**Performance**

**Report**

**1800 951 822**

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| Name of service: | Accept |
| Service address: | 46 Tynte Street NORTH ADELAIDE SA 5006 |
| Commission ID: | 600575 |
| Home Service Provider: | Accept Caregroup Pty Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 17 November 2022 |
| Performance report date: | 8 December 2022 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Accept (**the service**) has been prepared by A.Grant, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

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 Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies any areas in which improvements must be made to ensure the Quality Standards are complied with.

# Services included in this assessment

**Home Care:**

* Accept Care Group Home Care Packages, 26395, 46 Tynte Street, NORTH ADELAIDE SA 5006

# Material relied on

The following information has been considered in preparing the performance report:

* The assessment team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff, consumers/representatives and others.

# Assessment summary for Home Care Packages (HCP)

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| Standard 1 Consumer dignity and choice | Not Applicable |
| **Standard 2** Ongoing assessment and planning with consumers | **Not applicable as not all requirements have been assessed** |
| **Standard 3** Personal care and clinical care | **Not applicable as not all requirements have been assessed** |
| **Standard 4** Services and supports for daily living | **Not Applicable** |
| **Standard 5** Organisation’s service environment | **Not Applicable** |
| **Standard 6** Feedback and complaints | **Not Applicable** |
| **Standard 7** Human resources | **Not Applicable** |
| **Standard 8** Organisational governance | **Not Applicable** |

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 2

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| Ongoing assessment and planning with consumers | | HCP |
| Requirement 2(3)(a) | 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. | **Compliant** |
| Requirement 2(3)(b) | 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. | **Not applicable** |
| Requirement 2(3)(c) | 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. | **Not applicable** |
| Requirement 2(3)(d) | 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. | **Not applicable** |
| Requirement 2(3)(e) | 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. | **Not applicable** |

Findings

Evidence analysed by the Assessment Team showed the service was able to demonstrate that current 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. Consumers and/or representatives interviewed by the Assessment Team confirmed in various ways that consumer assessments were completed, their care and services needs were discussed and were planned to meet their health and well-being needs. Nursing staff when interviewed described how they assess consumer’s needs and risks at commencement of services, reviews and/or as required for example following incidents, and how assessments inform consumers’ care and support plans. Care planning documents analysed by the Assessment Team evidenced recent comprehensive assessment and planning was undertaken with consumers and/or representatives.

During interviews with the Assessment Team management advised of a range of actions undertaken to address identified non-compliance at the Assessment Contact in June 2021, including:

* Implementation of validated assessment tools for consumer risks including, but not limited to, falls, skin integrity, medication management and nutrition.
* Consolidation of multiple care plans for consumers into a single comprehensive care plan which informs delivery of safe and effective care and services, and highlights consumers risks and provides mitigation strategies to guide staff.
* Updated policies on all aspects of assessment and planning, including safe delivery, goals and preferences, communication and partnerships.

All consumers and representatives interviewed by the Assessment Team advised the assessment and planning process assesses and addresses all risks involved in the delivery of services. A single example has been documented below:

* The representative for Consumer A (HCP L4) advised that Consumer A had a brain injury which affects his memory and his mobility. The representative described how the service performed assessments on Consumer A at commencement of services, at review and after any falls. The representative stated during interviews with the Assessment Team the service does everything they can to prevent falls.

Staff during interviews with the Assessment Team advised the outcomes of assessment and planning, including risks and mitigation strategies, are available to them at the point of care, through alerts for low-risk consumers, and full care plans for higher-risk consumers.

Management when interviewed by the Assessment Team advised, and staff confirmed, that policies and procedures have been recently updated, and are able to be accessed through a portal available to all staff.

# Standard 3

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| Personal care and clinical care | | HCP |
| Requirement 3(3)(a) | 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. | **Compliant** |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | **Compliant** |
| Requirement 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | **Not applicable** |
| Requirement 3(3)(d) | 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. | **Not applicable** |
| Requirement 3(3)(e) | 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. | **Not applicable** |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | **Not applicable** |
| Requirement 3(3)(g) | 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. | **Not applicable** |

Findings

Evidence analysed by the Assessment Team showed the service was able to demonstrate that each consumer gets safe and effective care that is best practice, tailored to their needs, and optimises their health and well-being. One consumer interviewed by the Assessment Team advised they were confident the clinical care they received is safe and high quality. Nursing staff and management when interviewed by the Assessment Team described various safeguards the service utilises to ensure personal and clinical care delivered to consumers is safe, tailored to their needs and best practice.

During interviews with the Assessment Team Management advised of a range of actions undertaken to address identified non-compliance at the Assessment Contact in June 2021, including:

* Appointing an Enrolled Nurse (EN) as a Direct Care Supervisor to provide clinical oversight for the service.
* Audits of risks, including falls and medication, to ensure consistent, best practice care.
* Regular meetings with clinical and non-clinical staff to develop a holistic, consumer-centred care model.

The Assessment Team analysed care planning documentation for five consumers which confirmed the service regularly communicates with consumers' general practitioners and other health professionals to ensure holistic and comprehensive delivery of care and services.

Management when interviewed by the Assessment Team advised, and documents analysed confirmed, staff delivering clinical care have received training including, but not limited to, medication management, infection control, skin integrity and continence.

Management when interviewed by the Assessment Team advised the service has recently appointed an EN as a Direct Care Supervisor, who observes staff and provides individualised and targeted training where knowledge gaps are identified.

Evidence analysed by the Assessment Team showed the service was able to demonstrate effective management of high impact or high prevalence risks associated with the care of each consumer. Consumers and/or representatives when interviewed by the Assessment Team confirmed in various ways that the service and staff ensure consumers receive safe personal and clinical care, for example, in relation to catheter care, mobility and falls. Staff when interviewed by the Assessment Team described strategies to manage the consumers’ risks for example, in relation to wound care, mobility and falls, medication management and behaviours of concern. Care planning documents analysed confirmed that individualised risk management strategies are implemented to ensure that consumers’ risks are managed such as monitoring, reviews, incident reporting and risk mitigation strategies.

Management when interviewed by the Assessment Team advised of a range of actions undertaken to address identified non-compliance at the Assessment Contact in June 2021, including:

* Implementation and daily monitoring of a High Risk Client Register.
* Introduction of High Risk Client meetings to discuss risks, mitigation strategies and changes in condition for individual consumers.
* Analysis of risks, incidents and complaints by the Clinical Advisory Board, and reporting of this data to the Board.

All consumers and/or representatives interviewed by the Assessment Team advised in various ways they were confident the service manages and mitigates risks involved in the care and services consumers receive.

One support worker when interviewed by the Assessment Team described how they receive additional information to support them to care for higher-risk consumers. The support worker advised that for higher-risk consumers, in addition to regular risk alerts, they will receive the full care plan, and where applicable a behavioural support plan.

Management during interviews with the Assessment Team described the implementation of a High Risk Client Register, which is monitored daily by the clinical lead and used to track and report on high-risk consumers. Additionally, the service commenced monthly High-Risk Client meetings to discuss risks affecting individual consumers, and established a Clinical Advisory Board to oversee and analyse trends in risk, incidents and complaints.

* The Assessment Team analysed minutes of the Clinical Advisory Board meetings from October 2022 which showed a reduction by 7 (from 28 to 21) of Aged Care incidents compared to the month prior.

The Assessment Team analysed care planning documentation for five consumers which demonstrated the service considers and plans for high impact risks including care continuity through a potential COVID-19 infection, and logistical considerations in the event of an evacuation.

1. The preparation of the performance report is in accordance with section 68A of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)