Southern Cross Care Reynolds Court Residential Aged Care

Performance Report

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**Commission ID:** 0016

**Provider name:** Southern Cross Care (NSW & ACT) Limited

**Assessment Contact - Site date:** 27 January 2021

**Date of Performance Report:** 10 March 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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 Assessment Team’s infection control monitoring checklist completed during the site assessment.
* The provider’s response to the Assessment Contact - Site report received 22 February 2021.

# 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

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 and examined relevant documents – their care plans and assessments were reviewed, and staff were asked about how they ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

Overall the consumers sampled considered that they receive personal care and clinical care that is safe and right for them however the Assessment Team identified some gaps in falls management occurred with one consumer.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

### 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.*

The Assessment Team provided information that personal and clinical care delivered at the service is safe, effective and tailored for some of the consumers sampled. The service was able to demonstrate effective management of skin integrity, restraints and pain management however, the Assessment Team identified some gaps in falls management for one consumer.

Most consumers sampled said they receive good personal and clinical care and are happy with the care service provided however the service advised one consumer had raised a complaint regarding care provision and falls management. The Assessment Team provided information that the consumer no longer resides in the service and has been moved to another residential aged care service.

The approved provider in providing a response to the Assessment Team’s findings considers each consumer gets safe and effective personal care and clinical care. The approved provider’s written response includes they refute the team’s findings at the time of the site assessment.

In relation to the gaps in falls management the Assessment Team raised for one consumer the approved provider acknowledges there was differing directions to guide staff practice in the delivery of care. The approved provider gave further evidence to show the care provided was delivered in line with the consumer’s assessment. The provider acknowledged the documentation of care could have been improved. The approved provider clarified further information about falls management.

I have considered the Assessment Teams report and the approved provider response and I find at the time of the performance assessment consumers were getting safe and effective clinical care.

I find this requirement Compliant.

# 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

The Assessment Team interviewed consumers and representatives and overall received positive comments regarding the staffing levels at the service.

Documentation, including staff rosters and allocations sheets identified the workforce is planned and staff replaced when required to ensure the delivery and management of safe and quality care and services.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

## 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.*

The Assessment Team found that overall consumers were very satisfied with the staffing numbers at the service and spoke highly of the care and service they receive from staff. Consumers advised they do wait at times for assistance, but it does not impact on their health care needs. Two representatives provided feedback that some staff knowledge could be improved; the facility manager was following up these concerns with the representatives. Staff who spoke with the Assessment Team advised there is a process for staff replacement for unplanned leave. There has been re-allocation of work in one section of the service which has improved staff workload.

The service has a planned workforce to enable the delivery and management of safe and quality care and services.

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.