




**Australian Government**

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**Australian Aged Care Quality Agency**

# Final Quality Review Report

<b>Provider name:</b>	Walcha Council
<b>Service name:</b>	Walcha Council
<b>Location:</b>	Community Health Centre, 11 Middle Street, WALCHA NSW 2354
<b>Quality Agency ID:</b>	200706

<b>Report approved:</b>	26 May 2017
<b>Approved by:</b>	 Gill Jones Assistant Director NSW/ACT

## **Final Quality Review Report**

### **About this report**

This is the Final quality review report for the quality review conducted at Walcha Council. The report includes assessment against the Home Care Standards. A copy of the report has been sent to the Department of Health.

The quality review included the following services:

#### **CHSP:**

- CHSP - Meals, 4-22703OR, Community Health Centre, 11 Middle Street, WALCHA NSW 2354
- CHSP - Transport, 4-22703PN, Community Health Centre, 11 Middle Street, WALCHA NSW 2354
- CHSP - Social Support - Group, 4-22703Q6, Community Health Centre, 11 Middle Street, WALCHA NSW 2354
- CHSP - Social Support - Individual, 4-22703QP, Community Health Centre, 11 Middle Street, WALCHA NSW 2354

### **Summary of findings**

The service meets 18 out of 18 expected outcomes of the Home Care Standards.

The quality review for your service is complete.

### **Next activity arrangements:**

We plan to conduct your next quality review in 2020.

### **Process undertaken and information considered:**

This report took the following into account:

- a. Interim Quality Review Report dated 2 May 2017
- b. Service history of performance against the Standards

## **Introduction**

This report documents the performance of the service against each of the expected outcomes of the Home Care Standards as set out in the Quality of Care Principles 2014 based on the assessment conducted during the quality review.

Each service is required to undergo a quality review at least once every three years.

An assessment team appointed by the Quality Agency conducted the quality review on 2 May 2017.

The quality review was conducted in accordance with the Quality Agency Principles 2013 and the Accountability Principles 2014.

Team leader: Richard Hanssens

Team member: Melissa Hodge

## Audit trail

Interviews	Number	Interviews	Number
Coordinator	1	Care recipients	12
Community Services Manager	1	Community care bus driver	1
Tutor (exercise program)	1	Volunteers	14
Advisory committee member	1	Taxi driver	1
Meals on wheels/ indigenous services coordinator	1		
Sampled documents	Number	Sampled documents	Number
Care recipient files	8		

## Other documents reviewed

- Business and strategic plan 2017 to 2027
- Care recipient handbook (A3 size)
- Care recipient information pack
- Comments, complaints, concerns register
- Community scrapbooks
- Continuous improvement plan
- Council emergency management plans
- Education records
- Meals on wheels documentation
- Meeting minutes
- Newsletters
- Organisational chart
- Planning day documentation
- Police certificates register and licences/vehicle insurance register
- Policies and procedures manual
- Positions descriptions
- Reportable and notifiable incidents policy, procedure and associated documents
- Reports to council
- Risk and hazard assessments, register
- User rights and responsibilities and complaints information
- Volunteer information pack
- Walcha city council advisory committee meeting documentation



## Observations

- 12 seater bus
- Brochures for external complaints body and other aged care services including advocacy and health services
- Care recipients and volunteers and staff interactions and morning tea
- Evacuation procedure on display
- Fire safety equipment
- Hand washing information on display
- Interactions between staff, volunteers and care recipients
- Meals on wheels volunteers picking up meals to deliver
- Office environment
- Planning day posters and information
- Staff handling telephone and face-to-face enquiries
- Taxi vouchers being processed

The **Statement of reasons** below details the findings of the quality review and may reference information provided to demonstrate the service's performance against each expected outcome within the Standards. Performance against the expected outcomes within each Standard are rated as either:

- Met, or
- Not met.

If you have received 'Not met' findings, the Statement of reasons will identify why the expected outcome was Not Met. Use this information to revise your Plan for Continuous Improvement to show how you will make improvements to meet all of the Standards.

## Statement of reasons

### Standard 1: Effective management

#### Principle:

The service provider demonstrates effective management processes based on a continuous improvement approach to service management, planning and delivery.

Expected outcome 1.1 – Corporate governance	Met
The expected outcome requires that “the service provider has implemented corporate governance processes that are accountable to stakeholders”.	
Reasons for findings for all program types:	
Walcha Council Community Care (WCCC) is a Walcha Council (Council) managed service. The Coordinator of WCCC reports to the Council Community Services Manager. Eight councillors form the management team with the General Manager and executive responsible for operational decisions. An Advisory Committee meets at least quarterly to assist the WCCC with making decisions. Financial management, human resources, administration and risk management is provided as part of the Council service. There is a defined corporate governance structure (including roles) with processes in place to ensure this is effective. A ten year strategic plan is in place to guide service delivery and this is in place to 2027. There is a range of reporting mechanisms and quality systems framework which ensures appropriate decision-making and accountability against objectives and funded targets. There are clear delegations of authority. A range of policies and procedures guide the service and these have been recently updated.	

Expected outcome 1.2 – Regulatory compliance	Met
The expected outcome requires that “the service provider has systems in place to identify and ensure compliance with funded program guidelines, relevant legislation, regulatory requirements and professional standards”.	
Reasons for findings for all program types:	
WCCC receives updated information on legislative requirements from a number of sources including the Department of Health, peak or association bodies, forums and Council. The coordinator attends conferences, meetings and forums where legislative requirements relevant to the service are discussed. Advisory Committee Members, staff and volunteers, care recipients and representatives are informed of any legislative changes relevant to them. Policies are updated as and when required following regulatory changes, as is relevant documentation such as handbooks and brochures. Staff qualifications, police	

<b>Expected outcome 1.2 – Regulatory compliance</b>	<b>Met</b>
certificates, records of licences and vehicle registrations are kept by Council and registers maintained on the electronic system to ensure currency. Reporting due dates are met and outputs exceeded. Regulatory compliance is reported on at meetings and monitored by council management. Council has a designated Privacy Officer and Right to Information Officer.	

<b>Expected outcome 1.3 – Information management systems</b>	<b>Met</b>
The expected outcome requires that “the service provider has effective information management systems in place”.	
Reasons for findings for all program types:	
<p>WCCC demonstrated it has comprehensive and effective information systems in place. These include handbooks, newsletters, memos and promotional material. The information system is supported by clear policy and procedures. The Community Services Manager audits the efficiency of the information system and measures its effectiveness and suitability to purpose. Regular surveys are conducted. Information is kept in both hard copy (secured) and electronic records. Computer systems are password protected, backed up and accessed at levels by those authorised to do so. Currently this system is being streamlined in line with Council requirements. Handbooks and information packs are available to staff and care recipients. Staff, volunteers and care recipients said they are satisfied with the information they are provided.</p>	

<b>Expected outcome 1.4 – Community understanding and engagement</b>	<b>Met</b>
The expected outcome requires that “the service provider understands and engages with the community in which it operates and reflects this in service planning and development”.	
Reasons for findings for all program types:	
<p>WCCC demonstrated it has strong links within its community and a strongly visible and supported presence in the Walcha region. Community care meetings provide networking opportunities and forge links to other services. Local forums and Council provide ongoing and current information on community needs, potential changes and ongoing demographics. This includes input into the Council strategic plan. It holds biannual open planning days which the last was well attended and provided an in-depth wish list of community views, needs and potential future direction of services. The service employs an Aboriginal Access Officer and has specific indigenous services including meals on wheels and a social support group.</p>	

<b>Expected outcome 1.5 – Continuous improvement</b>	<b>Met</b>
The expected outcome requires that “the service provider actively pursues and demonstrates continuous improvement in all aspects of service management and delivery”.	
Reasons for findings for all program types:	
<p>The service demonstrated a strong commitment to continuous improvement. It actively invites feedback from all levels of its operation. Review and monitoring of information was seen to provide continuous improvement initiatives and involved input from a range of stakeholders, particularly care recipients, their representatives and volunteers. The home</p>	



Expected outcome 1.5 – Continuous improvement	Met
<p>maintains a continuous improvement register which showed actions completed or identified when initiatives are projected to be completed. Continuous improvements include:</p> <ul style="list-style-type: none"> <li>• Previously meals for the meals-on-wheels service was provided through the local hospital kitchen. When meals were changed to a cook and chill method, care recipients expressed dissatisfaction with the quality and taste of meals. Following a number of complaints, in February 2017, WCCC changed to its meal provider being a local aged care facility that cooked fresh food daily. This kitchen is proactive in meeting changes and addressing feedback including on seasonal menus and portion sizes. Care recipients said they are much happier with the food as it is fresh, smells good and is tasty. This was confirmed by volunteers who said there are care recipients who had stopped using this service who have returned and are satisfied with the new meal provider.</li> <li>• In November 2016, a taxi service commenced in Walcha- which does not have public transport access. WCCC saw this as an opportunity to provide further transport options by using taxi vouchers for its eligible care recipients. The taxi has a dispensation for wheel chair access. This service has increased the options for care recipients to shop, return from social outings and attend medical appointments. Care recipients spoke highly of the taxi and its female driver. The Coordinator noted the taxi driver is like 'one of the team' as they are very supportive of care recipients and their individual needs.</li> </ul>	

Expected outcome 1.6 – Risk management	Met
<p>The expected outcome requires that “the service provider is actively working to identify and address potential risk, to ensure the safety of service users, staff and the organisation”.</p>	
<p>Reasons for findings for all program types:</p> <p>WCCC demonstrated risks are managed to ensure the safety and rights of care recipients, staff, volunteers and other stakeholders. Council has a dedicated Risk Management Manager. There is an incident/hazard reporting system and any incident/hazards are investigated and analysed for action and identification of improvements. Staff and volunteer education includes risk management. All care recipients have a current risk assessment against the service provided (such as home safety for meals-on-wheels). Venues used for social groups undergo an environmental audit for safety. Vehicle safety is maintained with regular maintenance including audits covering: service register; insurance and registration. Staff and volunteers described a range of processes they draw on to identify and manage risk and ensure safety of their services users and their workplaces. Care recipients interviewed are satisfied the service safely delivers care in accordance with care recipients’ rights, needs and preferences.</p>	

Expected outcome 1.7 – Human resource management	Met
<p>The expected outcome requires that “the service provider manages human resources to ensure that adequate numbers of appropriately skilled and trained staff/volunteers are available for the safe delivery of care and services to service users”.</p>	
<p>Reasons for findings for all program types:</p> <p>WCCC human resource management system is managed through Council and its Human Resources Manager. Human resource policies and procedures support effective recruitment processes. Position descriptions are in place and reviewed as and when required. Staff are continuing to further their education and there is an orientation system</p>	

Expected outcome 1.7 – Human resource management	Met
<p>in place should new staff be recruited. A formal recruitment process is followed. Volunteers receive training and orientation and are provided with information to support their role (including rostering). Mandatory Education such as on elder abuse, is provided and education is ongoing and in line with care recipient needs. Annual appraisals are conducted. Management and staff were satisfied with the support they receive from Council to carry out their roles effectively. Care recipients interviewed expressed a high level of satisfaction with the skills and expertise of staff and volunteers and the care and services they deliver.</p>	

Expected outcome 1.8 – Physical resources	Met
<p>The expected outcome requires that “the service provider manages physical resources to ensure the safe delivery of care and services to service users and organisation personnel”.</p>	
<p>Reasons for findings for all program types:</p> <p>WCCC has rooms for group meetings and administration in a building in the grounds of the local hospital. The lease for this property is under review with negotiation between the Council and local hospital board. We observed effective systems in place to manage the safety of the premises including fire equipment and electrical tagging of white-ware, computers, printers and other equipment. Council maintains an asset register for items valued over \$200. Currently this only includes the WCCC car but other items are currently being reviewed for replacement and the service is taking ownership of a new bus in approximately July 2017. Comprehensive work health and safety systems are well established. Staff and care recipients expressed satisfaction with the physical resources available to them and the safety of these.</p>	

## Standard 2: Appropriate access and service delivery

### Principle:

Each service user (and prospective service user) has access to services and service users receive appropriate services that are planned, delivered and evaluated in partnership with themselves and/or their representative.

Expected outcome 2.1 – Service access	Met
<p>The expected outcome requires that “service user’s access to services is based on consultation with the service user (and/or their representative), equity, consideration of available resources and program eligibility”.</p>	
<p>Reasons for findings for all program types:</p> <p>The service provider has effective systems in place ensuring access to services is based on consultation with the care recipient, equity, consideration of available resources and program eligibility. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Care recipient referrals are accepted on My Aged Care based on program eligibility, equity and available resources. Care recipients interviewed expressed a high level of satisfaction with service access processes.</p>	

<b>Expected outcome 2.2 – Assessment</b>	<b>Met</b>
<p>The expected outcome requires that “each service user participates in an assessment appropriate to the complexity of their needs and with consideration of their cultural and linguistic diversity”.</p>	
<p>Reasons for findings for all program types:</p> <p>WCCC has effective systems in place to ensure each care recipient receives a comprehensive initial assessment which is appropriate to cultural and linguistic diversity and complexity of needs. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. The service coordinator confirmed comprehensive assessment processes and care recipient files reviewed contained completed assessment forms and in home hazard report forms. Care recipients interviewed expressed a high level of satisfaction with assessment processes.</p>	

<b>Expected outcome 2.3 – Care plan development and delivery</b>	<b>Met</b>
<p>The expected outcome requires that “each service user and/or their representative, participates in the development of a care/service plan that is based on assessed needs and is provided with the care and/or services described in their plan”.</p>	
<p>Reasons for findings for all program types:</p> <p>The service provider has effective systems in place to ensure each care recipient participates in the development of a plan that is based on assessed needs and is provided with appropriate care and services in accordance to their identified goals. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. The service coordinator confirmed effective support planning processes based on comprehensive assessment. Care recipient files reviewed contained appropriate goal based support plans including the types of services care recipients agreed to participate in. The consumer handbook also contained comprehensive detail of all programs available and clearly outlined times, days and transport options. Care recipients expressed a high level of satisfaction with services provided as described in their support plan. They said all staff and volunteers are professional and appropriately skilled in delivering services.</p>	

<b>Expected outcome 2.4 – Service user reassessment</b>	<b>Met</b>
<p>The expected outcome requires that “each service user’s needs are monitored and regularly reassessed taking into account any relevant program guidelines and in accordance with the complexity of the service user’s needs. Each service users’ care/service plans are reviewed in consultation with them”.</p>	
<p>Reasons for findings for all program types:</p> <p>WCCC has effective systems in place ensuring each care recipients’ needs are monitored according to relevant program guidelines and in accordance with the complexity of their needs. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Volunteers report changes in care recipient needs and other relevant information to the service coordinator as required. The service coordinator has regular contact with most care recipients therefore can monitor their wellbeing as well as conducting a formal reassessment at least annually. The meals on wheels coordinator also has ongoing contact with meals care recipients and “the Wanderers” social group (Aboriginal and Torres Strait Islander social group) and</p>	

<b>Expected outcome 2.4 – Service user reassessment</b>	<b>Met</b>
records/reports their changing needs accordingly. Care recipients interviewed expressed a high level of satisfaction with ongoing monitoring and reassessment processes.	
<b>Expected outcome 2.5 – Service user referral</b>	<b>Met</b>
The expected outcome requires that “the service provider refers service users (and/or their representatives) to other providers as appropriate”.	
Reasons for findings for all program types:  WCCC has effective systems in place ensuring care recipients are referred to other providers as appropriate. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Staff confirmed referral processes were generally directed to my aged care but also to other providers as appropriate. Care recipients expressed a high level of satisfaction with referral processes. They confirmed they advise the service provider if they need more services or other types of assistance and staff/volunteers facilitate referrals accordingly.	

### **Standard 3: Service user rights and responsibilities**

#### **Principle:**

Each service user (and/or their representative) is provided with information to assist them to make service choices and has the right (and responsibility) to be consulted and respected. Service users (and/or their representative) have access to complaints and advocacy information and processes and their privacy and confidentiality and right to independence is respected.

<b>Expected outcome 3.1 – Information provision</b>	<b>Met</b>
The expected outcome requires that “each service user, or prospective service user, is provided with information (initially and on an ongoing basis) in a format appropriate to their needs to assist them to make service choices and gain an understanding of the services available to them and their rights and responsibilities”.	
Reasons for findings for all program types:  WCCC has effective systems in place to ensure each care recipient is provided with information in a format appropriate to gain an understanding of service choices, the services available and their rights and responsibilities. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Staff confirmed all prospective care recipients are provided with a comprehensive information pack including a consumer handbook and the charter of care recipients’ rights and responsibilities – home care. They explain all documentation and services to care recipients and their representatives during the initial assessment processes. Care recipients and representatives verified that documentation had been received and that verbal information provided by all staff and volunteers is ongoing, professional, responsive and helpful.	

<b>Expected outcome 3.2 – Privacy and confidentiality</b>	<b>Met</b>
The expected outcome requires that “each service user's right to privacy, dignity and confidentiality is respected including in the collection, use and disclosure of personal information”.	

<b>Expected outcome 3.2 – Privacy and confidentiality</b>	<b>Met</b>
<p>Reasons for findings for all program types:</p> <p>The service provider has effective systems in place to ensure care recipients' right to privacy, dignity and confidentiality is respected including collection, use and disclosure of personal information. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Staff and volunteers confirmed implementing privacy and confidentiality practices in relation to client information and records. They confirmed respecting privacy, confidentiality and dignity was embedded in their culture and supported by appropriate induction and ongoing training programs. Observations of staff and volunteers interacting with care recipients during the group interview demonstrated they were highly professional, engaging and respectful. Care recipients files reviewed contained appropriate consent forms signed by care recipients. Care recipients interviewed confirmed their dignity, privacy and confidentiality were well respected by all staff.</p>	

<b>Expected outcome 3.3 – Complaints and service user feedback</b>	<b>Met</b>
<p>The expected outcome requires that “complaints and service user feedback are dealt with fairly, promptly, confidentially and without retribution”.</p> <p>Reasons for findings for all program types:</p> <p>WCCC maintains a comments, complaints and compliments register and was able to demonstrate how these are managed effectively and where they have resulted in continuous improvement to service delivery. Care recipients are actively encouraged to raise concerns and said they are able to do so with the management team. In doing so they expressed their confidence that their concerns would be addressed and action taken to resolve any issues identified. Information on internal and external complaints mechanisms are made available to and discussed with care recipients as part of their engagement with the service. Concerns are addressed through reports to and meetings with Council. A recent open forum planning day provided community input to services and how services could be improved. Staff demonstrated an understanding of managing concerns and complaints raised with them. Overall, care recipients said they are very happy with the service provider and its staff.</p>	

<b>Expected outcome 3.4 – Advocacy</b>	<b>Met</b>
<p>The expected outcome requires that “each service user’s (and/or their representative’s) choice of advocate is respected by the service provider and the service provider will, if required, assist the service user (and/or their representative) to access an advocate”.</p> <p>Reasons for findings for all program types:</p> <p>WCCC has effective systems in place to ensure care recipients’ choice of advocate is respected and assist in accessing advocacy services as required. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Staff confirmed that the care recipients’ choice of advocate or representative is respected and recorded appropriately. They would assist care recipients, carers and representatives to access an advocate or advocate service if required. Advocates and carers are given due consideration and are involved in support planning accordingly. Care recipients expressed a high level of satisfaction with advocacy processes. They confirmed advocates and carers were involved appropriately in service delivery planning and implementation.</p>	

<b>Expected outcome 3.4 – Advocacy</b>	<b>Met</b>

<b>Expected outcome 3.5 – Independence</b>	<b>Met</b>
The expected outcome requires that “the independence of service users is supported, fostered and encouraged”.	
Reasons for findings for all program types:	
<p>WCCC demonstrated there are appropriate processes in place to foster and encourage the independence of care recipients. Policies and procedures are updated to incorporate process improvements. This ensures staff practices continue to be effective. Staff and volunteers confirmed services provided support care recipients interacting socially with other people and that many have developed friendships with volunteers and other care recipients. Care recipients interviewed expressed a high level of satisfaction with services received. They said they enjoyed activities/interactions with staff/volunteers and connecting with community was important to their overall wellbeing. Meals on wheels care recipients said meals provided maintained their health and supported their ability to continue living in their own home.</p>	