Australian Home Care Services - QLD

Performance Report

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| **Address:** | 7/3972 Pacific Highway LOGANHOLME QLD 4129 |
| **Phone:** | 0497 218 949 |
| **Commission ID:** | 700585 |
| **Provider name:** | AHC Care Services Pty Ltd |
| **Activity type:** | Assessment Contact - Desk |
| **Activity date:** | 1 September 2022 |
| **Performance report date:** | 21 September 2022 |

# Performance report prepared by

S Bickerton, 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 Packages (HCP):**

* Nextt Home Care Services, 22840, 7/3972 Pacific Highway, LOGANHOLME QLD 4129

**Commonwealth Home Support Packages (CHSP):**

* CHSP - Domestic Assistance, 4-9O2LHEL, 7/3972 Pacific Highway, LOGANHOLME QLD 4129
* CHSP - Flexible Respite, 4-9O2LHIN, 7/3972 Pacific Highway, LOGANHOLME QLD 4129
* CHSP - Personal Care, 4-9O2LHOD, 7/3972 Pacific Highway, LOGANHOLME QLD 4129
* CHSP - Social Support Individual, 4-9O2LHT2, 7/3972 Pacific Highway, LOGANHOLME QLD 4129

# Overall assessment of Service/s

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| --- | --- | --- |
| Standard 1 Consumer dignity and choice | HCP |  |
| CHSP |  |
| Requirement 1(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(b) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(e) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 1(3)(f) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
|  |  |  |
| Standard 8 Organisational governance | HCP |  |
| CHSP |  |
| Requirement 8(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 8(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 8(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 8(3)(e) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

# 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 considered in developing this performance report:

* the Assessment Team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by a review of documents and interviews with staff, consumers/representatives and others

# STANDARD 1 Consumer dignity and choice

# HCP CHSP

### 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 focus of this desk assessment was to assess the services compliance against quality standard requirement 1(3)(e), considering changes made in 2022 to the social, community, home care and disability services industry award (SCHADS).

At the time of assessment contact, the service demonstrated it keeps consumers and their representatives informed of changes in aged care services.

Most consumers and representatives interviewed by the assessment team described in different ways that they are satisfied with the information the service provides and explained they were told of new changes in minimum service delivery periods (two hours). The service evidenced contemporary consumer correspondence and demonstrated verbal contact had been made to individual consumers to assist them in making choices and decisions about to their services.

Service management demonstrated the regular review of consumer care plans and consumer budgets occurs in consultation with consumers with their representatives.

One of the six assessed requirements for HCP and CHSP have been assessed as Compliant. Five requirements have not been assessed in this instance.

**Assessment of Standard 1 Requirements**

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| --- | --- | --- |
| Requirement 1(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

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

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| --- | --- | --- |
| Requirement 1(3)(b) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*Care and services are culturally safe.*

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| --- | --- | --- |
| Requirement 1(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

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| --- | --- | --- |
| Requirement 1(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

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

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| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Compliant |
|  | CHSP | 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.*

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| --- | --- | --- |
| Requirement 1(3)(f) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

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

# STANDARD 8 Organisational governance

# HCP CHSP

### 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 focus of this desk assessment was to assess the services compliance against quality standard requirement 8(3)(b), considering changes made in 2022 to the SCHADS industry award.

At the time of assessment contact, the service demonstrated it keeps its board informed of changes in aged care services and funding.

Service management demonstrated that it provided the organisations board with information on the changes to SCHADS award promptly and described reporting processes that structure information and advice to the governing body so that it can meet its responsibilities and maintain oversight.

Service management explained that the executive leadership team ensures all changes regarding regulatory requirements are communicated to the Board in a timely manner.

One of the five assessed requirements for HCP and CHSP have been assessed as Compliant. Four requirements have not been assessed in this instance.

## Assessment of Standard 8 Requirements

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| Requirement 8(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

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

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| Requirement 8(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |

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

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| Requirement 8(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

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| Requirement 8(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

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| Requirement 8(3)(e) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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

The provider is, however, required to actively pursue continuous improvement to remain compliant with the Quality Standards.

# Other relevant matters

There is ongoing non-compliance with the following requirements:

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| Requirement 2(3)(a) | 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) | 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)(d) | 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) | 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. |
| Requirement 3(3)(a) | 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) | Effective management of high impact or high prevalence risks associated with the care of each consumer. |
| Requirement 3(3)(e) | 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 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. |
| Requirement 8(3)(c) | 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) | 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. |
| Requirement 8(3)(e) | 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. |