Sunbury and Cobaw Community Health

Performance Report

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| **Address:** | 12-28 Macedon StreetSUNBURY VIC 3429 |
| **Phone:** | 03 9744 4455 |
| **Commission ID:** | 300769 |
| **Provider name:** | Sunbury and Cobaw Community Health |
| **Activity type:** | Quality Audit |
| **Activity date:** | 2 August 2022 to 4 August 2022 |
| **Performance report date:** | 29 September 2022  |

# Performance report prepared by

M Cooper,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**

**Home Care:**

* Sunbury Community and Cobaw Community Health, 26241, 12-28 Macedon Street, SUNBURY VIC 3429
* Sunbury Community and Cobaw Community Health, 26241, 1 Caroline Chisholm Drive, KYNETON VIC 3444

**CHSP:**

* Flexible Respite - Care Relationships and Carer Support, 4-FQ9TJEB, 12-28 Macedon Street, SUNBURY VIC 3429
* Specialised Support Services, 4-FQ9TJGY, 12-28 Macedon Street, SUNBURY VIC 3429
* Allied Health and Therapy Services, 4-B2JM2IJ, 12-28 Macedon Street, SUNBURY VIC 3429
* Social Support Group, 4-B2JM2QR, 12-28 Macedon Street, SUNBURY VIC 3429
* Allied Health and Therapy Services, 4-B2JM2IJ, 1 Caroline Chisholm Drive, KYNETON VIC 3444
* Social Support Group, 4-B2JM2QR, 1 Caroline Chisholm Drive, KYNETON VIC 3444
* Flexible Respite - Care Relationships and Carer Support, 4-FQ9TJEB, 1 Caroline Chisholm Drive, KYNETON VIC 3444
* Specialised Support Services, 4-FQ9TJGY, 1 Caroline Chisholm Drive, KYNETON VIC 3444

# 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  | Not Compliant |
| CHSP | Compliant |
| Requirement 2(3)(a) | HCP | Not 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 | Compliant |
|  | CHSP | Compliant |
| Requirement 4(3)(g) | HCP | Compliant |
|  | CHSP | Compliant |
|  |  |  |
| Standard 5 Organisation’s service environment | HCP  | Compliant |
| CHSP | Compliant |
| Requirement 5(3)(a) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 5(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 5(3)(c) | HCP | Compliant |
|  | CHSP | Compliant |
|  |  |  |
| 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 |
|  |  |  |
| 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  | Not Compliant |
| CHSP | Compliant |
| Requirement 8(3)(a) | HCP  | Not Compliant |
|   | CHSP | Compliant |
| Requirement 8(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(c)  | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(d) | HCP | Not 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’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.
* the provider’s response to the Quality Audit report received 2 September 2022

# 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers are satisfied they are treated with dignity and respect. Staff and management demonstrated an understanding of each consumer’s diversity and provided examples of how at both, an organisational level and service delivery, they ensure each consumer’s diversity is valued and they are treated with respect and dignity.

Consumers described how their preferences, including their background and culture, informs the care and services they receive. Consumers attending social support groups and group exercise classes described the friendships they have made through the services.

Staff described the support and assistance measures to ensure consumers are as safe as possible, consumers are satisfied the service supports them to live well.

Consumers and representatives interviewed are satisfied they are provided with sufficient, timely and clearly communicated information to assist the consumer’s choices and decisions related to their care and services.

The Assessment Team’s file review evidenced consumer information is maintained confidentially and password protected.

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

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as all relevant 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 Not 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

I have relied on the Assessment Team’s report and the Service Provider’s response in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers described the ways care and services help them to engage with others and receive the care they need.

The Assessment Team’s report outlines the service demonstrated that assessment and care planning is consistently informing care directives for consumers under the CHSP program.

For consumers on home care packages care managers could not locate relevant assessments when the Assessment Team requested them. Home care packages are also brokered to other providers and care managers described relying on brokered providers to provide them feedback.

Care documentation for consumers contained individualised needs, goals and preferences. Staff described how they communicate with consumers to help them understand available services in relation to their budget and care needs.

Consumers confirmed being involved in assessment and care planning processes. Care documentation reviewed by the Assessment Team showed the consumer’s elected representative and others involved in their care are kept informed of any changes and referrals to other health professionals occur as required.

Documentation review also reflected updates to consumers’ care plans consistent with changes to their wellbeing.

The Quality Standard for the Home care packages services is assessed as Non-compliant as one of the five specific requirements have been assessed as Non- Compliant.

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

**Assessment of Standard 2 Requirements**

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

Findings

Consumers and representatives were interviewed and described the ways care and services help them engage with others. The Service Provider was using different care planning systems for CHSP and HCP consumers. For example CHSP consumer care directives informed through risks associated with each customer.

Management at the service could not produce assessments they had undertaken for consumers with a home care package during the audit. Management discussed the current merger project and the impact this is having on the care planning process which required alignment to address the different approaches that have been occurring.

In response to the Assessment Team’s report the Service Provider undertook a review of the current processes and the appropriate Team Leader will conduct fortnightly client allocation meetings for all new clients, with initial client engagement undertaken by the Care Manager . This will facilitate a higher level of clinical expertise being used in exploring and documenting the care needs of clients.

The Service Provider has confirmed that all care plans will be centrally stored in the clients eHCP file with access provided to appropriate staff and client representatives. Further to this, the Service Provider has or will be employing additional staff to assist with the implementation of the above strategies

Having regard to the Service Provider’s response and based on the evidence (summarised above) I am satisfied at the time of the audit the service did not comply with this requirement.

|  |  |  |
| --- | --- | --- |
| 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

I have relied on the Assessment Team’s report and the Service Provider’s response in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers/representatives confirmed that services are tailored to the consumer’s needs to optimise their health and wellbeing.

Staff discussed consumers in detail, demonstrating their knowledge of each consumer’s situation, needs, goals and preferences. Management described service specific triage tools to ensure consumer’s clinical needs such as wounds are identified and effectively managed.

Staff demonstrated an understanding of specific ways to manage consumers’ high impact, high prevalent risks. Referrals are timely and clinicians interviewed demonstrated a risk management approach to consumers’ risks of falls and risks of poor skin integrity and described ways they support consumers and staff to mitigate these risks.

Staff detailed processes they follow to support consumers who are nearing end of life. Care plans evidenced staff connecting with specialised services to supporting consumers who are on a palliative pathway.

Consumers/representatives reported feeling confident that staff are familiar with them and would identify if their health, function or condition changed.

Consumers and representatives reported they are satisfied that information about their personal care needs and preferences is communicated, with their consent, and they have continuity of care.

All consumers and representatives confirmed satisfaction with the service’s infection control practices.

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

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as all relevant 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.*

Findings

The Assessment Team report demonstrated that the Service had knowledge of its obligations under this requirement as it relates to CHSP consumers. The Service Provider had care documentation that identified risks and support strategies to manage risks. Staff demonstrated that they understood how to manage consumers with high impact, high prevalent risks. Clinicians showed how wounds were managed through on going assessment, management and education.

In relation the HCP clients the Servie Provider has or will be implementing the following improvements A Care Plan meeting with senior staff to develop a new goal directed care plan template which includes risk assessment and re-assessment process, and a feedback form will be provided to both clients and external providers. The template will be shared with appropriate staff. The VHIMS system for the recording of clinical risks and incidents, which are then reported monthly to the Executive Team and bimonthly to the board. This report indicates clinical trends. eLearning training modules will be rolled out to HCP staff to ensure staff are aware of how to identify and mitigate risks.

I am satisfied the approved provider complies with this requirement.

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

Findings

|  |  |  |
| --- | --- | --- |
| 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers interviewed described ways the service has supported them to maximise their quality of life and independence, with positive feedback related to support staff and workers. Review of care plans reflected evidence of staff awareness of consumers and their care needs, likes and dislikes.

Staff described how they recognise when a consumer is feeling low and how they support them. Care planning documents identified consumers’ emotional and social needs, including what is important to them

Consumers interviewed described how the service supports their participation within different settings and helps them to maintain their social relationships and take part in activities of interest. Although they have not had to, consumers felt they would be able to approach staff with suggested changes to group activities if they wished.

Consumers are satisfied that staff and others have relevant information to undertake the planned service. Staff said they have relevant and timely information on the services they are rostered to deliver and the consumer’s individual preferences for how the service is undertaken.

Consumers said they enjoy the meals.

Equipment to support consumers’ needs such as mobility and communication aids are provided.

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

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as all 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  | Compliant |
|  | CHSP  | Compliant |

*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 Compliant 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

Consumers said the service’s environment enhanced their sense of belonging and independence and expressed enthusiasm at attending the service to connect with others.

The Assessment Team observed the service is located at ground level with adequate space, lighting and accessibility access for wheelchairs.

Consumers were observed navigating the building easily and had access to indoor and outdoor areas, including a garden area.

Consumers said in various ways that the environment, furniture and equipment are clean and safe.

The service has a transport service. The Assessment Team sighted records of maintenance checks including records of daily road safety checks and records of the scheduled maintenance of vans and applicable manual lifting equipment, for example, hoist lifts.

Staff described cleaning and maintenance reporting processes and said maintenance issues are addressed in a timely manner.

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

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

## Assessment of Standard 5 Requirements

|  |  |  |
| --- | --- | --- |
| Requirement 5(3)(a) | HCP  | Compliant |
|  | CHSP  | Compliant |

*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  | Compliant |
|  | CHSP  | Compliant |

*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  | Compliant |
|  | CHSP  | Compliant |

*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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

All consumers/representatives interviewed said they understood how to give feedback or make a complaint and they feel safe in raising any concerns.

Information provided to consumers includes the Charter of Aged Care Rights, contact details for complaints, interpreter and advocacy services.

The Assessment Team observed feedback forms and advocacy brochures within the social support facility and communal areas throughout the service.

The Assessment Team interviewed intake staff, allied health clinicians, case managers, brokered subcontractors and were satisfied support is provided to consumers with communication barriers to engage in feedback systems and access advocacy services.

Brokered service providers have their own feedback systems, the sharing of information between the brokered provider and the service on feedback was not always evident.

The Assessment Team interviewed consumers in relation to concerns they had raised and they were satisfied with how their feedback was handled.

The service evidenced improvements made based on feedback such as the purchase of chairs which are easier for elderly consumers to stand up from and roster changes to better align staff with consumers.

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

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as all relevant 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

I have relied on the Assessment Team’s report in making my decision on compliance. A summary of the evidence relied on is set out below.

All consumers/representatives interviewed reported consumer services occur as scheduled and staff do not rush when delivering care and services. Office based staff such as care coordinators are also responsive.

Consumers/representatives interviewed said staff are respectful, courteous and some go ‘above and beyond’ to support the consumer’s needs.

A training calendar which includes manadatory training supports staff skills development and ensures staff are competent to do their role. Staff recently inducted to the service described feeling supported through peer guidance and accessible training resources.

Performance monitoring, including probationary periods, and completion of required training is monitored by the People and Culture department.

Recrutiment is occuring for registered nurses to support assessment and planning process for consumers on home care packages and to provide support to case managers.

Staff generally described having enough time to prioritise consumer needs and complete their work.

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

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as all relevant 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 Not 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

I have relied on the Assessment Team’s report and the Service Provider’s response in making my decision on compliance. A summary of the evidence relied on is set out below.

The Assesment Team’s report evidences effective organisation wide governance systems are in place. The governing body hold quarterly board meetings at which they review the organisation’s performance against targets such as clinical governance, advocacy and activism, inclusive practices, financial sustainability, compliance and staff education. A compliance officer monitors and reports on the compliance of subcontracting arrangement in line with contracts in place.

Continuous improvement plans are in place for each service stream and feed into broader organisational continuous improvement activities.

The Assessment Team are satisified a clinical governance framework is in place and effective.

The service has an incident reporting system and an organisational risk register with policies and procedures to guide staff in the management and /or mitigation of issues. However, the Assessment Team’s report evidences that the governing body does not have clear line of sight to incidents that occur for consumers on a home care package when the care episode is delivered through a brokered provider.

The Assessment Team found that consumers did not have sufficient input into how the organisation is run, as management could not describe how they engage consumers in developing the service.

The Quality Standard for the Home care packages service is assessed as Non-compliant as two of the five specific requirements have been assessed as Non- 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  | Non-Compliant |
|  | CHSP  | Compliant |

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

The Assessment Team’s report evidences that consumers receiving social support groups have the opportunity to evaluate design and develop menus. However, input into broad improvements is mostly done through reactive means such as feedback from CHSP and on discharge surveys for HCP. The Service Provider explained that HCP consumers had input during the care planning and assessment process but this does not meet the requirement

In response the Assessment Team’s report the Service Provider has implemented a number of improvements which include clinical trends and incidents that are reported at Organisational level and incident data will now be included in Home Care Package. HCP consumer incidents are now being entered into the Organisational Governance Systems Clinical and Near misses with corrective actions in place within the team and training has been included. Brokered agencies will also be able to notify staff of new identified risks.

Clinical trends and incidents are reported at Organisational level. Home Care Package incident data is now being collected and reported to the Executive and the Board. HCP consumer incidents are now being entered into the Organisational Governance Systems VHIMS. HCP consumer feedback and Incident Reporting Form template has been developed for the use of brokered agencies who will also be able to notify our staff of new identified risks.

Having regard to the Service Provider’s response and based on the evidence (summarised above) I am satisfied at the time of the audit the service did not comply with this requirement.

|  |  |  |
| --- | --- | --- |
| 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  | Not 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.*

Assessment Team’s report evidences that the Service Provider’s has systems in place to met its obligations under this requirement for CHSP consumers. In relation to high impact or high prevalence risks associated with the care of consumers, the organisation’s framework includes an incident reporting system, an organisational risk register with policies and procedures to guide reporting processes and identification and control of risk. Each risk is evaluated in accordance management strategies and monitored through annual reviews. Examples of risk relevant to HCP and CHSP consumers include elder abuse or neglect, decline in consumer condition while waiting on service access to services and client non-response, bushfire/natural disaster

Although some of the identified risks can be applied to HCP services, the risk register does not contain risks specific to these consumers or risks associated with brokered care delivery.

In relation to identifying and responding to abuse of consumers, the service demonstrated risks mitigation strategies and staff said they would immediately report any incidents of suspected abuse or neglect. The incident register does not show any incidents of abuse.

Consumers are supported to live the best life they can with consumer/representative feedback being positive. The Service Provider has an established incident management system that is accessible to all staff. However brokered organisations providing services to HCP consumers reported having their own incident management systems and how this information is shared was not clear.

In response to the Assessment Team’s report the Service Provider as developed a goal directed care plan template for the use of brokerage service providers so that goals, risks and care plans for clients can be shared by both organisations. Identified risks and management plans will be included. Additional staff have been employed to improve allocation and needs assessments. A Client Experience Pathway will be sent to clients for feedback

The organisational risk register is being updated with key risks for the HCP service. Staff have been advised of the importance of identifying client risks and reporting incidents. Staff training on risk will be completed by all team members.

HCP consumer feedback will be incorporated into the appropriate computer databases. A feedback and incident reporting form templates has been developed for the use of brokered service providers to provide feedback and report incidents to the organisation. Documentation in relation to feedback and suggested improvement has been supplied to consumers and staff.

Having noted the Service Provider’s response I am satisified that based on the evidence (summarised above) that the time of the audit the approved provider did not meet this requirement.

|  |  |  |
| --- | --- | --- |
| 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

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) | HCP  | Not Compliant |
|  |  |  |

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

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

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

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(d) | HCP  | Not Compliant |
|  |  |  |

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

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