Performance

Report

**1800 951 822**

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| Name of service: | Bolton Clarke Cazna Gardens |
| Service address: | 465 Hellawell Road SUNNYBANK HILLS QLD 4109 |
| Commission ID: | 5280 |
| Approved provider: | RSL Care RDNS Limited |
| Activity type: | Assessment Contact - Site |
| Activity date: | 21 July 2023 |
| Performance report date: | 16 August 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 Bolton Clarke Cazna Gardens (**the service**) has been prepared by E Blance, 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
* the provider’s response to the assessment team’s report received 4 August 2023
* other information known by the Commission

# Assessment summary

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| Standard 1 Consumer dignity and choice | 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** |
| **Standard 5** Organisation’s service environment | **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 1

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| Consumer dignity and choice | |  |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |

Findings

Consumers and representatives were satisfied consumers’ dignity and respect is maintained and their culture and diversity are upheld. Care plan documentation outlined values that are important to each consumer and the Assessment Team observed staff interacting with consumers in a respectful manner. It is my decision Requirement 1(3)(a) is 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

Consumers and representatives were satisfied personal and clinical care is best practice and is tailored to each consumer’s individual needs. Care plans demonstrated consumers had individualised strategies to reduce harm and cares are monitored as per the service’s policies and procedures for falls, wounds and catheter care management. Staff could describe the care directives for consumers. Clinical indicators are monitored by the service. It is my decision Requirement 3(3)(a) is compliant.

# Standard 5

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| Organisation’s service environment | |  |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Compliant |

Findings

The service has systems and processes to manage preventative and reactive maintenance and cleaning. Common areas, courtyards and gardens were observed by the Assessment Team to be clean, comfortable and well maintained. Consumers and representatives say they were satisfied with the cleaning and maintenance of the environment. Each of the buildings are connected to the central common area by pathways allowing consumers to move freely, both indoors and outdoors. The Assessment contact report identifies rectification actions identified by the service in audits to address safety issues, were not implemented in a timely manner.

The approved provider’s response included evidence of immediate rectification measures to improve outcomes for consumers at the service. I note no impact to consumers was identified within the Assessment contact report and I am satisfied with the evidence provided within the response have addressed the areas identified. It is my decision Requirement 5(3)(b) 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 and representatives expressed satisfaction with staff attending to consumers’ care needs in a timely manner. There are processes to ensure the workforce is planned, the number and skills mix is managed to meet the changing needs of consumers and planned, and unplanned leave is managed appropriately. Registered and care staff said they have sufficient time to get their work completed. It is my decision Requirement 7(3)(a) is 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)