

**Performance Report**

**1800 951 822**

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| Name: | AnglicareSA Elizabeth East |
| Commission ID: | 6963 |
| Address: | 36c Halsey Road, ELIZABETH EAST, South Australia, 5112 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 31 October 2024 |
| Performance report date: | 22 November 2024 |
| Service included in this assessment: | Provider: 1197 Anglicare SA Ltd  Service: 4371 AnglicareSA Elizabeth East |

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 AnglicareSA Elizabeth East (**the service**) has been prepared by Katherine Richards, 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, representatives, staff, management, and others; and
* the provider’s response to the assessment team’s report received 19 November 2024.

# Assessment summary

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| Standard 2 Ongoing assessment and planning with consumers | Not fully assessed |
| **Standard 3** Personal care and clinical care | **Not fully 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 2(3)(b) was found non-compliant following a site audit undertaken between 30 April 2024 and 2 May 2024 as assessment and planning did not always capture or address consumer needs, goals, and preferences for mobility or personal hygiene. In response to the non-compliance the provider has implemented a range of improvements, including, but not limited to, undertaking review of care and services plans, discussing care planning needs during daily meetings, providing education for staff, and conducting a consumer survey to ensure care delivery aligned with preferences.

During the assessment contact undertaken on 31 October 2024, consumers and representatives said staff listened and understood what was important, which then informed care delivery. Care planning documentation evidenced assessment and planning effectively identified consumer needs, goals, and preferences, although palliative care goals at time appeared generic and therefore identical between consumers. In response to feedback, continuous improvement activities were developed to support education on tailoring goals and undertaking any required reviews. The provider’s response contends it is possible for consumer goals to be identical but personalised, however, confirms a review was undertaken to ensure information was reflective of consumer preferences, evidencing adjustments made to advance care plans in response to consumer feedback.

Based on the evidence before me, I find requirement 2(3)(b) of Standard 2 Ongoing assessment and planning with consumers compliant.

# Standard 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(a) | 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. | Compliant |

Findings

Requirement 3(3)(a) was found non-compliant following a site audit undertaken between 30 April 2024 and 2 May 2024 as consumers were not being administered time sensitive medications within therapeutic timeframes. In response to the non-compliance the provider has implemented a range of improvements, including, but not limited to, enhancing prompts, increasing monitoring and changing work responsibilities and processes when audits identified ongoing issues, providing training to staff, and discussing in daily meetings.

During the assessment contact undertaken on 31 October 2024, staff gave examples of how care and services were delivered in a safe and effective manner tailored to the consumer and demonstrated awareness of specific medication needs. Consumers and representatives said consumers received the care and services they needed. Care planning documentation evidenced effective management and monitoring of clinical care needs for consumers, although inconsistencies were noted within location of blood glucose level recording. The provider’s response acknowledged the correct procedure and included evidence of a reminder of this which was sent to all clinical staff on 14 November 2024.

Based on the evidence before me, I find requirement 3(3)(a) of 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)