Performance

Report

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| Name of service: | BlueCross Monterey |
| Service address: | 858 Pascoe Vale Road GLENROY VIC 3046 |
| Commission ID: | 3650 |
| Approved provider: | Third Age Australia Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 12 September 2023 |
| Performance report date: | 13 October 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 BlueCross Monterey (**the service**) has been prepared by N Chahal, 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 staff, consumers/representatives and others.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 4** Services and supports for daily living | **Not applicable as not all requirements have been assessed** |
| **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 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

Consumers and representatives were satisfied that consumers are receiving safe care that supports their health and well-being in relation to the management of pain, skin integrity, and restrictive practices. Representatives confirmed providing informed consent and described their active involvement in the assessment and review of the consumers restrictive practices. Documentation including assessments, authorisations and behaviour support plans included evidence of informed consent, personalised strategies and regular review of the use of restrictive practices through a multidisciplinary approach. Staff demonstrated knowledge of each consumer’s care needs that align with the consumer's personalised assessed care needs. Care planning documents demonstrated consumers’ wound care, skin integrity, and pain are effectively managed to meet consumers individual needs in line with practice guidelines.

Based on the available evidence, I find Requirement 3(3)(a) is Compliant.

# Standard 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |

Findings

Consumers said they are satisfied with the services and supports for daily living they receive and confirmed that staff help them to do the things they want. All staff interviewed described the of needs, goals, and preferences consumers consistent with care documentation and individual consumer feedback. Staff demonstrated knowledge of initial and ongoing assessment and care planning processes and how this ensures individual consumer preferences are met. Care planning information reflected individualised life history, preferences, and strategies, including the type of services and supports provided and how they are delivered to support consumers' independence and well-being. Consumers were observed engaging in a variety of activities in line with the activity schedule.

Based on the available evidence, I find Requirement 4(3)(a) is Compliant.

# Standard 7

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| Human resources | |  |
| Requirement 7(3)(a) | The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services. | Compliant |

Findings

Consumers expressed overall satisfaction with staffing numbers and confirmed their care needs are met. Staff confirmed there is adequate staffing and explained that when there is short staffing, management supports them and everyone works together to meet the care needs of consumers. Management described the rostering and allocation process that includes the consideration of consumer needs and acuity, to ensure adequate staffing to provide safe and quality care to consumers. Management described their approach to workforce planning and roster forecasting. Roster documentation demonstrated that all shifts for the month prior to the assessment contact were filled.

Based on the available evidence, I find Requirement 7(3)(a) is Compliant.

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