St Vincent's Care Services Toowoomba Home Care

Performance Report

227 Spring Street   
TOOWOOMBA QLD 4350  
Phone number: 07 3435 1667

**Commission ID:** 700297

**Provider name:** St Vincent's Care Services Ltd.

**Quality Audit date:** 22 March 2022 to 24 March 2022

**Date of Performance Report:** 21 April 2022

# Performance report prepared by

C.Athanasiou, 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 2038.

# Services included in this assessment

**Home Care:**

* St Vincent's Care Services Darling Downs Home Care, 18241, 227 Spring Street, TOOWOOMBA QLD 4350

**CHSP:**

* Specialised Support Services, 4-G4YJN4J, 227 Spring Street, TOOWOOMBA QLD 4350
* Allied Health and Therapy Services, 4-B5NVTJE, 227 Spring Street, TOOWOOMBA QLD 4350
* Social Support Individual, 4-B5OZAXH, 227 Spring Street, TOOWOOMBA QLD 4350

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
| Requirement 1(3)(a) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(b) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(c) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(d) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(e) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Requirement 1(3)(f) | | HCP | | | Compliant |
|  | | CHSP | | | Compliant |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | HCP | Compliant | | |
|  | | | CHSP | Compliant | | |
| Requirement 2(3)(a) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(b) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(c) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(d) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 2(3)(e) | HCP | | Compliant | |
|  | CHSP | | Compliant | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Standard 3 Personal care and clinical care | | | HCP | Compliant | |
|  | | | CHSP | Compliant | |
| Requirement 3(3)(a) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Requirement 3(3)(b) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Requirement 3(3)(c) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Requirement 3(3)(d) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Requirement 3(3)(e) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Requirement 3(3)(f) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Requirement 3(3)(g) | | HCP | | Compliant |
|  | | CHSP | | Compliant |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | | HCP | | Compliant | |
|  | | | CHSP | | Compliant | |
| Requirement 4(3)(a) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(b) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(c) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(d) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(e) | HCP | | Compliant | |
|  | CHSP | | Compliant | |
| Requirement 4(3)(f) | HCP | | Not Applicable | |
|  | CHSP | | Not Applicable | |
| Requirement 4(3)(g) | HCP | | Compliant | |
|  | CHSP | | Compliant | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Standard 5 Organisation’s service environment | | | | |
|  | | HCP | Not Applicable | |
|  | | CHSP | Not Applicable | |
| Requirement 5(3)(a) | HCP | | Not Applicable |
|  | CHSP | | Not Applicable |
| Requirement 5(3)(b) | HCP | | Not Applicable |
|  | CHSP | | Not Applicable |
| Requirement 5(3)(c) | HCP | | Not Applicable |
|  | CHSP | | Not Applicable |
| Standard 6 Feedback and complaints | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 6(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 6(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 6(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 6(3)(d) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Standard 7 Human resources | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 7(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(d) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 7(3)(e) | HCP | | Compliant |
|  | CHSP | | Compliant |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Standard 8 Organisational governance | | HCP | Compliant | |
|  | | CHSP | Compliant | |
| Requirement 8(3)(a) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(b) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(c) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(d) | HCP | | Compliant |
|  | CHSP | | Compliant |
| Requirement 8(3)(e) | HCP | | Compliant |
|  | CHSP | | Compliant |

# 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 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 and representatives and others.

# STANDARD 1 Consumer dignity and choice

# HCP Compliant 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 said that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live a life of their choosing.

Consumers confirmed staff know them as individuals and recognise what is important to them and described how the service encourages and supports consumer independence.

Consumers confirmed staff respect their personal privacy and confidentiality and that of other consumers engaging with the service.

Feedback from staff demonstrated staff know what is important to consumers and evidenced how staff respect, support and are guided by consumer care needs, goals and preferences. Care documentation was individualised and included individual strategies, individual needs, goals and preferences in relation to care and services.

Consumers and representatives reported that staff acknowledge their cultural needs and preferences, respect and embrace identified traditional practices and recognise areas of cultural importance to consumers.

Consumers stated they feel safe during the provision of care and services, staff respect their privacy and they feel supported to express their individuality and maintain their identity without judgement.

Consumers and representatives described how they are supported to maintain relationships and connections with important others including those involved in their care. Consumers said they are supported to exercise choice in relation to how their care and services are delivered.

Staff evidenced knowledge, awareness and understanding of consumer choices and preferences and described how each consumer is supported to make informed decisions about their care and services and described how tasks of domestic assistance are undertaken in accordance with individual consumer identified priorities.

The Quality Standard for the Home care packages service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

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

**Assessment of Standard 1 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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

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

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Compliant |
|  | 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.*

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

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

# STANDARD 2 Ongoing assessment and planning with consumers

# HCP Compliant CHSP Compliant

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

Consumers said that they are happy with the service they receive, they are involved in the planning of the service they receive and that it meets their current needs, goals and preferences.

The service undertakes a range of assessments when consumers enter the service, and these are reviewed regularly and when changes occur. There are processes to inform who is responsible for undertaking assessing, planning and reviewing the needs of consumers, based on the service the consumer receives.

A review of documentation and interviews with management and the workforce, confirmed there are processes in place to deliver a safe and effective service that addresses each consumer’s needs, goals and preferences.

Consumers and representatives said that they are involved in the planning and review of the services they receive. Consumers and representatives reported the service makes it easy to be involved, initially and when they request changes.

Consumers confirmed that they are provided with a copy of the care and services plan. Management demonstrated how they work with the consumer and other providers of care and services to meet the needs of the consumer. Documentation evidences consumer and representative involvement in the planning of services.

The service maintains electronic care and service plans that are accessible to staff. Consumers and representatives said that they are provided with a copy of the plan to keep in their home. Consumers report the services they receive, and the frequency of service are explained to them on commencement and when changes occur. Staff reported having access to the care and services plan and stated it contains the information they need to provide services in line with the consumer’s preferences. Care planning documentation reviewed was current and correlated to what consumers and representatives and staff reported.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

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

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(a) | HCP | Compliant |
|  | CHSP | 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) | HCP | Compliant |
|  | CHSP | 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 2(3)(c) | HCP | Compliant |
|  | CHSP | Compliant |

*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.*

|  |  |  |
| --- | --- | --- |
| Requirement 2(3)(d) | HCP | Compliant |
|  | CHSP | Compliant |

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

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

# STANDARD 3 Personal care and clinical care

# HCP Compliant CHSP Compliant

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 3

Consumers and representatives said that they receive personal and clinical care that is safe and right for them which is tailored to their needs. Consumers and representatives said that staff inform them about the care they are provided with and felt staff personalised their care to meet their needs and preferences.

Staff providing personal and/or clinical care to the consumers demonstrated a good understanding of each consumer’s needs, goals and preferences relating to the delivery of care.

A review of documentation and interviews with management and the workforce, confirmed there are processes in place to deliver a safe and effective service that addresses each consumer’s needs, goals and preferences. Interviews and documentation confirmed the service has practices in place to minimise the risk of infections.

There are processes in place to identify and monitor risks and adjust practices accordingly. Risk assessments are undertaken for high impact or high prevalence risks to find ways to minimise these risks. Identified risks are managed in line with the consumers care and services plan. Risk assessments routinely completed include falls, pressure injuries, and the self-administration of medication. If required additional assessments are completed.

There are processes to identify and support consumers nearing the end of their life on the organisation’s intranet. Clinical staff have access to information on palliative care and said they would be following the preferences of the consumer and the consumer’s Medical Officer. They were aware there are supports available from the local palliative care team and said they feel supported to have end of life conversations with consumer and representatives as necessary.

Care planning documentation and dated notes reflected the identification of, and response to, deterioration or changes in a consumer’s condition.

The service has procedures in relation to recognising deterioration and actions to be taken. Staff were able to provide examples of when there was a change in a consumer’s condition and what actions they took, including escalating to their manager and completing documentation.

A review of care documentation demonstrated dated notes, assessments and care and service plans provide adequate information to support effective and safe care. There is evidence of the service communicating relevant information to those involved in providing care and services to the consumer.

Care planning documents demonstrate referrals to other health professionals and other service providers occurs when appropriate and in a timely manner. The service has a network of individuals and other organisations they can refer to, or collaborate with, to meet the needs and preferences of the consumer.

Staff interviewed understand practical ways to minimise the transmission of infections. Staff could explain the appropriate screening process prior to commencing work each shift and wearing PPE. Staff reported having undertaken infection control training and this is confirmed by training records. Staff reported there are enough supplies of PPE available to them.

Consumers and representatives sampled reported they have been kept up to date by the service in relation to COVID-19 as it impacts on the service they receive.

The Quality Standard for the Home care packages service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

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

**Assessment of Standard 3 Requirements**

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

*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.*

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

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

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

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

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

*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.*

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

*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.*

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

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

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

*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

# HCP Compliant 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 said that they receive the services and supports for daily living that are important for their health and well-being and that enable them to live as independently as possible and enjoy life.

Consumers and representatives provided examples of how the services and supports they receive help them to maintain their independence and quality of life.

Staff interviewed had a good understanding of what is important to individual consumers and could describe how they help the consumer to do as much as they can for themselves, if this is their preference.

A review of documentation and interviews with management and the workforce, confirmed there are policies and procedures that support staff to deliver the services according to the consumer’s preferences and in a way that ensures consumers feel socially connected and can have control over their lives.

Consumers and representatives said that the staff they have are all very kind and friendly and shared their stories on how the services they receive supports their well-being.

Care planning documents reflected individual emotional and psychological needs where appropriate.

Consumers and representatives confirmed the organisation is flexible in the delivery of their service enabling consumers to maintain their social networks and do the things that are important to them.

Consumers and representatives said that the staff understand their needs and did not feel they had to repeat information if there was a change in staff. Many consumers reported they are attended by different staff, however said each have a good knowledge of the care and services they need.

The staff reported information about consumers is readily available on their mobile devices and demonstrated this to the Assessment Team. Staff also reported being informed verbally of specific information they are required to know, particularly if it is a new consumer. Staff said they have access to dated notes allowing them to review up to date information.

Management gave examples of sharing information with others involved in providing services to individual consumers. Documentation demonstrated evidence of communication with multiple sources, including brokered services.

The service has a network of individuals and other organisations they can refer to, or collaborate with, to meet the needs and preferences of the consumer. Care planning documents demonstrate referrals occur when appropriate and in a timely manner.

Where equipment has been provided for the consumers use in their own home, consumers and representatives report it is suitable and meets their needs. Types of equipment consumers reported receiving include mobility aids, toileting aids and the installation of safety aids such as handrails.

The Quality Standard for the Home care packages service is assessed as Compliant as six of the six specific relevant requirements have been assessed as Compliant.

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

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |

*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.*

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

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 4(3)(d) | HCP | Compliant |
|  | 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) | HCP | Compliant |
|  | CHSP | Compliant |

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

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

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

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

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

# STANDARD 5 Organisation’s service environment

# HCP Not Applicable 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

This Standard was not assessed as the provider does provide a service environment and therefore this standard is not applicable.

## Assessment of Standard 5 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP | Not Applicable |
|  | CHSP | Not Applicable |

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

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(b) | HCP | Not Applicable |
|  | CHSP | Not Applicable |

*The service environment:*

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

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(c) | HCP | Not Applicable |
|  | CHSP | Not Applicable |

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 Feedback and complaints

# HCP Compliant 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 said that the service encourages and supports them to give feedback and make complaints.

A review of documentation and interviews with management confirmed that when things go wrong, an apology is provided with actions taken to prevent or reduce the likelihood of recurrence.

The organisation demonstrates it seeks input and feedback from staff, consumers and representatives and uses this information to inform continuous improvement activities.

Consumers and representatives interviewed stated they feel encouraged and supported to provide feedback and make complaints and said they feel safe and comfortable raising concerns with staff and management.

Consumers and representatives are familiar with feedback and complaints processes and advised they generally provide feedback in person to staff or management over the telephone. Consumers also reported the completion of feedback surveys.

Most consumers demonstrated awareness of advocacy groups and the availability of language services and referenced information provided upon entry to the service.

Staff and management described the assistive services available to consumers if required and how they support consumers to access internal and external complaint pathways. Staff demonstrated an understanding of the complaints management system and could describe how they respond to consumer feedback, including the escalation of concerns to management. Staff described management as approachable and responsive and described how feedback or complaints contribute to make changes and improvements.

Information related to the Charter of Aged Care Rights, Aged Care Quality and Safety Commission (ACQSC), Older Persons Advocacy Network (OPAN) and Aged and Disability Advocacy Australia (ADA Australia) are available via the organisation’s handbook and intranet, including contact information.

The organisation seeks to include consumers and representatives in communication processes regarding improvement activities and management and staff demonstrated an understanding of open disclosure, the complaints management process and described how they have applied open disclosure in the event things have gone wrong.

The Quality Standard for the Home care packages service is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

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 Compliant.

**Assessment of Standard 6 Requirements**

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

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

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

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

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

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

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

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

# STANDARD 7 Human resources

# HCP Compliant 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 that the service delivery they receive is well planned, the workforce is competent, kind, caring and meals are delivered in a way that is respectful of consumer’s identify, culture and diversity.

A review of documentation and interviews with management and the mainly volunteer workforce confirmed guidelines and training support the delivery of services according to consumer preferences.

The organisation demonstrates it has a workforce that is enough and has the appropriate skills and knowledge to support the delivery of safe and quality services that meet the Aged Care Quality Standards.

Consumers and representatives expressed satisfaction that the workforce is enough to ensure they receive care and services in accordance with their individual needs, goals and preferences.

Staff members interviewed said they have enough time and information to provide safe, consumer centred and efficient care and service delivery.

Management advised any unplanned shift vacancies are filled through use of available service staff, use of other organisational pool staff, and if necessary, use of agency staff.

Consumers and representatives said they found staff to be kind, caring, and considerate of their needs when care and services are being provided to them.

Staff described how they provide care and services to consumers in a kind and respectful manner, evidencing respect for consumer privacy, culture, diversity, and demonstrating an understanding of the importance of consumer identity and self-determination. They reported no observed instances of other staff members being disrespectful or unkind to consumers and stated they would report this to management immediately should this occur.

Consumers interviewed reported confidence in the competency of staff members and stated staff have the knowledge and skills required to effectively undertake their roles, and deliver individualised care and services meeting their individual goals, needs, or preferences.

The Assessment Team observed documentation, evidencing adherence to the organisational reporting requirements. Through the reporting process, staff demonstrated an understanding of their reporting responsibilities that apply to their roles, knowledge of incident identification and recognition of its importance to the provision of safe consumer care and services.

Credential and reference checks are conducted prior to staff and volunteers commencing in their roles with registration and certification expiry dates, including criminal history reports and drivers’ licences recorded and monitored using a centralised internal procedure.

Management reported feedback from consumers has been positive in relation to staff performance and capability and has not identified any trending concerns or immediate training needs. The organisation identifies training needs via various methods including performance and development reviews, staff meetings, consumer feedback and satisfaction surveys.

The organisation has an established performance management framework and management reported permanent staff are subject to a probationary period upon commencing employment. Beyond probation, staff are engaged in performance reviews and in the event, issues arise, performance management processes are undertaken. Management advised consumer complaints regarding staff or identified development opportunities are promptly discussed with staff in accordance with the organisation’s policies and procedures.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

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

**Assessment of Standard 7 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 7(3)(a) | HCP | Compliant |
|  | 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.*

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

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

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

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

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

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

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

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

**STANDARD 8 Organisational governance**

# HCP Compliant 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

Consumers and representatives said that the organisation is well run and partners with them to ensure the meals are delivered in a way that meets their needs, goals and preferences.

A review of documentation and interviews with management and the mainly volunteer workforce confirms there are policies, procedures and guidelines that support the delivery of services according to consumer preferences.

The service’s governing body has established processes to demonstrate it is accountable for providing governance systems to support the delivery of safe and quality services that meet the Aged Care Quality Standards.

The organisation has an effective risk management system for the management of risks associated with delivery of meals to consumers.

Consumers and representatives described the ways they are involved in the development, delivery and evaluation of services, and reported they are approached by staff and management who engage them in consultation processes regarding how things are run and broader service improvements. Consumers said they feel comfortable approaching management to provide feedback or request changes which are flexibly accommodated and promptly responded to.

The organisation has a consumer feedback management policy outlining engagement practices. Meeting minutes, the complaints register, and PCI reflect evidence of consumer engagement and supporting documentation illustrates how consumer and representative feedback contributes to improvements.

The governing body is accountable for the delivery of a culture of safe, inclusive and quality care and services and remains informed through formal governance, leadership and reporting pathways. The organisation’s governance framework has set leadership roles and responsibilities for the governing body and management personnel, including accountability for maintaining standards of quality and oversight. The governing body has overall accountability for consumer safety, service delivery and system governance.

Interviews with consumers and representatives, management and staff and a review of documentation identified the service’s information management system is effective.

Staff and management reported that they have access to consumer information necessary for the provision of safe and effective care and services and described regular communication regarding consumer changes, updates and identified deterioration.

Continuous improvement is informed by data sources and analysis including feedback, complaints, suggestions from meetings, audit results, incidents including hazards. The service demonstrated they monitor, analyse and use feedback and complaint data to improve the quality of care and services.

Management advised that invoices are provided to consumers itemising purchases. A new system is being implemented to expediate invoice payment processes for brokered and subcontracted services in response to feedback received from local businesses.

The organisation has policies and procedures to govern the workforce. The service demonstrated the workforce is supported and equipped to safely deliver care and services to consumers.

Management receives updates from relevant regulatory bodies, monitors changes to aged care legislation, MAC, the Commission and the Department of Health for example. Information is distributed to staff, and consumers via email, newsletters, phone communication and training and education pathways.

Incidents are recorded in the organisation’s IMS and escalated to management and the governing body. The management team monitor incidents to ensure the service is meeting its reporting responsibilities. Management described how incident data is analysed and used to inform continuous improvement activity, contributing to the prevention of further incidents. Incident data also informs risk management practice, policy and procedures.

Management provided a current register for feedback and complaints. Complaints are documented electronically, reviewed at monthly meetings and reported on by management to the governing body. Where service improvements are identified, these are included in the PCI for action.

The organisation has a risk management framework and policies and procedures to guide staff and management practices in identifying and responding to risk.

Incidents are recorded in the IMS and contribute to risk mitigation practices or preventative action.

The Quality Standard for the Home care packages service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

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

**Assessment of Standard 8 Requirements**

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

*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

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