monitoring processes in place to ensure personal and clinical services are being provided, or that regulatory obligations are being met, in accordance with the Aged Care Quality Standards, and in particular, during the three-month period when there was no signed Agreement in place.

For the reasons detailed above, I find the approved provider, in relation to the City of Holdfast Bay – Alwyndor Aged Care - Hove, is Non-compliant with Requirement (3)(c) of Standard 8.

# 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.

**Standard 8 Requirement (3)(c)**

* Ensure brokered providers have signed agreements prior to providing personal and clinical care to HCP consumers.
* Ensure there are ongoing monitoring processes to ensure brokered providers are meeting regulatory compliance requirements and providing care in accordance with the Aged Care Quality Standards.