Performance

Report

**1800 951 822**

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| Name: | Casey Aged Care |
| Commission ID: | 3819 |
| Address: | 300 Golf Links Road, NARRE WARREN, Victoria, 3805 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 11 April 2024 |
| Performance report date: | 2 May 2024 |
| Service included in this assessment: | Provider: 1303 Aged Care Group Pty Ltd  Service: 5946 Casey 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 Casey Aged Care (**the service**) has been prepared by N Eastwood, 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.

# Assessment summary

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| Standard 4 Services and supports for daily living | 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 4

|  |  |  |
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| Services and supports for daily living | |  |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

Consumers were satisfied with meals, access to snacks, menu variety and delivery of food and drinks. Care staff described their responsibilities in safe delivery of nutrition and hydration to consumers. Clinical staff described the assessment and planning process that considers consumer medical history, physical and cognitive functioning, as well as escalating referrals as appropriate. The service has systems and processes in place to ensure consumers and representatives are able to contribute to the seasonal menu plan, which is then reviewed by a dietician.

With consideration to the available information summarised above, I agree with the Assessment Team recommendations and find the service compliant with Requirement 4(3)(f).

# Standard 7

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| Human resources | |  |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant |

Findings

Consumers and representatives indicated staff were capable and have the knowledge to provide the care and support they require. Management described how they ensure staff have relevant professional registrations for their roles and maintain role specific competencies. Staff demonstrated knowledge consistent with role requirements. Management also described the recruitment process, including pre-employment checks such as visas and banning orders, as well as ongoing monitoring processes for staff performance. A review of documentation demonstrated position descriptions and duty lists provide staff guidance relating to their responsibilities and duties for each role.

Staff confirmed the recruitment process and that they are supported to perform their roles. New staff and students confirmed the orientation process and how they undertook buddy shifts to support their transition into the service. Management stated the organisation is currently transitioning their education and training software and explained how they are ensuring staff complete their mandatory competencies.

With consideration to the available information summarised above, I agree with the Assessment Team recommendations and find the service compliant with Requirements 7(3)(c) and 7(3)(d).

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)