UCWPA Ethnic Link Services SA

Performance Report

1 Charles Street   
WEST LAKES SA 5021  
Phone number: 08 8241 0201

**Commission ID:** 600032

**Provider name:** UCWPA Ethnic Link Services SA

**Quality Audit date:** 7 February 2022 to 9 February 2022

**Date of Performance Report:** 28 March 2022

# Performance report prepared by

C Athanasiou, 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:**

* CHSP - Social Support - Group, 4-23OWGLC, 1 Charles Street, WEST LAKES SA 5021
* CHSP - Social Support - Individual, 4-23OWGN9, 1 Charles Street, WEST LAKES SA 5021
* CHSP - Transport, 4-23OWGOV, 1 Charles Street, WEST LAKES SA 5021
* CHSP - Social Support - Individual, 4-23OWGN9, Northern Country - Uniting Church Community Centre, Crn. Ramsey Street & Wittwer Street, WHYALLA STUART SA 5608
* CHSP - Social Support - Group, 4-23OWGLC, Northern Country - Uniting Church Community Centre, Crn. Ramsey Street & Wittwer Street, WHYALLA STUART SA 5608
* CHSP - Transport, 4-23OWGOV, Northern Country - Uniting Church Community Centre, Crn. Ramsey Street & Wittwer Street, WHYALLA STUART SA 5608
* CHSP - Social Support - Group, 4-23OWGLC, Renmark Community Health Services, Ral Ral Avenue, RENMARK SA 5341
* CHSP - Social Support - Individual, 4-23OWGN9, Renmark Community Health Services, Ral Ral Avenue, RENMARK SA 5341
* CHSP - Transport, 4-23OWGOV, Renmark Community Health Services, Ral Ral Avenue, RENMARK SA 5341

# 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 | Not Compliant | | |
| Requirement 2(3)(a) |  | |  | |
|  | CHSP | | Not Compliant | |
| Requirement 2(3)(b) |  | |  | |
|  | CHSP | | Not Compliant | |
| 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 | Not Assessed | |
| Requirement 3(3)(a) |  | |  |
|  | CHSP | | Not Assessed |
| Requirement 3(3)(b) |  | |  |
|  | CHSP | | Not Assessed |
| Requirement 3(3)(c) |  | |  |
|  | CHSP | | Not Assessed |
| Requirement 3(3)(d) |  | |  |
|  | CHSP | | Not Assessed |
| Requirement 3(3)(e) |  | |  |
|  | CHSP | | Not Assessed |
| Requirement 3(3)(f) |  | |  |
|  | CHSP | | Not Assessed |
| Requirement 3(3)(g) |  | |  |
|  | CHSP | | Not Assessed |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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 | | Not Assessed |
| Standard 5 Organisation’s service environment | | | | |
|  | |  |  | |
|  | | CHSP | Compliant | |
| Requirement 5(3)(a) |  | |  |
|  | CHSP | | Compliant |
| Requirement 5(3)(b) |  | |  |
|  | CHSP | | Compliant |
| Requirement 5(3)(c) |  | |  |
|  | CHSP | | Compliant |
| 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 | | Not Assessed |

# 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 considered in developing this performance report:

* the Assessment Team’s report for the quality audit; informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.
* The Provider’s response to the quality audit report received 7 March 2022, including attachments 1: Revised Consumer Initial Assessment and 2: Revised Care Plan Template.

# 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

Consumers and representatives interviewed considered consumers are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. Consumers and representatives stated in different ways that they are a part of an inclusive culture that promotes choice and independence and respects the consumers’ privacy at all times.

Staff and management were able to demonstrate through interviews, observations and documents the ways in which the provider ensures they provide each of the requirements of Standard 1 – Consumer Dignity and choice.

The Quality Standards for the Commonwealth home programme service is assessed as Compliant as six of 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 Not 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

A review of the service documentation failed to demonstrate a complaint approach to the assessment, planning and consideration of risk to consumer’s health and wellbeing.

Care plans for consumers did not evidence outcomes of assessment and planning for consumers and did not inform the delivery of safe and effective care.

Where risks were identified for consumers, while staff could describe the risk to consumers and how they support consumers to manage those risks, service plans did not reflect sufficient information about risks and interventions or management strategies to guide staff practice.

The service demonstrated assessment and planning is based on ongoing partnership with the consumers and their chosen representatives and in consultation with other care professionals. Care plans are readily available to the consumer and all staff who provide care and services and are reviewed annually or as circumstances change.

The Quality Standard for the Commonwealth home support programme services are assessed as Non-compliant as two of the five specific requirements have been assessed as Non-compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) |  |  |
|  | CHSP | Not 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.*

Findings

Care plans for consumers did not evidence outcomes of assessment and planning for consumers and did not inform the delivery of safe and effective care.

The service did not demonstrate consumer assessment and care planning adequately assesses risks to health and well-being. The management of identified risks for certain consumers did not include mitigating strategies, including adequate guidance for staff to manage and reduce prospective impacts.

One consumer with a diagnosis of dementia and diabetes did not have a care plan that identified his diagnoses, identify risks associated with his dementia and diabetes or provide instructions to staff on how to deliver care.

The service plan of one consumer with Parkinson’s disease who received individual social support to attend weekly exercise classes identified that the consumer mobilises with a walking stick. Assessment and/or consideration of risk related to the consumers mobility had not been documented to inform safe delivery of services when providing transport to the consumer.

The service plan of one consumer stated she utilises a walker but did not document her mental health condition and associated risks, nor provide any instructions or strategies to staff on how to support the consumer, if her regular support worker was not available to assist the consumer.

Information about mobility, allergies and other relevant conditions collected on registration forms for consumers, who attend group sessions, is not included in service plans to inform the delivery of safe and effective care.

In response to the assessment teams report, as a continuous improvement action, assessment tools have been revised and implemented for new consumers to address some non-compliance under this standard. A plan for reviewing assessments for current consumers is scheduled to address some of the assessed non-compliance under this standard. For current consumers, it is recommended that reviews should occur as soon as practicable. Reviews should also occur when a change is identified for a consumer or in response to an incident, as appropriate.

It is noted that the service responded proactively to the assessment teams’ findings and planned prompt corrective action, however, at the time of the quality review, the service was assessed as being non-compliant with requirements under this standard.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) |  |  |
|  | 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.*

Findings

The service was not able to demonstrate that assessment and planning consistently identified and addressed the consumer’s current needs, goals and preferences, including cultural and/or dietary needs and preferences, and advance care planning if the consumer wishes.

Service plans reviewed noted the goals of consumers to be generic in nature, such as ‘to remain safe in their home with supports to enable them to maintain their independence’ and ‘to be involved with like-minded individuals in a group setting’. Service management confirmed this was the result of a standardised format for writing goals in the assessment and planning tool.

Service plans for consumers did not consistently demonstrate that assessment and planning identifies and addresses the consumers current cultural and/or individual needs and preferences to inform culturally safe services.

Documentation of 6 consumers included their country of birth, main spoken language, as well as each consumers’ requirement for an interpreter and identification with a special need group such as Culturally and Linguistically Diverse (CALD) or Aboriginal and Torres Strait Islander where applicable. However, the care planning documents did not describe the consumer’s background or adequately describe what is important to them such as culturally or individually specific needs and preferences to inform culturally safe services.

The service did not have in place a process to discuss advance care and end of life planning with consumers as part of the initial assessment process.

In response to the assessment teams report, as a continuous improvement action, the service advised care plans have been revised and new care plans developed and implemented to include consumers goals and preferences that are specifically tailored to the consumer, and individually focused alerts to include areas of risk that may impact the consumer or care being delivered.

In response to the assessment teams report, as a continuous improvement action, the service advised advance care and end of life planning has been addressed as part of a revised initial assessment process and through the provision of language specific information and resources on advance care directives provided to consumers during the face to face admission process.

It is noted that the service responded proactively to the assessment teams’ findings and planned prompt corrective action, however, at the time of the quality review, the service was assessed as being non-compliant with requirements under this standard.

|  |  |  |
| --- | --- | --- |
| 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 Not Assessed

### 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

Standard 3 was not assessed as the provider is not funded to provide personal and clinical, and this standard is not applicable

**Assessment of Standard 3 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(a) |  |  |
|  | CHSP | Not Assessed |

*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 | Not Assessed |

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

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

*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 | Not Assessed |

*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 | Not Assessed |

*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 | Not Assessed |

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(g) |  |  |
|  | CHSP | Not Assessed |

*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 service demonstrated that consumers receive safe and effective services and supports for daily living that optimises the consumer’s independence, health, well-being and quality of life. Services and supports for daily living provided by the service cover a wide range of options for consumers, should they choose, to support them to live as independently as possible, enjoy life and remain connected to their local community.

Feedback from consumers and representatives demonstrated that consumer’s get the service and supports that are important for their health, well-being, and that enable them to do things they want to do. Consumers confirm they are supported by the service to undertake a range of lifestyle activities of interest to them, participate in the broader community and maintain contact with people who are important to them. Consumers who receive meals said they are satisfied with the meals provided, and they meet their nutrition and hydration needs and preferences.

The Quality Standard for the Commonwealth home support programme services assessed as Compliant as six of the seven specific requirements have been assessed as compliant.

The Assessment Team did not assess the provider’s performance against Standard 4 Requirement (3)(g) as the service is not funded to provide equipment.

**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 and psychological well-being.*

|  |  |  |
| --- | --- | --- |
| 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 | Not Assessed |

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

# STANDARD 5 Organisation’s service environment

# 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 provider was able to demonstrate effective systems and processes are in place to ensure that service environments utilised for groups, furniture and equipment support consumer’s quality of life, independence, ability and enjoyment. Consumers said they feel welcome when they visit the service environments and that they feel safe and comfortable. Consumers who attended the group sessions said they feel a sense of belonging and that the environment supports them to be independent and to do the things they enjoy.

The Assessment Team observed the group session at the Multicultural Communities Council of SA INC to be welcoming, safe, clean and easy to access. Consumers were observed to be moving freely and safely, both indoors and outdoors. Staff describe systems and processes in place to ensure furniture, fittings and equipment are safe, clean, well maintained and suitable for consumers to use.

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

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

# 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 consumers interviewed consider that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken. Staff and management described how they support and assist consumers raise their concerns and provide feedback on services provided.

The provider was able to provide documented evidence of internal and external feedback and complaints processes and results from the consumer experience survey. Organisational policies and procedures were also in place. The provider was able to supply evidence of follow up and continuous improvement generated from the feedback and complaints.

The Quality Standard for the Commonwealth home support programme services are 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

Overall consumers consider they get the services they need, when they need them, from people who are knowledgeable, capable, caring and respectful of their identity, culture and diversity. The Assessment team were also able to observe this in action.

Staff confirmed that there are generally enough skilled and knowledgeable staff to provide services according to consumers’ needs and preferences, including in their spoken language. Staff confirm they are provided ongoing education opportunities, including orientation and on the job support for new staff.

Management demonstrated the service ensures staffing levels are sufficient and regularly monitored, to ensure delivery of services by linguistically skilled staff. They demonstrated recruitment and onboarding processes, ongoing mandatory and as required education opportunities and performance monitoring processes.

The Quality Standard for the Commonwealth home support programme services are assessed as Complaint 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

Consumers and representatives interviewed felt the service is well run and communication is maintained through staff and the feedback process.

The organisation was able to demonstrate the governing body promotes a culture of safe, inclusive and quality services and is accountable for their delivery. Management described the organisations governance framework through the reporting and monitoring of key deliverable including consumer’s feedback, complaints and incidents.

The organisation was able to demonstrate established, documented and effective organisation-wide governance systems in relation to information management, continuous improvement, financial and workforce governance, regulatory compliance, feedback and complaints.

The organisation was able to demonstrate an established, documented and effective organisation risk management framework including monitoring, review and reporting in relation to consumer’s risks, identifying and responding to abuse of consumers, and supporting consumers to live the best life they can. The organisation demonstrated a framework related to preventing, reporting and managing incidents.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as four of the five specific requirements have been assessed as Compliant.

The service did not assess the provider’s performance against Standard 8 Requirement (3)(e) as the service is not funded to provide clinical care.

## 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.*

|  |  |  |
| --- | --- | --- |
| 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 | Not Assessed |

*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.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) |  |  |
|  | CHSP | Not 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 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.*