Performance

Report

**1800 951 822**

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| Name of service: | Bene Aged Care - St Clair |
| Service address: | 2 Jelley Street WOODVILLE SA 5011 |
| Commission ID: | 6838 |
| Approved provider: | Italian Benevolent Foundation SA Inc |
| Activity type: | Assessment Contact - Site |
| Activity date: | 22 November 2022 |
| Performance report date: | 16 December 2022 |

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 Bene Aged Care - St Clair (**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 - 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 management; and
* a Performance Report dated 25 February 2022 for an Assessment Contact – Site undertaken on 22 December 2021.

The provider did not submit a response to the Assessment Team’s report.

# Assessment summary

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| Standard 7 Human resources | 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 7

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| Human resources | |  |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |

Findings

Requirement (3)(c) was found non-compliant following an Assessment Contact undertaken on 22 December 2021 where it was found the service did not demonstrate staff competency in relation to the potential management of a COVID-19 outbreak. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Reviewed the Outbreak management plan to provide clear guidance to staff regarding roles and responsibilities and to reflect legislative changes.
* Conducted COVID-19 preparedness meetings to discuss legislative changes and aged care industry updates.
* Undertaken simulation exercises to assess different aspects of the Outbreak management plan and test staff knowledge.
* Developed a COVID-19 protection framework flow chart to guide staff response in the event of an outbreak.
* Provided various education/training sessions and associated competencies for staff, including in relation to minimisation of infection related risks, such as hand hygiene and donning and doffing.
* Infection control monitoring checklists (Commission template) are completed monthly and undertaking random spot checks of staff practice.

At the Assessment Contact undertaken on 22 November 2022, documentation sampled demonstrated how the service ensures its workforce has the appropriate knowledge and qualifications through the recruitment process and by employing individuals with experience and expertise in their area of responsibility or providing specialist training. A range of training opportunities are available for staff, including using external organisations for specialist education advice. However, the Assessment Team noted the training register does consistently capture when staff have completed a module or register that a staff member is overdue. Management said they would investigate this issue. Staff sampled felt supported in their roles, said they receive an array of training and education and the service will provide additional training if requested. Consumers and representatives said staff know what they are doing, and they have confidence in them to perform their role effectively and safely.

For the reasons detailed above, I find Requirement (3)(c) in Standard 7 Human resources 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)