Performance

Report

**1800 951 822**

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| Name of service: | Groves House |
| Service address: | 131 Main Road Cardiff Heights NSW 2285 |
| Commission ID: | 0894 |
| Approved provider: | Christian Brethren Community Services |
| Activity type: | Assessment Contact - Site |
| Activity date: | 10 August 2023 |
| Performance report date: | 14 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 Groves House (**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 8 March 2023 following the Assessment Contact undertaken 1 February 2023.

# Assessment summary

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| Standard 3 Personal care and clinical care | 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 Quality Standard was not fully assessed, and therefore has not received a compliance rating. One of the seven specific Requirements has been assessed and found compliant.

The service was previously found non-compliant in Requirement 3(3)(a) following an Assessment Contact conducted 1 February 2023 as the service did not demonstrate personal and clinical care provided to consumers was consistently safe, effective, and tailored to their needs.

At the Assessment Contact conducted 10 August 2023, the service demonstrated consumers were receiving safe and effective personal care and clinical care that is tailored to their needs and preferences and is in line with best practice. Consumers and representatives interviewed by the Assessment Team provided positive feedback about the clinical care provided to consumers. Staff interviewed demonstrated sound knowledge regarding consumer personal and clinical care needs and preferences. Care documentation reviewed reflected care provided that was individualised and tailored to the specific needs of the consumers. This included regarding management of wounds, pain, falls, continence care, and restrictive practices.

I find Requirement 3(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)