Uniting Mirinjani Weston ACT

Performance Report

15 Conder Street
WESTON ACT 2611
Phone number: 02 6288 4300

**Commission ID:** 2985

**Provider name:** The Uniting Church in Australia Property Trust (NSW)

**Assessment Contact - Site date:** 28 July 2020

**Date of Performance Report:** 26 October 2020

# Publication of report

This Performance Report **may be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this 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 provider’s response to the Assessment Contact - Site report received 1 October 2020.

# STANDARD 3 Personal care and clinical care

# Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

The Assessment Team assessed one of the seven specific requirements under this Quality Standard, which I have found to be compliant. As all requirements under this Standard were not assessed, an overall rating for this Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

The Assessment Team found that, for the consumer’s sampled, care planning documents and staff interviews generally demonstrated the service identifies and manages the high impact and high prevalent risks associated with their care. The Assessment Team further found that interviews with management and nursing staff, and organisational documents reviewed, demonstrated that the service monitors, analyses and responds to high impact or high prevalent risks for specific consumers.

However, the Assessment Team identified areas for improvement in relation to the management of a consumer’s behaviours and the monitoring of a consumer following a fall.

In its response the approved provider gave details of its management of the consumers and identified improvements it had made. The embedding of these improvements will be reviewed at future assessment contacts at this service.

I find that the approved provider is compliant with this 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.