Performance

Report

**1800 951 822**

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| Name of service: | Rockpool Carseldine |
| Service address: | 56 Plaza Place CARSELDINE QLD 4034 |
| Commission ID: | 5842 |
| Approved provider: | Rockpool RAC Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 10 October 2022 |
| Performance report date: | 27 October 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 Rockpool Carseldine (**the service**) has been prepared by S. de Jarlais, 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 Report, the Assessment Contact report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.
* the provider’s response to the assessment team’s report received 17 October 2022.
* Other information and intelligence held by the Commission in relation to the service.

# Assessment summary

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| Standard 2 Ongoing assessment and planning with consumers | Not applicable as not all requirements have been assessed |
| **Standard 3** Personal care and clinical care | **Not applicable as not all requirements have been assessed** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 7** Human resources | **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 |

Findings

Consumers provided examples of how they are involved in their care and service’s planning and provided examples of receiving assistance for nutritional needs and time sensitive medications to be delivered on time, to enable safe and effective care.

Assessment and planning documentation identified risk considerations and strategies for addressing consumers’ health and wellbeing needs. Care documentation included assessments by allied health professionals and medical officers, to guide staff providing care.

Staff described the care and assessment planning processes and demonstrated how care and services consider consumer risks to guide staff in delivering care safely. Staff described assessment and care planning processes that included a consideration of risk and were familiar with risk minimisation strategies to support the delivery of safe care and services. Staff are able to access care planning documentation to guide the way they provide care and service needs to consumers and have further resources that include organisational policies and procedures.

Management and staff demonstrated that consumers are referred to allied health professionals and medical officers for assessments, to ensure consumers’ cares are current in meeting their health and well-being needs.

Based on the information contained above, it is my decision this requirement is Compliant.

**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/representatives provided information on how staff assist consumers with receiving care that is tailored to meet their needs including in relation to restrictive practices, behaviour, skin integrity, pressure injury and wound care. Feedback from consumers/representatives identified informed consent is being provided for chemical restraint and that strategies are included for managing behaviours in behaviour support plans.

The service was identified as conducting assessments to determine the individual management and evaluation of consumers with restrictive practices, skin integrity, falls and pain management. Ongoing reviews are occurring during ‘resident of the day’ reviews, to ensure personal and clinical care meets the needs of the consumer.

Management demonstrated assessment outcomes are discussed with consumers/representatives and documented in care planning records to guide staff. Restrictive practices included assessments, informed consent and monitoring information relating to consumers with challenging behaviours that included strategies documented in a behavioural support plan. A restrictive practice conference form has been introduced and staff document information to capture strategies for reducing the use of restrictive practices.

Care documentation and staff practices evidenced staff are delivering safe and effective personal and clinical care relating to chronic pain, wound management and pressure injuries. Staff are providing strategies that includes pharmacological and non-pharmacological options for relieving pain and the review of effectiveness

Based on the information contained above, it is my decision this requirement is Compliant.

**Standard 5**

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| Organisation’s service environment | |  |
| Requirement 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Compliant |

Findings

Consumers expressed that they were generally satisfied living at the service and that the environment is clean, well maintained and comfortable and enables them to move freely, both indoors and outdoors.

The service environment was observed to be clean both internally and externally, with cleaning schedules in place to ensure all areas of the service are cleaned regularly. Staff and consumers said additional cleaning can be requested if required

Management and staff said consumers requiring assistance to mobilise are supported by staff to access the outdoors when they wish. Management advised that the service maintains the internal and external service environment to ensure it is comfortable, safe and secure.

Based on the information contained above, it is my decision 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

Consumers said they are not waiting long for staff to attend to their care needs when accessing the call bell and there are enough staff providing care in a kind and respectful manner that is not rushed.

Management said they review unplanned leave and clinical staff are rostered 24 hours a day, 7 days a week. Consideration of care staffing level numbers has been determined based upon the care and service needs of consumers located in the various locations of the service.

Staff provided information of having adequate time and the right number of staff to provide care and services in accordance with consumers’ needs and preferences.

The service conducts consumer satisfaction surveys and reviews the feedback results from consumers to determine their satisfaction.

Based on the information contained above, it is my decision this requirement is Compliant.

1. The preparation of the performance report is in accordance with section S68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)