Resurrection Catholic Church Keysborough

Performance Report

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| **Address:** | 402 Corrigan Road KEYSBOROUGH VIC 3173 |
| **Phone:** | 03 9798 7005 |
| **Commission ID:** | 300677 |
| **Provider name:** | Resurrection Catholic Church Keysborough |
| **Activity type:** | Quality Audit |
| **Activity date:** | 23 August 2022 to 26 August 2022 |
| **Performance report date:** | 30 September 2022 |

# Performance report prepared by

G Roberts, 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**

**CHSP:**

* Allied Health and Therapy Services, 4-B2KS6HW, 402 Corrigan Road, KEYSBOROUGH VIC 3173

# Overall assessment of Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | CHSP | | Not Compliant | |
| Requirement 1(3)(a) | CHSP | | Compliant | |
| Requirement 1(3)(b) | CHSP | | Compliant | |
| Requirement 1(3)(c) | CHSP | | Compliant | |
| Requirement 1(3)(d) | CHSP | | Compliant | |
| Requirement 1(3)(e) | CHSP | | Not Compliant | |
| Requirement 1(3)(f) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 2 Ongoing assessment and planning with consumers | CHSP | | Compliant | |
| Requirement 2(3)(a) | CHSP | | Compliant | |
| Requirement 2(3)(b) | CHSP | | Compliant | |
| Requirement 2(3)(c) | CHSP | | Compliant | |
| Requirement 2(3)(d) | CHSP | | Compliant | |
| Requirement 2(3)(e) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 3 Personal care and clinical care | CHSP | | Compliant | |
| Requirement 3(3)(a) | CHSP | | Compliant | |
| Requirement 3(3)(b) | CHSP | | Compliant | |
| Requirement 3(3)(c) | CHSP | | Not Applicable | |
| Requirement 3(3)(d) | CHSP | | Compliant | |
| Requirement 3(3)(e) | CHSP | | Compliant | |
| Requirement 3(3)(f) | CHSP | | Compliant | |
| Requirement 3(3)(g) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 4 Services and supports for daily living | CHSP | | Not Applicable | |
| Requirement 4(3)(a) | CHSP | | Not Applicable | |
| Requirement 4(3)(b) | CHSP | | Not Applicable | |
| Requirement 4(3)(c) | CHSP | | Not Applicable | |
| Requirement 4(3)(d) | CHSP | | Not Applicable | |
| Requirement 4(3)(e) | CHSP | | Not Applicable | |
| Requirement 4(3)(f) | CHSP | | Not Applicable | |
| Requirement 4(3)(g) | CHSP | | Not Applicable | |
|  |  | |  | |
| Standard 5 Organisation’s service environment | CHSP | | Compliant | |
| Requirement 5(3)(a) | CHSP | | Compliant | |
| Requirement 5(3)(b) | CHSP | | Compliant | |
| Requirement 5(3)(c) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 6 Feedback and complaints | CHSP | | Compliant | |
| Requirement 6(3)(a) | CHSP | | Compliant | |
| Requirement 6(3)(b) | CHSP | | Compliant | |
| Requirement 6(3)(c) | CHSP | | Compliant | |
| Requirement 6(3)(d) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 7 Human resources | CHSP | | Compliant | |
| Requirement 7(3)(a) | CHSP | | Compliant | |
| Requirement 7(3)(b) | CHSP | | Compliant | |
| Requirement 7(3)(c) | CHSP | | Compliant | |
| Requirement 7(3)(d) | CHSP | | Compliant | |
| Requirement 7(3)(e) | CHSP | | Compliant | |
|  |  | |  | |
| Standard 8 Organisational governance | CHSP | | Not Compliant | |
| Requirement 8(3)(a) | CHSP | | Compliant | |
| Requirement 8(3)(b) | CHSP | | Compliant | |
| Requirement 8(3)(c) | CHSP | | Not Compliant | |
| Requirement 8(3)(d) | CHSP | | Compliant | |
| Requirement 8(3)(e) | CHSP | | Compliant | |
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# 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 16 September 2022

# STANDARD 1 Consumer dignity and choice

# CHSP Not 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

Consumers interviewed stated they are treated with respect and that their identity, culture and diversity are valued.

Consumers described how they are involved in decision-making and supported by the service to maintain relationships and continue doing activities important to them. Where a risk is identified, service staff have discussions with the consumer to support and advise how to manage the risk.

Consumers described how the service supports them to do things important to them, and, where risk is identified, there is discussion and support on how to manage the risk. Service staff interviewed by the assessment team demonstrated and evidenced through feedback from consumers demonstrated consumers are consulted in making decisions about their care and services whilst the service promotes choice of independent living.

The service did not demonstrate consumers are always provided with current and accurate information.

The service demonstrated through interviews with service staff that consumer information is kept confidential. Consumers said they felt their information was kept confidential.

The Quality Standard for the Commonwealth home support programme services is assessed as Non-compliant as one of the six specific requirements have been assessed as Non-compliant.

**Assessment of Standard 1 Requirements**

|  |  |  |
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| Requirement 1(3)(a) | CHSP | Compliant |
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*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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| Requirement 1(3)(b) | CHSP | Compliant |
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### *Care and services are culturally safe.*

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| --- | --- | --- |
| Requirement 1(3)(c) | CHSP | Compliant |
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*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.*

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| Requirement 1(3)(d) | CHSP | Compliant |
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### *Each consumer is supported to take risks to enable them to live the best life they can.*

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| Requirement 1(3)(e) | CHSP | Not Compliant |
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*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.*

Findings

The service did not demonstrate consumers are always provided with current and accurate information. The service offers information about the care services, privacy, and fees. Other information requirements, such as The Charter of Aged Care Rights, are not current and signed by consumers

Service staff and management were unaware The Charter of Aged Care Rights had been updated and the legislative requirement to seek a consumer-signed copy reflecting consumers’ understanding of their rights under The Charter. For example

The majority of consumers' files, evidenced by the assessment team, had consent forms signed by service staff instead of the consumer or their representative.

Service staff and management were unaware The Charter of Aged Care Rights had been updated and the legislative requirement to seek a consumer-signed copy reflecting consumers’ understanding of their rights under The Charter.

While consumers were satisfied with the information, the assessment team identified a number of key documents were not provided.

In the service's response to the assessment teams report, it was explained that immediately after the quality audit, the service began updating the information provided to clients, including the Charter of Aged Care Rights, the consent form, feedback and complaints information, podiatry information in other languages, and a consumer booklet. I acknowledge the service’s plan for improvement; however, at the time of the quality audit, the service remained non-compliant with this requirement.

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| Requirement 1(3)(f) | CHSP | Compliant |
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*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers

# CHSP 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

The assessment team found the service demonstrated that assessment and care planning processes employed by the service consider risks for all consumers and inform the delivery of safe and effective care and services. If a risk is identified, it is assessed to understand whether there will be an impact on care delivery.

The assessment team found assessment and planning identify and addresses the consumer’s current goals and preferences. Consumers explained in various ways that their current needs, goals and preferences are taken into consideration by the service. While advanced care planning and end-of-life planning are not considered or discussed during the assessment processes, Service staff described if consumers raised topics, they would direct them to other support such as their medical practitioner.

Consumers described during interviews with the assessment team that they are involved in the assessment, planning and review of care and services. The service demonstrated assessment and planning is based on a partnership with the consumer and representative, plus other professionals and agencies.

The service demonstrated that the outcomes of assessment and planning are communicated to the consumer. However, a documented care plan and treatment plan are not provided to the consumer. While care plans have not been provided, all consumers interviewed by the assessment team were aware of their care requirements, treatments and expressed satisfaction with the care provided. Treatment plans and care plans were on consumers’ files and discussed with consumers during service provision.

The service demonstrated reviews occur regularly, and all consumers have had proper care and service reviews. Progress notes evidenced ongoing communication with the consumer and their representative.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | CHSP | Compliant |
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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) | CHSP | Compliant |
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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)(c) | CHSP | Compliant |
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*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.*

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

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

# STANDARD 3 Personal care and clinical care

# CHSP 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

At the time of assessment, the service demonstrated that consumers receive safe and effective care in accordance with the consumer’s needs to optimise their health and well-being. Consumers explained in various ways that they receive care that is safe and right for them, and they have continuity of care.

The service evidenced ongoing management of high impact or high prevalence risks associated with the care of consumers through interviews with service staff, evidencing comprehensive knowledge of consumers’ needs

The service demonstrated effective systems and processes with care for monitoring deterioration or change of consumers’ mental health, cognitive and physical function and; timely referrals to other health professionals.

Consumers described in different ways that staff are familiar with the health, function and condition of consumers and would be able to identify if this changed. Care documents evidenced by the assessment team showed referrals to relevant services. Service staff demonstrated an understanding of when and how consumer referrals are initiated. The service evidenced policies and procedures are in place, including training to minimise infection-related risks.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

**Assessment of Standard 3 Requirements**

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| Requirement 3(3)(a) | CHSP | Compliant |
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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) | CHSP | Compliant |
|  |  |  |

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

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| --- | --- | --- |
| Requirement 3(3)(c) | CHSP | Not Applicable |
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*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

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| Requirement 3(3)(d) | CHSP | Compliant |
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*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.*

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| --- | --- | --- |
| Requirement 3(3)(e) | CHSP | Compliant |
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*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.*

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

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| Requirement 3(3)(g) | CHSP | Compliant |
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*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

# 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

The Quality Standard for the Commonwealth Home Support Programme services has not been assessed.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | 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.*

|  |  |  |
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| Requirement 4(3)(b) | CHSP | Not Applicable |
|  |  |  |

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

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| --- | --- | --- |
| Requirement 4(3)(c) | 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) | 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.*

|  |  |  |
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| Requirement 4(3)(e) | CHSP | Not Applicable |
|  |  |  |

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

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| Requirement 4(3)(f) | CHSP | Not Applicable |
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*Where meals are provided, they are varied and of suitable quality and quantity.*

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| Requirement 4(3)(g) | CHSP | Not Applicable |
|  |  |  |

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

# STANDARD 5 Organisation’s service environment

# CHSP Compliant

### 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

Consumers interviewed by the assessment team explained the service promotes independence, the staff are welcoming, and they feel comfortable in the service environment.

Consumers confirmed they access the service freely, with service staff offering to assist them if requested. The environment at the service was easy to access, and they were made to feel welcome. Service management demonstrated the cleanliness of the rooms, including high-touch areas.

The Assessment Team observed the environment to be clean, spacious, comfortable, clean and welcoming. Furniture, fittings and equipment in the service rooms are safe, clean, well-maintained and suitable for consumers.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

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| --- | --- | --- |
| Requirement 5(3)(a) | CHSP | Compliant |
|  |  |  |

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

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| Requirement 5(3)(b) | CHSP | Compliant |
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*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

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| Requirement 5(3)(c) | CHSP | Compliant |
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*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 Feedback and complaints

# CHSP 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

Consumers described being aware of how to raise concerns with service management. Consumers described in different ways as feeling confident about raising concerns and thought that the service would take action. Service staff could describe and explain feedback processes in place to support consumers.

The service could demonstrate that consumers are aware of advocacy services and ways to raise and resolve complaints. However, the use of language services to assist with feedback and complaints relies on bilingual staff or consumer representatives to help the consumer.

The service demonstrated through interviews with service management that there are processes for supporting staff with feedback and complaints

The service demonstrated consumer feedback and complaints are used to improve the quality of care and services. Consumers are satisfied the service listens to their concerns and takes action as necessary.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

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| Requirement 6(3)(a) | CHSP | Compliant |
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*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

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| --- | --- | --- |
| Requirement 6(3)(b) | CHSP | Compliant |
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*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

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| Requirement 6(3)(c) | CHSP | Compliant |
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*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

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| Requirement 6(3)(d) | CHSP | Compliant |
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*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resources

# CHSP 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

The service demonstrated a workforce with sufficiently qualified staff to enable the delivery and management of safe and quality care and services

The service demonstrated, and consumers interviewed by the assessment team acknowledged that the workforce interactions are kind, caring and respectful of the consumer's identity, culture and diversity

The service demonstrated that the workforce receives ongoing support, training and professional development to meet the consumer's needs and deliver the required outcomes.

The service through documents evidenced the workforce is recruited, trained and equipped to deliver the outcomes required. Service staff recruitment is completed in line with the recruitment policy and procedure. Service staff are provided initial and ongoing training and education.

The service demonstrated they regularly assess, monitor and review the performance of each service staff member through an effective human resources system. The service demonstrated they regularly evaluate how staff perform their role.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

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| Requirement 7(3)(a) | CHSP | Compliant |
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*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.*

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| Requirement 7(3)(b) | CHSP | Compliant |
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*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

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| Requirement 7(3)(c) | CHSP | Compliant |
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*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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| Requirement 7(3)(d) | CHSP | Compliant |
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*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

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| Requirement 7(3)(e) | CHSP | Compliant |
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*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance

# CHSP Not 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

Consumers interviewed stated they are involved in developing, reviewing and evaluating their services. The service encourages feedback through all its processes, including an annual survey.

The service demonstrated it has a governing body that is informed and promotes a culture of safe and quality services. Documents evidenced showed reporting occurs to ensure all levels of leadership are informed, and there is recorded discussion on actions raised by the Board.

At the time of assessment, the service was unable to demonstrate that there are effective governance systems to ensure there are policy, processes and reporting structures for the management of consumer information and regulatory compliance. However, the service there are systems in place to provide for continuous improvement, financial reporting, workforce governance and feedback/complaints.

The service evidenced processes to identify and understand high-impact and high-risk consumers with guidance on strategies to support consumers to improve their quality of life. Service management and staff interviewed informed the assessment team that they are unaware of any incidents of abuse and neglect of consumers under the Commonwealth Home Support Programme. However, would respond as required.

The service demonstrated that currently, it does not have a clinical governance framework; however, the contracted service maintains appropriate levels of clinical oversight of consumers who attend the service.

The Quality Standard for the Commonwealth home support programme services are assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 8 Requirements

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| Requirement 8(3)(a) | CHSP | Compliant |
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*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) | CHSP | Compliant |
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*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

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| Requirement 8(3)(c) | CHSP | Not Compliant |
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*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.*

Findings

The service did not demonstrate effective regulatory compliance processes. A review of documentation evidenced by the assessment team and interviews conducted with service management were evidenced.

* Only two consumers receiving Commonwealth homes support programme assistance are registered with My Age Care. Service management advised they are unaware of the requirement for all aged care consumers under the Commonwealth Home Support Programme need to be registered with My Aged Care.
* The service was unaware that legislative requirements for the Charter of Aged Care Rights require consumers' signatures and to be supplied a copy.
* Police checks on two Service staff and four committees of management staff had expired. The service manager stated that the staff and Committee Of Management members had not completed statutory declarations as required.

In the service's response to the assessment team's report, it was explained that changes have begun being implemented with all consumers being requested to register with My Aged Care. As a small community organisation, the service has struggled over the COVID pandemic, and staff shouldered many additional burdens to remain open. However, the service management concedes they need to put more dedicated resources in place to ensure it keeps up-to-date and complies with aged care regulations. They have asked the board to devote more time addressing the identified non-compliance. I acknowledge the service’s plan for improvement; however, at the time of the quality audit, the service remained non-compliant with this requirement.

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| Requirement 8(3)(d) | CHSP | Compliant |
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*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) | CHSP | Compliant |
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*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

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| Requirement 1(3)(e) | CHSP | Not Compliant |
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*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.*

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| Requirement 8(3)(c) | CHSP | Not Compliant |
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*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.*