Home Care Assistance Newcastle

Performance Report

43/45 Belford Street
BROADMEADOW NSW 2292
Phone number: 02 4023 3000

**Commission ID:** 201351

**Provider name:** Merrie Family Pty Ltd

**Quality Audit date:** 4 May 2021 to 5 May 2021

**Date of Performance Report:** 30 July 2021

# 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.

# 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** | **Non-compliant** |
| Requirement 2(3)(a) | Non-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** | **Not Assessed** |
| **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 8 June 2021.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Compliant with all requirements in this Standard.

Consumers, or their representatives, confirmed they are treated with dignity and respect and can maintain their sense of identity. Consumers interviewed said staff are respectful in the way they interact with them. They said the staff know them well including what they like, don't like and how they like things done. Consumers said they are supported to exercise choice and independence and to take risks to enable them to live the life they choose. Consumers are supported to maintain relationships of choice and make connections with others and are provided with assistance to do this. Consumers said they are given information to help them make informed decisions about their care and services.

Records and care documentation confirmed the service has identified the goals, needs and preferences of each consumer. This includes cultural and social needs and preferences and ways to support consumer's choice and independence.

Consumers are provided with information in a format appropriate to their needs, both verbally and in writing, to ensure they are able to make informed decisions and exercise choice. Consumers are provided with the list of specified care and services which constitute a Home Care Package and assisted to choose the care and services to meet their assessed needs.

Documentation sighted demonstrated that consumers and representatives are given information about privacy and confidentiality through their service agreement and information pack.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

*Care and services are culturally safe.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

# 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

I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Non-compliant with Requirement 2(3)(a) and Compliant with Requirements 2(3), (b), (c), (d) and (e).

The service did not demonstrate assessment and planning consistently considered risks to the consumer’s health and well-being to inform the delivery of safe and effective care and services. The service did not have an initial assessment tool in place to ensure staff consistently assessed consumer risks appropriate to their needs, goals and preferences.

Care plans were generally found to include information relevant to consumer needs, goals and preferences and provided guidance for staff on how to deliver care.

All consumers, or their representatives, interviewed confirmed assessment and care planning is in partnership with them. Staff and management collaborate with each consumer and their representative using a relationship-based model of care.

There are processes in place to discuss advance care planning and consumers can elect to undertake this discussion further if they choose. Consumers and their representatives confirmed they have access to their care plans and staff confirmed they have access to care plans at the point of care delivery.

The service demonstrated care and services are reviewed for effectiveness when consumers’ circumstances change and when incidents occur.

The Quality Standard is assessed as Non-compliant as one 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 Assessment Team found the assessment process of consumers’ needs goals and preferences to be inconsistent as there was no formal assessment tool for an initial assessment, which then subsequently did not inform if further clinical assessment of needs is required. For one consumer where the service identified risks to consumer’s health and well-being, the service did not consistently assess these risks to understand the extent of risk and develop strategies to mitigate the risks. Information included:

* The service did not have a dedicated assessment document or format to undertake an initial assessment of consumers needs, goals and preferences. Care managers interviewed by the Assessment Team in their responses confirmed there to be no guiding assessment process to assess consumer needs, goals and preferences and different methods of assessment were advised. Management stated registered nurses had clinical assessment tools available for use.
* One consumer’s Aged Care Assessment Team summary identified the consumer had a history of falls and was a falls risk, had ongoing issues with mobility, dry and fragile skin, increasing incontinence, a decline in appetite and weight loss. The service did not undertake assessments in relation to these identified risk on entry to the service with the exception of a pressure area risk assessment. The Assessment Team noted there were ongoing directives for care being provided by the consumer.
* The consumer’s care plan was noted to not include pressure area prevention strategies, despite the consumer having previously had a pressure injury and a loss of mobility. The service advised the Assessment Team there was no current pressure injuries and the care plan had not been updated.

The Approved Provider in their response acknowledged the Assessment Team’s findings and outlined their commitment to improving assessment and care planning processes. A plan for continuous improvement was submitted identifying the following action items:

* Introduced a Home Care Package Initial Assessment template which is has been sourced from a peak body and adapted for use. This tool links to further clinical assessment tools already in use by the service. The service has been using this tool for the intake of new consumers since the Quality Audit.
* Introduced a reassessment tool which has been sourced from a peak body and adapted for use.
* Delivered training on the new assessment and reassessment tools to all staff who undertake initial assessments and reassessments.
* Updated the organisation assessment and planning policy to include use of the assessment tool upon consumer entry to the service and to further emphasise requirements to document needs, goals and preferences.
* Updated organisational governance documentation to monitor and evaluate changes to assessment and planning processes.
* The Approved Provider also included examples of the tools and policies in use for new consumer admissions to the service.

Based on the Assessment Team’s report and the Approved Provider’s response, I find the service Non-compliant with this Requirement. I acknowledge the service’s commitment to improving assessment and care planning processes and has quickly put in place and a range of actions in order to achieve this. I also acknowledge the new assessment tools have been used to effect for the admission of new consumers to the service and there is a monitoring and evaluation process in place to measure their effectiveness. However, at the time of the Quality Audit these processes were not in place for all consumers and one consumer did not have these assessments in place to minimise risks related to their health.

Based on the information above I find the service non-compliant with this requirement.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be 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.*

Based on the information reviewed I consider this requirement to be 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.*

Based on the information reviewed I consider this requirement to be Compliant.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Compliant with all requirements in this Standard.

The service demonstrated consumers receive safe personal care and clinical care that is tailored to their needs. Consumers, and their representatives, interviewed confirmed they are satisfied with the quality of care they are receiving. Records sighted and discussions held demonstrate that care staff, care managers, registered nurses and management work in partnership to respond to individual consumer’s needs and preferences.

Processes are in place to record, escalate and manage any high impact and high prevalence risks. Incidents are discussed at weekly meetings to identify areas for action and potential improvements in care and service delivery. Care staff interviewed described how they support consumers safely on a daily basis and are aware of their responsibilities in reporting hazards and risk. Care managers explained the risk-based approach and provided a number of examples.

The service has policies and procedures to guide end of life care and address the wishes of consumers and maintain their dignity, comfort and preferences.

The service provider has systems in place to respond in a timely manner when deterioration in a consumer’s health is observed, and procedures to follow in relation to hospital admission and incident response. Care documentation reviewed confirmed the service responds to consumer change in condition.

The service demonstrated appropriate referrals to individuals, other organisations and providers of other health related services occur in a timely manner.

The service demonstrated ways they minimise infection related risks to consumers, including during the COVID-19 pandemic. The service demonstrated a sound understanding of antimicrobial stewardship in the care of consumers.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s findings and evidence and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Compliant with all requirements in this Standard.

The service demonstrated consumers get services and supports for daily living that are important for their health and wellbeing and enable them to do things they want. Sampled consumers/representatives told the Assessment Team they are satisfied with services and supports they receive and attend appointments, socialise with friends and social groups and remain connected to their community.

Care and services for daily living are planned with consumers and/or their representatives. Care plans reflect consumers goals, needs and preferences regarding emotional, spiritual and psychological well-being, services to help them connect with and participate in the community, have social and personal relationships and do things they like to do. Care plans sighted included strategies to promote relationships, communication, activities of daily living and to support the consumer to maintain a sense of self-worth and independence.

Care staff said they know their regular consumers very well, they encourage consumers to do as much for themselves as possible within their capacity. Care staff said their schedule allows them to spend quality time with each consumer and they are able to spend additional time when required. Care staff, care managers and management demonstrated sound knowledge of individual consumers’ circumstances, including the formal and informal supports in place.

The service demonstrates referrals to other services occur to ensure consumers receive services that are right for them and they are supported to do the things they like to do. Safe equipment is provided through the Home Care Package to maximise each consumer’s independence.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s report and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Compliant with all requirements in this Standard.

The Assessment Team reviewed and considered evidence relevant to this Standard, which included consumer feedback, staff feedback, review of the service’s documentation and observations.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s report and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Compliant with all requirements in this Standard.

The Assessment Team reviewed and considered evidence relevant to this Standard, which included consumer feedback, staff feedback, review of the service’s documentation and observations.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

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

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

Based on the information reviewed I consider this requirement to be Compliant.

# 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

The Assessment Team assessed all requirements within this Standard and have recommended all requirements met. I have considered the Assessment Team’s report and the Approved Provider’s response and I find Merrie Family Pty Ltd, in relation to Home Care Assistance Newcastle, to be Compliant with all requirements in this Standard.

The Assessment Team reviewed and considered evidence relevant to this Standard, which included consumer feedback, staff feedback, review of the service’s documentation and observations.

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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*
7. Based on the information reviewed I consider this requirement to be Compliant.

### 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*
4. *managing and preventing incidents, including the use of an incident management system.*

Based on the information reviewed I consider this requirement to be Compliant.

### 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.*

Based on the information reviewed I consider this requirement to be Compliant.

# 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.

* Ensure actions outlined on the Approved Provider’s response and plan for continuous improvement in relation to assessment and care planning processes are consistently utilised for new and existing consumers at the service and their effectiveness monitored and evaluated.