Baptcare Nursing and Allied Health Program

Performance Report

33 Blyth Street
BRUNSWICK VIC 3056
Phone number: 03 8388 5800

**Commission ID:** 300734

**Provider name:** Baptcare Ltd

**Quality Audit date:** 27 April 2022 to 29 April 2022

**Date of Performance Report:** 27 June 2022

# Performance report prepared by

G.McNamara, 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.

# Services included in this assessment

**CHSP:**

* Short Term Restorative Care (STRC), 3995, 33 Blyth Street, BRUNSWICK VIC 3056
* Allied Health and Therapy Services, 4-BBQDS2C, 33 Blyth Street, BRUNSWICK VIC 3056
* Nursing, 4-BBQD17C, 33 Blyth Street, BRUNSWICK VIC 3056
* Personal Care, 4-BBQD1AZ, 33 Blyth Street, BRUNSWICK VIC 3056
* Allied Health and Therapy Services, 4-BBQDS2C, 3/131 Harvester Road, SUNSHINE VIC 3020
* Allied Health and Therapy Services, 4-BBQDS2C, 34 Erskine Road, MACLEOD VIC 3085
* Allied Health and Therapy Services, 4-BBQDS2C, 55 Walpole Street, KEW VIC 3101

Short Term Restorative Care (STRC) included in this assessment

# 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 |
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| Standard 2 Ongoing assessment and planning with consumers |
|  | CHSP  | Compliant |
| Requirement 2(3)(a) | CHSP  | Compliant |
| Requirement 2(3)(b) | CHSP | 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 | Compliant |
| Requirement 3(3)(a) | CHSP  | Compliant |
| Requirement 3(3)(b) | CHSP | Compliant |
| Requirement 3(3)(c)  | CHSP  | Compliant |
| Requirement 3(3)(d)  | CHSP | Compliant |
| Requirement 3(3)(e)  | CHSP | Compliant |
| Requirement 3(3)(f)  | CHSP | Compliant |
| Requirement 3(3)(g)  | CHSP  | Compliant |
|  |  |  |
| 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 |
|  | STRC  | Compliant |
| Requirement 4(3)(d) | CHSP  | Compliant |
| Requirement 4(3)(e) | CHSP  | Compliant |
| Requirement 4(3)(f) | CHSP  | Not Applicable |
| Requirement 4(3)(g) | CHSP  | Compliant |
|  |  |  |
| 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 | Compliant |
|  |  |  |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

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

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Quality 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.

# 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

Commonwealth home support programme (CHSP) consumers/representatives interviewed described staff as kind, caring and respectful, care plans were personalised, and staff were able to describe consumer’s history and their care needs. Staff were aware of consumers’ preferred names and could describe their individual preferences for service delivery. Documentation, care plans and notes are inclusive of consumers choices and background.

Consumers/representatives interviewed said that staff know their individual backgrounds and culture, what is important to them, understand their need and preferences which informs the way care is delivered.

The service demonstrated that consumers were supported to exercise choice and independence in their care, decision making and communication. Review of consumer’s documentation identified information relating to people involved in the consumer’s care including guardianships, nominated representatives and significant others.

Assessment and planning processes demonstrated consumers/representatives are supported to involve others such as medical practitioners and other services in supporting the consumer.

Consumers/representatives described how staff consult with them from commencement, this includes discussions about risks the consumer may wish to take to maintain their independent lifestyle and activities. The service demonstrated consumers are supported to take risks to enable them to live their best life.

Consumers said that on entry to the service they received a consumer handbook and there is regular communication in between when allied health or nursing staff visit them.

Consumers/representatives interviewed provided feedback that staff respect their privacy when providing services. Personal care workers said they maintain consumers’ privacy when delivering personal care services to consumers who may feel vulnerable. Allied health clinicians and nurses stated they discuss consumer needs, explain treatments, exercise programs and how they are going to assist the consumer in a private environment.

The Quality Standard for the Commonwealth home support programme services is assessed as Compliant as 6 of the 6 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.*

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

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

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| --- | --- | --- |
| 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.*

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| Requirement 1(3)(d) | CHSP  | Compliant |

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

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| --- | --- | --- |
| 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.*

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| --- | --- | --- |
| 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 Compliant

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

The service demonstrates that assessment and planning consider risks to the consumer’s health and wellbeing. Consumer’s needs are risk assessed. Information on needs and risks is available to staff to guide the delivery of safe and effective care and services.

The service demonstrated assessment and planning identifies and addresses the consumer’s current needs, goals and preferences. Feedback from consumers was positive and care documentation and staff interviews verified that assessment and planning addressed current needs.

The service works in partnership with the consumer, representative and other professionals and agencies to ensure that consumers receive the care and services they need. Consumers and representatives explained how they were involved in the assessment and planning and spoke positively of this involvement. Care documentation identified who and under what circumstances others are involved in the care of the consumer.

The outcomes of assessment and planning are documented in a care plan which is offered to the consumer. There are established systems for sharing documented care information with relevant staff providing care. Consumers and representatives interviewed recalled receiving a care plan and were able to describe the outcomes of the assessment and planning, including how, by whom and when services would be delivered. There is evidence in care documentation of guidance information being available to staff through the service’s systems and, for external staff, through emails and telephone handover.

Consumers and representatives indicated that the consumer’s care and services are regularly reviewed routinely at set points or when there is a change in their situation. Staff explained the process of review and there was evidence in care documentation of regular and as needed reviews occurring.

The Quality Standard for the Commonwealth home support programme services is assessed as Compliant as 5 of the 5 specific requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | CHSP  | Compliant |

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

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

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| 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.*

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| 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.*

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| 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 Compliant

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

All consumers and representatives interviewed provided positive feedback regarding clinical and personal care services. Staff sampled described ways they ensure care is safe, effective and tailored to the needs of consumers to optimise health and wellbeing. Care planning documents detailed the consumer’s current personal and clinical care needs and care strategies. Care is best practice, tailored to the needs of consumers and optimises their health and wellbeing.

Consumers and representatives interviewed said in various ways care was safe and right for consumers and reduced risks to their wellbeing. Staff demonstrated an understanding of high impact, high prevalent risks and described their approach to reducing identified risks for each consumer. Care documentation shows risks for individual consumers are identified and managed. The services demonstrated effective management of risks associated with individual consumers.

The service~~s~~ advised that there is no consumer currently receiving end of life care. Management and staff explained that if a consumer is approaching the palliative stage, they are referred to their appropriate health practitioner for assessment and support. Staff described links with palliative care services and said consumers’ needs, goals and preferences would be documented and respected. Tools and resources related to end of life care are accessible to staff.

On interview, consumers and representatives were satisfied that staff monitor the consumer’s condition and would recognise and respond if a consumer’s health, function or condition changed. Staff described the processes to report and action consumer deterioration or change. Documentation review shows staff are responsive to changes in a consumer’s health and well-being and take appropriate action.

Consumers and representatives are satisfied consumer’s personal and clinical care is consistent and they do not have to repeat their needs and preferences when staff change. Staff are satisfied with the sufficiency and currency of consumer information provided and described how it is accessed, updated and, with consumer consent, shared with others who share responsibility for care. Care documentation shows that the service actively communicates with others, internally and externally, to ensure the provision of personal and clinical care.

Consumers and representatives said in various ways they are satisfied that when needed, the service enables appropriate individuals, other organisations and service providers to become involved in care and service delivery. Staff identified who they can make referrals to and described internal and external referral processes. Care documentation for consumers sampled showed evidence of timely and appropriate referrals to individuals, other organisations and providers of other care and services.

Consumers and representatives are satisfied that staff take precautions to prevent and control infection including COVID-19. Staff and management said they have received training and resources in infection control including COVID-19 precautions. The service has documented plans, policies and procedures to support the prevention and control of infection related risks through infection prevention and control practices. The organisation’s clinical governance framework outlines antimicrobial stewardship and relevant staff described related practices.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as 7 of the 7 specific requirements have been assessed as Compliant.

**Assessment of Standard 3 Requirements**

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

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

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| Requirement 3(3)(b) | CHSP  | Compliant |

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

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

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

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

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

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| Requirement 3(3)(e) | CHSP  | Compliant |

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

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| Requirement 3(3)(f) | CHSP  | Compliant |

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

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| Requirement 3(3)(g) | CHSP  | Compliant |

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# STANDARD 4 Services and supports for daily living

#  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

Consumers and representatives interviewed provided positive feedback in relation to how care and services support consumers to maintain their independence and do the things they want to do. Staff described ways services and supports provided optimise consumer independence and quality of life. Care planning documentation evidenced ways consumers’ needs, preferences and supports for daily living are met. Consumers receive safe and effective care that optimises their wellbeing and quality of life.

Consumers and representatives are satisfied that services and supports for daily living promote consumer wellbeing. Staff described how they recognise when a consumer is feeling low and how they support consumer’s emotional, spiritual and psychological well-being. Care documentation showed services delivered align with what is important to the consumer.

Consumers and representatives said in various ways that the services they receive support their social interactions, maintain personal relationships and do things that interest them. Staff described how services and supports help consumers to follow their interests and social connections. Care documentation showed how staff work with the consumer to provide services that enable them to follow their interests.

The service demonstrated that information about the consumer’s condition, needs and preferences is shared with others where responsibility for care is shared. There was evidence in care documentation of ongoing communication with the other staff and external organisations to monitor care through means such as case conferences, reports and review points.

There was evidence in care documentation of the needs for referrals being assessed and actioned in a timely manner.

The service demonstrated where equipment is provided, it is safe, clean and maintained. Consumers and representatives interviewed who had equipment provided are satisfied with its suitability and condition. Staff outlined ways they meet consumers’ equipment needs and described the processes used to clean and maintain shared equipment in centre group services. Care documentation showed where equipment is provided it is trialled before purchase as appropriate to ensure safety and suitability. There are systems to report equipment failure and maintenance needs.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as 6 of the 6 applicable requirements have been assessed as Compliant.

**Assessment of Standard 4 Requirements**

|  |  |  |
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| 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.*

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| Requirement 4(3)(b) | CHSP  | Compliant |

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

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| 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.*

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| 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.*

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| Requirement 4(3)(e) | CHSP  | Compliant |

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

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| Requirement 4(3)(f) | CHSP  | Not Applicable |

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

The organisation does not provide meals therefore this requirement is Not Applicable.

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

*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 day therapy and podiatry clinic environments were observed. The service demonstrated that the day therapy centre environment is welcoming, easy to understand and optimises each consumer’s sense of independence and interaction. Consumers can move freely within the day therapy service. Both the day therapy centre and the podiatry clinic are appropriately furnished with areas for podiatry care and exercises.

Appropriate spaces and equipment for exercise programs were observed.

Feedback from consumers and representatives indicate that the day therapy service is safe and comfortable and promotes independence

There are processes to ensure that the service environments are safe, clean and well maintained, including the cleaning and maintenance of clinical equipment used during the service.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as 3 of the 3 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.*

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| --- | --- | --- |
| 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.*

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| --- | --- | --- |
| 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

Consumers demonstrated an awareness of how to raise any concerns or provide feedback to the organisation. Consumers stated they feel confident raising concerns and described actions taken to resolve their issue. Staff are aware of feedback processes and support consumers to provide feedback.

Consumers and representatives interviewed demonstrated an awareness of external avenues and supports available for them to raise concerns and resolve complaints.

Consumers/representatives demonstrated awareness of advocacy groups and the availability of language services. Interpreting services are used for consumers who speak a language other than English.

There were policies and procedures to guide staff in receiving and responding to complaints. All complaints are recorded in the organisations risk management register. The organisations open disclosure flowchart and policy ensure an open disclosure processes are used.

Management advised and the continuous improvement plan confirmed that complaints are documented, trended and improvements actioned to ensure quality of care and services.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as 4 of the 4 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.*

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| --- | --- | --- |
| 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.*

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| --- | --- | --- |
| 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

Consumers reported staff turn up on time and, where changes occur, they are provided sufficient notice to avoid impact to the consumer’s schedule.

Consumers and representatives commented that all staff are kind and caring. The clinicians, allied health assistants and nurses are familiar with consumers and spoke about them in a respectful way. Personal care workers were able to provide examples to demonstrate how they treat each consumer respectfully and are aware of their individual preferences including cultural needs. Management and staff were aware of the culture and diversity needs of the consumers.

Management advised that the workforce is recruited to specific roles requiring qualification, credentialing or competency to effectively perform their roles. This is specified in position descriptions, subcontractor agreements, annual meetings and audits.

Training needs are identified by the organisation through consumer feedback, incidents, internal audits, and staff performance reviews. Management discussed monitoring of staff training and provided training records for review.

Management and staff advised performance appraisals occur annually and as required and when concerns arise in relation to staff performance. The service manages issues related to staff performance using supervision and performance management policies.

The Quality Standard for the Commonwealth home support programme services is assessed as Compliant as 5 of the 5 specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

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| 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.*

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| --- | --- | --- |
| Requirement 7(3)(b) | CHSP  | Compliant |

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

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| --- | --- | --- |
| 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.*

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| --- | --- | --- |
| Requirement 7(3)(d) | CHSP  | Compliant |

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

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| --- | --- | --- |
| 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 did not recollect completing surveys, however they were satisfied their engagement through feedback provided contributes to service delivery.

The service demonstrated the organisation’s governing body promotes a culture of safe, inclusive, quality care and services and is generally accountable for their delivery. The organisation has developed a strategic plan that incorporates issues and improvements for the organisation.

The service has organisational wide governance systems to monitor processes such as information systems, regulatory compliance, financial management, workforce governance, feedback, and complaints. However, inconsistencies in information management in the consumer files impact the identification and monitoring of consumers’ receiving services under a specific program. Management and staff were able to provide clarity through organisational systems on active and inactive consumers. Management stated it had already identified an issue with the documentation of information and staff have been provided with a refresher to ensure all consumer documentation is noted in the consumer files for effective service delivery.

Opportunities for improvement are informed through consumers’ feedback, incidents, staff input, internal audits, industry changes and from networking with other organisations and peak bodies providing aged care. The organisation maintains continuous improvement plans.

The organisation has a risk management framework and policies and procedures for managing high impact or high prevalence risks associated with the care of consumers, identifying, and responding to abuse and neglect of consumers and supporting consumers to live the best life they can.

The organisation has a clinical governance framework, monitored through the quality clinical governance committee, and reported to the Board. Policies guide practice in relation to antimicrobial stewardship, minimising use of restraint and open disclosure principles when something goes wrong.

The Quality Standard for the Commonwealth home support programme services is assessed as Compliant as 5 of the 5 specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

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| 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.*

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| --- | --- | --- |
| 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  | 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.