Performance

Report

**1800 951 822**

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| Name: | Emily Gardens at the Rock |
| Commission ID: | 0839 |
| Address: | 9 Emily Street, The Rock, New South Wales, 2655 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 6 June 2024 |
| Performance report date: | 17 June 2024 |
| Service included in this assessment: | Provider: 778 Lutheran Aged Care Albury  Service: 6384 Emily Gardens at the Rock |

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 Emily Gardens at the Rock (**the service**) has been prepared by Gai-Maree Cain, 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 |

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)(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 performance report dated 09 September 2022 found the service non-compliant in Requirement 4(3)(a), with deficiencies related to the service’s lifestyle program not meeting the interests of consumers’, consumers spoke of activities being repetitive, lacking variety and not having input into the program and as a result consumers kept themselves busy on their own.

The Assessment Contact report following a visit on 06 June 2024, identified the service demonstrated actions to improve its performance under this Requirement. Consumers spoke of being very happy with the lifestyle program, with the service offering a variety of activities, including ones of interest to individual consumers. Staff demonstrated understanding of individual consumers supports for daily living and these were reflected in the service’s lifestyle calendar.

Improvement actions included (but were not limited to):

* The implementation of an activity calendar which is distributed to consumers monthly.
* A consumer satisfaction survey was undertaken in October 2022 and again in April 2024, and consumers reported feeling satisfied with the current activity plan and requesting that it remain unchanged.
* The service now has a permanent lifestyle coordinator and an assistant to support the delivery of activities for consumers across a 7-day period.
* The service has engaged other external organisations to support the activity program including pastoral carers who can support with 1 to 1 time with consumers, other religious and spiritual, and children from the local preschools attend the service once a fortnight and spend time with the consumers

It is my decision that Requirement 4(3)(a) 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)