Performance

Report

**1800 951 822**

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| Name of service: | TriCare Jindalee Aged Care Residence |
| Service address: | 22 Endeavour Street JINDALEE QLD 4074 |
| Commission ID: | 5939 |
| Approved provider: | TriCare Jindalee Aged Care Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 15 August 2023 |
| Performance report date: | 7 September 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 TriCare Jindalee Aged Care Residence (**the service**) has been prepared by P. Sherin, 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.
* The approved provider’s response to the assessment team’s report received 22 August 2023 acknowledging the assessment team’s findings.
* other information and intelligence held by the Commission in relation to the service.

# 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

The service demonstrated each consumer is treated with dignity and respect, and their identity, culture and diversity are valued.

Consumers and representatives confirmed staff treat consumers with dignity and respect and provided examples of how consumers’ cultural identity and diversity is valued at the service.

Care documentation reflected what is important to consumers to maintain their identity. Information on consumers’ background, culture, interests, and personal preferences are included in care planning to guide staff practice.

Staff demonstrated knowledge of individual consumers’ background and preferences.

The organisation has documents which outline consumers’ right to respect and dignity.

Staff were observed treating consumers in a caring manner, addressing consumers by their preferred name, and conversing with them respectfully.

# 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 expressed satisfaction with the care provided to consumers, and considered consumers receive personal and clinical care that is safe and right for them.

Care planning documentation identified effective management of consumers’ wound care, pressure area care, time-specific medications, pain, and diabetes.

Staff were aware of strategies to manage individual consumers’ personal and clinical care delivery; this aligned with information under care planning documentation.

Where restrictive practices are used, the service demonstrated appropriate assessments, authorisations, consent, behaviour support plans, monitoring and review in place.

# 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

Consumers said they feel safe and comfortable at the service, they can move freely both indoors and outdoors, and the service environment is kept clean and well-maintained.

Consumers confirmed they know how to report any maintenance issues to staff and provided examples of how these are attended to promptly.

The service implements schedules and processes for preventative and reactive maintenance.

The assessment team observed the service environment to be clean, with well-maintained external courtyards and garden areas, equipped with adequate seating and level pathways for consumer use.

# 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

The service demonstrated the workforce is planned to enable the delivery of safe and quality care and services.

Consumers and representatives said there are enough staff at the service to meet consumers’ needs and staff respond to call bells promptly.

Most staff reported they have adequate time to complete their duties and to provide care and services in accordance with consumer needs and preferences.

Management described the ongoing recruitment and shift replacement processes to ensure staff allocations and skill mix are meeting the changing needs of consumers.

Call bell response times are discussed at management meetings and call bells greater than 10 minutes are investigated to identify the cause and prevent recurrence.

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)