Greenview

Performance Report

33-37 Mitcham Road
DONVALE VIC 3111
Phone number: 03 8841 0800

**Commission ID:** 3982

**Provider name:** Allity Pty Ltd

**Assessment Contact - Site date:** 29 January 2021 and

 2 February 2021

**Date of Performance Report:** 10 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** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(d) | Compliant |
| 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 approved provider’s response to the Assessment Team report of 29 January 2021 received on 23 February 2021
* the Infection control monitoring checklist.

# 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 the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed, and staff were asked about how they ensure the delivery of safe and effective care. The team also examined relevant documents.

Overall most sampled consumers considered that they receive personal care and clinical care that is safe and right for them.

Assessments and care planning are individualised and inform the delivery of personal and clinical care that meets the needs, goals and preferences of consumers. When there is a deterioration or change in a consumers’ condition there is generally a timely response.

The service demonstrated that a COVID-19 outbreak management is in place, standard and transmission-based precautions are adhered to by staff and relevant infection control training has been provided to staff.

An overall rating for this Quality Standard is not given as only three of the seven specific requirements have been assessed.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*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.*

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

### 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 approved provider has demonstrated it has a COVID -19 outbreak management plan in place containing key information including processes for lockdown and cohorting consumers if required. The plan is available in electronic and hard copy format accessible to relevant staff. Communication protocols are defined and roles and responsibilities are allocated in the event of an outbreak. Evidence demonstrated sufficient supplies of personal protective equipment (PPE) are available and staff receive education and training in relation to infection control, hand hygiene and the use of PPE.

There is a program in place for infection surveillance and antimicrobial stewardship including monitoring for inappropriate use of antimicrobial therapy.

I have considered the Assessment Team report of 29 January 2021 and the evidence provided in the approved provider’s response. The approved provider has submitted information demonstrating that deficits identified in the Assessment Team report are addressed including an enhanced outbreak management plan, PPE supplies and staff training in infection control and management.

Based on the Assessment Team report I find a robust system to minimise infection related risks has been implemented. I therefore find that this requirement is met.

# 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.