Performance

Report

**1800 951 822**

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| Name: | Calvary Haydon Retirement Community |
| Commission ID: | 2930 |
| Address: | 2 Jaeger Circuit, BRUCE, Australian Capital Territory, 2617 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 18 July 2024 |
| Performance report date: | 19 August 2024 |
| Service included in this assessment: | Provider: 2496 Calvary Retirement Communities Limited  Service: 5649 Calvary Haydon Retirement Community |

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 Calvary Haydon Retirement Community (**the service**) has been prepared by G Cherry, 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, consumers/representatives, and others.
* Performance Report dated 16 April 2024

# Assessment summary

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| Standard 5 Organisation’s service environment | Not applicable as not all requirements 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.

**Other information**

Calvary Haydon Retirement Community is a 100-bed service situated in the suburb of Bruce located northeast of Canberra’s central business district. The service has two levels (five wings) including two memory support units on the ground floor and is surrounded by gardens providing accessible outdoor areas. A communal garden area is share by consumers from both memory support units.

# 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 |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Compliant |

Findings

Requirement 5(3)(b) - a decision of non-compliance made on 16 April 2024 followed an assessment contact on 6 March 2024 to 8 March 2024. At an assessment contact on 18 July 2024 the provider demonstrated improvement strategies and progress to address non-compliance including additional staff education regarding reporting maintenance requests, identification of hazards and escalation process, recruitment of permanent maintenance staff and increased oversight/monitoring of reactive maintenance requirements.

Via consumer, representative, Management and staff interviews, review of documents and observations the assessment team bought forward evidence, the service demonstrates a safe, clean, well maintained, and comfortable environment enabling consumers free movement. Interviewed consumers/representatives consider the service environment to be clean and well maintained, noting various accessible areas such as library/café and outside courtyards/gardens. They gave examples of prompt response to maintenance requests. The maintenance officer explained planned and responsive maintenance processes and staff demonstrate awareness of reporting processes noting response within appropriate times. Review of documents detail work attended within schedule times and a timely response to ad-hoc requests.

However, the assessment team observed both memory support units in need of refurbishment due to walls/doors requiring repair/repainting, stained floor coverings, internal light fittings/sky lights with evidence of dirt/insects (acknowledged by Management). Senior Management advised this has been identified as a major project resulting in development of a business case. As a strategy to limit current environmental risk they are maintaining several vacant beds and limiting entry for new consumers living with high care clinical risks. In addition, ensuring ongoing cleaning of floor coverings until replacement occurs and scheduled immediate cleaning (including light fittings). In consideration of compliance, I am swayed by the volume of consumer/representative satisfaction, staff knowledge of maintenance processes, and the provider’s alternative strategies until planned refurbishment occurs. I find requirement 5(3)(b) is compliant.

Requirement 5(3)(c) - a decision of non-compliance made on 16 April 2024 followed an assessment contact on 6 March 2024 to 8 March 2024. At an assessment contact on 18 July 2024 the provider demonstrated improvement strategies and progress to address non-compliance including additional staff education regarding reporting maintenance requests, recruitment of permanent maintenance staff, prioritisation/completion of overdue maintenance issues and increased oversight oversight/monitoring of reactive maintenance requirements to ensure prompt attention.

Via consumer, representative, Management and staff interviews, review of documents and observations the assessment team bought forward evidence the service demonstrates an effective system to ensure furniture, fittings/equipment are safe, clean, well maintained, and suitable for consumer use. Interviewed consumers/representatives consider availability of suitable clean, well-maintained furniture/equipment. Interview with staff and maintenance officer, plus review of documents demonstrate most furniture, fittings and equipment is safe, clean, well maintained. Examples include purchase of new oxygen concentrator and timely response/replacement of broken equipment. The assessment team observed most furniture to be safe, clean, and well maintained and several stained chairs to be promptly removed/replaced when bought to Management’s attention. Interviewed care staff advise sufficient/appropriate equipment needed for consumer use, demonstrating knowledge of appropriate use. I find requirement 5(3)(c) 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)