**Performance**

**Report**

**1800 951 822**

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| --- | --- |
| Name of service: | Anglican Community Services |
| Service address: | Level 1, 4 - 6 Inglewood Place BELLA VISTA NSW 2153 |
| Commission ID: | 200046 |
| Home Service Provider: | Anglican Community Services |
| Activity type: | Quality Audit |
| Activity date: | 6 September 2022 to 8 September 2022 |
| Performance report date: | 18 October 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 Anglican Community Services (**the service**) has been prepared by G. McNamara, 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:**

* Care at Home Western Sydney, z22786, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Anglicare Community Aged Care - Nepean, z17461, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Anglican Retirement Village Rockdale, Hurstville Kogarah CACPs, 17277, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Anglican Retirement Villages Bowral and District CACP, 17278, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Anglican Retirement Villages CACP's Shoalhaven, 17279, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV CACP Forestville, 17285, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV CACP Hornsby / Kuring-Gai, 17286, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Dapto CACP, 17287, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Eastern Suburbs CACP, 17288, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Eurobodalla, 17289, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Hungarian CACPs, 17290, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Illawarra EACH, 17291, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Illawarra EACH Dementia, 17292, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Nepean EACH, 17293, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Nepean EACH Dementia, 17294, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Northern Beaches Dementia EACH, 17295, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Northern Beaches EACH, 17296, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Northern Sydney Dementia EACH, 17297, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Northern Sydney EACH, 17298, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Public Housing CACP, 17299, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Randwick CACP, 17300, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV South East Sydney Dementia EACH, 17301, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV South East Sydney EACH, 17302, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV South West Sydney EACH Dementia, 17303, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Sutherland CACP, 17304, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Western Sydney CACP, 17305, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Western Sydney EACH, 17306, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Blue Mountains CACP Service, 17383, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Chesalon Care at Home Sutherland - EACH, 17464, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Community Care at Home Illawarra, 17476, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Hawkesbury CACP Program, 17541, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Nepean Area Multicultural CACPs, 17678, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Penrith CACP Program, 17702, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Community Services Illawarra, 19346, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Anglicare Community Aged Care - Northern Sydney, 22784, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Care at Home South West Sydney, 22785, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Care at Home Southern Highlands, 22787, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Care at Home Inner West, 22788, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* ARV Botany CACPs, 17284, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153

**CHSP:**

* Short Term Restorative Care (STRC) - Anglicare Restorative Care, 27420, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Specialised Support Services, 4-7Y3FZI6, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Allied Health and Therapy Services, 4-7XNKTAQ, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Domestic Assistance, 4-7Y35ZSL, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* CHSP Personal Care, 4-7Y1CKEE, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Social Support - Group, 4-7Y3EB84, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Social Support - Individual, 4-7Y3FZFD, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* CHSP Transport, 4-7Y27YVT, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Cottage Respite, 4-7Y35ZK7, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Centre Based Respite, 4-7Y1CKB1, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Flexible Respite, 4-7Y3600O, Level 1, 4 - 6 Inglewood Place, BELLA VISTA NSW 2153
* Nursing, 4-7Y3DFTJ, Broughton Avenue, CASTLE HILL NSW 2154

# Material relied on

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

* the assessment team’s report for the Quality Audit; the Quality Audit report was 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 assessment team’s report received 7 October 2022.

# Assessment summary for Home Care Packages (HCP)

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| --- | --- |
| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| --- | --- |
| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

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 1

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| --- | --- | --- | --- |
| Consumer dignity and choice | | HCP | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant | Compliant |
| Requirement 1(3)(c) | 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. | Compliant | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant | Compliant |
| Requirement 1(3)(e) | 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. | Compliant | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant | Compliant |

Findings

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 services is Compliant as six of the six specific requirements have been assessed as Compliant.

Consumers and representatives provided positive feedback about the service staff and their care staff. They said they treat them with respect and support them to make informed choices in relation to their services. They confirmed the service responds to their individual needs, cultural backgrounds and staff protect their privacy. They provided examples of how staff assist them to live the life they choose and to remain living in the community.

Staff demonstrated their knowledge of the consumers' individual preferences and demonstrated that they tailor services to the consumer and support them to exercise choice in relation to their services.

Management discussed their understanding, approach to and review of consumers’ dignity of risk including their awareness of consumers’ right to take risks. Where risks are identified these are documented and strategies put in place to reduce the risks as much as possible.

A review of organisational documents including consumer information demonstrated service staff are guided by the organisation to ensure the consumer's identity is valued, and services are tailored to diverse backgrounds, and their privacy and confidentiality is respected

# Standard 2

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| Ongoing assessment and planning with consumers | | HCP | CHSP |
| 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 | 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |

Findings

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 services is Compliant as five of the five specific requirements have been assessed as Compliant.

Overall sampled consumers and representatives interviewed confirmed that they were satisfied with the care and services they received, and they were in line with their goals and preferences. Consumers confirmed they are involved in assessment and care planning processes and where applicable this was done in partnership with others when they wished them to be involved.

Care workers said they are provided information by managers in relation to the care needs of consumers and are provided with access to the care plan, that includes clear instructions. They access electronic progress notes on their phone and are updated in relation to changes and discuss at regular staff meetings. Care staff also said they have access to consumers’ care plans through the database system also the folder in each consumers’ home. Those interviewed felt they get enough information on the needs of the consumers and how to deliver care. They further stated they tend to see the same consumers and are able to identify deterioration in their physical and mental wellbeing, and relay this to the care team leaders, who follow-up and keep them informed of any changes.

Assessment and service planning processes in place include initial and ongoing review and reassessment, and strong ongoing monitoring by care worker, care advisor, care coordinator and managers. Consumer documentation reviewed provided evidence of current updated care plans, agreed upon goals, and tasks and instructions for carers with consideration of risks to consumers and their changing circumstances.

Organisational policies and procedures, guiding assessment and care planning templates, and electronic information management systems ensures service staff, involved in direct care delivery, work in collaboration with consumers, to deliver services in accordance with their identified care needs, goals and preferences.

# Standard 3

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| Personal care and clinical care | | HCP | CHSP |
| 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 | Compliant |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant | 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| 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. | Compliant | Compliant |

Findings

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 services is Compliant as seven of the seven as five of the five specific requirements have been assessed as Compliant.

The service has systems in place for the delivery of safe and effective personal and clinical care services that meet the needs, goals and preferences of consumers. This includes identifying and managing high impact and high prevalence risks through assessment, care reviews and ongoing monitoring processes and recognising and responding to deterioration or change in health and wellbeing.

The service has a referral process to the internal clinical team for all clinical needs to consumers when required such as wound care or any complex care. Management confirmed care and services are delivered by trained care workers and all services are monitored by the allocated care advisor and care coordinator. However, they rely on sub-contracted agencies to monitor their own care staff. Care workers report any changes in the consumer’s overall health and wellbeing and this is followed up in a timely manner. Any incidents, changes in the consumer’s health or other significant events are noted in the consumer’s file and followed up as appropriate.

The organisation demonstrated that it has systems and processes to minimise infection-related risks, and that these processes are being implemented.

Consumers and representatives interviewed were satisfied overall with care and services they are currently receiving, however some consumers indicated that communication with the office is difficult, with one representative stating that if they had to change anything or cancel the service on same day it was ‘almost impossible’. Consumers/representatives stated that their needs and preferences are effectively communicated to the Anglican staff, as they did not usually have to repeat the same information to new care staff. However, some stated that staff from the agency are not always good and efficient as the Anglican staff. They also stated that Anglican care workers usually know if anything has changed regarding their care however agency staff don’t always provide services as per their needs, however some consumers gave examples such as staff providing different services arriving at the same time, that action was not taken when a consumer informed the office they were not happy with the staff they were getting, that staff were providing only one and half hours of domestic assistance and shopping services fortnightly when it should have been two hours, and reduction in hours not being communicated, and missed services.

In its response the approved provider provided context on some of the individual concerns raised, and acknowledged that the cause of many communication issues was related to workforce shortages, which caused pressure on its Scheduling and Response Centre and required the increased use of agency staff. It stated it had previously identified the issues and set out details of the measures it had or would implement to address these matters, including introduction of a new client management system and a new call-management software, recruitment strategies for care staff, and recruitment of a Quality Coordinator to monitor performance of sub-contractors, including agency staff. It stated it had recognised the issues prior to the Quality Audit and had commenced processes to address this, including managing consumer inflow on a dynamic basis as consumer needs and staffing levels fluctuate.

While I acknowledge the consumer input and consider that ongoing improvements are required in relation to some aspects of communication with consumers, I am satisfied that the approved provider had previously recognised these issues and was implementing, and continues to implement, strategies to address the issues identified. I also consider that it had addressed some of the individual concerns raised.

The approved provider is encouraged to continue to implement and embed the improvements identified by it.

# Standard 4

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| Services and supports for daily living | | HCP | CHSP |
| Requirement 4(3)(a) | 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. | Compliant | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant | Compliant |
| Requirement 4(3)(c) | 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. | Compliant | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Not applicable | Compliant |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant | Not applicable |

Findings

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

The Quality Standard for the Commonwealth home support programme services is Compliant as six of the six applicable requirements have been assessed as Compliant.

Consumers confirmed they are receiving effective supports for daily living that enable them to live independently. Consumers also described ways services enabled them to participate in the community and to experience a good quality of life, helping them to maintain their independence. They stated they enjoy services and feel comfortable, happy and safe with their care staff while receiving care, and that referrals are made from time to time, with their permission. Some representatives said they have a choice of providers when referrals are made. Consumers who receive food were all satisfied with the food provided, and indicated they are regularly asked for feedback. Consumers for whom equipment is supplied were satisfied with the quality of the equipment and choice of equipment to choose from.

Care staff demonstrated a good understanding of the consumers they care for and what was important to them. They said the care planning documents include details of how to support a consumer with their lifestyle and social interactions.

Care plans sighted on consumers’ files were observed to be written in a way that is consumer focused and included identification of their individual interests, needs and preferences, including any personal goals. Reviews and progress notes also documented any changes with regards to individual consumer’s needs and preferences and supports for daily living.

Referrals are made to external providers for services and the provision of equipment when needed. All consumers/representatives said they have access to a range of various services which meets their current needs.

Meals are not provided under HCP by this organisation therefore that requirement was not applicable to HCP but was applicable to CHSP. Equipment is not provided under CHSP by this organisation therefore that requirement was not applicable to CHSP but was applicable to HCP.

# Standard 5

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| Organisation’s service environment | | HCP | CHSP |
| Requirement 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Not applicable | Compliant |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Not applicable | Compliant |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable | Compliant |

Findings

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

The service does not provide a service environment for the Home care packages service therefore this Standard is Not Applicable to HCP.

Overall consumers indicated they feel safe and comfortable in the service environment. For example:

* Consumers interviewed said they felt safe at the centre and they were able to find their way and move around the centre easily and independently.
* Consumers interviewed also said the centre is always kept clean and well maintained. Some representatives interviewed also said this about the centres.
* An overnight cottage consumer said they have been very happy with their stay so far and staff know what they like. They thought the centre was nice and they enjoyed the activities provided there.

Staff advised they have observed the environment is easy for the consumers to get around independently. They said because of the size of the room used at the centre, there are no mobility hazards for consumers regarding small spaces and they can access the bathrooms independently. Those staying in overnight respite have their own accessible bedroom with ensuite, similar to a residential style room. They also advised that if they noticed any issues regarding staff/volunteers or consumer safety they would notify the centre team leader, who would take follow up action. The team leader advised they would follow up by recording it as a hazard/incident and reporting for maintenance action.

Environmental safety checks are carried out on a regular basis and any hazards identified are followed up through the hazard/incident reporting system and the team leader organises relevant maintenance when needed.

The Rooty Hill centre, which is used for social support, centre-based respite and overnight respite, is able to accommodate three consumers at a time. It was observed to have easy and safe access for consumers.

# Standard 6

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| Feedback and complaints | | HCP | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Compliant | Compliant |
| Requirement 6(3)(b) | Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. | Compliant | Compliant |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant | Compliant |

Findings

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 services is Compliant as four of the four specific requirements have been assessed as Compliant.

Consumers and representatives interviewed said they know ways to provide feedback or complain including external avenues and some consumers said they would be confident to do so if the need arose while others said they raise concerns or give feedback as and when they saw a need. They receive information on external supports like advocacy services to assist with complaints resolution.

Feedback from consumers and representatives indicated that, generally, staff and the service provider responded to their concerns by providing an immediate resolution.

The service provider has a centralised complaints management system for recording feedback and complaints, established escalation and response structures, open disclosure, analysis of complaint data for trends and the links to broader business learning and continuous improvement. Staff receive training in complaint response as appropriate to their roles.

The service provider’s complaints documentation show complaints are logged in the Electronic File linked to the consumer, they are prioritised, time lined, escalated if appropriate and actioned generally in a timely manner. A sample of complaints records show there was contact with the consumers or representatives to find options to resolve the complaint. The service provider demonstrated how they apply ‘root cause analysis’ to identify why a complaint was raised and how it should be resolved

Policies regarding feedback and continuous improvement guide staff practice. The service also maintains a continuous improvement plan to monitor improvements. The Assessment Team noted some correlation between themes raised in feedback and complaints being part of the continuous improvement plan.

# Standard 7

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| Human resources | | HCP | CHSP |
| Requirement 7(3)(a) | 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. | Compliant | Compliant |
| Requirement 7(3)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | Compliant | Compliant |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant | Compliant |

Findings

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 services is Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and representatives interviewed confirmed and described in various ways that care advisors and care workers interact with them in a kind, caring and respectful way. Consumers and representatives interviewed provided positive feedback regarding their care workers, care advisor and response team. They advised they are satisfied with the knowledge and skills of care advisors and care workers. They all felt staff follow COVID-safe practices to keep them safe while providing services.

There was evidence in staff training information and staff meeting minutes of issues related to professional courtesy and a respectful approach being discussed within the service providers customer experience framework, “Acts of Purpose’. Position descriptions and organisational policies and procedures reflect the service’s expectation that staff behave in respectful way. The staff sign commitment to the service providers code of conduct policy. All staff have regular monitoring and review of their performance through avenues such as feedback from consumers and annual performance reviews. Staff confirmed they underwent an induction program on joining the service and were required to complete mandatory training, which was monitored.

Management demonstrated they have systems for the recruitment, training and support for their staff. Management said for external staff, the responsibility for ensuring appropriately skilled and qualified staff provide care is the responsibility of the brokered service provider or agency and is a condition of their agreement with the service. Management advised the service has a compliance monitoring process with after visit shift notes submitted by the brokered service provider covering the services delivered to the consumers. Sample of a brokered service provider agreement was sighted.

The Assessment team found that, while the service demonstrated the workforce is planned, consumer feedback and the service provider data showed the service did not have the number and mix of members of the workforce deployed to enable delivery and management of safe and quality services. The Assessment Team reported that while ten Consumers and two representatives interviewed advised they are happy with the services they receive from the care workers, four consumers and four representatives informed that they are concerned when supports scheduled are cancelled without notice or their service hours are reduced. They said their request for the service provider to keep the care worker or workers same for consistency of service based on individual consumers requirements are not maintained. The Assessment Team found that although the service provider has a workforce strategy in place and closely monitors consumer needs versus staffing based on consumer feedback and data reviewed, the workforce deployed whether through direct service provider employee or contracted did not support the delivery and management of safe and quality care and services.

In its response the approved provider provided context on some of the individual concerns raised, and stated that the number of missed visits was a very small proportion of the total instances of care and services provided by it. It noted that the volatility of the environment due to COVID had resulted in higher degree than usual of service changes.

In addition, the approved provider set out details of the measures it had or would implement to address these matters, including introduction of a new client management system and a new call-management software, recruitment strategies for care staff, and recruitment of a Quality Coordinator to monitor performance of sub-contractors, including agency staff, and additional reporting and monitoring. It stated it had recognised the issues prior to the Quality Audit and had commenced processes to address this, including managing consumer inflow on a dynamic basis as consumer needs and staffing levels fluctuate.

While I acknowledge the consumer input and consider that ongoing improvements are required in relation to some aspects of communication with consumers, and between staff and the organisation, I am satisfied that the approved provider had previously recognised these issues and was implementing, and continues to implement, strategies to address the issues identified. I also consider that it had addressed some of the individual concerns raised.

The approved provider is encouraged to continue to implement and embed the improvements identified by it. **Standard 8**

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| Organisational governance | | HCP | CHSP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant | Compliant |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Compliant | Compliant |
| Requirement 8(3)(c) | 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. | Compliant | Compliant |
| Requirement 8(3)(d) | 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. | Compliant | Compliant |
| Requirement 8(3)(e) | 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. | Compliant | Compliant |

Findings

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 services is Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and representatives described how they are engaged to provide feedback, with many confirming they were invited to participate in surveys and have access to the service as an app on their phones. Some indicated they would give feedback verbally to staff if they wanted to provide it.

Staff interviewed thought the service is well run and they demonstrated an understanding of policies and procedures overseeing the delivery of safe, quality services.

The organisation has a risk management system in place that identifies and responds to vulnerable consumers. The executive is informed of any emerging risks and trends of incidents, complaints and of continuous improvement activities. Effective organisation wide governance systems were seen to be in place, including a clinical governance framework, within which clinical incidents are reported and trended monthly.

Regular planning mechanisms are in place and management advised they have ready access to all information to ensure transparency and informed decision making. The service focuses on achieving positive lifestyle outcomes for consumers.

1. The preparation of the performance report is in accordance with section 57of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)