**Performance**

**Report**

**1800 951 822**

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| Name of service: | Kesher (Jewish Community Services) Care Packages Project |
| Service address: | 619 St Kilda Road MELBOURNE VIC 3004 |
| Commission ID: | 300062 |
| Home Service Provider: | Jewish Care (Victoria) Inc |
| Activity type: | Quality Audit |
| Activity date: | 11 October 2022 to 13 October 2022 |
| Performance report date: | 10 November 2022 |

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 Kesher (Jewish Community Services) Care Packages Project (**the service**) has been prepared by M Balukovska, 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:**

* Jewish Care (Victoria) Inc - Southern Metro, 23604, 619 St Kilda Road, MELBOURNE VIC 3004
* Jewish Care (Victoria) Inc - Eastern Metro, 23605, 619 St Kilda Road, MELBOURNE VIC 3004
* Jewish Care (Victoria) Inc (EACH) - Eastern Metro, 18823, 619 St Kilda Road, MELBOURNE VIC 3004
* Jewish Care (Victoria) Inc (EACH-D) - Eastern Metropolitan, 18824, 619 St Kilda Road, MELBOURNE VIC 3004
* Kesher (Jewish Community Services) Care Packages Project, 18827, 619 St Kilda Road, MELBOURNE VIC 3004
* Kesher EACH, 18828, 619 St Kilda Road, MELBOURNE VIC 3004
* Kesher EACH Program - Southern Metro, 18829, 619 St Kilda Road, MELBOURNE VIC 3004
* Kesher EACHD, 18830, 619 St Kilda Road, MELBOURNE VIC 3004
* Jewish Care Victoria, 19319, 619 St Kilda Road, MELBOURNE VIC 3004

**CHSP:**

* Flexible Respite - Care Relationships and Carer Support, 4-BAIHPSJ, 619 St Kilda Road, MELBOURNE VIC 3004
* Centre Based Respite - Care Relationships and Carer Support, 4-BAIHPLR, 619 St Kilda Road, MELBOURNE VIC 3004
* Allied Health and Therapy Services, 4-BAIHPH4, 619 St Kilda Road, MELBOURNE VIC 3004
* Transport, 4-BAIU0AL, 619 St Kilda Road, MELBOURNE VIC 3004
* Domestic Assistance, 4-BAIHPP7, 619 St Kilda Road, MELBOURNE VIC 3004
* Personal Care, 4-BAIHPVV, 619 St Kilda Road, MELBOURNE VIC 3004
* Social Support - Group, 4-BAIHPZ7, 619 St Kilda Road, MELBOURNE VIC 3004
* Specialised Support Services, 4-BAIHQ2J, 619 St Kilda Road, MELBOURNE VIC 3004

# Material relied on

The following information has been considered in preparing the 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]

# Assessment summary for Home Care Packages (HCP)

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| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| --- | --- |
| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

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 1

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| --- | --- | --- | --- |
| Consumer dignity and choice | | HCP | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant | Compliant |
| Requirement 1(3)(c) | 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. | Compliant | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant | Compliant |
| Requirement 1(3)(e) | 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. | Compliant | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* ensuring consumers choice and dignity is respected while delivering culturally and safe care to each consumer;
* demonstrating consumers are provided written program information to understand the services available to them;
* providing consumers with correct and complete information in a timely manner to inform their choices;
* utilising a dignity of risk approach to supporting consumers to take risks to enable them to live the best life they can;
* providing information to consumers that is current, accurate and timely and easy to understand and enables them to exercise choice; and
* respecting a consumer’s privacy and has processes to protect the consumer’s personal information.

# 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* Assessing consumers to identify risks to inform the care plans and care directives for staff involved in their care.
* Discussing advanced care planning with consumers and providing further information when requested.
* Sharing the outcomes of assessment and planning with consumers and others involved in their care.
* Reviewing services in response to a change in consumer circumstance or condition and monitors scheduled reviews for reviews to occur every 12 months.

# 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| 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. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* Delivering personal care to consumers based on their needs, preferences and best practice guidance supported through staff education.
* Managing high impact/high prevalent risk related to the care of each consumer
* Ensuring consumers are referred to medical professionals or allied health clinicians in a timely manner.
* Demonstrating consumer deterioration or change in care needs are identified and responded to in a timely manner.

**Standard 4**

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| Services and supports for daily living | | HCP | CHSP |
| Requirement 4(3)(a) | 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. | Compliant | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant | Compliant |
| Requirement 4(3)(c) | 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. | Compliant | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant | Compliant |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* Optimising consumer independence and wellbeing with in-home and community based lifestyle supports.
* Providing emotional and psychological support to consumers when they are feeling low.
* Providing consumers with quality equipment that is suited to their needs

**Standard 5**

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| Organisation’s service environment | | HCP | CHSP |
| Requirement 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Compliant | Compliant |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Compliant | Compliant |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* Maintaining a service environment to welcome consumers, support functional independence.
* Implementing effective preventative and reactive maintenance systems to ensure facilities are safe, clean, comfortable and well maintained.

# Standard 6

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| Feedback and complaints | | HCP | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Compliant | Compliant |
| Requirement 6(3)(b) | Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. | Compliant | Compliant |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* providing information and supporting consumers and representatives to provide feedback and make complaints, including informing consumers about feedback and complaint options, including the use of advocates and translating services;
* documenting feedback and complaints and resolving a complaint to the satisfaction of the complainant, using an open disclosure approach; and,
* Reviewing complaints and feedback, while identifying trends and implementing improvements to the quality of care and services.

# Standard 7

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| Human resources | | HCP | CHSP |
| Requirement 7(3)(a) | 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. | Compliant | Compliant |
| Requirement 7(3)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | Compliant | Compliant |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* aware of the impact of staffing shortages on care and services.
* recruiting, inducting and orientating staff who consumers interviewed believe are kind, caring and respectful;
* ensuring staff are regularly undertaking training and are equipped and have the necessary qualifications and knowledge to carry out their roles;
* undertaking active and rolling recruiting to increase staffing levels in certain areas, including support workers and cleaners; and,
* regularly monitoring and reviewing the ongoing performance and capability of staff.

# 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |
| 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. | Compliant | Compliant |

Findings

At the time of the performance report decision, the service was:

* using established and effective processes to engage with consumers in the development, delivery and evaluation of care and services;
* promoting a culture of inclusive care and services through management, executive and governance reporting and monitoring processes;
* using effective organisation wide, tailored governance systems, including risk management systems, and complaints management systems to improve consumers’ lives through care and services.
* managing an incident reporting system to effectively respond to and manage consumer incidents including utilising a risk management framework in managing high impacts or high prevalence risks associated with the care of consumers; and, ensuring clinical care needs data is identified, risk assessed and monitored to ensure safe and effective clinical care.

1. The preparation of the performance report is in accordance with section 57 of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)