**Performance**

**Report**

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| Name: | Homeless Support Program Mackay |
| Commission ID: | 700433 |
| Address: | 4 54 Gregory Street, MACKAY, Queensland, 4740 |
| Activity type: | Quality Audit |
| Activity date: | on 20 August 2024 |
| Performance report date: | 18 September 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.

# Services included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7861 Community Accommodation and Support Agency Inc  
Service: 24423 Community Accommodation and Support Agency Inc - Community and Home Support

**This performance report**

This performance report has been prepared by E Blance, 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 services it operates, 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.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Quality Audit report was informed by a site assessment, observations at service outlets, review of documents and interviews with staff, consumers/representatives and others
* other information known by the Commission

# 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 4** Services and supports for daily living | **Compliant** |
| **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. Standard 3, Requirement 4(3)(f), Standard 5 and Requirement 8(3)(e) are not within scope for this service and therefore an assessment is not provided.

# 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

Consumers and representatives say consumers are treated respectfully and with dignity. Contractors spoke about consumers in a way that conveyed respect and demonstrated knowledge of individual consumers’ needs by building rapport through conversation, listening to consumers’ needs and explaining the task to be completed.

Consumers and representatives say the service understands the consumer’s needs and preferences, and services are delivered in a way that makes the consumer feel safe. Services can be tailored to meet the cultural needs of consumers. Contractors demonstrated ways they approach each consumer in a respectful and safe manner.

Consumers and representatives say consumers are supported to make their own decisions about the services they receive. All consumers and representatives reported communication with the service was easy, they felt listened to and staff were responsive to any questions or concerns they had. Documentation demonstrated staff engage in consumer consultation at each assessment stage including post modification.

Consumers and representatives say the service supports consumers to make decisions about the services they receive and to maintain their independence. Documentation at the post modification stage demonstrated consumer input directed a change in equipment placement and guidance was sought form health professionals to consider mitigation of risk in collaboration with the consumer to their satisfaction.

Consumers and representatives say they receive information in a way they can understand and enables them to make informed choices regarding the service the consumer receives. Documentation confirmed, invoicing and description of works is clearly displayed on the home modification worksheet provided to the consumer for acknowledgement and signing ahead of the modification commencing.

Consumers and representatives say their privacy is respected and confidentiality of their personal information is maintained. Staff described various ways they ensure a consumer’s privacy is upheld. The service agreement form informs consumers of their rights regarding privacy and data management. Paper forms were observed to be contained in a lockable cabinet within each client file, ensuring confidentiality of each consumer’s personal information.

I have considered the information brought forward by the Assessment Team report as summarised above, and I have placed weight on the satisfaction of consumers who receive the services provided. I find this Standard compliant.

# 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

Consumers and representatives advise they are satisfied the service assesses the consumers’ needs and preferences and considers their well-being and risks. Assessment plans include information regarding consumers’ mobility and a work health and safety risk check list to guide contractors and keep consumers’ safe.

Consumers and representatives say the service’s provided meet the consumer’s needs, goals and preferences. Staff demonstrated good knowledge of each consumer’s needs and preferences through assessment planning. Due to the nature of the service, consumers and staff are not involved in end-of-life planning as part of the Homeless Support Program Mackay home modification services.

Consumers and representatives say the service prioritises the involvement of the consumer and other relevant individuals in the planning and delivery of appropriate services. Relevant information from occupational therapy health services is included in planning as required. Assessment plans demonstrated information is detailed and appropriate. The service work closely with local allied health services to ensure timely and accurate service delivery.

The service captures individual requirements of each consumer's home modification including materials to be used, a work health and safety risk check list and specific instructions for the contractor completing the home modification. Assessment is completed in collaboration with the consumer/representative. Post modification assessments are conducted to ensure the modification has been completed to the occupational therapist’s specification and consumer’s satisfaction.

Consumers and representatives say they are well supported by the service, have been provided with pathways should they need to advise the service of changes or incidents and are confident staff will follow up on all requests. Staff could describe post-modification assessment processes to review consumers’ needs.

I have considered the information brought forward by the Assessment Team report as summarised above, and I have placed weight on the satisfaction of consumers who receive the services provided. I find this Standard compliant.

# 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)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant |

Findings

Consumers and representatives advise the service supports the consumer to maintain their independence and well-being while considering their preferences and needs. For example, a consumer was supported to remain independent at home following a hospital stay because of the modification provided. Staff engage with consumers to ensure their preferences are supported.

Consumers and representatives say they felt connected with staff and contractors, who got to know the consumer well and encouraged them to remain independent by participating in things they like. Contractors were able to describe the referral pathway used should they identify a consumer as needing additional emotional support, this includes escalation to management.

Consumers and representatives say the service provides the necessary support to allow consumers to remain independent and living in their own home. Care documentation evidence installation of handrails in key areas of a consumer’s home to support enablement to do the things they like.

Consumers and representatives are satisfied the appropriate information about consumers’ needs and preferences is shared within the service and with others involved in their care, such as allied health services. Staff demonstrated the referral pathway used should consumers require assistance out of the scope of what the service offers. Documentation clearly set out what was required, this included consumer preferences as well as photos demonstrating the work to be carried out.

The service encourages consumers to seek additional services and supports if emerging needs are identified. The service assist in referring consumers to the most appropriate organisation, including My Aged Care to facilitate reassessment. Staff advised the service maintains relationships with other local approved providers in referring consumers to other organisations, including contacting the consumer’s current home care provider if applicable and My Aged Care when necessary.

The service sources all equipment and materials in accordance with the referring occupational therapist’s requirements. Consumers spoke to the high quality of the fixtures used in each modification.

I have considered the information brought forward by the Assessment Team report as summarised above, and I have placed weight on the satisfaction of consumers who receive the services provided. I find this Standard compliant.

# 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

Consumers and representatives say they feel comfortable to make a complaint. Consumers are provided with feedback forms in their commencement pack as well as with their invoice after modifications have been completed.

Whilst the service currently has no consumers requiring language or advocacy services, management demonstrated information and processes on how to access advocates and language services for raising and resolving complaints. Management demonstrated how they have previously worked with advocacy services to resolve complaints through other areas of the service.

Consumers and representatives say whilst they have not made any complaints, they feel listened to, and management are honest with quotes and timeframes, and this is important to them. The service demonstrated, through policies and procedures a process for receiving, categorising, and actioning feedback and complaints, as well as using open disclosure processes.

Management demonstrated the process and procedure used to ensure feedback and complaints are used to improve the quality of care and services for example feedback was used to improve the quality of service in relation to the major modification of bathroom remodelling. Areas for improvement identified by the service included undertaking follow-up phone calls to receive direct feedback from consumers as well as sending feedback and complaints forms with the invoice for the service given.

I have considered the information brought forward by the Assessment Team report as summarised above, and I have placed weight on the satisfaction of consumers who receive the services provided. I find this Standard compliant.

# 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 number of and the mix of workforce members is planned to meet the service needs of consumers. Consumers are satisfied with the services received when they are provided. Cross training staff including responsibilities for the coordinator role ensures continuity of service delivery.

Consumers say staff, including the contractors, are kind, caring and respectful of the consumer’s identity and culture. Management, staff and contractors spoke about consumers in a kind and caring way. Contractor agreements demonstrated a code of conduct, and this was included in the staff handbook also.

A service coordinator coordinates contractors to undertake the completion of the modifications. The service ensures the coordinator is up to date with training. The service ensures the contracted trades people have their qualifications in place and offer ongoing training in the Aged Care Quality Standards (the Quality Standards). The service has policies, procedures and guidelines in place to ensure staff are competent and have the knowledge to undertake their role effectively.

The service has processes for the recruitment, induction, and onboarding of the workforce, as well as ongoing mandatory training. Mandatory training includes first aid, privacy, dignity and respect as well as neglect and abuse and reportable incidents. Management and the Board work together to review contractors prior to their commencement with the service and provide onboarding and training to ensure they are delivering the service in line with the Standards.

Consumers and representatives say they can provide feedback about the staff or contractors. Management demonstrated systems are in place to monitor and review workforce performance. Management and the coordinator say annual performance reviews are completed and this was evidenced by the Assessment Team.

I have considered the information brought forward by the Assessment Team report as summarised above, and I have placed weight on the satisfaction of consumers who receive the services provided. I find this Standard compliant.

# 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 |

Findings

Management demonstrated the various avenues for consumers to be involved in the evaluation of services, including feedback forms as well as through follow-up phone calls and in person review of the modifications. Consumers say the organisation is well run and they can have a say on how things are done by providing feedback directly to the coordinator, the contractors or via the feedback and complaints forms.

Management and the Board work together to promote a culture of safe, inclusive and quality care. Concerns are monitored at Board meetings, including for identified incidents, feedback and complaints, work health and safety issues and other key information for the whole of organisation.

The service has effective governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance, and feedback and complaints.

The service has effective risk management systems and practices in place to manage high impact and high prevalence risks, as well as identify abuse and neglect of consumers and support consumers to live the best life they can. Management, staff and contractors understood and could speak to their responsibility about identifying and reporting abuse and neglect of consumers, including reporting pathways to the Serious Incident Reporting Scheme.

I have considered the information brought forward by the Assessment Team report as summarised above, and I have placed weight on the satisfaction of consumers who receive the services provided. I find this Standard compliant.

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