Bene Aged Care - St Clair

Performance Report

2 Jelley Street   
WOODVILLE SA 5011  
Phone number: 08 8449 0900

**Commission ID:** 6838

**Provider name:** Italian Benevolent Foundation SA Inc

**Assessment Contact - Site date:** 22 December 2021

**Date of Performance Report:** 25 February 2022

# Performance report prepared by

Stewart Brumm, 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 7 Human resources** | **Non-compliant** |
| Requirement 7(3)(c) | Non-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.
* the provider’s response to the Assessment Contact - Site report received 14 January 2022.

# STANDARD 7 NON-COMPLIANT 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 Approved Provider was not able to demonstrate that staff had the knowledge in relation to infection control and COVID-19 preparedness to effectively perform their roles.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(c) Non-compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

The Assessment Team provided information that the approved provider did not demonstrate staff competency in relation to the potential management of a COVID-19 outbreak. Staff interviewed did not demonstrate appropriate knowledge and management did not demonstrate appropriate training has been provided to enable staff to safely and effectively perform their roles in the event of an outbreak at the service. Staff have not received training with regard to the service’s COVID-19 Outbreak management plan.

The Approved Provider provided a response that acknowledged the matters raised by the Assessment Team as well as a commitment to the ongoing safety of consumers and staff. The Approved Provider commenced improvement actions to address the matters raised and additional staff training was commenced.

I have considered the information provided by the Assessment Team and the Approved Providers response and I am persuaded by the information presented by the Assessment Team that the Approved Provider did not demonstrate compliance with this requirement at the time of the assessment contact.

I find this requirement is non-compliant.

# 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.

* Ensure the workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. Including in relation to infection control, and that orientation materials are consistent with information in relation to infection control for all levels of staff.