Performance

Report

**1800 951 822**

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| Name of service: | Carino Care at Sylvania |
| Service address: | 406 Princes Highway SYLVANIA NSW 2224 |
| Commission ID: | 2513 |
| Approved provider: | Carino Care Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 1 March 2023 |
| Performance report date: | 27 March 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 Carino Care at Sylvania (**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 2 June 2022 following the Site Audit undertaken 20 April 2022 to 22 April 2022.

# Assessment summary

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| Standard 2 Ongoing assessment and planning with consumers | 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 2

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| Ongoing assessment and planning with consumers | |  |
| Requirement 2(3)(d) | The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided. | 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 2(3)(d) following a Site Audit conducted 20 April 2022 to 22 April 2022. The service did not demonstrate that care and service plans were readily available to consumers and relevant representatives.

During the Assessment Contact, the Assessment Team noted that the organisation has implemented several actions and initiatives in response to the issues identified during the Site Audit which have been effective in rectifying the non-compliance. The registered nurses at the service are now allocated specific consumers to ensure their care assessment and planning is effectively documented and a copy of the care plan provided to the consumer and/or representative. Most consumers and representatives interviewed by the Assessment Team said they have copies of their care plans, or have been offered a copy. They indicated they had been involved in discussing their care plan.

I find Requirement 2(3)(d) is compliant.

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)