CO AS IT Italian Association

Performance Report

67 Norton Street
LEICHHARDT NSW 2040
Phone number: 02 9564 0744

**Commission ID:** 200149

**Provider name:** CO.AS.IT. - Italian Association of Assistance

**Quality Audit date:** 4 March 2022 to 9 March 2022

**Date of Performance Report:** 26 May 2022

# Performance report prepared by

M Murray, 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

**Home Care:**

* Co.As.It. - Community Care Packages Program, 17470, 67 Norton Street, LEICHHARDT NSW 2040
* CO.AS.IT. - EACH, 17471, 67 Norton Street, LEICHHARDT NSW 2040

**CHSP:**

* Allied Health and Therapy Services, 4-7XVMT2S, 67 Norton Street, LEICHHARDT NSW 2040
* Transport, 4-7XVMT5J, 67 Norton Street, LEICHHARDT NSW 2040
* Social Support - Group, 4-7XVMT8A, 67 Norton Street, LEICHHARDT NSW 2040
* CHSP Personal Care, 4-DRX19T0, 67 Norton Street, LEICHHARDT NSW 2040
* Domestic Assistance, 4-DSOB33S, 67 Norton Street, LEICHHARDT NSW 2040

# Overall assessment of Service/s

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 1(3)(a) | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 1(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 1(3)(c)  | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 1(3)(d)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Requirement 1(3)(e)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Requirement 1(3)(f)  | HCP | Compliant |
|  | CHSP | Compliant |
| Standard 2 Ongoing assessment and planning with consumers |
|  | HCP  | Not Compliant |
|  | CHSP | Not Compliant |
| Requirement 2(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 2(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 2(3)(c) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 2(3)(d) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 2(3)(e) | HCP | Not Compliant |
|  | CHSP | Not Compliant |

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| --- | --- | --- |
| Standard 3 Personal care and clinical care | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 3(3)(a) | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 3(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 3(3)(c)  | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 3(3)(d)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Requirement 3(3)(e)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Requirement 3(3)(f)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Requirement 3(3)(g)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Standard 4 Services and supports for daily living |
|  | HCP  | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(c) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(d) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(e) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(f) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(g) | HCP | Compliant |
|  | CHSP | Compliant |

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| Standard 5 Organisation’s service environment |
|  | HCP  | Not Applicable |
|  | CHSP | Compliant |
| Requirement 5(3)(a) | HCP | Not Applicable |
|  | CHSP | Compliant |
| Requirement 5(3)(b) | HCP | Not Applicable |
|  | CHSP | Compliant |
| Requirement 5(3)(c) | HCP | Not Applicable |
|  | CHSP | Compliant |
| Standard 6 Feedback and complaints | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 6(3)(a) | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 6(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 6(3)(c)  | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 6(3)(d)  | HCP | Compliant |
|  | CHSP | Compliant  |
| Standard 7 Human resources | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 7(3)(a) | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 7(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 7(3)(c)  | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 7(3)(d) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 7(3)(e)  | HCP | Compliant |
|  | CHSP | Compliant |

|  |  |  |
| --- | --- | --- |
| Standard 8 Organisational governance | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 8(3)(a) | HCP  | Compliant |
|   | CHSP | Compliant |
| Requirement 8(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(c)  | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(d) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(e)  | HCP | Compliant |
|  | 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
* The approved provider’s response of 4 May 2022.

# STANDARD 1 Consumer dignity and choice

#  HCP Compliant 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

Consumers and representatives said that staff treat them respectfully and support them to make informed choices. They provided examples of how they are assisted to live the life they choose. Consumers and representatives confirmed that the service responds to their cultural, linguistic and personal preferences and staff protect their privacy.

Staff demonstrated their knowledge of the consumers and how they preferred to receive services. Staff are guided by a code of conduct that requires that services are provided respectfully and in an inclusive manner. Review of documents including the consumer files, the service agreement, a consumer handbook, policies and procedures, provided evidence that consumers are informed of their rights and supported to exercise choice and independence.

This Quality Standard for both the Home care packages service and the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

**Assessment of Standard 1 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(a) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP  | Compliant |
|  | 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.*

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(f) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers

#  HCP Not Compliant CHSP Not 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 Assessment Team’s report outlines most consumers/representatives confirmed they are involved in assessment and care planning processes and their individual needs and preferences are discussed.

Management said improvements to assessment and care planning has been a focus of the organisation, a suite of validated assessment tools has been adopted and staff training on these tools has been provided.

The Assessment Team’s review of care planning documentation demonstrated that care and services have been reviewed when circumstances change for a consumer, however, periodic reviews for a significant numer of consumers are outstanding. A schedule is in place with a completion date for all reviews to be finalised by July 2022.

Staff demonstrated to the satisfaction of the Assessment Team that outcomes of assessment and care planning are used in the delivery of care and services for consumers.

The Assessment Team sampled recently reviewed care plans where the new assessment tools had been applied and found risks are being effectively identified, strategies are being put in place and referrals are occurring.

Requirement 2(3)e of Standard 2 has been found non compliant as a significant number of consumers have outstanding reviews of care and services.

This Quality Standard for the Home care packages service has been found Not Compliant as one of the five Requirements of the Standard has been found Not Compliant.

This Quality Standard for the Commonwealth home support program has been found Not Compliant as one of the five Requirements of the Standard has been found Not Compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP  | Compliant |
|  | 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.*

The Assessment Team’s report states Assessments were sighted on all sampled consumers’ files. These included consumers who were reviewed/reassessed as part of a new more comprehensive assessment processes. Several care plans were viewed that evidenced specific strategies for care staff, for example to manage mobility risks of consumers or to support consumers living with dementia. Referrals were also sighted to ensure the delivery of safe services, such as to occupational therapists for home modifications or for consumer assessment for appropriate equipment.

I have considered further evidence the Assessment Team submitted for this requirement in the compliance finding of Requirement 2(3)(e) which has been found non-compliant.

Based on the evidence, summarised above, the approved provider complies with this Requirement.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(c) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(d) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(e) | HCP  | Not Compliant |
|  | CHSP  | Not 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.*

The Assessment Team found, while reviews of care and services are occurring when circumstances change or when incidents occur, regular reviews are not occurring as scheduled.

Management said this was due a variety of reasons which have been addressed through staff education, recruitment and the establishment of a monitoring / auditing system. Further, the COVID-19 pandemic also impacted the work priorities of staff and staff availability.

I acknowledge the ongoing continuous improvement actions of the approved provider however at the time of the audit, a significant number of reviews are yet to occur. The continuous improvement plan submitted as part of the approved provider’s response notes a finalisation date for all outstanding work of July 2022.

Based on the evidence, summarised above, at the time of the audit the approved provider did not comply with this Requirement.

# STANDARD 3 Personal care and clinical care

#  HCP Compliant 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

Consumers and representatives interviewed were satisfied overall with the care and services they are currently receiving, including personal care and clinical care services. Those who are receiving or who had received clinical services said these services were organised easily and helped them to recover quickly.

Nursing staff provided examples of where high impact and high prevalence risks were identified for consumers such as mobility/falls, skin integrity/wounds, pain management/medications or sudden weight loss and how these are managed.

Clinical risks when identified are discussed at regular clinical team meetings with management. Wound care and other registers allow clinical staff to monitor the clinical progress and outcomes of consumers.

This Quality Standard for both the Home care packages service and the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

**Assessment of Standard 3 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(a) | HCP  | Compliant |
|  | 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.*

Consumers told the Assessment Team they are satisfied with their care.

The Assessment Team reviewed consumer files and noted they included individual preferences for consumers receiving personal or clinical care services, including their preferred level of independence and directions for care workers when providing care. Further, where clinical care was provided assessments and progress notes regarding ongoing care were evidenced.

Where consumers and/or representatives wanted adjustments to how care is delivered, the service has met with the consumer to see how they can better tailor care.

I have considered further evidence the Assessment Team submitted for this requirement in the compliance finding of Requirement 2(3)(e).

Based on the evidence, summarised above, the approved provider complies with this Requirement.

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(c) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(d) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(e) | HCP  | Compliant |
|  | 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.*

The Assessment Team found progress note entries demonstrating changes in the consumer’s condition, needs and/or preferences are communicated and acted on.

Staff said they are usually provided with sufficient verbal information on a new consumer to provide suitable care, they can also access information in the care plan at the consumer’s home.

Registered Nurses and care managers are available to discuss urgent concerns regarding consumers’ care and staff write progress notes to share information with other staff who may also be involved in providing services to that consumer.

I have considered further evidence the Assessment Team submitted for this requirement in the compliance finding of Requirement 2(3)(e).

Based on the evidence, summarised above, the approved provider complies with this Requirement.

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(g) | HCP  | Compliant |
|  | 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

#  HCP Complaint 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

The Assessment Team’s report noted overall sampled consumers said they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do.

Consumers interviewed confirmed that they are supported to keep in touch with people who are important to them and can access services to help them do this.

Consumers described how they are enjoying accessing the community independently and said the service supports them to do this, including visiting family and friends, going shopping and being transported to meet friends for coffee or attend particular social groups.

Consumers said they felt supported to live their life the way they choose and had their preferences considered when receiving care.

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

This Quality Standard for both the Home care packages service and the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(a) | HCP  | Compliant |
|  | 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.*

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(c) | HCP  | Compliant |
|  | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(d) | HCP  | Compliant |
|  | 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.*

Care staff told the Assessment team that they have the information they need to support consumers and if they notice someone needing additional support in any aspect of life they can share this information with the care coordination team.

Management outlined to the Assessment Team a range of improvements implemented across the service. These included staff training in assessment and coordination the implementation of a new electronic notes system and processes to improve communication with subcontracted service providers. A dedicated operations position has been established and monthly contractor meetings are occurring.

I have considered further evidence the Assessment Team submitted for this requirement in the compliance finding of Requirement 2(3)(e).

Based on the evidence, summarised above, the approved provider complies with this Requirement.

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(f) | HCP  | Compliant |
|  | CHSP  | Compliant |

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

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

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 Organisation’s service environment

#  HCP Not Applicable 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 Assessment Team observed one of the service environments and spoke with consumers about their experiences of the service environment and interviewed care staff about the suitability and safety of equipment.

Overall consumers indicated that they feel safe and comfortable in the service environment, they said they can move around the service easily and it is clean and well maintained.

Environmental safety checks are carried out on a regular basis and any hazards identified are followed up through the hazard/incident reporting system at the service. Maintenance is responsive to any requests for repairs.

Discussions with management and the Social support group team leader reflected that similar environments are provided at a range of locations across the Sydney region.

This Quality Standard for the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

This standard is Not Applicable to the Home care package service.

## Assessment of Standard 5 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP  | Not Applicable |
|  | CHSP  | 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) | HCP  | Not Applicable |
|  | CHSP  | 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) | HCP  | Not Applicable |
|  | CHSP  | Compliant |

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 Feedback and complaints

#  HCP Compliant 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 interviewed were aware that they can provide feedback to the service and make a formal complaint. They provided evidence of feedback they provided in relation to their care and services and how the service responded. They confirmed that they are assisted to access an advocacy service, if required, and are provided with information to make an external complaint.

Staff interviewed said they encourage consumers to provide feedback. Where a consumer wishes to make a complaint about their care and services this is reported to management for their action.

Feedback and complaints processes are in place that ensure consumers have their complaints addressed in an open and transparent manner. Complaints are recorded in a register and policies and procedures guide staff in relation to recording and acting on feedback and complaints.

This Quality Standard for both the Home care packages service and the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

## Assessment of Standard 6 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(a) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(b) | HCP  | Compliant |
|  | 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) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resources

#  HCP Compliant 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 and representatives interviewed had no concerns in relation to the skills and experience of the staff. Consumers confirmed that coordination staff work with them to tailor services to meet their needs, and that care workers delivering in home services were respectful and provided them with quality services.

Recruitment processes are overseen by senior management and ensure that staff are selected that can provide the care and services to the consumer in a manner that responds to the consumer’s cultural and linguistic background.

The service provider subcontracts allied health and clinical care services and has process in place to ensure sufficient, skilled, and qualified staff are available to provide the funded services.

Management outlined workforce strategies during the COVID-19 pandemic advising where staff have had to isolate the service has prioritised essential shifts and at risk consumers. Consumers and representatives discussed short notice changes to staff occurring but were generally satisfied with continuity of care and services.

This Quality Standard for both the Home care packages service and the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

## Assessment of Standard 7 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(a) | HCP  | Compliant |
|  | 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.*

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(c) | HCP  | Compliant |
|  | CHSP  | 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) | HCP  | Compliant |
|  | CHSP  | Compliant |

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(e) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance

#  HCP Compliant 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 interviewed were satisfied with the way the service is run and confirmed they are consulted to improve service delivery. Management demonstrated there are systems and processes relating to governance that are regularly reviewed to support the safe and effective delivery of quality services. Service and consumer risks are identified and managed, and processes are in place such as work health and safety, safe food handling, infection control, and management of consumer related risks.

This Quality Standard for both the Home care packages service and the Commonwealth home support service is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

## Assessment of Standard 8 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(a) | HCP  | Compliant |
|  | CHSP  | Compliant |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(b) | HCP  | Compliant |
|  | 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) | HCP  | Compliant |
|  | 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.*

The Assessment Team found deficits in sub-requirement (i) information management. I have considered the evidence the Assessment Team submitted for this sub-requirement in the compliance finding of Requirement 2(3)(e) which has been found non-compliant.

I am persuaded by the Approved Provider’s response that the service now has the governance structures in place to identify and correct any lapse of information management in future. The response includes a continuous improvement plan outlining actions, accountabilities and timelines.

The Approved provider’s response notes a records management policy is now in place and staff training in assessment and care planning has occurred. The service’s quality framework includes regular auditing of information systems and corrective actions being undertaken as required.

Based on the evidence, summarised above, I am satisfied the approved provider complies with this Requirement.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) | HCP  | Compliant |
|  | 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) | HCP  | Compliant |
|  | 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

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

* In relation to Standard 2 Requirement 2(3)(e) the approved provider is to ensure that planned care plan reviews are completed.