Ryman Aged Care Australia

Performance Report

242 Jells Road, (at Weary Dunlop Retirement Village)
WHEELERS HILL VIC 3150
Phone number: 03 9566 3900

**Commission ID:** 301024

**Provider name:** Ryman Aged Care (Australia) Pty Ltd

**Assessment Contact - Desk date:** 18 November 2021

**Date of Performance Report:** 4 January 2022

# Performance report prepared by

M Murray, 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.

**Services included in this assessment**

**Home Care:**

* Ryman Aged Care Australia Pty Ltd, 26423, 242 Jells Road, (at Weary Dunlop Retirement Village), WHEELERS HILL VIC 3150

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(d) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 4 Services and supports for daily living** |  |
| Requirement 4(3)(d) | 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 review of documents and interviews with staff, consumers/representatives.

# STANDARD 2 Ongoing assessment and planning with consumers

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

The Quality Standard does not have an overall compliance finding as only two of the five Requirements of Standard 2 have been assessed on this occasion.

The Requirements assessed are noted below together with the compliance finding.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

The Assessment Team provided evidence that relevant risk assessments are being consistently undertaken as part of the current assessment and planning process. Evidence included risk assessments for various consumers including those living with dementia and/or diabetes and those at risk of falls or complications from complex nursing needs such as catheter management. Consumers and representatives indicated they contributed towards assessment and care planning processes including how risks will be managed. Staff have received training on completing assessments and have undertaken competencies. The Assessment Team’s evidence supports a finding of compliance and demonstrates that the service has addressed deficits previously found in this Requirement.

The approved provider did not respond to the Assessment Team’s report.

Based on all the available evidence I find the approved provider complies with this Requirement.

### Requirement 2(3)(d) Compliant

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

The Assessment Team’s report states the approved provider has amended its processes to extend the audit of consumers’ file to include checks to monitor the consumer has been provided with a copy of their care plan. Overall consumers and representatives indicated they were able to understand the care information provided. The Assessment Team’s evidence supports a finding of compliance and demonstrates that the service has addressed deficits previously found in this Requirement.

The approved provider did not respond to the Assessment Team’s report.

Based on all the available evidence I find the approved provider complies with this Requirement.

# 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

The Quality Standard does not have an overall compliance finding as only one of the seven Requirements of Standard 3 have been assessed on this occasion.

The Requirements assessed are noted below together with the compliance finding.

### Assessment of Standard 3 Requirements

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

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

# STANDARD 4 Services and supports for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

The Quality Standard does not have an overall compliance finding as only one of the seven Requirements of Standard 4 have been assessed on this occasion.

The Requirements assessed are noted below together with the compliance finding.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

The Assessment Team provided evidence that information about the consumer is shared where relevant with staff delivering care and others external to the organisation supporting the health and wellbeing of the consumer. The service’s processes include file audits to ensure activities and lifestyle assessments including consumers’ needs and preferences have been completed and whether any external providers are reflected in care plans. Staff said they had sufficient relevant information to support consumers. Consumers and representatives were satisfied staff knew what was important for the consumer when assisting with social activities and more generally. The Assessment Team’s evidence supports a finding of compliance and demonstrates that the service has addressed deficits previously found in this Requirement.

The approved provider did not respond to the Assessment Team’s report.

Based on all the available evidence I find the approved provider complies with this Requirement.

# 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.