Bethanie Peel

Performance Report

2 Maclaggan Turn
COONDANUP WA 6210
Phone number: 08 9593 9370

**Commission ID:** 7211

**Provider name:** The Bethanie Group Incorporated

**Assessment Contact - Site date:** 29 April 2021

**Date of Performance Report:** 2 June 2021

# 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** |  |
| Requirement 7(3)(b) | 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 - 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’s response to the Assessment Contact - Site report received 6 May 2021.

# 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 Requirements

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

At this Assessment Contact, consumers and representatives were interviewed, including consumers who had previously been negatively impacted by staff practice. Whilst many of the consumers and representatives interviewed acknowledge that there had been previous issues with staff not being kind, all consumers and representatives interviewed stated that currently staff were kind and caring and respectful of the consumer’s identity, culture and diversity.

The Facility Manager (FM) stated that they are continuing to focus on setting clear expectations for staff behaviour towards consumers. This is being done by implementing individual training sessions on consumer dignity and choice for all staff, implementing coaching for staff from senior mentors and by implementing a robust performance review and monitoring process, which is supported by the organisation’s Human Resource team. The FM stated that these initiatives are now showing a positive impact on staff culture and improving the experience of care for consumers.

# 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.