Waverley Council

Performance Report

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| **Address:** | 1/31-33 Spring Street BONDI JUNCTION NSW 2022 |
| **Phone:** | 02 9386 7929 |
| **Commission ID:** | 200785 |
| **Provider name:** | Waverley Council |
| **Activity type:** | Quality Audit |
| **Activity date:** | 25 July 2022 to 27 July 2022 |
| **Performance report date:** | 12 September 2022 |

# Performance report prepared by

A. Grant, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

**Services included in this assessment**

**CHSP:**

* CHSP Transport, 4-7XBFFDV, 1/31-33 Spring Street, BONDI JUNCTION NSW 2022
* Social Support - Group, 4-7XLFHAD, 1/31-33 Spring Street, BONDI JUNCTION NSW 2022

# Overall assessment of Services

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| --- | --- | --- |
| Standard 1 Consumer dignity and choice | CHSP | Compliant |
| Requirement 1(3)(a) | CHSP | Compliant |
| Requirement 1(3)(b) | CHSP | Compliant |
| Requirement 1(3)(c) | CHSP | Compliant |
| Requirement 1(3)(d) | CHSP | Compliant |
| Requirement 1(3)(e) | CHSP | Compliant |
| Requirement 1(3)(f) | CHSP | Compliant |
|  |  |  |
| Standard 2 Ongoing assessment and planning with consumers | CHSP | Compliant |
| Requirement 2(3)(a) | CHSP | Compliant |
| Requirement 2(3)(b) | CHSP | Compliant |
| Requirement 2(3)(c) | CHSP | Compliant |
| Requirement 2(3)(d) | CHSP | Compliant |
| Requirement 2(3)(e) | CHSP | Compliant |
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| Standard 3 Personal care and clinical care | CHSP | Not Applicable |
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| Standard 4 Services and supports for daily living | CHSP | Compliant |
| Requirement 4(3)(a) | CHSP | Compliant |
| Requirement 4(3)(b) | CHSP | Compliant |
| Requirement 4(3)(c) | CHSP | Compliant |
| Requirement 4(3)(d) | CHSP | Compliant |
| Requirement 4(3)(e) | CHSP | Compliant |
| Requirement 4(3)(f) | CHSP | Not Applicable |
| Requirement 4(3)(g) | CHSP | Compliant |
|  |  |  |
| Standard 5 Organisation’s service environment | CHSP | Compliant |
| Requirement 5(3)(a) | CHSP | Compliant |
| Requirement 5(3)(b) | CHSP | Compliant |
| Requirement 5(3)(c) | CHSP | Compliant |
| Standard 6 Feedback and complaints | CHSP | Compliant |
| Requirement 6(3)(a) | CHSP | Compliant |
| Requirement 6(3)(b) | CHSP | Compliant |
| Requirement 6(3)(c) | CHSP | Compliant |
| Requirement 6(3)(d) | CHSP | Compliant |
|  |  |  |
| Standard 7 Human resources | CHSP | Compliant |
| Requirement 7(3)(a) | CHSP | Compliant |
| Requirement 7(3)(b) | CHSP | Compliant |
| Requirement 7(3)(c) | CHSP | Compliant |
| Requirement 7(3)(d) | CHSP | Compliant |
| Requirement 7(3)(e) | CHSP | Compliant |
|  |  |  |
| Standard 8 Organisational governance | CHSP | Compliant |
| Requirement 8(3)(a) | CHSP | Compliant |
| Requirement 8(3)(b) | CHSP | Compliant |
| Requirement 8(3)(c) | CHSP | Compliant |
| Requirement 8(3)(d) | CHSP | Compliant |
| Requirement 8(3)(e) | CHSP | Not Applicable |

# Detailed assessment

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

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

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Quality Audit; the Quality Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 Consumer dignity and choice CHSP Compliant

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

Consumers interviewed by the Assessment Team stated they felt respected and valued by staff, instructors and volunteers. Consumers interviewed by the Assessment Team described how their interactions with the service were always respectful and how they felt their cultural backgrounds were understood and respected. Staff interviewed by the Assessment Team demonstrated they treat consumers with respect, maintain their dignity and are aware of their individual and cultural needs, and provided examples of tailored services to the individual consumer.

Consumers interviewed by the Assessment Team confirmed staff, instructors and volunteers understand consumer’s background, preferences and what is important to them, which makes them feel respected, valued and culturally safe. Assessment and care planning documentation analysed by the Assessment Team showed reference to consumer’s individual circumstances and involvement in decision making. For example, service staff developed an Individual Plan that outlines consumer goals in relation to their psychosocial wellbeing.

Management interviewed by the Assessment Team stated consumers are encouraged to be independent and to make decisions about their lifestyle. Training is provided to staff and volunteers on choice, independence and consumer’s rights and interpreters are engaged if required. Evidence analysed by the Assessment Team showed consumers are matched with social activity groups where possible to ensure consumers are comfortable and feel safe with the people who are delivering their services.

Consumers interviewed by the Assessment Team confirmed that the service supports them to live their best life and encourages them to keep independent and active and will refer them to other services to support them when needed.

Consumers and/or representatives interviewed by the Assessment Team confirmed that they are provided information that is clear and easy to understand and enables them to make choices. Consumers and/or representatives interviewed demonstrated an understanding of the services available to them, including the various centre-based and outings programs and relevant costs. Consumers and/or representatives interviewed stated they received information when they commenced, including the charter of aged care rights, a client handbook and fees schedule, including how to provide feedback. Consumers and/or representatives interviewed by the Assessment stated if they had any questions the staff always explain things to them. Consumers and/or representatives interviewed confirmed they continue to receive information through centre newsletters, direct emails, from the Waverley Councils website and promotional material on the notice boards at the library and the Centre.

Consumers interviewed by the Assessment Team stated staff respect the consumer’s privacy when delivering services and they are confident the consumer’s personal information is kept confidential. Evidence analysed by the Assessment Team showed the organisation’s privacy policy outlines the protocol to protect personal information such as, only collecting necessary information, how information is used, and consumer information is protected in. Evidence analysed by the Assessment Team showed respecting the privacy of consumers is incorporated into staff, contractor and volunteer training, and included in the code of conduct.

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

**Assessment of Standard 1 Requirement**

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

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

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

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

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| Requirement 1(3)(c) | 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.*

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

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

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| Requirement 1(3)(e) | CHSP | Compliant |

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

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

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

# STANDARD 2 Ongoing assessment and planning with consumers 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

Evidence analysed by the Assessment Team showed 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. Consumers interviewed by the Assessment Team confirmed they were involved in the assessment and planning process and, where applicable, this was done in partnership with others when they wished them to be involved. Consumers interviewed by the Assessment Team stated they had regular reviews of their care and services and are asked to provide feedback on their services at any time.

All Consumers interviewed by the Assessment Team stated they receive services that meet their current needs, goals and preferences. Evidence analysed by the Assessment Team showed all sampled consumers assessment and planning documentation identifies the current needs, goals and preferences of the consumer and documentation sighted guides the delivery of care and services. The Assessment team analysed evidence which confirmed all consumers answers to the interview questions aligned with their assessment and planning documentation.

Consumers interviewed by the Assessment Team confirmed they were involved in the assessment and planning process and, where applicable, this was done in partnership with others when they wished them to be involved. The Assessment Team noted the service staff could demonstrate how they work with the consumers and representatives to meet the needs of the consumer.

Consumers interviewed by the Assessment Team confirmed the outcomes of assessment and planning are effectively communicated to them and they are provided a copy of the documented care and services plan that is readily available to them, however most consumers advised they decline receiving a copy and trust the service when verbally updated.

Consumers interviewed by the Assessment Team advised the service staff and centre coordinator are always present and checking up on them when attending the group activities. Consumers confirmed to the Assessment Team that the service contacts them or their representatives if they do not attend to a scheduled activity. Consumers interviewed by the Assessment Team stated the staff consistently conduct welfare checks in case there is a change to their needs or circumstances.

The service staff and coordinator confirmed during interviews with the Assessment Team what process to follow when care and support plans are to be reviewed or reassessed.

The Assessment Team analysed evidence that showed the service had robust policies and procedures which included the following;

* Intake and Assessment;
* Individual Planning and Monitoring;
* Reassessment;
* Duty of Care and Dignity of Risk;
* Risk Management; and
* Service Delivery.

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

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | 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.*

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| Requirement 2(3)(b) | 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.*

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| Requirement 2(3)(c) | 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.*

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| Requirement 2(3)(d) | 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.*

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| Requirement 2(3)(e) | 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 CHSP Not Applicable

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 3

The Quality Standard for the Commonwealth home support programme services are assessed as Not Applicable as seven of the seven specific requirements have been assessed as Not Applicable.

# STANDARD 4 Services and supports for daily living CHSP Compliant

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

The Assessment Team observed and noted consumers attending a social support group activity which was a low-level exercise class. The Assessment Team asked consumers if the service activities meet their needs, goals and preferences and optimise their independence, health, well-being and quality of life. All consumers described to the Assessment Team in various ways how important the service is to them and how it is the highlight of their week.

Consumers interviewed by the Assessment Team stated staff are all very kind and friendly and shared their stories on what receiving the services means to them. Volunteers and instructors interviewed by the Assessment Team stated if they have any concerns about a consumer’s wellbeing, especially if they seem to be a bit down, they will advise the centre coordinator who will follow up with the consumer to reassess them to see if any referrals or additional support are needed. The Assessment Team noted the centre coordinator demonstrated an in-depth knowledge of consumers emotional, spiritual and psychological well-being.

Consumers interviewed by the Assessment Team confirmed they are supported to take part in community and social activities and are encouraged to follow their interests. Consumers interviewed by the Assessment Team while at the activity centre reported enjoying being able to meet up with others. Two consumers interviewed by the Assessment Team confirmed they were also a volunteer for the service, they both confirmed they enjoy supporting others to take part in community and social activities and are encouraged to follow their interests.

Consumers interviewed by the Assessment Team reported they receive a consistent service. The staff and instructors interviewed by the Assessment Team could describe how the coordinator keeps them informed of consumers’ needs and preferences and how they are informed of any changes about the consumer, as it relates to their responsibility. One group instructor interviewed by the Assessment Team confirmed they update and communicate the centre coordinator about the consumer’s condition and if they notice any change during the exercise classes. Staff interviewed by the Assessment Team confirmed they receive communication about the consumers condition, needs and preferences from the centre coordinator and other staff.

Staff interviewed by the Assessment Team demonstrated they have in-depth knowledge of other organisations providing services in the local area. Management interviewed by the Assessment Team described how the service networks with local social support services to provide inclusive care for consumers. The Assessment Team analysed evidence which showed that referrals incoming and outgoing from the service were timely and appropriate for each consumer.

Consumers interviewed by the Assessment Team confirmed they are provided with the equipment they need which is well maintained, clean and suitable for use. The Assessment Team observed the equipment in the social support group library location to be clean and suitable for consumers to use and it is sanitised before and after use and COVID infection control protocols are followed. The Assessment Team noted the equipment is stored in a locked room in the temporary hall where the activities are held and is not accessible for the general community.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as six of the six applicable requirements have been assessed as Compliant. Requirement 4(3)(f) is Not Applicable and therefore not assessed.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | 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.*

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

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

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| Requirement 4(3)(c) | CHSP | Compliant |

*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.*

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

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

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

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

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

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

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

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

# STANDARD 5 Organisation’s service environment CHSP Compliant

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

Consumers interviewed by the Assessment Team attending the social support group activities said they enjoy the interaction with staff and other consumers the most. The Assessment Team observed the entrance to be welcoming and easy to move around in. Consumers interviewed by the Assessment Team provided positive feedback about the centre environment. Consumers stated during interviews they felt it was safe and easy for them to move around independently. Consumers interviewed stated they always feel they belong, and the staff make them feel welcome whenever they come.

Consumers interviewed by the Assessment Team provided positive feedback and all agreed the social support centre environment is safe, clean and comfortable. Staff interviewed by the Assessment Team stated any maintenance issues raised are attended to promptly. Staff who facilitate activities at the social support centre when interviewed by the Assessment Team stated they personally take responsibility to ensure the temporary hall is clean, tidy, safe and comfortable for consumers. The Assessment Team analysed evidence which showed the service environment is also cleaned professionally which is organised by the library. Evidence analysed by the Assessment Team showed maintenance requests are escalated by the centre coordinator staff to library maintenance management for actioning. Staff confirmed to the Assessment Team the requests are addressed and prioritised accordingly.

Consumers interviewed by the Assessment Team confirmed they are provided with the equipment they need which is well maintained, clean and suitable for use. The Assessment Team observed and noted the furniture, fittings and equipment in the social support group library location to be clean and suitable for consumers to use. Staff interviewed by the Assessment Team stated there is enough furniture, fittings and equipment to meet the needs of consumers and equipment for activities and the equipment is sanitised before and after use and COVID infection control protocols are followed.

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

## Assessment of Standard 5 Requirements

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

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

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| Requirement 5(3)(b) | CHSP | Compliant |

*The service environment:*

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

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| Requirement 5(3)(c) | CHSP | Compliant |

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

# STANDARD 6 Feedback and complaints CHSP Compliant

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

Consumers interviewed by the Assessment Team confirmed they are able to provide feedback and suggestions at any time through a range of mechanisms such as verbally, by email and/or suggestion box at the centre and through surveys. Evidence analysed by the Assessment Team showed consumer feedback and suggestions are sought throughout the course of service provision. Evidence analysed by the Assessment Team showed consumers are informed of their right to make a complaint and are provided information on what they can expect from the service in response to a complaint. Evidence analysed showed consumers are provided with information and assisted if required to access an advocacy service or contact external complaints mechanisms, such as the Commission. Consumers interviewed by the Assessment Team advised they feel comfortable in providing feedback and suggestions or making a complaint should they wish to do so.

Evidence analysed by the Assessment Team showed staff encourage consumers to provide feedback at every opportunity. The Assessment Team noted where a consumer indicates dissatisfaction with any aspect of their care and services, this is reported to coordination staff or management for action. Evidence analysed by the Assessment Team showed management are actively engaged in seeking individual consumers’ opinions and suggestions for improvement. Evidence analysed by the Assessment Team showed all feedback, positive and negative, is analysed and feeds into the continuous improvement processes. The Assessment Team noted open disclosure is practiced when the service has not met the consumer’s expectations.

Coordination and management staff interviewed by the Assessment Team stated they work as a team and any of them could handle negative feedback that may arise. The Assessment Team noted the Director of Community, Culture and Customer Experience has sight of any complaints and incidents received about services.

Staff interviewed by the Assessment Team demonstrated an awareness of open disclosure and advised they would always apologise to consumers that were not happy with anything regarding their services. Evidence analysed by the Assessment Team showed staff ensure any issues are addressed promptly and make sure to keep consumers informed regarding any actions or outcomes of their feedback.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

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

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

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

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

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

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

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

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

# STANDARD 7 Human resources CHSP Compliant

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

Evidence analysed by the Assessment Team showed the service workforce is planned and the number and mix of members of the workforce deployed enables the delivery and management of safe and quality services. Feedback obtained from interviews with the Assessment Team from consumers and representatives demonstrated the staffing is enough for the activity programs they attend.

Management demonstrated to the Assessment Team they have systems for the recruitment, training and support to internal staff, volunteers and contractors. Evidence analysed by the Assessment Team showed internal staff have regular monitoring and review of their performance through avenues such as feedback from consumers and annual performance review.

Staff and volunteers interviewed by the Assessment Team reported feeling supported in their role via frequent team and individual communication and supported to access training as needed or requested. Evidence analysed by the Assessment Team showed the service keeps a record of qualifications and training completed by all staff and volunteers.

Management interviewed by the Assessment Team advised all staff, instructors and volunteers receive an induction to their role, with centre-based staff and subcontracted instructors also being oriented to the centre environment and any consumers who may need assistance while at the centre. Evidence analysed by the Assessment Team showed all paid staff complete a probationary period and each year complete a staff appraisal. Evidence analysed by the Assessment Team showed all new volunteers are monitored closely, and feedback received from consumers on their performance in their role.

Documentation analysed by the Assessment Team showed staff files contained orientation training and ongoing training relevant to their role is provided to staff. Training records and information regarding volunteers was also analysed and evidenced by the Assessment Team.

Management interviewed by the Assessment Team described how the organisation uses feedback from consumers and performance reviews to identify staff training needs, and improvement plans could be raised for the staff member if needed. Evidence analysed by the Assessment Team showed the management committee as a whole also goes through a review process with the management of the service.

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

## Assessment of Standard 7 Requirements

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| Requirement 7(3)(a) | 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.*

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

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

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

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

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

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

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

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

# STANDARD 8 Organisational governance CHSP Compliant

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

Consumers and/or representatives interviewed by the Assessment Team described how they are engaged to provide feedback, with those sampled confirming they were invited to participate in surveys and individual planning sessions.

Staff interviewed by the Assessment Team thought the service is well run and demonstrated an understanding of policies and procedures overseeing the delivery of safe, quality services. During interviews with the Assessment Team staff stated effective communication at all levels makes sure services run smoothly and they have all the information they need to provide services safely. Staff stated during interviews with the Assessment Team that management are approachable and make themselves available at any time to discuss any concerns or answer queries.

Evidence analysed by the Assessment Team showed the organisation has a risk management system in place that identifies and responds to vulnerable consumers. The Assessment Team analysed evidence which showed the council’s program director is informed of any emerging risks and trends of incidents, complaints and of continuous improvement activities. Evidence analysed showed regular planning mechanisms are in place and management advised they have ready access to all information to ensure transparency and informed decision making. The Assessment Team noted based on evidence analysed the service focuses on achieving positive lifestyle outcomes for consumers.

Evidence analysed by the Assessment Team showed financial governance systems and processes are in place to manage the finances and resources that the centre needs to deliver safe and quality care and services. Evidence analysed by the Assessment Team showed the senior management have oversight of the service’s income and expenditure and this is reviewed regularly by the council. Evidence analysed showed financial audits are conducted yearly by council’s finance team.

The Quality Standard for the Commonwealth home support programme services are assessed as Compliant as four of the four applicable requirements have been assessed as Compliant. Requirement 8(3)(e) is Not Applicable and therefore not assessed.

## Assessment of Standard 8 Requirements

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

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

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| Requirement 8(3)(b) | CHSP | Compliant |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

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| Requirement 8(3)(c) | CHSP | Compliant |

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

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

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

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

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| Requirement 8(3)(e) | CHSP | Not Applicable |

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure*.

# Areas for improvement

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.