Booroongen Djugun Limited

Performance Report

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Phone number: 02 6560 2120

**Commission ID:** 0457

**Provider name:** Booroongen Djugun Limited

**Assessment Contact - Site date:** 27 April 2021

**Date of Performance Report:** 11 May 2021

# Publication of report

This Performance Report **will 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)(g) | 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.

# 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 how the organisation understands and applies the requirements within this Standard, the Assessment Team interviewed a sample of staff and observed the service environment. The team also examined relevant documents.

The service was able to demonstrate strategies to minimise infection related risks through the infection prevention controlpolicy which includes antimicrobial stewardship and procedures relating to the processes to minimise the use of antibiotics. Staff were able to describe practices and procedures to minimise transmission of infection and demonstrated appropriate infection control practices.

### Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

The Assessment Team interviewed staff who were able to describe the principles of antimicrobial stewardship, the importance of infection control, and explain how infection related risks are minimised at the service. Staff also reported recently receiving COVID-19 related training.

The team observed the service has hand sanitising dispensers available for use throughout the service, waste management was observed to be satisfactory, and areas were mostly clean and well maintained. They also sighted a new storage area and a 24-hour supply of personal protective equipment (PPE) in the case of an outbreak, which is an improvement the service has made in response to a previous finding by an Assessment Team at the service. The IPC lead has also developed an agreement with a supplier to provide ongoing PPE supplies at short notice.

The team reviewed documents and also noted relevant policies and procedures in place to guide staff on the minimisation of infection related risk, an outbreak management plan, and other related documents that meet this requirement.

I find this requirement Compliant.

# 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.