**Performance**

**Report**

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| Name: | St John Ambulance of SA |
| Commission ID: | 600126 |
| Address: | 85 Edmund Avenue, UNLEY, South Australia, 5061 |
| Activity type: | Quality Audit |
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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.

# Services included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7879 St John Ambulance Australia South Australia Inc  
Service: 23942 St John Ambulance Australia South Australia Inc - Community and Home Support

**This performance report**

This performance report has been prepared by M Glenn, 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 services it operates, 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.

# Material relied on

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

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

The provider did not submit a response to the Assessment Team’s report.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

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

# Areas for improvement

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

# Other relevant matters:

Standard 3 Personal care and clinical care and requirement (3)(e) in Standard 8 Organisational governance were not assessed as the provider does not deliver personal or clinical care; and requirement (3)(f) in Standard 4 Services and supports for daily living was not assessed as the provider does not provide meal services. Additionally, Standard 5 Organisation’s service environment was not assessed as services are not provided or delivered from the provider’s service environment.

# Standard 1

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

Findings

Consumers described volunteers as family, stating volunteers treat them with dignity and respect and know them well. Consumers also said volunteers understand their cultural needs, and services are delivered with this in mind. Volunteers receive training on workplace behaviour expectations which covers topics, such as working in an ethical manner and professional conduct, and provides practical examples for potential situations a volunteer may encounter. Registration forms are used to capture details about consumers, including interpreter requirements, gender preferences for staff and volunteers, country of birth, and cultural considerations. Support plans include information relating to consumers’ identity, culture, likes, dislikes, needs and preferences to guide staff in the provision of consumers’ care.

Consumers said the provider involves them in making decisions about the services and supports they receive. Care files sampled demonstrate each consumer is supported to exercise choice and independence, and make decisions about their services, including when others should be involved. Support plans capture when a consumer chooses a service, the time, frequency and length of provision, as well as goals they would like to achieve. A volunteer described being flexible with requests made by consumers who wish to do things during their social visits, stating while consumers can be hesitant to make requests for activities, they remind consumers it is their choice.

Management described processes to support consumers to undertake activities which include an element of risk. Registration forms consider consumer information that includes known risks, such as mental and physical health concerns. A home safety review assists to identify risks, hazards, and actions required, where identified, to ensure consumers are appropriately supported.

Information provided to consumers is current, accurate, timely and communicated in a way which is easy to understand. Information is provided to consumers through telephone calls, meeting forums and a consumer handbook. Consumers are encouraged to attend volunteer meetings, with meeting minutes produced for consumers and volunteers who are unable to attend these meetings. A consumer handbook includes a detailed overview of what services are provided and associated costs. The handbook is in large, easy to read font and information is structured to outline the organisation’s background, values, services provided and useful contacts within the organisation and third parties. There are processes to ensure each consumer’s privacy is respected and personal information is kept confidential.

Based on the Assessment Team’s report, I find all requirements in Standard 1 Consumer dignity and choice compliant, therefore, the Quality Standard is compliant.

# Standard 2

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

Findings

Consumers' needs, preferences and risks are assessed on commencement of services, with information gathered used to inform delivery of care and services. Care files sampled demonstrate a comprehensive assessment is undertaken with consumers to identify their needs, including risks using validated tools for community care. A registration form is used to collect information relating, but not limited to, the consumer’s living arrangements, language spoken, services provided by other agencies, assistance consumers require from the service, medical and health information, falls history, and hearing, sight or speech difficulties. A home safety risk assessment is also completed to identify risks. Consumers confirm assessments are completed on commencement of services, and their services are discussed and planned to meet their health and wellbeing needs.

Assessment and planning processes identify and address consumers’ current needs, goals and preferences, including advance care directives if the consumer wishes to share these preferences. Information gathered through assessment and planning is used to coordinate services and to match consumers with a suitable volunteer. Volunteers said once they are matched with a consumer, an initial meeting with the consumer and a staff member is held and they are provided a copy of the consumer’s support plan that outlines the services and goals consumers would like to achieve. Consumers interviewed confirm they are asked what they wish to gain from receiving social support, including their goals.

Consumers confirm they are involved in regular discussions and decisions in relation to the services provided, including what they would like to do during their social support time. Initial assessments are completed with the consumer and their representatives if they choose. During this meeting, they discuss how services can be provided, if additional services are required and what services consumers are already receiving through other organisations. Where consumers have other providers involved in their care and services, this is captured in the support plan.

Outcomes of assessment and planning are documented in a support plan which is provided to the consumer and matched volunteer, and available on the service’s documentation system. Where changes are made to the support plan, the consumer and volunteer are required to read and sign the support plan, with a new copy provided. Assessments and support plans are reviewed annually or when consumers’ care needs change. Where there are situations that affect consumers' care, including incidents, assessments and support plans are reassessed to ensure current strategies are effective. Consumers said staff contact them all the time to ensure they are happy with the services they are receiving and if there are any other services they need.

Based on the Assessment Team’s report, I find all requirements in Standard 2 Ongoing assessment and planning with consumers compliant, therefore, the Quality Standard is compliant.

# Standard 4

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

Findings

Consumers said they are encouraged to maximise their independence and have the ability to choose goals that optimise their quality of life. Care documentation identifies interests and activities that are important to consumers, and provides information to support individual choice, daily living, wellbeing, and service delivery. Volunteers described the diverse interests of consumers they are matched with, including strategies to promote their involvement in social support activities. Consumers are encouraged to share their life history with staff through a life stories program, with books developed from the information provided outlining the consumer’s life story from childhood through to adulthood. Consumers said the life stories provide them with joy that their families are able to read the books and keep them. Consumers said volunteers know them well and described how the services provided enhance their emotional and psychological wellbeing. Volunteers described how they support consumers' emotional and psychological wellbeing through one-to-one conversations and building trust with consumers over time which enables them to identify when consumers’ emotional needs change. Volunteers said they will report any changes identified to staff.

Consumers described attending outings or home visits which enable them to do things of interest and maintain social relationships, and said they would not be able to do without the support of the volunteers. Support plans include detailed information about consumers' interests and hobbies and support needs. Volunteers are kept informed of consumers’ care and service needs and preferences through various methods, including an electronic management system, access to support plans, and regular meetings. Consumers said volunteers know them and their needs, goals and preferences well.

Consumers confirm the service provides them information on additional services they can access, such as allied health professionals for the purchase of mobility equipment, local councils, external aged care providers and home care packages. Management described how they identify and refer consumers to external providers of care, including My Aged Care, and care files show other services consumers are accessing for additional services are captured.

There are processes to monitor volunteers’ vehicles, including registration requirements. Vehicles are assessed when staff commence volunteering for the program using a vehicle checklist, and ongoing through annual surveys.

Based on the Assessment Team’s report, I find all requirements assessed in Standard 4 Services and supports for daily living compliant, therefore, the Quality Standard is compliant.

# Standard 6

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

Findings

Consumers said they are supported to provide feedback and complaints and feel comfortable to do so, and are aware of advocates, language services and other methods for raising and resolving complaints. Consumers are supported and encouraged to provide feedback through feedback forms, directly with volunteers and annual surveys. Consumer handbooks include information on how to make complaints and lodge feedback, including external avenues, giving assurances that this is encouraged and will not result in any disadvantage with services provided. Feedback forms are also provided with the handbook. Advocacy services visit to provide presentations to volunteers which consumers are welcome to attend.

There are processes to respond to complaints and an open disclosure process used when things go wrong, and consumers feel confident the provider will act on feedback given. While management described systems and processes to address and action consumer feedback, the organisation’s complaints handling procedure does not commit to timeframes, including acknowledging receipt of a complaint and deadlines for resolution. There are processes to review and analyse feedback and complaints with the view of identifying improvement opportunities to the quality of care and services.

Based on the Assessment Team’s report, I find all requirements in Standard 6 Feedback and complaints compliant, therefore, the Quality Standard is compliant.

# Standard 7

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

Findings

The organisation relies on volunteers who contribute to most of the workforce. Consumers are matched to volunteers through obtaining information from consumers, including their background, goals, preferred gender and specific skills and interests. This ensures the right volunteer is matched to support the consumer. There are processes to manage planned and unplanned workforce leave. Consumers are satisfied with staffing levels and said staff are always available to provide safe and quality care and services.

Consumers and representatives expressed satisfaction with staff and volunteers’ conduct, stating they are always kind and respectful and know consumers well, and volunteers are aware of what is important to consumers in their care. Policies, procedures, a code of conduct, and a staff and volunteer induction process promote a culture of respect for consumers’ identity, culture, and diversity and emphasise kind and respectful interactions with consumers. There are processes to monitor staff interactions, such as feedback processes, regular phone calls, and management’s open-door policy that allows consumers, representatives and staff to provide feedback.

While no specific skills and experience are required for volunteers, volunteers undergo an assessment process to be matched with consumers whose goals and preferences are of the same interest. All new staff complete an onboarding process which includes an induction checklist. The induction process is completed over a period of eight weeks, and includes reading policies and procedures and online training. Volunteers complete a set of modules about work health laws, developing and maintaining professional boundaries, and the Quality Standards. Training is provided ongoing to volunteers and staff, with the 2024 training schedule including topics, such as defensible reporting, providing first aid and trauma awareness and healing. Processes are in place to ensure staff and volunteers have the necessary checks, such as police clearances. Consumers and representatives are satisfied with staff and volunteers’ skills and knowledge and confident in their ability to provide care and services as needed.

Regular assessment and performance reviews are conducted for each staff member. Staff performance reviews are completed annually and used to identify development needs and areas for improvement. While performance reviews are not typically conducted for volunteers, volunteers’ performance is monitored on an ongoing basis through consumer feedback.

Based on the Assessment Team’s report, I find all requirements in Standard 7 Human resources compliant, therefore, the Quality Standard is compliant.

# Standard 8

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

Findings

Consumers said they are engaged in the development, delivery, and evaluation of care and services and are supported to stay engaged through feedback and complaint processes, regular phone calls, surveys, and newsletters. Consumers are invited to attend volunteer meetings to stay engaged with the service.

The organisation’s governing body promotes a culture of safe, inclusive, and quality care and services and is accountable for their delivery. Consumers and representatives said the organisation is well run, and the service provides a supportive environment and communicates openly and transparently. The organisation is governed by a board who are supported by the chief executive officer and subcommittees, including clinical governance, community care, and audit, risk and compliance. Each committee reports to the board, and any issues from these reports are discussed at board meetings. There are processes to communicate information from the board and subcommittees to staff and consumers.

A governance structure is in place to support all aspects of the organisation, including information management, continuous improvement, financial governance, workforce, regulatory compliance and feedback and complaints. However, not all policies and procedures are current. Management is aware of this and said the goal is to have policies reviewed and updated by November 2024. The organisation demonstrated effective risk management systems and practices in relation to managing high impact or high prevalence risks; identifying and responding to abuse and neglect of consumers; supporting consumers to live the best life they can and managing and preventing incidents, including use of an incident management system. There are processes to ensure governance and risk management systems and processes are monitored and the governing body is aware of and accountable for delivery of services.

Based on the Assessment Team’s report, I find all requirements assessed in Standard 8 Organisational governance compliant, therefore, the Quality Standard is compliant.

1. The preparation of the performance report is in accordance with section 57of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)