Performance

Report

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| Name of service: | Hill View House - Merrimac |
| Service address: | 239 Gooding Drive MERRIMAC QLD 4226 |
| Commission ID: | 5503 |
| Approved provider: | East Coast Care No.7 Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 23 August 2023 |
| Performance report date: | 19 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 Hill View House - Merrimac (**the service**) has been prepared by B Bassett, 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.

# Assessment summary

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| Standard 1 Consumer dignity and choice | Not applicable as not all requirements have been assessed |
| **Standard 6** Feedback and complaints | **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)(e) | Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice. | Compliant |

Findings

Consumers said they were provided information to enable them to make informed decisions about care and services related to their needs, goals and preferences. A range of information was observed to be available and accessible to consumers around the service. For example,

* Consumers said they are kept informed through the service’s newsletter, activities schedule, menus and notice boards. Consumers reported they had been kept informed of the new ownership of the service through letters, meetings and a morning tea that was held to meet the new directors and ask questions.
* Staff were able to describe how they provide information to consumers in a way that the consumer understands. This included consumers who do not speak or understand English. For example, consumers at the service who only speak Japanese have dedicated Japanese speaking staff members able to communicate with them. Staff said consumers who are non-verbal can be communicated with through picture boards and hand gestures, including care documentation which identified communication preferences and assessments to guide staff.
* Management conducts regular audits and information reviews to ensure information provided to consumers is current and accurate.
* The Assessment Team observed the Charter of Aged Care Rights displayed throughout the service as well as pamphlets from various government departments, agencies and local services available for consumers and representatives to access.

Following consideration of the above information, I have decided that Requirement 1(3)(e) is Compliant.

# Standard 6

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| Feedback and complaints | |  |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant |

Findings

Consumers and representatives expressed confidence management would address complaints and attempt to resolve any concerns promptly. Management and staff demonstrated a shared understanding of processes to follow when a complaint is received. Staff advised they initially try to resolve any issues immediately and report it to the registered staff or management. The service evidenced policies, procedures and training material addressing feedback, complaint management, and the open disclosure process.

All consumers interviewed were aware of the service’s complaints procedure and said staff will normally be able to resolve their concerns. Consumers provided examples of raising concerns and having those concerns resolved in a timely manner. These included issues such as staff not making a consumer’s bed properly and consumers not liking their meals.

The Assessment Team reviewed the service’s feedback and complaints procedure and the complaints handling processes and found complaints received over the past 3 months were actioned and resolved in a timely manner to the consumer’s satisfaction. Staff are guided on how to document, investigate, resolve, and evaluate feedback and complaints and the use of open disclosure.

Staff said they had received training on open disclosure and were able to demonstrate an understanding of the principles of open disclosure and the complaint handling process when feedback or a complaint is received from consumers or representatives.

The Assessment Team observed complaint forms and brochures explaining how to make a complaint located throughout the service and within easy access for all consumers.

The Assessment Team reviewed relevant policies and guidelines which support staff in managing the complaints process including the 7 steps for ensuring an open disclosure process is used when managing complaints.

Following consideration of the above information, I have decided that Requirement 6(3)(c) is 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 reported satisfaction with the availability of clinical and support staff and with the quality of care and services provided. Staffing levels supported the ability to replace staff on leave with short notice due to illness. Staff responses to calls for assistance were monitored and the service had a range of policies and procedures to guide workforce planning and rostering.

Consumers said staff provide the care and services they need and respond to their requests in a timely manner. Consumers were able to provide examples of staff coming to their assistance when needed, including if they had a fall and required urgent attention.

The service ensured registered nurses were rostered on 24 hours per day, 7 days per week with allocation ensuring additional staff are made available to ensure continuity of services when workloads increased.

Clinical and care staff said they had enough time to complete their work, are generally replaced when staff fail to turn up for an allocated shift and felt they could approach the human resource team for any shift need requirements.

The Assessment Team observed staff were not rushed in providing services and consumers were engaging with staff in a relaxed manner.

Management utilised consumer meetings, incident reports, clinical indicator reports and audits to monitor staffing levels and ensure the service is adequately staffed.

Following consideration of the above information, I have decided that Requirement 7(3)(a) is 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)