Ozcare - Brisbane North

Performance Report

113 Kittyhawk Drive  
Chermside QLD 4032   
Phone number: 07 3624 0529

ID: 700104

Name: Ozcare – Brisbane North

Quality Audit **date:** 17 November 2021 to 18 November 2021

**Date of Performance Report:** 21 January 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

**Home Care:**

* Ozcare Home Care Packages â€“ Brisbane North Region, 23023, 113 Kittyhawk Drive, CHERMSIDE QLD 4032

**CHSP:**

* CHSP - Allied Health and Therapy Services, 4-23SFYVH, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CHSP - Nursing, 4-22DPMEC, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CRCS - Centre-based Respite, 4-22DPMEV, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CRCS - Cottage Respite, 4-22DPMFE, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CRCS - Flexible Respite, 4-22DN6SS, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CHSP - Domestic Assistance, 4-22DN6UP, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CHSP - Personal Care, 4-22DN72S, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CHSP - Social Support - Individual, 4-23SFYXY, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CHSP - Specialised Support Services, 4-23SFZ19, 113 Kittyhawk Drive, CHERMSIDE QLD 4032
* CHSP - Assistance with Care and Housing, 4-22DPMFX, 113 Kittyhawk Drive, CHERMSIDE QLD 4032

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
| Requirement 1(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | HCP | Non-Compliant | | |
|  | | | CHSP | Non-Compliant | | |
| Requirement 2(3)(a) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(b) | HCP | | Non-Compliant | |
|  | CHSP | | Non-Compliant | |
| Requirement 2(3)(c) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(d) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(e) | HCP | | Compliant | |
|  | CHSP | | Compliant | |

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| --- | --- | --- | --- | --- | --- | --- |
| Standard 3 Personal care and clinical care | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
| Requirement 3(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 3(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 3(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 3(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 3(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 3(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 3(3)(g) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
| Requirement 4(3)(a) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(b) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(c) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(d) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(e) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(f) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(g) | HCP | | Compliant | |
|  | CHSP | | Compliant | |

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| --- | --- | --- | --- | --- |
| Standard 5 Organisation’s service environment | | | | |
|  | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 5(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 5(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 5(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Standard 6 Feedback and complaints | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 6(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 6(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 6(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 6(3)(d) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Standard 7 Human resources | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 7(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(d) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(e) | HCP | | Compliant |
|  | CHSP | | Compliant |

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| --- | --- | --- | --- | --- |
| Standard 8 Organisational governance | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 8(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(d) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(e) | HCP | | Compliant |
|  | 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 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 Review the Quality Review report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the approved provider’s response to the Quality Review report received 23 December 2021.

# STANDARD 1 Consumer dignity and choice

# HCP Compliant 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 consumers/representatives and reviewed consumer experience interviews provided from consumers/representatives through on line surveys and telephone discussions through the Aged Care Quality and Safety Commission (the Commission). The feedback from consumers/representatives demonstrated the following:

* Consumers are satisfied that their interactions with staff and the way care and services are delivered are respectful and in line with their choices and that their privacy is upheld.
* The service has processes and staff practices to support the consumer’s sense of self, independence, choices and inclusion.
* The service’s processes and staff practice support ongoing engagement and communication with consumers/representatives to understand each consumer’s background and history.
* The majority of consumers/representatives advised care and services are provided in a respectful and dignified manner.
* Service delivery occurs in the way that is individualised to the consumer’s specific needs.

The Assessment Team interviewed management and staff, reviewed organisational information and consumer care documentation which confirmed:

* Staff access individualised information pertinent to each consumer’s culture and identity to support the consumer to live the life they choose.
* Staff demonstrated knowledge of communicating effectively with consumers/representatives and provided examples of responding to consumer’s choices.
* Management and staff demonstrated an understanding of supporting consumers’ decision making, including their right to take risks. Where a consumer wishes to take risks, consultation on any risk mitigation strategies occur and the choice of the consumer on how to proceed is respected.
* Organisational systems and processes and written protocols support staff to deliver care and services in a way that supports each consumer’s individuality including risks they wish to take.

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

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) | HCP | Compliant |
|  | CHSP | Compliant |

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | CHSP | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | CHSP | Compliant |

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

# STANDARD 2 Ongoing assessment and planning with consumers

# HCP Non-Compliant CHSP Non-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 sampled the experience of consumers, reviewing their care documentation in detail, asking consumers about how they are involved in care planning, and interviewing staff about how they use care documentation and review it on an ongoing basis.

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

For example:

* Consumers/representatives advised they are involved in the initial and ongoing care planning of the consumer’s care.
* Consumers/representatives advised they are informed about the outcomes of assessment and planning and have access to the consumer’s care plan if they wish.
* Consumers/representatives are satisfied others involved in supporting their health and wellbeing such as medical officers are appropriately informed had have timely input into care planning.
* Registered Nurses demonstrated an understanding of the assessment and care planning process and how the identification of the consumer’s goals, needs and preferences inform the care plan and delivery of care.
* Care staff demonstrated a shared understanding of consumers’ needs and identified risks; and refer to the individual care plans, or speak to the care manager if they require more information.
* The organisation has documented business rules available to guide staff practice regarding assessment and care planning for consumers.

The service does not comply with Standard 2 Requirement 3(b) evidence supporting this finding is summarised below. At the time of the Quality Review consumers were not consistently asked if they wished to engage in advance care planning and end of life planning.

The Quality Standard for the Home care packages service is assessed as Non-Compliant as one of the five specific requirements has been assessed as Non-Compliant.

The Quality Standard for the Commonwealth home support programme service is assessed as Non-Compliant as one of the five specific requirements has been assessed as Non-Compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP | Compliant |
|  | 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) | HCP | Not Compliant |
|  | CHSP | Not Compliant |

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

The service demonstrated assessment and planning identifies and addresses consumers’ current needs, goals and preferences. However, the service was not able to demonstrate assessment and planning occurs in regard to advance care planning and end of life planning.

The Assessment Team found:

* The service was not able to demonstrate assessment and planning occurs in regard to advance care planning and end of life planning.
* Management and staff did not demonstrate a shared understanding of the need to ensure the consumer’s wishes for advanced care and end of life planning is consistently discussed and/or recorded from consumers with decision making capacity.
* Management and staff advised when a consumer’s health is deteriorating this is when these difficult conversations occur, and information is sought and recorded. Management acknowledged this information is not routinely discussed when a consumer enters the service or reviewed regularly.
* Consumers/representatives’ feedback demonstrated that this information is not consistently sought by the service. Some consumers/representatives explained to the Assessment Team, they have not had this discussion, however they have made their own arrangements and their family are aware.

The approved provider’s response accepts the evidence of the Assessment Team and outlines a number of strategies including to:

* Review and update admission and other tools to clearly guide staff to seek the advice of the consumer on their wish to undertake advance care and end of life planning.
* Undertake education with staff with planned refresher training in 2022.
* Undertake audits of consumers’ files within a set period to ascertain if information is captured in line with the revised tools and protocols.
* Monitor and report audit findings to the relevant business group for review / action.

Based on the evidence summarised above, while acknowledging the activities underway by the approved provider, at the time of the Quality Audit, the service did not comply with this Requirement.

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| --- | --- | --- |
| Requirement 2(3)(c) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | 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

# HCP Compliant 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

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

* Consumers/representatives advised consumers receive the care they need and have access to a medical officer or other health professional when they need it.
* Consumers/representatives gave various examples of how staff ensure the care provided to consumers was right for them, including regularly asking them about their care and the way it is delivered and involving them in discussions regarding the alternative care options.

Review of consumers’ care documentation identifies:

* The individual needs of consumers inform the provision of safe and effective personal and clinical care.
* The identification of any change in the consumer’s condition and/or health status is promptly identified and managed.
* Referrals to a range of health professionals, including physiotherapists, podiatrists, dieticians and others occur as required.
* Management and staff could describe how they ensure care is best practice and how information is shared both within the service and with others outside the service where appropriate.
* Staff demonstrated an understanding of precautions to prevent and control infections and the steps they could take to minimise the need for antibiotics.
* Staff could also identify high prevalence risks for consumers at the service and how incidents are used to inform changes in practice.

The Quality Standard for the Home care packages service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

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 3 Requirements**

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

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

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

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

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

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

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

# HCP Compliant 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

Overall, consumers/representatives interviewed by the Assessment Team considered the consumer is supported by the service to do the things they like to do, and their health, well-being and quality of life is supported through their engagement with the service.

Staff described how they support consumers to socialise or maintain personal relationships and are aware of people who are important to individual consumers. Staff explained the variety of ways they share information and are kept informed of the changing needs of consumers. Staff confirmed they have access to sufficient safe and well-maintained equipment and consumables to meet consumers’ needs.

Care documentation detailed the consumer’s life history, personal interests, cultural communication needs, religious beliefs and people important in their life. They demonstrated consumers are actively supported to pursue their interests within the service, through brokered services and the broader community through individual and group activities.

The Quality Standard for the Home care packages service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

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**

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| --- | --- | --- |
| Requirement 4(3)(a) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | CHSP | Compliant |

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

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

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

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

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

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

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

# STANDARD 5 Organisation’s service environment

# HCP Compliant CHSP Compliant

### 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 Assessment Team interviewed the consumer and/or their representative about their experience of the service environment. The Assessment Team also examined relevant documents.

* Consumers/representatives interviewed confirmed that consumers feel safe at the brokered service, and they can freely and safely navigate the service environment including when accessing indoor and outdoor areas. Consumers/representatives reported communal areas, shared furniture and equipment was clean, well maintained and met their needs.
* Management and staff from the brokered service described the features of the service that ensure consumers have a sense of belonging, enhance consumers’ independence, interaction and function; including for those with cognitive impairment. Staff described how they report hazards and maintenance requests to alert maintenance staff to attend to preventative and reactive repairs. Staff confirmed maintenance requests are responded to promptly and the cleaning regime follows COVID-19 protocols.
* The Assessment Team observed consumers using shared areas in groups and individually. The service environment was welcoming; and equipment was stored safely, it was clean, well maintained and appropriate to consumer needs.

The Quality Standard for the Home care packages service is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

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

## Assessment of Standard 5 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP | Compliant |
|  | CHSP | 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) | HCP | Compliant |
|  | CHSP | 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) | HCP | Compliant |
|  | CHSP | Compliant |

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

# STANDARD 6 Feedback and complaints

# HCP Compliant 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 service actively seeks feedback and has processes to ensure complaints are dealt with in a timely manner. Staff work with the complainant to resolve the issue and management use feedback and complaints to understand where improvements in their care and services can be delivered.

Examples and evidence of the service meeting this Requirement include:

* Sampled consumers/representatives interviewed explained the process to follow when raising a concern or providing feedback. Consumers/representatives explained management and staff are approachable with any concerns that they may have and were able to give examples of times they had raised issues and said these were resolved in a timely manner.
* Consumers/representatives have complaint information in their in-home folder and receive an information kit on commencement of services which contains the complaint policy. They receive a copy of the Aged Care Charter of Rights and have telephone contact numbers and forms to fill out if they wish.
* Complaints and feedback are monitored through meetings, generally logged in a complaints register, and any identified improvements are in the plan for continuous improvement.
* The organisation has business rules for open disclosure and this information is disseminated through staff forums. Management and staff responsible for the complaint’s management demonstrated their understanding of applying an open disclosure approach.
* A review of the complaints register generally demonstrates the collection of complaints/concerns and the actions taken by the service to address these.
* Complaints are followed up and the consumer/representative satisfaction with the outcome sought.
* Trends in complaints are reported on and monitored at local, regional and State meetings.

The Quality Standard for the Home care packages service is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

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) | HCP | Compliant |
|  | CHSP | Compliant |

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

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

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

# STANDARD 7 Human resources

# HCP Compliant 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

Overall, sampled consumers/representatives indicated that they get safe, quality care and services when required and consumers reported staff are kind, caring and respect their culture, identity and diversity.

The majority of consumers/representative’s feedback received said care and services are provided in a way that supports the consumer’s needs and preferences.

* Sampled consumers/representatives explained a preference to have consistent staff available who know the consumer’s needs and confirmed that this is discussed and respected.
* The majority of consumers/representatives expressed satisfaction with the staff who regularly provide care and services to the consumers.

The organisation has business rules for workforce management and governance. The service has a skilled and qualified workforce, sufficient to deliver and manage safe, respectful, and quality care and service, which meet the Quality Standards.

* Recruitment and monitoring processes occur to ensure staff have the knowledge and skills to perform their roles and meet their responsibilities. The service ensures orientation, induction, training and performance appraisals are planned and monitored.
* Organisational strategies ensure there are sufficient staff available to meet consumer needs.
* Management and delegated staff demonstrated how they plan service delivery in consultation with consumers/representatives.
* Management monitor staff performance and practices, feedback and incidents to identify and implement additional training.
* Staff understood their roles and responsibilities and described their education, competencies and appraisals from commencement and ongoing.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

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) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | CHSP | Compliant |

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

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

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

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

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

# STANDARD 8 Organisational governance

# HCP Compliant 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 service’s governing body has established systems to support the delivery of safe and quality care and services to consumers. Overall, consumers/representatives’ interviews and documentation confirmed consumers are engaged in the development, evaluation and improvement of care and services.

* A governance framework is in place and supports the governing body to maintain compliance with the Quality Standards.
* The governing body demonstrated a continuous improvement approach and outlined various activities that have improved the experiences of consumers.
* Delegations in place ensure clinical and other staff are aware of their accountabilities and responsibilities.
* Risk management is embedded into the way the service undertakes its activities and vulnerable consumers are monitored closely.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

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) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | 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.*

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

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.

* Establish processes to make discussions about advance care planning and end of life planning part of routine practice.
* Provide training to staff to support them to engage with all consumers in regard to the consumer’s future health care preferences in a culturally safe way.
* Monitor that care planning in this regard is tailored and captures the consumer’s personal values, preferences and beliefs.
* Ensure that the consumer’s choice in discussing advance care planning and end of life planning is noted, including when the option is declined.