Performance

Report

**1800 951 822**

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| Name of service: | Brightwater Huntingdale |
| Service address: | 31 Mildenhall Street HUNTINGDALE WA 6110 |
| Commission ID: | 7195 |
| Approved provider: | Brightwater Care Group Limited |
| Activity type: | Assessment Contact - Site |
| Activity date: | 12 September 2022 |
| Performance report date: | 7 October 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 Brightwater Huntingdale (**the service**) has been prepared by Janine Renna, 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 staff, consumers/representatives and others;
* the provider’s response to the assessment team’s report received on 20 September 2022 indicating acceptance of the assessment team’s recommendations; and
* the performance report dated 20 July 2022 in relation to the Assessment Contact undertaken on 22 June 2022.

# 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)(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

Requirement (3)(a) was found non-compliant following an Assessment Contact conducted on 22 June 2022, where it was found the service was unable to demonstrate the workforce was planned to enable, and the number and mix of members of the workforce deployed enabled, the delivery and management of safe and quality care and services.

The assessment team’s report for the Assessment Contact conducted on 12 September 2022 included evidence of actions taken to address the non-compliance, which include, but are not limited to:

* implemented additional hours to roster;
* commenced recruitment processes for additional support staff; and
* implemented weekly call bell reviews.

The Assessment Team’s report also included the following information and evidence collected through interviews and documentation, which are relevant to my finding:

* Six of seven consumers confirmed staffing numbers are sufficient to meet their care and service needs and preferences. One representative noted improvement in staffing numbers.
* Six staff said they have enough time to undertake their role and provided positive feedback on the recent increase in hours to the roster. While one staff said they do not always have enough time to undertake all aspects of their role, they have not reported it to management.
* Processes are in place to cover planned and unplanned leave.
* Call bells are reviewed regularly. Call bell data for a one-week sampled period did not show any response times above 15 minutes.

Based on the above evidence, I find the service compliant with Requirement (3)(a) in Standard 7 Human resources.

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)