Grace Villa Aged Care

Performance Report

4/ 25-33 Grimshaw Street
GREENSBOROUGH VIC 3088
Phone number: 03 9432 2855

**Commission ID:** 4034

**Provider name:** Samkay Health Pty Ltd

**Assessment Contact - Desk date:** 22 October 2020

**Date of Performance Report:** 17 November 2020

# 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** | **Non-compliant** |
| Requirement 3(3)(g) | Non-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:

* infection control monitoring checklist of 14 October 2020,
* information obtained under s67 of the Commission Rules in relation to minimising of infection related risks.
* the Assessment Team’s report for the Assessment Contact - Desk; 22 October 2020, the Assessment Contact - Desk report was informed by review of documents and interviews with management.
* the provider’s response to the Assessment Contact - Desk report dated 6 November 2020.

# STANDARD 3 NON-COMPLIANTPersonal 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 is assessed as Non-compliant as the provider has not complied with Requirement 3(3)(g) of the Standard.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(g) Non-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.*

An infection control monitoring visit at the service in October 2020 identified, through document review and observations, that the service’s practices did not align with best practice. The provider submitted a number of documents and photographs of infection minimisation strategies following receipt of the infection control monitoring checklist.

A follow up desk assessment occurred in November 2020 where the Assessment Team found, based on management interview, that the service was not taking all available steps to minimise infection related risks. The provider disagrees with the conclusions the Assessment Team came to and does not agree with statements contributed to them by the Assessment Team in the report.

The provider submitted various documents including a register of training and a roster of staff who worked in October 2020. Review of these documents evidence that not all staff who worked as per the roster in October 2020 have completed the full suite of training, gaps in training are evident for staff in outbreak management and the use of personal protective equipment.

The outbreak management plan does not specific key stakeholders at the service and their role in the event of an outbreak.

Based on the evidence above the provider does not comply with Requirement 3(3)(g).

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

* Ensure all staff undertake infection control, outbreak management and personal protective equipment training.
* Review the outbreak management plan to include the role of key stakeholders and governance arrangements. Ensure staff are aware of their role and are confident in how to execute the role allocated to them in the event of an outbreak.
* Establish a monitoring process to ensure steps taken to address deficits identified in the infection control monitoring checklist are sustained.