Performance

Report

**1800 951 822**

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| Name of service: | Victoria by the Park |
| Service address: | 27 Victoria Street ELSTERNWICK VIC 3185 |
| Commission ID: | 3727 |
| Approved provider: | Provectus Care Pty Limited |
| Activity type: | Assessment Contact - Site |
| Activity date: | 31 May 2023 |
| Performance report date: | 21 June 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 Victoria by the Park (**the service**) has been prepared by N Eastwood, 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 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 previously found non-compliant with this requirement following a Site Audit performed between 27 July 2022 and 29 July 2022. At the time of the site Audit the service was unable to demonstrate compliance with scheduled water testing for legionella bacteria, compliance with monthly fire sprinkler system testing, and safe chemical storage.

Since the Site Audit the service has implemented a number of effective strategies to address the previously identified deficits including the implementation of a legionella risk management plan, contracting of services to conduct monthly testing of the sprinkler system, secured storage rooms and the introduction of lockable cleaning trolleys for the safe use and storage of chemicals.

Consumers provided positive feedback about the service environment and their ability to move freely both indoors and out. Staff described processes for identifying and logging maintenance requests, and maintenance schedules detail both preventative and reactive maintenance. The Assessment Team reviewed cleaning schedules, white boards for communication and sign off sheets to ensure routine and cleaning by exception was completed. The Assessment Team observed the service to be safe, clean, and well maintained with doors providing easy access to clean and well-maintained outdoor spaces and gardens.

The Assessment Team confirmed the implementation of the identified strategies with staff who describe the process of identifying and logging maintenance requests when equipment requires repairs or becomes unsafe. Management confirmed arrangements for minor repairs to be completed internally but larger and/or specialised work is allocated to external contractors. Maintenance staff and management described the service’s yearly preventative scheduled maintenance calendar, categorised into machinery, general building, stores and distribution, and safety. Clinical staff, care staff and cleaning staff described the process for identifying and logging maintenance requests although most said they were able to contact maintenance directly, adding that they usually respond to the identified issue immediately. The Assessment Team noted that all maintenance requests had been attended to with no outstanding tasks.

Staff identified appropriate environmental cleaning and infection prevention and control practices for the service and management described the allocation of cleaning staff to each floor of the service. The Assessment Team reviewed the service’s Legionella Risk Management Plan which evidenced water test compliance for the last 6 months and the preventive maintenance calendar which evidences the inclusion of water testing and chemical storage by contracted staff. The service’s fire sprinkler system logbooks demonstrate monthly testing and compliance of the fire sprinkler system by a contracted specialist service.

As a result, and with consideration to the implemented actions and available information I find this requirement now 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)