Performance

Report

**1800 951 822**

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| Name of service: | Chirnside Views |
| Service address: | 315 Manchester Road CHIRNSIDE PARK VIC 3116 |
| Commission ID: | 8230 |
| Approved provider: | Norsan Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 16 August 2023 |
| Performance report date: | 19 September 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 Chirnside Views (**the service**) has been prepared by L. Malone, 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 provider’s response to the assessment team’s report received 6 September 2023.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **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 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 Assessment Contact – Site report 16 August 2023 provides evidence of positive feedback from consumers and representatives about their personal or clinical care, and how the care delivered supports wellbeing. Staff were able to describe principles of best practice and what care is safe and effective for individual consumers.

Evidence related to the use of restrictive practices demonstrated effective processes of informed consent, individualised behavioural assessment and support plans, regular review of effectiveness of the restrictive practice, and involvement of other medical and specialist providers. The Assessment Team found pain management in line with best practice and the service demonstrated the use of validated assessment tools, pharmacological and non-pharmacological strategies and monitoring of effectiveness. A review of care files found evidence of comprehensive wound assessment and care in line with documented wound care plans. The Assessment Team found care optimises wellbeing noting evidence of regular wound reviews, and wound healing. Staff described how they consider wound pain and skin integrity assessment when attending to clinical care and personal care.

I have considered the evidence as summarised above and find Requirement 3(3)a Compliant.

# Standard 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |

Findings

The Assessment Contact - Site report contains positive feedback from consumers and representatives about the supports consumers receive to participate in daily activities and activities of enjoyment. Care planning documentation provides individualised information to support consumer’s needs, goals and preferences. Staff described how they monitor consumer participation and enjoyment, use consumer feedback to plan the activity schedule, and how they support consumers with different needs to participate in activities of choice. The Assessment Team observed consumers receiving safe and effective support from staff.

I have considered the evidence as summarised above and find Requirement 4(3)a Compliant.

# 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 Assessment Contact – Site report contains consumer and representative feedback that staffing is adequate, and consumer’s needs are attended to promptly. Evidence demonstrates effective systems of workforce planning and deployment, and that staff number and mix enables safe and quality care. Management described how workforce is planned considering the skill mix of staff, staff to consumer ratios and 24-hour nursing cover. The Assessment Team reviewed documentation which provided evidence of regular review of workforce planning and that workforce is discussed at consumer and representative meetings, and consumer feedback is utilised in planning. At the time of Assessment Contact, the utilisation of call bell data and reporting was under review.

The approved provider has submitted a response dated 6 September 2023 which provides evidence of improvements to call bell response time monitoring and analysis, and explanation of how this information is used in workforce planning. The approved provider has submitted further evidence of actions undertaken to ensure that equipment such as sensor mats related to the call bell system, are safe and functioning for consumers.

I have considered the evidence as summarised above and find Requirement 7(3)a Complaint.

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)