Performance

Report

**1800 951 822**

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| Name of service: | Bethsalem Care |
| Service address: | 10 Education Road HAPPY VALLEY SA 5159 |
| Commission ID: | 6088 |
| Approved provider: | Christadelphian Care Services (SA) Incorporated |
| Activity type: | Assessment Contact - Site |
| Activity date: | 6 July 2023 |
| Performance report date: | 26 July 2023 |

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 Bethsalem Care (**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.

The report also specifies any areas in which improvements must be made to ensure the Quality Standards are complied with.

# 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 others; and
* a Performance Report dated 1 May 2023 for an Assessment Contact undertaken 4 April 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 |

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)(e) | Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer. | Compliant |

Findings

Requirement (3)(e) was found non-compliant following an Assessment Contact undertaken 4 April 2023 where care and services were found to not be reviewed regularly for effectiveness and when circumstances changed or when incidents impacted on the needs, goals or preferences of the consumer. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Provided training to clinical staff relating to incident management, falls risk assessment tool, care plan updates and assessments, weight loss and pressure injuries.
* Implemented a new monitoring process to ensure assessments and care plans are reviewed by staff when consumers’ care needs change or following incidents.
* Completing daily audits of the incident register to ensure ongoing assessments of consumers’ changing care needs are addressed, strategies are implemented, and care plans updated.

At the Assessment Contact undertaken 6 July 2023, regular review of consumers’ care and services was found to be undertaken. Care files sampled demonstrated review of consumers’ care and service needs had been conducted in response to falls, pain, changed behaviours, and weight loss. Review processes included reassessment, implementation of monitoring charts and referrals to Medical officers and/or Allied health specialists. Care plans were noted to have been updated to reflect consumers’ current care and service needs. Consumers and representatives said they are involved in assessment, planning and review processes, including following changes or incidents.

Based on the Assessment Team’s report, I find requirement (3)(e) in Standard 2 Ongoing assessment and planning with consumers 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)