Performance

Report

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Lodges on George |
| Service address: | 109 George Street KIPPA-RING QLD 4021 |
| Commission ID: | 5119 |
| Approved provider: | CPSM Pty Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 30 November 2022 |
| Performance report date: | 19 December 2022 |

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 Lodges on George (**the service**) has been prepared by E Blance, 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 - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff.

# Assessment summary

|  |  |
| --- | --- |
| Standard 8 Organisational governance | Not applicable as not all requirements have been assessed |

The Assessment Team did not assess all Requirements, therefore a summary or compliance rating for the Standard is not provided.

# 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 8

|  |  |  |
| --- | --- | --- |
| Organisational governance | |  |
| Requirement 8(3)(c) | Effective organisation wide governance systems relating to the following:   1. regulatory compliance; | Compliant |

Findings

The service was found to be non-compliant in Standard 8 Requirement 8(3)(c)(v) following a Site Audit conducted on 28-30 June 2022.

On 30 November 2022, an assessment contact was completed to assess the organisation’s return to compliance in relation to this requirement. The service demonstrated a range of quality improvements to address the previous non-compliance were undertaken to ensure regulatory compliance systems and processes were complying with relevant legislative and regulatory requirements for restrictive practices. Quality improvements undertaken included but were not limited to, development of guidelines to inform the regulatory requirements of the legislation, measures to identify and understand if compliance tasks were being undertaken, education to staff, increase of monitoring practices, ensuring policies and procedures were reflective of current practice and legislative requirements for assessment, authorisation and documentation of restrictive practices for consumer’s subject to restrictive practices were met.

It is my decision the improvements taken by the service were adequate and sustainable, and therefore I have decided this Requirement is now 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)