**Performance**

**Report**

**1800 951 822**

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| Name of service: | Inhome Care SA |
| Service address: | 6 Mary Street HINDMARSH SA 5007 |
| Commission ID: | 600580 |
| Home Service Provider: | Inhome Care SA Pty Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 17 January 2023 |
| Performance report date: | 13 February 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 Inhome Care SA (**the service**) has been prepared by A. Grant, 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:**

* Inhome Care SA, 26427, 6 Mary Street, HINDMARSH SA 5007

**CHSP:**

* Care Relationships and Carer Support, 27925, 6 Mary Street, HINDMARSH SA 5007

# 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 review of documents and interviews with staff, consumers/representatives and others.

# Assessment summary for Home Care Packages (H choose a rating CP)

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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 as not all requirements have been assessed** |
| **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** |

# 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 as not all requirements have been assessed** |
| **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** |

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 Assessment Team noted the service has, since the Quality Audit conducted in June 2021, demonstrated improvements with consumer assessment and care planning processes. The Assessment Team noted four of four consumers and representatives when interviewed were consistently positive in their feedback that the assessment and care planning is collaborative and were generally satisfied that staff took time to listen and understand how to support consumer health and wellbeing. During the Assessment Contact three coordinators interviewed by the Assessment Team described assessment and care planning processes and the ways risk is considered. The Assessment Team noted management and staff demonstrated comprehensive assessments that form a mandatory component of the intake process for home care package (HCP) consumers which take into account assessment and care planning for personal and clinical care, social and emotional support consider multiple areas of support such as nutrition, medications, medical history, mobility and emotional health. Evidence analysed by the Assessment Team showed the service conducts mandatory consumer nursing assessments during onboarding process and scheduled reviews, and when there is a change in circumstance such as after hospital discharge or where a consumer has experienced an incident with a clinical indicator. Evidence analysed by the Assessment Team showed scheduled nursing assessments are conducted every six months for consumers with HCP level 3 and level 4 packages, while consumers with Level 1 and 2 packages undergo annual nursing assessments. All support workers interviewed by the Assessment Team described their access to consumer care plans which is provided to them by electronic mail and stored in the customer folder that is always kept at the consumers’ homes. Evidence analysed by the Assessment Team showed care documentation included consumer background summary, comprehensive needs-based assessments, emergency no response plans and care plans with prompts to consider risk. The Assessment Team noted all reviewed files detailed comprehensive assessment and care planning processes.

Evidence analysed by the Assessment Team showed a new care plan format was finalised in November 2022 and has incorporated an emergency service response which allows staff to select a relevant emergency response option. Evidence analysed by the Assessment Team showed the new care plan format was rolled out and introduced to staff with training in January 2023.

# Standard 3

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| Personal care and clinical care | | HCP | CHSP |
| Requirement 3(3)(a) | Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:   1. is best practice; and 2. is tailored to their needs; and 3. optimises their health and well-being. | **Compliant** | **Compliant** |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | **Not applicable** | **Not applicable** |
| Requirement 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | **Not applicable** | **Not applicable** |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | **Not applicable** | **Not applicable** |
| Requirement 3(3)(e) | Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared. | **Not applicable** | **Not applicable** |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | **Not applicable** | **Not applicable** |
| Requirement 3(3)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | **Not applicable** | **Not applicable** |

Findings

Evidence analysed by the Assessment Team showed the service demonstrated a comprehensive approach to updating assessment and care planning procedures including the management and identification of risk. Evidence analysed by the Assessment Team showed the service conducts mandatory consumer nursing assessments during onboarding process and scheduled reviews and risks identified during nursing assessments will trigger related clinical assessments using validated assessment tools. Evidence analysed by the Assessment Team showed the service has recruited additional nursing staff and their clinical team will now comprise of a clinical lead and three registered nurses.

Four of four consumers and representatives interviewed by the Assessment Team expressed satisfaction with the personal and clinical care provided and said in different ways that it was safe and effective care. Information available to the support workers includes alerts describing allergies, falls risk and changes in care requirements. All support workers interviewed by the Assessment Team stated they get enough information to support consumers and would immediately contact the coordinator to escalate concerns and report any incidents. Nursing staff when interviewed by the Assessment Team discussed best practice principles and described post fall reviews and conducting nursing assessments.

During interviews with the Assessment Team Management described ensuring consistent communications with brokered staff to ensure they have received information pertinent to consumers’ needs and to ensure they understand requirements. Evidence analysed by the Assessment Team showed an item has been included on the continuous improvement plan to conduct regular meetings with brokered service providers as a result of a consumer satisfaction survey. During interviews with the Assessment Team, management confirmed these meetings will begin February 2023 to ensure that provision of care and services by brokered staff are aligned and to maintain oversight of delivery of safe and quality care.

During interviews with the Assessment Team management presented a high risk register which informs risks identified during initial consumer assessment processes and nursing assessments, including falls, diabetes, wounds, dementia, social isolation and depression. Evidence analysed by the Assessment Team showed the high-risk register is monitored regularly during weekly multidisciplinary meetings and assists with identifying and managing risk associated with care needs.

During interviews with the Assessment Team management advised the service is currently in the process of creating emotional and behaviour support plans in response to an identified need to support consumers experiencing dementia, mental health concerns and memory loss. During interviews with the Assessment Team management discussed the ‘intensive’ approach with this process, to ensure that consumers receive the appropriate support to live their best lives, including increased training for staff and support workers to ensure appropriate knowledge and support. The Assessment Team noted this initiative is also outlined in the services’ continuous improvement plan.

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