**Performance**

**Report**

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Home Care Assistance Gold Coast |
| Service address: | Ground Ground Office Retail 1, 82 Marine Parade SOUTHPORT QLD 4215 |
| Commission ID: | 700947 |
| Home Service Provider: | Prestige Linx Pty Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 1 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 Home Care Assistance Gold Coast (**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

**Home Care:**

* Home Care, 9176, Ground Ground Office Retail 1, 82 Marine Parade, SOUTHPORT QLD 4215

# 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 desk assessment, review of documents and interviews with staff, consumers/representatives and others.

# Assessment summary for Home Care Packages (HCP)

|  |  |
| --- | --- |
| Standard 1 Consumer dignity and choice | 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.

**Other relevant matters:**

The purpose of the assessment contact was to determine compliance with Standard 1(3)(e) and Standard 6(3)(a), 6(3)(b) and 6(3)(d).

The service remains non-compliant with the pre-existing non-compliance found in 2.a, 2.b, 2.c, 2.d, 2.e, 3.b, 3.d, 3.e, 4.d, 4.g, 7.c, 7.d, 7.e, 8.a, 8.b, 8.c, 8.d, 8.e per the Commission’s last Quality Review.

# Standard 1

|  |  |  |
| --- | --- | --- |
| Consumer dignity and choice | | HCP |
| 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 |

Findings

Sampled consumers stated the service provides information they can understand which enables them to exercise choice about their care services. The Assessment Team reviewed the consumers monthly statements and identified it contained current information such as legislative changes, fees and pricing changes and changes to inclusions for consumers’ HCP program.

The service was able to demonstrate its communication of why changes to the two hour minimum booking for their services was necessary and it explained how the service worked to accommodate their needs and preferences so they were not disadvantaged, such as retaining one-hour visits when requested for one consumer, and a reassessment of needs and increase of services for another consumer.

On balance, I find the provider compliant with this requirement.

# Standard 6

|  |  |  |
| --- | --- | --- |
| Feedback and complaints | | HCP |
| 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)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

The service satisfied the Assessment Team of its robust process of encouraging and supporting consumers to provide feedback and complaints that are consistent with policies and procedures. Use of feedback forms in the consumer’s in home folder was noted as an example. Where consumers were dissatisfied with an aspect of care, there was a mechanism available to provide redress.

Advocacy services are in use by consumers at the service to champion their concerns. Administrative staff of the service offer such services to their consumers when appropriate. Information about external supports are provided in the information pack given to consumers.

A new software system is in use at the service to capture and monitor feedback. This data then informs reporting and trending of complaint issues. Management uses this intelligence to inform strategy meetings on continuous improvement in how it cares for its consumers.

Overall, I am satisfied from the Assessment Team’s evidence that the service is compliant with these requirements.

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)