**Performance**

**Report**

**1800 951 822**

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| Name of service: | Coolangatta Senior Citizens Centre |
| Service address: | 2 Gerrard Street COOLANGATTA QLD 4225 |
| Commission ID: | 700550 |
| Home Service Provider: | Coolangatta Senior Citizens Centre Incorporated |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 14 September 2023 |
| Performance report date: | 2 November 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 Coolangatta Senior Citizens Centre (**the service**) 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 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.

# Services included in this assessment

**CHSP:**

* Community and Home Support, 25024, 2 Gerrard Street, COOLANGATTA QLD 4225

# 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 management and Committee president; and
* the Performance Report dated 1 March 2023 for an Assessment Contact – Desk undertaken on the 8 February 2023.

The provider did not submit a response to the assessment team’s report.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| 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 8

|  |  |  |  |
| --- | --- | --- | --- |
| Organisational governance | | HCP/STRC | CHSP |
| 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. | Not applicable | Compliant |

Findings

Requirement (3)(c) was found non-compliant following an Assessment Contact – Desk undertaken in February 2023 as effective organisation wide governance systems relating to regulatory compliance were not demonstrated. Issues identified specifically related to mandatory reporting of workforce COVID-19 vaccination status.

At the Assessment Contact undertaken in September 2023, effective organisation wide governance systems were demonstrated. Consumer information is stored both electronically and in hard copy, accessible to relevant staff. Reports are generated monthly for submission of mandatory reporting to the Department of Health (the Department) and for committee meetings. Continuous improvement is guided by feedback received from consumers, and the organisation looking at efficiencies. Financial governance systems and processes are in place to manage finances and resources required to deliver services, and the office manager reports regularly to the Board on income and expenditure. Governance systems and processes ensure workforce arrangements are consistent with regulatory requirements, and job descriptions guide staff in their roles and responsibilities. There are processes to ensure the organisation receives updates or changes to legislation, funding and relevant guidelines, and reporting requirements to the Department associated with CHSP funding are undertaken monthly. The service have been advised by the Department that it is not a requirement to continue reporting the COVID-19 vaccination status of workers if there are no changes, with management confirming there had been no change of workers’ status since 2022. There are systems in place to record, monitor and manage feedback and complaints to improve services.

Based on the assessment Team’s report, I find requirement (3)(c) in Standard 8 Organisational governance 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)