Coastal Home Care

Performance Report

1/40 Glen Kyle Drive
BUDERIM QLD 4556
Phone number: 0493 091 270

**Commission ID:** 701075

**Provider name:** Coastal Home Care

**Quality Audit date:** 7 January 2022 to 12 January 2022

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

# Performance report prepared by

S. Bickerton, 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:**

* Coastal Home Care - Sunshine Coast, 27752, 1/40 Glen Kyle Drive, BUDERIM QLD 4556

# Overall assessment of Service/s

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice |  |  |
|  | HCP  | Compliant  |
| Requirement 1(3)(a) | HCP  | Compliant  |
| Requirement 1(3)(b) | HCP | Compliant |
| Requirement 1(3)(c)  | HCP | Compliant |
| Requirement 1(3)(d)  | HCP | Compliant |
| Requirement 1(3)(e)  | HCP | Compliant |
| Requirement 1(3)(f)  | HCP | Compliant |
| Standard 2 Ongoing assessment and planning with consumers |
|  | HCP  | Not Compliant |
| Requirement 2(3)(a) | HCP | Not Compliant |
| Requirement 2(3)(b) | HCP | Not Compliant |
| Requirement 2(3)(c) | HCP | Compliant  |
| Requirement 2(3)(d) | HCP | Not Compliant |
| Requirement 2(3)(e) | HCP | Compliant  |
|  |  |  |
| Standard 3 Personal care and clinical care |  |  |
|  | HCP  | Not Compliant |
| Requirement 3(3)(a) | HCP  | Compliant |
| Requirement 3(3)(b) | HCP | Not Compliant |
| Requirement 3(3)(c)  | HCP | Compliant |
| Requirement 3(3)(d)  | HCP | Compliant |
| Requirement 3(3)(e)  | HCP | Compliant |
| Requirement 3(3)(f)  | HCP | Compliant |
| Requirement 3(3)(g)  | HCP | Compliant |
| Standard 4 Services and supports for daily living |
|  | HCP  | Compliant  |
| Requirement 4(3)(a) | HCP | Compliant  |
| Requirement 4(3)(b) | HCP | Compliant  |
| Requirement 4(3)(c) | HCP | Compliant  |
| Requirement 4(3)(d) | HCP | Compliant  |
| Requirement 4(3)(e) | HCP | Compliant  |
| Requirement 4(3)(f) | HCP | Not Applicable |
| Requirement 4(3)(g) | HCP | Compliant  |
| Standard 5 Organisation’s service environment |
|  | HCP  | Not Applicable |
| Requirement 5(3)(a) | HCP | Not Applicable |
| Requirement 5(3)(b) | HCP | Not Applicable |
| Requirement 5(3)(c) | HCP | Not Applicable |
| Standard 6 Feedback and complaints |  |  |
|  | HCP  | Compliant  |
| Requirement 6(3)(a) | HCP  | Compliant  |
| Requirement 6(3)(b) | HCP | Compliant  |
| Requirement 6(3)(c)  | HCP | Compliant  |
| Requirement 6(3)(d)  | HCP | Compliant  |
| Standard 7 Human resources |  |  |
|  | HCP  | Compliant  |
| Requirement 7(3)(a) | HCP  | Compliant  |
| Requirement 7(3)(b) | HCP | Compliant  |
| Requirement 7(3)(c)  | HCP | Compliant  |
| Requirement 7(3)(d) | HCP | Compliant  |
| Requirement 7(3)(e)  | HCP | Compliant  |
| Standard 8 Organisational governance |  |  |
|  | HCP  | Compliant  |
| Requirement 8(3)(a) | HCP  | Compliant  |
| Requirement 8(3)(b) | HCP | Compliant  |
| Requirement 8(3)(c)  | HCP | Compliant  |
| Requirement 8(3)(d) | HCP | Compliant |
| Requirement 8(3)(e)  | HCP | 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 Standards 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 considered in developing this performance report:

* the Assessment Team’s report for the Quality Audit; informed by a site assessment, observations at the service, review of documents, and interviews with staff, consumers, and their representatives.
* the provider’s response to the Quality Audit report received 9 February 2022

# STANDARD 1 Consumer dignity and choice

#  HCP 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

Consumers and representatives described in various ways that they are treated with respect and provided examples of receiving individualised services to support their priorities and independence.

Consumers are satisfied their personal privacy is respected by the service. Digital systems managing personal consumer information are secured.

Service staff demonstrated a respectful disposition in discussing consumer requirements and explained multiple individualised consumer support arrangements, indicating a culture valuing inclusion and consumer choice is imbedded in the service.

Service records including policies and staff training records evidence a compliant approach to the management of support provisions, requiring consideration of consumer choice, encouragement of independence and a respectful code of conduct.

The Quality Standard for the Home care packages service (HCP) is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

**Assessment of Standard 1 Requirements**

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

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP  | 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.*

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| --- | --- | --- |
| Requirement 1(3)(d) | HCP  | Compliant |

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

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| Requirement 1(3)(e) | HCP  | 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.*

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| --- | --- | --- |
| Requirement 1(3)(f) | HCP  | Compliant |

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

# STANDARD 2 Ongoing assessment and planning with consumers

#  HCP 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 service documentation failed to demonstrate a compliant approach to the assessment, planning, and consideration of risk to consumer’s health and wellbeing.

Evidence was not presented to demonstrate consumer impact was managed in the presence of risks to consumer health and well-being, for example in cases where consumers may be impacted by cognitive decline or be at risk of falling.

Consumer care plans evidencing risks including falls and diabetes were assessed as generalised rather than individualised. Supporting care planning documentation did not evidence guidance to staff to enable optimal consumer outcomes.

Consumers and representatives explained they are involved in their care planning and staff spoke with them to discuss their individual services.

The service demonstrated assessment and planning includes the provision of clinical care professionals. Consumer services are confirmed to be reviewed regularly for effectiveness when consumer circumstances change or when incidents impact consumer well-being.

The Quality Standard for the HCP is assessed as Non-compliant as three of the five specific requirements have been assessed as Non-compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP  | Not 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.*

Findings

The service did not demonstrate consumer assessment and care planning adequately considered risks to health and well-being. The management of identified risks for certain consumers did not include mitigating strategies, including adequate guidance for staff to manage and reduce prospective impacts.

Care plans of consumers identified with cognitive decline including behavioural and psychological symptoms associated with dementia did not evidence the assessment of associated consumer behaviours, and supporting documentation detailing individualised behaviour management strategies was not present. For example:

* One consumer with a diagnosis of dementia and associated behaviours had a cognitive assessment completed but did not have subsequent assessments to support staff to manage specific associated behaviours to minimise consumer impacts.

One consumer identified as having a fall related injury was not assessed for any subsequent loss of independence. There was also an absence of documented strategies in place to manage future risk of falls for this consumer.

One consumer diagnosed with insulin dependent diabetes was noted as having a history of hypoglycaemic episodes. The care plan for this consumer did not document guidance or information for staff to follow in managing hypoglycaemic events.

Service policies and procedures were described by service staff as meeting best practise principles however evidence of these systems being effective for the needs of all consumers was not observed.

It is noted that the service is proactive in addressing the requirements of this standard and at the time of assessment was undergoing a process of data migration into newly implemented digital systems.

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| Requirement 2(3)(b) | HCP  | 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

Care plans reviewed for some consumers did not reflect the care and services they received through their HCP. For example:

* One consumer receives regular physiotherapy; however, this was not documented in their care plan.
* Two separate consumers receiving HCP sought specific devices, and to enable their acquisition required financial redirection from other HCP support provisions. The care plans for these consumers did not reflect these details and did not assess any subsequent risks or impacts linked to these consumer preferences.

Consumers current needs, goals and preferences were not consistently identified or addressed in assessment and planning documentation. Some staff indicated they employ open communication with consumers and displayed a knowledge of consumer preferences despite this. It was noted that two staff interviewed indicated that they had not read consumer care plans.

At the time of assessment, the service demonstrated a commitment to continuous improvement in relation to this standard and explained various processes underway to achieve compliance of this requirement.

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| Requirement 2(3)(c) | HCP  | 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.*

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| Requirement 2(3)(d) | HCP  | Not 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.*

Findings

The service did not demonstrate that outcomes of assessments and planning are subsequently documented in consumer care plans. Consumers and representatives are provided with copies of their care plans, however from a sample of reviewed care plans it was noted they did not reflect current consumer needs or include enough information to guide staff practice. For example:

* A sample of care plans did not provide details of service delivery, including allocated time and duration of services.
* Some consumers identified as being at risk of falls had care plans that did not document individualised falls and injury prevention strategies to guide staff practice. These care plans documented management strategies in a generalised way only.
* Some consumers identified as having high impact and high prevalence risks in their care plan did not have accompanying documented strategies to guide staff in managing consumer risks.
* Two consumers did not know if they have a care plan and could not access it. One consumer said they had not received a copy of their care plan since commencing engaging services in early December 2021.

The assessment team found that while the outcomes of assessment and planning was not consistently documented in consumers care plans, during interviews with staff it was apparent that consumers where frequently consulted and engaged in relation to the provision of their services.

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| Requirement 2(3)(e) | HCP  | 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

### 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 certain risks associated with the care of some individual consumers. Several consumer care plans were reviewed in detail with supporting interviews from staff and relevant consumers.

Some consumers at risk of falls and related injuries, diabetes and related health episodes, urinary tract infections, and behavioural episodes linked to cognitive decline did not have personalised care plans detailing clinical guidance for service staff to follow.

Interviews with service staff identified that while staff can describe the strategies they employ to manage the personal and clinical requirements of each consumer, they had not received training for all types of episodic health risks, hypoglycaemia being one of relevance given a consumer receiving services is at risk.

Majority of interviewed consumers considered that they felt the personal and clinical care they received felt safe and they are aware they have access to health care professionals when the need arises.

Care planning documents demonstrated that deterioration or changes in consumer’s conditions are responded to in a timely manner. Information about the consumer’s condition, needs and preferences is communicated within the service, and with others where responsibility for care is shared. The service has systems and processes to maintain infection control and minimise the risk of COVID-19.

The Quality Standard for the HCP is assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

**Assessment of Standard 3 Requirements**

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| --- | --- | --- |
| Requirement 3(3)(a) | HCP  | 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.*

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| Requirement 3(3)(b) | HCP  | Not Compliant |

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

Findings

The service did not demonstrate how it effectively manages high impact or high prevalence risks associated with the care of each consumer. Detailed guidance and information was not reflected in some of the sampled consumers care planning documentation at the time of assessment. For example:

* One consumer experiences hypoglycaemic episodes related to diabetes. This health information was recorded, however supporting documentation to guide staff in the management of this condition was not. This consumer indicated they had not been approached by the service to discuss how best to manage a hypoglycaemic episode should it occur. When interviewed, staff were unable to describe how they would manage hypoglycaemic episodes if they occurred and were not aware that the consumer had a history of hypoglycaemic comas. Staff advised that they not received training or information about diabetes or the risks associated with the condition such as hypoglycaemic episodes.
* One consumer experiences frequent urinary tract infections and subsequent secondary health episodes that at times, require admission to hospital. The service displayed evidence of assessment and planning in relation to the primary condition (urinary tract infections) but not the secondary health episodes known to be linked to it.
* More than one consumer with recognised cognitive decline linked to a diagnosis of dementia had care plans in place that did not evidence individualised behavioural assessments or strategies to guide staff in managing and minimising associated risks.
* The assessment and planning documentation of more than one consumer identified as being at risk of falls displayed generalisation rather than individualisation. The documents reviewed did not evidence ways for staff to recognise and reduce risk to consumers. One consumer at risk of falls had an incomplete assessment recorded.
* The assessment team reviewed the service incident register and identified that a consumer fall from 2021 was not documented or considered in the service’s clinical governance reporting processes.

The service has systems and processes in place to identify high impact and high prevalence risks however the evidence provided did not demonstrate how the identified risks are mitigated and managed.

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

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

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| --- | --- | --- |
| Requirement 3(3)(d) | HCP  | 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.*

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| Requirement 3(3)(e) | HCP  | 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.*

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| Requirement 3(3)(f) | HCP  | Compliant |

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

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

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

The service demonstrated supports for consumers in their daily living are provided safely with a range of options to enable consumer independence.

Majority of consumers and representatives interviewed described in various ways how they are provided with services that are important for their health and well-being, and that they are enabled to do the things they like.

Consumers advised they are supported to undertake a range of lifestyle activities of interest to them. They described how they are assisted in participating within the community and how the service helps them stay connected with the people.

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 HCP is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | HCP  | 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.*

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

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

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

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

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| Requirement 4(3)(e) | HCP  | Compliant |

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

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

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

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

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

# STANDARD 5 Organisation’s service environment

#  HCP Not Applicable

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

The service does not have a location where consumers attend. This Standard does not apply and has not been assessed as part of the Quality Audit.

## Assessment of Standard 5 Requirements

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| --- | --- | --- |
| Requirement 5(3)(a) | HCP  | Not Applicable |

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

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| --- | --- | --- |
| Requirement 5(3)(b) | HCP  | Not Applicable |

*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  | Not Applicable |

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

# STANDARD 6 Feedback and complaints

#  HCP 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 Assessment Team interviewed consumers, reviewed the services complaints register, analysed complaints trends and examined staff members understanding of the requirements under this Standard.

Overall, sampled consumers and their representatives described ways that they felt encouraged to give feedback and make complaints to the service. They displayed confidence that appropriate action is taken by the service when matters are raised. Some consumers explained that previous complaints resulted in the service issuing apologies and making improvements.

* The service has processes in place that govern consumer feedback and complaints. A review of complaint systems evidenced the application of open disclosure principles. When interviewed, staff demonstrated an understanding of compliant feedback management processes.

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

## Assessment of Standard 6 Requirements

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

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

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| --- | --- | --- |
| Requirement 6(3)(b) | HCP  | 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 |

*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 |

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

# STANDARD 7 Human resources

#  HCP Compliant

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

The assessment team interviewed consumers, spoke with service staff, and reviewed a range of documentation in relation to this standard.

All consumers interviewed reported they felt service staff are kind, capable and caring. It was described in different ways that consumers felt there was enough skilled staff available to deliver services safely in accordance with individual’s needs, goals and preferences.

The service has an ongoing recruitment process that includes brokerage arrangements to ensure workforce continuity.

The service has an orientation and induction training program in place and assesses, monitors and reviews the performance of each staff member periodically. The service has established processes to integrate consumers feedback into the monitoring and review of staff performance.

The Quality Standard for the HCP 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) | HCP  | 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.*

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

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

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

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

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

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

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

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

# STANDARD 8 Organisational governance

#  HCP 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

Of the consumers interviewed, all considered that the service is well run and indicated they felt the service partners with them to improve the delivery of their care.

* Consumers and their representatives advised they are invited to provide feedback in different ways including through customer surveys, direct engagement with service management (telephone or face to face), and with service staff during home visits. Consumers described in different ways how they participate in making decisions relating to their care and how the service accommodated changes promptly. It was reported that the service communicates regularly regarding any changes impacting care delivery. For example: staff absences due to COVID-19.
* It was evidenced that the service has policies and procedures in place to support consumers self-determination, including consumer choice and dignity framework. Reviewed documentation evidenced that the service is equipped to identify and respond to consumer abuse and neglect and has embedded practices to appropriately respond to incidents of this nature.
* Service management could explain and demonstrate in various ways how open communication was maintained with the company board, including the assessment, prioritisation, and escalation of serious incidents.
* At the time of assessment, it was demonstrated that the clinical governance framework of the service was in the final stages of significant review. A suite of compliant policy documents was evidenced in draft for board approval and implementation.

The Quality Standard for the HCP is assessed as compliant as five of the five specific requirements have been assessed as compliant.

## Assessment of Standard 8 Requirements

|  |  |  |
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| Requirement 8(3)(a) | HCP  | 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 |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(c) | HCP  | Compliant  |

*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  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | HCP  | 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.

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| Requirement 2(3)(a) | HCP  | Not 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.*

|  |  |  |
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| Requirement 2(3)(b) | HCP  | 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.*

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| Requirement 2(3)(d) | HCP  | Not 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.*

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| Requirement 3(3)(b) | HCP  | Not Compliant |

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

* Review and improve service framework relevant to identifying, assessing, and managing high impact and high prevalence consumer risks; including but not limited to:
	+ Diabetes management, falls management, behavioural management due to cognitive decline, and the management of urinary tract infections.
* Refine clinical assessments and care planning. Include personalised strategies to reduce risk and impact for relevant consumers.
* Review staff training and support; provide clinical guidance in all relevant areas of consumer service delivery
* Review and implement improvements to incident management protocols to ensure contemporary incident reporting