Regis Dandenong North

Performance Report

5 Bakers Road
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Phone number: 03 9701 1244

**Commission ID:** 3652

**Provider name:** Regis Aged Care Pty Ltd

**Assessment Contact - Site date:** 1 July 2021

**Date of Performance Report:** 23 July 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

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| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(e) | 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.

# STANDARD 3 Personal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

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

For the requirements assessed under this Standard, the Assessment Team reviewed a sample of consumer care and other documentation, and, conducted interviews with staff, consumers/representatives and management.

Representatives interviewed for consumers sampled expressed satisfaction that consumers’ receive the care they need. Consumers’ care files evidence personal and clinical care that is effective and tailored to the specific needs of each consumer. There are policies and a suite of clinical documents to guide staff. Input from medical officers, allied health professionals and other specialist services is incorporated into documentation. Staff described examples of care relevant to consumers sampled. Consumers who require the use of chemical restraint are effectively assessed, monitored and reviewed and there is evidence that consultation with consumers and representatives occurs.

Representatives were satisfied that the service had discussed end of life wishes for consumers and that there was a plan in place to provide comfort, care and emotional support at the end of their life. Staff interviewed explained where they would find information related to end of life wishes and support services. There is a process in place to ensure that end of life wishes and needs are documented and that care is delivered in line with consumer wishes and consumer comfort is maintained.

Representatives interviewed are satisfied with treatments provided when infections are diagnosed, and they are aware of the service’s precautions to prevent and control infectious outbreaks. The service has policies and procedures, as well as equipment and supplies to manage both the COVID-19 pandemic and any other infectious outbreaks. Staff demonstrated an understanding of COVID-19 infection and described their role in managing a recent respiratory infection outbreak. Clinical staff described strategies to reduce the use of antibiotics.

Both requirements are assessed as compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

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

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# 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

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

The service demonstrated the workforce is planned and there are sufficient staff deployed to ensure delivery and management of safe and quality services. Consumers and representatives expressed mixed opinions about the sufficiency of staffing within the service but overall were satisfied with the quality of the care provided. Most staff described satisfaction with staffing numbers and advised they have enough time to undertake care needs of consumers. Roster documentation shows shifts are filled and call bell data mostly shows staff are responsive to consumer requests for assistance.

The service demonstrated regular assessment, monitoring and review of the performance of each member of the workforce. Staff confirmed they receive performance reviews and feedback from management. The service demonstrated a system for staff appraisal and performance management processes. Management demonstrated an example of application of review of performance.

Both requirements are assessed as compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# 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.