Performance

Report

**1800 951 822**

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| Name of service: | Jacaranda Village |
| Service address: | 4-8 Calotis Street RED CLIFFS VIC 3496 |
| Commission ID: | 3451 |
| Approved provider: | Red Cliffs and Community Aged Care Services Inc |
| Activity type: | Assessment Contact - Site |
| Activity date: | 18 July 2023 |
| Performance report date: | 9 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 Jacaranda Village (**the service**) has been prepared by S Byers, 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 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 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |

Findings

The service was found Non-compliant in Standard 4 in relation to Requirement 4(3)(a) following a site audit in March 2023 where it did not demonstrate each consumer received services and supports that optimise their independence, well-being, and quality of life.

At the July 2023 assessment contact, the Assessment Team found the service had implemented improvements to address the deficits identified at the previous site audit.

Overall, consumers and representatives were satisfied they receive safe and effective services and supports for daily living. Consumer lifestyle documentation detailed personalised needs and preferences in relation to daily supports including one-on-one time and goals to improve independence and mobility. Staff demonstrated knowledge and understanding of individual consumer’s needs and preferences that aligned with care documentation. Physiotherapy staff work with consumers to develop goals and support them to maintain and improve independence and well-being. The service has implemented bi-monthly lifestyle and leadership meetings to review and plan lifestyle activities. Post activity reviews have been implemented to assess the suitability and engagement of activities. Staff confirmed attending lifestyle and leadership meetings and completing post activity reviews. Lifestyle has been added as a standing agenda to ‘resident and relative meetings’ to give consumers and representatives an opportunity to provide feedback in relation to lifestyle and activities. Management described how information from meetings and reviews are used to identify and plan future activities in practice. The Assessment Team observed consumers actively participating in group activities within the Manor and the Cottages. For example, group exercises and church services.

Based on the available evidence, I find Requirement 4(3)(a) is Compliant.

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)