Group Homes Australia

Performance Report

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**Commission ID:** 201312

**Provider name:** Group Homes Australia Pty Ltd

**Quality Audit date:** 5 May 2021 to 6 May 2021

**Date of Performance Report:** 2 August 2021

# 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 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) | Not Assessed |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Not Assessed** |
| **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 did not submit a response to the Quality Audit report received.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Group Homes Australia Pty Ltd, in relation to Group Home Australia, to be Compliant with all requirements in this Standard.

Consumers and representatives interviewed said they feel they are treated with dignity and respect at all times by staff. They confirmed staff know them as individuals and provide care and services that are respectful of that. All sampled consumer files contained initial assessments and care plans documents that detail needs, goals and preferences of consumers. Staff confirmed they receive training on culture and inclusion.

Processes in place include a range of policies and procedures, training for staff and the collection of social and background information on all consumers. This information is then incorporated in care plans as appropriate.

Consumers confirmed in various ways they are supported to exercise choice and decision making to enable them to live independently as possible. Documentation reviewed confirmed risk assessments and management strategies are in place to support consumers to be independent and exercise choice and decision making.

Consumer care documentation demonstrated consumers are given information about privacy and confidentiality through their service agreement and information pack. All consumers and/or their representatives also sign consent for the release of information. All consumer files viewed contained service agreements with signed consent.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

*Care and services are culturally safe.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider 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.

## Assessment of Standard 2

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Group Homes Australia Pty Ltd, in relation to Group Home Australia, to be Compliant with all requirements in this Standard.

Overall sampled consumers confirmed that they feel like partners in the ongoing assessment and planning of their care and services. Consumers confirmed that the service discusses the outcome of assessment and planning with them and those they wish to include in their care. Consumers and representatives confirmed they have ready access to their care plan in their home folder.

Consumers and representatives interviewed confirmed that they are involved in and consulted regularly about care planning. Consumers and their representatives confirmed that care planning is based individual needs, goals and preferences and they are supported by the service to make decisions regarding care and services. Consumers confirmed that where they chose to have others responsible for their decision making, the service accommodated this.

Consumers and representatives confirmed that care and services are reviewed when their needs or circumstances change. Care planning and assessment documentation demonstrated that care and services are reviewed regularly and when circumstances or needs of a consumer change. Staff demonstrated the outcomes of assessment and care planning are used in the delivery of care and services for the sampled consumers.

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

## Assessment of Standard 2 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.

## Assessment of Standard 3

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Group Homes Australia Pty Ltd, in relation to Group Home Australia, to be Compliant with all requirements in this Standard.

Consumers and representatives interviewed were satisfied overall with care and services they are currently receiving. They said communication from the office works well, and coordinators regularly contact them about care and services. For those living in the group homes, all representatives were very satisfied with the care their loved one receives. Several representatives said the care workers are very dedicated to providing quality care and help their loved one maintain their health and wellbeing. They said staff provide services safely and confirmed current processes are in place to manage risks around COVID-19 in group homes and in the community.

Management confirmed care and services are delivered by trained care staff and services are monitored by coordination and clinical staff. Care staff report any changes in the consumer’s overall health and wellbeing and this is followed up by the coordinators and registered nurses are arranged as needed. Any incidents, changes in the consumer’s health or other significant events are noted in the relevant consumer’s file and followed up as appropriate.

Sampled files included individual preferences for consumers receiving personal or clinical care services, including preferred level of independence. Care documents included showering and dietary plans for those receiving personal care or assistance with meals, which inform services delivered by care staff. Where clinical care was provided assessments and notes regarding ongoing care were evidenced.

The service provider demonstrated there are systems in place to identify, document and respond to deterioration in a consumer. Policies and procedures are in place to support processes for staff. Referrals to other organisations or individuals were also noted to occur where circumstances required.

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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.

## Assessment of Standard 4

The Assessment Team assessed six of seven requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Group Homes Australia Pty Ltd, in relation to Group Home Australia, to be Compliant with all assessed requirements in this Standard.

Consumers interviewed confirmed that they are supported to keep in touch with people who are important to them. They said they felt supported to live their life the way they wish and had their preferences considered. Consumers said the staff know them very well and what they like and dislike. Consumer care documentation reviewed identified consumers have their needs, goals and preferences assessed and care and services are tailored to these.

The service provider demonstrated the systems in place support each consumer regarding their emotional, spiritual and psychological needs and overall wellbeing through assessment and care planning processes. Sampled consumers and representatives advised they generally enjoy services and feel comfortable, happy and safe while receiving care.

Consumers and their representatives provided feedback on opportunities they have to build and maintain relationships and pursue activities of interest within the community. Consumers and their representatives were satisfied the service had good communication systems in place to ensure care staff knew when changes occurred with their care. For the consumers sampled, progress notes identified changes in condition, needs and preferences of individual consumers.

Referrals are made to external providers for services and the provision of equipment when needed. All consumers and their representatives said they have access to a range of various services which meets their needs.

Several sampled consumers their representatives advised they had received a range of equipment through their package to assist their mobility and were satisfied with the quality and choice of equipment. Assessment and care planning documentation sighted for sampled consumers identified where equipment was provided in the home. Progress notes sighted also included referrals to OTs for assessments and home modification services where required.

The Quality Standard is assessed as Compliant as six 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider 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.

## Assessment of Standard 6

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Group Homes Australia Pty Ltd, in relation to Group Home Australia, to be Compliant with all requirements in this Standard.

Consumers and representatives interviewed reported they know how to provide feedback or make a complaint and felt comfortable in doing so. Methods of providing feedback are discussed when the consumer begins with the service, during family case conferences and in the six-monthly digital survey.

Information on how to make internal and external complaints and access to advocates is documented in the resident handbook and there are advocacy policies in place to ensure advocates have consent to engage on consumer’s behalf.

The service has documented processes covering complaints mechanisms and management of complaints. Information on internal and external mechanisms and advocacy is provided to consumers when they begin with the service.

Management and staff were able to describe how they respond to any complaints, which are maintained on a register, and how these were used to improve the quality of care and services for individuals across the service. An open disclosure policy is used and it was demonstrated that complaints are actioned appropriately and in a timely manner.

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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.

## Assessment of Standard 7

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Group Homes Australia Pty Ltd, in relation to Group Home Australia, to be Compliant with all requirements in this Standard.

Overall sampled consumers indicated that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. Consumers and representatives spoke positively about the standard of care and support provided to them by staff. Consumers confirmed there were sufficient numbers of skilled staff to meet their care and service needs.

The service demonstrated it has a defined structure to manage recruitment and to ensure suitability of staff in providing consumers’ care and service needs. Staff receive orientation to the service. Staff said they are very supported in their work and receive ongoing education across the Standards.

The service has systems to monitor staffing to assist in ensuring appropriate care and services are delivered. This includes undertaking staff appraisals and monitoring of staff education including mandatory education.

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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.

## Assessment of Standard 8

All consumers and their representatives interviewed stated they thought the service was well run and that communication with the office was effective and efficient. They said they are happy to provide feedback and ask questions. They said they are engaged in the development, delivery and evaluation of consumers care and services. Management and staff confirmed engagement methods including family conferences, surveys and direct face to face meetings. Senior staff are regularly on site to engage with consumers about their service delivery needs.

The organisation has governance structures in place to ensure accountability of safe and quality care. The service has policies and procedures in place to support the governing body and staff to deliver safe care and evidence of practice was identified through quality meetings and continuous improvement actions.

The organisation has effective governance systems in relation to information management, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and compliance.

The service has a risk management framework in place to ensure risks are identified and effectively managed to minimise risks to consumer health and well-being. Staff could describe risk management processes which include incident and hazard reporting. Sampled incident and care documentation confirmed effective incident management systems are in place to manage risks to consumers.

The organisation has a detailed clinical governance framework and effective risk management processes in place including for the COVID-19 pandemic.

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.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider this requirement to be 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.*

Based on the information reviewed I consider 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*
4. *managing and preventing incidents, including the use of an incident management system.*

Based on the information reviewed I consider 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.*

Based on the information reviewed I consider 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.