Parkglen Friendly Society Limited

Performance Report

|  |  |
| --- | --- |
| **Address:** | 360 Cheltenham Road KEYSBOROUGH VIC 3173 |
| **Phone:** | 1300 117 147 / 03 9798 1633 |
| **Commission ID:** | 300220 |
| **Provider name:** | Parkglen Friendly Society Limited |
| **Activity type:** | Quality Audit |
| **Activity date:** | 2 August 2022 to 4 August 2022 |
| **Performance report date:** | 23 September 2022 |

# Performance report prepared by

M Cooper, 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:**

* Parkglen Home Care Services, 19333, 360 Cheltenham Road, KEYSBOROUGH VIC 3173

# Overall assessment of Service/s

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | HCP | Compliant |
| Requirement 1(3)(a) | HCP | Compliant |
| Requirement 1(3)(b) | HCP | Compliant |
| Requirement 1(3)(c) | HCP | Compliant |
| Requirement 1(3)(d) | HCP | Compliant |
| Requirement 1(3)(e) | HCP | Compliant |
| Requirement 1(3)(f) | HCP | Compliant |
|  |  |  |
| Standard 2 Ongoing assessment and planning with consumers | HCP | Compliant |
| Requirement 2(3)(a) | HCP | Compliant |
| Requirement 2(3)(b) | HCP | Compliant |
| Requirement 2(3)(c) | HCP | Compliant |
| Requirement 2(3)(d) | HCP | Compliant |
| Requirement 2(3)(e) | HCP | Compliant |
|  |  |  |
| Standard 3 Personal care and clinical care | HCP | Compliant |
| Requirement 3(3)(a) | HCP | Compliant |
| Requirement 3(3)(b) | HCP | Compliant |
| Requirement 3(3)(c) | HCP | Compliant |
| Requirement 3(3)(d) | HCP | Compliant |
| Requirement 3(3)(e) | HCP | Compliant |
| Requirement 3(3)(f) | HCP | Compliant |
| Requirement 3(3)(g) | HCP | Compliant |
|  |  |  |
| Standard 4 Services and supports for daily living | HCP | Compliant |
| Requirement 4(3)(a) | HCP | Compliant |
| Requirement 4(3)(b) | HCP | Compliant |
| Requirement 4(3)(c) | HCP | Compliant |
| Requirement 4(3)(d) | HCP | Compliant |
| Requirement 4(3)(e) | HCP | Compliant |
| Requirement 4(3)(f) | HCP | Compliant |
| Requirement 4(3)(g) | HCP | Compliant |
|  |  |  |
| Standard 5 Organisation’s service environment | HCP | Not Applicable |
|  |  |  |
| Standard 6 Feedback and complaints | HCP | Compliant |
| Requirement 6(3)(a) | HCP | Compliant |
| Requirement 6(3)(b) | HCP | Compliant |
| Requirement 6(3)(c) | HCP | Compliant |
| Requirement 6(3)(d) | HCP | Compliant |
|  |  |  |
| Standard 7 Human resources | HCP | Compliant |
| Requirement 7(3)(a) | HCP | Compliant |
| Requirement 7(3)(b) | HCP | Compliant |
| Requirement 7(3)(c) | HCP | Compliant |
| Requirement 7(3)(d) | HCP | Compliant |
| Requirement 7(3)(e) | HCP | Compliant |
|  |  |  |
| Standard 8 Organisational governance | HCP | Compliant |
| Requirement 8(3)(a) | HCP | Compliant |
| Requirement 8(3)(b) | HCP | Compliant |
| Requirement 8(3)(c) | HCP | Compliant |
| Requirement 8(3)(d) | HCP | Compliant |
| Requirement 8(3)(e) | HCP | Compliant |

# 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 7 September 2022

# STANDARD 1 Consumer dignity and choice

# HCP Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers and representatives reported they feel respected and valued by the support staff, care facilitators and management at the service. Staff and management demonstrated they are familiar with the identity, culture and diversity of each consumer and spoke about consumers using respectful language. Care documentation identifies each consumers’ culture, identity and diversity with respect to their care and service needs.

Consumers and representatives reported they feel supported to make decisions about their own care and can elect to involve others in their care should they choose to. Consumers described the ways their services supports them to maintain relationships and connections with their community. Care documentation identifies each consumers’ social supports, relationships of importance.

All consumers and representatives interviewed expressed in various ways they receive timely information from the service that is easy to understand and helps to inform their decision making.

Staff showed a strong understanding of how consumer’s privacy is respected and how confidentiality of personal information is maintained.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

**Assessment of Standard 1 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(a) | HCP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(b) | HCP | Compliant |
|  |  |  |

### *Care and services are culturally safe.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP | Compliant |
|  |  |  |

*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 |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Compliant |
|  |  |  |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(f) | HCP | Compliant |
|  |  |  |

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers

# HCP Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers and representatives were consistent in their feedback that the assessment and care planning is collaborative and results care and services that are well planned. Assessment staff showed a strong understanding of assessment and care planning and there are documented templates, checklists and procedures to guide staff through the process. Consumer files contained comprehensive needs assessments and detailed care plans (partnership plans) which outline the identified risks and provide clear guidance for support staff. Support staff confirmed that task lists provide the information for safe and effective care and management of risk associated with the care of the consumer.

Assessments and care plans reviewed were detailed, person centred and tailored to the consumer’s current needs and preferences. Staff were familiar with the current needs and preferences of the consumers they support, as reflected in the care plan. There was evidence of discussions on advance care planning occurring during the assessment and care planning stages.

Staff discussed how they work in partnership with the consumer and/or representative to understand need and minimise risk and care documentation evidenced the service’s partnership with the consumer and relevant others.

Consumers and representatives indicated that care and services are regularly reviewed and reviews are timely.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP | Compliant |
|  |  |  |

*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.*

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

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(c) | HCP | Compliant |
|  |  |  |

*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 | Compliant |
|  |  |  |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(e) | HCP | Compliant |
|  |  |  |

*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.*

# STANDARD 3 Personal care and clinical care

# HCP Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers and representatives gave positive feedback on the personal care and clinical support they receive, commenting variously that staff knew what care was to be delivered

Risks associated with the consumer’s care and services were documented in care instructions with risk mitigation strategies to guide staff in managing risks. There is evidence of aids and equipment being used to mitigate risk. Support staff explained various tasks and techniques that are in place to manage the risks facing certain consumers.

Consumers and representatives said, in various ways, that staff are familiar with the consumers and would be in the position to identify if the consumer’s health, function or condition had deteriorated or change. Support staff are aware of their responsibilities in reporting deterioration or change in the consumer.

When asked about referrals, consumers and/or representatives commented positively on the consultation and timeliness and were aware that, when needed, other services would be involved in the service delivery. This included, for example, nursing services for wound treatment and catheter care, podiatry for foot health, physiotherapy and hydrotherapy for flexibility, strength building and falls management and carer support services. Staff are aware of their referral networks and are guided by documented procedures on making referrals. There was evidence in care documentation showing referrals were made against identified need with referral reports and recommendations actioned accordingly.

Staff use personal protective equipment while providing care and services. Support staff understood the importance of infection prevention and control measures.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

**Assessment of Standard 3 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(a) | HCP | Compliant |
|  |  |  |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(b) | HCP | Compliant |
|  |  |  |

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(c) | HCP | Compliant |
|  |  |  |

*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 |
|  |  |  |

*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 |
|  |  |  |

*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 | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(g) | HCP | Compliant |
|  |  |  |

*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 Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers and representatives commented positively on how the service supports activities of daily living to enable the consumer to optimise independence and wellbeing. Assessments and care plans identify services and supports that promote independence and enjoyment. Such supports include assistance with shopping, transport to activities and appointments, personal alarms, house and garden modifications, and equipment that promotes independence. Support staff followed care instructions which align with the assessed need, in order to provide safe and effective services that support activities of daily living.

Consumers and representatives spoke positively about how staff support the consumer’s emotional, spiritual and psychological wellbeing. Care documentation reflects supports that help to maintain wellbeing, including pursuing interests (such as gardening), interacting with support staff over a focus of interest (such as particular television programs or magazine articles) and supporting the carer (through regular respite).

Support strategies include scheduling services enabling attendance at appointments, taxi cards to enable safe transport within the community, companionship for certain activities, and mobile personal alarms to enable consumers to leave the home yet be connected to a safety response.

For consumer receiving delivered meals or a meal preparation services, those interviewed expressed satisfaction with the quality and quantity of meals. Consumers make their own meal choices for what they will have prepared in their own home or which meal service to use for home delivery.

Equipment used include shower chairs, recliners, lift beds, wheeled mobility frames, grab sticks and pressure relieving equipment. Consumers are satisfied equipment is suitable and maintained.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(a) | HCP | Compliant |
|  |  |  |

*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 |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(c) | HCP | Compliant |
|  |  |  |

*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 |
|  |  |  |

*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 | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(f) | HCP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(g) | HCP | Compliant |
|  |  |  |

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 Organisation’s service environment

# HCP 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

The service does not provide a location that consumers attend to receive services. This Standard is not applicable.

## Assessment of Standard 5 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP | Not Applicable |
|  |  |  |

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(b) | HCP | 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 |
|  |  |  |

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 Feedback and complaints

# HCP Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers and representatives expressed they have not encountered concerns when providing feedback and feel enchourage and supported should they choose to. Support staff described the feedback procedures and how they support consumers to provide feedback. Management described the multiple touch points they have with consumers to encourage feedback through various avenues including anonymous surveys, feedback forms, via family members, email and phone calls.

Consumers and representatives said approachable and accessible staff make them feel safe raising concerns. The service supports consumers to access language services when required, and currently staff who speak another language would utilise these skills with consumers. Information relating to external supports for consumer complaints and advocacy services is provided, and available to consumers and their families.

Consumers and representatives reported the service is responsive and consistent in response to feedback and queries. Staff and management described how principles of open disclosure are practiced in the day to day operations and in relation to feedback. The service demonstrated all feedback receives prompt service response and open disclosure process is practiced.

Consumers and representatives provided positive feedback in relation to their services and one representative described an immediate improvement following their complaint related to a change in case management. Staff and management described the value of feedback to assist the service identify improvements to care and services. Management review feedback registers at regular intervals and this is discussed at the monthly quality govenance.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(a) | HCP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(b) | HCP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(c) | HCP | Compliant |
|  |  |  |

*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 |
|  |  |  |

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

# STANDARD 7 Human resources

# HCP Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers and representatives reported staff are punctual, not rushed and there are sufficient staff to deliver and manage their care and services. Management and staff said there are enough staff to deliver quality care and services to consumers. Workforce planning and rolling staff recruitment is managed to ensure staffing levels are met to provide continuous care and services to the consumer.

Consumers and representatives expressed satisfaction with staff and management and described their interactions as being kind, caring and respectful of their identity, culture and diversity. Staff described how they provide person-centred care and services to consumers in a kind and respectful manner, including talking with them and being present with them.

The majority of consumers and representatives reported staff are competent in delivering their care and services. Staff files evidence appropriate qualifications and competencies for each support worker.

Consumers and representatives said in different ways they are satisfied staff have the ability to deliever their care and services and expressed confidence in knowing staff are trained and equipped. Support staff described having access to training and education relevant to their roles.

The service demonstrated staff performance is monitored at regular intervals.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(a) | HCP | Compliant |
|  |  |  |

*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 |
|  |  |  |

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(d) | HCP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(e) | HCP | Compliant |
|  |  |  |

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance

# HCP Compliant

### 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers described participating in activities to evaluate their services through annual surveys, in addition to usual communication touchpoints where the service seeks suggestions, improvements and feedback. Management described how the evaluation form used to encourage each consumer’s engagement.

The organisation demonstrated a culture of inclusive and quality services and is promoted through the governing body and their accountability on the delievery of day to day services. The service is supported by organisational wide governance systems and processes that support the governing body to set the strategic direction of the organisation and maintain oversight of the delivery of services.

The service has effective organisation wide governance systems to monitor information systems, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and complaints. The Board and management have leadership and accountability roles as specified through governance systems to ensure care and service delivery to consumers receiving services through the Home Care Package Programme.

The organisation has a risk framework for managing high impact and high prevalence risks. Staff and management described processes to ensure any elder abuse and neglect would be identified and actioned and described ways they support consumers to live their best life. An incident management system operates, and risks of incidents are mitigated through harm minimisation strategies. At an organisational level, incidents are reported to the governing body as appropriate.

The organisational has a quality governance and risk committed which incorporates clinical governance reporting to the governing body. The service has a clinical care coordinatior with oversight of clinical care. There is a clinical governance framework for the service which outlines the responsibilities and processes for clinical care.

The Quality Standard for the Home care packages service assessed as Compliant as all the relevant requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(a) | HCP | Compliant |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(b) | HCP | Compliant |
|  |  |  |

*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) | HCP | Compliant |
|  |  |  |

*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) | HCP | 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | HCP | Compliant |
|  |  |  |

*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.*

# 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.