IRT Tarrawanna Care Centre

Performance Report

74/80 Caldwell Avenue
TARRAWANNA NSW 2518
Phone number: 02 4252 7000

**Commission ID:** 2616

**Provider name:** Illawarra Retirement Trust

**Assessment Contact - Desk date:** 17 September 2021 to 20 September 2021

**Date of Performance Report:** 25 October 2021

# Performance report prepared by

Pat Yin Lai, 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 6 Feedback and complaints** |  |
| Requirement 6(3)(c) | 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 - Desk; the Assessment Contact - Desk report was informed by a review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 6 Feedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

Most sampled consumers considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

For example:

* All consumers and representatives interviewed confirmed they knew how to provide feedback and make complaints, and they felt safe and comfortable in doing so. They felt comfortable talking to staff and felt that staff were advocates for them.
* Consumers and representatives stated there are a number of complaints mechanisms available to them including, meetings, email and feedback forms.
* Consumers said feedback is responded to in a timely manner and the issues are resolved to their satisfaction and when things have gone wrong and are reassured that it will not happen again.

The Assessment Team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

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

## Assessment of Standard 6 Requirements

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

The service demonstrated a feedback and complaint system available to consumers that ensures appropriate action is taken in response to complaints and an open disclosure process is used.

The Assessment Team interviewed a sample of consumers that noted that they are able to raise concerns and have it resolved by the service in a timely manner.

The Assessment Team also interviewed a sample of staff who could describe their process of recording, escalating and actioning complaints. Staff were able to provide examples of complaints which have been actioned and have led to improvement within the service. They could also demonstrate an understanding of open disclosure and how it is relevant to complaints.

The Assessment Team reviewed documentation relevant to the standards and noted that the service has a feedback and complaint policy, feedback forms available through the service, a complaint register with records of actioning complaints and using open disclosure, and minutes of consumer meetings that note the discussion of complaints with consumers.

The Assessment Team also noted improvements at the service that have occurred to address concerns at the previous performance assessment, including education delivered to staff around open disclosure, feedback and complaints being recorded in a new electronic feedback system, and ongoing monitoring occurring to ensure embedding of new processes.

Based on the evidence at the time of assessment, I find this requirement is 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.