Sandybeach Community Co-operative Society Limited

Performance Report

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| **Address:** | 2 Sims Street SANDRINGHAM VIC 3191 |
| **Phone:** | 03 9598 2155 |
| **Commission ID:** | 300529 |
| **Provider name:** | Sandybeach Community Co-operative Society Limited |
| **Activity type:** | Quality Audit |
| **Activity date:** | 14 June 2022 to 15 June 2022 |
| **Performance report date:** | 15 July 2022 |

# Performance report prepared by

M Murray 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:**

* Social Support Group, 4-B6HEK70, 2 Sims Street, SANDRINGHAM VIC 3191

# 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 | Compliant |
| Requirement 2(3)(b) | CHSP | Compliant |
| Requirement 2(3)(c) | CHSP | Compliant |
| Requirement 2(3)(d) | CHSP | Compliant |
| Requirement 2(3)(e) | CHSP | Not Compliant |
|  |  |  |
| Standard 3 Personal care and clinical care | CHSP | Not Applicable |
| Requirement 3(3)(a) | CHSP | Not Applicable |
| Requirement 3(3)(b) | CHSP | Not Applicable |
| Requirement 3(3)(c) | CHSP | Not Applicable |
| Requirement 3(3)(d) | CHSP | Not Applicable |
| Requirement 3(3)(e) | CHSP | Not Applicable |
| Requirement 3(3)(f) | CHSP | Not Applicable |
| Requirement 3(3)(g) | 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 | 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 | Compliant |
| Requirement 8(3)(a) | CHSP | Compliant |
| Requirement 8(3)(b) | CHSP | Compliant |
| Requirement 8(3)(c) | CHSP | Compliant |
| Requirement 8(3)(d) | CHSP | 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; 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

# 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 sampled expressed satisfaction that consumers are treated with dignity and respect and as individuals with their own identity and culture. Staff interviewed described ways they implement dignity and respect for consumers, including listening to them, talking with them, building their confidence and respecting each consumer’s ability, voice and boundaries. The service has systems for promoting consumer dignity and respect, including informing consumers about their rights and a staff and volunteer code of conduct that addresses social inclusion and social justice and includes the principle of embracing diversity. Organisational documentation, including a strategic plan shows that the organisation is committed person centred care, aspires to work with people from diverse backgrounds and seeks to further understand the diverse needs of their community and their role in addressing them.

Consumers and representatives interviewed said in different ways staff know consumers and make them feel comfortable and welcome. Staff sampled showed they are familiar with consumers and described examples of ways they use a person centred approach to support each individual to feel safe, comfortable and welcome. Consumer documentation reflects basic information on consumer backgrounds and family and carer connections. While the organisation is seeking to increase cultural diversity through networking and referral processes, service information shows a person centred approach and support for culturally safe care and service delivery.

Consumers and representatives interviewed are satisfied consumers, and those they may choose to be involved in their care, can make choices and decisions about their social support group services. They described how the service assists them to connect with others and maintain relationships of importance to them. Staff described how they support consumer choice, independence and social connections, including asking consumers about their ideas for the sessions, adapting activities to include the choices and decisions of consumers and supporting their social connections during and after sessions. Consumer documentation identifies their choices of programs and basic social and family connections. The service promotes a person centred approach that promotes their ability to exercise choice and independence. The rights of consumers to make choices and decisions are documented throughout the service.

The service has systems to support consumers to live their best life, while risks are considered and managed with appropriate support and interventions. While consumers and representatives did not provide examples of risk taking, they are satisfied the service supports consumers to live well. Staff described support and assistance measures to ensure consumers are as safe as possible. Sample session plans for social support classes show safety and risk considerations including options and adaptations where consumers and program leaders work together in relation to supporting consumer choices of risk levels while implementing risk controls.

Consumers and representatives interviewed are satisfied the information provided is sufficient, timely, clear and accurate to assist consumer choices. Management and staff described ways they communicate with consumers and representatives including one to one and group verbal communication, clear instructions , notices, quarterly newsletters, emails, phone calls and use of the organisation’s website. The consumer information handbook is provided in a larger font with white space and is regularly reviewed and updated. Language services, though not currently required, are accessible.

The service does not have any Home care packages.

The Quality Standard for the Commonwealth home support programme service is assessed as Complaint as six of the six specific requirements have been assessed as Complaint.

**Assessment of Standard 1**

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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 | 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 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 Non-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

Consumers and representatives described how the service meets their needs for social engagement, carer respite and fitness. Staff and volunteers reported relevant consumer information, including risks to the consumers’ health, are communicated through direct consultation with consumers and representatives and management. Whilst assessment and planning documentation is not formalised, the service demonstrates risks to consumer’s health and wellbeing are identified and managed.

The service does not conduct regular review of services for effectiveness of services for each consumer. The service prioritises reviews of vulnerable consumers when circumstances change or when incidents impact consumer needs, goals or preferences. Management acknowledged reviews do not occur and described plans to formalise review processes and explained for these consumers, reviews occur informally during program delivery, consumer focus groups and general communication with consumers and representatives.

Consumers and representatives described the ways the services help them to meet consumer needs and preferences. Staff, management and volunteers described the current needs, goals and preferences for sampled consumers, consistent with consumer and representative interviews. The service does not routinely discuss advanced care planning or end of life planning; however, the program coordinator recently attended an information session to consider how relevant information can be shared by the organisation.

The service demonstrates assessment, planning and review of consumers’ care and services are based on ongoing partnership with the consumers and others involved in their care. Consumers and representatives were satisfied they had been consulted about the services they receive.

The service does not have any Home care packages.

The Quality Standard for the Commonwealth home support programme service is assessed as Non-complaint as one of the five specific requirements has been assessed as Non-complaint.

**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 |
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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.*

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| --- | --- | --- |
| Requirement 2(3)(e) | CHSP | Not Compliant |
|  |  |  |

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

Findings

The service does not conduct regular reviews. The service reviews the care of vulnerable consumers in response to a change in circumstances or an incident,

Management acknowledged regular reviews do not occur for every consumer. Staff understand consumers’ needs through ongoing consultation during social support groups. Management discussed planned actions to implement a formalised assessment and review process for all consumers receiving services.

The approved provider did not respond to the Assessment Team’s report.

Based on the evidence (summarised above) the approved provider does not comply with this requirement.

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# 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 service does not have any Home care packages.

Standard 3 for the Commonwealth home support programme service is not applicable as there is no personal care or clinical care being delivered.

**Assessment of Standard 3 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 3(3)(a) | CHSP | Not Applicable |
|  |  |  |

*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 | Not Applicable |
|  |  |  |

*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 |
|  |  |  |

*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 | Not Applicable |
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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 | Not Applicable |
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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 | Not Applicable |
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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 | Not Applicable |
|  |  |  |

*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 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

Consumers and representatives stated the social support program provides consumers with independence and by attending the service consumers reported they are able to participate in activities and socialise with others.

Consumers and representatives described, in various ways, that they felt supported by the service. Case notes in care files and COVID-19 social calls reflected monitoring of each consumer’s emotional and psychological wellbeing.

The service demonstrated the provision of services and supports to assist consumers to participate in the community, have social and personal relationships and do things that interest them. Consumers receiving social support services said they have input into the activities and do things of interest to them.

Information in relation to the condition, needs, and preferences of the consumer is communicated within the organisation and with others where care is shared. Consumers and representatives said in different ways that consumers receive the appropriate services for their needs and staff have the right information. Staff and volunteers confirmed they receive information about the consumer.

Consumers and representatives reported they have not required any referrals, however they expressed would enquire with the service if they needed. Management described how during intake services, consumers are prompted to access My Aged Care to access subsidised services.

The service demonstrated where equipment is provided, it is safe, clean, maintained and suitable to consumers’ needs. Consumers and representatives interviewed were satisfied the equipment provided meets consumer needs and supports their participation in programs delivered. Staff explained the process for reporting any equipment failure and said they would request servicing or replacement to ensure safety. Staff and volunteers adhere to cleaning protocols before and after equipment is used. Cleaning checklists are monitored through the facilities coordinator.

The service does not have any Home care packages.

The Quality Standard for the Commonwealth home support programme service is assessed as Complaint as all relevant requirements have been assessed as Complaint

**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.*

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

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

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

*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 and representatives described the service environment as a welcoming environment, easy to navigate and suitable for the social group activities consumers attend. The service is a ground level service with wheelchair accessible entries. The service transport bus drops consumers directly outside the entrance to the community hall. The environment is accessible to consumers of varying levels of mobility and includes navigational aids to identify the facilities. Navigational aids were observed to orient consumers and direct consumers bathroom facilities.

Consumers reported the service centre is clean and well maintained and easy to move around both indoors and outdoors. Staff described the maintenance schedule and explained how maintenance issues are reported and addressed to in a timely manner. Observations within the service environments evidenced safe, clean, comfortable, and well maintained internal and external spaces, with multiple accesses to the service to assist with consumers with mobility restrictions. Vehicles used to transport consumers were clean, sanitised and well maintained.

Consumers and representatives described the furniture, fittings and equipment at the centre and the vehicles used to transport them are always clean and well maintained. Observations by the Assessment Team identified the vehicles are clean. Vehicles used to transport consumers were clean, sanitised and well maintained.

The service does not have any Home care packages.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as three of the three specific requirements have been assessed as Complaint.

## Assessment of Standard 5 Requirements

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| --- | --- | --- |
| Requirement 5(3)(a) | CHSP | Compliant |
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*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 and representatives interviewed said they understood how to give feedback or make complaints and they feel safe raising any concerns. Management and staff described the encouragement and support for consumers and others to provide feedback and make complaints. Staff described how they would support a consumer to provide feedback or complain by being accessible, listening to feedback, immediately resolving the issue, encouraging them to talk to management or documenting the complaint with consumer consent. The feedback and complaint system, referred to in the consumer information booklet, includes a feedback box at reception, complaint forms, pre and post course online surveys, a website ‘Contact us’ feedback page, complaint register and a complaint and appeals policy and procedure.

Consumers and representatives said in different considered that they were aware of ways they could raise a complaint or use an advocate and said in various ways they did not need other methods for raising complaints. Staff and management described ways they make consumers and representatives aware they can provide feedback and complaints through an advocate or external complaint services. Access to language and communication services is available.

Consumers and representatives interviewed are satisfied that any concerns raised are actioned to their satisfaction. Management and staff provided examples of ways they action complaints in a timely manner using an open disclosure process. Complaint documentation shows appropriate actions taken and ways complaint outcomes have been communicated to consumers and representatives. While the organisational complaints and appeals policy does not document the term ‘open disclosure’, the service policy documents a fair and transparent process. Complaint documentation showed an open disclosure process is evident in practice.

Consumers and representatives interviewed who have made complaints were satisfied the quality of consumer care and services improved on an individual basis. While few complaints are received and there are no complaint trends, management and staff showed ongoing ways they seek feedback to improve the quality of care and services. The service continuous improvement plan and complaint data show improvements have been made from reviews of feedback and complaints.

The service does not have any Home care packages.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as four of the four specific requirements have been assessed as Complaint.

## Assessment of Standard 6

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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

Consumers and representatives said there are sufficient staff to deliver and manage the social support group programs. Management and staff said there are enough staff to deliver quality care and services to consumers. Workforce planning and staff recruitment occurs and instructors are generally available to fill classes where the program leader is on unplanned leave. Volunteers contribute to the delivery and management of safe and quality care and services.

The service demonstrated a commitment to kind, caring and respectful staff interactions with each consumer. Consumers and representatives said staff interactions with consumers are respectful and staff are very kind and caring. Staff and volunteers described how they provide person centred care and services to consumers in a kind and respectful manner, including talking with them and being present with them, Documentation reviewed reflects the service’s key selection criteria for staff includes the ability to relate to older people and cater for their individual needs.

Consumers and representatives interviewed said in various ways that staff are competent. Staff explained how their qualifications, experience and knowledge enable them to effectively perform their roles. The organisation has established processes to ensure the workforce is competent with the qualifications and knowledge for effective performance. A staff qualification matrix documents formal qualifications, skills and experience relevant to their positions. Position descriptions show key knowledge areas for staff roles include current aged care philosophy and best practice including principles of person led practice. Management monitors staff qualifications, professional registrations and staff accreditations and use information from observation and ongoing staff supervision and support to identify staff knowledge. A probationary period applies to ensure staff can effectively perform their roles.

Consumers and representatives said in different ways they are satisfied staff have the ability to deliver social support group programs. Staff described support for them to carry out their roles, including team meetings, supervision and participation in training relevant to their roles. Management outlined human resource support for recruitment and induction processes and ways of ensuring staff have training and support. Staff training needs are identified during the staff engagement review process that occurs regularly and incorporates a training needs analysis. Staff records show appropriate personnel checks occur initially and ongoing, including referee checks and police certificates and staff participate in ongoing training and professional development.

Consumers and representatives interviewed were satisfied with staff performance. Staff interviewed said performance reviews occur annually and throughout the year and management monitor their performance on an ongoing basis. Established systems for monitoring and reviewing staff performance include observation and feedback about social support groups conduct and outcomes, supervision, complaints, incidents and performance reviews. Management said they review staff performance annually and monitor progress towards staff objectives at regular intervals throughout the year.

The service does not have any Home care packages.

The Quality Standard for the Commonwealth home support programme service is assessed as Complaint as five of the five specific requirements have been assessed as Complaint.

## 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 |
|  |  |  |

*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 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 service demonstrated they actively seek and support the involvement of consumers and representatives in the planning, delivery and evaluation of care and services. Consumers interviewed are satisfied their views are sought and said staff ask them what they would like to achieve, the projects they would like to work on in class or where they would like to go. Management and staff described how they support consumer involvement in service planning and development to the extent that they wish. Support mechanisms include individual discussions, sessional feedback gathered by staff, pre and post class surveys to inform service planning and consultation with consumers about organisational projects occurs. Management said they are always available to talk with consumers about the programs.

The service demonstrated the governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. The governing body guides strategic planning in alignment with the organisation’s vision, mission and values that promote safe, inclusive, quality care. The board reviews operational plans attached to strategic directions. Plans and reports, accessible to consumers and others on the service website, promote accountability for service delivery. The governing body regularly receives and reviews reports on safety and quality from management to enable oversight of care and service delivery. When asked, consumers and representatives said the service is well run.

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

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

The service does not have any Home care packages.

The service does not provide clinical care requirement 8(3)(e) is not applicable.

The Quality Standard for the Commonwealth home support programme service is assessed as Complaint as all relevant requirements have been assessed as Complaint.

## Assessment of Standard 8 Requirements

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| 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.*

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

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

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | 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.*

# 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.

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| --- | --- | --- |
| Requirement 2(3)(e) | CHSP | Not Compliant |
|  |  |  |

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*