**Performance**

**Report**

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| Name of service: | Home Modifications Lake Macquarie/Newcastle Inc |
| Service address: | 6 Pennant St CARDIFF NSW 2285 |
| Commission ID: | 200471 |
| Home Service Provider: | Home Modifications Lake Macquarie/Newcastle Ltd |
| Activity type: | Quality Audit |
| Activity date: | 11 October 2022 to 13 October 2022 |
| Performance report date: | 21 November 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 Home Modifications Lake Macquarie/Newcastle Inc (**the service**) has been prepared by G McNamara, 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:**

* Home Modifications, 4-7Y1M87D, 6 Pennant St, CARDIFF NSW 2285
* Home Maintenance, 4-7Y1M83Q, 6 Pennant St, CARDIFF NSW 2285
* Allied Health and Therapy Services, 4-7Y1M80C, 6 Pennant St, CARDIFF NSW 2285

# 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 and others.

# 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 | **Compliant** |
| **Standard 3** Personal care and clinical care | **Not Applicable** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Not Applicable** |
| **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

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as six of the six specific requirements have been assessed as Compliant.

Consumers described staff and subcontractors as kind, caring and respectful when communicating with them and stated staff understand their background, preferences and what is important to them, which makes them feel respected, valued and culturally safe. They felt supported to exercise choice and independence and to remain living at home and to do things independently. Consumers and representatives confirmed they received information about the services, verbally and in writing, through the assessment process, and said staff respect their privacy and were confident their personal information is kept confidential, and said they have never had to raise concerns of this nature.

All staff demonstrated they were aware of consumers' circumstances, family arrangements, support networks, and aspects of their life that allowed them to receive services that are responsive to their individual preferences and cultural background. Staff were able to describe what culturally safe care was and how they could tailor services for consumers. Staff advised consumers are supported to take some risks to enable them to live the best life they can. Staff described how they respect the personal privacy of consumers when delivering care, including when family are present in the consumer’s home.

Management described systems and processes in place to manage privacy and confidentiality, such as policies and procedures and staff training. The Assessment Team observed the electronic records system is password protected.

A review of assessment and planning documentation also demonstrated the service asks about cultural needs and if family and/or interpreters need to be involved, and documents this. Documentation sighted on consumer files, for example in OT reports, also included where the consumers had declined services or referrals based on OT recommendations.

# 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)(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. | Compliant |
| 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. | Compliant |
| 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. | 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

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as five of the five specific requirements have been assessed as Compliant.

All consumers and representatives provided positive feedback on assessment and service planning processes. Consumers are helped with advance care planning when needed. Consumers and representatives interviewed also confirmed that processes are in place to ensure assessment and service planning is undertaken in consultation with consumers, with representative involvement where requested. Consumers and representatives interviewed confirmed they participated in the initial assessments process with Occupational Therapists (OTs), quoting process with the estimator for home modifications and received information on services to be delivered, no matter the service type they received.

Home modifications staff are provided with information on any consumers’ needs they need to be aware of when they go out to measure up and quote the job. Lawn mowing subcontractors are also provided with relevant information on consumer’s needs before they contact consumers for the first time to discuss their service schedule for ongoing services. Staff said they also have regular staff meetings which support them in providing safe services to consumers.

Documentation sighted on sampled files included needs, goals and preferences of consumers. Consumer and representative consultation and involvement was evidenced on consumer files. Each time a consumer may come back for additional services their needs will be reassessed. The OT undertakes reviews of consumer’s needs based on identified risks, where there is longer-term involvement with consumers and representatives.

Staff were able to describe the process they follow in the event the consumer does not respond to a scheduled visit, which was consistent with the service’s policy on this. Information in relation to other relevant risks was evidenced on consumer files. Where additional services may be required staff will check the My Aged Care codes for the consumers and can refer onto services directly, or will refer consumers and representatives back to My Aged Care for further assessment.

# 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 |

The services do not provide personal or clinical care therefore this Standard is Not Applicable.

# 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. | Compliant |

Findings

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as six of the six applicable requirements have been assessed as Compliant.

Consumers and representatives said they are encouraged to stay active to maintain their physical independence. They said they enjoy services and feel comfortable, happy and safe with the staff and subcontractors providing their services. They said if they have any concerns they can discuss with the OTs or administration staff and they can organise other services for them through referrals. They provided feedback on opportunities they have to build and maintain relationships and pursue activities of interest in the community. They said they have plenty of opportunities to do things that are meaningful to them and they are usually able to do this independently or with family assistance. They were satisfied the service had good communication systems in place to ensure staff and subcontractors knew their needs and when changes occurred. Consumers and representatives also said referrals are made from time to time, with their permission, especially if they have asked about the need for additional help. They also confirmed the OTs will refer them onto any allied health services if needed. All consumer and representative feedback received was positive about the home modifications jobs and materials used.

Amongst other information, OT staff provided an example where services were helping a consumer to improve their quality of life. Office staff advised they provide information to all consumers to contact them if anything about their situation changes or if they need extra help and they can refer them onto other services. This includes if they express interest in attending social groups or need one to one social support through another service provider.

Administration staff and OTs said they receive information on any changes in needs or situation from staff and subcontractors and can arrange the necessary assessments and appropriate referrals as needed, and outlined referral processes and noted the importance of timely referrals for consumers.

Sampled consumers’ files demonstrated the assessment of emotional, spiritual or psychological needs through the comprehensive OT assessment process, and also contained information on important people and relationships in the consumers’ lives as well as consumers’ individual interests and preferred activities. Consumer documentation sighted included referrals to allied health and back to My Aged Care.

Food is not provided as part of the CHSP services delivered by this provider and hence the related requirement is Not Applicable.

# 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 |

The services do not provide a service environment therefore this Standard is Not Applicable.

# 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

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as four of the four specific requirements have been assessed as Compliant.

All consumers and representatives interviewed confirmed that they are encouraged and supported to provide feedback and to make complaints. Consumers and representatives interviewed said they received information on their right to an advocate and advocacy services in their community as well as alternative ways of raising and resolving complaints. They stated that interpreter services were available if required. The consumers and representatives sampled said they had not needed to raise any issues but felt the staff would take any of their concerns seriously and address them. All consumers interviewed were happy with their services currently. Consumers and representatives said the service seeks their feedback through the completion of client feedback form. They can remain anonymous when providing feedback.

OTs said they hand the Information Booklet to the consumers and representatives at their initial meeting and explain and answer any questions relating to the service provider and service expectations. Administration staff said for lawn mowing and maintenance services this is posted out and explained over the phone. OTs, building and administrative staff advised they work as a team and any of them could handle negative feedback that may arise. The staff (administrative, allied health and building) described listening to the consumers feedback and queries and providing information and options to address their concerns.

All complaints and feedback are registered and addressed or escalated depending on the nature of the complaint. Management said all the CHSP consumers and representatives have knowledge of the consumer’s My Aged Care assessment and referral process and they know their rights and they do not hesitate to call the staff if they want to give feedback or raise an issue. They can contact the CEO directly if they wish without fear of retribution. Management also said staff have been informed about the service’s Advocacy Policy. They are reminded in meetings to make the consumers aware of their right to use an advocate and remind them of this option whenever appropriate including if a compliant is lodged. The Assessment Team sighted the Advocacy Policy and agenda items of a team meeting.

The service maintains a Consumer Complaint Register which incorporates continuous improvement log for recording positive and negative feedback received by the service. The Assessment Team sighted the register.

# 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

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as five of the five specific requirements have been assessed as Compliant.

All consumers and representatives interviewed confirmed the service delivered services in a short turnaround time following OT assessment. They said the staff, or the trades person engaged by the service kept them informed of their plans and schedules. The consumers said they are advised on any appointment changes, and said staff treat them with kindness and respected them as individuals. They also said they are satisfied with the knowledge and skills of the staff and the trades persons used, based on the quality of home modifications and maintenance works undertaken and the difference this has been made to their life.

OTs said their interaction with the consumers are conducted in a kind and respectful way to support the consumers to exercise choice and independence while protecting and respecting their privacy, cultural values and dignity. For example, they take direction from the consumer and, if a consumer changes their mind, they respect their decision without compromising the integrity of their assessment. The Assessment Team observed the staff talking with consumers and representatives with courtesy and listening to the consumers relaying their stories.

Staff interviewed spoke about their initial induction, handbooks and resources accessed and their knowledge of policies and procedures that guide their practices which were available on SharePoint. Staff advise they receive ongoing feedback and coaching from their supervisors. They also confirmed having conversations on their support needs and opportunities for training.

Management advised there is a set staffing establishment within the organisational structure. Scheduling and workforce management is planned according to program need and the needs of the consumers being supported, and that based on needs and priorities, the OT department introduced a triage system designed to understand the demand for service, reducing lengthy wait times and improve OT intervention times for consumers. Management advised that Human Resource regulations including role specific registrations, accreditations and probity checks are managed by Building Supervisor and OT Team Leader. The administration staff manage a centralised record of this on an excel spread. Management also advised the sub-contractors/brokered service providers are required to verify they meet the services requirements in relation to legislative and quality standard of care. Feedback and complaints from consumers and representatives and staff are used to review the performance of the subcontracted and brokered services.

# 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

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as four of the four applicable requirements have been assessed as Compliant.

Four consumers and representatives interviewed said they provided feedback on various issues like the design and cost of project when they receive the quote from the service. They said the OT and staff are open and listens to them and explain the reason for the design and costings. All consumers and representatives interviewed confirmed their involvement in the development, delivery and evaluation of their individual assessment plan. Consumers and representatives expressed satisfaction with the quality of the service they received and said they provide input on how the services are delivered through their assessment meetings. Consumers interviewed outlined interactions with staff and complimented their responsiveness and indicated they were satisfied with the services received.

Staff said they think the service is consumer focused and supervisors respond to consumer and representative requests by having interdepartmental collaborations and implementing any changes quickly, for example, prioritising projects based on consumer needs and risk.

The service’s continuous improvement plan and complaints/feedback register show input from management, staff and consumers is captured and tracked. The service is supported by organisation wide governance systems and processes that underpin the governing body’s responsibilities for and commitment to promoting a culture of safe, inclusive and quality care and services across the organisation. The governing body is supported by the CEO and General Manager who oversee the delivery of service in line with the service’s philosophy.

Effective governance systems were seen to be in place in relation to information management, continuous improvement, financial and workforce governance, regulatory compliance and feedback and complaints. Management outlined a risk management system is in place underpinned by its Consumer Access, Assessment and Prioritisation policy and Reportable Incident – violence, abuse, neglect, exploitation and discrimination policies. The High-Risk Customers are identified through review of My Aged Care reports, specialist referral reports and the service provider’s own assessment of consumers by the OTs.

Staff are supported by management if they identify any potential abuse and neglect of consumers and relevant action is taken and referrals made, if required. Staff outlined processes they follow if concerned about a consumer.

The services do not provide clinical care therefore the relevant requirement is Not Applicable.

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)