**Performance**

**Report**

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| Name of service: | Senior Helpers Northern Tasmania |
| Service address: | Level 1, 67 Brisbane Street LAUNCESTON TAS 7250 |
| Commission ID: | 301022 |
| Home Service Provider: | Mosel Williams Care Pty Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 22 November 2022 |
| Performance report date: | 16 December 2022 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Senior Helpers Northern Tasmania (**the service**) has been prepared by M Cooper, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

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

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

# Services included in this assessment

**Home Care:**

* Seniors Helpers Northern Tasmania, 26932, Level 1, 67 Brisbane Street, LAUNCESTON TAS 7250

# Material relied on

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

* the assessment team’s report for the Quality Audit; the Quality Audit report was informed by a review of documents and interviews with staff, consumers/representatives and others
* Aged Care Act 1997 [Cth]
* Aged Care Quality and Safety Commission Act 2018 [Cth]
* Aged Care Quality and Safety Commission Rules 2018 [Cth]
* User Rights Principles 2014 registered 10 October 2022
* Quality of Care Principles 2014 registered 10 October 2022
* Guidance and Resources for Providers to support the Aged Care Quality Standards published by the Aged Care Quality and Safety Commission in September 2022
* Home Care Package Program operational manual a guide for home care providers September 2021

# Assessment summary for Home Care Packages (HCP)

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

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

# 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)
* Requirement 2(3)(b)
* Requirement 2(3)(c)
* Requirement 2(3)(d)
* Requirement 2(3)(e)
* Requirement 3(3)(a)
* Requirement 3(3)(d)

# Standard 2

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

Findings

The Assessment Team reports that the Approved Provider was not able to demonstrate that its assessment and care planning is consistently undertaken for HCP clients. The Provider does not have a consistent approach to the reviewing the assessment and care planning which includes the identification of risks to consumers such as meal time management. Further to this, the Providers is not consistent in referring consumers to other organisations. This has been caused by a lack of communication between the Approved Provider and other organisations where the responsibility for care is shared and the Provider does not have processes and procedures to support consumers in advanced care or assist with end of life planning

Section 54-1(d) of the Aged Care Act 1997 creates a legal obligation for the Approved Provider to comply with the Aged Care Quality Standards. The Guidance and Resources for Providers to support the Aged Care Quality Standards (the Guidance) states that the Organisational statement for Standard 2 is that ‘The organisation undertakes initial and ongoing assessments 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.

Having regard to the Assessment Team’s report, the comments from the Approved Provider at the time of the audit, the Approved Providers obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has not complied Standard 2

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

# Standard 3

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

Findings

The Assessment Team reports that the Approved Provider is recognising and responding to consumers deterioration. It has systems in place to support consumers who are at risk of high impact and high prevalence incidents. The Provider is also managing infections control in line with contemporary practices.

However, the Provider is not able to demonstrate consumers are receiving safe and effective care and services. It was not able to demonstrate the needs, goals and preferences of consumer nearing end of life are supported. Information about consumers’ needs and preferences is not shared within the organisation and with others responsible for their care.

Section 54-1(d) of the Aged Care Act 1997 creates a legal obligation for the Approved Provider to comply with the Aged Care Quality Standards. The Guidance states the organisational statement for Standard 3 is that ‘The Organisation delivers safe and effective personal care, clinical care or both personal care and clinical care in accordance with the goals and preferences to optimise health and wellbeing’.

Requirement 3(3)(a)

The Assessment Team reports that the Approved Provider was not able to demonstrate that consumers get safe and effective personal and clinical care. The Assessment Team found that although the Provider has a suite of assessment forms and tools they are not routinely used to conduct assessments for all consumers in line with the service’s policies and procedures. Despite having procedures in place to achieve compliance with this requirement the Assessment Team found that they are not routinely adhered to by co-ordination staff. The Provider stated that safe and effective personal care is identified through the consumer initial assessment and the development of goals.

However, the Assessment Team identified the information gathered and documented to support these findings is not routinely completed, transposed into consumer care plans or actioned. The Provider acknowledged consumer goals have not been sufficiently individualised to reflect how the service can support consumers in achieving them. They went on to say they have recognised the ‘need for staff to extract this information’ and as a result the Provider is establishing a professional support model to enhance the gathering and documentation of consumer goals.

The Guidance asserts that the intent of requirement 3(3)(a) sets out an expectation that organisations do everything they can to provide safe and effective personal and clinical care’.

Requirement 3(3)(e)

The Assessment Team reports that the Approved Provider was unable to demonstrate that information about consumer’s conditions, needs and preferences was effectively communicated within the organisation and with others who were responsible for shared care of the consumer for example, meal provision, and up to date medical practitioner summaries. Further to this, the Provider was unable to demonstrate routine communication, as outlined in the service policy, with consumers or representatives. It was unable to demonstrate the documentation regarding consumers’ needs and preferences is gathered, reviewed and updated to reflect their current needs and preferences

In relation to requirement 3(3)(e) the Guidance states that the intent of this requirement is to focus on the communication processes that organisations are expected to have so that their workforce has information about delivering safe and effective personal and clinical care and understanding the consumer’s condition, needs goals and preferences’

Having regard to the Assessment Team’s report, the comments from the Approved Provider at the time of the audit, the Approved Providers obligations under the Aged Care Act and the Aged Care Quality Standards I have reasonable grounds to form the view that the Approved Provider has not complied with requirements 3(3)(a) and 3(3)(e)

The Quality Standard for the Home Care Packages service is assessed as non-compliant as two of the seven specific requirements have been assessed as non-compliant.

1. The preparation of the performance report is in accordance with section, s68A – assessment contact of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)