Home Instead Toowoomba

Performance Report

245 James St   
TOOWOOMBA CITY QLD 4350  
Phone number: 07 4613 0574

**Commission ID:** 700935

**Provider name:** Sharafield Pty Ltd

**Quality Audit date:** 22 March 2022 to 24 March 2022

**Date of Performance Report:** 10 June 2022

# Performance report prepared by

C.Athanasiou, 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:**

* Home Instead Senior Care Toowoomba, 26800, 245 James St, TOOWOOMBA CITY QLD 4350

**CHSP:**

* Community and Home Support Domestic Assistance, 4-EFRY3ZY, 245 James St, TOOWOOMBA CITY QLD 4350

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | HCP | Not Compliant | | |
|  | | | CHSP | Not 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 | | | Not Compliant |
|  | | CHSP | | | Not 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 | | Not Compliant | |
|  | CHSP | | Not Compliant | |
| Requirement 2(3)(b) | HCP | | Not Compliant | |
|  | CHSP | | Not Compliant | |
| Requirement 2(3)(c) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(d) | HCP | | Not Compliant | |
|  | CHSP | | Not Compliant | |
| Requirement 2(3)(e) | HCP | | Not Compliant | |
|  | CHSP | | Not Compliant | |
| Standard 3 Personal care and clinical care | | | HCP | Not Compliant | | |
|  | | | CHSP | Not Applicable | | |
| Requirement 3(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(b) | | HCP | | | Not Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(g) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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 | | Not Applicable |
|  | CHSP | | Not Applicable |
| Requirement 4(3)(g) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Standard 5 Organisation’s service environment | | | | |
|  | | HCP | Not Applicable | |
|  | | CHSP | Not Applicable | |
| Requirement 5(3)(a) | HCP | | Not Applicable |
|  | CHSP | | Not Applicable |
| Requirement 5(3)(b) | HCP | | Not Applicable |
|  | CHSP | | Not Applicable |
| Requirement 5(3)(c) | HCP | | Not Applicable |
|  | CHSP | | Not Applicable |
| Standard 6 Feedback and complaints | | HCP | Not Compliant | |
|  | | CHSP | Not 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 | | Not Compliant |
|  | CHSP | | Not Compliant |
| Standard 7 Human resources | | HCP | Not Compliant | |
|  | | CHSP | Not Compliant | |
| Requirement 7(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(c) | HCP | | Not Compliant |
|  | CHSP | | Not Compliant |
| Requirement 7(3)(d) | HCP | | Not Compliant |
|  | CHSP | | Not Compliant |
| Requirement 7(3)(e) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Standard 8 Organisational governance | | HCP | Not Compliant | |
|  | | CHSP | Not Compliant | |
| Requirement 8(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(c) | HCP | | Not Compliant |
|  | CHSP | | Not Compliant |
| Requirement 8(3)(d) | HCP | | Not Compliant |
|  | CHSP | | Not Compliant |
| Requirement 8(3)(e) | HCP | | Not Compliant |
|  | 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 report; 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

# HCP Not Compliant CHSP Not 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

The service demonstrated that each consumer is treated with dignity and respect, with their identity, culture and diversity valued. Consumers and representatives confirmed they feel that they are treated with respect and confirmed staff understand consumers’ background, preferences and what is important to them. The workforce is supported by the service to deliver culturally safe care and provided examples of what this means in practice.

Each consumer is supported to exercise choice and decisions about their care, including when others should be involved, and maintain relationships. Consumers said they feel they can make choices about their care and for those consumers with cognitive decline, the service demonstrated they are supported to exercise choice and make decisions. The personal information for consumers is kept confidential and their privacy is maintained, including where information is being shared between multiple parties involved in service delivery. Consumers and representatives felt staff respected the consumer’s personal privacy when delivering care and services.

The service could not demonstrate current, accurate and timely information is provided to each consumer. While written program information is provided to consumers and representatives at the commencement of their services, verbal explanation of the information was not always provided.

The service did not demonstrate consumers are supported to understand how their package funds are being spent.

The Quality Standard for the Home care packages service is assessed as Not Compliant as one of the six specific requirements have been assessed as Not Compliant.

The Quality Standard for the Commonwealth home support programme services are assessed as Not Compliant as one of the six specific requirements have been assessed as Not 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 | Not Compliant |
|  | CHSP | Not 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.*

Findings

The service did not demonstrate current, accurate and timely information is provided to each consumer. While written information is provided to consumers and representatives at the commencement of their service, a verbal explanation of the information was not consistently provided to ensure the information is clear and understandable to the consumer. Consumers and representatives expressed that they had confusion and a lack of knowledge about the care and services they were receiving.

The service could not demonstrate how consumers are supported to understand how their package funds are spent. Financial information, budgets and monthly statements are not consistently accurate or timely, impacting on consumers’ ability to make decisions about care and services they can receive.

|  |  |  |
| --- | --- | --- |
| 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 service did not demonstrate that assessment and planning, including consideration of risk to the consumer’s health and well-being, informs the delivery of safe and effective care and services.

There was no evidence of assessments being undertaken using risk assessment tools to understand identified risks. The outcomes of assessment and planning are not consistently documented in the consumer’s care plan and care plans did not contain detailed information to guide staff practice. Care and services are generally not reviewed within the agreed period and care and services reviews do not occur when circumstances change or when incidents impact on the needs, goals and preferences of consumers.

Whilst most consumers and representatives considered they feel like partners in the ongoing assessment and planning of consumers’ care and services, consumers and representatives interviewed advised staff had not spoken with them about advance care planning or end of life planning. The service does discuss consumer’s needs or wishes in relation to end of life or care planning at the initial assessment or during reviews of care plans.

Consumers and representatives were able to provide examples of how other providers of care and services are involved in meeting consumer’s healthcare needs.

Management and staff demonstrated how other health care providers were included who are involved in shared care. Documentation confirmed that other health care providers involvement in shared care is clearly recorded and consumers needs and choices and documented accordingly.

The Quality Standard for the Home care packages service is assessed as Not Compliant as four of the five specific requirements have been assessed as Not Compliant.

The Quality Standard for the Commonwealth home support programme services are assessed as Not Compliant as four of the five specific requirements have been assessed as Not Compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP | Not Compliant |
|  | CHSP | Not 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 did not demonstrate assessment and planning taking into consideration the risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services through the HCP and CHSP programs. The care planning documentation lacked details about consumer’s assessed needs and risks. When risks for a consumer had been identified, the risk had not been adequately assessed with strategies implemented to manage the risk. Furthermore, this information had not been recorded.

There was no evidence of assessments using risk assessment tools to further understand any identified risks. Care plans did not include enough detail about assessed needs and risks to the consumer to guide staff in the delivery of care and services.

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

The service could not adequately demonstrate that assessment and planning identify and addresses the consumer’s needs, goals and preferences. Where needs and risks to the consumers health and well-being were identified, care plans did not contain enough information to guide staff practice.

Assessment and planning documentation reviewed did not consistently identify and address the consumer’s current needs and preferences. Care planning documents for consumers identified care plans did not consistently include strategies to guide staff in how to provide care that was tailored to the individual needs of the consumers and supported their functional abilities, thereby exposing them to continued risk of falls, risks associated with diabetes, dementia and the use of oxygen equipment.

If was identified that several consumers who had expressed preferences, that these had not been documented in care plans to guide staff to provide care and services to meet the consumers’ needs moving forward.

There was no evidence to demonstrate that end of life planning and advanced care planning is discussed with consumers.

|  |  |  |
| --- | --- | --- |
| 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 | Not Compliant |
|  | CHSP | Not 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.*

Findings

Outcomes of assessment and planning have not been adequately documented in the care and services plan. Relevant risks to the consumer’s safety, health and well-being have not been consistently documented in the care plan and there is insufficient information documented to guide care and service delivery, including risks to the consumer’s needs.

Outcomes of assessment and planning were not consistently documented in the care plan, including risks to the consumer’s needs. Care plans did not include enough information to inform the delivery of safe and effective care and minimise identified risks.

Consumers that were identified with a high risk of falls, identified that the appropriate risk assessments had not been completed and strategies implemented to minimise falls and promote the delivery of safe and effective care were not adequately documented in care planning documents.

|  |  |  |
| --- | --- | --- |
| 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.*

Findings

The service did not demonstrate care and services are reviewed for effectiveness when circumstances change or when incidents impact on the needs, goals or preferences of the consumer. Care plans are not always updated when a consumer’s condition changes, their situation changes or when incidents or accidents happen. Not all care and services are reviewed on a regular basis.

Management described the process and policies and documentation demonstrated the process for the review of consumer’s care and services. Management advised that care and services for all consumers are reviewed at least every 12 months, when circumstances change or following a change in the consumer’s condition, including when an incident occurs. However, the service could not demonstrate this occurs for all consumers who receive care and services.

# STANDARD 3 Personal care and clinical care

# HCP Not Compliant CHSP 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 service did not demonstrate how it effectively manages high impact or high prevalence risks associated with the care of each consumer receiving services through the Home care package program. High impact and high prevalence risks at the service include risks related to dementia, diabetes, falls, choking, aspiration and oxygen.

Information was not consistently reflected in care planning documentation, including the identification of all high impact or high prevalence risks, strategies or guidance for staff who regularly provide services to consumers.

Consumers and representatives said that they have access to a Medical Officers and other Allied Health Professionals when required. Consumers confirmed the care they receive when they are unwell or experiencing a deterioration in their health is responded to in a timely manner.

The service demonstrated consumers nearing the end of their life were provided care that considered their current needs, goals and preferences; maximised their comfort and preserved their dignity. 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. Care documentation reflect referrals to a range of Allied Health professionals.

The service demonstrated they have systems and processes in place to minimise infection related risks through implementing standard and transmission-based precautions to prevent and control infection. The service has policies and procedures in place related to infection control and demonstrated preparedness in the event of an infectious outbreak including for COVID-19.

The Quality Standard for the Home care packages service is assessed as Not Compliant as one of the seven specific requirements have been assessed as Not Compliant.

The Quality Standard for the Commonwealth home support programme service is not applicable. The service does not provide personal or clinical care through the Commonwealth home support programme.

**Assessment of Standard 3 Requirements**

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

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(b) | HCP | Not Compliant |
|  | CHSP | Not Applicable |

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

The service did not demonstrate how it effectively manages high impact or high prevalence risks associated with the care of each consumer receiving services through the Home care package program.

Management and staff identified an inconsistent understanding of high impact and high prevalence risks for consumers at the service. Staff could not demonstrate that they understand identification of high impact and high prevalence risk for consumers through assessment and planning processes or the strategies required to manage those risks.

Information is not consistently reflected in care planning documentation, including the identification of all high impact or high prevalence risks, strategies or guidance for staff who regularly provide services to consumers. The service did not demonstrate consistent reporting of high impact and high prevalence risks or monitoring to ensure effective management of those risks for each consumer.

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(c) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 | Not Applicable |

*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 | Not Applicable |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(f) | HCP | Compliant |
|  | CHSP | Not Applicable |

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(g) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 Compliant 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

Consumers and representatives said that they are supported by the service to do the things they like to do, and that promotes their mental health, well-being and enhances their quality of life.

Consumers and representatives confirmed the service accommodates and supports the consumer requests and choices of service providers and care staff.

Consumers and representatives advised that the service supported them to do the things that are important to them.

Staff explained the variety of ways how they share information within the organisation and with others were responsibility of care is shared.

Consumers are referred to health professionals and other organisations to inform their decisions regarding support required for daily living, including transport, equipment, social support to meet their social needs.

Staff described how they are kept informed of the changing needs of consumers.

Service documentation detailed the consumer’s life history, personal interests, cultural communication needs, religious beliefs and persons of significance.

The service had policies and procedures to ensure consumer’s equipment are routinely inspected by brokered providers to ensure its operational integrity and safety is maintained.

The Quality Standard for the Home care packages service is assessed as Compliant as 6 of the 6 relevant requirements have been assessed as Compliant.

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

The Assessment Team did not assess Requirement 4(3)(f) as the service does not provide meals and therefore this Requirement is not applicable.

**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.*

|  |  |  |
| --- | --- | --- |
| 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 | Not Applicable |
|  | CHSP | Not Applicable |

*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 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 provider does not run a service environment and therefore this Standard is not applicable.

## Assessment of Standard 5 Requirements

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

*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 | Not Applicable |

*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 | Not Applicable |

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

# STANDARD 6 Feedback and complaints

# HCP Not Compliant CHSP Not 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

While consumers and representatives are encouraged and supported to provide feedback and make complaints; the service did not demonstrate feedback and complaints are consistently captured, reviewed and analysed to improve the quality of care and services.

The service demonstrated they have systems and processes to encourage consumers to give positive and negative feedback about the care and services they receive. Consumers and representatives said they feel safe and comfortable giving feedback to the service and for those consumers who may have a barrier to using the complaints system, have a representative who can advocate on their behalf.

Information is provided to consumers, so they are aware of and have access to advocates, language services and other methods for raising and resolving complaints. Complaints records reviewed demonstrated appropriate action is taken in response to complaints and although the workforce did not have a shared understanding of open disclosure, consumers and representatives said that they were satisfied with how the services responded to and resolved their complaint.

The Quality Standard for the Home care packages service is assessed as Not Compliant as one of the four specific requirements have been assessed as Not Compliant.

The Quality Standard for the Commonwealth home support programme service is assessed as Not Compliant as one of the four specific requirements have been assessed as Not 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 | Not Compliant |
|  | CHSP | Not Compliant |

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

Findings

The service did not demonstrate feedback and complaints are consistently captured, reviewed and analysed to improve the quality of care and services. While the service has a complaints management system and policies and procedures in place, they are not always effective in documenting all feedback and complaints from consumers and representatives. The service did not demonstrate how the complaints management system informs continuous improvement processes to support broader improvements at the service.

Feedback from consumers and representatives who had provided feedback or made a complaint to the service demonstrated the service had resolved their concerns at an individual level. However, most consumers and representatives indicated a lack of confidence that the service had used their feedback to make broader improvements in the quality of care and services.

The workforce was unable to describe how feedback and complaints are used to improve care and services and could not provide an example of improvements at the service because of feedback or complaints from consumers.

# STANDARD 7 Human resources

# HCP Not Compliant CHSP Not 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

While consumers and representatives interviewed confirmed and described in various ways, that staff behave in a kind, caring and respectful way; the service did not demonstrate all staff are competent or have the knowledge to effectively perform their roles and meet the needs of consumers, including managing conditions that are common in aged care.

The service has effective recruitment and orientation processes in place; however, could not demonstrate the workforce receives ongoing training and professional development to deliver the outcomes required by the Quality Standards.

The service demonstrated 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 services. While the service does not employ clinical staff to meet the clinical care need of consumers receiving a home care package, brokerage agreements are in place. Feedback from consumers and representatives demonstrated the workforce is enough and consumers get services when they need them, including from subcontracted staff. Regular assessment, monitoring and review of performance of the workforce occurs to ensure the safety and quality of services. Systems and processes are effective to ensure actions taken to address any issues identified in the performance of the workforce, including subcontracted staff.

The Quality Standard for the Home care packages service is assessed as Not Complaint as two of the five specific requirements have been assessed as Not Compliant.

The Quality Standard for the Commonwealth home support programme service is assessed as Not Compliant as two of the five specific requirements have been assessed as Not 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 | Not Compliant |
|  | CHSP | Not Compliant |

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

Findings

The service did not demonstrate all members of the workforce are assessed to be competent or have the knowledge to effectively perform their roles, including managing conditions that are common in aged care. The service could not demonstrate how they determine core competencies for different roles and to meet the needs of all consumers at the service. While the service demonstrated systems and processes in place to ensure the workforce is qualified and competent, the systems are not always effective.

Feedback from consumers and representatives indicated varied confidence in the knowledge and competency of staff to effectively perform their roles. While some consumers and representatives spoke highly of staff and confidence that staff know their job, including subcontracted staff; other consumers and representatives expressed frustration about the skills and competency of care staff who deliver their care and services.

Following feedback, management confirmed that care staff have not been assessed to be competent to manage conditions and associated risks for the consumers sampled such as diabetes, swallowing issues and oxygen therapy. While competency-based assessments are provided to support staff in performing their roles and meeting the needs of consumers, management acknowledged that not all staff have current competencies. Management acknowledged this is an area for improvement. An internal audit was undertaken which identified deficiencies in training and an action plan was established with strategies implemented; however, management acknowledged this has not been fully implemented.

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(d) | HCP | Not Compliant |
|  | CHSP | Not Compliant |

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

Findings

While the service demonstrated recruitment and orientation processes in place; the service did not demonstrate effective processes to ensure staff receive the ongoing training and professional development they need to carry out their roles and responsibilities. Feedback from consumers, representatives and staff, and a review of training records showed that training to manage the needs of consumers are not always identified and provided to ensure staff have the requisite skills and knowledge to provide safe and quality care.

Management described the recruitment and orientation process at the service, advising that all staff complete mandatory online training modules before they can commence delivering care and services. However, it was identified this does not always occur for all staff employed.

The service could not demonstrate they provide training to the workforce to deliver the outcomes required in the Quality Standards or in all areas relevant to the delivery of services to aged care consumers.

While some training is provided in areas relevant to the delivery of services to aged care consumers, training records evidenced ineffective systems and processes to ensure all staff complete the training.

|  |  |  |
| --- | --- | --- |
| 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 Not Compliant CHSP Not 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

The organisation could not demonstrate it is accountable for managing and governing all aspects of care and services in relation to information management, workforce governance, regulatory requirements and feedback and complaints.

The service did not demonstrate effective risk management systems and practices to safely manage risks, manage and prevent incidents and use the incident management system (IMS) to improve its performance and how it delivers quality care and services.

High impact and high prevalence risks associated with the care of consumers are not effectively managed to support consumers to live the best life they can. The service was not able to demonstrate a clinical governance framework in place to maintain and improve the reliability, safety and quality of the clinical care consumers receive. The service does not have a documented clinical governance framework or policies in place in relation to antimicrobial stewardship.

The service demonstrated consumers are engaged in the development, delivery and evaluation of their services and are supported in that engagement. The service has formal processes to seek input from consumers and representatives, including consumer satisfaction surveys. Consumers and representatives provided feedback that they are confident the service is well run and run in their best interests.

The Quality Standard for the Home care packages service is assessed as Not Compliant as three of the five relevant requirements have been assessed as Not Compliant.

The Quality Standard for the Commonwealth home support programme service is assessed as Not Compliant as three of the four relevant requirements have been assessed as Not Compliant.

Requirement 8(3)(e) for Commonwealth home support programme is not applicable and therefore was not assessed.

## 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 | Not Compliant |
|  | CHSP | Not 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 service did not demonstrate it has effective organisation wide governance systems in place for managing and governing all aspects of care and services in relation to information management, workforce governance, regulatory requirements and feedback and complaints.

While the service has information management systems in place with supporting policies and procedures, they are not always effective to meet the outcomes required by the Quality Standards.

Information that is provided to consumers to support the in making decisions is not always relevant, accurate or provided in a timely manner.

The service could not demonstrate assessment and planning which consistently identifies and addresses consumer’s needs, goals and preferences, including consideration of risk to the consumer’s health and wellbeing.

Information systems to support the management of feedback and complaints are not always effective.

Incident management information systems are not always effective. The service is unable to demonstrate the system helps the organisation to identify where quality and safety is at risk and improvements need to be made.

The service could not demonstrate how they monitor unspent funds for consumers.

Monthly statements are not provided on a regular basis to consumers and the service could not demonstrate they are always accurate.

The service did not demonstrate effective systems and processes to monitor, analyse and use feedback and complaint data to improve the quality of care and services. Feedback and complaints were not consistently recorded, or trends reviewed and analysed.

The service did not demonstrate effective reporting systems to the governing body regarding feedback and complaints or improvements made as a result of feedback and complaints.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) | HCP | Not Compliant |
|  | CHSP | Not 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.*

Findings

The service did not demonstrate effective systems and processes that help them identify and assess risks to the health, safety and well-being of consumers. While systems and processes are in place, the service did not demonstrate understanding and application of this requirement in relation to managing high impact or high prevalent risks associated with the care of consumers, to support consumers to live the best life they can. The IMS and practices to manage risks associated with the care of aged care consumers was not effective. The service does not trend or analyse incidents, to drive continuous improvement to prevent similar incidents occurring in the future.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | HCP | Not Compliant |
|  | 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.*

Findings

The service was not able to demonstrate an effective clinical governance framework to maintain and improve the reliability, safety and quality of the clinical care consumers receive. Management and staff who do not have a shared understanding of clinical governance and antimicrobial stewardship and there is no evidence of training for staff. The service does not have a documented clinical governance framework or policies and procedures in place to support effective clinical governance.

Staff could not describe the organisation’s policies regarding antimicrobial stewardship, minimising the use of restrictive practice or open disclosure.

Management and staff were unable to demonstrate understanding of clinical governance.

Staff did not demonstrate and understanding of open disclosure and management acknowledged they do not have a system in place to ensure best practice in 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.

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Not Met |
|  | CHSP | Not Met |

*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 2(3)(a) | HCP | Not Met |
|  | CHSP | Not Met |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) | HCP | Not Met |
|  | CHSP | Not Met |

*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)(d) | HCP | Not Met |
|  | CHSP | Not Met |

*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 Met |
|  | CHSP | Not Met |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(b) | HCP | Not Met |
|  | CHSP | Not applicable |

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

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) | HCP | Not Met |
|  | CHSP | Not Met |

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(c) | HCP | Not Met |
|  | CHSP | Not Met |

*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 | Not Met |
|  | CHSP | Not Met |

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

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(c) | HCP | Not Met |
|  | CHSP | Not Met |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) | HCP | Not Met |
|  | CHSP | Not Met |

*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 | Not Met |
|  | 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.*