Woombye Care Inc (CCP)

Performance Report

26 Redmonds Road   
WOOMBYE QLD 4559  
Phone number: 07 5458 3500

**Commission ID:** 700120

**Provider name:** Woombye Care Incorporated

**Quality Audit date:** 29 April 2022 to 4 May 2022

**Date of Performance Report:** 1 June 2022

# Performance report prepared by

J Zhou, 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:**

* Woombye Care Inc (CCP), 18446, 26 Redmonds Road, WOOMBYE QLD 4559

# Overall assessment of Service/s

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

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| --- | --- | --- | --- | --- | --- | --- |
| Standard 3 Personal care and clinical care | | | HCP | Compliant | | |
| Requirement 3(3)(a) | | HCP | | | Compliant |
| Requirement 3(3)(b) | | HCP | | | Compliant |
| Requirement 3(3)(c) | | HCP | | | Not applicable |
| Requirement 3(3)(d) | | HCP | | | Compliant |
| Requirement 3(3)(e) | | HCP | | | Compliant |
| Requirement 3(3)(f) | | HCP | | | Compliant |
| Requirement 3(3)(g) | | HCP | | | Compliant |
| Standard 4 Services and supports for daily living | | | | | | |  |
|  | | | HCP | Compliant | | |  |
| Requirement 4(3)(a) | HCP | | Compliant | |  |
| Requirement 4(3)(b) | HCP | | Compliant | |  |
| Requirement 4(3)(c) | HCP | | Compliant | |  |
| Requirement 4(3)(d) | HCP | | Compliant | |  |
| Requirement 4(3)(e) | HCP | | Compliant | |  |
| Requirement 4(3)(f) | HCP | | Compliant | |  |
| Requirement 4(3)(g) | HCP | | Compliant | |  |
| Standard 6 Feedback and complaints | | | HCP | Compliant | | |  |
| Requirement 6(3)(a) | HCP | | Compliant | |  |
| Requirement 6(3)(b) | HCP | | Compliant | |  |
| Requirement 6(3)(c) | HCP | | Compliant | |  |
| Requirement 6(3)(d) | HCP | | Compliant | |  |
| Standard 7 Human resources | | | HCP | Compliant | | |  |
| Requirement 7(3)(a) | HCP | | Compliant | |  |
| Requirement 7(3)(b) | HCP | | Compliant | |  |
| Requirement 7(3)(c) | HCP | | Compliant | |  |
| Requirement 7(3)(d) | HCP | | Compliant | |  |
| Requirement 7(3)(e) | HCP | | Compliant | |  |

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| --- | --- | --- | --- | --- |
| Standard 8 Organisational governance | | HCP | Compliant | |
| Requirement 8(3)(a) | HCP | | Compliant |
| Requirement 8(3)(b) | HCP | | Compliant |
| Requirement 8(3)(c) | HCP | | Compliant |
| Requirement 8(3)(d) | HCP | | Compliant |
| Requirement 8(3)(e) | HCP | | 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 was informed by observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 Consumer dignity and choice

# HCP 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* They are treated with dignity and respect because they felt their opinions were valued and staff took the time to learn about their background and their identity.
* They felt safe and respected by the care staff. One consumer advised staff respects her request not to touch her things while they clean her room.
* They described how they are supported to exercise choice and independence in selecting the type and portion size of their meals. One consumer with diagnosed irritable bowel syndrome communicates her requests for smaller meal portions with kitchen staff who accommodate this request.
* They felt they are enabled to live their best life and supported to take certain risks such as buying alcohol.
* They receive a variety of written information such as invoices, menu options and a monthly newsletter which they said was easy to understand and if they have trouble with the monthly statements they know to ask staff for an explanation.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* Care planning documentation reflected what is important to the consumers, including information on their background, hobbies and life experiences.
* Staff described awareness of their online training in culture and diversity and the sampled care planning documentation contained details on each consumer’s background such as their faith and religious practices.
* There are file notes on consumer files detailing their involvement with decision making concerning the consumer and their meal preferences which is informed by their care needs and dietary requirements.
* Care staff explained they support the consumers to take certain risks such as offering to accompany a consumer to purchase alcohol in order to monitor his intake and minimise any risks, when previously, this consumer had been purchasing it online themselves.
* Communications with consumers is recorded in the care planning documents.

Based on the evidence sighted by the Assessment Team, 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.

**Assessment of Standard 1 Requirements**

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

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

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

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

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| Requirement 1(3)(c) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | Compliant |

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

# STANDARD 2 Ongoing assessment and planning with consumers

# HCP 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* They are involved in the assessment process with service staff regarding the delivery of safe and effective services to them.
* They feel the services they current receive meets their needs, goals and preferences and in some instances where a consumer has provided their end of life wishes, it is included in the assessment information.
* They feel they are involved in the planning and review of the services they receive.
* They have access to a copy of their care plan and they understand the frequency of their service and when changes may occur.
* That staff regularly communicate about their services with them and any changes that is required to meet their current needs.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* A review of documentation evidences staff undertaking assessments consider specific risks impacting on individuals such as falls and this information feeds into care planning documents.
* Care planning documents describe in sufficient detail the services the consumer receives.
* Care planning documents evidences consumer involvement in the planning of their services for instance, the care fitting in around the consumer’s other activities. There are also ongoing and annual care planning reviews.
* Staff also have access to consumer care and services plans.
* There is an annual review of care planning if it is not done earlier based on consumer needs.

Based on the evidence sighted by the Assessment Team, 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.

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | 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

### 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* Of the consumers receiving assistance with their medications, they feel their care is tailored to their needs.
* the staff always observe them to take their medications and know how to manage their pain and medications.
* They had confidence in the way staff handled their deterioration, one consumer who experienced a fall and seizure as well as chest pain expressed confidence in the way staff responded to these episodes.
* There is generally continuity of staff who provide services.
* Referrals are being made to care providers where appropriate.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* Staff exhibited a good understanding of each consumer’s needs, goals and preferences in relation to the delivery of medication to consumers. Care planning documents supported this finding as it contained information about the consumer’s medical requirements.
* Evidence was sighted relating to staff identifying and monitoring consumers for risks and know to adjust practices accordingly.
* Progress notes reflect the identification of, and response to, a consumer’s deterioration or changed conditions. One example is of a consumer’s progress notes detailing their fall and seizure on one occasion and chest pain on another.
* There is adequate information in the consumer’s progress notes and care plans which informs the user on how to best deliver effective and safe care.
* The service coordinator described the process of referring a consumer to another provider of care and services which was timely and appropriate under the circumstances.
* Staff interviewed had good understanding of the practicals ways to minimise transmission of infections which include handwashing and being vaccinated. The service has sufficient supplies of PPE equipment and it has an outbreak management plan and records of staff vaccination status.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the Home care packages service is assessed as Compliant as 6 of the 7 specific requirements have been assessed as Compliant and one standard was assessed as not applicable to this quality review by the Assessment Team.

**Assessment of Standard 3 Requirements**

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

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

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

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| Requirement 3(3)(c) | HCP | Not Applicable |

At the time of the quality review, the Assessment Team found this requirement to be not applicable.

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

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| Requirement 3(3)(e) | HCP | 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.*

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

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

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| Requirement 3(3)(g) | HCP | 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

### 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* They can adjust the type of services to mirror their care requirements. For instance, one consumer said when her pain increases, she adjusts her services to meet her needs and this enables her to remain in her own home.
* The care staff take the time to listen when consumers ‘feel down’ and may make suggestions that consumers speak to their medical officer.
* The care delivery fits in around their social networks and social activities are encouraged and maintained. For instance, a consumer spoke about being taken out by the coordinator on outings with his brother to stay connected to the community.
* They feel there is consistency with the service they receive despite sometimes having different staff attend to their care, this demonstrates the service having sufficient handover communications.
* When meals are provided as part of the home care package, the meals are enjoyable and of sufficient quantity.
* Where equipment is installed in a consumer’s home, it passed through an assessment process with a qualified professional.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* Staff described their understanding of what is important to each individual consumer. They help the consumer remain independent such as supporting consumers who prefer to make their own bed maintain that routine but they will supply clean linen on a weekly basis.
* Staff spoke about supporting the wellbeing of consumers when they feel ‘low’.
* Care documentation provides information on each consumer’s background and their social preferences.
* Staff responses and care documentation both evidence that communications about the consumer’s needs and preferences are being appropriately messaged internally within the service.
* Appropriate referrals are being made in a timely way. For instance, progress notes demonstrated a referral to an occupational therapist was made but staff also suggested the consumer who felt low connect with counselling services.
* The kitchen staff are aware of consumer’s dietary preferences and requirements. They have a list displayed in the kitchen.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the Home care packages service is assessed as Compliant as 7 of the 7 specific requirements have been assessed as Compliant.

**Assessment of Standard 4 Requirements**

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

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

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| Requirement 4(3)(f) | HCP | Compliant |

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

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

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

# STANDARD 5 Organisation’s service environment

# HCP 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 applicable to the quality review and as such as not been assessed.

## Assessment of Standard 5 Requirements

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

*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) | HCP | Not Applicable |

*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) | HCP | Not Applicable |

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

# STANDARD 6 Feedback and complaints

# HCP 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* They are provided with information on how to make complaints whether it be general or specific such as on the home care agreement. They are made aware of access to external complaints agencies.
* Upon commencement at the service, they know about the various external supports available to support them in making complaints which include language services.
* While they have not to lodge a formal complaint, they are happy with how their feedback have been promptly responded to and resolved in the past.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* Policies and procedures on complaints processes were sighted which include details on guiding staff to respond to feedback and escalate concerns.
* The service’s information pack to new consumers contain policies and procedures related to the service’s complaints management process.
* Aside from policies and procedures, staff could describe the open disclosure process used to manage complaints and were trained in this process during their induction.
* Management could articulate how they would handle formal complaints which was described in accordance with the relevant policies and procedures. The identification of complaint trends are covered in the policies and procedures and there are opportunities to discuss this item at management and board meetings.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the Home care packages service is assessed as Compliant as 4 of the 4 specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

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

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

# STANDARD 7 Human resources

# HCP 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* The frequency of their service delivery is in accordance with their needs, wishes and preferences.
* They felt the staff were kind, caring and respectful in their interactions and they were treated as individuals.
* They expressed confidence in the workforce. They said the workforce know what they are doing, and services are delivered in accordance with their individual needs and preferences.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* Current staff report having sufficient time to perform their care duties and there is adequate staff to facilitate individual care services as well as time to engage with the consumer from a wellbeing perspective. The management team advised they can utilise staff from the adjoining residential care facility if need be.
* The staff spoke about the consumers as indivdiuals and demonstrated knowledge of their individual needs and preferences. Observations were made of staff interactions with consumers which were respectful and caring in nature.
* Management confirmed the service maintains evidence of staff qualifications, COVID-19 vaccination status, driver’s licences and current criminal history check. This was done in line with the service’s human resource policies, procedures and guidelines.
* The service has an orientation program and online training for new starters, a buddy system whereby a new staff member is paired with an experienced staff member is implemented and ongoing training and guidance such as monthly ‘touch base’ meetings are provided by service management.
* There is structure and regularity in the way management monitors and reviews staff performance. This includes informal monthly ‘touch base’ meetings where feedback from consumers is used to assess the performance of staff. There is a formal two year staff performance review process with the current content being reviewed and developed. Further discussion on this area is in Standard 8.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the Home care packages service is assessed as Compliant as 5 of the 5 specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

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| Requirement 7(3)(a) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | Compliant |

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

# STANDARD 8 Organisational governance

# HCP 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

During interviews with the Assessment Team, the consumers and/or their representatives said in various ways that:

* The service seeks their information and input into the care and services they receive.
* They are kept up to date with information being shared with them about changes to the services they receive.
* Consumers said they feel comfortable with how the organisation balances risks and quality of life and supports them to live the best life they can.

The Assessment Team interviewed service staff, reviewed various forms of service documentation and consumer care information. I note the following:

* The service seeks consumer’s feedback through telephone calls, face to face meetings and surveys about the care and services that are provided.
* The organisation communicates its expectations of the workforce through policies and guidelines. Results of audits, quality indicator information, individual consumer surveys and feedback information are used by the governing body to oversee the delivery of safe, inclusive and quality care by the workforce.
* Staff and management reported that they have access to information that is relevant to them when they need it and to inform them in the delivery of care and services to consumers. Staff said they have access to care plans, rosters, alerts, updates, policy and procedures via the service’s electronic consumer management system.
* The service identified through an internal audit the need to review the schedule staff performance review. Following legislative changes, the service also reviewed their staff orientation checklist and annual mandatory training programme, and has included training on relevant policies and procedures, including open disclosure and complaint management, dignity of risk and a refresher course on the Aged Care Quality Standards.
* The Director of Care (DOC) manages the day to day budget for the service and additional expenditure over the financial delegation, or changes to the budget, are referred to the governing body who also approves any requests for additional works such as recent upgrades to the sewage system and swimming pool.
* The use of job description documents set out the clear expectations of staff responsbilites and accountabilities. Staff feel they are supported and empowered to delivery safe and quality services to consumers.
* Management are connected to relevant regulatory bodies, peak bodies regarding changes to the sector and governing legislation. They communicate regulatory information to staff via emails, meetings, training both in person and online. Incidents are recorded in the organisaiton’s incident management system which is monitored and reported on.
* Though the service has systems and processes to document feedback and complaints for future analysis, management is aware that the current consumers prefer to provide verbal feedback which they say are usually minor and easily resolved. Management accepted the Assessment Team’s suggestion to document all feedback to enable analysis of such data and identify trends and confirmed this will be the practise going forwards.
* The organisation has a risk management framework and policies and procedures and staff were live to how they would manage a high impact risk such a consumer fall which was consistent with the guidance materials. Staff have also been trained in identifying neglect and abuse in consumers and knew of their obligations to report. Management could describe the high impact or high prevalence risks associated with the consumers of the service.
* The organisation has a documented clinical governance framework, policies for antimicrobial stewardship, minimising the use of restraint and open disclosure process. Staff confirmed they receive training on the policies and provided examples of such application in their duties

Based on the evidence sighted by the Assessment Team, the Quality Standard for the Home care packages service is assessed as Compliant as 5 of the 5 specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

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| Requirement 8(3)(a) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | 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) | HCP | 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.