Aegis Hilton Park

Performance Report

19 Laidlaw Street   
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**Commission ID:** 7431

**Provider name:** Aegis Aged Care Group Pty Ltd

**Site Audit date:** 17 May 2022 to 19 May 2022

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

# Performance report prepared by

Marek Dubovinsky, 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** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | 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 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 and others; and
* the provider’s response to the Site Audit report received 10 June 2022.

# 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 found overall, sampled consumers considered that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* consumers are treated with dignity and respect by staff and their personal privacy is always respected;
* staff are kind and caring;
* consumers are supported to take risks and exercise choice and independence; and
* staff know consumers’ backgrounds and interests.

Consumers are treated with dignity and respect, with their identity, culture and diversity valued. Staff interviewed knew consumers well, including their personal histories, cultural background, preferences for personal care, activities they enjoyed, and family members that were important to them. For consumers sampled, care planning documentation reflected their goals, interests, and matters of significance, such as what is important to them and whether they wish to celebrate specific cultural days.

Care and services are culturally safe. For the consumers sampled, care staff described how they provide personal care in the morning according to the consumer’s preference. The organisation has documented policies, procedures and a Diversity Action Plan relating to consumer diversity and inclusion which outlines how consumers are to be supported to express their culture, diversity, identity and preferences.

Consumers are supported to exercise choice and independence about their own care. Staff could describe how consumers are supported to make informed choices about their care and services. Processes support the identification of risks to enable consumers to live the best life they can. Staff provided examples of how they support consumers to take risks to live their best life. Documentation confirmed risk assessments are reviewed regularly as part of the care plan review process.

Documentation viewed and observations by the Assessment Team demonstrated information provided is easy to understand, current, accurate and timely and communication is provided to consumers which enables them to exercise choice. Staff could describe ways in which information is provided to consumers to support them to make decisions.

Staff were observed to be maintaining consumer privacy by securing sensitive information, identifying private information when individual consumers enter the service and disclosing to the consumer how they use this information. Care files are electronically stored and password protected.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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.*

### 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 most consumers sampled considered that they feel like partners in the ongoing assessment and planning of their care and services. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* confirmed they were involved in care planning and had a say in the delivery of care and services;
* staff were aware of consumers’ needs and preferences; and
* confirmed they are informed about incidents and outcomes of assessment and planning.

A range of clinical and non-clinical assessments are completed on entry and on an ongoing basis. The service has an electronic documentation system to support assessment and care planning. The organisation has policies and procedures to support staff in undertaking relevant assessments to identify consumers’ needs, goals and preferences.

Care plans viewed showed assessment and planning identifies current needs goals and preferences, including advance care planning. Clinical staff described how they ensure end of life and advance care planning needs, goals and preferences are identified. Assessment and care planning documents sampled showed assessment and planning occurs in partnership with the consumer and other persons the consumer wishes to be involved.

Consumers sampled confirmed outcomes of assessment and planning are effectively communicated and documented in a care and service plan. Care plans are accessible electronically for staff, and consumers and representatives have access to care plans. Care plans viewed showed regular review of care and services.

A range of monitoring processes, including scheduled care and service plan reviews, in addition to a range of audits ensure consumers have relevant assessments and care plans developed in accordance with their needs, goals and preferences.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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 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 Compliant as seven of the seven specific Requirements have been assessed as Compliant.

The Assessment Team found most consumers sampled considered that they receive personal and clinical care that is safe and right for them. Consumers interviewed stated overall, they are satisfied with the personal and clinical care provided. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* they are satisfied with the delivery of consumers’ personal and clinical care;
* were satisfied with the provision of palliative services;
* felt consumers’ needs and preferences are effectively communicated;
* consumers are referred to relevant allied health and medical staff when required; and
* were satisfied with the management of infections and COVID related infection risks.

Assessment processes support staff in delivering personal and clinical care that is best practice, tailored to consumers’ needs and optimises their health and well-being. Policies and procedures refer to best practice guidelines and are overseen by the clinical governance committee. Staff interviewed demonstrated knowledge of consumers’ personal and clinical care needs, including pain management. Key risks associated with high impact or high prevalence risks, such as falls, behaviours of concern and malnutrition are identified and addressed. A range of clinical reports monitor the incidence of consumers’ high impact or high prevalence risks.

Care plans sampled reflected consumers’ end of life needs and wishes with their comfort maximised and dignity preserved. Staff could describe the way care delivery changes for consumers nearing end of life and practical ways in which consumers’ comfort is maximised. Deterioration or changes to a consumer’s health and/or condition had been recognised and responded to in a timely manner. Records viewed showed deterioration is identified and addressed. Staff interviewed were able to describe escalation processes when a consumer deteriorates.

Processes ensure relevant information about the consumer’s condition needs and preferences is documented and referrals occur when required. Electronic handovers support staff in effectively communicating changes in consumers’ personal and clinical care. Staff described the referral mechanisms to allied health, medical staff and other service providers.

Infection control practices within the service ensure infection related risks are minimised. This includes infection related risks associated with COVID-19. Staff interviewed were able to describe infection control and antimicrobial stewardship principles. The service monitors and reports on infections monthly to the organisation.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, to be Compliant with all Requirements 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) Compliant

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

### 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 consumers sampled considered 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;

* they receive safe and effective services and supports for daily living;
* they are provided support to promote their emotional, spiritual and psychological well-being;
* they are able to participate in the community and do things that are important to them; and
* they enjoy their meals.

Initial and ongoing assessment processes identify each consumer’s needs and preferences in relation to services and supports for daily living and are used to inform the care and service plan. On entry, admission documentation captures the consumer’s leisure and lifestyle preferences, hobbies, religious affiliations and interests.

The service has a range of activities, such as music, sensory support and creative activities. Documentation viewed showed a variety of activities are offered. Ministers and pastoral care workers attend the service and provide emotional and spiritual support for consumers who choose to have this service provided. Staff interviewed demonstrated awareness of individual consumer’s emotional, spiritual, and psychological needs. Information about the consumer’s condition, needs and preferences is reflected in care plans, assessments, and lifestyle documentation.

Consumers are referred to a range of external organisations and individuals. Lifestyle staff demonstrated knowledge of the referral processes and described referring consumers to allied heath staff, the Community Visitor Scheme and pastoral care workers.

Meals provided are of suitable quality and quantity, with consumers being able to choose from a menu. Staff were able to describe consumer preferences and care plans viewed reflected consumers’ dietary requirements and presences. A chef manager oversees the provision and development of the menu.

Equipment provided to consumers is maintained, cleaned and stored safely. Staff interviewed confirmed they have access to equipment to meet the needs of consumers. Processes support the scheduled cleaning and maintaining of equipment which is provided to consumers.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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.

The Assessment Team found consumers considered that they feel they belong in the service and feel safe and comfortable in the service environment. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* they were happy with the service environment; and
* they find the environment, furniture and fittings clean, safe and well maintained.

The service environment optimises the consumer’s sense of belonging, independence, interaction and function. The service has five wings with a mixture of single and shared rooms. The service has an onsite gym, café and hairdresser to support consumers’ sense of belonging. The environment is clean and safe, well maintained and comfortable; and enables consumers to move freely, both indoors and outdoors. The layout enables consumers to move easily through the large communal areas.

Records confirmed processes for the monitoring and maintenance of the environment, furniture and fittings. Observations indicate the environment, furniture and fittings are monitored and maintained.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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 considered that they are encouraged and supported to give feedback and make complaints, and appropriate action is taken. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* they felt supported to provide feedback;
* were satisfied with actions taken and management are receptive to feedback; and
* they were not aware of advocacy services but said they would prefer to address their concerns internally.

Consumers, their family, friends, and others are encouraged and supported to provide feedback and make complaints. Mechanisms to provide feedback include feedback forms, posters and brochures. Complaints documentation showed consumers and representatives are engaging in feedback processes.

Consumers have access to advocates, language services and other methods for raising and resolving complaints. However, consumers interviewed were not aware of external mechanisms for raising complaints and feedback. Management are aware of external feedback and complaint mechanisms and advised they have not recently required to engage those service. Brochures are available throughout the service in relation to the complaints process and external advocacy agencies.

Appropriate action is undertaken in response to feedback. The service has policies and procedures in relation to complaints handling. Records showed complaints and feedback is identified and addressed. Staff were able to describe open disclosure processes.

Feedback and complaints are used to identify opportunities for improvements. Recent improvements include feedback from consumers in relation to the bird aviary being relocated to another position in the garden.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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.

The Assessment Team found overall, consumers considered that they get quality care and services from people who are knowledgeable, capable and caring. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Overall, there are enough staff;
* staff are kind respectful of consumers; and
* they are confident that staff know how to provide care and services and know their roles;

The service demonstrated the workforce is planned and the number and mix of staff is sufficient to deliver safe and quality care and services. Overall, staff said there are enough staff to provide care and services. Processes support planned and unplanned leave with the service having access to labour hire staff.

Staff interactions with consumers were observed by the Assessment Team to be kind, respectful and caring. The service demonstrated it recruits and retains a competent workforce with appropriate qualifications and knowledge and supports staff with resources to undertake their role. Staff are required to complete a range of training. A range of core competencies are required to be completed on commencement and ongoing.

Staff practice is monitored, and ongoing training is provided to ensure staff have a contemporary knowledge base to deliver the outcomes required by the Quality Standards. Staff performance is monitored and reviewed. Consumer feedback and incidents are used to identify areas of improvement.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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.*

### 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.

The Assessment Team found that overall, consumers and representatives sampled considered that the organisation is well run and they can partner in improving the delivery of care and services.

Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement through a range of surveys, focus groups and consumer and representative meetings. Changes at the service are communicated through emails, newsletters and through staff.

The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. The organisation has a range of reporting mechanisms to ensure the Board is aware and accountable for the delivery of services. This includes a range of committees and meetings which report directly to the executive team. The organisation promotes a range of values which include positive contribution, respect for ourselves and each other, integrity in our decisions and actions, dignity is a fundamental right of every person and excellence in everything we do.

The organisation has a governance structure to support all aspects of the organisation, including information management, continuous improvement, financial governance, workforce and clinical governance, regulatory compliance and feedback and complaints. Consumer information is managed through an electronic client management system. Continuous improvements are identified and actioned. The organisation tracks changes to the aged care law through subscriptions to a range of Government and other service providers. Feedback and complaints are trended monthly and reported on.

The organisation demonstrated overall effective risk management systems and practices relating to risks associated with the care of consumers and identifying and responding to abuse and neglect of consumers. The organisation has an incident management reporting system to ensure relevant reports are completed according to legislative requirements and to inform the organisation of any trends or risks. Consumers are supported by the organisation to the live the best life they can to ensure they maintain their independence in a safe manner. The organisation has a risk management framework which is supported by policies and procedures.

The organisation has a clinical governance framework, and associated policies and procedures, relating to antimicrobial stewardship, minimising the use of restraint and open disclosure. Staff interviewed demonstrated an understanding and application of policies and procedures relating to antimicrobial stewardship, restrictive practice and open disclosure.

Based on the evidence documented above, I find Aegis Aged Care Group Pty Ltd, in relation to Aegis Hilton Park, 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

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