Performance

Report

**1800 951 822**

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| Name: | Pine Lodge Home for the Aged |
| Commission ID: | 5054 |
| Address: | 18 Balham Road, ROCKLEA, Queensland, 4106 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 13 June 2024 |
| Performance report date: | 27 June 2024 |
| Service included in this assessment: | Provider: 1240 The Russian Benevolent Association for Homes for the Aged  Service: 3411 Pine Lodge Home for the Aged |

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 Pine Lodge Home for the Aged (**the service**) has been prepared by Kimberley Reed, 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
* other information and intelligence held by the Commission in relation to the service.

# Assessment summary

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| Standard 1 Consumer dignity and choice | Not applicable as not all Requirements were assessed |
| **Standard 3** Personal care and clinical care | **Not applicable as not all Requirements were assessed** |
| **Standard 5** Organisation’s service environment | **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 1

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| Consumer dignity and choice | |  |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |

Findings

Consumers were treated with dignity and respect and consumers’ culture and diversity was valued. Consumers and representatives confirmed consumers are treated with respect; the consumer’s dignity and privacy were valued, and the staff knew them well. Staff were observed treating consumers with dignity and respect and described consumers’ backgrounds and individual preferences. Care documentation recorded what was important to consumers to maintain their identity. The organisation had policies and documents which outlined consumers’ right to respect and dignity to guide staff practice. Staff were observed using consumers’ preferred names and providing support and assistance in a gentle, caring manner. Assistance with meals and support with mobilisation was observed to be calm and unhurried with consumers allowed adequate time to respond to questions. Conversations between consumers and staff exhibited warmth and familiarity.

# 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

Consumers and representatives were very happy with the clinical care provided by the service to consumers. Documentation evidenced timely identification, effective assessment, management, and evaluation of pressure injuries, wounds, falls risks, changed behaviours, and diabetes. Clinical documents including care plans, progress notes, and associated documents, evidenced appropriate clinical care delivery.

The service has undertaken reviews of their clinical processes through a recent audit and as a result had introduced of the role of Clinical Champion for areas such as wound care, diabetes management and continence care. These roles ensure the quality of the care provided to consumers is best practice. Management also took the following actions to ensure optimal clinical care is provided by monitoring clinical indicators at monthly clinical meetings, reviewing the findings, and acting accordingly. Management monitored consumer and representative feedback regarding care through feedback and complaints mechanisms, surveys, and care reviews. Audits conducted relating to personal and clinical care were in accordance with the Aged Care Quality Standards.

# Standard 5

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| Organisation’s service environment | |  |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Compliant |

Findings

Consumers and representatives confirmed the service was clean, well maintained, and comfortable, including the common areas. Consumers felt safe to move freely both indoors and outdoors. All consumers, including those living in the memory support unit, had access to outdoor areas with undercover seating areas, flat paths accessible to consumers, including those using mobility equipment, and landscaped gardens. The service environment was single level. Indoor areas were spacious and uncluttered and featured both communal and private areas which consumers could reserve for private functions. The memory support unit had access to an enclosed garden with raised garden beds planted with vegetables and herbs. Photographs of consumers enjoying activities were displayed in common areas. Consumers were observed moving freely indoors and outdoors.

The Safety Advisor described effective processes to ensure the environment was safe, well maintained, and clean. The cleaning schedule reflected daily and weekly cleaning, aiming to create a fresh and comfortable environment, free from any discomfort or odour. A deep clean was also performed in the room when a consumer left the service. Effective cleaning processes were observed during the Assessment Contact. Equipment such as wheelchairs and hoists were stored in alcoves and hallways were wide and uncluttered.

# 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

Consumers and representatives stated sufficient staff were available when required and staff responded promptly to consumers’ needs. Consumers were confident staff were providing safe care. Management ensured a mix of skilled staff appropriate to consumers’ clinical and care needs. Management used a proactive approach to planned and unplanned leave to avoid staff shortages. Staff stated although they could be busy, there were sufficient staff members to provide care and services in accordance with consumers’ needs and preferences.

The service does not use agency or a pool of casual staff, noting the service preference is to have permanent staff. The service had a number of graduate Registered Nurses being oriented to the service. Where there was unplanned leave, current staff nominated for extra shifts. The service fostered and supported an environment where staff worked collaboratively to ensure shifts are filled.

Call bell records were monitored monthly and investigated. Results were shared with staff during handover and staff meetings, with reminders being given to respond to call bells in a timely manner. Staff were observed responding promptly to requests for assistance from consumers.

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)