Elizabeth Lodge (Rushcutters Bay)

Performance Report

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**Commission ID:** 0476

**Provider name:** Anglican Community Services

**Assessment Contact - Site date:** 3 December 2020

**Date of Performance Report:** 28 January 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 5 Organisation’s service environment** |  |
| Requirement 5(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 15 January 2021

# 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

Consumers and representatives who engaged with the Assessment Team said they are satisfied with the environment and the overall atmosphere and feel at home living in the service. Three consumers said they are happy with the improvements to the front courtyard. Consumers were complimentary regarding the new service manager’s engagement with them and the improvements that have been made overall.

The service provider has taken action to address environmental issues identified during the Assessment Contact conducted on 20 May 2020 which resulted in a plan for continuous improvement. However, the Assessment Team identified issues with the safety and comfort of the service environment.

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## 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 found that the service environment is not safe, clean, well maintained and comfortable and enables consumers to move freely, both indoors and outdoors.

The Assessment Team provided information that the service had made several improvements to address environmental issues identified during the Assessment Contact conducted on 20 May 2020 and had worked through these improvements with their plan for continuous improvement. While the Assessment Team found the service complies with the environment being clean, and enabled consumers to move freely, both indoors and outdoors; they identified issues with maintenance of the environment and safety and comfort.

Observations by the Assessment Team included the service was not able to demonstrate appropriate safe use of personal protective equipment, specifically face masks, access to personal protective equipment was not handy and accessible, minor maintenance issues with a drain and fire door were observed. One consumer discussed their comfort when discussing private matters with their medical officer.

The approved provider provided a response that included correcting some information in the report, clarification of some areas of the report, and evidence of corrective actions that have occurred since the assessment contact, including education provided, maintenance correcting issues, addressing privacy concerns, and improving access to personal protective equipment. I note they have planned a review of these improvements in the future to ensure they have been effective.

I have reviewed the Assessment Team’s reports and the approved provider’s response in which they have presented additional information that shows they are aware of their responsibilities. I acknowledge the efforts and actions the service has taken prior to the Assessment Contact to improve their cleaning; and I also accept the timings in meeting the concerns raised by the Assessment Team seem acceptable and robust.

I acknowledge this additional information has provided clarity and demonstrates the service environment is safe, clean, well maintained and comfortable, and enables consumers to move freely, both indoors and outdoors, therefore I find this requirement compliant.

# 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.