**Performance**

**Report**

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| Name of service: | Wyong Community Transport |
| Service address: | 1/6, Hereford St Berkeley Vale NSW 2261 |
| Commission ID: | 200426 |
| Home Service Provider: | Community Transport Central Coast Ltd. |
| Activity type: | Quality Audit |
| Activity date: | 11 October 2022 to 13 October 2022 |
| Performance report date: | 8 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 Wyong Community Transport (**the service**) has been prepared by G. McNamara, 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

**CHSP:**

* Social Support - Individual, 4-7XVHV0V, 1/6, Hereford St, Berkeley Vale NSW 2261

# 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.
* the provider’s response to the assessment team’s report received 3 November 2022.

# 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 | **Not Applicable** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **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)(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.

# Standard 1

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

Findings

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

Consumers described staff and drivers as kind, caring and respectful. All consumers sampled advised they are treated with dignity and respect, and that the service recognises and values their identity, culture and diversity through the delivery of high-quality services by competent and caring drivers. All consumers interviewed advised that they were independent in being able to make their own decisions and they communicate their requirements for their transport services. Representatives stated they liaise with the service on behalf of their family member. While consumers did not speak directly about taking risks, they advised they choose transport destinations, and the service supports them to undertake them safely. Consumers confirmed they are provided with timely and relevant information when they first commence at the service, and when something changes with the service.

Staff and drivers described, in various ways, how they provide good customer service by listening, treating everyone as they would like to be treated and recognising that every consumer has a story. Staff and volunteers demonstrated understanding of consumer’s cultural background and described how they ensure services reflect consumers’ cultural needs and diversity. Staff also described how they support consumers and their representatives to exercise choice and make decisions about how their transport service will be delivered. Drivers advised that they receive alerts and reminders on their manifest to advise of any risks for consumers, and know how to manage these risks. Staff advised they email information to consumers who have indicated a preference for emails or where there are identified hearing impairments and the consumers have nominated email as their preferred communication option. Staff and drivers described the ways they are supported to respect privacy and confidentiality.

Management advised staff and volunteers are guided by the service’s policies and procedures to ensure they respect consumers’ dignity and culture. Management described instances when they supported culturally safe services and provided details of cultural awareness training for the highest cultural group in the region, as informed by the most recent census data. Management stated that consumers have a choice in where they travel and when they travel and will accommodate all consumers, pending driver and vehicle availability, and that where risk has been identified for consumers, the social support individual service is implemented to mitigate any risks.

The service’s Diversity policy describes how the service will maintain a service culture that is inclusive and welcoming and that celebrates community diversity in all its forms. The Information pack provided to all consumers includes operational information regarding booking of services, transport program fee protocols, and consumer rights and responsibilities. While the service has a Consumer Information Booklet, management advised not all consumers receive the booklet, due to the large volumes of consumers receiving transport services, however it advised that the booklet is being revised and described processes for providing information to consumers.

# 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. | Non-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 |
| 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 |
| 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 |
| 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 |

Findings

I have assessed this Quality Standard as non-compliant as I am satisfied that requirement 2(3)(a) is non-compliant.

In relation to requirement 2(3(a), while all consumers and representatives interviewed advised drivers provide an exceptional door to door service to consumers and provide some assistance when it is needed, and advised they felt safe when being transported, the Assessment Team found that the service did not demonstrate that 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.

While there was evidence of risk assessments of the consumer’s home completed either virtually or by the driver on the first transport visit to identify risks for access for vehicles and terrain, there was inconsistent evidence of comprehensive assessments of all risks to the consumers’ health and wellbeing. For some consumers, while key risks had been identified, these had not been assessed and strategies to manage those risks had not been documented. Manifest information provided to drivers did not consistently include sufficient detail about assessed needs and risks to guide drivers in managing the risks for consumers.

Management advised they use information from My Aged Care (MAC) to inform consumers’ restrictions in mobility or other medical conditions. However, the Assessment Team noted the service does not access or view the MAC support plan to review the consumers’ medical conditions and assessed needs to identify risks for consumers. The Assessment Team reviewed documentation for 10 consumers and identified that, while the service has identified risks such as high support needs and hearing impairment for 2 consumers, assessment and planning for all consumers reviewed did not identify potential risks to consumers when using the transport service, such as macular degeneration, mild vascular dementia, falls and the use of mobility aides. This information was added to consumer documentation by the approved provider during the Quality Audit.

The Assessment Team also found that consumer documentation reviewed did not include strategies to guide staff in how to provide care that was tailored to the individual needs of the consumers and supported their functional capacity. It also found that while the service has a When Customer is not at Home/Destination procedure, staff and management did not demonstrate that the service is requesting and recording consumers for individualised strategies, as outlined in the procedure. In one instance a driver stated they would not feedback seat belt assistance to the office to record it on the consumers’ file, if they found a consumer required that level of assistance.

In its written response the provider acknowledged that it conducts a low level of post referral assessment, and stated that as a consequence of the information provided by the Assessment Team it is developing a training program for intake staff to review MAC support plans. The Assessment Team noted that the organisation stated that a new consumer database was being implemented which can be used to document consumer risks and strategies to manage these risks. In its written response the provider noted it will continue development of this process. It also noted it would ensure staff are appropriately trained when transitioning a client from transport only to social support. In this regard I believe the organisation needs to consider, in a manner proportionate to the services it offers, how it assess and plans for consumers, including consideration of risks, in relation to all services it delivers.

The provider also noted that further training and instruction would be given to drivers to remind them of the procedures for no-show at door events and to report special needs not listed on a consumer’s profile.

I have taken into account feedback from drivers about how they get to know the consumers over time, and staff input that there are additional questions asked of consumers at intake and recorded in its system. I also note that the service’s Assessment procedure outlines the requirement to undertake initial assessment which will identify the consumers abilities. I acknowledge the prompt action taken by the approved provider to update consumer documentation when identified by the Assessment Team.

However, I believe the improvements identified by the provider will take time to become embedded and for the provider to demonstrate their sustainability.

I find requirement 2(3)(a) non-compliant.

In relation to requirement 2(3)(b), the Assessment Team found that the service was not able to demonstrate 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. I consider that information relates to requirement 2(3)(a) and have considered it under that requirement, and find requirement 2(3)(b) compliant.

In relation to requirement 2(3)(b), consumers interviewed felt they were receiving the transport services they need, and their goals were to be assisted to attend medical appointments, shopping, and/or to visit family and friends. The Assessment Team found that there was no evidence that advance care planning had been raised with consumers, and that it does not provide consumers with brochures or information regarding advanced care or end of life planning. The service indicated that given the episodic nature of the service provided, consumers are not asked to participate in discussions regarding end of life or advanced care planning. In this regard the provider is encouraged to consider the extent to which it engages with its consumers in relation to advanced care planning and end of life planning as appropriate to the services it provides.

I consider that the provider is compliant with requirements 2(3)(c), 2(3)(d) and 2(3)(e). Consumers and representatives interviewed described how they are involved in making decisions about the services consumers get and staff contact them on a regular basis to discuss their services and seek feedback. While the service does not provide a care plan to consumers, consumers stated they receive adequate information and communication regarding their transport services and do not require a care plan. Sampled consumers and/or representatives confirmed consumers’ services are reviewed regularly and they can update their information if required, including when their circumstances had changed.

Sampled consumers and/or representatives confirmed consumers’ services are reviewed regularly and they can update their information if required, including when their circumstances had changed. Staff and driver delivering services described how they work collaboratively in scheduling and delivery of consumer’s services.

Staff and management described how they work collaboratively with others, including representatives; GPs; other stakeholders and service providers, in scheduling and delivery of consumers’ services. Staff described how they liaise with other service providers of aged care services, on behalf of consumers. Management they described their liaison with the Central Coast Local Health District for hospital transfers for wound care, and transport for consumers to their cancer treatments with other organisations.

# Standard 3

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| Personal care and clinical care | | 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. | Not applicable |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Not applicable |
| 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. | 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. | Not applicable |
| 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. | Not applicable |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Not applicable |
| 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. | Not applicable |

The service does not provide clinical or personal care therefore this Standard is not applicable.

# Standard 4

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

Findings

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as five of the five applicable requirements have been assessed as Compliant.

All consumers stated, in various ways, how grateful they are for the transport services they receive as they can attend important medical appointments and have an opportunity to join social outings through their schedule of events. Consumers and/or representatives confirmed that the transport and social support individual services enable consumers to do things of interest, either individually or in a group, and to maintain social relationships. They also stated that provision of transport services is generally consistent, with staff and volunteers who know them well, they have continuity of services, and they do not need to repeat their needs and preferences to multiple people, and that referrals are made in a timely manner.

Staff and management demonstrated how they support consumers emotionally and promote their psychological wellbeing and how services provided were tailored to their needs, goals and preferences, and optimised their independence, wellbeing and quality of life. Staff and volunteers described verbal and written communication processes within and outside the organisation and confirmed that information about consumers is effectively communicated to them, including when consumers’ services change.

Care planning documentation evidenced provision of services and support for daily living.

# Standard 5

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| Organisation’s service environment | | 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. | Compliant |
| 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. | Compliant |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Compliant |

Findings

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

Consumers provided positive feedback about the service's door to door transport service, stating it was a very friendly, comfortable and welcoming service and it was extremely valuable service in supporting their independence. They said they always feel they belong to the service as volunteers and staff make them feel welcome valued and respected. They also stated the vehicles and buses provided by CTCCL for their trips were always clean, comfortable and well maintained. They advised drivers always assist them to get on and off the vehicle and buses and provide a door-to-door service.

Staff and volunteers advised that consumer safety is paramount to their service. To support consumer independence, they allow consumers to get on and off the vehicles and buses but make sure they also assist them as required and needed. Staff stated there are no mobility hazards for consumers regarding small/tight spaces. If hazards are identified, they are followed up in-line with the hazard/incident policies and procedures at the service.

The Assessment Team observed the service vehicles and buses fitted with wheelchair hoists, foldaway steps and handrails to assist with getting on and off the transport. They were also observed to have sufficient space in and around the seats with well safety signposted for consumer independence. The Assessment Team also observed CTCCL vehicles and buses and found them to be clean, safe and well maintained. All vehicles and buses had safety signage and were equipped with a first aid and a spill kit. During the assessment a vehicle was observed going through the exterior clean process at the wash bay and an internal clean and sanitization process.

The service has processes and procedures to ensure a safe and comfortable environment is provided.

# Standard 6

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| Feedback and complaints | | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | 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 |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

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

Consumers interviewed said that they can and are supported to provide feedback and make complaints. Consumers advised they can raise their concerns directly to the drivers or the office staff without fear of reprisal. They stated they felt confident to raise a concern with the service, and they were aware that they could involve advocates, request an interpreter, or have their representative speak on their behalf. They further stated they were pleased with the responsiveness of the service and advised they hadn’t had to raise any issues but felt comfortable to do so and felt management would act on any issues quickly.

Drivers advised if they receive feedback and complaints from consumers, they record it on their daily “Driver sheet” under the feedback and complaints section and submit it to the office for action after each shift. Staff encourage consumers to provide feedback at every opportunity and provide information on how to do this in their information pack. Processes are in place for assistance with and access to advocacy or language services.

A feedback register is in place. The service also maintains a continuous improvement plan to monitor improvements.

# Standard 7

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| Human resources | | 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 |
| Requirement 7(3)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | 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 |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant |

Findings

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

All consumers interviewed said they were very happy and appreciative of the service delivered by the drivers and staff. The also said they found staff and drivers to be competent in delivering safe and quality service. They further stated they were very happy with the drivers and staff and found them to be kind, caring and respectful in delivering the services, and were satisfied with the knowledge and skills staff and drivers have. All consumers confirmed they are encouraged to provide feedback after every service and if there are any issues with staff or drivers in the way they provide services. All consumers advised they are currently satisfied with the services provided.

Staff and drivers described how they provide care and services to consumers in a kind and respectful manner including how they respect their privacy, cultural values and decisions made by consumers. Staff confirmed they underwent an induction program on joining the service and were required to complete mandatory training, which was monitored. Drivers and office staff were buddied with their peers upon commencing their roles. Drivers were provided three-day practical sessions with their buddy trainers before commencing driving on their own. This included getting familiarity with using the transport Manifest.

Management advised that when preparing the rosters, sufficient resources and mix of members are deployed to ensure delivery and management of safe and quality care and services. Driver rosters are prepared in-line with number of travel bookings. Volunteer drivers are rostered for ay shuttle which transport cancer patients to and from appointment and treatments. If there are no volunteer drivers available, then paid drivers are scheduled accordingly.

Recruitment processes in place assess workforce credentials and suitability. Performance management tests the competence and skills through aptitude assessments, which are completed at induction and annually to offer staff an opportunity to identify training and development needs. Training documentation was sighted and management monitor and record training (online and face to face) information sessions attended by staff, these include initial induction, annual mandatory training and specific professional development sessions. Management described processes for monitoring and reviewing staff performance. The employee performance review is governed by policies and procedures which guide the monitoring and review of the performance of staff. The Assessment Team sighted the performance appraisal of sampled staff. Management advised the sub-contractors/brokered service providers contracts are reviewed regularly.

# Standard 8

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| Organisational governance | | 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 |
| 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 |
| 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. | 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 |
| 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. | Not applicable |

Findings

The Quality Standard for the Commonwealth Home Support Programme service is Compliant as four of the four applicable requirements have been assessed as Compliant.

Consumers interviewed provided examples of where they have provided feedback to the service, including through consumer phone satisfaction surveys, general driver feedback forms and verbal feedback to drivers. They outlined interactions with staff and complimented their responsiveness and indicated they were satisfied with the service they received.

Staff stated the service is well run and advised management is responsive to consumer feedback and where possible are flexible to ensure consumer preferences are met based on individual consumer circumstances. Staff also stated that they seek consumer feedback when reviewing their change of needs. Management said feedback from drivers is the major engagement in service improvements such as feedback from social group trips and vehicle issue feedback. Staff also said roles and responsibilities are clearly defined for the governing body, management, staff and the drivers, and that management is always careful about the safety of consumers and they do regular checks of consumers’ home environment to ensure safety for all. They were aware of the incident and hazard reporting processes at the service and the need to record all incidents on an Incident Management System (IMS). They stated they could readily access the information they need including policies and procedures, staff communications and resources which inform best practice care delivery.

A Board Strategic Planning meeting was held in January 2022, where all staff were involved in strategic planning. Training sessions were held on specific areas such as cultural awareness, wellness and reablement and code of conduct. Effective risk management systems were seen to be generally in place, however under Standard 2 requirement 2(3)(b) issues were identified in relation to assessment and planning including consideration of risks to the consumer’s health and well-being, to inform the delivery of safe and effective care and services.

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)