Performance

Report

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| Name: | Southern Cross Care Orana Residential Aged Care |
| Commission ID: | 0054 |
| Address: | 59 Napier Street, DENILIQUIN, New South Wales, 2710 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 15 May 2024 |
| Performance report date: | 22 June 2024 |
| Service included in this assessment: | Provider: 305 Southern Cross Care (NSW & ACT) Limited  Service: 70 Southern Cross Care Orana Residential Aged Care |

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 Orana Residential Aged Care (**the service**) has been prepared by Katrina Platt, 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 to the assessment team’s report received on 29 May 2024.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not Applicable as not all Requirements assessed |
| **Standard 7** Human resources | **Not Applicable as not all Requirements assessed** |

A detailed assessment is provided later in this report for each assessed Requirement.

# 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 |

Findings

Consumers and consumer representatives spoke highly of care and services provided to each individual consumer and were involved in care management. Staff discussed consumer needs and preferences in detail and were knowledgeable about wound management procedures and escalation protocols, diabetes management plans, weight loss monitoring and escalation, complex care and behaviours. Pain managements were conducted on service entry and discussions with consumers and consumer representations ensured pain management was tailored to individual consumer needs and preferences. Some deficiencies in clinical documentation were identified and addressed with staff training in pain charting, understanding pain types and experiences and effectiveness of interventions.

Timely assessments for consumers with compromised skin integrity were completed and identified appropriate interventions including use of pressure relieving devices, skin moisturisation and pressure area care. Wound care policies and procedures guided staff in best practice, with individualised treatment plans evidenced for multiple wound care management. Wound charting, wound photographs and use of measuring devices was inconsistent and identified for continuous improvement action which have included staff education and implementation of a wound documentation audit tool to ensure consistency and quality care outcomes.

Individualised diabetes treatment plans evidenced appropriate blood glucose level recordings within acceptable ranges and escalation protocols ensured consumer safety. Weight loss and nutrition and hydration management was demonstrated, with appropriate investigations and escalation for consumer changes evidenced. Complex care needs and preferences were documented and included appropriate monitoring and charting and vital observations. Falls risk assessments were demonstrated for consumers with high falls risks and falls histories, with appropriate medical officer and physiotherapy referrals actioned for review and assessment. Falls prevention measures were documented and included appropriate mobility aids and supports.

Minimisation of psychotropic medication use was demonstrated for consumers experiencing changed behaviours, with individual management strategies and interventions identified within behaviour support plans and monitored for effectiveness. Restrictive practices were identified for chemical, environmental and mechanical restraint. Chemical restraint was a measure of last resort, with nonpharmacological strategies utilised for behaviour support management. Environmental restraint ensured consumer safety and mechanical restraints and associated risks were identified and discussed.

# 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 and consumer representatives said staff were available and responsive when needed and attended promptly to care and services provision. Staff discussed teamwork, feeling supported, adequate shift coverage for unplanned leave and ensuring allocated tasks and responsibilities were undertaken to ensure consumer care and services needs and preferences were met. Staff were observed to attend to consumers in a timely manner for personal care and support for engagement in social activities.

Management described planning and coordination systems for delivery and management of safe and quality care and services, and included electronic roster monitoring, ongoing targeted recruitment campaigns, an international sponsorship program and new employee orientation. Legislative requirements for registered nurse care delivery was evidenced and regular assessment of staff number and skills and abilities mix was demonstrated in roster changes which accommodated changing consumer needs and preferences.

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)