Focal Community Services

Performance Report

Office: Wyvern House, 27 Ellenborough Street, Hub : 6 Canning Street
NORTH IPSWICH QLD 4305
Phone number: 07 3812 2014

**Commission ID:** 701073

**Provider name:** Focal Community Living Inc

**Assessment Contact - Site date:** 15 September 2020

**Date of Performance Report:** 21 October 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 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(a) | Non-compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Non-compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(g) | 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 Assessment Contact - Site; the Assessment Contact - Site 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 Assessment Contact - Site report received on
9 October 2020.

# STANDARD 2 NON-COMPLIANTOngoing 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

The Assessment Team found that the consumer interviewed considered they were involved in care planning and were consulted about the care and services. They said they have a copy of their care plan available to them in their home file.

However, the assessment and care planning documentation did not adequately demonstrate ongoing assessment and planning informed the delivery of safe and effective care and services. Care plan documentation did not sufficiently identify and address current care needs, goals and preferences or detail information to guide staff practice.

The Quality Standard is assessed as Non-compliant as two of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 2 Requirements

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

The service was not able to adequately demonstrate assessment and planning, including consideration of risks to the consumer’s health and well-being, informed the delivery of safe and effective care and services.

The service did not have access to all relevant assessment and care planning documentation as the hard copy records were inaccessible and not available to staff at the time of the Assessment Contact visit. Consumer records were not available electronically.

A review of the intake policies and procedures included an internal risk assessment protocol that included a client risk assessment, an environmental risk assessment and an in-home risk assessment. The service was unable to demonstrate that these risk assessments had been undertaken.

A review of the service’s policies and procedures by the Assessment Team identified that the service’s policies and procedures did not reflect aged care specific information. The service’s home care agreement included information relating to Commonwealth Home Support Program funding even though the service did not have approval for such funding. The agreement did not reflect the Charter of Aged Care Rights.

The service advised that all policies and procedures required a review to include aged care specific information.

The Approved Provider’s response received on 9 October 2020 stated that the electronic capture of all consumers’ documentation was completed and aged care consumer documentation was now in an electronic file.

The service has implemented new intake and risk management processes after an audit in June 2020 and these processes outline more aged care specific procedures.

The Approved Provider advised that due to a human error, the Service Agreement for aged care consumers had not been updated to include the Charter of Aged Care Rights. This omission has been corrected and an updated Service Agreement with the Charter of Aged Care Rights has been provided to aged care consumers. A new budget tool has been created and the electronic information system updated so that invoices and budget statements are forwarded to the consumers automatically each month. A new budget and Service Agreement was provided to aged care consumers on 2 October 2020.

Whilst I acknowledge the Approved Provider has taken action to address deficiencies identified by the Assessment Team, at the time of the Assessment Contact, care documentation was not available to staff, risk assessments were not undertaken and care and services and budget related information was inaccurate and not up to date. Therefore, this requirement is non-compliant.

### 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) Non-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.*

The organisation had policies and procedures that instructed staff to document the outcomes of assessments and planning and to make the documents available where care and services were delivered.

However, a review of care planning documentation did not demonstrate outcomes of assessment and planning were adequately documented. Care plan documents did not include a detailed outline of agreed services to be delivered, nor did it provide sufficient information to guide staff practice, including a consideration of risks and strategies to manage or minimise risk. The budget did not reflect a change in hours of service after service delivery had changed because of Covid-19. Care plans had not been updated and did not identify that the service provided regular phone contact support and advice relating to Covid-19.

The Approved Provider’s response advised the service was reviewing its systems and processes relating to aged care assessment and care planning. The Covid-19 related changes were not documented due to differences in program requirements between aged care and disability care. The service has updated the Individual Service Plans and Budgets to reflect aged care requirements and staff have received training on the differences in requirements between the aged care and disability programs. The service implemented new intake and risk management processes and the Approved Provider is conducting a full review of all policies and procedures to ensure that the documents specifically identify aged care. This review is expected to be completed by June 2021.

Whilst I acknowledge the Approved Provider has acted to address the deficiencies identified by the Assessment Team in relation to this requirement, at the time of the Assessment Contact, the consumer did not have access to care and services and budget-related information that was accurate and up to date. Therefore, this requirement is non-compliant.

### 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 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

The Assessment Team did not assess all requirements of this Standard and therefore an overall compliance rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### 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.*

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

* Requirement 2(3)(a) – Ensure the service undertakes assessment and planning, including consideration of risks to the consumer’s health and well-being, and ensures that planning documentation is readily available to staff to inform the delivery of safe and effective care and services.
* Requirement 2(3)(d) – Ensure the service effectively communicates the outcomes of assessment and planning to the consumer and documents the outcomes in a care and services plan that is readily available to the consumer, and where care and services are provided.