**Performance**

**Report**

**1800 951 822**

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| Name of service: | The Butler Canberra |
| Service address: | 94 Fullagar Crescent HIGGINS ACT 2615 |
| Commission ID: | 201376 |
| Home Service Provider: | Vitality Care Pty Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 10 November 2022 |
| Performance report date: | 25 November 2022 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for The Butler Canberra (**the service**) has been prepared by M Cooper delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

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

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

# Services included in this assessment

**Home Care:**

* Vitality Care Pty Limited, 26906, 94 Fullagar Crescent, HIGGINS ACT 2615

# Material relied on

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

* the assessment team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff, consumers/representatives and others
* Aged Care Act 1997 [Cth]
* Aged Care Quality and Safety Commission Act 2018 [Cth]
* Aged Care Quality and Safety Commission Rules 2018 [Cth]
* User Rights Principles 2014 registered 10 October 2022
* Quality of Care Principles 2014 registered 10 October 2022
* Guidance and Resources for Providers to support the Aged Care Quality Standards published by the Aged Care Quality and Safety Commission in September 2022
* Home Care Package Program operational manual a guide for home care providers September 2021

# Assessment summary for Home Care Packages (HCP)

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| Standard 8 Organisational governance | Not applicable as not all requirements have been assessed |

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

# Areas for improvement

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

# Standard 8

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

Findings

The Assessment Team reports that the Approved Provider is led by the Director, under which the executive team sit. The executive team are responsible for the governance of the service and are accountable for ensuring they promote a culture of safe and quality care.

They are responsible for conducting the executive meetings which currently include the Director, Care Manager and Finance Manager. The registered nurse employed by the service is scheduled to join these meeting to provide clinical input. The updated plan for continuous improvement, includes detailed information regarding how the service plans on complying with requirement 8(3)(b). This is reflected in the executive meeting minutes that were sighted by the Assessment Team.

The Assessment Team reviewed the agenda and last 3 months (9 August 2022 to 3 November 2022) meeting minutes from the executive meetings at the service. Each fortnightly meeting included evidence of:

* Scheduled and conducted on a fortnightly basis.
* Acceptance of the previous minutes on every meeting.
* Recruitment and training for staff.
* Detailed information on new consumers entering the service.
* Detailed information on existing consumers in the service.
* Analysis and discussion on incident reports (consumers and staff).
* Clinical data regarding consumers specific to falls, infections, wounds, behaviour and hospitalisation.
* Financial information e.g. new rates letter for consumers
* Aged Care Quality Standards discussion where the team selects a requirement to discuss at each meeting to improve the service.
* Self-assessment and continuous improvement discussion.
* Discussion on complaints and feedback from consumers.
* Rostering issues.

Management explained how the new process for conducting formal fortnightly executive meetings enables the service to be proactive in their care of the consumer and not reactive. They can link the actions and outcomes from these meetings into the PCI and self-assessment documents. Finally, they said that the executive meetings are a good way to discuss each consumer and really get to know them. The Assessment Team believes that the meeting minutes are very comprehensive and contain vital consumer information to ensure organisational governance by the executive team over the service. The service provider has therefore demonstrated that the executive team promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery

The Quality Standard for the Home Care Packages services the previous non-compliant requirement 8(3)(b) has been assessed and now found to be compliant

1. The preparation of the performance report is in accordance with section s68A – assessment contactof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)