**Performance**

**Report**

**1800 951 822**

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| --- | --- |
| Name of service: | Prompt Care Victoria |
| Service address: | Ground Floor, 722 High Street KEW EAST VIC 3102 |
| Commission ID: | 300749 |
| Home Service Provider: | The Carers' Phone Pty Ltd |
| Activity type: | Quality Audit |
| Activity date: | 26 September 2022 to 28 September 2022 |
| Performance report date: | 25 October 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 Prompt Care Victoria (**the service**) has been prepared by M Cooper, 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:**

* Prompt Care Victoria - Western Metro, 23581, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Prompt Care Victoria - Northern Metro, 23580, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Short Term Restorative Care (STRC) - WMR, 26317, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Prompt Care Tasmania North Western, 23617, 63 Main Street, MOONAH TAS 7009
* Prompt Care Tasmania Northern, 23631, 63 Main Street, MOONAH TAS 7009
* Prompt Care Tasmania Southern, 23632, 63 Main Street, MOONAH TAS 7009
* Prompt Care NSW, 28099, Suite 2, 466 Burwood Road, BELMORE NSW 2192
* Prompt Care NSW, 28110, Suite 2, 466 Burwood Road, BELMORE NSW 2192
* Short Term Restorative Care (STRC) - Vic Rural, 27638, 29 Murray Street, COLAC VIC 3250
* Prompt Care Victoria - Barwon-South Western, 23579, 29 Murray Street, COLAC VIC 3250
* Short Term Restorative Care (STRC) - Adelaide, 27434, 148 The Parade, NORWOOD SA 5067
* Prompt Care South Australia, 23577, 148 The Parade, NORWOOD SA 5067

**CHSP:**

* Goods Equipment and Assistive Technology, 4-E0POV2M, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Social Support - Individual, 4-E0POCMZ, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Nursing, 4-B1Y191T, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Personal Care, 4-B1Y195R, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Allied Health and Therapy Services, 4-B1ZEHUI, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Domestic Assistance, 4-B1ZEI2H, Ground Floor, 722 High Street, KEW EAST VIC 3102
* Flexible Respite - Care Relationships and Carer Support, 4-B1ZEI6S, Ground Floor, 722 High Street, KEW EAST VIC 3102

# 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
* Response from the Approved Provider attaching copies of correspondence to sent to CHSP consumers in March 2020 and copy of the system used by the Provider to track CHSP consumer reviews
* Aged Care Act 1997 [Cth]
* Aged Care Quality and Safety Commission Act 2018 [Cth]
* Aged Care Quality and Safety Commission Rules 2018 [Cth]
* User Rights Principles 2014 registered 10 October 2022 [Cth]
* Quality of Care Principles 2014 registered 10 October 2022 [Cth]
* Guidance and Resources for Providers to support the Aged Care Quality Standards published by the Aged Care Quality and Safety Commission in September 2022
* Commonwealth Home Support Programme manual 2022 -2023
* Home Care Packages Program operational manual a guide for home care providers

# Assessment summary for Home Care Packages (HCP) and Short-term Restorative Care Programme (STRC)

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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 | **Compliant** |
| **Standard 4** Services and supports for daily living | **Non-compliant** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

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

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

Areas have been identified in which **improvements must be made to ensure compliance with the Quality Standards**. This is based on non-compliance with the Quality Standards as described in this performance report.

* Requirement 2(3)(d) for CHSP
* Requirement 2(3)(e) for CHSP
* Requirement 3(3)(e) for CHSP
* Requirement 4(3)(d) for CHSP and HCP
* Requirement 8(3)(c) for CHSP and HCP

**Standard 1**

|  |  |  |  |
| --- | --- | --- | --- |
| Consumer dignity and choice | | HCP/STRC | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant | 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 | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant | 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 | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant | Compliant |

Findings

The Assessment Team has received feedback from consumers/representatives that confirms they are treated with dignity and respect. Each consumer is supported to exercise choice and independence. They are also assisted in being involved in making decisions about the care and services that are provided. This assistance includes the consumer being supplied with a consumer’s information pack.

The Quality Standard for the Home Care Packages Service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

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

# Standard 2

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| --- | --- | --- | --- |
| Ongoing assessment and planning with consumers | | HCP/STRC | 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 | 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 | 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 | 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 | Non-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 | Non-compliant |

Findings

The Assessment Team found that the Approved Provider’s approach to care planning was inconsistent in that the organisation was meeting its obligations to prepare care plans for consumer who were under HCP, whereas in contrast it was not fully meeting its obligations to its CHSP customers.

To determine compliance with requirement 2(3)(d) & (e) a review of care documentation for CHSP consumers revealed that the Approved Provider was gleaning some information at time of the initial assessment phone call and whilst consumers did not raise any concerns in relation to a lack of care planning, care partners reported that there was insufficient information being provided to them that could be used to understand the needs and health conditions of the consumers.

Care Partners also stated that the Approved Provider was not advising its consumers of all the services that were available to them and in two cases consumers were not aware that shopping assistance and transport services were available. In two cases the consumers had not had a care plan review since the initial assessment undertaken in 2019. Further to this, there were no care plans or care directives in the consumer’s personal file. To determine compliance with requirement 2(3)(d) & (e) the assessment team reviewed the files of CHSP and HCP consumers and found that the Provider had a process in place for reviewing the care plans for its HCP consumers. However, the Provider had not reviewed the care plans of the CHSP consumers.

In response to the Assessment Team’s report the Provider acknowledged the not-met requirements and was working towards achieving compliance. The Provider also indicated that recruitment and resource shortages remain a significant challenge, but they were optimistic that this situation would ease.

The Provider supplied documentation stating that significant resources were allocated and CHSP Care Plans were developed through consultations with all CHSP clients. CHSP Intake has been limited since then due to the impact of COVID19 and conceded that Care Plan Reviews have not been performed / documented in a timely manner as they should have been. However, the Provider is working to implement the review process.

Clause 19AD of the User Rights Principles 2014 creates a legal obligation for the Approved Provider to provide a care plan to a consumer. Further to this on page 67 of the Commonwealth Home Support Programme manual (programme manual) 2022-2023 states ‘CHSP service providers have an on-going responsibility to monitor and review the services they provide to their clients under the client’s care plan to ensure that the client’s needs are being met’.

Chapter 6.1 of the programme manual relates to a Services Providers responsibility and it states in part ‘services delivered to clients are in line with individual goals, recommendations and assessment outcomes as identified in their individual My Aged Care support plan’.

The correct preparation and maintenance of care plans fundamentally underpins the requirements of this standard in that the Approved Provider and the consumer are to work in partnership driven by ‘consumer directed care’.

Having considered the information supplied in the Assessment Team’s report, the Provider’s response to the Assessment Team’s report, the obligations imposed on the Approved Provider under the User Rights Principle 2014 and the guidance provided under the Commonwealth Support Programme Manual I have reasonable grounds to form the view that the Approved Provider has not complied with requirement 2(3)(d) and (e) in relation to its CHSP consumers.

The Quality Standard for the Home Care Packages Service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

The Quality Standard for the Commonwealth Home Support Programme services is assessed as non-compliant as two of the five specific requirements have been assessed as non-compliant.

# Standard 3

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| --- | --- | --- | --- |
| Personal care and clinical care | | HCP/STRC | 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. | Compliant | Compliant |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant | Compliant |
| 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. | Compliant | 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. | Compliant | Compliant |
| 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. | Compliant | Non-compliant |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| 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. | Compliant | Compliant |

Findings

The Assessment Team reports that the Approved Provider is undertaking best practice supported by staff education and that this led to the consumer’s needs, personal care and preferences being delivered. The Organisation was identifying and managing high impact and high risk matters that relate to its consumers. The Approved Provider was also ensuring that there is a robust system in place to refer consumers to medical professionals or allied health in a timely manner. However, the Approved Provider did not demonstrate that they have robust processes in place to ensure that relevant consumer information was being communicated between the Organization and Care Partners. This is evidenced by the fact that consumers reported that they had to direct new staff in the delivery of care and services. Care Partners reported inadequate information was being provided at the point of care for new consumers. This non-compliance specifically related to CHSP consumers.

As part if its assessment the team interviewed 2 CHSP consumers who were receiving personal care services. File reviews identified minimal information relating to their care needs and required services. The consumers Care Partners described receiving minimal care directive information and that most of the personal care information was received from the consumer during the initial service meeting.

The ‘Guidance and Resources for Providers to support the Aged Care Quality Standards’ (the Guidance) states ‘The organisation that receives funding directly from the Australian Government is expected to ensure its workforce (including subcontractors) meet its responsibilities.

The Guidance also provides a clear interpretation for an Approved Provider in relation to how this Standard is to be applied. The ‘Purpose and Scope for Standard 3’ states Consumers and the community expect the safe, effective and quality delivery of personal and clinical care. The standard applies to all services delivering personal and clinical care specified in the Quality of Care Principles 2014 (the Care Principles). The Care Principles are made under Section 96-1 of the Aged Care Act 1997.

The Guidance also states that the intent of requirement 3(3)(e) in part ‘Focuses on the communication processes that organisations are expect to have, so that their workforce has information about delivering safe and effective personal and clinical care and understanding the consumers’ condition, needs, goals and preferences.

Having considered the information supplied in the Assessment Team’s report, the Provider’s response to the Assessment Team’s report, the obligations imposed on the Approved Provider under the Quality Care Principles 2014, the Guidance and Resources for Providers to support he Aged Care Quality Standards and the Commonwealth Support Programme Manual I have reasonable grounds to form the view that the Approved Provider has not complied with requirement 3(3)(e) in relation to CHSP consumers.

The Quality Standard for the Home Care Packages Service is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

The Quality Standard for the Commonwealth Home Support Programme services is assessed as non-compliant as one of the six applicable requirements have been assessed as non-compliant.

# Standard 4

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| Services and supports for daily living | | HCP/STRC | 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 | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant | 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 | 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. | Non-compliant | Non-compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant | Not applicable |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant | Not applicable |

Findings

The Assessment Team found that the Approved Provider was supporting the consumer’s independence and wellbeing with in-home and community-based lifestyle by providing emotional and psychological support to consumers when they are feeling low. Further to this, the Organisation was providing quality equipment to consumers that is suited to their needs.

However, the Assessment Team found that the Organisation was not documenting care directives or sharing care directives for CHSP consumer. One consumer’s representative stated that the staff do not have adequate information and as they are unfamiliar with the consumer they rely on the representative to tell them what to do whilst providing services.

The Guidance states that the purpose and scope of this standard includes the fact that ‘Organisations are expected to provide services and supports in line with the consumers’ assessed needs, goals and preferences and any care and services plan; or service agreement in place with the consumer’

Specifically, in relation to requirement 4(3)(d) the Guidance states in part ‘the requirement focuses on the communication processes that organisations are expected to have so that their workforce has information about delivering safe and effective service and supports for daily living and understanding the consumers condition, needs, goals and preferences’.

Consumers and or their representatives reported that care partners were relying on the consumers to tell them what their needs and preference were. Care Partners also stated that that were receiving minimal information from the Provider in relation to CHSP and HCP consumers.

Having regard to the Assessment Team’s report, the Provider’s response to the Assessment Team’s Report, the Guidance and Resources for Providers to support the Aged Care Quality Standards and a Providers obligation under the Aged Care Act 1997 to comply with the Aged Care Quality Standards, I have reasonable grounds to believe that the Approved Provider is non-compliant with requirement 4(3)(d) in relation to CHSP and HCP consumers.

The Quality Standard for the Home Care Packages Service is assessed as non-compliant as one of the seven specific requirements have been assessed as non-compliant.

The Quality Standard for the Commonwealth Home Support Programme services is assessed as non-compliant as one of the five applicable requirements have been assessed as non-compliant.

# Standard 5

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| Organisation’s service environment | | HCP/STRC | 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 | 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 | Not applicable |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable | Not applicable |

Findings

As the Approved Provider does not provide this type of service compliance with this Standard is not required.

# Standard 6

|  |  |  |  |
| --- | --- | --- | --- |
| Feedback and complaints | | HCP/STRC | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Compliant | 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 | 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 | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant | Compliant |

Findings

The Assessment Team found that the Approved Provider was informing consumers and their advocates about feedback and complaint options. The Organisation was encouraging and supporting consumers to give feedback or make complaints using a documented feedback and complaints system. Complaints were being actioned to the satisfaction of complainants. This was achieved by using an open disclosure approach and analysing complaints to make improvements.

The Quality Standard for the Home Care Packages Service is assessed as compliant as four of the four specific requirements have been assessed as compliant.

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

# Standard 7

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| Human resources | | HCP/STRC | 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. | Compliant | 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 | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant | Compliant |

Findings

The Assessment Team found that the Provider is working to ensure the workforce is recruited through ongoing recruitment exercises and workforce interactions with consumers are kind, caring and respectful. However, the Provider is not able to consistently provide care partners to consumers to provide their care and services due to insufficient staff in some Melbourne metropolitan regions.

Interviews with 4 HCP consumers confirm that they have not received services in relation to domestic assistance. With most consumers saying in different ways that there were not enough staff to ensure that they receive the care and services they need. Further to this, Rostering changes occurred regularly as at times the Provider could not provide care partners. Management were interviewed in relation to services not being provided and they advised that they were continuing to advertise and recruit for new care partners, but they were experiencing difficulties since the COVID-19 pandemic. The Assessment Team has specifically identified requirement 7(3)(a) as not being met.

The Guidance states that the intent of this requirement is that ‘the Provider is expected to have a system to work out workforce numbers and the range of skills they need to meet consumers needs and deliver safe and quality care and services at all times. The Assessment Team notes that workforce governance is overseen by the Provider’s management team with issues and actions being reported to the Board. Human resource processes include workforce recruitment, position descriptions and staff education. Position descriptions specify staff responsibilities and accountabilities to support quality care. Care and service staff are generally employees and subcontracted services include specific allied health services, home modifications, home maintenance, and gardening services. Having regards to the Assessment Team’s report, the responses provided by the Provider at the time of the audit and its written response, the intent of the requirement as stated in the Guidance and Resources for Providers to support the Aged Care Quality Standards and lack of availability of suitable staff and care partners due to COVID-19, I have reasonable grounds to believe that the Provider does have systems in place to comply with this Standard.

The Quality Standard for the Home Care Packages Service is assessed as compliant as five of the five specific requirements have been assessed as compliant.

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

# Standard 8

|  |  |  |  |
| --- | --- | --- | --- |
| Organisational governance | | HCP/STRC | 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 | 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 | 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. | Non-compliant | Non-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 | 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. | Compliant | Compliant |

Findings

The Assessment Team found that the Approved Provider took accountability for delivering inclusive quality care and service that was culturally safe. The Team also found that the Provider was using effective organisation wide governance system that included risk management systems to improve consumers lives.

However, the Assessment Team found that the Provider was not developing and documenting care plans for CHSP and HCP consumers or documenting consumer care directives for their care and services. Additionally, the Assessment Team found that the Approved Provider was not sharing this information with care partners and was not consistently reviewing consumers care needs and documenting then when a consumer transition from one level of home care package to another.

The Assessment Team specifically found that the Approved Provider was not meeting its obligations under requirement 8(3)(c). In considering the information in the Assessment Team’s report the Provider is not complying with requirement (8)(3)(c)(v) regulatory compliance. Requirement 8(3)(c)(v) also includes a Providers obligation to comply with the Aged Care Quality Standards by providing consumers with care plans, new agreements and assessments.

Clause 19AD of the User Rights Principles 2014 creates a legal obligation for the Approved Provider to provide a care plan to a consumer. The User Rights Principles 2014 are made under Section 96-1 of the Aged Care Act 1997. In addition to this, the Quality of Care Principles 2014 created under section 96-1 of the Aged Care Act 1997 creates a legal obligation on an Approved Provider to comply with the Aged Care Quality Standards.

Having regard to the Assessment Team’s report, the Provider’s response to the Assessment Team’s Report, the Guidance and a Providers obligation under the Aged Care Act 1997, I have reasonable grounds to believe that the Approved Provider is non-compliant with requirement 8(3)(c)(v) in relation to CHSP and HCP consumers.

The Quality Standard for the Home Care Packages Service is assessed as non-compliant as one of the five specific requirements have been assessed as non-compliant.

The Quality Standard for the Commonwealth Home Support Programme services is assessed as non-compliant as one of the five specific requirements have been assessed as non-compliant.

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)