Columbia Aged Care Services - Strathdale Centre

Performance Report

64-70 Albert Road   
STRATHFIELD NSW 2135  
Phone number: 02 9764 7800

**Commission ID:** 2560

**Provider name:** Columbia Nursing Homes Pty Ltd

**Assessment Contact - Site date:** 11 February 2021

**Date of Performance Report:** 6 March 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)(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 1 March 2021.

# 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 Requirements

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

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

The service was able to demonstrate effective management of high-impact, high prevalence risks. Identification of risk to consumers occurs through the services monitoring and assessment processes.

* Risk management strategies documented in consumers' care planning are individualised and include:
  + Alternative strategies prior to the use of psychotropic medication.
  + Falls risk strategies such as sensor mats, hip protectors and frequent visual observations.
  + RN management of wounds, including assessment of wound colour, odour and exudate, and dressing of the wound, including frequency and dressing selection.
  + Pressure injury risk strategies such as pressure-relieving equipment, frequent repositioning and promoting skin integrity through moisturising.
  + Pain management including therapeutic massage, heat pack therapy and regular analgesia.

# 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 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.*

The service demonstrated it has a comprehensive and effective documented risk management framework and practices in place to minimise risks to consumers’ health, safety, wellbeing and quality of life. Staff and management were able to demonstrate how they effectively applied these systems in their work, and this was confirmed by review of clinical documentation.

The organisation provided a documented risk management framework, including policies describing how:

* high impact or high prevalence risks associated with the care of consumers is managed.
* the abuse and neglect of consumers is identified and responded to.
* consumers are supported 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.