Gippsland Care Services

Performance Report

78 Albert Street   
WARRAGUL VIC 3820  
Phone number: 0429 650 109

**Commission ID:** 301056

**Provider name:** Gippsland Care Services Pty Ltd

**Quality Audit date:** 19 March 2021

**Date of Performance Report:** 20 May 2021

# 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 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** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | 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 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 Quality Audit; the Quality 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 Quality Audit report received 5 April 2021.

# 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.

## Summary of Assessment of Standard 1

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.

The organisation demonstrated consumers are treated with respect and dignity, can maintain their identity and make informed choices about care and services.

* Consumers and representatives interviewed said the consumer is treated with respect, their privacy is respected and they are enabled to participate in decisions about care needs.
* Staff interviewed demonstrated an understanding of the consumers and their care needs and spoke about consumers in a way that showed respect and an understanding of their personal circumstances and life journey.

The Assessment Team reviewed initial assessment and ongoing care planning processes that identified the cultural backgrounds and beliefs of the consumer. The organisation demonstrated how information is kept private, secure, safe and confidential. An information pack is provided to all consumers relating to information on home care packages.

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

## Assessment of Requirements

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

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

*Care and services are culturally safe.*

### I have reviewed the information provided and I find this requirement to be compliant.

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

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 1(3)(f) Compliant

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

### I have reviewed the information provided and I find this requirement to be compliant.

# STANDARD 2 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.

## Summary of Assessment of Standard 2

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.

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

For example:

* + - * Consumers and representatives interviewed confirmed they are part of the assessment process and can discuss changes to the delivery of their services as their needs change.
      * Consumers and representatives interviewed confirmed that they are informed about the outcomes of assessment and planning have been provided with a care plan.

The organisation demonstrated initial assessment processes take into consideration the consumer’s care needs, activities and interests. Information ascertained from assessments is populated in a consumer goal directed care plan. Consumer risk is documented in a ‘client risk management plan’ and is part of the care planning process. Care plans generally include consumers’ goals, and interventions to meet these goals. The consumer care plan is provided to the consumer at commencement and when reviewed. Reassessment and review of consumers is undertaken at least annually or as needed.

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

## Assessment of Requirements

### Requirement 2(3)(a) 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 2(3)(d) 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

# 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.

## Summary of Assessment of Standard 3

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.

Overall sampled consumers considered that they receive personal care and clinical care that is safe and right for them.

For example:

* + - * Consumers and representatives said care is safe and meets consumers’ needs.
      * Consumers and representatives said they feel safe and risks related to their care are effectively managed.
      * Representatives are satisfied consumer comfort and care at the end of their life is provided and they are given support.

Staff interviews and documentation reflect individualised care that is safe, effective and tailored to the specific needs and preferences of the consumer, demonstrated effective management of high impact or high prevalence risks associated with the care of each consumer are effective and confirmed that end of life needs are met in line with consumer wishes and comfort is maintained.

The organisation demonstrated that personal and clinical care of a consumer is individualised. This includes best practice management of skin integrity and pain to optimise health and well-being. Management of high impact or high prevalence risks associated with the care of each consumer was seen to be effective. Documentation indicates timely identification, monitoring and appropriate care when changes occur. The consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared. Referrals occur to health professionals and other services are done when needed and in a timely manner. The service demonstrated that it had outbreak management processes to ensure consumers and staff are safe and infection related risked are minimised.

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

### Assessment of 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

# 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.

## Summary of Assessment of Standard 4:

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.

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

For example:

* Consumers and representatives interviewed confirmed that consumers are supported by the service to do the things they like to do, with one representative saying, “Sandra loves to walk and the service has assisted this by providing a location monitor so that she is safe on her walks.”
* A consumer stated, ‘by modifying the bathroom there is more space for me to transfer on and off the shower stool to my wheelchair.’
* Staff interviewed described how they deliver services and supports to consumers that promotes their wellbeing. For example, care staff described how they assist a consumer to remain tranquil by involving them in activities such as making bracelets or baking.

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

## Assessment of 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 4(3)(b) Compliant

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

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 4(3)(e) Compliant

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

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

# 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.

## Summary of Assessment of Standard 6

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.

* Consumers and representatives said they understand how to give feedback and make complaints. They are comfortable raising concerns and provided examples of how matters raised have been resolved.
* Consumers and representatives are provided with information about feedback and complaints processes available to them, how complaints are managed and how confidentiality is respected.
* Staff described how they assist and encourage consumers to provide feedback and make complaints and how they are supported by the organisation to raise complaints.

Management advised training that is provided to staff on how to respond to and record complaints and ensure open disclosure. The organisation demonstrates they regularly seek input and feedback from consumers via feedback forms and surveys and how the findings from that feedback is used to improve services.

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

## Assessment of Requirements

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 6(3)(c) Compliant

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

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

# 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.

## Summary of Assessment of Standard 7

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.

* Consumers and representatives were satisfied that there were staff to deliver care and quality services.
* There are systems and processes to ensure there are enough staff to deliver safe, quality care and services. Management and staff explained, and documentation confirmed the organisation has processes in place for rostering staff for the service.
* The organisation provides online training modules that include hand hygiene, infection control to staff upon commencement as part of a new staff members induction. Staff have completed the Department of Health online COVID-19 training modules. Management advised all new staff are offered buddy shifts and toolbox training sessions are provided.
* Management monitors staff compliance including staff professional registrations and police checks. Staff performance monitoring and supervision processes are in place.

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

## Assessment of 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 7(3)(b) Compliant

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

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### Requirement 7(3)(d) Compliant

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

### I have reviewed the information provided and I find this requirement to be compliant.

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

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

### I have reviewed the information provided and I find this requirement to be compliant.

# 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.

## Summary of Assessment of Standard 8

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.

Consumers are encouraged to participate in the development, delivery and evaluation of care and services and in consultation processes within the service and organisation. There is an established process for communication of the Charter of Aged Care Rights and related information. Financial processes include budgeting and financial statements. The service has a continuous improvement plan developed from a range of sources including feedback and demonstrates a commitment to outcomes for consumers. There is a risk framework identifying high impact and high prevalence risks. There are processes to ensure action is taken and consumers are supported to live the best life they can. There is a clinical governance framework in place with reporting and monitoring occurring. Open disclosure occurs and is documented.

The organisation was to demonstrate that the organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery The service has processes in place to send service requests to subcontracted providers, and had identified the need and was well advanced in the process of implementing more comprehensive and detailed service agreements. It had a process for monitoring sub-contractors.

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

## Assessment of 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

The Assessment Team found that the organisation was unable to demonstrate that the organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. It identified that suitability of staff used by sub-contractors and their performance was not monitored and a comprehensive list of sub-contractors not maintained.

In its response the provider demonstrated that it had previously identified the need for and was well advanced in the process of implementing more comprehensive and detailed service agreements. It demonstrated that a contractor was recorded on its register, and that through its continuous log and register and care and support and planning process it monitors the performance of sub-contractors. The provider is encouraged to continue with these improvements and consolidate its monitoring of the performance of sub-contracted staff.

I find this requirement compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

### 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.*

### I have reviewed the information provided and I find this requirement to be compliant.

# 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.