Performance

Report

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| Name of service: | Ian Brand Residential Care |
| Service address: | 1231 Plenty Road BUNDOORA VIC 3083 |
| Commission ID: | 4427 |
| Approved provider: | Northern Health |
| Activity type: | Assessment Contact - Site |
| Activity date: | 2 August 2023 |
| Performance report date: | 01 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 Ian Brand Residential Care (**the service**) has been prepared by D. Fekonja, 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 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 4** Services and supports for daily living | **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 service provides individualised personal and clinical care that is safe and right for each consumer. Consumers and representatives are satisfied with the care and services they receive. Clinical care documentation demonstrates ongoing assessment and monitoring of consumers’ skin, and personal hygiene is provided in accordance with their preferences and needs.

The service effectively monitors consumers’ nutritional needs and ensures referrals are made to dietitians and medical practitioners. Where supplements are required these are added to medication charts and signed off when provided to consumers to ensure the directives are followed.

Consumers subject to chemical restrictive practices have informed consent recorded and are monitored on an ongoing basis in consultation with the medical practitioner, geriatrician, representative, and clinical staff. Behaviour support plans are in place and behaviour charting is conducted prior to the 3 monthly reviews.

Care documentation notes risks, triggers, and strategies to inform safe and tailored chemical restrictive practices. staff demonstrate their knowledge of the consumers’ current personal and clinical care needs. All staff were able to identify consumers with changed behaviours. They outlined the strategies utilised prior to chemical restraint being used, and confirmed that monitoring and review are completed for each consumer.

Based on the information provided I find the service compliant with Requirement 3(3)(a).

# Standard 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

This requirement was found non-compliant following a Site Audit conducted from 16 August 2022 to 18 August 2022. The service did not demonstrate that meals are varied, of suitable quality and quantity, well presented, or that consumers have a choice of meals.

The service has implemented several actions in response to the non-compliance, for example:

* A new food service contractor was contracted. They provide end-to-end service, work in partnership with the service, and are responsive to feedback.
* There is regular communication between management and the catering contractor regarding food and to address consumer complaints and feedback.
* New meals are being trialled in response to consumer feedback, including cooked breakfasts and trialling of moulded texture-modified food.

Consumers and representatives were happy with the taste, quality, and choice of meals and said it had improved. When consumers are not happy with their food they are able to select alternatives from the ‘extras’ menu. Staff were aware of consumers’ dietary preferences, needs, and intolerances which are also documented in the nutrition section of the care plan.

The service proactively seeks feedback from consumers regarding dietary preferences, food quality, and the dining experience as part of its continuous improvement process. Food is a standing agenda item at the ‘Residents and Representatives’ meeting and actions have been taken in relation to feedback provided.

Based on the information provided I am satisfied the service has made the necessary improvements to ensure the quality of meals and the dining experience meet the consumers’ needs and preferences. I find the service compliant with this Requirement.

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)