Performance

Report

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| Name: | Narangba Aged Care |
| Commission ID: | 5757 |
| Address: | 23 Young Road, NARANGBA, Queensland, 4504 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 28 September 2023 |
| Performance report date: | 1 November 2023 |
| Service included in this assessment: | Provider: 3345 Tingari Group Pty Ltd  Service: 23598 Narangba Aged Care |

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 Narangba Aged Care (**the service**) has been prepared by T Wurf, 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 (performance assessment) – site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others, and
* the provider’s response to the assessment team’s report received 17 October 2023.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements were assessed |
| **Standard 7** Human resources | Not applicable as not all requirements were 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 Assessment Contact Report identified evidence that consumers received safe personal and clinical care, including those consumers with complex care needs. The service was effectively managing, monitoring and reviewing consumers’ weight loss, wounds, diabetes, changed behaviours, pain, medications, restrictive practices, and specialised nursing equipment. Care documentation included individualised plans to manage consumers’ complex needs, monitoring charts, evidence of regular review and referrals to allied health professionals and medical offers as required. Clinical staff interviewed spoke about the service’s clinical processes, such as monitoring weights and managing time-critical medications.

Consumers and representatives interviewed by the Assessment Team were satisfied the care consumers received was right for them, and managed and monitored in line with their needs and preferences.

However, the Assessment Contact Report identified that consumers’ behaviour support plans (BSPs) were generic and did not include individualised strategies to support staff to manage consumers’ changed behaviours. Clinical care documentation evidenced ongoing changed behaviours without successful interventions. Some clinical and care staff were able to describe individualised strategies for consumers, however, there were instances of staff speaking disrespectfully about consumers with changed behaviours.

In response, management acknowledge the Assessment Team’s feedback and committed to reviewing and updating all consumers’ BSPs to include individualised strategies. The approved provider’s response to the Assessment Contact Report confirmed actions completed following the assessment contact visit:

* Reviewed all consumers’ BSPs with consumers and representatives, and personalised them with individualised strategies to manage changed behaviours.
* Established a three-monthly review process of BSPs.
* Educated staff about expectations for documented and spoken language that is appropriate, respectful, and dignified.

Based on the Assessment Contact Report and the approved provider’s response, I am satisfied that consumers receive safe and effective personal and clinical care. In coming to my decision, I place weight on the service’s overall management of various aspects of personal and clinical care, and the positive feedback from consumers and their representatives. Regarding deficiencies in the service’s BSPs, I have considered that some staff knew individual strategies to manage consumers, and the prompt action taken by the provider to improve the service’s process to review and individualise BSPs. Therefore, I have decided this requirement 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

The Assessment Contact Report included evidence that the service has processes to review the workforce and ensure there is an appropriate number and mix of staff to deliver quality care and services.

Staff rosters are reviewed regularly to ensure staff allocations meet the changing needs of the consumer cohort. The service has processes to replace staff when required. Management analyses and investigates call bell data.

Staff were satisfied there are enough staff to meet the needs of consumers and reported that they have sufficient time to undertake their allocated tasks. The Assessment Team observed staff responding to call bells and attending to consumers in a timely manner.

Most consumers interviewed by the Assessment Team were satisfied there are enough staff to meet their needs. Whilst some consumers reported that they experienced delays in staff assistance with personal care, management took immediate action to meet with and resolve the concerns of those individual consumers. The approved provider’s response to the Assessment Contact Report described how the service investigated and responded to each consumer’s concerns. I have placed weight on the positive feedback from the majority of consumers and have considered the provider’s prompt action to address concerns from some consumers about staff delays.

Based on the Assessment Contact Report and the approved provider’s response, I am satisfied that the service has processes to plan and monitor the workforce to ensure it is sufficient to deliver safe and quality care and services to consumers. Therefore, I have decided this requirement 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)