Rosanna Fire Station Community House Incorporated

Performance Report

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| **Address:** | 232 Lower Plenty Rd ROSANNA VIC 3084 |
| **Phone:** | 03 9458 1935 |
| **Commission ID:** | 300679 |
| **Provider name:** | Rosanna Fire Station Community House Incorporated |
| **Activity type:** | Quality Audit |
| **Activity date:** | 12 August 2022 to 16 August 2022 |
| **Performance report date:** | 7 September 2022 |

# 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**

**CHSP:**

* Social Support Group, 4-B2KS6ED, 232 Lower Plenty Rd, ROSANNA VIC 3084

# Overall assessment of Service

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | CHSP | Compliant |
| Requirement 1(3)(a) | CHSP | Compliant |
| Requirement 1(3)(b) | CHSP | Compliant |
| Requirement 1(3)(c) | CHSP | Compliant |
| Requirement 1(3)(d) | CHSP | Compliant |
| Requirement 1(3)(e) | CHSP | Compliant |
| Requirement 1(3)(f) | CHSP | Compliant |
|  |  |  |
| Standard 2 Ongoing assessment and planning with consumers | CHSP | Not Compliant |
| Requirement 2(3)(a) | CHSP | Not Compliant |
| Requirement 2(3)(b) | CHSP | Not Compliant |
| Requirement 2(3)(c) | CHSP | Not Compliant |
| Requirement 2(3)(d) | CHSP | Not Compliant |
| Requirement 2(3)(e) | CHSP | Not Compliant |
|  |  |  |
| Standard 3 Personal care and clinical care | CHSP | Not Applicable |
| Requirement 3(3)(a) | CHSP | Not Applicable |
| Requirement 3(3)(b) | CHSP | Not Applicable |
| Requirement 3(3)(c) | CHSP | Not Applicable |
| Requirement 3(3)(d) | CHSP | Not Applicable |
| Requirement 3(3)(e) | CHSP | Not Applicable |
| Requirement 3(3)(f) | CHSP | Not Applicable |
| Requirement 3(3)(g) | CHSP | Not Applicable |
|  |  |  |
| Standard 4 Services and supports for daily living | CHSP | Not Compliant |
| Requirement 4(3)(a) | CHSP | Compliant |
| Requirement 4(3)(b) | CHSP | Compliant |
| Requirement 4(3)(c) | CHSP | Compliant |
| Requirement 4(3)(d) | CHSP | Compliant |
| Requirement 4(3)(e) | CHSP | Not Compliant |
| Requirement 4(3)(f) | CHSP | Not Applicable |
| Requirement 4(3)(g) | CHSP | Not Applicable |
|  |  |  |
| Standard 5 Organisation’s service environment | CHSP | Compliant |
| Requirement 5(3)(a) | CHSP | Compliant |
| Requirement 5(3)(b) | CHSP | Compliant |
| Requirement 5(3)(c) | CHSP | Compliant |
|  |  |  |
| Standard 6 Feedback and complaints | CHSP | Compliant |
| Requirement 6(3)(a) | CHSP | Compliant |
| Requirement 6(3)(b) | CHSP | Compliant |
| Requirement 6(3)(c) | CHSP | Compliant |
| Requirement 6(3)(d) | CHSP | Compliant |
|  |  |  |
| Standard 7 Human resources | CHSP | Compliant |
| Requirement 7(3)(a) | CHSP | Compliant |
| Requirement 7(3)(b) | CHSP | Compliant |
| Requirement 7(3)(c) | CHSP | Compliant |
| Requirement 7(3)(d) | CHSP | Compliant |
| Requirement 7(3)(e) | CHSP | Compliant |
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| Standard 8 Organisational governance | CHSP | Not Compliant |
| Requirement 8(3)(a) | CHSP | Compliant |
| Requirement 8(3)(b) | CHSP | Compliant |
| Requirement 8(3)(c) | CHSP | Not Compliant |
| Requirement 8(3)(d) | CHSP | Compliant |
| Requirement 8(3)(e) | CHSP | Not Applicable |

# 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 report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this 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.

# STANDARD 1 Consumer dignity and choice

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# CHSP Compliant

### 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

At the time of quality audit, the service was:

* delivering services under the social support program assisting consumers from all backgrounds to participate in activities of their choice.
* demonstrating consumers can maintain their dignity and their identity, in a culturally safe way.
* ensuring consumer are aware of their choices and encouraging decision making and independence.
* providing consumers with timely and clear information and protecting consumers privacy with established processes.

The Quality Standard for CHSP is assessed as compliant as six of the six specific requirements have been assessed as compliant.

**Assessment of Standard 1 Requirements**

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| Requirement 1(3)(a) | CHSP | Compliant |

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

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| Requirement 1(3)(b) | CHSP | Compliant |

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

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| Requirement 1(3)(c) | CHSP | Compliant |

*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) | CHSP | Compliant |

### *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) | 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) | CHSP | Compliant |

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

# STANDARD 2 Ongoing assessment and planning with consumers

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# CHSP Not Compliant

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

At the time of quality audit, the service was not:

* Undertaking assessments, care planning or reviews of consumers including the consideration of risks to consumer health and well-being, and ensuring enough information is available to support workers in the delivery of safe and effective care delivery.
* Supporting the identification of consumer centred specific goals and preferences.
* Discussing or providing information on advance care planning with consumers.
* Undertaking regular review of care and services for effectiveness.

The service did not offer a written response to the assessment teams report.

The Quality Standard for CHSP is assessed as not compliant as five of the five specific requirements have been assessed as not compliant.

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | CHSP | Not Compliant |

*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.*

Findings

The service did not demonstrate effective assessment and planning, including the consideration of risks to consumer health and well-being, and ensuring enough information is available to support workers in the delivery of safe and effective care delivery.

No consumers files were available for each consumer, as the service held only a registration form. Documentation reviewed by the assessment team did not capture information relevant to consumer risk and wellbeing, including My Aged Care referrals for support plans, service level assessments, or care planning documents.

* One consumer, following an enquiry to My Aged Care regarding increased social support, was provided an organisation’s program and service calendar. Following the completion of the participation form, attendance at the chosen group was arranged. The only information the service had available regarding the consumer, is a copy of the participation form indicating group attendance.

The service did not demonstrate it is adhering to its care plan policy as assessment, care plans and reassessment are not evidenced as being undertaken.

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| Requirement 2(3)(b) | CHSP | Not Compliant |

*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.*

Findings

The service did not evidence documentation to support assessment and planning processes to identify consumers current needs, goals and preferences including end of life planning.

Service documentation indicated, and consumers and representatives explained, they have not been provided with an opportunity to identify goals and preferences related to advance care planning and end of life planning by the service.

* Documentation for two consumers indicated a care plan was not created and the consumers where not provided an opportunity to identify their specific goals and preferences.

Service management explained to the assessment team that they were unaware assessment and care planning was to be undertaken and documented under CHSP.

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| Requirement 2(3)(c) | CHSP | Not Compliant |

*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.*

Findings

The service did not demonstrate that processes are embedded to support consumers and, as appropriate, the representative, in the planning of care and services.

Service documentation regarding consumers consists of a registration form for activities and programs. Service management explained that verbal discussion is held with consumers regarding the programs that are delivered at the social centre.

Consumers are not provided an opportunity to work in partnership with the service to ensure they are an integral part of the services they are provided.

* Seven consumers explained in different ways, that the service had not discussed assessment and care planning with them.

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| Requirement 2(3)(d) | CHSP | Not Compliant |

*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.*

Findings

The service did not demonstrate the outcomes of assessment and care planning are communicated to consumers and documented in their support plans to guide staff in effectively delivering care and services.

Service documentation found assessments and care planning is not undertaken on entry to the programs facilitated by the service. Additionally, service documentation indicated most consumers receiving social support services or attending programs are not registered with My Aged Care. Service management explained this information is not held by the service.

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| Requirement 2(3)(e) | CHSP | Not Compliant |

*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.*

Findings

The service did not demonstrate or evidence that consumer care is not regularly reviewed for effectiveness.

Consumer assessment and care planning is not undertaken at entry to the service and this information is subsequently not documented by the service.

Service management explained that monitoring information is not documented, and social support programs are self-directed by consumers. Additionally, communication with consumers is conducted verbally and not documented by the service.

No documented monitoring of consumers is undertaken by the service.

# STANDARD 3 Personal care and clinical care

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# CHSP Not Applicable

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

The Quality Standard for CHSP has not been assessed as the service does not provide personal or clinical care to consumers.

**Assessment of Standard 3 Requirements**

|  |  |  |
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| Requirement 3(3)(a) | CHSP | Not Applicable |

*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.*

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| Requirement 3(3)(b) | CHSP | Not Applicable |

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

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| Requirement 3(3)(c) | CHSP | Not Applicable |

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised, and their dignity preserved.*

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| Requirement 3(3)(d) | CHSP | Not Applicable |

*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.*

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| Requirement 3(3)(e) | CHSP | Not Applicable |

*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.*

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| Requirement 3(3)(f) | CHSP | Not Applicable |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| Requirement 3(3)(g) | CHSP | Not Applicable |

*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.*

# STANDARD 4 Services and supports for daily living

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# CHSP Not Compliant

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

At the time of quality audit, the service was:

* Supporting consumers through the delivery of a range of social support activities to maintain their connections to their community and maintain relationships with others.
* Supporting consumers emotional and psychological needs through activities and ongoing contact.

At the time of quality audit, the service was not:

* Undertaking referrals for consumers to other services as they are unaware of consumer’s needs.

The service did not offer a written response to the assessment teams report.

The Quality Standard for CHSP is assessed as not compliant as one of the five specific requirements reviewed have been assessed as not compliant.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 4(3)(b) | CHSP | Compliant |

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

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| Requirement 4(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 4(3)(d) | CHSP | Compliant |

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

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| Requirement 4(3)(e) | CHSP | Not Compliant |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

Findings

The service did not demonstrate that timely and appropriate referrals to individuals and other providers of care are made by the service.

Consumer assessments are not undertaken, and the service does not maintain records regarding the care needs of consumers.

Consumers receiving services under the social support program are not all registered with My Aged Care by the service, and subsequently referrals to other organisation’s for additional support is not possible through this platform.

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| Requirement 4(3)(f) | CHSP | Not Applicable |

*Where meals are provided, they are varied and of suitable quality and quantity.*

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| Requirement 4(3)(g) | CHSP | Not Applicable |

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 Organisation’s service environment

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# CHSP Compliant

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

At the time of quality audit, the service was:

* Providing a clean safe and welcoming environment to consumers.
* Improving facilities and equipment to increase the range of activities undertaken by consumers.
* Ensuring occupational health and safety hazards are addressed to minimise incidents and falls risks.

The Quality Standard for CHSP is assessed as compliant as three of the three specific requirements reviewed have been assessed as compliant.

## Assessment of Standard 5 Requirements

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| Requirement 5(3)(a) | CHSP | Compliant |

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

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| Requirement 5(3)(b) | CHSP | Compliant |

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

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| Requirement 5(3)(c) | CHSP | Compliant |

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 Feedback and complaints

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# CHSP Compliant

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

At the time of quality audit, the service was:

* Providing consumers and representatives with information on how they can provide feedback and raise complaints to the service.
* Documenting, reviewing investigating and trending verbal and written complaints through an open disclosure process.
* Providing information to consumers and representatives on advocacy, other external organisations, language and hearing impairment services to support feedback and raise concerns.

The Quality Standard for CHSP is assessed as compliant as four of the four specific requirements have been assessed as compliant.

## Assessment of Standard 6 Requirements

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| Requirement 6(3)(a) | CHSP | Compliant |

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

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| Requirement 6(3)(b) | CHSP | Compliant |

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

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| Requirement 6(3)(c) | CHSP | Compliant |

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

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| Requirement 6(3)(d) | CHSP | Compliant |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resources

# CHSP Compliant

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

At the time of quality audit, the service was:

* Demonstrating staff interactions with consumers and their representatives are kind, caring and respectful of each consumer’s identity, culture and diversity.
* Ensuring staff and volunteers are appropriately trained and undergo annual performance assessments.

The Quality Standard for CHPS is assessed as compliant as five of the five specific requirements have been assessed as compliant.

## Assessment of Standard 7 Requirements

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| Requirement 7(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 7(3)(b) | CHSP | Compliant |

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

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| Requirement 7(3)(c) | CHSP | Compliant |

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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| Requirement 7(3)(d) | CHSP | Compliant |

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

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| Requirement 7(3)(e) | CHSP | Compliant |

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance

# CHSP Not Compliant

### 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

At the time of quality audit, the service was:

* Ensuring consumers are involved in the development, delivery and evaluation of services provided under the social support program.

At the time of quality audit, the service was not:

* Documenting consumers information including the management of eligibility of consumers to access CHSP and social supports offered by the service.
* Ensuring that board members meet regulatory compliance such as undertaking and renewing police checks and completing statutory declarations as required under CHSP.

The service did not offer a written response to the assessment teams report.

The Quality Standard for CHSP is assessed as not compliant as one of the four specific requirements reviewed have been assessed as not compliant.

## Assessment of Standard 8 Requirements

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| Requirement 8(3)(a) | CHSP | Compliant |

*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) | 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) | CHSP | Not Compliant |

*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.*

Findings

The service did not demonstrate effective organisation and governance wide systems are embedded for information management and regulatory compliance.

The service could not provide information to clarify which consumers attending the social support programs delivered were receiving services under the CHSP funding, including the eligibility of consumers to access the funded services.

The service could not provide information to confirm eligibility for consumers to access the CHSP social support services when they also reside in residential aged care.

The service evidenced a deficiency of consumer files and documentation including assessments, care plans and progress notes.

Police checks for six out of the eight board members had expired at the time of the quality audit. The service could not confirm if the board members have completed statutory declarations, as required by the CHSP operational manual and Police check guidelines.

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| Requirement 8(3)(d) | CHSP | Compliant |

*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) | CHSP | Not Applicable |

*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

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.

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| Requirement 2(3)(a) | HCP | Not Compliant |

*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.*

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| Requirement 2(3)(b) | CHSP | Not Compliant |

*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.*

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| Requirement 2(3)(c) | CHSP | Not Compliant |

*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.*

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| Requirement 2(3)(d) | CHSP | Not Compliant |

*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.*

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| Requirement 2(3)(e) | CHSP | Not Compliant |

*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.*

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| Requirement 4(3)(e) | CHSP | Not Compliant |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| Requirement 8(3)(c) | CHSP | Not Compliant |

*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.*