Performance

Report

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name: | Southern Cross Care St Michael's Residential Aged Care |
| Commission ID: | 0038 |
| Address: | 62 Centre Street, CASINO, New South Wales, 2470 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 2 July 2024 |
| Performance report date: | 23 July 2024 |
| Service included in this assessment: | Provider: 305 Southern Cross Care (NSW & ACT) Limited  Service: 54 Southern Cross Care St Michael's 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 St Michael's Residential Aged Care (**the service**) has been prepared by E. Blance, 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
* other information known to the Commission

# Assessment summary

|  |  |
| --- | --- |
| Standard 4 Services and supports for daily living | Not Applicable |

An assessment summary is Not Applicable as not all requirements were 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 4

|  |  |  |
| --- | --- | --- |
| Services and supports for daily living | |  |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

The service was previously found non-compliant in this requirement following an Assessment contact on 8 July 2023, and continuing non-compliance on 6 February 2024. The service did not demonstrate where meals are provided, they are varied and of suitable quality and quantity.

An Assessment contact was conducted on 2 July 2024. The assessment team report brought forward information that the service have undertaken continuous improvement actions to remedy the previously identified non-compliance. Actions included, but were not limited to:

* Staggered mealtimes to ensure meals remain an appropriate temperature
* Implemented equipment to ensure meals remain an appropriate temperature
* Improved menus
* Conducted staff training
* Implemented processes to monitor the quantity, quality and variety of meals including a food focus group
* Consulted with consumers regarding meal preferences

I have considered the information within the assessment team report which supports the measures implemented by the service to ensure meals are varied and of suitable quality and quantity. The assessment team made observations, interviewed staff and reviewed consumer documentation which supported the actions taken by the service. Consumers provided positive feedback about improvements made by the service. I am satisfied the service has undertaken continuous improvement actions which are sustainable and effective. I find requirement 4(3)(f) compliant.

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)