Focal Community Services

Performance Report

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**Commission ID:** 701073

**Provider name:** Focal Community Living Inc

**Assessment Contact - Desk date:** 19 February 2021

**Date of Performance Report:** 15 March 2021

# 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(d) | 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 - Desk; the Assessment Contact – Desk report was informed by a desk assessment, review of documents and interviews with staff, a representative.
* information held by the Commission including the performance report for the Assessment Contact- site conducted on 15 September 2020 and the Approved Provider’s written response received on 12 October 2020 in relation to the Assessment Contact.

# STANDARD 2 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

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

## 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.*

The service did not have any consumers receiving services at the time of the Assessment Contact. However, one named consumer was registered with the service with their services deferred due to COVID-19. The representative confirmed the consumer was registered with the service and was not receiving services at that time. The representative of the named consumer confirmed the service has undertaken risk assessments for slip trips, falls and diabetes management. They said they were aware of how to access this information along with the consumer’s individual service plan and new contract.

The Assessment Team identified improvements had been implemented by the service in response to deficiencies identified in the previous Assessment Contact. The Assessment Team confirmed the service has reviewed their intake procedure and implemented a new aged care procedure which included the development of risk management templates and procedures. Management advised all staff had received training in relation to the new process and the service had met with the named consumer to explain the process and ensure all information regarding their care and service needs were captured.

The representative of the named consumer confirmed risk assessments had been discussed and completed by the service which was evident in the consumer’s diabetes and falls management plans. The service had implemented an audit schedule to monitor compliance with the service’s processes, policies and procedures.

The service had updated the named consumer’s contract to include the Charter of Aged Care Rights and the service’s electronic systems to ensure budgets and invoices are sent to consumers and representatives each month. The representative and consumer were provided with a copy of the fee schedule, individual service plan and contract.

I have considered the information provided by the Assessment Team and the Approved Provider’s response in relation to improvement actions undertaken by the service in response to the deficiencies identified in the previous Assessment Contact. The service was able to demonstrate they actively pursue continuous improvement in response to the deficiencies previously identified. I am satisfied with the service’s actions.

This requirement is Compliant.

### 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.*

The representative for the named consumer said a new budget was completed and discussed and a copy provided in November 2020. They confirmed they had received a copy of the named consumer’s individualised care plan, fee schedule and Charter of Aged Care Rights which was discussed with them, easy to read and reflected the care and services they had previously requested. Management advised when the named consumer reinstates their services, a new budget will be developed and discussed with them.

Care planning documentation for the named consumer included the consideration of risks and strategies to manage or minimise risks identified.

The service had developed and implemented a new aged care procedure which included information about how to use the new budget. Management advised all staff had received training for the new procedure and budget.

The service was able to demonstrate they actively pursue continuous improvement in response to the deficiencies previously identified. I am satisfied with the service’s actions.

This requirement is Compliant.

# 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.