Performance

Report

**1800 951 822**

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| Name: | Burpengary Manor Aged Care |
| Commission ID: | 5888 |
| Address: | 135 Buckley Road, BURPENGARY EAST, Queensland, 4505 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 3 January 2024 to 4 January 2024 |
| Performance report date: | 1 February 2024 |
| Service included in this assessment: | Provider: 3345 Tingari Group Pty Ltd  Service: 8006 Burpengary Manor Aged Care |

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 Burpengary Manor Aged Care (**the service**) has been prepared by Jodie Earnshaw, 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:

* 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 22 January 2024
* other information and intelligence held 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 said staff treat them with dignity and respect and maintain their privacy. Consumers reported staff interactions to be kind, caring and respectful, citing examples of staff respecting consumer privacy by knocking on and closing consumers’ doors to ensure privacy before assisting with personal care.

Consumers’ individual and cultural care needs are documented and inform the way in which consumers receive care. Care documentation reflected consumer history and background, and what is important to consumers to maintain their identity.

Staff demonstrated awareness of what is important to consumers and their individual needs, describing how individual consumers' culture, diverse backgrounds and identity is respected.

# 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

The service demonstrated the delivery of safe and effective personal and clinical care in accordance with the consumer’s needs, goals, and preferences, including the management of hygiene care, pain management, wound management, diabetes, and continence care optimising consumers’ health and wellbeing.

Consumers/representatives provided positive feedback on the care and services consumers receive at the service. Staff demonstrated knowledge of consumers’ individual care needs and preferences and additional support strategies.

Care documentation identified individualised strategies to guide staff in the provision of personal and clinical care delivery to consumers and effective assessment, management, and evaluation of care delivery. The organisation has processes for oversight of the delivery of clinical practice and staff have access to consumer information through the electronic care management system.

Care documentation for consumers demonstrated effective assessment, evaluation and management of clinical care needs including in relation to restrictive practices, wound care, pain management, and diabetes management.

Where restrictive practices are in place, assessments, informed consent from consumers/ representatives and monitoring were demonstrated.

# 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 environment was observed to be safe, clean and well-maintained, enabling free access both indoors and outdoors. Some consumers reported concerns with the intrusive behaviours of other consumers, however, action had been taken by the service to mitigate these risks and further actions were established to ensure the ongoing safety and comfort of consumers. The approved provider, in their response, included a plan of continuous improvement demonstrating planned and measures taken.

Consumers provided positive feedback regarding cleaning services, maintenance, and the service environment.

Staff described cleaning processes and processes for reporting and actioning maintenance issues identified. The service demonstrated effective management of preventative and reactive maintenance through an electronic management system.

Consumers were observed to move freely and safely throughout the service, including multiple outdoor garden areas with level paths, seating and shade.

# 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 staff said there is a sufficient number and mix of staff to meet consumers' personal and clinical needs, according to their preferences, and within a timely manner.

The service demonstrated a sufficient and competent workforce to ensure the delivery of safe and quality care and services.

Consumers confirmed that their clinical and personal care needs were attended to promptly and in accordance with their personal preferences. Staff reported having sufficient staff to provide care and services in accordance with consumers’ needs and preferences.

The service has processes to ensure the workforce is planned and deployed to deliver quality care and services according to consumer needs. The service demonstrated an effective rostering system which ensures an appropriate skill mix, replacement shift process and review of feedback and data to ensure safe and quality care.

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)