Belmont Grange

Performance Report

34 - 36 Church Street
GROVEDALE VIC 3216
Phone number: 03 5243 8522

**Commission ID:** 3568

**Provider name:** Wickro Pty Ltd

**Assessment Contact - Desk date:** 9 July 2021

**Date of Performance Report:** 22 July 2021

# Publication of report

This Performance Report **may 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 2 Ongoing assessment and planning with consumers |  |
| Requirement 2(3)(d) | Compliant |

# Detailed assessment

This performance report details the Commission’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 - Desk; the Assessment Contact - Desk report was informed by a desk assessment by phone, review of documents and interviews with Management.
* The service’s Plan for Continuous Improvement submitted 01 April 2021

# STANDARD 2 Ongoing assessment and planning with consumers

### 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

The service demonstrated that all deficits identified in the previous Site Audit have been addressed and improvements implemented. Evidence was provided to the Assessment Team that the care planning process has been updated to ensure that care plans are available on request and this information is included in the Resident’s Handbook. Communication has been provided to staff, consumers and representatives around the process of requesting access to care planning documentation. This was evidenced by numerous methods the service used to convey the information such as the April Resident and Relative meeting, memos to staff, emails to consumer and representatives and “Partnering in Care” posters in the service.

The service has provided evidence of emails from representatives requesting care planning documentation for consumers. Evidence of the information provided to a representative was provided to the Assessment Team and includes medical, personal care, clinical care, behavioural and lifestyle plans of the consumer.

Staff training records confirm training has been completed with all clinical staff around the creation and distribution of the care planning documents for both consumers and representatives.

Based on the information provided, the service is compliant in Standard 2 requirement (3)(d).

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(d) 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.*

# 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.