

**Performance Report**

**1800 951 822**

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| Name: | Hetti Perkins |
| Commission ID: | 6992 |
| Address: | 9 Percy Court, ALICE SPRINGS, Northern Territory, 0870 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 16 October 2024 |
| Performance report date: | 12 November 2024 |
| Service included in this assessment: | Provider: 6871 Australian Regional and Remote Community Services Limited  Service: 4400 Hetti Perkins |

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 Hetti Perkins (**the service**) has been prepared by R Falco, 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 (performance assessment) – site report, which was informed by a site assessment, observations at the service, review of documents and interviews with staff, management, consumers and representatives; and
* the performance report dated 27 July 2023 for the site audit undertaken in June 2023.

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

# Assessment summary

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| Standard 4 Services and supports for daily living | Not fully assessed |
| **Standard 5** Organisation’s service environment | **Not fully 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)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant |

Findings

Requirement (3)(g) was found non-compliant following a site audit undertaken in June 2023 as the service did not have sufficient equipment, which was safe, suitable, clean and well maintained to deliver appropriate care. The assessment team’s report provided evidence of actions taken to address deficiencies identified which included, the purchase of additional lifting equipment, implementation of a cleaning and maintenance schedule and staff training in relation to safe and suitable lifting techniques.

Processes are in place to maintain equipment and staff have clear instructions on the cleaning of equipment. Each consumer requiring a sling has the appropriate size sling stored in their rooms and equipment is cleaned each day by the appropriate staff. Maintenance staff described how regular maintenance and checks are scheduled for lifting equipment. Observations showed lifting equipment and sit to stand lifting aids have been tested, tagged, clean and fit for purpose. Documentation evidenced staff training in manual handling in relation to safe lifting techniques. Consumers described equipment as safe, suitable, clean and well maintained and there is sufficient equipment for their care needs.

Based on the assessment team’s report, I find requirement (3)(g) in Standard 4 Services and supports for daily living compliant.

# 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

Requirement (5)(b) was found non-compliant following a site audit undertaken in June 2023 as the service environment was assessed not to be safe, clean, well-maintained and comfortable. The assessment team’s report provided evidence that demonstrated the deficiencies have been addressed. Observations of the service environment showed it was safe, clean, and well-maintained. Consumers’ rooms were adequately cleaned, and linen appeared to be changed regularly. Areas with fire risk, including the fire pit, gas barbecue area and smoker’s area had access to fire extinguishing equipment.

Consumers were observed to be moving freely throughout the service either independently or with assistance from staff. Established cleaning schedules and reactive maintenance programs are in place to ensure a safe, clean and well-maintained environment. Maintenance staff interviewed advised weekly environmental site audits are completed to ensure internal and external environments were operating at functional levels. Consumers and representatives reported the service is clean and welcoming, maintenance issues are addressed, and enough resources are available to clean common and private areas.

Based on the assessment team’s report, I find requirement (3)(b) in Standard 5 Organisation’s service environment 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)