Performance

Report

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| Name of service: | Melville Grange Hostel |
| Service address: | 80 Melville Park Drive BERWICK VIC 3806 |
| Commission ID: | 3561 |
| Approved provider: | Wickro Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 20 October 2022 |
| Performance report date: | 17 November 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 Melville Grange Hostel (**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 2 Ongoing assessment and planning with consumers | 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 2

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| Ongoing assessment and planning with consumers | |  |
| Requirement 2(3)(a) | Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services. | Compliant |
| Requirement 2(3)(b) | Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes. | Compliant |

Findings

The Service was found non-compliant in Standard 2 in relation to Requirements 2(3)(a) and 2(3)(b) following a site audit in March 2022 where it was unable to demonstrate:

* Care plans provided comprehensive information to guide staff practice in relation to consumer risks; and consumers were reassessed and care plans updated when returning to the service following a hospital admission.
* Care plans identified the current needs of the consumer; and goals and care strategies were tailored for individual consumers.

At the October 2022 assessment contact, the Assessment Team found the Service had implemented improvements to address the deficits identified at the March 2022 site audit.

Consumers and representatives were confident the assessment and care planning process considers risks to the consumer’s health and well-being. Care plans for sampled consumers had been reviewed and updated with risks identified and documented to guide staff practice. Staff demonstrated understanding and practical application of the Service’s assessment and planning processes including the process for consumers returning to the service after hospital admission. Clinical meeting minutes demonstrated updates to the assessment and care planning procedure had been communicated to staff and associated training had been completed.

Consumers were satisfied that staff know their care needs and preferences. One representative said the initial care planning process was comprehensive with staff completing assessments and documenting personal preferences. Care planning documents were individualised and reflected the consumer’s needs, goals and preferences and included a comprehensive handover document that is regularly reviewed and updated to ensure changes to care are effectively communicated to staff to inform delivery of care. Care files included documented advance care directives and end of life planning and consultation. Staff demonstrated understanding of individual consumer’s needs, preferences and tailored care interventions.

Based on the evidence provided I am satisfied the service has in place effective assessment and planning systems to ensure risks to the consumer’s health and well-being are considered and consumers current needs, goals and preferences including advanced care planning are identified and addressed. I find Requirements 2(3)(a) and 2(3)(b) are 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)