Performance

Report

**1800 951 822**

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| Name of service: | Helping Hand Aged Care - Mawson Lakes Facility |
| Service address: | 2 The Strand MAWSON LAKES SA 5095 |
| Commission ID: | 6207 |
| Approved provider: | Helping Hand Aged Care Inc |
| Activity type: | Assessment Contact - Site |
| Activity date: | 9 August 2023 |
| Performance report date: | 31 August 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 Helping Hand Aged Care - Mawson Lakes Facility (**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 23 August 2023 indicating they would not be submitting 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 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

Strategic documents, policies and procedures have an inclusive, consumer-centred approach to delivering care and services. This was reflected within organisational documentation, lifestyle activities and consumer files. Care files sampled detailed consumers’ interests, past history and matters of importance, specific to their individual culture and identity. Staff interviewed described how they respect and promote cultural awareness in their everyday practice and demonstrated familiarity with consumers’ backgrounds and specific strategies implemented to maintain their identity, culture and diversity. Staff were observed providing care and assistance to consumers in a dignified manner, interacting with consumers respectfully, speaking kindly, taking time to listen to the consumers and not rushing them when providing assistance. Consumers interviewed considered they are treated with dignity and respect, with their identity, culture and diversity valued and celebrated. Consumers said staff treat them fairly and they don’t experience discrimination.

For the reasons detailed above, 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 |

Findings

Consumers were found to be provided safe and effective personal and clinical care that is tailored to their needs and optimises their health and well-being. Clinical staff said when changes are identified to consumer care needs or personal preferences, these are discussed with the consumer or their representative, and care planning information is updated. Where changes are significant, a referral to the medical officer or specialist services may be initiated to ensure care delivery meets best practice requirements. Care files were reflective of consumers’ individualised personal care needs and demonstrated appropriate management of behaviours, wounds and pressure area care. However, behaviour support plans for two consumers did not include information on a changed behaviour being displayed, although strategies were being utilised by staff to effectively manage the behaviour. Staff described best practice processes in relation to clinical care, as well as individual strategies utilised in relation to behaviour management for consumers. Consumers and representatives expressed satisfaction with the personal and clinical care being provided and said consumers receive personal care in line with their needs and preferences.

For the reasons detailed above, I find requirement (3)(a) in Standard 3 Personal care and clinical care 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

Consumers and representatives were satisfied with the level of staffing, stating consumers receive quality care in a timely manner. A roster is maintained and regularly reviewed, based on the needs and acuity of consumers. Data, such as incidents, consumer behaviours, call bell response times and continuity of care is considered when adjusting the roster. There are processes to manage planned and unplanned leave. All staff interviewed said they have enough time to complete their daily tasks, and vacant shifts are usually covered, and observations showed staff were calm and patient when undertaking their roles, and did not appear to be rushed.

For the reasons detailed above, I find requirement (3)(a) in Standard 7 Human resources compliant.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)