Performance

Report

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| Name of service: | Violet Town Bush Nursing Centre |
| Service address: | 46 Cowslip Street VIOLET TOWN VIC 3669 |
| Commission ID: | 4373 |
| Approved provider: | Violet Town Bush Nursing Centre Inc |
| Activity type: | Assessment Contact - Site |
| Activity date: | 20 April 2023 |
| Performance report date: | 27 April 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 Violet Town Bush Nursing Centre (**the service**) has been prepared by D. Fekonja, 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 4 Services and supports for daily living | 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 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |

Findings

The service was found non-compliant with this requirement following a Site Audit conducted 30 August 2022 to 1 September 2022. The service at the time did not demonstrate that it provided support to consumers to engage in activities of interest to them and was appropriate for consumers with minimal cognitive impairment.

The Assessment Team found the service had implemented a range of improvements to address the identified deficits. These improvements included:

* Satisfaction surveys to identify additional activities of interest to consumers.
* Implementation of a ‘lifestyle’ focus group with two consumers nominated to be involved in the review and development of the monthly activity calendar.
* Audits of attendance to assist in determining the popularity of group events implemented and continue.
* An additional staff member has been appointed to a trainee lifestyle position for 3 days per week and supported to complete an approved training course.
* Review of lifestyle hours is ongoing with lifestyle staff now rostered till 6.00 pm.
* Bus outings to local events and areas commenced weekly with the location selected by consumers.
* Dedicated areas within the service have been allocated for specific activities including the use of the ‘RSL room’ as a library, a lounge area in ‘The Grevillia unit’ is now used for a weekly card game, with a lounge area identified as a prime ‘bird watching’ location with quiet games such as jigsaws accessible. A dedicated ‘Church room’ is also accessible.
* There has been a review of the lifestyle program with ongoing monitoring in place.

Consumers also provided positive feedback in relation to the lifestyle program and the activities on offer. One consumer is supported to do the things they like and associated risks with their choice have been assessed appropriately and measures in place to mitigate them. Consumers feel their choices are respected and their voices heard in relation to what they like to do.

The Assessment Team reviewed the service’s plan for continuous improvement, meeting minutes, comments, complaints register, and audits which demonstrated improved opportunities for consumers to engage in activities suitable for their mobility, and cognitive status and in line with their preferences. Management and staff confirmed documented improvements have been actioned and ongoing monitoring of consumer satisfaction is occurring.

The minutes from the resident’s meeting demonstrate feedback from consumers is actively sought and changes to the activity calendar occur in response to this feedback.

Based on the information provided I find the service has made the necessary improvements and I find the service compliant with Requirement 4(3)(a).

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)