**Performance**

**Report**

**1800 951 822**

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| Name: | Rainbow The Multicultural Aged Care Program |
| Commission ID: | 500058 |
| Address: | 33 Eighth Avenue, MAYLANDS, Western Australia, 6051 |
| Activity type: | Assessment contact (performance assessment) – non-site |
| Activity date: | on 29 May 2024 |
| Performance report date: | 27 June 2024 |

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.

# Service included in this assessment

Home Care Packages (**HCP**) included:  
Provider: 522 West Australian Association of Polish Women Inc  
Service: 19186 Rainbow The Multicultural Aged Care Program

**This performance report**

This performance report for Rainbow The Multicultural Aged Care Program (**the service**) has been prepared by M Glenn, 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.

# Material relied on

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

* the assessment team’s report for the assessment contact (performance assessment) – non-site, which was informed by review of documents and interviews with consumers, staff and management;
* the provider’s response received 21 June 2024 acknowledging the assessment team’s report; and
* a performance report dated 15 January 2024 for an assessment contact – site undertaken from 7 November 2023 to 8 November 2023.

# Assessment summary for Home Care Packages (HCP)

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| Standard 6 Feedback and complaints | 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.

# Standard 6

|  |  |  |
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| Feedback and complaints | | HCP |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

Requirement (3)(d) was found non-compliant following an assessment contact undertaken in November 2023 as there was a lack of supporting documentation to show how the service reviewed feedback and complaints or identified associated continuous improvement opportunities to improve the quality of care and services.

The assessment team’s report for the assessment contact undertaken in May 2024 did not specifically outline improvement actions implemented by the provider in response to the non-compliance. However, the assessment team found feedback and complaints are reviewed and used to improve the quality of care and services. Staff and management described how consumers’ feedback and complaints informs continuous improvement, and feedback and complaints documentation shows how the service uses consumer feedback to improve the quality of services. An electronic system is used to log and monitor feedback, complaints and incidents, and includes actions taken. Feedback and complaints are reviewed at weekly staff and monthly governance meetings, where this is a standing agenda item to identify any concerns that have been raised. The service’s continuous improvement plan includes a number of entries relating to improving services and identifying ongoing staff training needs. Consumers interviewed said they can make suggestions regarding their services which the service takes on board.

Based on the assessment team’s report, I find requirement (3)(d) in Standard 6 Feedback and complaints compliant.

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)