Bishop Davies Court

Performance Report

27 Redwood Road
KINGSTON TAS 7050
Phone number: 03 6283 1100

**Commission ID:** 8825

**Provider name:** OneCare Limited

**Assessment Contact - Site date:** 30 March 2021

**Date of Performance Report:** 3 May 2021

# 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)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | 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 26 March 2021
* the Infection control monitoring checklist

# 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed and staff were asked about how they ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

Overall consumers considered they receive personal care and clinical care that is safe and right for them. For example:

* Consumers said they receive care that is safe and right for them.
* Consumers and representatives said they are regularly consulted about consumers care and that their needs and preferences are respected and met.

Staff demonstrated an understanding of the individual personal and clinical needs of consumers. Staff described how consumers who experience high impact and high prevalence risks such as responsive behaviours, weight loss and falls are identified, assessed and responded to, to reduce and mitigate risks to the consumer and others.

Care planning documentation reflected the delivery of care in accordance with the individual risks identified.

The service’s incident reporting documentation demonstrated processes are undertaken in a timely manner, including updating information in consumer care plans.

An overall rating for this Quality Standard is not given as only two of the seven specific requirements have been assessed.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*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.*

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

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

# STANDARD 8 Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

Overall the service demonstrated it has effective governance systems in place to support high impact, high prevalence risks, identify and respond to abuse and neglect of consumers and assisting consumers to live the best life they can.

The service demonstrated it has in place a documented risk management framework, mandatory reporting register, elder abuse policies, and a reportable management checklist to guide staff in their identification, documentation and response to alleged abuse.

Clinical and care staff were able to identify high prevalence risks associated with consumers and described the processes they follow for reporting alleged abuse.

Management said the service has adopted a zero-tolerance approach to abuse, which is outlined in their policy documentation.

An overall rating for this Quality Standard is not given as only one of the five specific requirements has been assessed.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can.*

# 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.