New Home Aged & Disabilities Care

Performance Report

Suite 805, 89 York Street   
Sydney NSW 2000  
Phone number: 0415 223 433

**Commission ID:** 201420

**Provider name:** New Home Care Pty Ltd

**Assessment Contact - Desk date:** 12 April 2022

**Date of Performance Report:** 17 May 2022

# Performance report prepared by

J Zhou, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

**Services included in this assessment**

**Home Care:**

* Home Care Service, 26165, Suite 805, 89 York Street, Sydney NSW 2000

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(b) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(d) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | Compliant |

# Detailed assessment

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 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 Assessment Contact - Desk; the Assessment Contact - Desk report was informed by observations at the service, review of documents and interviews with staff, consumers/representatives and others.
* the provider’s response to the Assessment Contact - Desk report received 16 May 2022.

# STANDARD 2 Ongoing assessment and planning with consumers

### 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 Quality Standard does not have an overall compliance finding as not all Requirements under this Standard have been assessed.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

During the quality audit visit, the service was unable to demonstrate adequate ongoing assessment and planning. Of the consumers sampled, the evidence showed the service’s strategies to support consumers were not consistently documented. There were no strategies documented on how carers can best manage one particular consumer’s moods while delivering care and services to her. That same consumer had an incomplete risk assessment form which is an ongoing issue for this service with other consumers in the same position with incomplete or limited information on their risk assessment forms.

Since the quality review, the approved provider has responded to the deficiencies outlined by the audit team. I have now seen evidence that the approved provider has identified and addressed the gaps in its sampled consumer’s risk assessment forms and care planning documents. These documents now contain adequate information to inform the care staff on how to deliver appropriate care in line with the consumer’s current needs, goals and preferences. Furthermore, there is now evidence that the approved provider has documented strategies to ensure that it continues to document care directives in its consumer support plans. Further details about this additional evidence is contained in standard 7.

On the basis of the additional evidence from the approved provider, I consider this Requirement is now compliant.

# STANDARD 7 Human resources

### 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

The Quality Standard does not have an overall compliance finding as not all Requirements under this Standard have been assessed.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(d) Compliant

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

The Assessment Team gathered evidence which demonstrates the approved provider has a system in place for the recruitment and onboarding of new staff into its organisation. The approved provider has a methodology of ensuring the staff hired are qualified and capable of performing their roles in the sector.

There is further evidence that the approved provider is utilising a training matrix for its workforce to ensure there is a system to check that its staff is receiving the requisite training and information to perform their roles to the expected standard.

As part of the approved provider’s response to the assessment team’s report, I have sighted further evidence that the approved provider is proactively training its workforce to better document care planning information in consumer’s care plans and risk assessments of their needs.

On the basis of the evidence sighted, the approved provider is compliant in this Requirement.

# STANDARD 8 Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

The Quality Standard does not have an overall compliance finding as not all Requirements under this Standard have been assessed.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

The evidence sighted by the Assessment Team goes towards the approved provider’s compliance with this Requirement. I am satisfied that the service has a risk management framework and systems in place which it implements. Staff have been trained on mandatory abuse and neglect training and this is now embedded in the staff induction. Where issues are identified, the management is using the incident forms and register to inform their discussions at monthly clinical governance meetings. Several consumers have had home risk assessements developed and completed.

On the basis of the evidence gathered on this Requirement, I find that it is compliant with the Requirement.

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.