Performance

Report

**1800 951 822**

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| Name of service: | Vasey RSL Care Frankston South |
| Service address: | 85 Overport Rd FRANKSTON SOUTH VIC 3199 |
| Commission ID: | 3038 |
| Approved provider: | Vasey RSL Care Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 29 September 2022 |
| Performance report date: | 20 October 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 Vasey RSL Care Frankston South (**the service**) has been prepared by V Stephens, 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 2 Ongoing assessment and planning with consumers | 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** |

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 2

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| Ongoing assessment and planning with consumers | |  |
| Requirement 2(3)(b) | Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes. | Compliant |

Findings

The scope of this Assessment Contact was to assess the service’s progress in returning to compliance with Requirement 2(3)(b) and Requirement 3(3)(c). The service has demonstrated improvement in performance and has demonstrated implementation of actions documented in the service’s plan for continuous improvement.

Consumers and representatives provided positive feedback in relation to consultation and the care planning process, particularly for end-of-life preferences and care.

The Assessment Team reviewed sampled care files which demonstrated assessment, care planning and review of consumer care needs when changes in health occurred. The care planning documentation included detailed, specific, current and individualised information to guide staff practice.

# Standard 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | Compliant |

Findings

The scope of this Assessment Contact was to assess the service’s progress in returning to compliance with Requirement 2(3)(b) and Requirement 3(3)(c). The service has demonstrated improvement in performance and has demonstrated implementation of actions documented in the service’s plan for continuous improvement.

Consumers and/or representatives said they are confident consumers would be cared for according to documented end-of-life preferences.

The service demonstrated that improvements implemented in relation to palliative care had enabled appropriate palliative care to be provided. The Assessment Team sampled files of recently deceased consumers who were palliating and noted care needs were met, and consultation occurred. Files reviewed demonstrated assessment, care planning and review of consumer care needs occurred when changes were noted in consumer health.

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)