Rural City of Murray Bridge - MURRAY BRIDGE

Performance Report

2 Seventh Street   
MURRAY BRIDGE SA 5253  
Phone number: 08 8539 1482

**Commission ID:** 600173

**Provider name:** Rural City of Murray Bridge

**Quality Audit date:** 10 May 2022 to 12 May 2022

**Date of Performance Report:** 15 June 2022

# Performance report prepared by

R Reid, 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:**

* CHSP - Social Support - Group, 4-27J63F8, 2 Seventh Street, MURRAY BRIDGE SA 5253
* CHSP - Flexible Respite, 4-23PYL5J, 2 Seventh Street, MURRAY BRIDGE SA 5253
* CHSP - Home Maintenance, 4-23PYL7F, 2 Seventh Street, MURRAY BRIDGE SA 5253
* CHSP - Home Modifications, 4-23PYLBA, 2 Seventh Street, MURRAY BRIDGE SA 5253
* CHSP - Social Support - Individual, 4-23PYLDC, 2 Seventh Street, MURRAY BRIDGE SA 5253
* CHSP - Transport, 4-23PYLEZ, 2 Seventh Street, MURRAY BRIDGE SA 5253
* CHSP - Domestic Assistance, 4-23PO0VA, 2 Seventh Street, MURRAY BRIDGE SA 5253

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | CHSP | 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 | | | Compliant |
| Requirement 1(3)(f) | | CHSP | | | Compliant |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | CHSP | Not Compliant | | |
| Requirement 2(3)(a) | CHSP | | Not Compliant | |
| Requirement 2(3)(b) | CHSP | | Not 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 | Not Applicable | | |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | | CHSP | Compliant | | |
| Requirement 4(3)(a) | CHSP | | Compliant | |
| Requirement 4(3)(b) | CHSP | | Compliant | |
| Requirement 4(3)(c) | CHSP | | Compliant | |
| Requirement 4(3)(d) | CHSP | | Compliant | |
| Requirement 4(3)(e) | CHSP | | Compliant | |
| Requirement 4(3)(f) | CHSP | | Not Applicable | |
| Requirement 4(3)(g) | CHSP | | Compliant | |
| Standard 5 Organisation’s service environment | | | | | | |
|  | | | CHSP | Not Applicable | | |
| 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 | | Compliant | |
| Requirement 8(3)(d) | CHSP | | Not Compliant | |
| Requirement 8(3)(e) | CHSP | | Not Applicable | |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

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

# STANDARD 1 Consumer dignity and choice

# CHSP 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 and representatives interviewed considered that consumers are treated with dignity and respect and that their identity and culture is valued. Consumers can make informed choices about their care and services and maintain their independence to live the life they choose. Sampled consumers and representatives confirmed the service understands what is important to consumers and described in various ways how the service values them and provides services so that they feel comfortable and safe.

Staff described how they respect consumers’ identity and culture while providing services, and how they support consumers to make informed choices about their care and services, including should they wish to take risks, and make decisions about when others should be involved in their care and decision making. Coordinating staff described processes in place to support consumers to take risks if they wish to, including use of a Positive Assessment Tool supported by the service’s Dignity of Risk Management Guidelines. Staff were also able to provide an example of a consumer supported to take risks when they declined home modifications in their home.

The service was able to demonstrate that 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. Sampled consumers and representatives described how information is provided to them verbally and in writing, when they first access the services, at annual reviews and as required. Consumers confirmed they receive clear information that enables them to exercise choice about their care and services. Staff described information provided to consumers as part of the initial assessment and at each review to enable consumers to make decisions regarding the services they receive, and how consumers with communication challenges are supported through advocacy, interpreting and assisted hearing technology.

The service has policies and procedures in place to support an inclusive, consumer-centred and culturally safe approach to the delivery of consumers’ care and services. Care assessment and planning are undertaken in partnership with the consumers and include others they wish to be involved, and relevant information is provided to consumers and representatives to enable them to make informed choices.

The organisation has processes to ensure consumer’s privacy and confidentiality is maintained. The service has established policies and processes to manage consumer’s information and the Assessment Team observed that consumer’s information was safely stored and shared during the Quality Review.

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

**Assessment of Standard 1 Requirements**

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(d) | CHSP | Compliant |
|  |  |  |

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | CHSP | 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.*

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

# STANDARD 2 Ongoing assessment and planning with consumers

# CHSP Not 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 service was not able to demonstrate assessment and planning effectively considers risks to the consumer’s health and well-being, to inform the delivery of safe and effective services, specifically in relation to falls risks.

The service was not able to demonstrate that assessment and planning consistently identifies and addresses the consumer’s current needs, goals and preferences. Care planning documents for consumers contain needs, goals and preferences, however of the sampled consumers they were not reflective of the current needs and preferences or services provided and did not consistently include sufficient information to guide delivery of services.

While the service discusses advance care directives with consumers at commencement of services and annual reviews, the service did not demonstrate that consumer’s directives are considered during assessment and planning, to inform delivery of consumers’ services.

The service was able to demonstrate that initial and ongoing assessment and planning, and care and services reviews, were undertaken in partnership with consumers and representatives and communicated to consumers. Sampled consumers and representatives considered they are partners in assessment and care planning processes. The service has policies and processes to guide staff in relation to assessment and planning, including involvement from other organisations.

Staff interviewed showed an understanding about consumers’ care and services needs and preferences, and were knowledgeable about care planning and assessment process, including re-assessment and reviews.

The Quality Standard for the Commonwealth home support programme services are assessed as not compliant as two of the five specific requirements have been assessed as not compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | CHSP | Not 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.*

Findings

Care planning documentation evidenced comprehensive assessment and planning is undertaken for all consumers, however, assessment of risks to consumers, specifically in relation to falls, was not effective. The lack of assessment of risk for consumers resulted in a lack of documented strategies to support staff and volunteers to deliver safe and effective services. Contracted staff and volunteers advised critical information is mostly communicated verbally and this provides them with a comprehensive knowledge of the consumers they are supporting.

While there was evidence of assessments completed by the service for all consumers sampled, the service did not demonstrate assessment and planning is effectively conducted to consider and document all risks for consumers receiving services, including risks associated with mobility and falls.

The service supports one CHSP consumer with flexible respite services in the community and transport to appointments. At the time of the quality audit the consumer was awaiting a Home Care Package Level 3. The consumer’s progress notes showed they had sustained 3 falls in the last 12 months. Although the consumer was not injured in the first 2 falls, the third fall resulted in bruises and a head wound.

Care planning documents showed that the risk of falls had not been documented to inform safe delivery of respite and transport services. A reassessment form for the consumer did not consider or reference recent falls; the Transport Running Sheet, provided to volunteers to inform delivery of transport services, did not reflect the consumer’s risk of falls, or the use of mobility aids and; the Respite service agreement, provided to contractors, documented the use of a walker, however, did not reflect the risk of falls and detail risk mitigation strategies.

The Assessment Team noted that, although the service has a comprehensive assessment and review process, including gathering information about consumers’ mobility and use of mobility aids, the forms do not prompt staff to ask consumers about falls.

At the time of the quality audit, service coordinators advised they usually keep conversations with consumers positive and do not ask them direct questions about falls. However, they acknowledged assessment of risk of falls and actual falls are relevant to services provided to their consumers and stated they would consider including questions about falls in the future. The coordinators advised that in preparation for the quality audit the service had already identified the need to review assessment processes in relation to risks. The Assessment Team noted this had been documented in the service’s continuous improvement plan.

At the time of the quality audit the service did not demonstrate that assessment and planning effectively considers risks to the consumer’s health and well-being, to inform the delivery of safe and effective services, specifically in relation to risks of falls.

Based on the information reviewed I find this requirement not compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(b) | CHSP | Not 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.*

Findings

The service was not able to demonstrate that assessment and planning documentation consistently identifies and details the needs, goals and preferences for each consumer.

Although care planning documents for 4 sampled consumers had recorded individual consumer needs, goals and preferences, the support plans viewed for those consumers were not consistently reflective of the same information or in relation to services provided and did not consistently include sufficient information to guide delivery of services.

One consumer had documented goals of getting out of the house and having something to look forward to. Strategies to achieve those goals included weekly visits and trips for lunch and shopping. The Assessment Team noted that, while contractors and volunteers providing flexible respite and transport for shopping had been provided some relevant information to guide service delivery, this had not been documented in the consumer’s support plan.

Support plans viewed for 3 other consumers showed that, although their goals had been documented, their individual needs and preferences in relation to social support group and flexible respite services were not documented to effectively guide staff in the delivery of care while providing those services.

At the time of the quality review, the coordinator and management advised information to guide service delivery is documented in a number of ways including in the services electronic system and on running sheets, depending on the service provided. Consumers’ interests and preferences for outings and group activities are discussed as a group, and inform planned activities, however, these are not documented in consumers’ individual support plans.

The Assessment Team viewed the service’s Wellbeing Assessment and Planning Management Guideline and Procedure and noted the documents did not provide guidance in relation to documenting assessment and planning outcomes.

The service was able to demonstrate that they discuss advance care planning with consumers at commencement of services and during annual reviews. However, the Assessment Team noted that for consumers with an advanced care directive (ACD) already in place the service did not gather or document the detail of that information or consider it as part of the assessment and planning process to inform delivery of services. The service coordinator confirmed to the Assessment Team that they would not necessarily be aware of consumers’ wishes, for example, in relation to Cardiopulmonary Resuscitation, and that workers have been advised in those instances, to contact emergency services.

The service was not able to demonstrate effective and consistent identification and documentation of consumers’ needs, goals and preferences, including end of life wishes, to inform appropriate services delivery.

Based on the information reviewed I find this requirement not compliant.

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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.*

Based on the information reviewed I find this requirement Compliant.

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| --- | --- | --- |
| Requirement 2(3)(d) | CHSP | Compliant |
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*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

Based on the information reviewed I find this requirement Compliant.

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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.*

Based on the information reviewed I find this requirement Compliant.

# STANDARD 3 Personal care and clinical care

# CHSP Not Applicable

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

The entirety of Standard 3 was not applicable as the service is not funded for and does not provide personal or clinical care

# STANDARD 4 Services and supports for daily living

# CHSP 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

Sampled consumers and representatives considered that consumers get the services and support for daily living that are important for their health and well-being, and that enables them to do the things they want to do and maintain their independence and quality of life.

Consumers and representatives provided examples of how the service supports them with the provision of in-home and in community services, either individually or in groups. Staff were able to describe what is important to consumers and provided examples of how they support consumers to do the things they like, and participate in the community, for example, the service provides transport and workforce to enable consumers to go shopping and attend groups activities of interest to them.

Staff could describe the process of referral to meet consumers’ needs, for example, referrals to appropriate health professionals and for My Aged Care assessment, when consumer’s circumstances changed, or care needs increased and required re-assessment. Staff could also describe how the service advocates on behalf of consumers and supports consumers through referrals to access community services. Care planning documents viewed confirmed that consumers were referred appropriately and in a timely manner when required such as to My Aged Care and health professionals.

The service was able to demonstrate that, where equipment is provided, it is safe, suitable, clean and well maintained. One sampled consumer detailed their satisfaction with equipment provided to them as part of their assessment for home modifications. Staff described how consumers’ home modifications and equipment needs are assessed by Allied Health professionals, such as an Occupational Therapist (OT) and supplied and installed by professional builders. Documents viewed showed that the service conducts inspections at the consumer’s home after the installation of the equipment, to ensure the equipment is safe, suitable and as recommended by the OT.

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

Requirement (3)(f) is not applicable as the service does not provide meals.

**Assessment of Standard 4 Requirements**

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(b) | CHSP | Compliant |
|  |  |  |

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

Based on the information reviewed I find this requirement Compliant.

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(d) | CHSP | Compliant |
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*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(e) | CHSP | Compliant |
|  |  |  |

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

Based on the information reviewed I find this requirement Compliant.

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

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

Requirement (3)(f) is not applicable as the service does not provide meals.

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

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

Based on the information reviewed I find this requirement Compliant.

# STANDARD 5 Organisation’s service environment

# CHSP Not Applicable

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

The entirety of Standard 5 was not applicable as the service does not provide social group activities in a centre-based environment.

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

The service was able to demonstrate that consumers are encouraged and supported to give feedback and make complaints, including receiving information at the commencement of services and opportunities to provide verbal and written feedback to staff, contractors and volunteers.

Sampled consumers and representatives felt supported to provide feedback regarding their services. While most consumers interviewed stated they have not needed to make a complaint, they advised they would feel comfortable to speak with staff to raise issues. Consumers attending the social support groups advised they are frequently asked to provide feedback and make suggestions to continuously improve their experiences at the groups.

Staff and management described how they support and assist consumers to raise their concerns, for example, through feedback forms, surveys and reviews. They described how consumers’ feedback is responded to, including to inform improvements to their services, for example, in relation to social support group activities and ensuring satisfaction with home maintenance and home modification services.

Consumer information packs and handbook showed that the service provides consumers with information on internal and external feedback and complaints mechanisms. The Assessment Team viewed information demonstrating external complaints avenues and information on advocacy services are provided to consumers at entry to the service.

The Assessment Team viewed the service’s feedback and complaints register showing that consumer feedback had been documented and addressed, and outcomes of complaints had consistently been documented. Documentation showed that an open disclosure process is used when things go wrong. The service has documented policies and procedure on the feedback process and open disclosure.

The plan for continuous improvement showed that the service identified a range of improvements against the Quality Standards as a result of their self-assessment process which commenced in September 2020. Complaints and feedback are reported to the Aged Care Governance Committee on a monthly basis with commentary regarding trends and continuous improvements identified by the service.

The service was able to provide examples of feedback and complaints being used to inform improvements to the quality of services, for example: creating an electronic calendar for a contractor to improve their ability to meet timeframes; identifying consumers who prefer to receive social group information by email; completing an assessment of function of consumers’ equipment for domestic assistance prior to commencement of service; and modifying options for payment for services following feedback from the annual survey.

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

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

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 6(3)(d) | CHSP | Compliant |
|  |  |  |

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

Based on the information reviewed I find this requirement Compliant.

# 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 that the workforce is planned, with sufficient staff to enable the delivery and management of safe and quality care and services. Consumers and representatives interviewed confirmed that there are adequate and consistent staff, contractors and volunteers allocated to deliver services. Consumers and representatives considered that consumers receive quality services when they need them and from people who are kind, competent and caring.

Consumers and representatives interviewed described, in various ways, how staff and contractors treat consumers with respect, are responsive to their needs, and understand their preferences and interests. Consumers described how the contracted staff for domestic assistance and home maintenance are professional, friendly, and respectful of their home environment. Consumers interviewed who attend the social groups, receive individual social support and flexible respite services, were highly complementary of the coordinators, contractors, volunteers and the service received.

Management described how the service ensures there are sufficient workforce members to ensure delivery of services. The organisation demonstrated recruitment and induction processes, including mandatory requirements, to ensure the contracted and volunteer workforce is competent to perform their role.

The service demonstrated that the workforce receives ongoing support, training, and feedback to meet the needs of aged care consumers and deliver the outcomes of the Quality Standards. Contractors and volunteers described how they are supported to ensure they can competently perform their role. Coordination staff and management described the service’s processes to ensure the workforce has required skills, clearances, and qualifications to perform their role including position descriptions for volunteer roles; head agreements for contractors; annual reviews for all contractors and volunteers; codes of conduct for all roles; and induction and ongoing training for contractors and volunteers.

The service demonstrated they regularly assess, monitor and review the performance of each member of the workforce through an effective human resources system. The service demonstrated they regularly evaluate how coordinators, staff, contractors and volunteers are performing their role.

Recently the service developed a skills and attributes matrix for contractors and volunteers which was mapped against 17 factors with contractors and volunteers graded as competent, developing and not applicable. The service has a Human Resource Management guideline and related organisational guidance to ensure the workforce is competent to effectively perform their roles.

Consumers and representatives indicated they were satisfied with the level of training provided to staff. Staff, contractors and volunteers were able to describe completing relevant training and being supported in their role through regular meetings and access to coordinators for any scheduling, or consumer related queries and reporting requirements. The service has an extensive induction process for contractors and volunteers, and an annual schedule for training and meetings.

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

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(b) | CHSP | Compliant |
|  |  |  |

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

# 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

The organisation was not able to demonstrate effective risk management systems and practices to identify, assess and manage risks to consumer’s health, safety and well-being. The service was not able to demonstrate effective consumer risk assessment and documentation of risks and management strategies are undertaken, and how they report consumer risks to the Aged Care Governance Committee to ensure appropriate monitoring and oversight.

Sampled consumers considered the service is very well run and they consider themselves partners in improving the delivery of care and services. Consumers were satisfied that they receive safe and quality services and are satisfied with management of the organisation.

The service’s governing body are accountable for the delivery of safe and quality services. The governance system is structured to ensure regular reporting of key information from the service to the governing body and includes systems to review this information.

The organisation was able to demonstrate it has effective organisation wide governance systems in place for managing and governing aspects of the provision of services in relation to information management, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and complaints.

The organisation demonstrated an effective incident management system, and processes and systems in place to identify and respond to abuse and neglect of consumers and supporting consumers to live their best life.

The Quality Standard for the Commonwealth home support programme services is assessed as Not compliant as one of the four specific requirements have been assessed as Not compliant.

Requirement (3)(e) was not applicable as the service does not provide personal or clinical care.

## Assessment of Standard 8 Requirements

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

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

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(c) | CHSP | 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.*

Findings

Based on the information reviewed I find this requirement Compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) | CHSP | Not 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.*

Findings

The organisation was not able to demonstrate effective risk management systems and practices to identify, assess and manage risks to consumer’s health, safety and well-being. The service did not demonstrate effective consumer risk assessments are undertaken, and subsequent documentation of risks and management strategies to inform the provision of services to consumers occurs. The service was not able to demonstrate how they report consumer risks to the Aged Care Governance Committee to ensure appropriate monitoring and oversight. The organisation was however able to demonstrate an understanding and the application of sub-requirements (ii), (iii) and (iv) of this standard.

The service did not adequately demonstrate assessment and planning processes included a consideration of high impact or high prevalence risks to inform the delivery of safe and effective service delivery for each consumer. The Assessment Team noted consumers risks are inconsistently documented in various forms of care documentation. Service agreements for contractors and running sheets for volunteer drivers do not consistently document risk mitigation strategies for identified consumers. Refer to Standard 2 Requirement 2(3)(a) for more information.

Coordination staff described the process for identifying risks associated with the service provision for consumers and how they advise contractors and volunteers verbally of any risks to be managed. Most contractors and volunteers described how they are familiar with consumers and that they rely on this knowledge to support consumers with their mobility needs when providing social support or transport services.

At the time of the quality audit, management confirmed the service does not report, analyse or trend consumer risks, including high impact high prevalence risks associated with the service provision of consumers. While the service has an effective risk management system to identify and assess work health and safety risks for staff, contractors and volunteers in the delivery of services and these are reported to the Aged Care Governance Committee, there are no reporting requirements for the identification and reporting of high impact or high prevalence risks or how these risks could be mitigated to ensure the safety of the consumers receiving services.

At the time of the quality review Management acknowledged the Assessment Team’s feedback and stated they had identified, as part of their self-assessment process, that further work could be undertaken to refine their support plans to better document consumers’ risks and mitigation strategies to inform service delivery. The service said they will continue to work with their database developer to facilitate the documentation of risks into the database to enable the ongoing reporting, monitoring, and oversight of consumers’ risks whilst receiving services.

Based on the information reviewed I find this requirement Non-compliant.

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | CHSP | Not Applicable |
|  |  |  |

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

Findings

This requirement was not assessed as the service is not funded for and does not provide clinical or personal care.

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | CHSP | Not 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) | CHSP | Not 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 8(3)(d) | CHSP | Not 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.*