Knox City Council

Performance Report

511 Burwood Highway   
WANTIRNA SOUTH VIC 3152  
Phone number: 03 9298 8302

**Commission ID:** 300758

**Provider name:** Knox City Council

**Quality Audit date:** 20 January 2022 to 25 January 2022

**Date of Performance Report:** 2 March 2022

# Performance report prepared by

M Murray, 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

**CHSP:**

* Allied Health and Therapy Services, 4-B5TNIQX, 511 Burwood Highway, WANTIRNA SOUTH VIC 3152
* Home Maintenance, 4-B5UVZJB, 511 Burwood Highway, WANTIRNA SOUTH VIC 3152
* Home Modifications, 4-B5UVZNU, 511 Burwood Highway, WANTIRNA SOUTH VIC 3152
* Meals, 4-B5UVZRB, 511 Burwood Highway, WANTIRNA SOUTH VIC 3152

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | CHSP | Compliant | | |
| Requirement 1(3)(a) | | CHSP | | | Compliant |
| Requirement 1(3)(b) | | CHSP | | | Compliant |
| Requirement 1(3)(c) | | CHSP | | | Compliant |
| Requirement 1(3)(d) | | CHSP | | | Compliant |
| Requirement 1(3)(e) | | CHSP | | | Compliant |
| Requirement 1(3)(f) | | CHSP | | | Compliant |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | CHSP | Compliant | | |
| Requirement 2(3)(a) | CHSP | | Compliant | |
| Requirement 2(3)(b) | CHSP | | Not Applicable | |
| Requirement 2(3)(c) | CHSP | | Compliant | |
| Requirement 2(3)(d) | CHSP | | Compliant | |
| Requirement 2(3)(e) | CHSP | | Compliant | |
| Standard 3 Personal care and clinical care | | | CHSP | Compliant | | |
| Requirement 3(3)(a) | | CHSP | | | Compliant |
| Requirement 3(3)(b) | | CHSP | | | Compliant |
| Requirement 3(3)(c) | | CHSP | | | Not Applicable |
| Requirement 3(3)(d) | | CHSP | | | Compliant |
| Requirement 3(3)(e) | | CHSP | | | Compliant |
| Requirement 3(3)(f) | | CHSP | | | Compliant |
| Requirement 3(3)(g) | | CHSP | | | Compliant |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Standard 4 Services and supports for daily living | | | | |
|  | | CHSP | | Compliant |
| Requirement 4(3)(a) | CHSP | | Compliant |
| Requirement 4(3)(b) | CHSP | | Compliant |
| Requirement 4(3)(c) | CHSP | | Compliant |
| Requirement 4(3)(d) | CHSP | | Compliant |
| Requirement 4(3)(e) | CHSP | | Compliant |
| Requirement 4(3)(f) | CHSP | | Compliant |
| Requirement 4(3)(g) | CHSP | | Compliant |
|  | |  |  | |
| Standard 5 Organisation’s service environment | | | Not Assessed | |
|  | |  |  | |
| Standard 6 Feedback and complaints | | CHSP | Compliant | |
| Requirement 6(3)(a) | CHSP | | Compliant |
| Requirement 6(3)(b) | CHSP | | Compliant |
| Requirement 6(3)(c) | CHSP | | Compliant |
| Requirement 6(3)(d) | CHSP | | Compliant |
| Standard 7 Human resources | | CHSP | | Compliant |
| Requirement 7(3)(a) | CHSP | | Compliant |
| Requirement 7(3)(b) | CHSP | | Compliant |
| Requirement 7(3)(c) | CHSP | | Compliant |
| Requirement 7(3)(d) | CHSP | | Compliant |
| Requirement 7(3)(e) | CHSP | | Compliant |
| Standard 8 Organisational governance | | CHSP | | Compliant |
| Requirement 8(3)(a) | CHSP | | Compliant |
| Requirement 8(3)(b) | CHSP | | Compliant |
| Requirement 8(3)(c) | CHSP | | Compliant |
| Requirement 8(3)(d) | CHSP | | Compliant |
| Requirement 8(3)(e) | CHSP | | 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 organisation does not have a service environment which consumers attend. Standard 5 has not been assessed.

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.

# STANDARD 1 Consumer dignity and choice

# CHSP 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

The Assessment Team interviewed sampled consumers and representatives and feedback provided evidence:

* The service has processes and staff practices to support consumers’ sense of self, independence, choices and inclusion.
* The service’s processes and staff practices support ongoing engagement and communication with consumers and representatives to understand each consumer’s background and history.
* All consumers and representatives interviewed advised care and services are provided in a respectful and dignified manner; and expressed confidence they could raise matters with management if required.
* Service delivery occurs in the way that is individualised to each consumer’s specific needs.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which evidence:

* Staff access individualised information pertinent to each consumer’s culture and identity to support consumers to live the life they choose.
* Staff demonstrated knowledge of communicating effectively with consumers and representatives and provided examples of responding to consumers’ choices in an appropriate manner.
* Management and staff demonstrate an understanding of supporting consumers’ decision making, including their right to take risks. Where a consumer wishes to take risks, their choices are respected. Where necessary, discussions occur between delegated staff and the consumer/representative to find solutions that will support the consumer’s choices and maintain their independence and dignity.
* Organisational systems and processes are embedded in a variety of documents to ensure staff deliver care and services in a way that supports each consumer’s individuality including risks they wish to take.

The Quality Standard for the Commonwealth home support programme service 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) |  |  |
|  | CHSP | Compliant |

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

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

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

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) |  |  |
|  | CHSP | 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.*

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

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

# STANDARD 2 Ongoing assessment and planning with consumers

# CHSP 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

The Assessment team interviewed sampled consumers and representatives; their feedback evidence:

* The service has processes and staff practices to develop plans of care in collaboration with the consumer and ensure these documents represent the service to be provided.
* Service processes and staff practice supports that information provided by consumers and representatives is incorporated into plans of care to support each consumer’s needs, goals and preferences for service delivery.
* Service processes and staff practice ensures that plans of care are reviewed and amended in accordance with the consumer’s changing needs.
* Staff practices support and align with the consumer’s wishes and staff know and understand what is important to each consumer.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which evidence:

* Assessments and planning incorporate delivery and monitoring of services provided by other subcontracted organisations or providers.
* The service processes and staff practice ensure staff and subcontracted service providers have access to relevant information to ensure their awareness and support required to support each consumer’s health and well-being.
* Management and staff demonstrate they work in partnership with the consumer and representatives. They demonstrated an understanding of development of individualised measures to support consumers goals and wishes.
* Organisational systems and processes are embedded in a variety of documents to ensure assessment and planning is effective and includes consideration of risks to the consumer’s health and well-being, and these processes support staff to deliver safe and effective care.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as all relevant requirements have been assessed as Compliant. One specific Requirement 2 3(b) is not relevant to the service delivery provided to consumers and therefore is not applicable.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) |  |  |
|  | CHSP | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) |  |  |
|  | CHSP | Not applicable |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(c) |  |  |
|  | CHSP | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(d) |  |  |
|  | CHSP | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(e) |  |  |
|  | CHSP | 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

# CHSP 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

The Assessment team interviewed sampled consumers and representatives; their feedback evidence:

* Service processes and staff practices ensure collaboration with consumers and representatives to ensure service delivery optimises each consumer’s health and well-being.
* Service processes and staff practice ensure relevant consumer information pertinent to service delivery is available for those who require this information.
* Service processes and staff practice ensure the escalation of reporting of changes in the consumer condition and/or recognition of signs of deterioration for review or referral for assessment by a health professional or government agency.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which evidence:

* The service processes incorporate best practice guidance from subcontractors and other health professionals to guide service delivery.
* Service processes and staff practices include the identification, reporting and management of high impact or high prevalence risks which includes review and/or referral to health professionals to inform service delivery where necessary.
* Management and staff demonstrate an understanding of supporting consumers’ goals and preferences, which are communicated as necessary to those who provide direct care.
* Service processes ensure equipment and procedures are in place to minimise infection related risks. The service has policies and procedures to ensure infection related risks in relation to outbreak management and food safey are recognised and understood. Processes ensure training and provision of suitable equipment minimise and prevent infections.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant all relevant requirements have been assessed as Compliant. Requirements 3 3(c) is not relevant to the service delivery and therefore are not applicable.

**Assessment of Standard 3 Requirements**

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(b) |  |  |
|  | CHSP | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(c) |  |  |
|  | CHSP | Not applicable |

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(e) |  |  |
|  | CHSP | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(f) |  |  |
|  | CHSP | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(g) |  |  |
|  | CHSP | 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

# CHSP 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 Assessment team interviewed sampled consumers and representatives; their feedback evidence:

* Consumers and representativies described getting the services they need and being referred to other organisations that support them to do the other things they want to do.
* Service processes and procedures incorporate effective communication and collaboration with consumers and representatives to identify the services and supports to enable consumers to maintain their independence, spiritual, emotional, social and human needs, equipment and supports to enhance the consumer’s quality of life.
* Service processes and staff practices demonstrate relevant information, including goals and preferences are understood. The services processes ensures consumers are referred to other providers/agencies to initiate additional, independent support, where required.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which demonstrate:

* Management and staff demonstrate the various ways and measures that are available both by the service and in the broader community, to enable consumers to continue engaging in the things they want to do and to promote consumers’ health and well-being.
* The service processes and staff practice ensures information about a consumer’s service/s is shared with their representative, where applicable, and internal and subcontracted providers.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(a) |  |  |
|  | CHSP | 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.*

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

*Services and supports for daily living promote each consumer’s emotional, spiritual*

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(c) |  |  |
|  | CHSP | 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) |  |  |
|  | CHSP | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(e) |  |  |
|  | CHSP | Compliant |

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

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

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

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

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

# STANDARD 6 Feedback and complaints

# CHSP 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 sampled consumers and representatives; their feedback evidence:

* Service processes and staff practice enables consumers and representatives to provide feedback which is actioned. Consumers and representatives were satisfied they can provide feedback and make complaints and indicated they felt safe raising any concerns
* Service processes incorporate an open disclosure approach and staff practices ensures appropriate actions are taken when concerns are raised. Consumer and representative feedback indicated service responsiveness to feedback and an open disclosure approach.
* Service processes incorporates a variety of avenues to seek feedback from consumers. Most consumers were aware of the avenues they could follow to make a complaint to the service, and said their concerns are addressed in a timely manner.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which demonstrate:

* The service processes ensure training and information is provided to management, staff, consumers an representatives and other providers regarding seeking consumer engagement and feedback for provision of services. Management and staff demonstrate an awareness of various actions they can take to ensure consumers are able to provide feedback or make a complaint.
* The service incorporates feedback received to identify areas of continuous improvement. Feedback and complaint information is investigated, reviewed and used to inform continuous improvement. Management discussed how the service supports and encourages consumer feedback and discussed improvements initiated from feedback and complaints.

The Quality Standard for the Commonwealth home support programme service 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) |  |  |
|  | CHSP | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(b) |  |  |
|  | CHSP | 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) |  |  |
|  | CHSP | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) |  |  |
|  | CHSP | Compliant |

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

# STANDARD 7 Human resources

# CHSP 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 sampled consumers and representatives; their feedback evidence:

* The service procedures and staff practices ensure the workforce including subcontractors provide safe respectful and quality care and services.
  + Consumers and representatives provided feedback that they get safe, quality care and services and consumers reported staff are skilled, kind, caring and respect their culture, individual identity and diversity.
  + Consumers and representatives expressed positive comments around staff duration of service, saying that staff have enough time to complete tasks and were not rushed.
  + Consumers and representatives interviewed indicated there are adequate staff available to deliver their care and services in accordance with their needs, goals and preferences.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which demonstrate:

* The service has an orientation and training program in place and human resource performance management framework in place to regularly assess, monitor and review the performance of each member of the workforce.
* The service has processes to ensure adequate staff available to deliver identified services. This includes subcontracted services for specific services. Rostering processes ensure established service and adhoc delivery of services aligns with consumers needs goals and preferences.
* The service regularly reviews the skills, qualifications and competencies of the workforce when there are changes in the consumer’s care and preferences to ensure there is adequate skilled staff to deliver safe, respectful and quality care and services. Management and staff interviewed described the service’s policies and procedures to ensure the delivery of services is monitored and delivered within the organisations expectations.

The Quality Standard for the Commonwealth home support programme service 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) |  |  |
|  | CHSP | 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.*

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

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

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

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

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

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

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

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

# STANDARD 8 Organisational governance

# CHSP 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

The Assessment team interviewed sampled consumers and representatives; their feedback evidence:

* The service processes and staff practice provide various ways for consumers, representatives and others to engage with the service.
  + Consumers, representatives and staff interviewed all expressed satisfaction with how the organisation is run.
  + Consumers are satisfied they receive the care and services to meet their needs and felt in general the service was well run.
  + Consumers have formal and informal input into the development, delivery and evaluation of care and services.

The Assessment Team interviewed management and staff; reviewed organisational information and consumer care documentation which evidence:

* The service’s governing body has established processes to show it is accountable for providing governance systems which deliver safe, inclusive and quality care and services to consumers, that meet the Standards. Management and staff interviewed and documentation reviewed evidence consumers are engaged in the development, evaluation and improvement of care and services.
* The service has effective organisation wide governance systems to monitor information systems, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and complaints. Governance processes identify specific roles and responsibilities, reporting and escalation of specific information to monitor the service’s performance against the Quality Standards. Documentation reviewed and interview with management evidence the governance systems are enacted and understood.
* The service has an effective risk management system for the management of high impact and high-prevalence risks associated with the care of consumers. The organisation has a clinical governance framework that includes policies on antimicrobial stewardship, minimising restraint and open disclosure. Staff and management were able to describe how these policies operate in practice to support the consumer to live the best life they can.

The Quality Standard for the Commonwealth home support programme service 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) |  |  |
|  | CHSP | Compliant |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(b) |  |  |
|  | CHSP | 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) |  |  |
|  | CHSP | 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.*

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|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) |  |  |
|  | CHSP | 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) |  |  |
|  | CHSP | 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

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.