**Performance**

**Report**

**1800 951 822**

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| Name of service: | Goulburn Valley Health |
| Service address: | 121-135 Corio Street SHEPPARTON VIC 3630 |
| Commission ID: | 300060 |
| Home Service Provider: | Goulburn Valley Health |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 8 March 2023 |
| Performance report date: | 8 April 2023 |

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.

**This performance report**

This performance report for Goulburn Valley Health (**the service**) has been prepared by M Abjorensen, 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.

# Services included in this assessment

**Home Care:**

* Community Interlink North - Level 4, 18819, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community Interlink North - Level 2, 18818, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community Interlink South - Level 4, 18881, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community Interlink South - Level 2, 18880, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community & Integrated Care Division - Hume - EACH Dementia, 18757, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community & Integrated Care Division - Hume EACH, 18758, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community Interlink, 18764, 121-135 Corio Street, SHEPPARTON VIC 3630
* Goulburn Valley Community Options, 18808, 121-135 Corio Street, SHEPPARTON VIC 3630
* Goulburn Valley Community Options, 18809, 121-135 Corio Street, SHEPPARTON VIC 3630
* Community & Integrated Care Division - Hume - EACH Dementia, 18757, 12/1 Stanley Street, WODONGA VIC 3689
* Community & Integrated Care Division - Hume EACH, 18758, 12/1 Stanley Street, WODONGA VIC 3689
* Community Interlink, 18764, 12/1 Stanley Street, WODONGA VIC 3689
* Goulburn Valley Community Options, 18808, 12/1 Stanley Street, WODONGA VIC 3689
* Goulburn Valley Community Options, 18809, 12/1 Stanley Street, WODONGA VIC 3689
* Community & Integrated Care Division - Hume - EACH Dementia, 18757, Benalla Community Health Centre, 45 Coster Street, BENALLA VIC 3671
* Community & Integrated Care Division - Hume EACH, 18758, Benalla Community Health Centre, 45 Coster Street, BENALLA VIC 3671
* Goulburn Valley Community Options, 18808, Benalla Community Health Centre, 45 Coster Street, BENALLA VIC 3671
* Goulburn Valley Community Options, 18809, Benalla Community Health Centre, 45 Coster Street, BENALLA VIC 3671
* Community & Integrated Care Division - Hume - EACH Dementia, 18757, Broadway Street, COBRAM VIC 3643
* Community Interlink, 18764, Broadway Street, COBRAM VIC 3643
* Goulburn Valley Community Options, 18808, Broadway Street, COBRAM VIC 3643
* Goulburn Valley Community Options, 18809, Broadway Street, COBRAM VIC 3643
* Community & Integrated Care Division - Hume - EACH Dementia, 18757, Seymour Hospital, Bretonneux Street, SEYMOUR VIC 3660
* Community & Integrated Care Division - Hume EACH, 18758, Seymour Hospital, Bretonneux Street, SEYMOUR VIC 3660
* Community Interlink, 18764, Seymour Hospital, Bretonneux Street, SEYMOUR VIC 3660
* Goulburn Valley Community Options, 18808, Seymour Hospital, Bretonneux Street, SEYMOUR VIC 3660
* Goulburn Valley Community Options, 18809, Seymour Hospital, Bretonneux Street, SEYMOUR VIC 3660

**CHSP:**

* Centre-based Respite - Care Relationships and Carer Support, 4-B8KBRMB, 121-135 Corio Street, SHEPPARTON VIC 3630
* Flexible Respite - Care Relationships and Carer Support, 4-B8L506N, 121-135 Corio Street, SHEPPARTON VIC 3630
* Specialised Support Services, 4-B8L50KQ, 121-135 Corio Street, SHEPPARTON VIC 3630
* Allied Health and Therapy Services, 4-B8L50AA, 121-135 Corio Street, SHEPPARTON VIC 3630
* Nursing, 4-B8L50DX, 121-135 Corio Street, SHEPPARTON VIC 3630
* Nursing, 4-B8L50DX, C/- Waranga Memorial Hospital, Coyle Street, RUSHWORTH VIC 3612
* Centre-based Respite - Care Relationships and Carer Support, 4-B8KBRMB, Broadway Street, COBRAM VIC 3643
* Flexible Respite - Care Relationships and Carer Support, 4-B8L506N, Broadway Street, COBRAM VIC 3643

# Material relied on

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

* the assessment team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by observations at the service, review of documents and interviews with staff, consumers/representatives and others

# Assessment summary for Home Care Packages (HCP)

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| Standard 1 Consumer dignity and choice | Not Applicable |
| **Standard 2** Ongoing assessment and planning with consumers | **Not applicable as not all requirements have been assessed** |
| **Standard 3** Personal care and clinical care | **Not Applicable** |
| **Standard 4** Services and supports for daily living | **Not Applicable** |
| **Standard 5** Organisation’s service environment | **Not Applicable** |
| **Standard 6** Feedback and complaints | **Not Applicable** |
| **Standard 7** Human resources | **Not Applicable** |
| **Standard 8** Organisational governance | **Not applicable as not all requirements have been assessed** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| --- | --- |
| Standard 1 Consumer dignity and choice | Not Applicable |
| **Standard 2** Ongoing assessment and planning with consumers | **Not applicable as not all requirements have been assessed** |
| **Standard 3** Personal care and clinical care | **Not Applicable** |
| **Standard 4** Services and supports for daily living | **Not Applicable** |
| **Standard 5** Organisation’s service environment | **Not Applicable** |
| **Standard 6** Feedback and complaints | **Not Applicable** |
| **Standard 7** Human resources | **Not Applicable** |
| **Standard 8** Organisational governance | **Not applicable as not all requirements have been assessed** |

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |

Findings

The Decision Maker finds the service is compliant and acknowledges the service has effective implemented improve actions to demonstrate assessment and planning informs safe and effective care delivery.

Through evidence collected by the Assessment Team, assessment and planning procedures demonstrated relevant consumer information is captured to inform care delivery, with consideration to consumer risks, health and wellbeing. For example:

Through interviews, management and staff could describe the care needs of consumers’ needs and how assessment and planning informs care delivery.

Assessment templates use validated assessment tools and includes prompts for staff to complete further assessments and initiate referrals, where required.

Sampled care files included consumer medical conditions, specific interventions to manage relevant risks and referrals to clinicians to inform care delivery. While bed pole risk assessment and documentation was not always clearly documented, through interviews staff demonstrated these discussion with consumers do occur and management advised they will record discussions in the future.

The Assessment Team provided examples where assessment and planning, for sampled consumers, identified, and implemented, medication support needs for a consumer experiencing cognitive decline and occupational therapy recommendations were implemented to manage a consumer’s risk of falls.

# 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |

Findings

The Decision Maker finds the service is compliant following the effective implementation of improvements in relation to the risk management systems.

In relation to managing high impact high prevalence risks, the Assessment Team reported implemented improvements have translated to greater oversight of risks associated with the care of each consumer. For example:

The revised staff manual to guides staff on risk identification and incident management; board reports contain incident data; monthly internal audits monitor consumer care documentation; and assessment templates prompts staff to identify consumer risk and implement relevant strategies, including referrals.

In relation to identifying and responding to abuse of consumers, management advised the Assessment Team the service has revised policies and procedures to reflect the expansion of the serious incident response scheme (SIRS) into home services. Staff reported they have received face-to-face training and online modules related to SIRS.

* The Assessment Team reviewed relevant procedures which contained relevant guidance for staff to report incidents and escalate, accordingly, through the required avenues.

In relation to consumers being supported to live the best life they can, the Assessment Team provided statements from consumers and representatives which described extensive support received during difficult periods and ongoing services which preserve the wellbeing and independence of consumers.

In relation to incidents being managed and prevented, the organisation maintains an electronic incident management system, including an incident register and incident reporting software. Interviews with management and staff demonstrated an understanding to report all incidents, including those that occur outside service provision hours. Management advised roles and responsibilities are assigned within the service to manage and prevent incidents.

* The Assessment Team reviewed care documentation which evidenced communication protocols with other providers of care relating to incidents or changes in care needs.

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