Northside Community Forum Incorporated

Performance Report

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| **Address:** | Suite 101, 10 Help Street CHATSWOOD NSW 2067 |
| **Phone:** | 02 8405 4444 |
| **Commission ID:** | 200576 |
| **Provider name:** | Northside Community Forum Ltd |
| **Activity type:** | Assessment Contact - Desk |
| **Activity date:** | 1 September 2022 |
| **Performance report date:** | 21 September 2021 |

# Performance report prepared by

S Bickerton, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

**Services included in this assessment**

**Home Care Packages (HCP):**

* Home Care Packages, 27062, Suite 101, 10 Help Street, CHATSWOOD NSW 2067

**Commonwealth Home Support Packages (CHSP):**

* Domestic Assistance, 4-7Y37Q9Y, Suite 101, 10 Help Street, CHATSWOOD NSW 2067
* Flexible Respite, 4-7Y37QCR, Suite 101, 10 Help Street, CHATSWOOD NSW 2067
* Social Support - Group, 4-7Y37QFK, Suite 101, 10 Help Street, CHATSWOOD NSW 2067

# Overall assessment of Service/s

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | HCP |  |
| CHSP |  |
| Requirement 1(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(b) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 1(3)(e) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 1(3)(f) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Standard 8 Organisational governance | HCP |  |
| CHSP |  |
| Requirement 8(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 8(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |
| Requirement 8(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 8(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |
| Requirement 8(3)(e) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The following information has been considered in developing this 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

# STANDARD 1 Consumer dignity and choice

# HCP CHSP

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

The focus of this desk assessment was to assess the services compliance against quality standard requirement 1(3)(e), considering changes made in 2022 to the social, community, home care and disability services industry award (SCHADS).

Consumer representatives explained in different ways to the assessment team that that they receive information that is current, accurate and timely from the service. Service management described processes for discussing and providing information to consumers and representatives regarding changes to the SCHADS industry award.

For example:

* Service management demonstrated verbal conversations are held with consumers regarding changes to services resulting from the new SCHADS industry award, including increased fees and charges.
* The service has approximately 150 consumers that have been impacted by the SCHADS industry award changes, as they receive services that are scheduled for under two hours.
* Service management explained budget and schedule adjustments have occurred in consultation with consumers and their representatives.
* Service management described utilising multilingual human resources to facilitate communication with culturally and linguistically diverse consumers.
* The service evidenced working with stakeholders to achieve solutions for consumers, resulting in lower cost brokered service being offered to consumers.
* The assessment team reviewed service correspondence sent to consumers highlighting changes to SCHADS. This communication evidenced the service provided guidance to consumers and offered care consultant services.
* Several consumer representatives described receiving monthly statements from the service. Not all consumer representatives described the statements as being easy to understand. Consumer representatives explained budgets had been provided and explained to them by the service.
* Several consumer representatives explained the service had discussed changes in fees and charges and other impacts of the SCHADS industry award change. One consumer representative described being advised of the changes two months before they happened.
* Some consumers discussed concerns around delays in receiving increases in HCP funding, as the service had already increased its fees and charges.
* One consumer representative described working with the service to consider sourcing new brokered services for short periods at reduced costing.

One of the six assessed requirements for HCP and CHSP have been assessed as Compliant. Five requirements have not been assessed in this instance.

**Assessment of Standard 1 Requirements**

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

### *Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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| --- | --- | --- |
| Requirement 1(3)(b) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

### *Care and services are culturally safe.*

|  |  |  |
| --- | --- | --- |
| Requirement 1(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

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| --- | --- | --- |
| Requirement 1(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

### *Each consumer is supported to take risks to enable them to live the best life they can.*

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| --- | --- | --- |
| Requirement 1(3)(e) | HCP | Compliant |
|  | CHSP | Compliant |

### *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.*

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| --- | --- | --- |
| Requirement 1(3)(f) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

### *Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 8 Organisational governance

# HCP CHSP

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

The focus of this desk assessment was to assess the services compliance against quality standard requirement 8(3)(b), considering changes made in 2022 to the SCHADS industry award.

Service management demonstrated that the service promotes a culture of safe, inclusive and quality care.

For example:

* The service evidenced an organisational governance committee meets monthly and reviews a range of clinical indicators including consumers waiting for HCP package increases and vulnerable consumers.
* The service demonstrated the organisation provides internal and brokered services staff with regular online education. All HCP3 and HCP4 consumers receive regular and bespoke clinical assessments.
* Service management explained five consumers in receipt of CHSP chose to exit the service after the SCHADS changes impacted service delivery. These consumers were provided with assistance to transition away from the service.
* The service evidenced updated consumer care documentation resulting from the SCHADS changes. Service management explained this information was available to consumers with their updated care plans.

One of the five assessed requirements for HCP and CHSP have been assessed as Compliant. Four requirements have not been assessed in this instance.

## Assessment of Standard 8 Requirements

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| --- | --- | --- |
| Requirement 8(3)(a) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

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| --- | --- | --- |
| Requirement 8(3)(b) | HCP | Compliant |
|  | CHSP | Compliant |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

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| --- | --- | --- |
| Requirement 8(3)(c) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

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| Requirement 8(3)(d) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

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| --- | --- | --- |
| Requirement 8(3)(e) | HCP | Not Assessed |
|  | CHSP | Not Assessed |

*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.*

# Areas for improvement

The provider is required to actively pursue continuous improvement to remain compliant with the Quality Standards.

# Other relevant matters

There is ongoing non-compliance with the following requirements:

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| 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. |
| 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. |
| 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. |
| 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. |