Co.As.It. Community Services

Performance Report

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**Commission ID:** 700747

**Provider name:** Co.As.It. Community Services Ltd

**Quality Audit date:** 12 October 2020 to 14 October 2020

**Date of Performance Report:** 13 November 2020

# Publication of report

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

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, 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.
* the provider’s response to the Quality Audit report received 2 November 2020.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### 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

I have found the service is compliant with this standard because the Assessment Team found that consumers and representatives sampled confirmed they are treated with dignity and respect, can maintain their identity, can make informed choices about their care and services and can live the life they choose.

For example:

* Consumers and representatives interviewed confirmed they are treated with respect and staff know what is important to them.
* Consumers interviewed confirmed their personal privacy is respected and their personal information is kept confidential.

In addition, staff interviewed were familiar with consumers backgrounds and demonstrated an understanding of what is important to them. The service demonstrated that 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.

The service has policies and procedures in place to guide staff in their engagement with consumers and how to foster consumer choice. Staff demonstrated respect towards consumers and an understanding of their care preferences. Care plans support the staff to understand each consumer and their individual choices regarding care and services.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

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

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

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

### Requirement 1(3)(d) Compliant

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

### Requirement 1(3)(e) 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.*

### Requirement 1(3)(f) Compliant

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

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### 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

I have found the service is compliant with this standard because the Assessment Team found that overall sampled consumers and representatives confirmed that they feel like partners in the ongoing assessment and planning of their care and services.

For example:

* Consumers and representatives interviewed reported being involved in the initial assessment and ongoing planning of their care.
* Consumers and representatives interviewed reported they are informed about the outcomes of assessment and planning and have access to their care and services plan if they wish.
* Consumers and representatives confirmed the service seeks input from others who contribute to the consumers’ care including their medical practitioner, allied health practitioners (AHPs) and family members.

The Assessment Team also found

* An initial assessment of consumers occurs
* Care plans reviewed showed they are developed in consultation with the consumer and/their representative, they have been reviewed regularly and updated when changes have been required.
* Care plan documentation includes assessments and care plans specific to the consumer and their needs
* Care plans are available to the consumer. Staff interviewed are aware of the consumers’ needs and preferences and strategies to follow to ensure needs and preferences are met.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 2 Requirements

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

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

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

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

### Requirement 2(3)(e) 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 COMPLIANT Personal care and clinical care

### 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

I have found the service is compliant with this standard because the Assessment Team found that overall, sampled consumers considered that they receive personal and clinical care that is safe and right for them.

For example:

* Consumers interviewed confirmed they get the care they need and have access to a MO or other health professionals when they need it.
* Consumers sampled provided positive feedback about the staff and said staff understand their needs, goals and preferences.

In addition, the Assessment Team found

* Staff could describe how they ensure care is best practice, their opportunities for continuing education and how they ensure information is shared both within the organisation and with others outside the organisation. Staff demonstrated an understanding of precautions to prevent and control infection, including COVID-19.
* The service has policies and procedures relating to clinical and personal care delivery which is available for staff to access to ensure best practice. Review of the consumers’ clinical and personal care needs identified consumers sampled received safe and effective care.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) 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.*

### Requirement 3(3)(b) Compliant

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

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### Requirement 3(3)(d) 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.*

### Requirement 3(3)(e) 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.*

### Requirement 3(3)(f) Compliant

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

### Requirement 3(3)(g) 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 COMPLIANT Services and support for daily living

### 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

I have found the service meets this requirement because the Assessment Team found that overall consumers sampled confirmed they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do.

Consumers interviewed confirmed they are supported by the service to undertake a range of lifestyle activities of interest to them, participate in the broader community as well as maintain contact with people who are important to them.

Consumers interviewed also advised that the food offered by the service through their respite centres was of good quality and quantity.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

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

### Requirement 4(3)(b) Compliant

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

### Requirement 4(3)(c) 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.*

### Requirement 4(3)(d) Compliant

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

### Requirement 4(3)(e) Compliant

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

### Requirement 4(3)(f) Compliant

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

### Requirement 4(3)(g) Compliant

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

# STANDARD 5 COMPLIANT Organisation’s service environment

### 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

I have found the service meets this requirement because the Assessment Team found that overall sampled consumers indicated they feel safe and comfortable in the service environment.

The organisation has five social group activities (SGA) centres to promote social inclusion and provide centre-based respite. Consumers can also access the main office for meetings if required with lift access for those with mobility deficits. The Assessment Team observed the environment is welcoming with a reception at the main office centre and well-maintained pathways leading to the day centre.

Consumers confirmed they can freely and safely access indoor and outdoor areas and feel safe attending social support services at the respite centre.

Consumers confirmed the environment at the day centre is easy to access and they are made to feel welcome. Consumers said they enjoy the activities, meals and social experience at the centre.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

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

### Requirement 5(3)(b) Compliant

*The service environment:*

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

### Requirement 5(3)(c) Compliant

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

# STANDARD 6 COMPLIANT Feedback and complaints

### 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

I have found the service is compliant with this service because the Assessment Team found that overall sampled consumers consider they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

Consumers interviewed could explain the process to follow when raising a concern and or a complaint. Consumers felt the service is very approachable and were able to give examples of times they had raised issues that were quickly resolved in a timely manner.

Consumers have complaint information in their personal folder located at their home and receive an information kit on commencement of services which contain the complaints policy. Staff have training in being able to assist in the complaints process, including applying an open disclosure approach based on the services open disclosure policy. Complaints are monitored through meetings and addressed through the Continuous Improvement register (CIR).

The Assessment team reviewed the CIR which demonstrated the collection of complaints/concerns and the actions taken by the service to address these. All issues have a planned action, persons responsible and consumer satisfaction with the response. The Complaints register is monitored by the CEO and the Board.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

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

### Requirement 6(3)(b) Compliant

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

### Requirement 6(3)(c) Compliant

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

### Requirement 6(3)(d) Compliant

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

# STANDARD 7 COMPLIANT Human resources

### 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

I have found the service meets this requirement because the Assessment Team found that overall sampled consumers indicated they get quality care and services when they need them and from people who are knowledgeable, capable and caring.

Consumers interviewed responded that staff are kind and caring and treat them with respect. Consumers reported that staff show up on time and are ready to work, and if there was an instance where they may be late they are advised ahead of time.

Consumers interviewed responded that staff have a good knowledge of the care and services that they require and have time to talk to them during their work.

Consumers interviewed said, “staff are polite and always are cheery”, “I look forward to seeing my carer each day as they are like family to me now”, “We feel like spoilt kids, that the staff are so good to us”.

Consumers interviewed said staff are ‘great’ and that staff are really part of the family and have a real interest in getting to know them. Consumers reported that even though they may be from a different country or culture this was never a concern as so are the staff and they all get along.

Staff receive education and training on a constant basis, responding to the identified needs of consumers and receive feedback on their performance through ongoing yearly performance appraisals which guide staff education.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

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

### Requirement 7(3)(b) Compliant

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

### Requirement 7(3)(c) Compliant

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

### Requirement 7(3)(d) Compliant

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

### Requirement 7(3)(e) Compliant

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

# STANDARD 8 COMPLIANT Organisational governance

### 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

I have found the service meets this requirement because the Assessment Team found sampled consumers indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

Consumers interviewed were able to describe how they are involved in the development, delivery and evaluation of care and services within the organisation, consumers were satisfied the organisation is well run.

Consumers were aware of how to provide feedback to the service and advised the organisation regularly follows up with them about the delivery of care and services either by phone, or through feedback.

There are effective information systems in place to support the work force, compliance with regulations, financial management, continuous improvement, feedback and complaints and clinical care. The clinical governance framework supports both open disclosure and anti-microbial stewardship. Staff interviewed understood their roles and these concepts and could explain how they are applicable to the service.

The approved provider’s response acknowledged the Assessment Team’s findings.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

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

### Requirement 8(3)(b) Compliant

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

### Requirement 8(3)(c) 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.*

### Requirement 8(3)(d) 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.*

### Requirement 8(3)(e) 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.