**Performance**

**Report**

**1800 951 822**

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| Name of service: | Polish Community Care Services Inc |
| Service address: | Suite 305, 3 Chester Street OAKLEIGH VIC 3166 |
| Commission ID: | 300741 |
| Home Service Provider: | Polish Community Care Services Inc |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 2 November 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 Polish Community Care Services Inc (**the service**) has been prepared by S Bickerton, 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

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

* Social Support Group, 4-B10ENIN, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166
* Domestic Assistance, 4-G1SJBEA, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166
* Flexible Respite, 4-G1RZNQO, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166
* Meals, 4-G1RZNOP, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166
* Sector Support and Development - Service System Development, 4-B0UX6LW, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166
* Social Support Individual, 4-G1RZNSD, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166
* Transport, 4-G1SJBFZ, Suite 305, 3 Chester Street, OAKLEIGH VIC 3166

# 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 CHSP

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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 as not all requirements have been assessed** |
| **Standard 3** Personal care and clinical care | **Not applicable as not all requirements have been assessed** |
| **Standard 4** Services and supports for daily living | **Not applicable as not all requirements have been assessed** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 6** Feedback and complaints | **Not applicable as not all requirements have been assessed** |
| **Standard 7** Human resources | **Not applicable as not all requirements have been assessed** |
| **Standard 8** Organisational governance | **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:

Non-compliance of requirements 2(3)(a), 2(3)(b), and 8(3)(b) was identified during a quality audit conducted on 10 June 2022.

# 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 |

Findings

The service evidenced since the time of a quality audit conducted in June 2022 that newly embedded assessment and planning systems ensure consumer assessments are completed consistently for all consumers utilising the service. This includes:

* A tool for consumer assessments under the CHSP program guiding the capture of consumer social profiles and designing individualised goal directed care plans
* Assessment and planning guidance under CHSP that details processes for staff to followed in consumer assessments and planning

The assessment team evidenced that the service is practising the newly established systems and processes through the review of consumer documentation.

* Five CHSP consumer records evidenced goal directed care plans completed in June, July, and August 2022. These care plans included contemporary consumer goals and social profile details capturing mobility, allergies, diet, medical information, medications, and social/human/cultural needs.
* All care plans evidenced scheduled review dates occurring 12 months from the date of assessment

# Standard 8

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| Organisational governance | | CHSP |
| 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 |

Findings

The service evidenced that systems and process had undergone review since a quality audit conducted in June 2022 to ensure oversight of meals services delivered by subcontracted providers. For example:

* Subcontracting services ensure consumers have a choice of two meals and these options are communicated clearly in advance to facilitate consumer ordering
* Service management receive and solicit consumer feedback on meal provision and communicate this information with subcontracted services bi-monthly
* Service management and staff review meal presentation and quality to ensure consistent high standards are met
* The service evidenced that consumer requirements and preferences are communicated promptly when consumers are established at the service and when changes in consumer requirements arise
* The service evidenced a contemporary subcontracting service agreement dated July 2022

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)