Flourish Australia

Performance Report

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| **Address:** | 232 Derby StreetPENRITH NSW 2750 |
| **Phone:** | 02 9393 9018 |
| **Commission ID:** | 200918 |
| **Provider name:** | Psychiatric Rehabilitation Association |
| **Activity type:** | Quality Audit |
| **Activity date:** | 15 July 2022 to 19 July 2022 |
| **Performance report date:** | 5 September 2022 |

# Performance report prepared by

A. Grant, 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:**

* Flexible Respite, 4-7X9JXW8, 232 Derby Street, PENRITH NSW 2750

# Overall assessment of Service

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| --- | --- | --- |
| 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 |
|  |  |  |
| 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 |
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| Standard 3 Personal care and clinical care | CHSP | Not Applicable |
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| 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 |
| Requirement 4(3)(d) | CHSP | Compliant |
| Requirement 4(3)(e) | CHSP | Compliant |
| Requirement 4(3)(f) | CHSP | Not Applicable |
| Requirement 4(3)(g) | CHSP | Not Applicable |
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| Standard 5 Organisation’s service environment | CHSP  | Not Applicable |
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| 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 |
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| 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 |
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| 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 | Not Applicable |

# 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

Consumers and representatives interviewed by the Assessment Team stated they are treated with dignity and respect and their diversity valued, privacy respected and overall independence and involvement in decision making encouraged. Staff interviewed by the Assessment Team outlined how services consider the individual consumer goals and cater to their specific circumstances. Care planning analysed by the Assessment Team showed documents record the consumers individual goals, identify key tasks and instruct support workers to provide individualised and culturally appropriate services.

Management and staff interviewed outlined how the service provider guides and monitors their daily work practices and implements policies and procedures, induction and training, and employer expectation are relevant to this requirement.

Organisational documents reviewed by the Assessment Team included relevant policies and procedures in relation to the provision of an inclusive and culturally appropriate services. The Assessment Team noted services are provided to consumers of diverse backgrounds, including but not limited to consumers with limited English, financial disadvantage and Aboriginal and Torres Strait Islander communities.

Coordination staff interviewed outlined how they identify and record the representatives, including detailing the names of each representative, and other professionals, on the form which is signed by the consumer acknowledging consent.

The Assessment Team noted policies and procedures are in place in relation to this requirement, consumer privacy is maintained by staff, and only relevant staff have access to electronic files and these are password protected.

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

**Assessment of Standard 1 Requirements**

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| 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

Consumers and representatives interviewed by the Assessment Team confirmed they are consulted and involved in assessment and planning of their services. Consumers and representatives interviewed by the Assessment Team provided examples of support provided them to develop an appropriate plan of services and outlined how they identify and evaluate their service goals and confirmed the support they receive optimise their health and well-being.

Evidence analysed by the Assessment Team showed organisational policies and procedures, guiding assessment and care planning templates, and electronic information management systems ensures service staff, involved in direct care delivery, work in collaboration with consumers, to deliver services in accordance with their identified care needs, goals and preferences.

Evidence analysed by the Assessment Team showed the Assessment and service planning processes in place includes initial and ongoing review, reassessment and strong ongoing monitoring by support workers and coordination staff.

Consumer documentation analysed by the Assessment Team provided evidence of current updated care plans, agreed upon goals, tasks and instructions for care workers, with consideration of risks to consumers and their changing circumstances.

The Assessment Team analysed care plans and noted these were current, with reviews, conducted at least half yearly, and as circumstances changed. Progress notes sighted by the Assessment Team, included entries by support workers, after each service, and included notes outlining follow-up undertaken by the coordinator.

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

**Assessment of Standard 2 Requirements**

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| 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 careCHSP Not Applicable

### 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

The Quality Standard for the Commonwealth home support programme service is assessed as Not Applicable as seven of the seven specific requirements have been assessed as Not Applicable.

# STANDARD 4 Services and supports for daily livingCHSP 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 by the Assessment Team confirmed supports provided by the service optimise their independence, health, well-being and quality of life. Consumers and representatives interviewed by the Assessment Team provided examples of how the support provided them assists them to continue living their life the way they like.

Service staff interviewed by the Assessment Team demonstrated how services and supports for daily living promote the emotional and psychological well-being of consumers and assists them to take part in the community, interact with others and do things of interest to them.

Evidence analysed by the Assessment Team showed management systems in place ensure service staff, and those involved in direct care delivery, work in collaboration with consumers to identify how best to support them to maintain their mental well-being.

Consumer documentation reviewed by the Assessment Team provided evidence of current care plans, with agreed upon goals, tasks and instructions for support workers, with consideration of risks to consumers and their changing circumstances.

Management interviewed by the Assessment Team outlined how staff are kept informed about the consumer’s needs, condition and preferences. Evidence analysed by the Assessment Team showed coordination staff provide support workers with a verbal brief about the consumer and introduce them prior to service provision, new support workers are buddied with more senior staff and get to know the consumer, before providing the service themselves. Evidence analysed by the Assessment Team showed relevant care plans, service task and progress notes are accessible to support workers and they review these prior to starting the service to check for any changes.

Coordination staff interviewed by the Assessment Team stated they identify the key relationships that consumers wish to maintain, preferred activities and goals in relation to involvement in the community, and design services to assist in meeting these.

Consumer documentation sighted by the Assessment Team provided evidence of a range of supports provided to consumers to help them maintain their relationships and remain active in the community.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five applicable requirements have been assessed as Compliant. Requirements 4(3)(f) and 4(3)(g) are Not Applicable and therefore not assessed.

**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.*

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

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

# STANDARD 5 Organisation’s service environmentCHSP Not Applicable

### 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 Quality Standard for the Commonwealth home support programme service is assessed as Not Applicable as three of the three specific requirements have been assessed as Not Applicable.

# STANDARD 6 Feedback and complaintsCHSP 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 and representatives interviewed by the Assessment Team stated they understand the methods to provide feedback or complain including external avenues, and stated they are confident to do so if the need arose. Evidence analysed by the Assessment Team showed consumers and representatives receive information on external supports like advocacy services to assist with complaints resolution.

Evidence analysed by the Assessment Team showed feedback from consumers and representatives indicated that staff responded to their concerns by providing an immediate resolution. However, Consumers and/or representatives indicated they have had not need to make a complaint to date.

Evidence analysed by the Assessment Team showed the Service Provider has a centralised complaints management system for recording feedback and complaints, established escalation and response structures, open disclosure, analysis of complaint data for trends and links outcomes to broader business learning and continuous improvement. Evidence analysed showed staff receive training in complaint response as appropriate to their roles.

Consumers and representatives interviewed by the Assessment Team stated the service seeks feedback regularly to see if they can improve services. Consumers and representatives stated they are also invited to provide suggestions through consumer satisfaction of services surveys and online suggestions feedback.

Management interviewed by the Assessment Team described how they use the information from surveys and online feedback to gain an insight into the quality of their service. The Assessment Team noted the Program Manager and Regional Manager maintain and review oversight of the complaints and feedback registers and report on any themes or trends monthly via the Quality and Safeguarding Committee. Evidence analysed by the Assessment Team showed the Program Manager and Regional Manager are also responsible for updating their support procedures or through gap analysis develop staff skills based on feedback as part of the continuous improvement process.

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

## Assessment of Standard 6 Requirements

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| 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.*

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| 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 resourcesCHSP 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

Evidence analysed by the Assessment Team showed the workforce is planned and the number and mix of members of the workforce deployed enables the delivery and management of safe and quality services. Feedback from consumers and representatives interviewed by the Assessment Team showed the workforce is sufficient, and consumers receive services when they need them.

Consumers and representatives interviewed by the Assessment Team confirmed support staff deliver the support and assistance when they expect them and at a time suitable for them. Consumers and representatives interviewed by the Assessment Team stated that support staff do not appear rushed and spend time to talk to them about their interests. Consumers interviewed stated they are advised on any shifts that are cancelled or changed. Consumers interviewed by the Assessment Team stated their team coordinator and support staff treat them with kindness and respected them as individuals. Several consumers interviewed by the Assessment Team stated the support staff respect the things that are important to them. consumers also provided positive feedback about office, coordination and management staff.

Management demonstrated to the Assessment Team that systems are in place for the recruitment, training and support to internal staff. Evidence analysed by the Assessment Team showed internal staff have regular monitoring and review of their performance through avenues such as feedback from consumers and annual performance review.

Management interviewed by the Assessment Team advised the skills and knowledge required of each position are identified and documented together with the responsibilities, scope and limitations of each position. Evidence analysed by the Assessment Team showed HR conduct a checklist prior to staff employment to ensure potential staff meet minimal essential criteria for the position. The Assessment Team noted records of worker pre-employment checks, qualifications and experience are maintained. The Assessment Team noted training is available for staff via E-Learning and External providers, completion of training is recorded via an electronic database. The Assessment Team noted managers and team leaders provide supervision and have monthly one on one’s reflective conversations with their staff.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five 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 and representatives interviewed by the Assessment Team described how they are engaged to provide feedback and confirming they were invited to participate in surveys and quarterly care planning sessions. The Assessment Team noted some consumers and/or representatives indicated they would give feedback verbally to staff if they wanted to provide it.

Staff interviewed by the Assessment Team thought the service is well run and they demonstrated an understanding of policies and procedures overseeing the delivery of safe, quality services. Staff interviewed by the Assessment Team stated the service has effective communication systems and can access all the information they need to provide safe care to consumers through their mobile phone. Staff interviewed stated management are approachable and make themselves available at any time to discuss any concerns or answer queries.

Evidence analysed by the Assessment Team showed the organisation has a risk management system in place that identifies and responds to vulnerable consumers. The Assessment Team noted the executive is informed of any emerging risks and trends of incidents, complaints and of continuous improvement activities. Evidence analysed by the Assessment Team showed regular planning mechanisms are in place and management advised they have ready access to all information to ensure transparency and informed decision making. The Assessment Team noted the service focuses on achieving positive lifestyle outcomes for consumers.

Evidence analysed by the Assessment Team showed the service has effective governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance, feedback and complaints.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as four of the four applicable requirements have been assessed as Compliant. Requirement 8(3)(e) is Not Applicable and therefore not assessed.

## 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.*

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| 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.*

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| 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.*

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| Requirement 8(3)(e) | CHSP  | Not Applicable |

*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.