Performance

Report

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| Name of service: | Calvary Haydon Retirement Community |
| Service address: | 2 Jaeger Circuit BRUCE ACT 2617 |
| Commission ID: | 2930 |
| Approved provider: | Calvary Retirement Communities Limited |
| Activity type: | Assessment Contact - Site |
| Activity date: | 5 October 2022 |
| Performance report date: | 25 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 Calvary Haydon Retirement Community (**the service**) has been prepared by E Woodley, 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 Performance Report dated 24 May 2021 following the Site Audit undertaken from 13 April 2021 to 15 April 2021.

# 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

The Quality Standard was not fully assessed, and therefore has not received a compliance rating. One of the five specific requirements has been assessed and found Compliant.

The service was previously found Non-compliant in Requirement 7(3)(a) following a Site Audit conducted 13 April 2021 to 15 April 2021.

During the Assessment Contact conducted 5 October 2022, the Assessment Team found the workforce is planned and deployed to enable the delivery and management of safe and quality care and services. Consumers interviewed by the Assessment Team said they feel there is sufficient staff to provide them with quality personal and clinical care and services. Most consumers said staff attend call bells in a timely manner, and staff do not rush when providing care.

The service demonstrated strategies to manage staff shortages through a combination of using the existing casual pool, staff working longer or double shifts and agency staff. Documentation provided to the Assessment Team demonstrates all shifts were filled in the four weeks prior to the Assessment Contact.

I find the following requirement is Compliant:

Requirement 7(3)(a).

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)