**Performance**

**Report**

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Boroondara Aged Services |
| Service address: | 10 Faversham Road CANTERBURY VIC 3126 |
| Commission ID: | 300238 |
| Home Service Provider: | Boroondara Aged Services Society |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 10 October 2022 |
| Performance report date: | 9 November 2022 |

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 Boroondara Aged Services (**the service**) has been prepared by G. McNamara, 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:**

* Boroondara Aged Care Services Society, 28000, 6 Rochester Road, CANTERBURY VIC 3126

# Material relied on

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

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

# Assessment summary for Home Care Packages (HCP)

|  |  |
| --- | --- |
| Standard 1 Consumer dignity and choice | Not applicable as not all requirements have been assessed |
| **Standard 2** Ongoing assessment and planning with consumers | **Not applicable as not all requirements have been assessed** |
| **Standard 3** Personal care and clinical care | **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.

# Other relevant matters:

# On 21 June 2022, arising out of a Quality Audit the approved provider, in respect of this service, was found to be non-compliant with Standard 1 requirement 1(3)(e), Standard 2 requirement 2(3)(b), Standard 3 requirement 3(3)(f) and Standard 8 requirement 8(3)(c), in respect of its Home Care Package service.

This assessment was made against those requirements of those Standards, with the other requirements and Standards deemed not applicable for this activity.

# The approved provider is now compliant with Standard 1 requirement 1(3)(e), Standard 2 requirement 2(3)(b), Standard 3 requirement 3(3)(f) and Standard 8 requirement 8(3)(c).

# Standard 1

|  |  |  |
| --- | --- | --- |
| Consumer dignity and choice | | HCP |
| Requirement 1(3)(e) | 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. | Compliant |

Findings

The service demonstrated that it now provides each consumer with accurate and timely information on an ongoing basis as statements were provided inconsistently.

Consumer statements reviewed clearly identified disbursement of funds for service and the balance of available funds. Information is provided to consumers in service information packs, monthly statements, phone calls and emails. Consumers and representatives interviewed stated they are provided with clear and suitable information to assist their choices and decisions related to care and services. Representatives interviewed stated they are satisfied with the clarity and timeliness of statement provision. A consumer stated they receive their statements by post now and identified that improvements had been made.

Based on the information obtained by the Assessment Team and the actions taken by the service, I find the requirement assessed for this Standard is compliant.

# Standard 2

|  |  |  |
| --- | --- | --- |
| Ongoing assessment and planning with consumers | | HCP |
| 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. | Compliant |

Findings

The service demonstrated assessment and planning processes now consider the current, needs, goals and preferences of consumers’ in relation to advanced care planning and end of life planning, and is reflective of consumers’ wishes.

Assessment documentation and home care package information packs have reference to advance care planning. Consumer care plans record advanced care planning information. Care planning processes include review of needs, goals and preferences every 6 months or when a consumer’s condition changes, including advanced care planning.

Management said and the clinical care manager confirmed that initial assessment conducted with new consumers includes enquiry about advanced care planning, provision of an advanced care planning brochure in the information pack and notation on assessment forms and progress notes of the presence or absence of an advanced care plan. The care manager undertaking the assessment then documents the steps taken to provide consumer and their representative with support. Reviews of advanced care planning are undertaken during regular reviews and when a consumer’s condition changes.

Documentation reviewed for one consumer evidenced assessment and care planning discussions were included in the initial assessment, as well as follow up discussions to progress this in consultation with their representative. Documentation for other consumers indicated they had been provided with information about the process, and for another an advanced care plan was on their file.

Based on the information obtained by the Assessment Team and the actions taken by the service, I find the requirement assessed for this Standard is compliant.

# Standard 3

|  |  |  |
| --- | --- | --- |
| Personal care and clinical care | | HCP |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |

Findings

The service demonstrated improved processes to ensure consumers receive timely referrals to other providers of care and services including updated audit tools.

Consumers and representatives interviewed were satisfied that referrals occur to health professionals and other services when needed in a timely manner.

The Clinical care manager discussed referrals and that consent from consumers to share information is sought prior to the referral. Referrals are completed on the contracted providers referral form and sent via email.

Files reviewed identified referrals to allied health professionals that included physiotherapy and occupational therapy.

Management identified that the newly appointed clinical care manager’s responsibilities includes assessing the complex health needs of consumers, including completion and monitoring of referrals.

Based on the information obtained by the Assessment Team and the actions taken by the service, I find the requirement assessed for this Standard is compliant.

# Standard 8

|  |  |  |
| --- | --- | --- |
| Organisational governance | | HCP |
| 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 |

Findings

The service demonstrated that governance systems related to information systems are now used and monitored effectively. Unspent funds are now monitored, and itemised statements are now provided regularly. Documentation review and interview with management, consumers and representatives show care plans now accurately reflect outcomes of assessment and planning inform current needs goals and preferences, including advanced care planning. Consumers and representatives were satisfied they are now receiving their statements regularly, and stated they were satisfied their statements and invoices are clear and easy to understand.

Management said conversations occur with consumers with high levels of unspent funds. Documentation review included a consumer file audit for August 2022. Management described the current monthly statements procedure as well as the electronic client management system now in use. The monthly statement procedure includes direction for managers to discuss unspent funds and offer review of services. An administration assistant has the responsibility to ensure that monthly statements are issued to consumers or their representative via their preferred method.

Based on the information obtained by the Assessment Team and the actions taken by the service, I find the requirement assessed for this Standard is compliant.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)