Marain Home and Community Care Pty Ltd

Performance Report

253 St George Road   
NORTHCOTE VIC 3070  
Phone number: 0426 172 867

**Commission ID:** 301068

**Provider name:** Marain Home & Community Care Pty Ltd

**Quality Audit date:** 24 March 2022

**Date of Performance Report:** 18 May 2022

# Performance report prepared by

M Murray, 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:**

* Marain Home and Community Care Pty Ltd, 27326, 253 St George Road, NORTHCOTE VIC 3070

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | HCP | | Compliant | |
|  | | | CHSP | | Not Applicable | |
| Requirement 1(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 1(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 1(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 1(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 1(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 1(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | HCP | | Not Compliant | |
|  | | | CHSP | | Not Applicable | |
| Requirement 2(3)(a) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 2(3)(b) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 2(3)(c) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 2(3)(d) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 2(3)(e) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Standard 3 Personal care and clinical care | | | HCP | | Not Compliant | |
|  | | | CHSP | | Not Applicable | |
| Requirement 3(3)(a) | | HCP | | | Not 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 | | | Not Compliant |
|  | | CHSP | | | Not Applicable |
| Requirement 3(3)(g) | | HCP | | | Compliant |
|  | | CHSP | | | Not Applicable |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | | HCP | | Not Compliant | |
|  | | | CHSP | | Not Applicable | |
| Requirement 4(3)(a) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(b) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(c) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(d) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(e) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(f) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(g) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| 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 | | Compliant | |
|  | | | CHSP | | Not Applicable | |
| Requirement 6(3)(a) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 6(3)(b) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 6(3)(c) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 6(3)(d) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Standard 7 Human resources | | | HCP | Not Compliant | | |
|  | | | CHSP | Not Applicable | | |
| Requirement 7(3)(a) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 7(3)(b) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 7(3)(c) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 7(3)(d) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 7(3)(e) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Standard 8 Organisational governance | | | HCP | Not Compliant | | |
|  | | | CHSP | Not Applicable | | |
| Requirement 8(3)(a) | HCP | | Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 8(3)(b) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 8(3)(c) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| Requirement 8(3)(d) | HCP | | Not Compliant | |
|  | CHSP | | Not Applicable | |
| 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; 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
* the provider’s response to the Quality Audit report received 29 April 2022.

# STANDARD 1 Consumer dignity and choice

# HCP Compliant CHSP Not Applicable

### 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

Consumers/representatives interviewed confirmed they are treated with dignity and respect and that the service they receive is culturally safe.

Consumers/representatives said they are supported to exercise choice and independence and receive information to enable them to make initial and on-going decisions about their care and services.

Staff were able to demonstrate an understanding of what it means to be respectful and provide dignitied care to consumers and how they maintain their privacy.

The Quality Standard for the Home Care Packages service is assessed as Compliant as all the requirements of the Standard have been assessed as Compliant.

The service does not provide Commonwealth Home Support Programme services.

**Assessment of Standard 1 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(a) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(b) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Care and services are culturally safe.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 | Not Applicable |

*Each consumer is supported to take risks to enable them to live the best life they can.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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.*

The Assessment Team interviewed consumers who were satisfied with the information they receive from the approved provider. Consumers said the information assists them in making decisions about their services.

The Assessment Team noted some consumer information was not readily available.

The approved provider’s response states they have consolidated all consumer information into a Welcome Pack.

Based on all the available evidence I am satisfied that consumers are provided with relevant information to make informed choices about their care and services.

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(f) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 Applicable

### 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 Assessment Team identified that the service does not have an effective framework for assessment and care planning. The service is not using validated assessment tools and care plans do not reflect each consumer’s current care needs.

The service does not conduct clinical assessments, other than package funded allied health assessments and only if requested by the consumer. Advanced care planning and end of life planning is not included as part of the assessment process.

Most consumers and representatives expressed satisfaction with their involvement as partners in care and said they contact the service to make changes to the care and services received as required.

This Quality Standard for the Home Care Packages service is assessed as Not Compliant as four of the five requirements of the Standard have been assessed as Not Compliant.

The service does not provide any Commonwealth Home Support Programme services.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP | Not Compliant |
|  | CHSP | Not Applicable |

*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 Assessment Team found the service’s processes to consider risk for individual consumers are not effective.

Risk assessments are not proactively being undertaken by the service and risk management plans are not in place. For example, diabetes management plans, falls management plans and medication management plans are not in place where these risks are known to staff.

The approved provider’s response does not dispute the Assessment Team’s findings and notes that a new assessment and care planning process is being put in place.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

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

*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.*

Consumers and representatives interviewed were not always satisfied consumer needs were identified and addressed by the service. Feedback included that care plans are not kept up to date and planned goals are not monitored to see that strategies are achieving the desired outcome.

A review of consumer files by the Assessment Team and discussion with consumers/representatives identified the service does not have discussions about advanced care planning or end of life planning. Consumer care files did not evidence discussion or planning in relation to consumers’ needs, goals and preferences for advanced care planning or end of life care.

The approved provider’s response does not dispute the Assessment Team’s findings and notes that a new assessment and care planning process is being put in place.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(c) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 Applicable |

*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.*

Management acknowledged care plans are not yet accessible for consumers, although they can access information in the form of a summary care plan from their home care agreement. Care plans are not in the consumer’s home where care and services are delivered at home.

The approved provider’s response does not dispute the Assessment Team’s findings and notes that a new assessment and care planning process is being put in place.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(e) | HCP | Not Compliant |
|  | CHSP | Not Applicable |

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

The Assessment Team identified next review dates for care plans are documented in the consumer’s electronic file. However, management advised a care plan review process has not yet been implemented. Management said the review date is not adhered to or monitored and consumer reviews are not conducted unless requested by the consumer or representative.

The approved provider’s response does not dispute the Assessment Team’s findings and notes that a new assessment and care planning process is being put in place.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

# 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

Consumers and representatives’ feedback was mostly positive in relation to the personal and clinical they receive. Clinical care is provided through brokerage arrangements via other organisations.

The Assessment Team found best practice care was not being delivered as the approved provider’s care coordination team did not demonstrate how they know evidence based care is being delivered. Care staff said they provide best practice care as they hold a revelvant qualification and others said it is best practice because the consumer is satisfied.

The approved provider does address any risk that the consumer / representative raises but does not proactively monitor and plan for risks to consumers’ wellbeing. For example risks associated with diabetes management or falls, or returning from hospital with changed needs. Where a fall, or other risk does eventuate, strategies are not put in place to prevent a further similar incident occuring.

Management advised whilst the information relating to consumers’ conditions, needs and preferences is not clearly documented, discussions with consumers, their families and those involved in their care do occur.

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

The service does not provide any Commonwealth home support programme services.

**Assessment of Standard 3 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(a) | HCP | Not 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.*

The Assessment Team found consumers are not receiving quality care and care delivered is not optimal. For example, on discharge from hospital consumers’ care is not adjusted in line with updated medical orders. Care plans do not provide sufficient detail on issues such as mobility, nutrition and supporting consumers living with dementia. Staff undertaking duties could not describe basic clinical monitoring for known aged care risk areas including skin integrity. Management could not describe how they know that staff are delivering evidence based contemporary clinical care.

The approved provider’s response does not dispute the Assessment Team’s findings and notes some actions in relation to documented information. The response does not provide further information on how the service demonstrates that consumers with clinical needs are receiving care that reflects best practice evidence based clinical care.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

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

Consumers and representatives described various risks to consumers’ health and wellbeing, such as experiencing pain, poor nutrition, and diabetes. The Assessment team found, while care staff were generally aware of risks to consumers and had raised additional risks for some consumers, there was no evidence of effective management of these risks.

Management strategies such as re-assessments or referrals to other health practitioners or specialist services were not evident to the Assessment Team.

The approved provider’s response does not dispute the Assessment Team’s findings and notes some actions in relation to strengthening staff skills in this area with the appointment of a care manager.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

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

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

Management advised the Assessment Team, other than referrals to allied health services selected by consumers/representatives, they do not proactively refer consumers to service providers. Care file reviews identify referrals occur in response to requests of consumer/representative.

The approved provider’s response does not dispute the Assessment Team’s findings and notes some proactive engagement with consumers in relation to optimising their wellbeing though engaging appropriate clinical support services is occurring.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

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

### 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/representatives described how the service supports their interaction with the community, social engagement and companionship provided by care workers.

Management advised whilst care files do note evidence of how services and supports promote the wellbeing for consumers, the consistent and frequent communication with consumers assist them to deliver services and supports to promote consumer’s emotional and psychological wellbeing.

This Quality Standard for the Home care packages service is assessed as Not Compliant as one the seven requirements of the Standard has been assessed as Not Compliant.

The service does not provide any Commonwealth home support programme services.

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(a) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 | Not Applicable |

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(c) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 | Not Applicable |

*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 | Not Compliant |
|  | CHSP | Not Applicable |

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

Management advised the Assessment Team, they do not proactively refer consumers to lifestyle service providers such as community groups or counselling services to support consumers wellbeing.

The approved provider’s response does not dispute the Assessment Team’s findings and outlines that a referral template has been developed. The response does not demonstrate that the service is actively engaging with current consumers in discussing what other supports the service might facilitate to support the consumers’ social and lifestyle goals.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement.

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(f) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Where meals are provided, they are varied and of suitable quality and quantity.*

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(g) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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

Standard 5 is not applicable to this service.

## 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*

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

### 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

Consumers/representatives interviewed are aware of the feedback process and are supported and encouraged to provide feedback.

Management demonstrated they are responsive to feedback and use this information to make changes and improve service delivery.

This Quality Standard for the Home care packages service is assessed as Compliant as all the requirements of the Standard have been assessed as Compliant.

The service does not provide any Commonwealth home support programme services.

**Assessment of Standard 6 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(a) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(b) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

The Assessment Team’s evidence outlines consumers and representatives interviewed demonstrated an awareness of external complaint avenues and supports available to them and said they felt safe to raise any concern.

The Assessment Team noted an opportunity to improve the documentation which is provided to consumers in relation to advocacy and language services.

I note the service provides care and services a culturally and linguistic diverse community and employs bi-lingual staff to support effective communication with consumers.

The approved provider’s response states they have consolidated all consumer information into a Welcome Pack, and I am satisfied this addresses deficits in documentation noted by the Assessment Team.

Based on all the available evidence I am satisfied the service complies with this Requirement.

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(c) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) | HCP | Compliant |
|  | CHSP | Not Applicable |

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

# STANDARD 7 Human resources

# HCP Not Compliant CHSP Not Applicable

### 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

Consumers/representatives commented that all care workers are kind and caring. including workers from subcontracted organisations.

Management demonstrated how the workforce is planned and an ongoing recruitment process to ensure enough staff are available to deliver scheduled care and services was noted by the Assessment Team.

Staff, including care workers indicated in various ways confidence in their abilities to perform effectively in the role.

The Assessment Team found care coordination staff did not have a clear understanding of the responsibilities of home care package management.

This Quality Standard for the Home care packages service is assessed as Non-Compliant as one of the five requirements of the Standard has been assessed as Compliant.

The service does not provide any Commonwealth home support programme services.

**Assessment of Standard 7 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(a) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 | Not Applicable |

*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 Applicable |

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

The Assessment Team’s evidence demonstrates care coordination staff have failed to demonstrate relevant skills in the management of home care packages. The report also notes some care staff are working outside of the scope of their role, and management have failed to identify this through their own oversight mechanisms.

The approved provider’s response does not dispute the Assessment Team’s findings and notes a system review on the qualifications of staff has occurred and a new staff member with a relevant care management background has been employed.

Based on all the available evidence I am satisfied that at the time of the audit the approved provider did not comply with this Requirement as staff did not have the relevant knowledge to perform their role.

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

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

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| Requirement 7(3)(e) | HCP | Compliant |
|  | CHSP | Not Applicable |

*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 Applicable

### 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

Management were unable to demonstrate an effective governance framework is in place to ensure safe and quality care.

Management advised the services management team meet on a regular basis to review and discuss the service and the quality of care. Management stated the meetings are informal and no reports are tabled at the meeting all information being provided verbally.

Management stated the organisation does not have a clinical governance framework in place. All clinical care is provided by nursing agencies and the consumer’s general practitioner.

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

The service does not provide any Commonwealth home support programme services.

**Assessment of Standard 8 Requirements**

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| Requirement 8(3)(a) | HCP | Compliant |
|  | CHSP | Not Applicable |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

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| --- | --- | --- |
| Requirement 8(3)(b) | HCP | Not Compliant |
|  | CHSP | Not Applicable |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

The Assessment Team found evidence that the service met this Requirement, however, based on all the evidence available to me, I have formed a different view.

I am not satisfied based on the evidence, that safe and quality care is being delivered and note that the governing body has not itself identified this to be the case, which indicates to me they are not effectively monitoring the quality of care.

Management at the service stated that meetings are informal and no reports, including clinical, are tabled, all information provided is verbal.

No evidence is available to demonstrate that the governing body has a system in place to hold subcontracted service providers accountable for the quality of their work, which includes the delivery of clinical services.

Based on all the evidence available to me I find the service does not comply with this Requirement.

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| --- | --- | --- |
| Requirement 8(3)(c) | HCP | Not Compliant |
|  | CHSP | Not Applicable |

*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 Assessment Team found deficits in governance systems noting unqualified care workers were providing personal care and brokerage agreements do not include required compliance checks.

The Assessment Team found systemic failures in information management in relation to Standard 2.

The approved provider’s response does not dispute the Assessment Team’s findings and notes that service agreements with third party organisations are under review.

Based on all the evidence available to me I find the service does not comply with this Requirement.

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

*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.*

The Assessment Team found the service does not have an effective system to manage risk across the organisation, and is reactive rather than proactive to risk identification and management.

The approved provider’s response did not dispute the findings of the Assessment Team and noted the service is developing a risk framework.

Based on all the evidence available to me I find the service does not comply with this Requirement.

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

The Assessment Team found while some staff had some knowledge of sub requirements (i) (ii) and (iii) above, the service did not have an effective clinical governance framework in place.

Management said all clinical care for consumers is provided by nursing agencies and/or the consumers general practitioner.

The approved provider’s response does not dispute the findings of the Assessment Team and notes that additional training on the Aged Care Quality Standards has occurred.

Based on all the evidence available to me I find the service does not comply with this Requirement, as clinical governance is not embedded in the day to day clinical care of consumers.

# 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.

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| Requirement 2(3)(a) |  |  |
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*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.*

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| Requirement 2(3)(b) |  |  |
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*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.*

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

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| Requirement 2(3)(e) |  |  |
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*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.*

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| Requirement 3(3)(a) |  |  |
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*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.*

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| Requirement 3(3)(b) |  |  |
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*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

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

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| --- | --- | --- |
| Requirement 4(3)(e) |  |  |
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*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(c) |  |  |
|  |  |  |

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

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

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

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

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| 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.*