**Performance**

**Report**

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| Name: | Coastlink Respite Care |
| Commission ID: | 200389 |
| Address: | 7/10 William Street, GOSFORD, New South Wales, 2250 |
| Activity type: | Quality Audit |
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| Performance report date: | 21 June 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.

# Service included in this assessment

Home Care Packages (**HCP**) included:  
Provider: 10225 Central Coast Alternative Care Group Ltd  
Service: 28297 Central Coast Alternative Care Group Ltd. t/as Coastlink  
  
Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7873 Central Coast Alternative Care Group Ltd  
Service: 24084 Central Coast Alternative Care Group Ltd - Care Relationships and Carer Support  
Service: 24085 Central Coast Alternative Care Group Ltd - Community and Home Support

**This performance report**

This performance report for Coastlink Respite Care (**the service**) has been prepared by M.Wyborn, 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.

# Material relied on

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

* the assessment team’s report for 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, and
* the provider’s response to the assessment team’s report received 29 May 2024.

# 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

Consumers and representatives advised that staff treat them with dignity and respect when delivering care, when providing social support and when communicating with them. Consumers advised that they are confident staff know about their culture and background and the things that are important to them. Support workers and other staff spoke respectfully about consumers and demonstrated appropriate knowledge about individual consumers. Case managers and care coordinators maintain routine contact with consumers to ensure they are supported, respected and valued. Consumer care plans demonstrated that consumer culture, diversity, life history, relationship information and care preferences are clearly documented.

The service demonstrated that care and services are culturally safe for consumers and individual consumer cultural information is highlighted in their care planning documentation. Staff demonstrated knowledge on how to easily locate information about a consumer’s cultural needs in their care plan and highlighted that this information is available electronically. Case managers and care coordinators demonstrated how they match consumers to staff who speak the same language if required.

Consumers advised they are supported to exercise choice and advised that the service assists them to maintain relationships in the community and develop their independence at home. Consumers advised they make their own decisions regarding the way their services are delivered and who they would like to be involved in their care. Case managers, care coordinators and support workers highlighted that consumers have choice in the services they receive and demonstrated how they support consumers to maintain connections with others. Consumer care planning documentation appropriately identifies individual consumer choice and decisions about the services they receive, including who is involved in their care.

Consumers and representatives advised they are supported to engage in risk to enable them to maintain their independence and continue to live at home. Management, care coordinators and case managers explained that consumers are provided with information about dignity of risk and informed decision making upon admission. Staff demonstrated how they effectively support consumers to live life fully and engage risk if they wish.

Consumers and representatives advised that the service ensures they are well informed when they commence services and relevant information is provided by their case manager. Case managers and care coordinators demonstrated that the service supplies a service agreement, service consent agreement, advocacy and complaints information and the Charter of Aged Care Rights. In addition, consumers and representatives confirmed they receive clear financial statement for the services they receive.

The service demonstrated that individual consumer privacy is respected, and personal information is kept confidential. Staff demonstrated they maintain privacy by not discussing consumers’ personal details with anyone other than the case manager. Support workers demonstrated an appropriate awareness of their responsibilities to maintain consumer privacy and to keep all their personal information confidential.

# 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 service demonstrated that assessment and planning appropriately considers risk to individual consumers and informs delivery of safe care. Consumers and representatives provided positive feedback about assessment and planning they receive and indicated information gathered at the initial visit informs their care. Case managers (HCP) and care coordinators (CHSP) appropriately use information from each consumers’ My Aged Care plans, as well as information gathered from the consumer themselves and their family at the initial home visit assessment. This information is used to develop risk assessments, consumer profiles and a relevant care plan. Individual consumer risk assessments and care plans are reviewed annually or when circumstances change, and documentation is updated to include current intervention and strategies to manage or to mitigate the risk to the consumer.

The service demonstrated that assessment and care planning appropriately addresses consumer current needs, goals and preferences. Evidence of current needs, goals and preferences was found in consumer care plans and was evidenced through discussions with consumers regarding advanced care planning and end of life care. Consumers and representatives advised of their satisfaction with how the service meets their needs, goals and preferences. Staff demonstrated relevant knowledge of what was important to consumers in terms of how their care is delivered, and case managers and care coordinators highlighted that not all consumers wanted the service to have a copy of their advanced care directives.

The service demonstrated that assessment and planning is performed in partnership with individual consumers and those they wish to be involved in their care. Care includes subcontracted brokered services, private services and other organisations who provide services to meet the needs of consumers. Consumers and representatives advised they are involved in care planning discussions and decision making.

Consumers and representatives advised they have copies of their care plan in their home. Consumers and representatives explained the service keeps them informed of outcomes of assessments, and that no changes are made without their consent. Consumers advised communicating with the service is easy. Regular care plan reviews are completed in person by the case manager at least annually or when changes occur.

The service demonstrated that care and services are routinely reviewed for effectiveness and when incidents occur or when circumstances change. Care is reviewed at least annually, and when required. Staff and consumers highlighted that they regularly communicate with the case manager and care coordinator when changes occur that impact on the needs of the consumer.

# 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 service demonstrated that consumers receive safe and effective personal and clinical care. The service utilises subcontracted/brokered services for clinical review and interventions by registered nursing staff. Support workers provide personal care that is tailored to individual consumer needs. Consumers and representatives advised that personal care services are safe and are in line with their needs. Consumers and representatives highlighted their satisfaction with the clinical care consumers receive. Support workers advised that the service ensures they are trained and equipped to maintain focus on delivery of personal care that is tailored to each consumer and supports their individual needs and preferences.

The service demonstrated high impact or high prevalence risks associated with the care of consumers are effectively managed. The service identified falls, living alone and medication management as high impact or high prevalence risks for consumers within the service. An incident register is maintained and monitored by management, and support workers are made aware of consumer risks and how to manage them through the service’s electronic care management system (ECMS). Consumers are prompted and supported by support workers to administer their medications using webster packs. As part of the management of the risks associated with living alone, consumers identified as a high risk have locked key boxes on their premises which staff can gain access if the consumer does not respond and after consulting with their case managers. Consumers and representatives highlighted their satisfaction that risks associated with their care are well managed.

The service is not currently managing any consumers nearing end of life or identified as receiving palliative care. However, the service has relevant processes to implement support for consumers who require palliative care. Case managers and care coordinators explained the service refers consumers to the local health district for assessment for palliative care and there is also a palliative care ‘retreat’ the service can refer consumers to for additional support. Case managers and care coordinators advised they reassess consumers regularly to ensure they are accessing the correct support to manage their needs and preferences during this time.

The service demonstrated consumers who experience deterioration or change in condition have their needs responded to in a timely manner. Consumers and representatives advised of their satisfaction in relation to communication of their care needs and preferences within the organisation or with other subcontracted or brokered staff and/or their medical officers. The service demonstrated that information about consumer conditions, needs and preferences are communicated within the organisation and this is based on consumer consent. The service utilises an effective ECMS, and staff are able to access this through their mobile telephones to ensure the consumers’ needs and preferences are met. The ECMS includes consumer contact details, care plan, and risk information, including mitigation strategies.

The service demonstrated appropriate and timely referrals for consumers to other organisations and providers of care and consumers highlighted their satisfaction of the support they receive to access other services and supports. The service subcontracts brokered service providers such as registered nursing staff, speech therapists, occupational therapists, dietitians, physiotherapists and podiatrists.

The service demonstrated appropriate processes to minimise infection related risks, and staff demonstrated appropriate knowledge of the measures they take to minimise infection related risk such as COVID-19. Consumers and representatives advised that staff routinely implement appropriate infection control practises when attending to their care.

# 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. | Compliant | Compliant |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant | Not applicable |

Findings

Consumer and representatives provided positive feedback on how they are supported for daily living according to their needs, goals, and preferences. Case managers and support workers demonstrated how they listen to the requests of consumers and endeavour to provide the best service possible. Consumer care planning documentation appropriately highlights the daily living and social support services required to best support individual consumers.

The service demonstrated effective services and supports to promote consumer emotional, spiritual, and psychological well-being. Consumers and representatives advised the service appropriately recognises if any additional or targeted support is required.

Consumers advised they are provided with the opportunity to build and maintain relationships and pursue activities of interest within their community. They advised the service provides opportunity for them to do things that are meaningful to them, and that support workers encourage and support them during their social support visits. Support workers demonstrated appropriate knowledge on what is important to individual consumers and where they like to go on their social support outings, including shopping, going for walks, attending the day respite centre and outings in the local community.

Consumers highlighted that the service effectively maintains appropriate processes to document and share information about their needs and preferences both within the service and with others when required. The service’s electronic care management system (ECMS) effectively communicates consumer needs to support workers and other visiting staff. The service demonstrated that consumer care planning documentation provides relevant information related to services and supports for each consumer’s daily living.

The service demonstrated timely and appropriate referrals to individuals, other organisations and providers of other care and services to enhance consumer lifestyle. These include Dementia Support Australia and occupational therapists as required.

The service provides occasional light meals and snacks at the respite day centre in Woy Woy. The service demonstrated the meals they provide are varied and of suitable quality and quantity. The Assessment Team observed a morning tea service that included a variety of foods and drinks. Consumers provided positive feedback highlighting that the food had variety and there was enough to eat. Staff were observed following food safety protocols that were displayed in the kitchen.

The service demonstrated that equipment is provided for consumers receiving HCP packages when there is a need. The service demonstrated that consumer assistive devices and mobility aids are appropriately and comprehensively assessed by an occupational therapist and deemed safe and suitable for the consumer. Support workers highlighted that equipment is listed in individual consumer care planning documentation and explained that they receive training on how to use the equipment safely when needed. Support workers also receive relevant information on any aids consumers use when accessing the community, for example, walking sticks, 4 wheeled walkers or if they need a wheelchair for outings. The service demonstrated that consumer equipment is cleaned as required. Case managers demonstrated that HCP consumer equipment is accessed based on individual consumer needs and the service supports assessment and purchasing through individual consumer package funds after consultation and assessment.

# 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. | Compliant | 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. | Compliant | Compliant |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Compliant | Compliant |

Findings

The Assessment Team observed the day respite centre and service environment at Woy Woy, which is used for group social support sessions. The service environment is upgraded and has access for people with various levels of ability and mobility. Consumers attending the weekly social activities are able to undertake activities of their choice, and consumers who visit the service described being very satisfied with the environment and enjoy attending the service.

Consumers who attend the day respite centre advised they are satisfied with the cleaning and maintenance at the centre. Management demonstrated appropriate processes to ensure the environment is clean, well maintained and monitored for hazards. Staff advised that any maintenance or cleaning issues are promptly addressed and reported to minimise risk to consumers, staff and visitors.

Furniture, fittings and equipment at the service are clean and well maintained. Management and staff demonstrated an effective cleaning and maintenance program for furniture, fittings and equipment, including vehicles used to support consumers attending social and medical activities. Consumers advised that they feel safe travelling on the service bus.

# 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

Consumers and representatives advised they are supported to provide feedback and make complaints. They advised they are comfortable raising matters with staff and management, and advised the service has provided them with information on how to make complaints. Staff advised they encourage consumers or their representatives to notify the case managers (HCP) or care coordinators (CHSP) when consumers raise issues with them. Management demonstrate appropriate ways they encourage and support consumers to provide feedback and complaints including via their website, through interactions with case managers and care coordinators and via the service’s annual consumer satisfaction survey.

Consumers and representatives advised the service supported their awareness of advocacy and language services and other methods for raising complaints. Consumers and representatives advised that this information is included in their initial assessment pack which includes a consumer handbook detailing relevant internal and external complaint mechanisms. This includes the Aged Care Quality and Safety Commission and other relevant advocacy service providers. Management demonstrated an appropriate knowledge of open disclosure principles, and explained that they routinely apologise to consumers and representatives if something goes wrong. The service administers a compliments and complaints register.

The service demonstrated effective systems and processes for reviewing complaints and feedback, and management demonstrated that consumer complaints and feedback is incorporated into the services operational continuous improvement process. Complaints data is analysed and effectively investigated and responded to by management and discussed at relevant meetings. The service demonstrated where consumer complaint investigations have led to appropriate system and process changes to better support consumers.

# 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 service demonstrated that the workforce is planned to enable delivery of safe and quality care. Management demonstrated a planned roster that includes the right skill mix to provide safe, quality services. Consumer needs and preferences are captured from the initial assessments and matched with worker skills and experience. If the service is unable to meet consumer preferences the case managers (HCP) or care coordinators (CHSP) liaise with the consumer and or representative. Consumers and representatives provided positive feedback regarding staff and the care and services the consumer receives.

Consumers and representatives advised the staff are routinely kind, respectful and caring. Staff spoke of consumers respectfully and demonstrated how they respect individual consumer culture, getting to understand their preferences and customs. Care planning documentation include relevant information to support consumer culture and diversity as assessed and identified.

Consumers and representatives advised of their satisfaction that staff are meeting their needs. Consumers and representatives advised that staff are trained and competent to deliver the care and services they require. The service demonstrated clear position descriptions that set out the responsibilities and necessary qualifications and skills for each role and the service demonstrated that staff are competent and have the qualifications and knowledge to effectively perform their roles.

Consumers and representatives advised that staff know what they are doing, and highlighted their satisfaction in relation to the care consumers receive. The service administers effective recruitment processes and a robust orientation equips staff to deliver outcomes required by the Quality Standards. The service administers relevant policies and procedures to guide staff in recruitment and induction processes.

The service demonstrated that regular assessment, monitoring, and review of staff performance is undertaken. Performance reviews are conducted annually and the service maintains a register to capture past reviews and future performance review requirements. The register is maintained by management and informal monitoring of the service’s staff occurs through feedback from consumers and representatives.

# 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 organisation demonstrated that consumers and representatives are engaged in the delivery and evaluation of care and services and are supported by the service in that engagement. Consumers and representatives advised they feel supported to provide feedback about the delivery of services they receive. The Chief Executive Officer (CEO) demonstrated that consumer feedback is sought through annual satisfaction surveys and via feedback and complaints mechanisms. Case managers (HCP) work with consumers and representatives to ensure consumers direct the services they receive and to identify opportunities for improvements in care and services. Care coordinators (CHSP) work with consumers in relation to the activities, outings and events facilitated at their day respite centre and in the community to identify any opportunities for improvements to the services provided. The organisation has commenced a Consumer Advisory Board (CAB) and the CEO explained that the organisation continues to embed the CAB and its purpose.

The organisation’s Board of Directors demonstrated their responsibility for oversight and governance of the service’s performance. The organisation’s subcommittees provide relevant focus on oversight of governance, corporate and clinical services as well as overseeing finance, risk, and audits. The CEO provides routine and relevant reports to the subcommittees and to the Board, which include data aligned to the subcommittees’ functions and governance role. This includes areas such as key performance indicators, deficiencies in systems, areas for improvements, workforce issues, regulatory compliance, critical incidents, risks to consumers, and consumer complaints. The organisation demonstrated effective ways they promote a culture of safe, inclusive and quality care, including, via the organisation’s vision and values which promote a culture of safe, inclusive and quality care services, and a relevant code of conduct.

The organisation demonstrated effective governance systems relating to information management, continuous improvement, financial governance, workforce governance, complaints and feedback and regulatory compliance. The service’s information systems provide stakeholders with relevant information and consumers and representatives advised the information consumers receive in relation to care, services and fees is clear and current. The service’s electronic care management system (ECMS) ensure staff have access to the information they need to effectively deliver care and services to consumers. Staff have electronic access to policies and procedures to support them in their role. Information is also available to consumers, representatives, staff and other stakeholders through the organisation’s website, social media and newsletters. The organisation demonstrated that their subcommittees and Board are committed to continuous improvement, and the organisational continuous improvement system includes a plan for continuous improvement. The service identifies opportunities for improvement through areas such as consumer feedback, complaints, surveys, review of clinical indicators, incidents, and staff meetings. The organisation also demonstrated the Board has effective feedback and complaints governance systems and that consumer feedback and complaints inform continuous improvement.

The organisation demonstrated that their risk management systems and practices are effective in managing high impact and high prevalence risks, identifying abuse and neglect and supporting consumers to live the best quality of life they can. The organisation’s risk management framework and incident management system appropriately identifies associated risk consequences and escalation processes to the CEO and to the Board. The organisation’s subcommittees oversee risk to consumers and the leadership team review incidents and risks to consumers and routinely report to the CEO. The organisation maintains relevant risk management and risk mitigation protocols to best support service level staff.

Governance of clinical care is managed at the governance, corporate and clinical services subcommittee. The oversight of direct clinical services is the responsibility of case managers, care coordinators and the CEO. The organisation is recruiting for a clinical nurse specialist (registered nurse) with responsibilities for developing a clinical governance framework and associated policies. The organisation subcontracts/brokers clinical care services and the organisation is now receiving relevant reporting regarding the clinical service provided to consumers from a subcontracted/brokered staff. The organisation administers effective protocols relating to the use of restrictive practices, and administers appropriate policies and procedures related to feedback and complaints. This includes the principles of open disclosure, and staff and management demonstrated appropriate knowledge and application of open disclosure practices.

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)