Performance

Report

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| Name of service: | Southern Cross Care Assumption Villa Residential Aged Care |
| Service address: | 84 Brobenah Road LEETON NSW 2705 |
| Commission ID: | 0398 |
| Approved provider: | Southern Cross Care (NSW & ACT) Limited |
| Activity type: | Assessment Contact - Site |
| Activity date: | 12 July 2023 |
| Performance report date: | 9 August 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 Southern Cross Care Assumption Villa Residential Aged Care (**the service**) has been prepared by G Jones, 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; 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.
* the provider’s response to the assessment team’s report received 18 July 2023.

# 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** |

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)(c) | The organisation demonstrates that assessment and planning:   1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and 2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer. | Compliant |
| Requirement 2(3)(d) | The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided. | Compliant |

Findings

Requirement 2(3)(c)

Review of assessment and planning documentation and interviews with consumers and representatives demonstrated other organisations, individuals and providers of care and services are involved in the care of the consumer. Consent is obtained from the consumer or representative for the service to make referrals to other health providers where the service is not unable to meet the needs or preferences of the consumer including wound consultants, Dementia Support Australia (DSA) and speech pathology.

The Approved Provider, in their response to the report, accepted the Assessment Team’s findings.

Requirement 2(3)(d)

Case conferences occur with consumers and representatives regularly where care and services for consumers are discussed. All consumers and representatives interviewed indicated staff discuss the outcomes of consumer assessment and care planning with them. The service has a care planning schedule and a case conferencing schedule which showed no outstanding reviews. A consumer’s representative indicated they had received a copy of their father’s care plan.

The Approved Provider, in their response to the report, accepted the Assessment Team’s findings.

# 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

Requirement 3(3)(a)

All consumers interviewed provided positive feedback about their clinical care, and staff knowledge around consumer care needs was sound. All staff interviewed indicated they have received increased clinical care training in areas including wound care, restrictive practices and falls management to support them in meeting this Requirement. Care planning and other documentation reviewed indicated management has good clinical oversight of all areas of consumer care to ensure care is best practice and tailored to individual needs, and aligned with what the consumers and representatives said.

The Approved Provider, in their response to the report, accepted the Assessment Team’s findings.

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)