**Performance**

**Report**

**1800 951 822**

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| Name of service: | Better Connected Community Services |
| Service address: | 429 Princes Highway ROCKDALE NSW 2216 |
| Commission ID: | 200313 |
| Home Service Provider: | Better Connected Community Services Inc |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 30 January 2023 |
| Performance report date: | 2 February 2023 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Better Connected Community Services (**the service**) has been prepared by M Cooper, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies any areas in which improvements must be made to ensure the Quality Standards are complied with.

# Services included in this assessment

**Home Care:**

* Rockdale Community Service Inc - CACP, 17715, 429 Princes Highway, ROCKDALE NSW 2216

**CHSP:**

* Flexible Respite, 4-7XWMF8M, 429 Princes Highway, ROCKDALE NSW 2216
* Social Support - Individual, 4-7XWOPG6, 429 Princes Highway, ROCKDALE NSW 2216
* Home Maintenance, 4-7XWOP96, 429 Princes Highway, ROCKDALE NSW 2216
* Social Support - Group, 4-7XWOPDD, 429 Princes Highway, ROCKDALE NSW 2216

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Quality Audit; the Quality Audit report was informed by review of documents and interviews with staff, consumers/representatives and others
* the provider’s response to the assessment team’s report received 2 February 2023. The provider did not disagree with the assessment team’s report
* Aged Care Act 1997 [Cth]
* Aged Care Quality and Safety Commission Act 2018 [Cth]
* Aged Care Quality and Safety Commission Rules 2018 [Cth]
* User Rights Principles 2014 registered 10 October 2022
* Quality of Care Principles 2014 registered 10 October 2022
* Guidance and Resources for Providers to support the Aged Care Quality Standards published by the Aged Care Quality and Safety Commission in September 2022
* Commonwealth Home Support Programme manual 2022 -2023
* Home Care Package Program operational manual a guide for home care providers Version 1.3 – January 2023

# Assessment summary for Home Care Packages (HCP)

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| Standard 6 Feedback and complaints | Not applicable as not all requirements have been assessed |
| **Standard 8** Organisational governance | **Not applicable as not all requirements have been assessed** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 6 Feedback and complaints | Not applicable as not all requirements have been assessed |
| **Standard 8** Organisational governance | **Not applicable as not all requirements have been assessed** |

A detailed assessment is provided later in this report for each assessed Standard.

# 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 required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 6

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| --- | --- | --- | --- |
| Feedback and complaints | | HCP | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Not applicable | Not applicable |
| Requirement 6(3)(b) | Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. | Not applicable | Not applicable |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Not applicable | Not applicable |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider has implemented ‘lookout’ as its new data system. Lookout has a proactive alert system to highlight issues. The database also has an ‘app’ attached to it that allows consumer, representatives and care workers to connect to it. The Provider indicated that whilst it is transitioning to the ‘lookout’ system it is still operating a complaint register but when fully implemented ‘lookout’ will be the only database used. Consumers interviewed stated that positive changes had been made because of their feedback. Staff spoken to also indicated that they were aware of the changes to the procedure and the systems being used

Section 54-1(d) of the Aged Care Act 1997 creates a legal obligation for the Approved Provider to comply with the Aged Care Quality Standards. Section 56-4(1)(a) of the Aged Care Act 1997 creates a legal obligation for the Approved Provider to establish a complaints resolutions mechanism.

Having regard to the Assessment Team’s report. Comments made by the Approved Provider at the time of the audit. The Provider’s obligations under the Aged Care Act 1997 and the Age Care Quality Standards, I have reasonable grounds to form the view that the Provider has complied with requirement 6(3)(d).

The Quality Standard for the Commonwealth Home Support Programme services is assessed as compliant as one of the previously non-compliant requirements is now assessed as compliant.

The Quality Standard for the Home Care Packages service is assessed as compliant as one of the previously non-compliant requirements is now assessed as compliant.

**Standard 8**

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| --- | --- | --- | --- |
| Organisational governance | | HCP | CHSP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Not applicable | Not applicable |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Not applicable | Not applicable |
| 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. | Compliant | Compliant |
| 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. | Not applicable | Not applicable |
| 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. | Not applicable | Not applicable |

Findings

The Assessment Team reports that the Approved Provider has complied with requirement 8(3)(c)(v) regulatory compliance in that a Food Safety Audit was conducted in September 2022 with no adverse findings. Management interviews and Board minutes strongly demonstrated that the Board is across the Aged Care Reforms of 1 December 2022, with the senior managers nominated as the primary contacts for the Serious Incident Reporting System (SIRS). Whilst senior managers had been trained in both SIRS and the Code of Conduct, a gap was identified during interviews in relation to the Code of Conduct, which will be addressed across the organisation at the staff meeting of branch managers, case managers and care workers to be held in February 2023.

Follow up of the case noted in the Quality Audit 23 August 2022 of the HCP 4 consumer in relation to a possible misuse of funds. The CEO and branch manager conducted a visit, then followed up with a comprehensive 3-page list of what can and cannot be purchased under the consumers HCP funding. This was then explained to the consumer. A live demonstration of the new electronic central management database system across the broader HCP cohort confirmed that HCP funding was spent on permitted items, as evidenced for all six HCP 4 consumers and four sampled HCP 3 consumers with more than 80 pages of itemised accounts sighted and reviewed. A daily HCP funds balance is available, but accuracy needs to be checked with Medicare reconciliation, so a live HCP budget summary is scheduled for February when claim on claim in real time is available. The mobile app has gone live to support workers in September 2022, with rollout to consumers in 2023 to download relevant information including updated notes, rostered staff and HCP funds available in real time. Reports need some clarity, but the system has dashboard reporting functionality which will be utilised for Board reporting in the future.

The Quality Standard for the Commonwealth Home Support Programme services is assessed as compliant as one of the previously non-compliant requirements is now assessed as compliant.

The Quality Standard for the Home Care Packages service is assessed as compliant as one of the previously non-compliant requirements is now assessed as compliant.

1. The preparation of the performance report is in accordance with section [quality audit, s68A – assessment contact of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)