

**Performance Report**

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name: | Bolton Clarke Moreton Shores |
| Commission ID: | 5593 |
| Address: | 91 King Street, Thornlands, Queensland, 4164 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 24 October 2024 |
| Performance report date: | 12 November 2024 |
| Service included in this assessment: | Provider: 1599 RSL Care RDNS Limited  Service: 5643 Bolton Clarke Moreton Shores |

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 Moreton Shores (**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 (performance assessment) – site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, older people/representatives and others
* the provider’s response to the assessment team’s report received 5 November 2024.

# Assessment summary

|  |  |
| --- | --- |
| Standard 7 Human resources | Not Applicable |

A detailed assessment is provided later in this report for each assessed Requirement. An overall assessment of performance for the Standard is not provided as not all Requirements were assessed under the 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

|  |  |  |
| --- | --- | --- |
| 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

The service demonstrated its commitment to supporting staff in performing their roles effectively and meeting organisational requirements. Consumers and representatives felt staff perform their duties effectively, and they were confident staff are trained appropriately and are sufficiently skilled to meet consumer’s care needs and preferences.

Workforce orientation includes completion of mandatory training modules and understanding of the service’s policy and procedures. Staff confirmed new staff are supported upon commencement with the service and training is scheduled for any identified skills gaps including via an electronic training system, toolbox sessions and external training. Staff are supported by subject matter experts where required, including for example, the service’s infection control lead in ensuring up to date infection control procedures are being used and staff have access to correct PPE and resources.

Staff competencies are assessed through training, observations, feedback from consumers and other staff. Position descriptions outline the responsibilities, skills, and qualifications for each role. An electronic system is used to monitor staff education, professional development, training records, and compliance with national criminal history checks, professional registrations, as well as staff vaccination records.

I have reviewed the assessment team’s report and the provider’s response and based on the information summarised, I find this Requirement 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)