Osboine Contemporary Aged Care

Performance Report

39 Newton Street   
BAYSWATER WA 6053  
Phone number: 08 9272 9227

**Commission ID:** 7274

**Provider name:** Alinea Inc.

**Site Audit date:** 14 November 2021 to 16 November 2021

**Date of Performance Report:** 8 February 2022

# Performance report prepared by

Therese Wilson, 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 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** | **Non-compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Non-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 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | 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 Commissioner’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 Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives
* the provider’s response to the Site Audit report received 7 December 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.

## Assessment of Standard 1

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

The Assessment Team have recommended Requirement (3)(b) not met. The Assessment Team were not satisfied the service demonstrated that care and services delivered to consumers recognises, respects, supports the cultural identity of each consumer, meets their needs and expectations and recognises their rights.

I have considered the Assessment Team’s findings; the evidence documented in the Assessment Team’s report and the provider’s response and have come to a different view from the Assessment Team and find the service Compliant with Requirement (3)(b). I have provided reasons for my findings in the specific Requirement below.

Overall, consumers interviewed confirmed they are treated with dignity and respect, can maintain their identity, make informed choices about the care they receive and take risks to live the life they choose to. Consumers confirmed staff respect their privacy and their dignity is preserved when personal care is delivered. Consumers confirmed staff know what is important to them, including their cultures, diversity and people that are important to them.

The service has systems to identify consumers’ individual needs, including cultural preferences. The service consults with consumers and their representatives they wish to be involved in their decision making and records all choices and decisions in the consumer file and care plan. The service is supported by the organisation’s wider policies and procedures to support consumers in continuing to live the best life they choose, and where risks are involved, the service has a process in place to identify these and support consumers to mitigate those risks.

Observations of staff practice show staff treating consumers with kindness and respect and maintaining consumers’ dignity and privacy while providing care and services. Consumer information was observed to be discussed and stored in a confidential manner. Observations show consumers are provided information in a variety of ways, including verbally, through group and individual meetings, newsletters, handbooks and noticeboards to ensure consumers have current information which they can understand.

Based on the evidence documented above, I find Alinea Inc., in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 1 Consumer dignity and choice.

## 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.*

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

*Care and services are culturally safe.*

The Assessment Team found the service did not demonstrate care and services provided are culturally safe and provided evidence that some consumers’ preferences for culturally safe care was not always met.

For Consumer A, the Assessment Team provided evidence the care plan did not have specific details about their preferences to have their doors open to enable them to see their partner who was in the adjoining room. The Assessment Team acknowledged staff talked about the consumer’s care in an appropriate way that showed understanding of their needs, goals and preferences for care delivery.

The Approved Provider’s response acknowledged the Assessment Team’s findings and included additional information on the consumers identified as not always receiving care and services according to their cultural preferences, along with information about Consumer A’s care and services. The Approved Provider’s response included evidence to show immediately following the visit, they provided an all staff communication to remind staff to provide care according to care plan preferences where consumers requested female or male only staff, provided additional training to staff relating to delivering care in line with cultural preferences and trialled specific care staff signage for consumers who expressed a preference.

In relation to Consumer A, the Approved Provider’s response included additional information to show Consumer A’s care plan had been updated to include specific instructions about care and service delivery.

The service provided evidence to show information provided to the Assessment Team by a consumer’s representative about aids for staff to deliver culturally safe care in line with the consumer’s preferences was contradicting to that the service had. The service provided evidence to show they put in place aids for the consumer to guide staff to deliver care and services in line with their needs, goals and preferences supporting their visual impairment.

In coming to my finding, I have considered the information and evidence presented by the Assessment Team and acknowledge the actions and improvements the approved provider has made since and after the Site Audit visit. Whilst the Assessment Team included evidence that five consumers may not always have care delivered by a member of staff of their preference, they also provided evidence to show this information is on care documentation, including handover sheets and within consumers’ care plans. Additionally, staff interviewed confirmed they knew the preferences of consumers and described ways they deliver care and services in this manner.

For the reasons detailed above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, Compliant with Requirement (3)(b) in Standard 1 Consumer dignity and choice.

### 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.*

### 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.*

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

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

# 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 Quality Standard is assessed as Compliant as five of the five specific Requirements have been assessed as Compliant.

The Assessment Team found overall, consumers sampled confirmed they feel like partners in the ongoing assessment and planning of their care and services. The following examples were provided by consumers and/or their representatives during interviews with the Assessment Team:

* staff involve consumers in discussions about their care and services to ensure it in line with their specific preferences;
* are involved in the development of consumers’ care plans, including discussions around advance care planning; and
* confirmed care and services are reviewed regularly in consultation with them and any changes communicated.

A range of clinical, personal and lifestyle assessments are completed with consumer’s on admission and reviewed on an ongoing basis. Information gathered from assessments is used to develop detailed care plans which incorporates each consumer’s needs, goals and preferences. A range of clinical risk assessment tools are used to complete various assessments, including for falls, skin integrity, pain and risk of pressure injury.

Clinical staff described the initial assessment and planning process completed in consultation with consumers on admission and confirmed this is regularly reviewed as changes in conditions are identified or incidents occur. Staff described personal and clinical care needs and preferences for sampled consumers which were in line with care files viewed and information provided to the Assessment Team by consumers and representatives.

Consumer care files sampled demonstrated assessment and planning processes are undertaken in consultation with consumers and/or their representatives and identify consumers’ current needs, goals and preferences. Consumers are engaged in conversations in relation to advance care planning and end of life planning on entry and an ongoing basis. Where consumers do not wish to discuss their preferences for advance care planning there is a process in place to follow this up.

Consumer care files sampled demonstrated where changes to consumers’ health and well-being are identified, reassessments are completed, care plans updated and referrals to Medical officers and/or allied health services are initiated.

Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 2 Ongoing assessment and planning with consumers.

## 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.*

### 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.*

### 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.*

### 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.*

### 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.*

# STANDARD 3 NON-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 Quality Standard is assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

The Assessment Team have recommended Requirement (3)(b) not met. The Assessment Team were not satisfied the service demonstrated effective management of high impact or high prevalence risks associated with the care of each consumer, specifically management of a consumer’s behaviours which impacted on other consumer.

I have considered the Assessment Team’s findings; the evidence documented in the Assessment Team’s report and the provider’s response and find the service Non-compliant with Requirement (3)(b). I have provided reasons for my finding in the specific Requirement below.

In relation to all other Requirements in this Standard, the Assessment Team found overall, sampled consumers consider they receive personal care and clinical care which is safe and right for them. Specific examples provided by consumers/representatives included:

* staff provide the care consumers need and provided examples of tailored care following incidents or changes in health condition;
* staff monitor consumers’ health status and needs, and preferences are effectively communicated between staff because they do not need to repeat information; and
* have access to medical officers and allied heath when consumers require it.

The service has initial and ongoing assessment and review processes to identify each consumer’s needs, goals and preferences. Individualised care plans are developed for each consumer to assist staff in delivery of care and services. Palliative care assessments are completed with consumers and/or representatives and identify consumers’ goals, strategies, spiritual, cultural and psychological aspects of care and planned personal and clinical care management strategies. Staff described clinical and personal care and supports for daily living for a consumer currently receiving palliative care, including the specific preferences requested.

Consumer files sampled demonstrated where a deterioration or change in a consumer’s function and capacity is identified, the condition is recognised and responded to in a timely manner, further charting initiated, monitoring processes implemented, and care plans updated to reflect care strategies in line with consumers’ current condition. Care staff described how they report changes to consumers’ condition and receive information relating to changes to consumers’ personal and clinical care requirements to registered staff and clinical staff described the procedures they follow when they identify deterioration in a consumer’s physical or mental health. Additionally, there are processes to ensure information is communicated within the organisation and with others where responsibility of care of the consumer is shared.

The service demonstrated appropriate infection control measures are in place, including in relation to outbreak management. The service’s practices promote appropriate antibiotic prescribing and use, and clinical staff described implementation and use of a recently introduced antimicrobial stewardship form.

Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with Requirements (3)(a), (3)(c), (3)(d), (3)(e), (3)(f) and (3)(g) in Standard 3 Personal care and clinical care.

### 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.*

### Requirement 3(3)(b) Non-compliant

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

The Assessment Team have recommended this Requirement as not met. The Assessment Team were not satisfied the service adequately demonstrated effective management of high impact or high prevalence risks, specifically in relation to behaviour management for two consumers (Consumers B and C). This was evidenced by the following:

Consumer B

* Recommended strategies to manage Consumer B’s behaviours identified following an assessment by Dementia Support Australia on 13 September 2021 have not been included in their care plan to guide staff.
* While the Assessment Team found Consumer B’s pain charting had been completed, they noted it had not been completed accurately.
* Behaviour charting completed shows behaviour management strategies used by staff are not always effective.

Consumer C

* Documented strategies to manage Consumer C’s verbal behaviour are not always effective. The service was unable to demonstrate strategies to manage Consumer B’s behaviour have been reviewed following incidents of verbal behaviour.
* Four consumers described the negative impact Consumer C’s verbal behaviours has on their quality of life, including one consumer having to move to a different room in the service.
* The Assessment Team observed Consumer C to be constantly screaming out during the Site Audit visit.

The Approved Provider submitted a response to the Assessment Teams report acknowledging the findings of the Assessment Team have provided them with an opportunity the review their practices and identify what education needs are required as a result. The Approved Provider included a plan for continuous improvement with actions to address deficits and make improvements to the management of high impact or high prevalence risks associated with consumer care. The Approved Provider summitted the following information and evidence relevant to my finding:

* The medical officer had reviewed Consumer B in relation to their behaviours and the service are now actioning increased pain relief and four hourly pain assessments to capture any improvements. Clinical staff have been encouraged to complete pain assessments when verbal behaviours are identified.
* A referral has been made for Consumer B to Dementia Support Australia for behaviour management assessment and support. At the time of the Approved Provider’s response the review was still pending.
* A review of Consumer B’s care plan has been undertaken and information regarding strategies to manage behaviours updated, including preferences for television and instructions to guide staff.
* In relation to Consumer C, the Approved Provider has undertaken a review and analysis of Consumer C’s verbal behaviour incidents and developed an action plan including; education and training for staff around behaviour management, encouraging clinical staff to complete Abbey Pain Scale when behaviours displayed and medical to review analgesia medications for effectiveness.

In coming to my finding, I have considered the information and evidence presented by the Assessment Team and acknowledge the actions and improvements the Approved Provider has made since and after the Site Audit visit to address deficits identified in the Assessment Team’s report. However, I find at the time of the Site Audit, high impact or high prevalence risks, specifically in relation to behaviour management for Consumers B and C were not effectively managed. I have considered that while behaviour management strategies were in place, these were noted to not be consistently effective, and for Consumer B, strategies had not been reviewed following incidents of verbal behaviours. In relation to Consumer B, I have also considered that while the consumer had been reviewed by specialist services in relation to behaviour management, recommended strategies had not been incorporated into the care plan to ensure provision of safe and effective care and services. Furthermore, I have considered feedback from four consumers who described impacts to their quality of life as a result of Consumer C’s ongoing verbal behaviours.

For the reasons detailed above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, Non-compliant with Requirement (3)(b) in Standard 3 Personal care and clinical care.

### 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.*

### 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.*

### 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.*

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

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

### 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.*

# STANDARD 4 COMPLIANT Services and supports 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 Quality Standard is assessed as Compliant as seven of the seven specific Requirements have been assessed as Compliant.

The Assessment Team found overall, sampled consumers considered that they get the services and supports for daily living that are important for their health and well-being and enable them to do the things they want to do. The following examples were provided by consumers during interviews with the Assessment Team:

* confirmed they are supported to do the things of interest to them, including individual activities where they choose;
* are encouraged to maintain relationships and participate in the community within and outside the service; and
* confirmed information about their needs, goals and preferences is communicated appropriately and they are referred to other providers of care appropriately and in a timely manner.

The service has an effective system to identify and provide social activities and engagement to consumers which are appropriate and in line with consumer preferences. The service reviews the activity schedule regularly, includes activities of interest to consumers and reflects consumers’ diversity, needs and preferences. Consumers are referred to external service providers when required.

Consumers’ care planning documentation viewed showed consumers’ needs, goals and preferences, including what is important to them and the things that are of interest to them was documented, communicated to staff and where appropriate other providers of care and informs how services are provided.

Staff interviewed described what is important to consumers, their needs and preferences. Staff provided examples of how they assist and support consumers to do the things they like and participate in the community, as well as provide emotional and psychological support when required.

Consumers confirmed they are satisfied with the quality and variety of meals and are suitable to their preferences and needs. Documentation viewed showed the service has records of consumers’ dietary needs and preferences accessible to staff preparing and delivering meals and drinks.

## Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 4 Services and supports for daily living.

## 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.*

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

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

### 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.*

### 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.*

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

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

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

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

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

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

# STANDARD 5 COMPLIANT Organisation’s service environment

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 5

The Quality Standard is assessed as Compliant as three of the three specific Requirements have been assessed as Compliant.

Consumers interviewed confirmed they feel safe living at the service and have been supported to personalise their rooms with items of importance to them. Consumers confirmed they are satisfied the service environment and equipment are clean and kept well maintained. Five consumers, however, raised concerns about being disturbed at night due to shouting from one consumer.

Observations confirmed consumers are able to move freely throughout the service both indoors and outdoors with navigational aids to assist them doing so. The service appeared clean and well maintained with appropriate furnishings throughout the service to enhance the environment.

The service has a schedule for routine and reactive maintenance programs in place, and an external contractor in place to complete all scheduled and reactive cleaning of the service. Staff demonstrated how they request or report additional cleaning or maintenance when required. The service has monitoring systems in place to ensure cleaning and maintenance systems are effective.

Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 5 Organisation’s service environment.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

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

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

### Requirement 5(3)(c) Compliant

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

# 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 Quality Standard is assessed as Compliant as four of the four specific Requirements have been assessed as Compliant.

The Assessment Team found overall, consumers sampled confirmed they feel safe and encouraged to provide feedback and make complaints. The following examples were provided by consumers and/or their representatives during interviews with the Assessment Team:

* consumers provided examples of how they can make complaints, including via feedback forms, in meetings or speaking to staff;
* consumers confirmed feedback, including complaints are responded to in a timely manner and actions are taken to resolve the issues; and
* consumers and representatives conformed when things go wrong open disclosure is used by the service.

The service demonstrated it has effective feedback and complaints systems and a register is maintain which records complaints to identify trends and areas for improvement. The complaints register shows the nature of the complaint, actions taken to resolve the issue and any consultation with the consumer. Documentation viewed showed feedback and complaints are reviewed as part of the service’s monthly analysis that is prepared and sent to the Board.

Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 6 Feedback and complaints.

## 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.*

### 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.*

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

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

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

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

# 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 Quality Standard is assessed as Compliant as five of the five specific Requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers received quality care and services from staff who are knowledgeable, capable and caring and where consumer’s provide feedback around staff performance, this is addressed by the service in a timely manner.

The service demonstrated it has systems to recruit appropriately qualified and skilled staff and the workforce is provided training and information to enable staff to perform their roles. The service has planned rostered and allocations for suitably skilled staff based on the needs of consumers, and a process to fill vacant shifts when required.

The service demonstrated it has processes for assessment, monitoring and regular review of performance of each member of the workforce. Where issues in staff performance are identified through incident management, feedback or observation, staff are performance managed. The service provides additional staff training where needs are identified and has an annual training program in place.

Staff interviewed confirmed they are provided training regularly. Staff confirmed they have sufficient time and information to perform their roles, are aware of their responsibilities and can provide feedback in various ways about performance if they identify any issues.

The Assessment Team observed staff interactions with consumers and their representatives was kind, caring and respectful.

Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 7 Human resources.

## 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.*

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

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.9-*

### 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.*

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

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

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

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

# 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

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

Overall, sampled consumers considered that the organisation is well run, and they can partner in the development, delivery and evaluation of care and services. Consumers interviewed confirmed they are consulted about their own care and services. Consumers advised their views are sought about the service in various ways, including feedback and during meetings and where complaints are made they are actioned to improve services.

The service is supported by the wider organisation’s governance systems and the oversight of a Board who is accountable for the delivery of safe and quality care and services. The service demonstrated they effectively implement the organisation’s governance systems, including information management, continuous improvement, feedback and complaints, financial governance, workforce governance and regulatory compliance and meets reporting timeframes.

The service has effective risk management systems to identify and respond to high impact or high prevalence risks associated with consumer care and a process for the ongoing monitoring of those risks. Training is provided to staff to identify and respond to the abuse and neglect of consumers. The service demonstrated that it has an effective incident management system and a register is maintained for incidents required to be reported.

The service has effectively implemented a clinical governance framework with policies and procedures to guide antimicrobial stewardship, open disclosure and the minimisation of restraint. Staff and management interviewed were able to describe the policies and confirmed they had access to relevant guidelines.

Based on the evidence documented above, I find Alinea Inc, in relation to Osboine Contemporary Aged Care, to be Compliant with all Requirements in Standard 8 Organisational governance.

## 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.*

### 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.*

### 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.*

### 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.*

### 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.*

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

* **In relation to Standard 3 Requirement (3)(b):**
  + Ensure effective strategies are in place to manage behaviours, including regular review to ensure each consumer receives safe and effective care and services and the behaviours of others do not affect the health and wellbeing of other consumers.