Performance

Report

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| Name of service: | Romani |
| Service address: | 40 Tumbella Drive Murray Bridge SA 5253 |
| Commission ID: | 8222 |
| Approved provider: | RSL Care South Australia Incorporated |
| 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 Romani (**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 23 June 2023 acknowledging the recommendations made by the Assessment Team.

# 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 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

Assessment and planning informs care plans to guide the delivery of safe and effective care and services. Assessments are undertaken using validated assessment tools, such as the Falls Risk Assessment Tool, Braden skin assessment and Abbey pain assessment. Interviews with consumers and their representatives, and reports from various specialist services are used to ensure care plans are tailored to individual consumers’ needs and preferences. Staff were able to identify specific risks and health care needs of individual consumers and identified the care plan as their primary guide in provision of care. Consumers feel safe and are satisfied with the care provided.

For the reasons detailed above, I find requirement (3)(a) in Standard 2 Ongoing assessment and planning with consumers 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

The service demonstrated how each consumer receives safe and effective personal and clinical care tailored to their needs, while following best practice to optimise health and well-being. Policies and procedures assist and guide staff in providing safe and effective personal and clinical care. Staff were knowledgeable of individual consumer preferences and described how they identify, action and review pain and wound management strategies. Consumers and representatives confirmed consumers receive the care they need, and are reviewed by the Medical Officer and other Allied Health professionals when required.

For the reasons detailed above, I find requirement (3)(a) in Standard 3 Personal care and clinical care 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

Information from consumer and staff feedback, care needs of consumers and analysis of call bell data is used for workforce planning to determine the level of staff required to provide appropriate care and services. Staff felt they have a sufficiently skilled and resourced workforce to deliver safe, quality care and services. Staff were observed performing duties unhurried, interacting with consumers in a relaxed manner and attending call bells efficiently. Lifestyle staff were observed throughout the day interacting with consumers in formal activities and spending time with them outside scheduled events. Two consumers lacked some confidence in agency staff at times, however, documentation showed ongoing recruitment activities aim to reduce reliance on agency staff. Overall, consumers and representatives felt staffing levels were adequate and staff have the skills to deliver safe and effective care.

For the reasons detailed above, I find requirement (3)(a) in Standard 7 Human resources 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)