Performance

Report

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| Name of service: | Springwood Terrace Care Community |
| Service address: | 260-270 Parfey Road SPRINGWOOD QLD 4127 |
| Commission ID: | 5425 |
| Approved provider: | DPG Services Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 21 June 2023 |
| Performance report date: | 20 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 Springwood Terrace Care Community (**the service**) has been prepared by B Bassett, 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

# 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 and representatives said staff treat consumers with dignity and respect and are aware of consumers backgrounds and personal preferences. Staff were observed caring for consumers respectfully and were able to demonstrate a detailed knowledge of the background of sampled consumers including their life history, likes and dislikes and their connections to family, friends and other consumers in the service.

Care planning documentation reflected what is important to consumers to maintain their identity and ensure their culture and diversity was valued. The organisation has policies and processes which outline consumers’ right to respect and dignity, and staff demonstrated their understanding of the organisation’s expectations in relation to dignity and respect as set out in in the organisation’s policies and explained through the service’s induction and training programs. For example, lifestyle staff advised upon entry to the service a “My Life Story” profile is completed with the consumer and their family or other important persons chosen by the consumer. Staff said a snapshot of this information is also available in consumer rooms and helps guide staff in providing care and services in accordance with the consumer’s preferences.

In consideration of the above information, I find the service compliant with respect to Requirement 1(3)(a).

# 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 representatives said they were satisfied consumers received safe and effective personal and clinical care. For example, consumer representatives said the service contacts them immediately regarding any concerns regarding consumer care and changes in care are implemented in consultation with consumers and their representatives.

Care plans sampled reflected individualised clinical interventions which were tailored to each consumer’s needs. For example, pain charting demonstrated consumers who suffer from chronic pain receive pain relief in a timely manner and are reviewed on an ongoing basis to ensure their pain is managed and their health and wellbeing prioritised.

While on site the Assessment Team identified some concerns regarding the monitoring of consumers following falls, with the example of a consumer who was not reviewed by a physiotherapist following a fall and neurological observations not conducted in accordance with the organisation’s falls policy. However, Management were aware of the issue and provided the Assessment Team with a Continuous Improvement Plan (CIP) that included actions implemented to strengthen the service’s falls management practices. This included ensuring staff were educated and trained to effectively monitor consumers after falling and management conducting spot checks to ensure training was being completed and processes post fall were being followed as per the organisation’s falls policy.

The service was able to demonstrate effective monitoring of personal and clinical care provided to consumers, including acknowledgment of mistakes to consumers and their representatives and implementing remedial actions to prevent the likelihood of further incidents.

In consideration of the above information, I find the service compliant with respect to Requirement 3(3)(a).

# 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

The Assessment Team observed the service environment was clean, well maintained and comfortable. Furniture, fittings and common areas were observed to safe, comfortable and homely.

Consumers and representatives said they were satisfied with the cleaning and maintenance processes at the service. They confirmed that consumers could move freely around the service in both indoor and outdoor areas.

Review of documents confirmed cleaning and maintenance schedules were in place and followed to ensure the safety and cleanliness of the service. The service had an auditing process to ensure the service’s environment was monitored to ensure any concerns were identified and addressed as soon as possible.

In consideration of the above information, I find the service compliant with respect to Requirement 5(3)(b).

# 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

Management described how the workforce was planned to provide safe and quality care and services to consumers. Roster allocation processes and regular staffing review ensured staff allocations adequately met consumer needs and preferences. For example, an audit of consumer care needs conducted in May 2023, identified an increase in consumers requiring lifting assistance in one particular wing of the service. In response, management allocated an additional care staff member to that wing to assist.

Staff said there were adequate staff to provide care and services in accordance with consumers’ needs and preferences. Staff said they had enough time to undertake their allocated tasks and responsibilities and they are able to attend to consumer care needs without rushing.

Recruitment and training records demonstrated that a planned mix of staff were engaged and equipped to perform their various roles. The service actively recruited and developed staff and had a collaborative program with local TAFE providers to promote the engagement of trainees. Care and Registered staff interviewed said they received good support if any changes were identified in relation to consumers’ needs.

Consumers/representatives described their satisfaction with receiving care in a timely manner. They said there were enough staff at the service to meet their needs and they felt safe when staff were providing care. For example, consumers sampled said staff respond promptly to their use of call bells and provide the required assistance without delay.

In consideration of the above information, I find the service compliant with respect to Requirement 7(3)(a).

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)