Southern Cross Care - MARION

Performance Report

342 Marion Road
NORTH PLYMPTON SA 5037
Phone number: 08 8291 8000

**Commission ID:** 600096

**Provider name:** Southern Cross Care (SA, NT & VIC) Inc.

**Assessment Contact - Site date:** 8 September 2020

**Date of Performance Report:** 8 October 2020

# 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 6 Feedback and complaints** |  |
| Requirement 6(3)(c) | 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 consumers, representatives, staff 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

## The Assessment Team assessed Requirement (3)(c) in relation to Standard 6. An overall assessment of all Requirements in this Standard was not completed.

## The Assessment Team recommended Requirement (3)(c) in Standard 6 as met. I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report to come to a view of compliance and find the service is compliant with Requirement (3)(c).

## Consumers and representatives interviewed stated staff and management are approachable and respond to their complaints in a timely manner. Consumers said the service enables and supports them to make complaints and stated changes are made by the service in response to their complaints and feedback.

## Complaints documentation viewed by the Assessment Team demonstrated complaints are investigated and review of care and services occurs. Additionally, complaints were noted to be managed in line with open disclosure processes. The Assessment Team discussed complaints management processes with two consumers who confirmed steps taken by the service and stated they were happy with the apology and resolution they received.

Clinical staff described complaints management processes and stated support workers are encouraged to report any concerns to them. Clinical staff stated they have access to policies and procedures relating to complaints management and open disclosure.

The service has processes to monitor complaints and feedback, including surveys, informal and formal meeting forums and audits. There are processes to trend and report complaints data.

For the reasons detailed above, I find the provider, in relation to Southern Cross Care - MARION, does comply with Requirement (3)(c) in Standard 6.

## 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.*

# 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.