



# Performance Report

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<b>Name:</b>	Custodian In-Home Services
<b>Commission ID:</b>	301106
<b>Address:</b>	358A Boundary Road, DINGLEY VILLAGE, Victoria, 3172
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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

Home Care Packages (**HCP**) included:

Provider: 10064 Custodian Aged Care Pty Ltd trading as Custodian In Home Services

Service: 28290 Custodian Aged Care Pty Ltd

## This performance report

This performance report has been prepared by L Glass, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)<sup>1</sup>.

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 Quality Audit report was informed by a site assessment, observations, review of documents and interviews with staff, older people/representatives and others.

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<sup>1</sup> The preparation of the performance report is in accordance with section 57 of the Aged Care Quality and Safety Commission Rules 2018.



## Assessment summary for Home Care Packages (HCP)

<b>Standard 1</b> Consumer dignity and choice	<b>Compliant</b>
<b>Standard 2</b> Ongoing assessment and planning with consumers	<b>Compliant</b>
<b>Standard 3</b> Personal care and clinical care	<b>Compliant</b>
<b>Standard 4</b> Services and supports for daily living	<b>Compliant</b>
<b>Standard 6</b> Feedback and complaints	<b>Compliant</b>
<b>Standard 7</b> Human resources	<b>Compliant</b>
<b>Standard 8</b> Organisational governance	<b>Compliant</b>

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 1

Consumer dignity and choice		HCP
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: <ul style="list-style-type: none"> <li>(i) make decisions about their own care and the way care and services are delivered; and</li> <li>(ii) make decisions about when family, friends, carers or others should be involved in their care; and</li> <li>(iii) communicate their decisions; and</li> <li>(iv) make connections with others and maintain relationships of choice, including intimate relationships.</li> </ul>	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

All consumers and representatives said consumers are treated with dignity and respect, and their identity and diversity are valued. Support workers were familiar with consumers' backgrounds, needs and preferences. Management advised the service works with consumers and their representatives to ensure staff meet the needs and preferences of each consumer.

The service demonstrated services are culturally safe. Consumers said staff and support workers understand them and their cultural needs and deliver care and services accordingly. Staff demonstrated understanding of consumers' cultural background and described how they ensured care and services reflect consumers' cultural needs and



diversity. Management said where possible they provide consumers with support workers from the same cultural community.

Each consumer is supported to exercise choice and independence and make and communicate decisions about their care and services, including when others should be involved. Consumers and representatives confirmed the service involved them in making decisions about the services consumers receive. Staff described how they support consumers and their representatives to exercise choice and make decisions about consumers' care and services.

Consumers are supported to take risks to enable them to live the best life they can. Consumers and/or their representatives described undertaking activities consumers enjoyed safely with appropriate supports. Management described regular conversations with consumers who engage in activities which involve an element of risk to ensure they understand risks and make informed choices.

Information provided to consumers is current, accurate and timely, and communicated clearly in a way that enables them to exercise choice. Consumers described how the service communicates with them over the phone and face-to-face in relation to what is happening at the service. Consumers said their monthly statements were accurate and easy to understand. Support workers and management confirmed information is provided to consumers in various ways and the documentation was sighted by the Assessment Team.

Each consumer's privacy is respected, and personal information is kept confidential. Consumers described their confidence in the service protecting their personal information. They said the welcome pack contains information about how their privacy and confidentiality will be maintained. Staff and management described their privacy and confidentiality procedures. Management advised staff were respectful of personal information and demonstrated effective systems in place to protect consumers' privacy and personal information.



## Standard 2

Ongoing assessment and planning with consumers		HCP
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
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:  (i) 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  (ii) 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

Representatives said the service seeks to understand consumer needs and preferences through the assessment and planning process. Clinical and case management staff discussed the initial and ongoing assessment and planning process and how risk is considered. Staff demonstrated the use of best practice risk assessment tools such as those relevant to falls. Support workers described their understanding of consumers' needs and risks enabling them to provide appropriate service delivery and demonstrated accessing information through the mobile phone application. Documentation evidenced



tailored care plans and task lists for 5 sampled consumers including needs, goals, preferences and risk assessments.

Representatives said care and services provided were reflective of consumer's needs, goals and preferences including discussions about advance care planning. Case management and clinical staff demonstrated how consumer advanced care wishes and goals are discussed and documented during an initial meeting and then ongoing. A review of consumer care plan documentation evidenced notation of these discussions in consultation with the consumers and/or their representative.

Representatives feel supported to be involved in deciding consumer services. Case management and clinical staff explained the way they keep consumers and representatives involved and how they regularly contact consumers and representatives to 'check in'. Staff discussed and demonstrated how changes to consumer care plans and task lists are updated and documented in the electronic management system. Care documentation reflects the consumers' chosen representatives and the involvement of others such as, allied health professionals and medical officers.

Representatives discussed consumer care plans in a way that reflected knowledge about which services occurred on what day and with which staff. Support workers and management demonstrated shifts and information on the consumer is accessed through a mobile phone application and the organisation's electronic management system. Changes to consumer care plans are updated in the electronic management system and available to staff and to consumers and representatives who request a copy for their records.

The representatives confirmed the service contacts and visits consumers regularly. All representatives said services have been reviewed as consumer needs or condition changed. Case managers described and demonstrated how referrals are made, and care plans are updated for example, annually or when consumers request it or circumstances change.



## Standard 3

Personal care and clinical care		HCP
Requirement 3(3)(a)	Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that: <ul style="list-style-type: none"><li>(i) is best practice; and</li><li>(ii) is tailored to their needs; and</li><li>(iii) optimises their health and well-being.</li></ul>	Compliant
Requirement 3(3)(b)	Effective management of high impact or high prevalence risks associated with the care of each consumer.	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
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
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
Requirement 3(3)(f)	Timely and appropriate referrals to individuals, other organisations and providers of other care and services.	Compliant
Requirement 3(3)(g)	Minimisation of infection related risks through implementing: <ul style="list-style-type: none"><li>(i) standard and transmission based precautions to prevent and control infection; and</li><li>(ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.</li></ul>	Compliant



## Findings

While the service has the capacity to meet clinical care needs for consumers currently there are no consumers receiving clinical care services. Of those consumers receiving personal care, representatives confirmed care is tailored to consumer's needs. Support workers described how they provide care that is safe, effective, and best practice by following care plans, task lists and organisational policy/procedures. Case managers described how they contact and visit consumers and representatives to ensure consumers are receiving care that is safe and right for them. Documentation evidenced targeted supports to guide the delivery of safe and effective care and to optimise consumer's health and well-being.

Representatives expressed satisfaction with the management of consumer risks. Staff interviewed identified and discussed risks associated with the care they provide consumers. Staff outlined the ways they minimise risks, aligning with representative feedback and documentation reviewed. Staff and management described and demonstrated how high-impact or high-prevalence risks are identified and analysed. During the quality audit management identified an opportunity to improve how for example, incident analysis is reported to drive training and continuous improvement.

The service does not provide in home end of life care and thus related needs, goals and preferences do not form part of initial and ongoing assessment and planning. Staff said end of life care would typically occur in hospital or a hospice. Clinical and case management staff discussed and demonstrated how they seek to understand consumers advanced care wishes and goals.

Representatives said staff know consumers well and expressed confidence staff would identify and respond in a timely manner to any consumer deterioration or change. Support workers demonstrated knowledge of their responsibilities in reporting consumer deterioration or change to the case manager, calling emergency services, and documenting progress notes. Care documentation reflected consumer deterioration being reported and actioned. All staff demonstrated understanding of consumer deterioration or change in line with understanding from representative interviews, documentation reviewed and organisational policy and procedures.

Representatives expressed satisfaction that consumer condition, needs, and preferences are communicated within the organisation and with others where care is shared. Consumer consent enables information to be shared internally and externally where responsibility for care is shared. Support workers said they receive sufficient information about each consumer. Care documentation including progress notes, showed information is appropriately communicated to others involved in care.

Representatives were satisfied that when needed, the service enables appropriate individuals, other organisations and service providers to become involved in care and service delivery. Clinical staff and case management described the process for referring consumers to other health professionals. Care documentation demonstrated timely



referrals were made in response to an identified need, including to various allied health professionals.

Representatives described satisfaction with the actions staff take to protect the consumer from infection. All staff interviewed confirmed they have completed hygiene and infection prevention and control (IPC) training modules. Staff described their use of personal protective equipment (PPE) including gloves, aprons and masks. The service has a dedicated infection prevention and control registered nurse who described and demonstrated infection incident analysis and reporting, staff training, competencies and a consumer and staff vaccination program.



## Standard 4

Services and supports for daily living		HCP
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: <ul style="list-style-type: none"> <li>(i) participate in their community within and outside the organisation's service environment; and</li> <li>(ii) have social and personal relationships; and</li> <li>(iii) do the things of interest to them.</li> </ul>	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.	Compliant
Requirement 4(3)(g)	Where equipment is provided, it is safe, suitable, clean and well maintained.	Compliant

### Findings

Representatives reported the service's consumers receive help to maintain independence and quality of life. Staff interviewed described the various activities and outings that were most important to consumers. Staff said they feel the service is doing all they can to support each consumer's independence and quality of life. Clinical and case management staff demonstrated the service ensures the support they provide optimises consumer independence and quality of life. Consumer documentation outlined the services that are most suited to each consumer.



Representatives expressed confidence staff recognise if consumers are feeling low and would support them appropriately. Support staff described how they would be able to recognise if any of the consumers were feeling low and described the various ways, they support consumer emotional, spiritual and psychological wellbeing, such as offering space to discuss concerns privately and supporting consumers to engage other formal or informal supports. Consumer care documentation included considerations of emotional, spiritual, and psychological well-being of consumers.

Representatives stated that consumers are assisted to participate in the community, go shopping or do activities that they like. Staff described and demonstrated how they support consumers. Care documentation reflects consumer participation in community access activities to meet their needs, goals and preferences.

Representatives said support workers know the consumers' daily living needs and provide individual support which is well coordinated, with continuity of services and supports. Staff described how consumer information is updated when changes in the consumer's condition, needs and preferences occur. Care documentation showed that communication with others responsible for care, including representatives, staff, and other services as appropriate, occurs with consumer consent to ensure services are coordinated.

Representatives were satisfied consumers had been referred to other care and services. Clinical staff and case management described the referral process if required when any consumers had a change in their circumstances. Care documentation showed examples of referrals to a range of services and supports for daily living.

The service does not directly provide meals to consumers. However, consumers can source their choice of prepared meals where meal delivery is partially funded through their Home Care Package. One consumer representative described how their mother is receiving delivered meals and described satisfaction with the choice, quality, and quantity of the meals. Staff advised that consumers choose their preferred meal provider and demonstrated how support consumers to choose meals in line with expressed nutrition and hydration requirements. Support workers said they assist consumers with putting frozen meals in the fridge and freezer and reheating the meals if requested.

Representatives said the service supports them in purchasing equipment and felt confident the service would assist them in accessing repair and maintenance when required. Support workers said the consumers' equipment was appropriate, clean and well maintained. Care documentation demonstrated consumer needs for equipment are assessed to inform suitable equipment and evaluation of equipment occur through allied health professionals.



## Standard 6

Feedback and complaints		HCP
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

Consumers, their family, friends, carers, and others are encouraged and supported to provide feedback and make complaints. Consumers and representatives said they were aware of the methods available to make complaints, provide feedback and felt supported by management to give feedback. Staff and management described the service's processes for the capture and resolution of feedback and complaints. The service has policies and procedures in place to guide staff practices.

Consumers are made aware of, and have access to advocates, language services and other methods for raising and resolving complaints. Whilst the main population of the service can communicate in English, some consumers are from non-English speaking backgrounds and families are able to assist with communication. Management discussed processes to ensure consumers have access to advocates and language services if required, and consumers are made aware of other methods for raising and resolving complaints.

Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. Consumers and representatives confirmed appropriate action is taken to address feedback and complaints, and felt the service has a transparent approach when things go wrong. Management discussed the service's processes for managing complaints. Complaints documentation demonstrated open disclosure is used as part of the complaint management process.

Feedback and complaints are reviewed and used to improve the quality of care and services for consumers. Consumers' feedback, complaints and suggestions are captured and recorded on the service's complaints register. Consumers and representatives said feedback is primarily given verbally and actions implemented are reviewed in consultation



with them to ensure satisfaction. The service has a continuous improvement policy which guides staff practice.



## Standard 7

Human resources		HCP
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 workforce is planned and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality services. Consumers and representatives stated they are happy with the number of, and the support provided by staff delivering care and services. Management discussed processes to ensure there are enough staff to deliver care and services.

Staff were kind, caring and respectful in their interactions with consumers. All consumers and representatives said staff were kind, caring, respectful and are responsive to consumers' needs. Documentation showed, and management described, how the service ensures staff employed meet their organisational values and expectations.

The workforce is competent, and staff have the knowledge to effectively perform their roles. Consumers advised they feel the workforce is competent and skilled. Staff described receiving ongoing training, and guidance from management to ensure they have the knowledge to deliver safe and effective care and services.

The workforce is recruited, trained, equipped and supported to deliver the outcomes required by the Quality Standards. Staff described completing relevant training and being supported in their role through regular access to the case manager for any consumer-related queries and reporting requirements. Management described processes of initial



selection and onboarding processes, induction and ongoing mandatory staff training, and regular communication with staff to provide information and support.

Management undertakes regular assessment, monitoring and review of staff performance. Staff confirmed they participate in performance reviews with management where they discuss their strengths, any areas of improvement and how management can support them. Management monitor staff performance through consumer feedback (compliments and complaints) and peer feedback. The service has policies and procedures in place to guide staff deliver best practice in care and services.



## Standard 8

Organisational governance		HCP
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)	<p>Effective organisation wide governance systems relating to the following:</p> <ul style="list-style-type: none"> <li>(i) information management;</li> <li>(ii) continuous improvement;</li> <li>(iii) financial governance;</li> <li>(iv) workforce governance, including the assignment of clear responsibilities and accountabilities;</li> <li>(v) regulatory compliance;</li> <li>(vi) feedback and complaints.</li> </ul>	Compliant
Requirement 8(3)(d)	<p>Effective risk management systems and practices, including but not limited to the following:</p> <ul style="list-style-type: none"> <li>(i) managing high impact or high prevalence risks associated with the care of consumers;</li> <li>(ii) identifying and responding to abuse and neglect of consumers;</li> <li>(iii) supporting consumers to live the best life they can</li> <li>(iv) managing and preventing incidents, including the use of an incident management system.</li> </ul>	Compliant
Requirement 8(3)(e)	<p>Where clinical care is provided—a clinical governance framework, including but not limited to the following:</p> <ul style="list-style-type: none"> <li>(i) antimicrobial stewardship;</li> <li>(ii) minimising the use of restraint;</li> <li>(iii) open disclosure.</li> </ul>	Compliant



## Findings

Consumers are engaged in the development, delivery and evaluation of care and services. Management and staff provided examples of how consumers are supported to engage in the development, feedback and evaluation of their experiences and services they are provided.

The organisation's governing body promotes a culture of safe, inclusive, and quality care and services and is accountable for their delivery. Whilst some meeting minutes were identified as not effectively recorded, in response the service implemented a range of reporting mechanisms to ensure the governing body is aware and accountable for the delivery of care and services.

The organisation demonstrated established, documented and effective organisation-wide governance systems in relation to information management, continuous improvement, financial and workforce governance, regulatory compliance, feedback and complaints.

An information management policy is in place to guide staff practice in relation to collecting, keeping, and disposing of consumer records to protect privacy and ensure confidentiality is maintained.

Consumers are encouraged to participate in continuous improvement initiatives by providing feedback via suggestions and complaints.

Financial governance is structured with reporting mechanisms in place overseen by the Director.

The service has policies and procedures in place in relation to workforce governance and the service was able to demonstrate the workforce is supported and developed to deliver safe and quality care and services to consumers.

The organisation has systems and processes to ensure support staff have valid police clearances, appropriate qualifications and first aid certification.

The organisation has a feedback and complaints policy and procedure in place and consumers are given information via the consumer handbook which describes the various ways consumers and representatives can make a complaint.

Effective risk management systems and practices were demonstrated in relation managing high impact or high prevalence risks associated with the care of consumers. There are effective risk management systems and practices in relation to identifying and responding to abuse and neglect of consumers, supporting consumers to live the best life they can, and managing and preventing incidents.

The service has a clinical governance framework, and associated policies and procedures, relating to antimicrobial stewardship, minimising the use of restraint and open disclosure. Consumers and representatives confirmed the service is open and transparent in their approach and notifies them when incidents occur.