Performance

Report

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| Name of service: | Estia Health Salisbury East |
| Service address: | 8 Oakmont Court SALISBURY EAST SA 5109 |
| Commission ID: | 6253 |
| Approved provider: | Estia Investments Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 12 July 2023 |
| Performance report date: | 31 July 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 Estia Health Salisbury East (**the service**) has been prepared by M Glenn, 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.

# 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 consumers, representatives, staff and management; and
* an email from the provider received 17 July 2023 accepting the Assessment Team’s recommendations.

# Assessment summary

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| Standard 1 Consumer dignity and choice | Not applicable as not all requirements have been assessed |
| **Standard 3** Personal care and clinical care | **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 1

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| Consumer dignity and choice | |  |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |

Findings

Holistic care plans reflect each consumer’s diversity and are developed through formal discussions on entry and more informal discussions as rapport with each consumer is established over time. Discussions with consumers seek to identify more than obvious points of diversity, such as race, culture or religion, but also the smaller needs that reflect the individual. Sampled care files included information, such as consumers’ family relationships, culture, religion/spirituality and past working history, and staff were knowledgeable of individual consumer’s culture, diversity and identity, consistent with care planning documentation. Staff were observed interacting respectfully with consumers, using their preferred names, speaking in a gentle tone, and actively listening and responding appropriately to requests for assistance. Representatives felt staff were always respectful of their family members’ unique care needs and said they had observed staff to display compassion and patience in their interactions with consumers. One consumer and representative said staff are respectful of consumers’ culture, stating they feel free to be themselves.

Based on the Assessment Team’s report, I find requirement (3)(a) in Standard 1 Consumer dignity and choice compliant.

# 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 |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Compliant |

Findings

Consumers receive safe and effective personal and clinical care that is best practice, tailored to their needs, and optimises their health and well-being. Consumers and representatives said consumers receive the care they need and can see the Medical officer and/or Allied health staff when required. Care files were reflective of consumers’ individualised personal care needs and demonstrated appropriate management of specific aspects of care, including wounds, skin integrity, restrictive practices, behaviours and falls. Staff demonstrated an understanding of best practice clinical care, and policies and procedures are available to assist and guide staff to ensure best practice is achieved.

Care files sampled demonstrated prompt recognition and response to changes in consumers’ condition. Where changes in consumers’ condition are identified, additional monitoring processes, including charting, are implemented, and referrals to Medical officers and/or Allied health professionals are initiated, where required. There are processes to ensure changes to consumers’ care and service needs as a result of a change in condition are communicated to staff. Staff demonstrated an understanding of their roles and responsibilities, including identifying and reporting changes in consumers’ condition, and consumers and representatives expressed satisfaction with responsiveness to consumers’ decline in condition.

Based on the Assessment Team’s report, I find requirements (3)(a) and (3)(d) in Standard 3 Personal care and clinical care compliant.

# 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 |

Findings

Consumers and representatives stated staff are knowledgeable and skilled in their roles and understand the needs of consumers in their care. Staff undertake a range of competencies, including on personal protective equipment, infection control, handwashing and medications. Completion of staff training and competencies is monitored to ensure all staff are up-to-date. Staff competency is monitored through review of incidents, feedback processes, internal audits and spot checks. Where a deficit in staff practice is identified, training or toolbox sessions are implemented to provide staff additional support. Staff are guided in their daily roles by job descriptions and duty statements, and staff sampled were aware of their roles and tasks they should undertake.

Based on the Assessment Team’s report, I find requirement (3)(c) in Standard 7 Human resources 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)