Bupa Echuca

Performance Report

7 Fehring Lane   
ECHUCA VIC 3564  
Phone number: 03 5480 5300

**Commission ID:** 3964

**Provider name:** Bupa Aged Care Australia Pty Ltd

**Assessment Contact - Site date:** 1 December 2020

**Date of Performance Report:** 8 January 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) | Met |
| Requirement 3(3)(g) | Met |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | Met |
| Requirement 7(3)(e) | Met |

# 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 was received 23 December 2020.

# 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

Two requirements assessed under this Standard are compliant.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Met

*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.*

The Assessment Team found that the service demonstrated that each consumer sampled receives personal and clinical care that is effective and safe. Initial and ongoing assessments and care plans are completed by nursing staff and are overseen and supported by clinical care managers. Care planning includes input from a medical practitioner, other specialist services and allied health as required. The Assessment Team found that care planning documents demonstrated consumers’ skin integrity, pain and behaviour is managed to meet their individual needs and are aligned with best practice principles.

The Assessment Team reviewed a combination of consumers’ behaviour management care plan documentation. Two consumers were reviewed in detail and the other consumers’ summary care plans were reviewed. The Assessment Team focused on behaviour management post alleged and or suspected allegations of assault and or inappropriate sexual behaviour. Consumers’ files sampled evidenced documentation of high impact risks for consumers and post incident evaluations, review and monitoring. Two comprehensive file reviews evidenced consultation with staff, consumers and or representatives.

Wound care documents reviewed demonstrated some gaps in recording of monitoring processes. However, consumers confirmed that wound care is completed as required and reported satisfaction with wound management practices. Consumers who require the use of chemical restraint are effectively assessed, monitored and reviewed according to regulatory requirements. Consultation with consumers and or representatives occurs.

The response submitted by the approved provider discusses ongoing actions undertaken to strengthen wound care including further staff training and regular internal monitoring of consumers’ wound management.

While the Assessment Team identified some gaps in the documentation of wound care, on balance I am satisfied that this requirement is compliant

### Requirement 3(3)(g) Met

*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 found that the service uses a range of precautions to minimise infection related risks to consumers. Antibiotic use is monitored to reduce the risk of overprescribing and increasing resistance to antibiotics. Staff PPE practices whilst monitored, did not consistently demonstrate compliance. Three staff were observed with poor practice related to mask usage throughout the visit.

The response submitted by the approved provider outlines actions that have been taken to strengthen staff compliance with PPE requirements including refresher training, competency assessment of all staff, increased monitoring processes and staff counselling where required.

While the Assessment Team identified some deficits in staff PPE practice, on balance I am satisfied this requirement is compliant.

# STANDARD 7 Human resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

Two requirements under this Standard were assessed are compliant.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Met

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

The Assessment Team found that the service demonstrated the workforce is planned to enable the number and mix deployed to deliver and manage safe and quality care and services. Overall consumers/representatives expressed satisfaction in relation to the workforce. The majority of staff indicated current staffing numbers and mix were appropriate to deliver safe care and services. Staff meetings minutes indicated some staff are concerned they may struggle with current staffing levels when the service returns to full occupancy.

I am satisfied this requirement is compliant.

### Requirement 7(3)(e) Met

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

The Assessment Team found that the service demonstrated staff performance is monitored and reviewed including adverse incidents relating to staff performance. Staff discussed performance reviews and educational opportunities provided by the service. Staff expressed satisfaction with training. Staff were able to verbalise how they would report any adverse incidents such as a staff member using rough handling towards a consumer by reporting to senior staff and documenting events. Any incident reports involving allegations relating to adverse staff performance are investigated in a timely manner by management

I am satisfied this requirement is 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.