Performance

Report

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| Name of service: | Regis Kingswood |
| Service address: | 9 Brenchley Grove KINGSWOOD SA 5062 |
| Commission ID: | 6824 |
| Approved provider: | Regis Aged Care Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 15 June 2023 |
| Performance report date: | 12 July 2023 |

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 Regis Kingswood (**the service**) has been prepared by M Glenn, 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.

# 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; and
* the provider’s response to the Assessment Team’s report received on 6 July 2023 acknowledging the recommendations made by the Assessment Team.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 4** Services and supports for daily living | **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 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 |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Compliant |

Findings

The service demonstrated how each consumer receives safe and effective personal and clinical care that is tailored to their needs and optimises their health and well-being. Policies and procedures guide staff to ensure best practice is achieved with the care and services provided. Care files sampled demonstrated effective provision of personal and clinical care, including management of pain, falls, skin integrity, wounds and weights. While gaps in documentation relating to management of infections for wounds, pain, and food and fluid monitoring charts were noted, there were no impacts for consumers identified. These gaps were discussed with management who promptly informed staff with a memorandum. Consumers and representatives confirmed consumers receive the care and services they need and can see the Medical Officer or Allied Health services when required.

Deterioration or changes of consumers’ mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. Staff were knowledgeable of each consumer and could identify consumers who have elevated risk associated with their care. Staff described strategies to manage risk associated with falls and specialised nursing care. Consumers and representatives said staff provide consumers the care they need and explain any risks to their well-being.

For the reasons detailed above, I find requirements (3)(a) and (3)(d) in Standard 3 Personal care and clinical care compliant.

# Standard 4

|  |  |  |
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| Services and supports for daily living | |  |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

Consumers’ dietary needs and preferences are assessed and documented, including the foods they like or dislike, allergies, food textures and fluid thickness. Alternative meal choices are available and staff listen to feedback and suggestions through resident meetings and undertaken observations of consumers’ dining experience. Management continues to improve meal service by providing ongoing training to staff, allocating additional staff at mealtimes and creating a refreshing dining room environment. Staff were observed promoting an engaging atmosphere during meal service and were respectful of consumers. Most consumers and representatives were satisfied that the meals provided were of suitable quality and quantity.

For the reasons detailed above, I find requirement (3)(f) in Standard 4 Services and supports for daily living 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)