**Performance**

**Report**

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| Name of service: | Gold Coast Community Transport Inc. |
| Service address: | Ashton House; Owen Park, 5 Mick Veivers Way SOUTHPORT QLD 4215 |
| Commission ID: | 700411 |
| Home Service Provider: | Gold Coast Community Transport Inc |
| Activity type: | Quality Audit |
| Activity date: | 1 February 2023 to 3 February 2023 |
| Performance report date: | 28 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 Gold Coast Community Transport Inc. (**the service**) has been prepared by M Franco, 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

**CHSP:**

* Community and Home Support, 25209, Ashton House; Owen Park, 5 Mick Veivers Way, SOUTHPORT QLD 4215

# 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 a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 1 Consumer dignity and choice | Compliant |
| **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 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

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 1

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| Consumer dignity and choice | | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant |
| Requirement 1(3)(c) | Each consumer is supported to exercise choice and independence, including to:   1. make decisions about their own care and the way care and services are delivered; and 2. make decisions about when family, friends, carers or others should be involved in their care; and 3. communicate their decisions; and 4. make connections with others and maintain relationships of choice, including intimate relationships. | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant |
| 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 |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant |

Findings

At the time of the performance report decision, the service is:

• Treating each consumer with dignity and respect.

• Valuing each consumer’s individual identity, culture and diversity.

• Enabling consumers to exercise choice and independence, including making decisions about their care and services.

• Providing current, accurate and timely information to consumers clearly and enables them to exercise choice.

• Respecting each consumer’s privacy and keeping their personal information confidential.

Consumers/representatives reported they are treated with respect and dignity at all times and stated staff are caring and polite. Sampled staff spoke respectfully about consumers and showed an appreciation for each consumer’s individual identity.

Consumers/representatives confirmed that staff understand their needs and preferences and feel safe and respected when services are being delivered. Policies and procedures and conversations with the workforce confirmed that staff have the resources necessary to understand and appreciate the unique cultural backgrounds of consumers. Management and staff provided examples of how services are altered to meet consumers' specific preferences and cultural needs.

Consumers/representatives confirmed the workforce understands consumers’ individual needs and preferences and that they are supported to exercise choice about how their services are delivered, including making decisions about when to involve family or others involved in their care. Management stated consumers have control over when and how often they would like to be picked up during the pickup and drop offs scheduled, subject to availability.

The service demonstrated consumers are provided information in a way that is current, accurate, timely, clear, and easy to understand. Management confirmed the service informs consumers about the approximate time they will be picked up, and if there are any delays associated with their transportation via a phone call from the driver.

# Standard 2

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| Ongoing assessment and planning with consumers | | CHSP |
| 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. | Not applicable |
| 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. | Not applicable |
| Requirement 2(3)(c) | The organisation demonstrates that assessment and planning:   1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and 2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer. | Not applicable |
| 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. | Not applicable |
| Requirement 2(3)(e) | Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer. | Not applicable |

Findings

Standard 2 is not applicable to the service as the service does not require ongoing assessment and planning.

# Standard 3

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| Personal care and clinical care | | CHSP |
| Requirement 3(3)(a) | Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:   1. is best practice; and 2. is tailored to their needs; and 3. optimises their health and well-being. | Not applicable |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Not applicable |
| Requirement 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | Not applicable |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Not applicable |
| 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. | Not applicable |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Not applicable |
| Requirement 3(3)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | Not applicable |

Findings

Standard 3 is not applicable to the service as the service does not provide personal and clinical care.

# Standard 4

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| Services and supports for daily living | | CHSP |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| Requirement 4(3)(c) | Services and supports for daily living assist each consumer to:   1. participate in their community within and outside the organisation’s service environment; and 2. have social and personal relationships; and 3. do the things of interest to them. | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Not applicable |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Not applicable |

Findings

At the time of the performance report decision, the service is:

• Providing a wide range of services for consumers to support them to live the life they choose and remain connected to their community.

• Promoting consumers' emotional and psychological well-being through compassion and connection between consumers and the workforce.

• Effectively communicating information about the consumer’s needs and preferences within the organisation and with others where appropriate.

Consumers/representatives reported the services and support consumers receive help them to maintain their quality of life and independence.

Consumers/representatives stated the services consumers receive support their emotional and psychological well-being. Staff demonstrated an understanding of what is important to the consumer and provided examples of how the well-being of consumers is supported.

Consumers/representatives confirmed the organisation is flexible in the delivery of services, enabling consumers to participate in the community and do things of interest to them. The service operates a transportation service each Wednesday for attendees at BAVIA’s weekly meetings. Consumers who use the transportation service are blind and visually impaired and often have no other way of attending BAVIA each week. Consumers/representatives confirmed that the transportation service enables the consumers to participate in the community when they otherwise would not.

Whilst the Assessment Team could not locate a specific example of consumers being referred to other providers of care and services, no evidence suggested the service would not recognise the need for a referral should it occur. Staff and management discussed the importance of monitoring the condition of each consumer for any changes to ensure their needs are being met.

# Standard 5

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| Organisation’s service environment | | CHSP |
| Requirement 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Not applicable |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Not applicable |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable |

Findings

Standard 5 is not applicable to the service as the service provides transport services only.

# Standard 6

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| Feedback and complaints | | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Compliant |
| Requirement 6(3)(b) | Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. | Compliant |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

At the time of the performance report decision, the service is:

• Encouraging consumers/representatives to provide feedback.

• Understanding open disclosure practices in responding to complaints.

• Providing consumers with access to advocates, language services and other methods for raising and resolving complaints.

Consumers/representatives stated they are aware of how to provide feedback or make a complaint and felt supported and comfortable to do so. They advised they would generally provide feedback by speaking to the driver or the service directly.

Consumers/representatives advised they prefer to directly communicate with the service or the driver if they needed to give feedback. The service provides information to consumers and representatives on internal and external complaints mechanisms and advocacy services including the Aged Care Quality and Safety Commission (the Commission) and Aged and Disability Advocates (ADA). Management reported their current consumer cohort speak English, however, were aware of how to access multiple translation services if required which are also utilised used by GCRS, such as:

• The Australian Multilingual Gold Coast Translation Services

• National Accreditation Authority for Translators and Interpreters (NAATI) Translation Services

• Aussie Translations (aussietranslations.com.au)

The Assessment Team reviewed documentation to evidence the translation service’s details are recorded on file and accessible for staff to utilise.

The service did not have any complaints recorded in the past year, consumers/representatives interviewed said they had not made any complaints and are confident that they will continue to be treated with respect and dignity regardless of any issues they may raise.

The organisation demonstrated they are aware of the appropriate action to be taken in response to complaints and an open disclosure process is used when things go wrong.

Upon interviewing consumers/representatives, they said they had not made or had a need to make any complaints and were satisfied with the services provided. A review of the complaints register did not show any complaints and upon discussion with the service, management said they only record complaints if any complaints are made as per the processes outlined in their feedback and complaints policy. Management and staff interviewed spoke of improvements made to the service to ensure that quality care and services were continuously improved where necessary.

# Standard 7

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| Human resources | | CHSP |
| Requirement 7(3)(a) | The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services. | Compliant |
| Requirement 7(3)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | Compliant |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant |

Findings

At the time of the performance report decision, the service is:

• Planning a skilled workforce that enables the delivery and management of safe and quality services.

• Providing the workforce with the resources and training required to deliver quality care and services.

• Monitoring and reviewing the performance of the workforce.

Consumers/representatives reported they are satisfied that the workforce is sufficient to ensure they receive safe and quality services. Management reported there is a sufficient number of staff to cover the complimentary once a week bus service provided, and there have been no unfilled shifts in the last month. Management advised that if the bus driver goes on leave, the driver’s role will be filled by another qualified bus driver who volunteers at BAVIA. The BAVIA volunteer is also familiar with all consumers as they see the consumers every Wednesday and has access to their needs, preferences, risks, and carer/representative contact details.

Consumers/representatives expressed confidence that management and staff are competent and capable to perform their roles effectively. They felt that staff knew how to deliver services effectively and in line with their individual needs and preferences.

Staff and management said performance discussions happen frequently in an informal basis through regular catch-up and weekly conversations. They advised that staff performance is also monitored and formally assessed through an annual performance appraisal process. Staff said they are able to bring up any concerns and areas for development at any time, the Assessment Team evidenced that developmental feedback was recorded in staff performance reviews. Management stated they discuss any individual performance concerns with the staff when they are identified and that performance of staff is gauged in part by feedback from consumers, management and BAVIA.

# Standard 8

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| Organisational governance | | CHSP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant |
| 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. | Compliant |
| 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 |
| 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. | Compliant |
| 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 |

Findings

At the time of the performance report decision, the service is:

• Supported to deliver safe and quality care and services by effective governance systems.

• Utilising effective organisation-wide governance systems.

• Utilising effective risk management systems and practices to support consumers to live the best life they can.

Consumers/representatives expressed satisfaction with the quality of the service and advised they would generally provide feedback by speaking directly to the driver or staff from BAVIA. Management advised consumer feedback in relation to the bus service is provided directly to the driver during pick up and drop off or when consumers call to let the service know that they will be needing the service for each Wednesday.

The service demonstrated the governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. Staff demonstrated behaviours and values consistent with a culture of safe, inclusive, respectful service delivery and were able to clearly describe the care and needs of the consumers.

The service has effective organisation-wide governance systems relating to information management, continuous improvement, workforce governance, regulatory compliance, feedback, and complaints. For example:

• Staff have access to clear and concise information to help them understand their roles and key responsibilities. For example: Management and staff said the driver is given a memo with each consumer’s details which includes specific details such as whether a consumer has a guide dog or if they will need to use the bus with the wheelchair hoist that week. They are also able to find out up to date information from each consumer upon confirming their attendance via a phone call each week.

The organisation has an effective risk management framework to manage and respond to high-impact or high-prevalence risks. Although no consumer related incidences had occurred in the last 12 months, management and staff said incidences are recorded and reported to the management committee if and when they occur. Staff were able to describe steps to escalate changes in a consumer’s condition and spoke of their responsibility to notice everything about a consumer’s condition from their speech to the way they walk. Management demonstrated how incidents were assessed, investigated, and resolved where possible.

1. The preparation of the performance report is in accordance with section 57 of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)