**Performance**

**Report**

**1800 951 822**

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| Name of service: | Parkside Brokerage (NAPS 17178) |
| Service address: | 11 Tullah Road Mornington TAS 7018 |
| Commission ID: | 300311 |
| Home Service Provider: | The Parkside Foundation Pty Ltd |
| Activity type: | Quality Audit |
| Activity date: | 6 June 2023 to 8 June 2023 |
| Performance report date: | 7 August 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 Parkside Brokerage (NAPS 17178) (**the service**) has been prepared by M Cooper, 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:**

* Parkside Brokerage, 17178, 11 Tullah Road, Mornington TAS 7018

**CHSP:**

* Care Relationships and Carer Support, 25778, 11 Tullah Road, Mornington TAS 7018
* Community and Home Support, 25779, 11 Tullah Road, Mornington TAS 7018

# Material relied on

The following information has been considered in preparing the performance report:

* the Assessment Team’s report for the Quality Audit; the Quality Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others

# Assessment summary for Home Care Packages (HCP)

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| --- | --- |
| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| --- | --- |
| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 1

|  |  |  |  |
| --- | --- | --- | --- |
| Consumer dignity and choice | | HCP | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant | Compliant |
| Requirement 1(3)(c) | Each consumer is supported to exercise choice and independence, including to:   1. make decisions about their own care and the way care and services are delivered; and 2. make decisions about when family, friends, carers or others should be involved in their care; and 3. communicate their decisions; and 4. make connections with others and maintain relationships of choice, including intimate relationships. | Compliant | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant | Compliant |
| Requirement 1(3)(e) | Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice. | Compliant | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider is treating consumers with dignity, respect and valuing their identity, culture and diversity. Consumers are being supported to make informed choices about their care and services. In addition to this, the Provider is supporting consumers to take risks that enable them to live the best life they can. Consumers and/or representatives confirmed that they are being provided with current, accurate and timely information in a way that is clear and easy to understand.

Consumers and or their representatives sampled said they felt that they were respected and valued by staff and management. They described how their interactions with the service was always respectful and how they felt their backgrounds were understood and respected.

Staff demonstrated an understanding of individual consumer’s cultural and diversity needs and preferences and advised that they undertook mandatory cultural and diversity training upon commencement with the service.

A consumer’s representative said that her mother-in-law had reverted to her native language and staff were working very hard to find alternative methods to understand her and cater for her needs. It was noted that the staff also displayed great patience. Staff advise that care plans that are in the consumer’s homes details their cultural background and highlights any specific needs they may have.

Consumers said the service supports them to live their best life and encourages them to keep independent and active. Staff explained that consumers have the right to call and change their preferences whenever they want. Management spoke about consumer concentric care and that support workers are encouraged to have regular conversations with consumers about their needs and preferences.

Consumer representatives confirmed that the Provider supports them to make decisions to let them live their best life and encourage them to keep independent and active. Staff described the importance of supporting consumers in their choices and described how consumers have the right to take risks and explained assistance measures to ensure consumers are supported when doing so.

All consumers sampled advised they have received regular correspondence and information in relation to their services. The Assessment Team reviewed the welcome pack that is given it all consumers which included Charter of Aged Care Rights, client information handbook, a sampled statement of fees including a how to read guide for the statement.

Having regards to the Assessment Team’s report, comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme service is assessed as compliant as six of the six specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as six of the six specific requirements have been assessed as compliant.

# Standard 2

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| Ongoing assessment and planning with consumers | | HCP | CHSP |
| Requirement 2(3)(a) | Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services. | Compliant | Compliant |
| Requirement 2(3)(b) | Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes. | Compliant | Compliant |
| Requirement 2(3)(c) | The organisation demonstrates that assessment and planning:   1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and 2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer. | Compliant | Compliant |
| Requirement 2(3)(d) | The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided. | Compliant | Compliant |
| Requirement 2(3)(e) | Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider is partnering with consumers and representatives to ensure that the assessment process is effective in assessing individual consumers’ needs, goals and preferences. Risks to consumer’s health and well-being are being considered and taken into account to ensure the effective delivery of safe services. The Provider is documenting consumers care and services plan including regular reviews and risk assessments. Where appropriate the Provider is collaborating with other organisations and providers of care, such as general practitioners and allied health professionals.

When interviewed management described a comprehensive assessment process (for both CHSP and HCP) that has the consumer at the centre of all considerations. All assessments include an initial environmental risk assessment to inform the delivery of safe and effective delivery of care and services. Staff spoke of consumer risk assessment processes and how observation and incident reporting from care staff drives this. Consumers and their representatives interviewed were able to describe a thorough assessment process that considered risk and provided confidence that they are receiving safe and effective care and services.

Having regards to the Assessment Team’s report and the comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme service is assessed as compliant as five of the five specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as five of the five specific requirements have been assessed as compliant.

# Standard 3

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| --- | --- | --- | --- |
| Personal care and clinical care | | HCP | CHSP |
| Requirement 3(3)(a) | Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:   1. is best practice; and 2. is tailored to their needs; and 3. optimises their health and well-being. | Compliant | Compliant |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant | Compliant |
| Requirement 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | Compliant | 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 | Compliant |
| Requirement 3(3)(e) | Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared. | Compliant | Compliant |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| Requirement 3(3)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider is ensuring that identified consumer risks are managed and information is sought regarding consumer’s needs, goals and preferences when nearing end of life. The Provider demonstrated that staff are recognising and responding to consumer’s deterioration or changes to cognitive or physical functions and when required and is undertaking timely and appropriate referrals. Infection related risks are minimised and information about consumers treatment or needs is effectively being communication where responsibility for care is shared.

Management explained the processes for ensuring safe and effective personal care. The process included all care staff undertaking mandatory induction and training upon commencement, mandatory police and working with vulnerable people checks. New staff are assigned buddy shifts to work with an experienced care worker. All staff go through a mandatory probation with ongoing annual performance reviews with feedback and complaints being used to drive care staff feedback and monitoring. Brokered services are managed via contracts which outline the expectations and requirements of the service which are agreed and signed by both parties.

Management described the process for identifying and managing deterioration in consumers health. They advised that all staff are trained (and prompted through feedback sessions and meetings) to be alert for changes in consumer mental, cognitive and physical wellbeing. When changes are detected, staff complete an incident report to inform co-ordinators of changes to the consumer’s condition. Co-ordinators review the incident report daily and determine a course of action with the outcome being recorded in the consumer’s file with follow action being taken when required. Consumers and their representatives interviewed stated that they had confidence in all staff and management at the service to recognise changes in health condition and to take appropriate actions.

The Provider said that consumer’s health and wellbeing status, ongoing needs and preferences are maintained in the consumer files and summarised on the service’s electronic database. All current information is available to care staff at the point of care and any changes relevant to their care is provided to staff before the commencement of each visit to ensure they have the latest information at hand. Management advised that the service works in partnership with other care providers where appropriate and ensures open lines of communication with consumer’s GPs and other medical practitioners.

The Provider said that all staff providing services to consumers have been trained in minimising infection risk and maintaining healthy and safe work environments. The Assessment Team has reviewed the service’s infection control policy and procedure, and outbreak management plan and found this to be sufficiently detailed, readily available to staff providing services and is being used in practice by the service.

All consumers and representatives interviewed advised that all care staff follow infection control guidelines including regular hand washing and sanitising, the appropriate use of PPE (including masks and gloves in consumer’s homes) and always checking with consumers if they have been subject to any illness or recently been in contact with someone who has.

Having regards to the Assessment Team’s report, comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme service is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

# Standard 4

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| Services and supports for daily living | | HCP | CHSP |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant | Compliant |
| Requirement 4(3)(c) | Services and supports for daily living assist each consumer to:   1. participate in their community within and outside the organisation’s service environment; and 2. have social and personal relationships; and 3. do the things of interest to them. | Compliant | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant | Compliant |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider is supporting consumers to feel connected and engaged in meaningful activities that are satisfying to them. The Provider is promoting consumers' emotional, spiritual and psychological well-being through compassion and connection between consumers and members of the workforce. A variety of options are being provided to consumers to support them to live as independently as possible, enjoy life and remain connected to their local community. The Provider is ensuring timely and appropriate referrals to individuals, other organisations and providers of other services.

The Provider said that the services it provides ultimately comes down to consumer choice. The Provider assesses consumer needs but also collects consumer goals and preferences. Case Managers then design the consumers package with them and help to identify services and supports that optimise their overall quality of life. Management stated that the focus of care planning is as much ‘how would you like your services delivered’ as ‘what services do you need’.

Staff have a good understanding of what is important to individual consumers and could describe how they help the consumer to do as much as they can for themselves, if this is their preference. Care planning documents were individualised and included the services and supports provided and specifics on the way they are to be provided, reflecting the involvement of the consumer. A review of several consumer files found that the service places a strong focus on the understanding of consumer goals and preference and actively work with the consumer towards achieving these.

Care staff are trained to identify and monitor changes in consumer’s emotional and psychological well-being, with physical deterioration. Staff are instructed to contact the appropriate Case Manager if they have concerns with a consumer’s mental or emotional state. The Case Manager will then follow up with the consumer, family or appropriate medical professional depending on consumer’s identified needs. Consumers and their representatives stated that the service cares about their emotional well-being and that staff regularly asked how they were doing. Consumers and their representatives spoke highly of the Provider’s efforts to assist them in maintaining connections with friends, family and their personal interests. Staff also confirmed the service was encouraging consumers to remain active and continuing to do things that they like to do.

Consumers’ health and wellbeing status, ongoing needs and preferences are maintained in consumer files and summarised on the Providers electronic database to inform the delivery of care. All information is available to care and brokered care staff at the point of care and any changes relevant to their care is provided to staff before the commencement of each shift to ensure that care staff have the latest information at hand. The Provider is working in partnership with other care providers where appropriate and ensures open lines of communication with consumers’ GPs and other medical practitioners. Meals that are supplied by the Provider are developed in consultation with the consumers based on nutritional needs.

Having regards to the Assessment Team’s report, comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme service is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

# Standard 5

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| Organisation’s service environment | | HCP | CHSP |
| Requirement 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Not applicable | 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 | Not applicable |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable | Not applicable |

Findings

The Quality Standard for the Commonwealth Home Support Programme services and the Home Care Packages service were not assessed as the Approved Provider does not provide a service environment and therefore Standard 5 is not applicable.

# Standard 6

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

Findings

The Assessment Team reports that the Approved Provider is seeking feedback and informing consumers and representatives about internal and external complaint options and the use of advocates and other agencies. Complaints are being actioned to the satisfaction of complainants, using an open disclosure approach. The Provider is reviewing and using this information to make improvements to consumer quality of care and services.

Consumers and their representatives said they know how to provide feedback or complaints and they feel safe to do so. If they had a concern they would talk to their support worker or their service co-ordinator. The Provider maintains a feedback register that is monitored by management. The Provider’s staff were able to demonstrate an understanding of how they support consumers and others to provide feedback and make complaints. Consumers have been provided with information in relation to external advocacy and interpretation services in other languages. Further to this, consumers said that they were satisfied that any issues they raised were dealt with in a timely manner.

Having regards to the Assessment Team’s report, comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme services is assessed as compliant as four of the four specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as four of the four specific requirements have been assessed as compliant.

# Standard 7

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

Findings

The Assessment Team reports that the Approved Provider is planning processes and procedures to ensure there are sufficient staff, with the right skill mix to deliver safe and quality care and services to consumers. The Provider demonstrated a commitment to respectful, quality care and services through the recruitment, selection and induction of staff. Staff are being monitored to ensuring competency and knowledgeable and supported in their role.

Consumers said there are adequate staff who are kind and respectful to ensure consumers receive care and services that meet their needs, goals, and preferences. Further to this staff asserted that they have enough time to provide safe care and services to consumers. The Provider also demonstrated that careful consideration is undertaken in the matching of staff members skillsets, personalities and/or cultural backgrounds to appropriate consumers. Where brokered service providers are used agreements are in place to ensure that contractors adhere to the core values of the service provider and are working in line with the quality standards.

Consumers were satisfied that the staff were competent and has sufficient skills to provide the level of care they needed. All staff attend an annual performance appraisal with their immediate manager. This includes opportunities to discuss how they are progressing, addressing any feedback received from consumers as well as identifying and documenting any training and development requirements. Staff said they had participated in induction, probation periods and annual performance appraisals and are satisfied any training or development needs are addressed in a timely manner.

Having regards to the Assessment Team’s report, comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme service is assessed as compliant as five of the five specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as five of the five specific requirements have been assessed as compliant.

# Standard 8

|  |  |  |  |
| --- | --- | --- | --- |
| Organisational governance | | HCP | CHSP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant | Compliant |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Compliant | Compliant |
| Requirement 8(3)(c) | Effective organisation wide governance systems relating to the following:   1. information management; 2. continuous improvement; 3. financial governance; 4. workforce governance, including the assignment of clear responsibilities and accountabilities; 5. regulatory compliance; 6. feedback and complaints. | Compliant | Compliant |
| Requirement 8(3)(d) | Effective risk management systems and practices, including but not limited to the following:   1. managing high impact or high prevalence risks associated with the care of consumers; 2. identifying and responding to abuse and neglect of consumers; 3. supporting consumers to live the best life they can 4. managing and preventing incidents, including the use of an incident management system. | Compliant | Compliant |
| Requirement 8(3)(e) | Where clinical care is provided—a clinical governance framework, including but not limited to the following:   1. antimicrobial stewardship; 2. minimising the use of restraint; 3. open disclosure. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider is using processes to involve consumers and representatives in the development and delivery of care and services. The governing body has demonstrated its commitment to a culture of safe, inclusive quality care and services and is accountability for its delivery. The Provider is using effective organisation wide governance systems, including information management, continuous improvement, financial, workforce, regulatory compliance and feedback and complaints to improve consumers’ care and services. It is also managing risk including high impact, high prevalence risks, and supporting consumers to live the best life they can.

The organisation demonstrated that consumers are engaged in the development, delivery and evaluation of care services and are supported in that engagement. Further to this, feedback is sought from consumers through regular consumer surveys and bi-annual consumer meetings where all consumers are invited to attend a session in person with the Provider’s staff and management. Any outcomes for the feedback is monitored by management.

The Provider has established information management systems which includes policies and procedures to manage information and electronic documentation. Information is maintained securely, and privacy and confidentiality policies apply. Electronic information is password protected, with staff access according to roles and responsibilities.

Opportunities for improvement are identified through the feedback and complaint systems, incidents, changes to legislation and analysis of consumer and representative survey feedback, as well as a review of policies and procedures. The Provider’s continuous improvement plan demonstrated identification, actioning and outcomes for each initiative. All of which are completed in a timely manner.

Consumer financial budgets and statements are generated on a monthly basis by staff; any variances are reviewed by the Provider’s management with the Board receiving regular financial reports.

Workforce governance is overseen by the Provider’s management who work to promote an adequate workforce now and into the future. Staff performance appraisals and feedback management also support consumer quality care and services. Where brokered services are used, signed agreements between parties that clearly set out requirements and expectations of staff providing these services.

The organisation maintains up to date information on regulatory update services, and State and Commonwealth government notifications. The executive team track progress and compliance with new regulatory reforms. Policy and procedure reviews are implemented in accordance with relevant changes, with staff and relevant stakeholders informed, as required.

The Provider has feedback and complaints systems, processes and procedures to support improved outcomes for consumers. Consumer complaints are reviewed and forwarded to management for review. Major complaints are reported directly to the Board.

The Provider has a risk framework for managing high impact and high prevalence risks, identifying and responding to abuse and neglect of consumers, supporting consumers to live the best life they can and managing and preventing incidents. Staff have participated in consumer abuse and neglect training. A robust incident management register is maintained that includes the completion of an incident log, actions taken and outcomes. A further ‘risk matrix’ supports the identification of the risk level and importance.

The Provider demonstrated that it has a robust and well documented clinical governance framework support by a board that includes members with extensive clinical experience who provides ongoing oversight and guidance in relation to matters of clinical governance.

Through its policies the Provider has established an antimicrobial stewardship with clear guidelines for staff on how to provide effective management regarding the delivery of antibiotics.

Management stated that it does not currently have any consumers who are subject to the use of restraint. However, if a consumer was identified as requiring restraint in any capacity, they would engage the services of medical professionals and conduct a thorough process assessing risk, communicating with the consumer and their representatives and ensure compliance with the aged care standards prior to delivering services. Staff demonstrated an understanding of restrictive practices and the requirement to advise the service if they have any concerns in relation to this.

Having regards to the Assessment Team’s report, comments from the Approved Provider at the time of the audit, the Approved Provider’s obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has complied with this Standard.

The Quality Standard for the Commonwealth Home Support Programme service is assessed as compliant as five of the five specific requirements have been assessed as compliant.

The Quality Standard for the Home Care Packages services is assessed as compliant as five of the five specific requirements have been assessed as compliant.

1. The preparation of the performance report is in accordance with section s57 – quality audit,of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)