Heathcote Health High Care Service

Performance Report

39 Hospital Street
HEATHCOTE VIC 3523
Phone number: 03 5431 0900

**Commission ID:** 4399

**Provider name:** Heathcote Health

**Assessment Contact - Site date:** 24 March 2021

**Date of Performance Report:** 21 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)(a) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(e) | 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

# 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

Not all requirements were assessed during this assessment contact thus no rating is given for this Standard.

To understand the consumer’s experience and how the organisation understands and applies the requirement assessed 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 for consumers. The team also examined relevant documents.

Sampled consumers considered that they receive personal care and clinical care that is safe and right for them. For example:

* Consumers said they get the care they need and provided positive feedback about the way staff provide care.
* Consumers described specific personal or clinical care issues they have had and how staff have helped them to manage these.

Staff interviews and documentation reflect individualised care that is safe, effective and tailored to the specific needs and preferences of the consumer. This includes best practice management of skin integrity, pain, restraint and behaviours to optimise health and well-being.

The service has recently undertaken a major review of psychotropic medication use at the service. Staff described effective identification of triggers and a range of strategies used to manage behaviours in preference to the use of psychotropic medication. All staff were able to describe recent changes to psychotropic medication management for consumers at the service and the overall reduction in administration of these types of medications.

The requirement assessed at this contact is assessed as Compliant.

### 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.*

# 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

Not all requirements were assessed during this assessment contact thus no rating is given for this Standard.

To understand how the organisation understands and applies the requirement assessed within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

The service has a clinical governance framework that is documented and consistently applied across the service. Staff are knowledgeable about the system and can demonstrate how anti-microbial stewardship, restraint minimisation and open disclosure applies to their practice. The improvements the service has made to their clinical governance framework enhances quality of care provided to consumers. Management demonstrated new governance structures and systems in relation to minimising the use of restraint and management psychotropic medications. Staff demonstrated an understanding of these new systems.

The requirement assessed at this contact is assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# 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.