Performance

Report

**1800 951 822**

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| Name of service: | St Basil's at St Peters |
| Service address: | 9 Winchester Street ST PETERS SA 5069 |
| Commission ID: | 6767 |
| Approved provider: | St Basil's Homes for the Aged in South Australia (Vasileias) Inc |
| Activity type: | Assessment Contact - Site |
| Activity date: | 6 October 2022 |
| Performance report date: | 18 November 2022 |

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 St Basil's at St Peters (**the service**) has been prepared by M Roach, 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 performance report dated 10 May 2022 for an Assessment Contact - Site undertaken on 8 April 2022.

# Assessment summary

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| 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 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant |

Findings

Requirement 3(3)(b) was found Non-compliant following an assessment contact conducted on 8 April 2022. The service was unable to demonstrate effective management of high impact or high prevalence risks for sampled consumers in relation to post fall monitoring, diabetes management and behaviour support. On 6 October 2022, the assessment team found the service had effectively implemented a range of corrective actions and improvements in response to the non-compliance, including review and update policies and procedures to guide staff, provide training to support staff and implement monitoring and review mechanism to ensure consumer care related risks are identified and managed effectively.

At the assessment contact, the team sampled consumers with care needs that associated with high impact or high prevalence risks including weight loss, falls, unstable diabetes, poor skin integrity, complex wound care, requiring behaviour support and clinical deterioration and found the service demonstrated effective management of these care related risks for sampled consumers. Consumers and representatives confirmed they have input into consumers’ care plans, including the management of clinical risks and said the service provides safe and adequate care for them. Consumer documentation sampled demonstrated identification and appropriate management of consumers’ care needs that associated with risks. This includes use clinical assessments to reduce or monitor specific risks, follow health professionals’ directives in managing risks and seek further advice from the health professional when the risk increases. The service utilises policies, procedures and training to guide and support staff in managing consumers’ care needs associated risks and has regular meetings to monitor the management of risks associated with the care of each consumer. Staff interviewed demonstrated knowledge of consumers who had been identified with high-risk clinical care and described management strategies in line with each consumer’s care plans.

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