Estia Health Toorak Gardens

Performance Report

401 Portrush Road
TOORAK GARDENS SA 5065
Phone number: 08 8431 5399

**Commission ID:** 6185

**Provider name:** Estia Investments Pty Ltd

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

**Date of Performance Report:** 3 April 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)(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.
* the provider’s response to the Assessment Contact - Site report received 16 February 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

The Quality Standard has not been assessed for compliance as there was only one requirement assessed. The assessed Requirement 3(3)g was assessed as Compliant.

### 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.*

I am of the view that the Approved Provider does comply with this requirement as the Assessment Team’s report describes the various ways they ensure effective minimisation of infection related risks.

The service demonstrated it has infection control and antimicrobial policies to guide staff practice and have completed audits on infection control practices in September, November and December 2020, which scored 100% compliance. In addition, the service hired an external infection prevention agency in December 2020 to help with policies and procedures, audits and assessment tools. Management and clinical staff could describe practices and processes for promoting antimicrobial stewardship and the Assessment Team found evidence the service was proactively monitoring antibiotic prescriptions on a regular basis. Observations of staff practice highlighted good hand hygiene practice. All staff informed the Assessment Team they had received extensive training around infection control practice and isolation of consumers.

# 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.