**Performance**

**Report**

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| Name of service: | Life Without Barriers - Unley |
| Service address: | 100 Greenhill Road UNLEY SA 5061 |
| Commission ID: | 600467 |
| Home Service Provider: | Life Without Barriers |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 19 June 2023 |
| Performance report date: | 20 July 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 Life Without Barriers - Unley (**the service**) has been prepared by A. Grant, 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:**

* Life Without Barriers Home Care Packages Program - South Australia, 26229, 100 Greenhill Road, UNLEY SA 5061

**CHSP:**

* CHSP - Domestic Assistance, 4-1O6LZ0H, 100 Greenhill Road, UNLEY SA 5061

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

# Assessment summary for Home Care Packages (HCP)

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| Standard 1 Consumer dignity and choice | Not applicable as not all requirements have been assessed |
| **Standard 2** Ongoing assessment and planning with consumers | **Not Applicable** |
| **Standard 3** Personal care and clinical care | **Not Applicable** |
| **Standard 4** Services and supports for daily living | **Not Applicable** |
| **Standard 5** Organisation’s service environment | **Not Applicable** |
| **Standard 6** Feedback and complaints | **Not Applicable** |
| **Standard 7** Human resources | **Not applicable as not all requirements have been assessed** |
| **Standard 8** Organisational governance | **Not Applicable** |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 1 Consumer dignity and choice | Not Applicable |
| **Standard 2** Ongoing assessment and planning with consumers | **Not Applicable** |
| **Standard 3** Personal care and clinical care | **Not Applicable** |
| **Standard 4** Services and supports for daily living | **Not Applicable** |
| **Standard 5** Organisation’s service environment | **Not Applicable** |
| **Standard 6** Feedback and complaints | **Not Applicable** |
| **Standard 7** Human resources | **Not applicable as not all requirements have been assessed** |
| **Standard 8** Organisational governance | **Not Applicable** |

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 | | HCP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | **Not Applicable** |
| Requirement 1(3)(b) | Care and services are culturally safe | **Not Applicable** |
| 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. | **Not Applicable** |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | **Not Applicable** |
| 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. | **Not Applicable** |

Findings

Evidence analysed by the Assessment Team showed the service was able to demonstrate that 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. Consumers confirmed they regularly receive their monthly statements in a timely manner. Case managers described how the service reviews consumer statement to ensure they are accurate and received on time. Management advised how they optimised previous systems and introduced additional resources to ensure that invoices are received in a timely manner.

Management advised of various actions undertaken to address the previously identified non-compliance at the Quality Audit in November 2022, including:

* The service implemented additional staffing resources to assist with the claiming process at the end of the month and the distribution of statements to ensure that consumers receive them on time.
* Optimising existing systems and processes to ensure that consumer invoices are consistently received in a timely manner.
* Increasing management oversight by developing a calendar to monitor dates, setting email reminders, and implementing an escalation process to notify management when there is an expected delay in the distribution of invoices.
* Continually working closely with brokered service providers to ensure that invoices are received, and consumer statements are finalised.
  + Management advised that since the implementation of these improvements, the service has not received any complaints regarding consumer statements within the previous 6 months

During interviews with the Assessment Team Case Managers acknowledged the previous issues with invoicing and described how the service has improved its process to ensure that statements are distributed more promptly. They advised how statements are received from the finance team and reviewed to resolve potential discrepancies prior to submitting them to admin for distribution to consumers. They advised how these changes have resulted in significant improvements, stating that the service has not received any consumer complaints since the service implemented the changes.

Documentation viewed by the Assessment Team confirmed that the service has consistently sent out invoices over the previous six month by indicating the specific dates they were posted to consumers. Management acknowledged a one-week delay in the distribution of the March statement due to a combination of factors including the public holiday and systems requiring updates. Management advised that this delay was escalated to inform the National Operations Lead. All consumers interviewed confirmed they had received the March invoices and did not indicate any impact caused by the 1-week delay.

The Assessment Team found the improvements in relation to this requirement by the service were effective. This was confirmed by consumer feedback, staff feedback and documentation viewed.

# Standard 7

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| Human resources | | HCP | 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** | **Compliant** |
| Requirement 7(3)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | **Not applicable** | **Not applicable** |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | **Not applicable** | **Not applicable** |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | **Not applicable** | **Not applicable** |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | **Not applicable** | **Not applicable** |

Findings

Evidence analysed by the Assessment Team showed the service was able to demonstrate 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 services. Consumers generally advised their services arrive as scheduled, and when there is a change, it is generally communicated. Rostering staff advised that since the service brought on extra staffing resources, it is easier to fill shifts, and reschedule shifts that would otherwise be cancelled. Management advised they have hired additional staff and accessed additional brokerage options to address previous staffing shortages.

Management advised of a range of actions being undertaken to address identified non-compliance at the previous Quality Audit in November 2022, including:

* Creation and recruitment of a permanent position in the southern region to enhance the service's staffing resources.
* Engaging additional brokered service providers to ensure shift coverage during periods of unplanned leave or staffing shortages.
* Enhancing oversight of the workforce by appointing a Workforce Utilisation Lead to monitor and analyse unfilled shifts and staffing capacity.
* Most consumers sampled advised their services generally arrive on time, as scheduled, and are generally delivered by the same worker. For example:

However, two consumers described recent issues with staffing levels, with one consumer advising that troubles are ongoing. Documents reviewed by the Assessment Team showed some cleaning shifts for both HCP and CHSP consumers had been cancelled due to no staff being available.

Management described challenges with maintaining sufficient workforce numbers, and advised they have open and ongoing recruitment in both the northern and southern regions of South Australia. Management advised that they have also increased the number of brokerage providers to provide better coverage.

While the service was not able to demonstrate they had eliminated missed shifts due to staffing shortages, consumer feedback, staff feedback and documentation indicated the service has made significant improvements in their ability to fill scheduled shifts, and communicate clearly to consumers when shifts changed.

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)