**Performance**

**Report**

**1800 951 822**

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| Name: | Belyuen Community Government Council Aged Care Program |
| Commission ID: | 600301 |
| Address: | Belyuen Community Council, Belyuen Community, DARWIN, Northern Territory, 0872 |
| Activity type: | Assessment contact (performance assessment) – non-site |
| Activity date: | on 3 September 2024 |
| Performance report date: | 25 September 2024 |

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.

# Services included in this assessment

Home Care Packages (**HCP**) included:  
Provider: 2405 Belyuen Community Government Council  
Service: 26835 Belyuen Community Government Council  
  
Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7676 Belyuen Community Government Council  
Service: 23820 Belyuen Community Government Council - Community and Home Support

**This performance report**

This performance report has been prepared by M Glenn, 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 services it operates, 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.

# Material relied on

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

* the Assessment Team’s report for the assessment contact (performance assessment) – non-site, which was informed by review of documents and interviews with consumers, staff and management; and
* a performance report dated 5 April 2024 for a quality audit undertaken from 13 February 2024 to 14 February 2024.

The provider did not submit a response to the Assessment Team’s report.

# Assessment summary for Home Care Packages (HCP)

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| Standard 7 Human resources | Not Fully Assessed |
| **Standard 8** Organisational governance | **Not Fully Assessed** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| --- | --- |
| Standard 7 Human resources | Not Fully Assessed |
| **Standard 8** Organisational governance | **Not Fully Assessed** |

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 7

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| --- | --- | --- | --- |
| Human resources | | HCP | CHSP |
| 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

**Requirements (3)(d) and (3)(e)** were found non-compliant following a quality audit undertaken in February 2024 as staff had not received training after commencement nor was training tracked and reviewed; and performance reviews were not completed in line with organisational policy.

At the assessment contact in September 2024, consumers interviewed were found to be satisfied with support staff and said they feel safe when receiving assistance from staff. New human resources related policies have been implemented to guide management in initial selection, and the onboarding process. An annual mandatory training schedule is maintained, with training identified based on job role, and regular staff meetings are held to provide staff with information and support. A range of documentation sampled demonstrates staff training is monitored, and staff are supported to undertake their roles through induction processes, staff meetings, resources, standard operating procedures, and service specific and organisational policies and procedures. Staff interviewed confirm they have recently attended induction, said online learning modules have been upgraded, and mandatory training is provided at induction and reviewed annually. Staff also said training is sufficient to support them to do their job.

Regular assessment, monitoring and review of staff performance is undertaken, and documentation sampled shows staff performance reviews are current. Staff performance reviews are undertaken annually, and there are established processes to monitor and review staff performance ongoing, including through feedback processes. Management said staff meet informally daily, any issues are addressed as they arise, and performance concerns and acknowledgements are addressed promptly. Staff interviewed said they have recently participated in a performance review process and undertake regular informal performance discussions with their manager. Staff said they are supported in the performance review process, with any identified needs addressed, and consumers said the service regularly seeks their feedback about staff performance.

Based on the Assessment Team’s report, I find requirements (3)(d) and (3)(e) in Standard 7 Human resources compliant.

# Standard 8

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| --- | --- | --- | --- |
| Organisational governance | | HCP | CHSP |
| 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 |

Findings

**Requirement (3)(c)** was found non-compliant following a quality audit undertaken in February 2024 as systems did not ensure the organisation had enough skilled and qualified members of the workforce, and the organisation did not support and develop its workforce to deliver safe and quality care and services.

At the assessment contact, effective organisation wide governance systems were demonstrated. Policies, procedures and other documentation are available to staff. Consumer information is stored securely across multiple platforms, in line with legislative requirements and electronic data is password protected and accessed relevant to staff position and role. A continuous improvement register is maintained and includes improvements informed by consumer and staff feedback, actions identified by system improvements, policy and procedure review, and opportunities to upskill staff and identified training needs. There are established financial management processes to ensure delivery and oversight of CHSP and HCP services. Management described the purchase order system, internal and external reporting obligations, and governance for financial approvals. Workforce governance policies and procedures have been implemented. There are effective systems and processes to ensure the workforce is competent and has the knowledge to effectively perform their roles and are trained and supported to deliver the outcomes required by the Quality Standards, including the assignment of clear responsibilities and accountabilities. Management acknowledge that due to being in a remote location, recruiting trained and appropriate staff is difficult, however, there are enough staff to cover staffing shortfalls. There are processes to monitor for and implement changes to regulatory requirements, and the organisation is keeping up to date with upcoming aged care reforms. There are monitoring systems to track COVID-19 vaccinations, training, police checks, drivers’ licences, and required certifications. The organisation has an established feedback and complaints framework, supported by policies and procedures, and a complaints register is maintained which enables feedback and complaints to be recorded, actioned and monitored. Complaints data, including serious complaints and incidents, are reported to the board.

Based on the Assessment Team’s report, I find requirement (3)(c) in Standard 8 Organisational governance compliant.

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