1st Care Community Care Package South Brisbane & Gold Coast

Performance Report

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| **Address:** | 3/10 Miltiadis StreetACACIA RIDGE QLD 4110 |
| **Phone:** | 07 3341 0520 |
| **Commission ID:** | 700920 |
| **Provider name:** | 1st Care Community Pty Ltd |
| **Activity type:** | Assessment Contact - Desk |
| **Activity date:** | 5 September 2022 |
| **Performance report date:** | 10 October 2022 |

# Performance report prepared by

G. McNamara, 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:**

* 1st Care Community Pty Ltd, 26253, 3/10 Miltiadis Street, ACACIA RIDGE QLD 4110

# Overall assessment of Service

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice |  |  |
| Requirement 1(3)(e)  | HCP | Compliant |
|  |  |  |
| Standard 8 Organisational governance |   |  |
| Requirement 8(3)(b) | 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 for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 Consumer dignity and choice

#  HCP

### 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

The service demonstrated that it was providing consumers and representatives with accurate, up to date and relevant information to support choice and independence. The consumer and the representative interviewed said they were satisfied with the recent changes to their hours of care, as a result of the implementation of a recent award. The service has procedures to support relevant, timely information to consumers and representatives.

As not all requirements were assessed an overall rating for the Quality Standard is not provided.

**Assessment of Standard 1 Requirements**

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

# STANDARD 8 Organisational governance

#  HCP

### 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

The service demonstrated that it promotes a culture of safe and inclusive care to consumers and is accountable for their delivery.

The general manager said all 5 consumers affected by recent changes have had their care plan updated. The general manager said improvements have included the introduction of a new consumer documentation management system which is expected to facilitate ease of use by staff to record and update consumer information.

As not all requirements were assessed an overall rating for the Quality Standard is not provided.

## Assessment of Standard 8 Requirements

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

# 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.

# Other relevant matters

On 13 September 2021, arising out of a Quality Audit from 10 to 11 May 2021, the provider was found to be non-compliant with the following requirements:

**Standard 1:**

Requirement 1(3)(d)

**Standard 2:**

Requirements 2(3)(a), 2(3)(b), 2(3)(c), 2(3)(d) and 2(3)(e)

**Standard 3:**

Requirements 3(3)(a), 3(3)(b), 3(3)(d), 3(3)(e) and 3(3)(f)

**Standard 4:**

Requirement 4(3)(d)

**Standard 7:**

Requirement 7(3)(d)

**Standard 8:**

Requirements 8(3)(b), 8(3)(d) and 8(3)(e).

Other than requirement 8(3(b), which I have now found to be compliant, none of the other non-compliant requirements from the Quality Audit from 10 to 11 May 2021 were assessed at this Assessment Contact – Desk on 5 September 2022, and the provider remains non-compliant with those other requirements .