**Performance**

**Report**

**1800 951 822**

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| --- | --- |
| Name of service: | Fairview Community Care |
| Service address: | 30 Sargeant Street WARRAGUL VIC 3820 |
| Commission ID: | 300064 |
| Home Service Provider: | Fairview Village Limited |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 5 October 2022 |
| Performance report date: | 10 October 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 Fairview Community Care (**the service**) has been prepared by G.Roberts, 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:**

* Fairview Community Care, 18790, 30 Sargeant Street, WARRAGUL VIC 3820

# 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)

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| 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** |

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 | | HCP |
| **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.** | **Compliant** |

Findings

Service staff demonstrated an understanding of compliant consumer assessment and care planning. The service-evidenced documents to guide staff through these processes. Service staff understood consumers' individual needs, including consumer risks.

Consumer documentation evidence the consumer’s needs are assessed, and care plans document these risks. Accompanying care instructions to staff evidenced that service staff are supported by sharing regular consumer information and guidance via iPads provided by the service.

Consumer assessment and care planning was evidenced in all consumer files reviewed by the assessment team. The service provided contemporaneous care documentation that included individualised risk mitigation strategies.

Service management is evidenced through documentation that staff receive appropriate resources to refine consumer assessment and planning.

# Standard 3

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| --- | --- | --- |
| Personal care and clinical care | | HCP |
| **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.** | **Compliant** |

Findings

The service demonstrated that 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.

Consumers and their representatives interviewed by the assessment team discussed how they are involved in the care discussions.

The service demonstrated it is liaising with general practitioners, district nursing, and occupational therapists who provide reports and recommendations on consumers' care and changes in health needs.

The service has updated its monthly statements to meet the Department’s directions on monthly statements. The service has implemented a new electronic financial accounting process for clarity about statements, especially for services provided by allied health and nursing.

Consumers and their representatives interviewed were satisfied with all the services they received. The monthly statement is easy to read and gives them clear information about what is left in their packages.

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)