Haisey Home Care Services

Performance Report

Unit 10, 39 Eucumbene Drive   
RAVENHALL VIC 3023  
Phone number: 03 8358 5945

**Commission ID:** 301038

**Provider name:** Haisey Home Care Service Pty Ltd

**Assessment Contact - Desk date:** 7 April 2022 to 8 April 2022

**Date of Performance Report:** 3 June 2022

# Performance report prepared by

R Reid, 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:**

* Haisey Home Care Services - " Supporting Independence", 27239, Unit 10, 39 Eucumbene Drive, RAVENHALL VIC 3023

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |

# Detailed assessment

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 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 Assessment Contact - Desk; the Assessment Contact - Desk report was informed by a review of documents and interviews with clinical, care and management staff and consumers.

# STANDARD 2 Ongoing assessment and planning with consumers

### 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 Quality Standard does not have an overall compliance finding as only three of the five specific requirements of Standard 2 have been assessed at the time of this Assessment Contact.

The requirements assessed, and corresponding compliance finding is noted below.

### Requirement 2(3)(a) 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 service was able to demonstrate how assessment and planning, including consideration of risks to consumer’s health and well-being, informs the delivery of safe and effective care and services.

Care documentation viewed for 8 sampled consumers showed consumers had been assessed on entry to the service, and when reviews occurred, and that care and service plans were developed and included individualised strategies to manage identified risks.

Consumers and representatives interviewed were satisfied that assessment and care planning informs the safe and effective delivery of their care and services.

Staff described the assessment and planning process in detail including identification of risk, external referrals to allied health professionals for further assessments, the use of assessment tools and the practice of liaising with medical officers to obtain medical summaries for all consumers to inform assessment and planning.

The service has policies and procedures to guide staff in relation to assessment and planning, including in relation to risks, at consumer admission, annual reviews or as required.

On the balance of evidence available, summarised above, I find the approved provider complies with this requirement.

### Requirement 2(3)(d) 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.*

The service was able to demonstrate the outcomes of assessment and planning are communicated to the consumer or their representative and documented in a care plan, which is readily available to the consumer and where services are provided.

Care planning documents viewed for 8 sampled consumers showed the outcome of assessments and planning had been documented in care and service plans. Consumers and representatives confirmed the outcomes of assessment and planning had been communicated to them and in most cases consumers and representatives were able to confirm they received a copy of the care plan.

Care and service plans documented individualised needs, goals and preferences, including current needs and identified risks. Individualised strategies to guide staff practice and information on how to minimise risks were documented on care plans reviewed.

Staff described how relevant information from the care plan is communicated to staff through their daily schedule and that a copy of care plan is in the consumers’ home. Information is provided to external providers through electronic communication and is available on site.

The service has policies and procedures in relation to assessment and planning and the admission process prompts staff to discuss the care plan with consumers and representatives and provide them with their signed copy.

On the balance of evidence available, summarised above, I find the approved provider complies with this requirement.

### Requirement 2(3)(e) 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 service demonstrated regular review of consumer care and services for effectiveness, when circumstances change or when incidents occur.

Care planning documents for sampled consumers showed evidence of review on both a regular basis and when circumstances change, or incidents occur.

Consumers and representatives confirmed the service regularly communicates with them about their care and services, seeks feedback and makes changes to meet their current needs, goals and preferences.

Staff demonstrated an awareness of the regular care plan review process or more frequently if circumstances or care needs change. They provided examples where they had contacted the care manager to notify of changes and recommend a review of a consumer’s care and services.

Management described the process for the review of consumer’s care and services, which occurs at least every 6 months, when circumstances change or following a change in the consumer’s condition or following an incident.

The service also demonstrated it has policies and procedures in place to support the review of care and services.

On the balance of evidence available, summarised above, I find the approved provider complies with this requirement.

# 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.