West Beach

Performance Report

655-671 Burbridge Road
WEST BEACH SA 5024
Phone number: 08 8353 3044

**Commission ID:** 6235

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

**Assessment Contact - Site date:** 10 June 2020

**Date of Performance Report:** 13 July 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 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(b) | 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 3 COMPLIANTPersonal 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 is assessed as Compliant as one of the seven specific Requirements has been assessed as Compliant. The Assessment Team assessed Requirement (3)(b) in relation to Standard 3. All other Requirements in this Standard were not assessed.

The Assessment Team recommended requirement (3)(b) in Standard 3 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 with Standard 3 and find the service is Compliant with Requirement (3)(b).

Overall, consumers and representatives sampled considered consumers receive personal and clinical care that is safe and right for them and were satisfied with management of high impact or high prevalence risks. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* One consumer was happy with pain management following a fracture and the equipment supplied to assist with their recovery.
* One representative was satisfied with behaviour management of their loved one stating staff are doing everything they can to make sure the consumer’s behaviour does not impact on them or anyone else. They also stated they know staff are “doing a good job” as the consumer’s behaviours have significantly reduced.

The service demonstrated an initial and ongoing assessment process which included risk-based assessment tools, such as malnutrition screening, wound assessments, pain and behaviour charting. Information gathered is used to develop a care plan which is based on each consumer’s assessed needs and preferences and includes consideration of high impact or high prevalence risks and management strategies. There are scheduled and ad hoc care plan review processes to ensure management strategies remain effective; reviews are undertaken in consultation with the consumer and/or representative.

There are processes to report and monitor high impact or high prevalence risks, including an incident management process. Incident data is monitored, collated and analysed for trends on a monthly basis.

### 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.*

# 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.