Performance

Report

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| Name: | Rockpool Pelican Waters |
| Commission ID: | 8248 |
| Address: | 17 Spitfire Banks Drive, Pelican Waters, Queensland, 4551 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 23 May 2024 |
| Performance report date: | 12 June 2024 |
| Service included in this assessment: | Provider: 7088 Rockpool RAC Pty Ltd  Service: 27828 Rockpool Pelican Waters |

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 Pelican Waters (**the service**) has been prepared by S Turner, 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
* the provider’s response and acceptance of the assessment team’s report received 28 May 2024
* information about the service that is held by the Commission.

# Assessment summary

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| Standard 1 Consumer dignity and choice | 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 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 said they were treated with dignity and respect and felt accepted and valued. Staff were familiar with consumers’ backgrounds and individual preferences. Consumers said staff addressed them by their preferred name and protected their privacy by knocking on the door before entering the room and seeking permission prior to providing care. Consumers provided specific examples of how staff met their needs and preferences; one consumer said their preference was to have female care staff and the service respected this.

Staff spoke about consumers in a way that was respectful and demonstrated an understanding of the consumers’ personal circumstances and life journey. Staff had an understanding of the organisation’s code of conduct and how it applied to the provision of care and services to consumers.

Care related documentation reflected what was important to consumers to maintain their identity. Consumer information was detailed and included the consumer’s background, personal preferences and cultural practices and aligned with information provided during consumer and staff interviews.

Staff were observed being patient when attending consumers and when assisting them with their mobility.

I am satisfied consumers are treated with dignity and respect and that their identity is valued. I find Requirement 1(3)(a) 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 spoke highly of the care provided at the service and provided positive feedback about the management of their wounds and their pain. Consumers provided examples of how their wounds were healing, and said staff ensured they received their analgesia and time-sensitive medication as prescribed.

The service has a suite of policies, procedures and tools to guide staff practice. Staff received education to support their knowledge and skills and demonstrated an understanding of consumers’ care needs, including those with changed behaviours and the processes in place to support care delivery. Management and clinical staff said they have successfully managed consumers’ changed behaviours without the use of restrictive practice; care documentation confirmed the use of recommended strategies.

Care documentation demonstrated effective care delivery in relation to the management of complex care such as diabetes, wounds, pain management, falls and catheter care. For consumers with specialised nursing care needs, care documentation provided staff with instructions and guidance and included evidence of referral to allied health professionals and other health services. Care documentation for a consumer who had experienced a fall included the completion of a head-to-toe assessment, neurological and physical observations and a referral to a physiotherapist.

I am satisfied consumers get safe and effective personal and clinical care that optimises their health and well-being. I find Requirement 3(3)(a) is Compliant.

# 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 provided positive feedback about the cleaning and maintenance of the service. They said their rooms were cleaned daily and that communal areas were well presented. Consumers said that any maintenance issues including requests to hang pictures on walls were responded to promptly.

Maintenance was conducted according to a planned schedule or in response to a maintenance request. The service’s living environment was observed to be clean, safe, comfortable and well maintained. Consumers were observed moving freely indoors and outdoors.

Cleaning was observed in progress and cleaners followed a schedule that included the frequency of the clean. All staff were aware of the process to report any cleaning or maintenance issues and stated requests are actioned efficiently. Air conditioning, fire equipment and manual handling equipment were serviced by external contractors and monitored by the service’s maintenance staff.

I am satisfied the service environment is safe and clean and supports consumers to move freely. I find Requirement 5(3)(b) 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 spoke positively of staff and said they were well trained; they said they felt confident in the care they received. Most consumers felt there were sufficient staff to meet their needs and said that staff responded to their requests for assistance in a timely manner. Consumers said staff met their preferences for personal care, their medications were administered on time and their wounds were treated in accordance with care directives.

The service had systems and processes to ensure the right number and mix of staff were allocated to all areas of the service; this included consideration of new consumers who were entering the service. Management described how the master roster is managed and how the service uses permanent and casual staff to fill vacant shifts including unplanned leave; agency services are utilised as needed.

Management were actively recruiting to ensure the service can meet the consumers’ needs as the consumer population grows. New staff participate in an induction process that is provided on a weekly basis and are provided buddy shifts to assist them as they transition into the service. As each wing of the service opens, management ensures there is a mix of new and experienced staff across each shift; additional clinical support is provided as needed. Staffing mix and recruitment is discussed at the daily head of department meetings to ensure the current number and mix of staff are working effectively. A recruitment meeting is held regularly to discuss recruitment numbers against projections for consumers entering the service.

I am satisfied the workforce is planned to deliver safe, quality, care and services. I find Requirement 7(3)(a) is Compliant.

1. The preparation of the performance report is in accordance with section 68A of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)