Performance

Report

**1800 951 822**

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| Name: | Harbour Quays Residential Aged Care |
| Commission ID: | 5793 |
| Address: | 36 Compass Drive, Biggera Waters, Queensland, 4213 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 23 January 2024 |
| Performance report date: | 20 February 2024 |
| Service included in this assessment: | Provider: 2562 Provectus Care Pty Limited  Service: 6816 Harbour Quays Residential 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 Harbour Quays Residential Aged Care (**the service**) has been prepared by T Wurf, 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.

The provider did not submit a response to the assessment team’s report.

# Assessment summary

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| Standard 1 Consumer dignity and choice | Not applicable as not all requirements were assessed. |
| **Standard 3** Personal care and clinical care | **Not applicable as not all requirements were assessed.** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements were assessed.** |
| **Standard 7** Human resources | **Not applicable as not all requirements were 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

I am satisfied the service is compliant with this requirement based on evidence in the Assessment Contact Report. For example:

* Consumers said staff treat them with dignity and are respectful. They said staff know their preferences, interests and culture, and staff are respectful of these. They said staff ensure their dignity is maintained during care delivery and interactions.
* Staff demonstrated knowledge of and familiarity with consumers’ identity and culture. Staff described individual consumers’ preferences and provided examples of respectful care delivery. Management encourages consumer feedback about staff interactions.
* The service provides staff training on dignity and respect.
* Consumers’ care documentation included information about their life history, culture, personal interests, and preferences.
* The Assessment Team observed staff engaging positively with consumers, speaking in a kind and respectful manner, closing doors to consumer’s rooms when delivering care, seeking consumer feedback, and responding to consumer requests.

# 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

I am satisfied the service is compliant with this requirement based on evidence in the Assessment Contact Report, specifically in relation to pain management, restrictive practices and skin integrity. For example:

* Consumers interviewed by the Assessment Team were satisfied with the care they receive.
* Care documentation included information about consumers’ care such as assessments, regular monitoring and reviews of care. Staff were familiar with individual consumers’ personal and clinical care needs and preferences.
* Consumers were assessed and monitored for pain. Consumers experiencing pain received pharmaceutical and non-pharmaceutical strategies to manage their pain. Where pain medication is provided, the effectiveness is monitored and recorded. Where a pain management regime was not effective, the consumer was referred to their medical officer (MO) for review and their medications changed.
* Where restrictive practices were in place for consumers, these were documented and managed in line with legislative requirements. Behaviour support plans were individualised, developed in consultation with external health professionals, and provided sufficient information to guide staff practice.
* The service provides pressure area care and manages pressure injuries and wounds. Staff and consumers described how staff monitor consumers’ skin integrity during personal care. Pressure relieving devices were in place where required.

# Standard 5

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| Organisation’s service environment | |  |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Compliant |

Findings

I am satisfied the service is compliant with this requirement based on evidence in the Assessment Contact Report. For example:

* The service had effective systems for cleaning, environmental audits, and preventative and reactive maintenance.
* Staff understood procedures, schedules and responsibilities for cleaning and maintenance.
* Consumers were satisfied with the service environment and reported that the service is clean, well maintained, and comfortable and easy to navigate around.
* The Assessment Team observed:
  + the service environment to be safe, clean, well-maintained and comfortable,
  + consumers mobilising independently throughout the service, and utilising various indoor and outdoor areas for activities and rest,
  + walkways clear, and windows and sliding doors often open providing fresh air throughout the service, and
  + maintenance staff conducting their daily walk around and observational check of the environment.

# 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

I am satisfied the service is compliant with this requirement based on evidence in the Assessment Contact Report. For example:

* The service has policies and procedures to guide workforce planning and rostering.
* The service manages a base roster and adjusts this where required based on consumers’ needs. Staff on leave are replaced. Registered nurses are rostered on 24 hours per day, 7 days per week.
* The service monitors staffing levels and staff responsiveness to consumers through a variety of methods including call bell audits, meetings, surveys, complaints, and clinical data.
* Consumers were satisfied with the availability of staff and the care they receive. They said staff promptly respond to their requests for assistance.
* Staff reported they have enough time to complete their allocated work, staff are replaced when unable to attend an allocated shift, and they can approach the rostering clerk and management about rostering requirements.
* The Assessment Team observed:
  + staff engaging with consumers in a relaxed manner,
  + staff attending to call bell alerts in a timely manner, and
  + care staff offering consumers coffee or tea throughout the day and often sitting and talking with consumers.

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)