Trinder Park

Performance Report

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**Commission ID:** 5130

**Provider name:** Lutheran Church of Australia - Queensland District

**Assessment Contact - Site date:** 11 October 2021 to 12 October 2021

**Date of Performance Report:** 4 November 2021

# Performance report prepared by

Susan Turner, 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 5 Organisation’s service environment** |  |
| Requirement 5(3)(b) | 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 - 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.
* other relevant information held by the Commission including internal referrals received.

# 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 Assessment Team did not assess all the requirements of this outcome and therefore an overall summary for the Quality Standard is not provided.

### 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.*

The site audit report provided information that the service demonstrated the effective management of high-impact and high-prevalence risks associated with the care of each consumer.

Consumers/representatives said they feel consumers’ care is safe and right for them and staff respond promptly to any changes in their condition. Overall care documentation for the consumers demonstrated consumers receive effective personal and clinical care and effective strategies to manage key risks were identified and recorded for named consumers.

Review of consumer care documentation reflected key clinical risks are identified including falls, behaviours, skin integrity, diabetic management and smoking related risks.

Staff demonstrated an understanding of consumer’s individual needs and preferences and how they ensure these are met; including consideration of individual consumer’s risks. For example, for consumers who smoke, staff explained individual strategies implemented to minimise this risk and their specific smoking plan requirements.

The service demonstrated improvements implemented following the Site Audit of 27 - 29 April 2021, which included development of a plan for continuous improvement to address deficiencies in the management of high-impact and high-prevalence risks, with particular regard to smoking. All actions had been completed by 19 May 2021. Some of the actions taken included, the completion of risk assessments for all 23 consumers who smoke at the service with care documentation updated accordingly. Case conferences have occurred with consumers/representatives for those consumers considered to be high risk due to smoking or other complex behaviours.

I am satisfied that the service is effectively managing high-impact, high-prevalence risks and find this requirement is Compliant.

# STANDARD 5 Organisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

**Assessment of Standard 5**

The Assessment Team did not assess all the requirements of this outcome and therefore an overall summary for the Quality Standard is not provided.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

The site audit report provided information that demonstrated the service environment is safe, clean, well-maintained and comfortable, and enables consumers to move freely, both indoors and outdoors.

Consumers said they consider the service environment to be safe, well-maintained and comfortable and they are able to leave the service when they choose to.

Consumers said the service is cleaned to their satisfaction, and that cleaning staff attend to the consumer’s preferences for cleaning of their room.

The service had a maintenance schedule and review of documentation confirmed maintenance was conducted as scheduled and maintenance issues were addressed in a timely manner.

Staff described the process of reporting maintenance requests, including when a hazard had been identified. Staff documented maintenance issues through an electronic logbook. Cleaning staff said that they follow a schedule for cleaning and could describe infection control processes and extra cleaning requirements in relation to COVID-19.

The Assessment Team found equipment was clean, well maintained, and appropriate to consumer needs.

The service has implemented improvements related to the safety of the environment, specifically in regard to designated smoking areas, for example:

* The service has four designated outdoor smoking areas for consumers who choose to smoke, fitted with fire extinguishers, fire blankets, appropriate ashtrays and fire safety signage to support consumers to smoke a cigarette safely.
* The main smoking area has been extended for consumer comfort and is supported by close circuit television cameras which is monitored by staff.
* Consumers advised that staff assist and support them to smoke safely.
* Following the site audit of 27-29 April 2021, all 23 consumers who smoke, had risk assessments completed and had a smoking plan in place.
* Where appropriate, consumers smoking supplies are stored safely by staff and issued to consumers by request or according to their smoking plan.
* Consumers are now generally complying with smoking policy requirements.
* The Service requires consumers entering the service, who choose to smoke, to sign an agreement related to the service’s smoking policy requirements.

I am satisfied the service is safe and comfortable and promotes consumers’ independence and enjoyment. 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.