Performance

Report

**1800 951 822**

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| Name of service: | Templestowe Manor |
| Service address: | 410-418 Thompsons Road Templestowe Lower VIC 3107 |
| Commission ID: | 3972 |
| Approved provider: | RSL Care RDNS Limited |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 13 April 2023 to 14 April 2023 |
| Performance report date: | 11 May 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 Templestowe Manor (**the service**) has been prepared by N Wapling, 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 - Desk; the Assessment Contact - Desk report was informed by a desk assessment, review of documents and interviews with staff, consumers/representatives and others.

# Assessment summary

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| Standard 5 Organisation’s service environment | 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 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 service was found non-compliant with Standard 5 in relation to Requirement 5(3)(b) following a Site Audit conducted between 16 November 2022 and 18 November 2022. The service was unable to demonstrate:

* The service environment was clean.

At the April 2023 Assessment Desk Contact, the Assessment Team found the service had implemented improvements to address the deficits identified at the previous Site Audit.

The service has demonstrated the environment was clean through improving workforce stability strategies to support the clearing role, revised cleaning schedules to support unscheduled urgent cleaning requests, sourced external professional deep cleaning support, and the replacement and repair of internal furnishings.

Consumers and representatives were satisfied there has been an improvement in the cleanliness of their rooms and the broader service environment, and staff respond to cleaning issues in a timely manner. Management said staff reached satisfactory outcomes by liaising regularly with consumers and representatives addressing dissatisfaction with the cleanliness of the environment. Staff confirmed cleaning had improved with the introduction of additional cleaning staff and extended hours. They also confirmed a system is in place to request urgent additional cleaning. The system was recently introduced and has assisted with maintaining cleanliness in the service. The maintenance staff confirmed they monitor and manage the environmental maintenance of the service daily. The Assessment Team reviewed the urgent cleaning register with jobs requested dated as completed in a timely manner. The Assessment Team also reviewed the preventative and reactive maintenance register with items either actioned or in progress, the complaints register and consumer satisfaction surveys. Each register contained positive comments reflecting the improved cleanliness of the service environment.

In making my decision I have considered the Assessment Team report and the evidence of improvements in cleanliness and systems identified. I have also been influenced by the satisfaction of the consumers and representatives with the improvement to cleanliness at the service. I am satisfied the service is safe, clean, being well maintained and is comfortable. I find Requirement 5(3)(b) is 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)