**Performance**

**Report**

**1800 951 822**

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| Name: | Co-ordinating Italian Committee Inc. |
| Commission ID: | 600108 |
| Address: | 84 Payneham Road, STEPNEY, South Australia, 5069 |
| Activity type: | Assessment contact (performance assessment) – non-site |
| Activity date: | on 2 September 2024 |
| Performance report date: | 17 September 2024 |

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.

# Services included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7802 Co-ordinating Italian Committee Incorporated  
Service: 24537 Co-ordinating Italian Committee Incorporated - Care Relationships and Carer Support  
Service: 24536 Co-ordinating Italian Committee Incorporated - Community and Home Support

**This performance report**

This performance report has been prepared by M Glenn, 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 services it operates, 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.

# Material relied on

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

* the Assessment Team’s report for the assessment contact (performance assessment) – non-site, which was informed by review of documents and interviews with consumers, staff, management and others; and
* a performance report dated 10 January 2024 for an assessment contact (performance assessment) – site undertaken 23 November 2023.

The provider did not submit a formal response to the Assessment Team’s report.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 2 Ongoing assessment and planning with consumers | Not Fully 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 2

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

Findings

**Requirement (3)(d)** was found non-compliant following an assessment contact undertaken in November 2023 as care plans were not consistently available where care and services were provided. In response to the non-compliance, the provider has implemented a range of actions, including updating consumers’ care plans; the availability of a simplified version of the care plan for volunteers; and providing copies of updated care plans to consumers and representatives.

At the assessment contact undertaken in September 2024, staff said they have access to individualised consumer care plans which contain sufficient information, including, but not limited to, goals, preferences, risks and dietary requirements. There are processes to communicate changes in consumers’ care and service needs to staff, with care plans updated in response. Care files sampled show care plans are mailed or emailed following consultation with the consumer for changes to be made or where care and service delivery has been updated due to consumers’ assessed needs. Two consumers said they have been provided with their individualised care plan detailing the care and services they receive. Both consumers said staff explained information about their care and services prior to delivery of the service, and they are provided with timely communication where services need to change.

Based on the Assessment Team’s report, I find requirement (3)(d) in Standard 2 Ongoing assessment and planning with consumers 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)