Performance

Report

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| Name of service: | Bupa Ashfield |
| Service address: | 126-128 Frederick Street ASHFIELD NSW 2131 |
| Commission ID: | 2578 |
| Approved provider: | Bupa Aged Care Australia Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 27 February 2023 |
| Performance report date: | 6 April 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 Bupa Ashfield (**the service**) has been prepared by Tracey Clerke, 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 15 March 2023.

# Assessment summary

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| Standard 4 Services and supports for daily living | 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 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 |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| Requirement 4(3)(c) | Services and supports for daily living assist each consumer to:   1. participate in their community within and outside the organisation’s service environment; and 2. have social and personal relationships; and 3. do the things of interest to them. | Compliant |

Findings

**Requirement 4(3)(a)** was found non-compliant following a Site Audit from 10 to 12 May 2022. The service was unable to demonstrate that 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. To address the non-compliance the service implemented the following actions:

* All consumers have been reassessed for their lifestyle choices and cultural backgrounds. Consumers and their representatives have been interviewed as part of the process. Their care plans have been updated accordingly and new activities introduced. Lifestyle staff were provided with education and support to conduct the assessments.
* Extra resources have been purchased for consumers, for example; dolls, puzzles, board games, a companion cat, a guitar, a pancake maker, fiddle boards and plants for the garden.
* Religious and cultural events have been incorporated into the calendar. For example, consumers recently participated in an Italian National Day. The local minister also provided a service as part of the celebration.
* Concerts are held at least once a month; consumers are consulted on their preference for an entertainer.
* A multipurpose room has been created on both floors of the service. These rooms have been decorated according to consumers preferences and sensory room resources have been installed. These rooms are also used to hold religious services and group activities. They also provide a private, quiet area for visitors. Management stated that it is their intension to make the Orchard room a small café.
* The service provides a bus trip once a week. Consumers are consulted about where they would like to go.
* Local religious organisations have been contacted to provide services and one on one visits with consumers. Religious music and artefacts have been purchased and displayed at the service.
* A survey was conducted on 23 February 2023 to seek feedback and suggestions regarding lifestyle activities and preferences. Twenty-nine consumers were interviewed, and their individual preferences were documented.
* The service generally ensures that each consumer gets safe and effective services and supports for daily living. Most consumers and representatives provided positive feedback about their satisfaction with living at the service and said they felt at home in the service. This included their satisfaction with how they are treated by staff, the respect for their culture and the support provided in relation to their spiritual needs.

I have found the service is compliant with Requirement 4(3)(a).

**Requirement 4(3)(b)** was found non-compliant following a Site Audit from 10 to 12 May 2022. The service was unable to demonstrate that it provides supports for daily living that promote each consumer's emotional, spiritual and psychological well-being. The assessment team found that the service implemented improvements that have addressed the non-compliance.

Consumers and representatives interviewed described services and supports available to promote each consumers' emotional, spiritual and psychological well-being. Consumers said they felt connected and engaged in meaningful activities that are satisfying to them. Staff provided examples of supporting consumers for their emotional and psychological well-being. Care planning documentation recorded consumers' individual emotional support strategies and how these are implemented. Staff were observed providing effective emotional support to consumers during the visit. For example:

* A Greek Orthodox priest, Catholic priest and Anglican Minister attend the service twice a month to provide services and meet with consumers one on one. An area has been created for consumers to hold the service, since the Site Audit to provide a private, quiet area, this area is also referred to as a sensory room.
* Consumers have been asked if they would like to listen to a religious service on their television. The recreational officers ensure that the services are put on for those consumers in their rooms or the private quiet areas.
* A Buddhist priest visits the service regularly to meet with a consumer who is a practising Buddhist.
* One volunteer comes on Monday and Tuesdays. She is a retired staff member. The volunteer was interviewed by the Assessment Team. She said that she can see the joy in consumers faces when she comes to the service. She said she makes sure she gets to see each consumer to have a chat with them or support them in an activity.
* The recreational officers showed the Assessment Team their list of one to one schedule. All consumers receive a visit at least once a week. The recreational officers provide aromatherapy, talk to them about their interests and play music of each consumers choice. For consumers with cognitive impairment and unable to have a conversation the recreational officers give them hand massages and play music of their choice (according to their care plan).

I have found the service is compliant with Requirement 4(3)(b).

**Requirement 4(3)(c)** was found non-compliant following a Site Audit from 10 to 12 May 2022. The service was unable to demonstrate that it provides support for daily living that supports consumers to participate in their community outside the organisation's service environment, have social and personal relationships and do the things of interest to them. The assessment team found that the service implemented improvements that have addressed the non-compliance.

Consumers/representatives said consumers are supported to be involved in community activities outside the service, visit family, go shopping or pursue other interests. Staff could describe those consumers who were married or have developed close friendships. Care planning documentation identified people important to individual consumers and those involved in providing care and activities of interest to the consumer.

Staff were able to provide examples of how they support consumers' needs and interests and when their situations change.

I have found the service is compliant with Requirement 4(3)(c).

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)