**Performance**

**Report**

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name: | Star Community Services |
| Commission ID: | 700911 |
| Address: | Shop 15, 152 Shore Street West, CLEVELAND, Queensland, 4163 |
| Activity type: | Assessment contact (performance assessment) – non-site |
| Activity date: | on 6 September 2024 |
| Performance report date: | 3 October 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.

# Services included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7739 STAR Community Services Ltd  
Service: 23967 STAR Community Services Ltd - Community and Home Support

**This performance report**

This performance report has been prepared by T Bartlett, 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 services it operates, 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.

# 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 report, which was informed by review of documents and interviews with staff, consumers, representatives and others
* the provider’s response to the Assessment Team’s report received 24 September 2024
* the Performance report dated 17 May 2024 in relation to the Assessment contact (performance assessment) – site undertaken 4 April 2024 to 5 April 2024
* the Performance report dated 11 September 2023 in relation to the Quality Audit undertaken 27 April 2023 to 3 May 2023.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

|  |  |
| --- | --- |
| Standard 2 Ongoing assessment and planning with consumers | Not 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.

Standard 2 Requirement (3)(d) – CHSP

* Ensure outcomes of assessment and planning, including consideration of risks to consumer health and well-being are effectively communicated to the consumer and documented in a care and services plan readily available to the consumer where care and services are provided.

# Standard 2

|  |  |  |
| --- | --- | --- |
| Ongoing assessment and planning with consumers | | CHSP |
| 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. | Not Compliant |

Findings

Requirement 2(3)(d) was found non-compliant for CHSP following an assessment contact (performance assessment) – site, conducted between 4 to 5 April 2024. The provider could not demonstrate the outcomes of assessment and planning were consistently and effectively documented in a care and services plan which is readily made available to each CHSP consumer. Where a care plan existed, not all information in the care plan aligned with information gathered during reviews undertaken. Updates to care plans were not made and changes to CHSP consumers’ needs were solely recorded in the electronic database and mobile phone application. Management confirmed due to the large number of CHSP consumers receiving services (over 15,000) the provider was prioritising the development of care plans based on service type and risk.

The Assessment Team’s report for the assessment contact (performance assessment) – non-site conducted 6 September 2024 included evidence of actions taken by the provider in response to the non-compliance. These actions included the development and implementation of service level assessment tool templates, the review of the CHSP agreement to include the provision of a service plan, the development of a care and service planning policy diagram and flow chart and the prioritisation of conducting assessments with consumers receiving domestic assistance in the Logan River Valley region. At the time of 6 September 2024 assessment contact (performance assessment) – non-site, the provider had completed 62 out of 107 assessments.

The Assessment Team was not satisfied these improvements were effective and recommended Requirement (3)(d) of this Standard not met for CHSP. The Assessment Team provided the following evidence relevant to my finding:

* Five consumers and representatives interviewed could not recall receiving a copy of the consumer’s service plan.
* Staff stated they received sufficient information from the provider that enabled them to deliver care and services. However, staff advised they needed to seek relevant information and details, such as location of cleaning products, equipment and priority of tasks from consumers for whom they did not provide regular services.
* Transport drivers stated the manifest they receive includes all relevant trip information.
  + Review of the drivers’ manifest included pertinent information to ensure the delivery of safe and effective services. This included risks to consumers and relevant health information which impacts transport service provision. The Assessment Team was satisfied the manifest was a form of a service plan proportionate with the service provision.
* Management advised of pending technological configuration improvements that will enable the electronic system to prepopulate details from assessments conducted to a service plan. This improvement is estimated to be completed in the 6 to 8 weeks after the assessment contact (performance assessment) – non-site conducted 6 September 2024.
* Management spoke about the difficulty in completing assessments and service plans due to the volume of CHSP consumers. The provider did not have an estimated completion date for conducting assessments and finalising service plans.
* Management indicated additional staffing resources would be made available to support the completion of assessments and service plans.
* The provider did not demonstrate assessment and planning is documented and readily available for CHSP consumers receiving social support, home modification and home and garden maintenance.

In response to the Assessment Team’s report the provider acknowledged aspects of the Assessment Team’s findings and provided the following additional information and evidence relevant to my finding:

* Explanation a proportional assessment and planning approach is taken due to the nature of CHSP services provided.
* Explanation there are multiple documents that provide information that represents a service plan that include documented client needs and preferences.
* Explanation the continuous improvement plan includes the development of a service plan template.
* Explanation recruitment of additional staffing resources have occurred to ensure completion of service plans or similar documentation that reflect consumer needs, preferences and risks identified from service level assessments completed.
* Explanation consumers can be provided a copy of service plans upon request.
* Explanation the board receives monthly status updates of continuous improvement actions in progress.
* Explanation the Assessment Team did not request service plans available for CHSP minor home and garden maintenance, home modification nor social support services provided.
  + Explanation, and evidence provided, CHSP minor home and garden maintenance and home modification service plans are represented in the form of a work order.
  + Explanation, and evidence provided, staff work in partnership with consumers to document their needs and preferences on work orders that include preferred dates and times of service delivery.
  + Explanation, and evidence provided, consumers sign off on work orders to confirm work completed was in accordance with their needs and preferences.
  + Explanation, and evidence provided, CHSP social support individual service plans are represented as email confirmations of preferred scheduled session type, date and time.
  + Explanation, and evidence provided, CHSP social support individual consumers are provided written information during services to document their goals.
  + Explanation CHSP social support group consumers needs and preferences are communicated to transport drivers via the manifest.
* Explanation service agreements and related attachments consumers are requested to sign provide information regarding the outcome of assessment and service planning.
* Acknowledgement consumers and representatives may not recall assessments conducted or service plans received having not interpreted phone contact being consistent with service level assessments.
* Acknowledgement work orders for CHSP domestic assistance service work orders were generic in nature and would be improved to reflect more individualisation of consumer needs and preferences.
  + Explanation sample consumer goals have been developed to assist staff to work in partnership with consumers to build individualised service plans and work orders.
* Confirmation pending technological configuration improvements that will enable the electronic system to prepopulate details from assessments conducted to a service plan will occur in the 6 to 8 weeks after the assessment contact (performance assessment) – non-site conducted 6 September 2024.
* Confirmation CHSP social support individual, social support group and some domestic assistance consumers have yet received service level assessments nor service plans and estimate completion 3 months after technological configuration improvements have been implemented.
* Acknowledgement of the importance to effectively communicate consumer needs and preferences to staff and offer a copy of recorded information to consumers.

In coming to my finding, I have considered the information in the Assessment Team’s report and the provider’s response, which does not demonstrate 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.

I have considered the intent of the Requirement, which expects outcomes of assessment and planning, including consumer needs, preferences and health and safety risks are documented in a care and services plan.

I acknowledge due to the nature of CHSP services provided a proportionate assessment and planning approach is in place and care and service plans are in the form of several documents that show an overview of the care and services to be delivered.

However, the intent of this Requirement also expects relevant risks to consumer’s safety, health and well-being are documented in care and service plans. I find no evidence to suggest work orders that suffice as care and service plans for minor home and garden maintenance, domestic assistance services or home modification services, acknowledge nor document consumer risks or mitigating strategies. Rather, I find work orders are task orientated based on consumer need. The absence of documented consumer risks and mitigating strategies does not provide me with confidence staff have all relevant information required to safely complete services.

I acknowledge active plans in progress, including the hiring of additional staff and pending technological configuration improvements to streamline the generation of care and services plans. However, I find further time is required to ensure the effective implementation and embedding of improvement plans.

Based on the information summarised above, I find the provider, in relation to the CHSP service assessed, non-compliant with Requirement (3)(d) in Standard 2 Ongoing assessment and planning with consumers.

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)