Performance

Report

**1800 951 822**

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| Name: | All Care Aged Care The Vales |
| Commission ID: | 6933 |
| Address: | 60-66 States Road, MORPHETT VALE, South Australia, 5162 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 25 October 2023 |
| Performance report date: | 13 November 2023 |
| Service included in this assessment: | Provider: 856 Tickled Pink Aged Care Pty Ltd  Service: 4342 All Care Aged Care The Vales |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for All Care Aged Care The Vales (**the service**) has been prepared by M Glenn, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

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 Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the assessment contact (performance assessment) – site report was informed by a site assessment, observations at the service, review of documents and interviews with consumers, staff and management; and
* a performance report dated 15 August 2023 for a site audit undertaken from 16 May 2023 to 19 May 2023.

The provider did not submit a response to the assessment team’s report.

# Assessment summary

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| Standard 2 Ongoing assessment and planning with consumers | Not Applicable as not all requirements have been assessed |
| **Standard 3** Personal care and clinical care | **Not Applicable as not all requirements have been assessed** |

A detailed assessment is provided later in this report for each assessed Standard.

# 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 required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 2

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| Ongoing assessment and planning with consumers | |  |
| Requirement 2(3)(b) | Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes. | Compliant |

Findings

Requirement (3)(b) was found non-compliant following a site audit conducted in May 2023 as care plans were not individualised and tailored to guide staff to provide care and services which were in line with each consumer’s needs and preferences and planned around what was important to them. The assessment team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Reviewed current assessment and care planning processes and engaged a consultant to provide education in the use of new assessment tools.
* Undertaken a systematic approach for review of all consumers’ care planning, with consumers identified to have high risk care and service needs prioritised.
* Allocated additional duties to a clinical staff member to formalise discussions with consumers at each care plan review to ensure their care and service needs, goals and preferences remain current.

At the assessment contact undertaken on the 25 October 2023, consumers confirmed their current needs, goals and preferences, including advance care planning and end of life planning, are discussed with them. Care files sampled included consumers’ needs, goals and preferences for care, including end of life wishes which are completed on entry and revisited with consumers at regular intervals. More comprehensive end of life planning is undertaken when the consumer reaches end of life, at which time an end of life care plan is commenced.

Based on the assessment team’s report, I find requirement (3)(b) in Standard 2 Ongoing assessment and planning with consumers compliant.

# Standard 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Compliant |

Findings

Requirement (3)(d) was found non-compliant following a site audit conducted in May 2023 as deterioration of condition was not effectively recognised or responded to in a timely manner resulting in negative impacts for two consumers. The assessment team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to,

* Developed a health deterioration guide to guide staff in identification and management of changes and deterioration in consumers’ condition, and engaged a consultant to provide education to ensure the new guide was fit for purpose.
* Implemented an additional monitoring form to document monitoring processes following identification of changes in a consumer’s condition.

At the assessment contact undertaken on the 25 October 2023, care files demonstrated appropriate and timely recognition and response to changes in consumers’ condition, including monitoring, assessment and referral to medical officers and/or allied health professionals. Care staff described their responsibilities where changes in consumers’ condition are identified, including escalation to clinical staff. Clinical staff said consumers identified as being unwell or having deterioration are commenced on a health deterioration form which prompts assessments, monitoring activities and observations which are discussed at each shift handover. Clinical staff who undertake the initial health deterioration form determine how often observations are to be conducted and liaise with representatives, and the medical officer in relation to treatment options. Significant deterioration and complex issues are discussed with the medical officer and site manager. Consumers said staff identify and respond to changes in their condition in a timely manner and implement further monitoring of their condition.

Based on the assessment team’s report, I find requirement (3)(d) in Standard 3 Personal care and clinical care compliant.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)