Barossa Village Incorporated

Performance Report

The Residency - Atze Parade   
NURIOOTPA SA 5355  
Phone number: 08 8562 1977

**Commission ID:** 6023

**Provider name:** Barossa Village Inc

**Assessment Contact - Site date:** 5 October 2021

**Date of Performance Report:** 3 November 2021

# Performance report prepared by

Janine Renna, 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.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 5 Organisation’s service environment** |  |
| Requirement 5(3)(b) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | Compliant |

# Detailed assessment

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 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 Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the provider did not response to the Assessment Team’s report

# STANDARD 5 Organisation’s service environment

### 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

The Assessment Team assessed Requirement (3)(b) in this Standard at this Assessment Contact. As all other Requirements in this Standard were not assessed, an overall rating of the Standard has not been completed.

The Assessment Team recommended the service meets Requirement (3)(b) in this Standard, as the service was able to demonstrate the service environment is safe, clean, well maintained and comfortable, and enables consumers to move freely, both indoors and outdoors.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and I find the service compliant with Requirement (3)(b). I have provided reasons for my finding under the specific Requirement below.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(b) Compliant

*The service environment:*

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

The Assessment Team was satisfied the service demonstrated the environment is safe, clean, well maintained and comfortable, and enables consumers to move freely, both indoors and outdoors. The Assessment Team provided the following evidence relevant to my finding:

* Consumers considered they feel safe, and the environment is clean and well maintained.
* Staff described cleaning schedules of consumers’ rooms and communal areas, and the process for reporting maintenance issues and considered they are attended to promptly.
* Interviews with management and documentation showed a number of measures have been implemented following an incident where a consumer sustained injury after entering a construction area on the service’s grounds. These include:
  + repairing door locking mechanisms, automatic locking of doors and limiting window opening to restrict access to the construction area.
  + installation and monitoring of additional hoarding.
  + installation of a domestic doorbell.
  + reviewing consumer safety check processes.
* Maintenance logs demonstrate timely action is taken to address reactive and preventative maintenance requirements.
* The following observations were made by the Assessment Team:
  + the outdoor environment was clean and well maintained.
  + consumers were moving freely throughout the environment and communal areas were accessible.
  + fire access and egress doors were appropriately signed and clear of obstructions.
  + cleaning staff were observed attending to consumers’ rooms and common areas.
  + fencing surrounding the construction site was secured, and access to the area was limited by secured doors and card access swipes.
  + the internal kitchen door was unsecured and ajar.

management advised while the kitchen is in use, exhaust fans prevent the door from closing, however, this only during hours when the kitchen is staffed which poses minimal risk to consumers.

Based on the above evidence, I find the service compliant with Requirement (3)(b) in Standard 5 Organisation’s service environment.

# STANDARD 7 Human resources

### 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

The Assessment Team assessed Requirement (3)(a) in this Standard at this Assessment Contact. As all other Requirements in this Standard were not assessed, an overall rating of the Standard has not been completed.

The Assessment Team recommended the service meets Requirement (3)(a) in this Standard, as the service was able to demonstrate the workforce is planned to enable, and the number and mix of members of the workforce enables, the delivery and management of safe and quality care and services.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and I find the service compliant with Requirement (3)(a). I have provided reasons for my finding under the specific Requirement below.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) 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.*

The Assessment Team was satisfied the service demonstrated 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. The Assessment Team provided the following evidence relevant to my finding:

* Overall, consumers considered there are enough staff, and staff are adequately skilled to meet their care and service needs. Consumers felt staff do not rush when attending to their needs and call bells are usually responded to in a timely manner.
* Most staff considered they are able to get through their workload, however, four staff in one area of the service reported they find it challenging to get through their workload. Management stated they had commenced, but not yet finalised, a review to resolve the issue prior to the Assessment Contact.
* Care and service needs of all consumers are input into a spreadsheet, which calculates the required number and mix of staff per area and per shift. Management advised this spreadsheet is continually reviewed to keep up with the changing needs and preferences of consumers. There are processes in place for filling short term shifts and staff shortages.
* The service targets two staff each month to provide feedback in relation to workforce numbers, allocations and meeting consumers’ needs. Additionally, staff are encouraged and supported to provide feedback on the number and mix of staff via various channels.
* Management advised any call bell responses exceeding the seven minute call bell key performance indicator are reviewed and investigated monthly.
* Staff did not appear rushed when providing care and interacting with consumers, and call bells were answered in a timely manner.
* While documentation demonstrated some unfilled shifts in the three months preceding the Assessment Contact, complaints data did not demonstrate any complaints about staffing numbers during that period.

Based on the above evidence, I find the service compliant with Requirement (3)(a) in Standard 7 Human resources.

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.