Parkdale Aged Care

Performance Report

43-45 Herbert Street
PARKDALE VIC 3195
Phone number: 03 9580 0499

**Commission ID:** 4290

**Provider name:** Aged Care Group Pty Ltd

**Assessment Contact - Desk date:** 11 July 2022

**Date of Performance Report:** 05 August 2022

# Performance report prepared by

Daniela Fekonja, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 5 Organisation’s service environment** |  |
| Requirement 5(3)(b) | Compliant |

# Detailed assessment

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 Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by a desk assessment, review of documents and interviews with staff.

# STANDARD 5 Organisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

The service was previously found Non-compliant with Requirement 5(3)(b) during a Site Audit conducted on 15-17 March 2022.

The purpose of the assessment contact-desk was to ascertain whether the service has corrected the deficits identified at the time.

## Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided

## Assessment of Standard 5 Requirements

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

The Assessment Team received documents and spoke to management at the service to ascertain the measures put in place to address the deficits identified with an emergency egress route. Management provided an overview of audits they undertake to monitor that emergency paths of travel and emergency exit signs are operational.

An essential services report conducted by an external fire inspection authority provided the Assessment Team with evidence the emergency egress route is unobstructed and allows for a safe exit for consumers and staff in the event of an evacuation and a certificate of compliance was issued.

A further evacuation route sign has been placed in the main entrance foyer as per the essential services fire protection report recommendations.

The manager advised she completes a weekly environmental checklist inspection of emergency evacuation paths of egress and evacuation signs are lit.

Based on the information provided I find the service Compliant with this requirement.

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.