**Performance**

**Report**

**1800 951 822**

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| Name of service: | Harmony Club |
| Service address: | 68 Orange Grove Road COOPERS PLAINS QLD 4108 |
| Commission ID: | 700630 |
| Home Service Provider: | The Uniting Church in Australia Property Trust (Q.) |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 22 March 2023 |
| Performance report date: | 21 April 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 Harmony Club (**the service**) has been prepared by J ZHOU, 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:**

* CHSP - Centre Based Respite, 4-7ZSK29E, 68 Orange Grove Road, COOPERS PLAINS QLD 4108
* CHSP - Social Support - Group, 4-7ZSOX7N, 68 Orange Grove Road, COOPERS PLAINS QLD 4108
* CHSP - Social Support - Individual, 4-7ZSOXAG, 68 Orange Grove Road, COOPERS PLAINS QLD 4108

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

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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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** |
| **Standard 6** Feedback and complaints | **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 | | 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. | Compliant |
| 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. | Compliant |

Findings

Based on the evidence sighted by the Assessment Team and the case studies outlined in their report, I am satisfied that the service is meeting its obligations under the above requirements.

I further note that the service has undertaken the following steps:

* Updated its consumer diet information template to reflect assessment of individual needs, preferences, foods to avoid and special requirements.
* Completed emergency care plans and dietary information sheets for all consumers.
* Ensured that all consumers care planning documentation is current and has been reviewed within the last 12 months.

This rectification action addresses the problems identified during the Quality Review conducted in October 2022. As such, I am able to find the service compliant against these two Requirements.

# Standard 3

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| Personal care and clinical care | | CHSP |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant |

Findings

Based on the evidence sighted by the Assessment Team and the case studies outlined in their report, I am satisfied that the service is meeting its obligations under the above requirement.

Overall, I note that:

* Improvements have been made to the dietary information sheets to better reflect the assessment of individual consumer needs and highlights any risks to consumers. Consumer photos have been added to dietary sheets to minimise the risk of consumers receiving the wrong meal.
* Two risk assessments for consumer bus outings that included consideration of falls risks and hazards, weather and hydration risks and consumer access to toilets.
* Staff interviewed were able to describe risks for individual consumers. Information is reflected in care planning documentation, including the identification of all risks, strategies and guidance for staff in providing care to consumers.

# Standard 6

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| Feedback and complaints | | CHSP |
| 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 |

Findings

Based on the evidence sighted by the Assessment Team and the case studies outlined in their report, I am satisfied that the service is meeting its obligations under the above requirement.

For instance, I note that the Assessment Team sighted a consumer’s service agreement that contained information and contact details for the Aged Care Quality and Safety Commission (the Commission), Aged and Disability Advocates Australia (ADA) and Translating and Interpreting Service (TIS).

Other sampled consumers if they had a complaint, they felt comfortable raising it with the staff and management at the service. Management said staff can assist culturally and linguistically diverse (CALD) consumers through the use of language communication cards.

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