**Performance**

**Report**

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | KinCare Home Care Services - WA |
| Service address: | 243 James Street NORTHBRIDGE WA 6003 |
| Commission ID: | 500105 |
| Home Service Provider: | KinCare Health Services Pty Ltd |
| Activity type: | Quality Audit |
| Activity date: | 17 July 2023 to 20 July 2023 |
| Performance report date: | 11 September 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 KinCare Home Care Services - WA (**the service**) has been prepared by F.Nguyen, 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:**

* KinCare CACP - Metropolitan Perth, 19165, 243 James Street, NORTHBRIDGE WA 6003
* KinCare EACH - Metropolitan Perth, 19166, 243 James Street, NORTHBRIDGE WA 6003
* KinCare EACHD - Metropolitan Perth, 19167, 243 James Street, NORTHBRIDGE WA 6003
* Stanhope Aged Care Community Services EACH, 19263, 243 James Street, NORTHBRIDGE WA 6003
* Stanhope Aged Care Community Services EACHD, 19264, 243 James Street, NORTHBRIDGE WA 6003
* Stanhope Home Health Care Services, 19265, 243 James Street, NORTHBRIDGE WA 6003
* KinCare At Home Metro Perth, 19418, 243 James Street, NORTHBRIDGE WA 6003

# 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)

|  |  |
| --- | --- |
| 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 | **Not Applicable** |
| **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.

# Standard 1

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

Findings

The service demonstrated that each consumer is treated respectfully and with consideration for their identity, culture and diversity. Home care workers, staff and management interviewed said how it is important to respect the background and beliefs of each consumer and gave examples of actions that are taken to show dignity and respect. Training records show that staff receive training on what it means to treat consumers with dignity and respect. Policies and procedures were noted to encourage staff to listen to consumers and respect their wishes when planning and delivering care.

The service demonstrated that care and services are culturally safe. Consumers and representatives interviewed gave examples of how the service supports consumers cultural preferences. Home care workers interviewed said they regularly provide care to the same consumers; they get to know their backgrounds and how consumers like their care to be delivered. Care documentation was noted to guide home care workers in how they can support a consumer’s cultural needs and preferences when providing care. Policies and procedures were noted to require staff to consider each consumer’s cultural safety when planning and delivering care.

The service demonstrated that each consumer is supported to make their own decisions about their care, including about when and how others should be involved. Consumers and representatives interviewed said that they are involved in making decisions and can communicate those decisions easily, as evidenced in care documentation. Management gave examples of how consumers are supported when they wish to involve others in making decisions about their care. Care documentation evidenced that consumers are supported to make connections with others. Policies and procedures were noted to guide staff in how consumers can be supported to exercise choice and independence.

The service demonstrated that each consumer is encouraged to take risks to enable them to live the best life they can. A review of care documentation showed that when consumers make decisions that involve a degree of risk, related discussions and decisions are documented. Staff described the process they follow when a consumer makes a decision that involves a degree of risk. Policies and procedures were viewed to be in place to guide staff in encouraging the independence of consumers and managing situations where consumers make decisions that involve risk.

The service demonstrated that information provided to consumers is current, accurate, timely and easy to understand. Consumers and representatives interviewed said they have copies of care plans and budgets, monthly statements are accurate and received on time, and they understand the information they are given. Management advised that the consumer handbook has recently been updated to ensure that it covers recent aged care reforms and provides accurate information. Management also said that they are continually reviewing documentation to ensure its currency. In addition, the service now communicates with consumers and representatives by email which has been embraced by most consumers, although the service will still post documentation if that is the consumer’s preference.

Management said that all staff, particularly home care workers, are trained in the importance of respecting each consumer’s privacy and only sharing information with documented representatives. A review of care documentation showed that consumers are asked during assessments and reviews who they want involved in their care and who they give consent for, for personal information to be shared with. Privacy and confidentiality procedures and policies were viewed by the Assessment Team.

# Standard 2

|  |  |  |
| --- | --- | --- |
| Ongoing assessment and planning with consumers | | HCP |
| 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 |
| 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 |
| 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 |
| 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 |
| 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 |

Findings

The service has an assessment and care planning process. Assessment information is used to develop a plan of care in partnership with the consumer and/or their representatives. The information outlined in the care plan guides staff in the provision of safe and effective care and services. The service considers risks for consumers when completing assessments and following discussions with consumers, strategies to reduce the risks are noted to be included in their care plans. Consumers and representatives advised the care and services available are discussed with them prior to the commencement of the service, including the consumers’ needs and preferences.

The service has processes to support the identification of consumer-centred goals and preferences. Management advised consumers are provided an opportunity to identify their end-of-life preferences in an advanced health directive if they have not already done so. Home care workers understood the need to understand what is important to each consumer to ensure care and services are delivered in accordance with each consumer’s personal preferences and an understanding of each consumer’s needs, goals, and personal preferences.

The service was able to demonstrate assessment and planning is based on ongoing partnership with consumers and/or their representatives, and others who are involved in the care and services of consumers. Care planning documents viewed for sampled consumers generally confirmed that consumers and/or their representatives, health professionals or external providers when required, were involved in the assessment and planning of consumers’ care and services. Home care workers stated they have access to consumers’ care plans through their mobile phone application. Home care workers advised care plans are there to guide the care being provided, and there is ongoing discussion with consumers and their representatives to determine their specific preferences which may change daily.

The service demonstrated outcomes of assessment and planning are effectively communicated to the consumer and documented in their care plans to guide care givers to effectively deliver care and services. Consumers and representatives interviewed advised support planning documents are discussed and agreed to prior to the commencement of their services, they are also provided with a copy of their care plan. Home care workers said they have access to the care plans available on their mobile phones including the consumers’ specific needs at each service visit.

The service demonstrated processes are in place to ensure every consumer is regularly reviewed including when their circumstances change or there is a change in the consumer’s health condition or personal preferences. Consumers and representatives interviewed stated the service regularly reviews and supports them when their needs change. Home care workers interviewed stated when they identify a change to a consumer’s condition, they report to the team leader immediately and document in the progress notes.

# Standard 3

|  |  |  |
| --- | --- | --- |
| Personal care and clinical care | | HCP |
| 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 |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | 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. | Compliant |
| 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 |
| 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 |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | 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 |

Findings

The service demonstrated personal and clinical care is individually tailored for each consumer based on an assessment of the consumer’s individual needs, goals, and preferences. The customer care manager refers to nursing and allied heath staff for assessments and recommendations for the provision of best practice strategies as issues/concerns are identified. Consumers and representatives interviewed said personal and clinical care provided is tailored to their needs and optimises their well-being.

The service was able to demonstrate that it effectively manages high-impact and high-prevalence risks associated with the provision of care and services to each consumer. Systems and processes are in place to assist clinical staff and home care workers to manage risk, and to ensure clear instructions are provided to staff to minimise the effect and number of risks for consumers. Home care workers interviewed demonstrated knowledge of consumers who have high-impact/high-prevalence risks and described strategies used to provide support for consumers living with sensory impairment, dementia and mobility risks. Home care workers advised that alerts such as ‘high falls risk’ appear in their service schedules on the mobile application.

The service demonstrated that consumers are provided an opportunity to share their needs, goals and preferences as they near the end of their life. The service maintains each consumers’ dignity and comfort and respects their cultural preferences. Management advised the service works in partnership with palliative services and general practitioners to ensure that consumers and their families are supported during end-of-life care is occurring. Management said the service also follows up with the consumer’s family regarding bereavement support needs.

The service was able to demonstrate deterioration or change to a consumer’s cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. Home care workers are clear about their roles and responsibilities including identifying and reporting signs of deterioration. Home care workers interviewed stated that if they identified a change in the consumer’s condition, they would seek to provide that information to the service delivery team leaders or customer care managers and would document in the consumer’s progress notes.

The service demonstrated that communication systems available to the workforce to assist them to provide and coordinate care that respects the consumer’s choices ensuring safe, effective and consistent care is provided. All staff have access to information pertinent to their role. Consumers and representatives interviewed said they feel that their needs and preferences are effectively communicated between staff members.

The service was able to demonstrate that timely and appropriate referrals to individuals, other organisations and providers are made for consumers. Staff described processes to refer consumers for allied health and additional services. Management said that through assessment and review processes, referrals for specialist care including allied health, general practitioners, clinical/nursing care, and geriatricians are identified and actioned by customer care managers. Documentation reviewed showed the service has policies and procedures in place that guide the staff when referring consumers to other health professionals when a clinical incident or change in condition occurs.

The service has documented policies and procedures to support the minimisation of infection related risks, through infection prevention and control practices. A COVID-19 management plan is available to all staff. Home care workers advised they minimise the risk of infection through wearing masks and maintaining hand hygiene practices. They said that the service is providing infection control and COVID-19 training and are provided with personal protective equipment. Management advised that staff have access to mandatory online training related to the use of Personal Protective Equipment (PPE).

# Standard 4

|  |  |  |
| --- | --- | --- |
| Services and supports for daily living | | HCP |
| 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 |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | 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 |
| 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 |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Not applicable |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Not applicable |

Findings

Consumers and representatives interviewed were satisfied they receive safe and effective services and supports for daily living that meet their needs, goals and preferences and optimise their independence, well-being, and quality of life. Consumers and representatives interviewed said the service helps them maintain their independence and do things that are important to them. Home care workers understood consumer’s needs, goals and preferences and provided examples of how they encourage and support consumers to engage with their interests and maintain their independence.

Consumers and representatives interviewed said the service helps them maintain their independence and do things that are important to them. The service has supports in place to promote each consumer’s emotional, spiritual, and psychological well-being. Staff demonstrated they are aware of individual consumer’s needs in relation to their emotional, spiritual, and psychological well-being. Consumers and representatives interviewed said staff know their preferences and what is needed to support their emotional, spiritual, and psychological well-being.

The service demonstrated that it supports consumers to have social and personal relationships, to participate in their community, and to do things that interest them. A review of care documentation showed that information about consumers’ important relationships and interests are documented and used when planning services to meet their needs. Management was able to give examples of how consumers are assisted to participate in the community and activities that interest them. Policies and procedures were noted to promote the freedom of consumers to have emotional expression, friendships and personal and intimate relationships.

The service has processes in place to ensure that information about a consumer’s conditions, needs and preferences are communicated within the organisation and with others where responsibility is shared. Staff can access information about consumers’ needs and preferences and are clear about their responsibilities in relation to privacy and confidentiality of information. Home care workers confirmed they are provided updates on any changes to assessed needs, preferences, or changes in health through a mobile phone application or through the service delivery team leaders.

The service was able to demonstrate timely and appropriate referrals to individuals, other organisations and providers of care and services. Consumers and representatives confirmed that consumers were referred as required. Management described processes to refer consumers to other organisations and this was evidenced through care planning documents reviewed for sampled consumers. Consumers and representatives interviewed said that, when they required referrals to other organisations, the service was able to provide support and advice.

# Standard 5

|  |  |  |
| --- | --- | --- |
| Organisation’s service environment | | HCP |
| 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. | Not applicable |
| 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. | Not applicable |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable |

Findings

All individual requirements within Standard 5 are not applicable, therefore Standard 5 is not applicable, and as a result was not assessed during the Quality Audit.

# Standard 6

|  |  |  |
| --- | --- | --- |
| Feedback and complaints | | HCP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | 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 |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

The service demonstrated that consumers, representatives, and others are supported to provide feedback and make complaints. Staff are aware of the ways in which they can support consumers to make complaints. Policies, procedures, and systems are in place to encourage feedback from consumers, representatives, and their families, and those involved in delivering services to consumers. Consumers and representatives interviewed said they felt comfortable to provide feedback and make complaints either by talking to their customer care manager or calling the national call centre.

The service demonstrated consumers are made aware of and have access to advocates and other methods for resolving complaints. Management said, and provided evidence showing that, information about advocacy services, language services and making an external complaint is provided to consumers. Consumers and representatives interviewed said they felt safe and comfortable in raising any concerns.

The service demonstrated that it takes appropriate action to resolve complaints quickly and uses an open disclosure approach when things go wrong. Consumers and representatives report being satisfied by the way in which the service responds to complaints. Consumers and representatives interviewed who had made a complaint or provided feedback to the service said they were satisfied with the actions taken. Staff described how they try to resolve concerns raised as soon as possible and understood the open disclosure process.

The service demonstrated where feedback and complaints had been raised, there had been improvements made to the quality of care and services. The service demonstrated it is using feedback and complaints to identify improvements to increase consumer satisfaction around the care and service they receive. Consumers and representatives interviewed said they were happy with changes made to improve the quality of services and care provided. Consumers said they can raise concerns or make suggestions about the care and services they receive to their customer care manager.

# Standard 7

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

Findings

The service demonstrated that the organisation’s systems allow for regular monitoring and planning of staff, with the result that consumers receive services that are aligned with their assessed needs and preferences. Consumers and representatives interviewed stated care and services are delivered as planned. Consumers and representatives interviewed said they are very happy with the home care workers who provided services to them. Home care workers interviewed confirmed they have enough time to complete their work.

The service was able to demonstrate workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture, and diversity. Consumers and representatives said staff and management are kind, caring and respectful. Staff and management spoke about consumers in a kind and respectful way when speaking with the Assessment Team about their services. Consumers and representatives interviewed said staff are always kind and caring and engage with them respectfully whilst delivering care and services.

The service was able to demonstrate that the workforce is competent and have the knowledge to effectively perform their roles. Consumers and representatives described in various ways that staff are competent in their job. Staff and management described how recruitment processes ensure staff have adequate skills and qualifications, and how management monitor their competency through ongoing consumer feedback. Consumers and representatives interviewed described staff as being confident, well trained to perform their tasks and completed their work well.

The service was able to demonstrate the workforce is recruited, trained, equipped, and supported to effectively deliver the outcomes required by the Quality Standards. Management described the organisational recruitment and onboarding processes for new staff that include the completion of mandatory training requirements relevant to their roles. New staff complete ‘buddy shifts’ where appropriate, this allows for the competency of new staff to be monitored. Staff interviewed said they complete mandatory training and that they were supported to complete additional online training to improve their skills.

The service demonstrated that there is regular monitoring and review of the performance of each member of the workforce. Management said that all new staff must go through the usual selection processes as required under their policies, including reference checks. Management said that all staff undergo regular performance reviews and are provided extra training if required. Policies and systems are in place to ensure that the performance of staff is regularly monitored and reviewed, and action taken when required to improve staff performance.

# Standard 8

|  |  |  |
| --- | --- | --- |
| Organisational governance | | HCP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | 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 |
| 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 |
| 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 |
| 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 |

Findings

The service demonstrated that it engages consumers and uses their feedback to inform improvements to the way care is provided, consumers and representatives interviewed recalled completing surveys. Management explained how data from survey results, complaints and feedback are gathered, analysed, and presented to committee and board meetings, and gave examples of how that information has been used to improve the quality of services. The Assessment Team viewed a report analysing the recent survey results that showed an increase in customer satisfaction in WA.

The service demonstrated that the service promotes and is accountable for a culture of safe, inclusive, and quality care. Home care workers interviewed said that they felt supported in their work and enjoyed playing a part in improving consumers’ quality of life. Management talked about creating a culture of respect and regard for each consumer’s unique background and beliefs and said that health and safety is discussed at every committee and board meeting. Policies and procedures were noted to promote a culture of respect and regard for each consumer’s unique background and beliefs.

The organisation has demonstrated that it has effective governance systems in place across all aspects of the business.

Information management

The Assessment Team noted that the electronic management and scheduling systems are used effectively by the organisation to capture information, including assessed needs and preferences of consumers, and to give home care workers, schedulers, and customer service managers effective access to the information they need. Management described how the IT team has been engaged in a project to review and organise the data they hold in their electronic management systems. Procedures have been reviewed to ensure good access to information and the effective flow of information across the organisation.

Continuous improvement

Management described how identifying and responding to opportunities for continuous improvement is at the core of everything the organisation does. All staff are encouraged to identify aspects of the business that can be improved, that information is captured, monitored, and reviewed with a view to implement changes as and when priorities and resources permit.

Financial governance

Management explained how the service has reviewed documentation and processes to ensure that the organisation is compliant with the new HCP pricing reforms. The Assessment Team viewed price lists and HCP agreements that show the organisation is compliant with care management and package management capping requirements, third-party fee arrangements, and the prohibition on charging exit fees. All consumers said they understand their budget and monthly statements. Management said that customer care managers are responsible for managing the budgets of each consumer and discussing any accumulation of unspent funds with the consumer or their representative.

Workforce governance

Management described the systems used to manage the workforce. This includes the way the workforce is structured to allow for roles to be covered when individual employees take planned or unplanned leave. For example, customer care managers who are based interstate, have been temporarily deployed to manage the care of consumers in Western Australia while two vacancies are being filled, this will involve the interstate customer care managers flying to WA frequently.

Regulatory compliance

Management said that it relies primarily on its membership of the Aged and Community Care Providers Association (ACCPA) to stay informed of aged care regulatory reforms, they also access information from other sources such as email subscriptions and the Aged Care Quality and Safety Commission’s website. Documentation review showed that the organisation has been proactive in revising policies and procedures to ensure that it is compliant with the latest aged care reforms.

Feedback and complaints

The organisation has policies, procedures, and systems in place to record consumer feedback and to use that information to improve the quality of care and services for individuals across the organisation. Management said that the last 12 months in particular has seen significant improvements in the way the organisation manages feedback and complaints and how that information is used to inform future improvements.

The service demonstrated that effective systems and procedures are in place to manage risk. Management advised that a new incident management system was implemented six months ago and a migration of data from the old system has now been completed. Procedures to ensure compliance with the Serious Incident Reporting Scheme (SIRS) requirements has been implemented.

The incident register showed that the only high-risk incident experienced in the service in the past 6 months was one fall. Management attributed this partly to the training of staff in the use of their risk assessment matrix and focusing on identifying and managing vulnerable consumers. The risk analysis matrix assesses the degree of risk associated with any event and sets out clear escalation responsibilities and time frames to guide staff. The risk management framework includes a risk management and action plan. Home care workers interviewed recalled receiving training in how to identify and respond to abuse and neglect of consumers.

The organisation has identified that their key risk is ensuring they have quality of care and services in place and have enough home care workers on the ground to ensure that all service needs are met. Management spoke of the recent and ongoing improvements they have made to build and stabilise the workforce, the intention of these improvements is to support consumers to live their best lives.

The service demonstrated that a clinical governance framework is in place to ensure that consumers receive safe and quality clinical care. Management said that their clinical governance framework gives them confidence that clinical care and services are delivered and managed in a safe and effective way. Manage said that the clinical governance framework provides a direct line between staff and the Board, clearly delineating responsibilities, and all clinical needs, from initial assessments through to reviews.

Antimicrobial stewardship:

Management said that although they do not monitor for appropriate prescribing of anti-biotics as these are prescribed by general practitioners, they do place a high importance on infection control which protects consumers and reduces the risk of consumers developing an infection that requires antibiotics. The Assessment Team viewed the infection prevention, control and antimicrobial stewardship policy and procedure. Management acknowledged that they could improve the way they educate customer care managers, home care workers and consumers about anti-microbial stewardship and will include a review of their policies and procedures in their continuous improvement plan.

Restrictive practices:

The Assessment Team viewed restrictive practice policies and procedures including a restrictive practices skills assessment for health care workers. The Assessment Team viewed a skills assessment that is used during inductions to assess whether health care workers have awareness of restrictive practices and know how to escalate any concerns. Management said that very few of their consumers would be subject to restrictive practices and any that are identified are reported to the Board.

Open disclosure:

Management said that they promote honesty, take a facts-based approach when things go wrong, and work together collaboratively with consumers/representatives to find resolutions and mitigate the risk of future occurrences. Open disclosure policies and procedures were viewed to be in place, and training records show staff receive training in open disclosure approaches. A review of care documentation showed that an open disclosure approach is being used and documented when things go wrong.

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)