Heritage Pennant Hills

Performance Report

2A The Crescent
PENNANT HILLS NSW 2120
Phone number: 02 9875 4811

**Commission ID:** 2759

**Provider name:** Heritage Care Pty Ltd

**Assessment Contact - Site date:** 1 December 2020

**Date of Performance Report:** 8 January 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 |
| **Standard 5 Organisation’s service environment** | **Non-compliant** |
| Requirement 5(3)(b) | 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:

* 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 24 December 2020.

# 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 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 for consumers. The team also examined relevant documents.

The service has comprehensive policies and procedure for infection control related issues and there is evidence of regular training for staff. There are newly installed handwashing basins located throughout the service and hand sanitiser dispensers are placed in the corridors at regular intervals. The service outbreak management plan is up to date with relevant information including; communication plan, staff, contractors, suppliers and other relevant contacts telephone details.

The Quality Standard was not fully assessed and has not received a compliance rating. Only one of the seven specific requirements have been assessed. This requirement was found 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.*

The Assessment Team found that staff interviewed were able to identify their responsibilities regarding infection control, and ways they minimise infection related risks at the service. Staff demonstrated a working knowledge of antimicrobial stewardship including waiting for results from pathology before prescribing antibiotics, and care measures aimed at preventing infection and the possible need for antibiotics. The service has taken steps to minimise infection related risks for the care of consumers including the impact of a potential COVID-19 outbreak including infection control training, use of personal protective equipment (PPE), workforce planning and cohorting of consumers. The Assessment Team observed all staff except one wearing face masks and donning and doffing them appropriately.

In their response, the Approved Provider identified that the staff member observed not following appropriate PPE procedures had education provided and PPE competency reassessed.

Based on the findings of the Assessment Team, and that the Approved Provider does not dispute the findings of the team, I am of the view that the Approved Provider complies with this requirement.

# STANDARD 5 NON-COMPLIANTOrganisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

Overall sampled consumers considered that they felt safe and comfortable living at the service, and the service is always clean.

However, the Assessment Team made a number of observations that indicated the service environment is not always safe, clean and well maintained.

The Quality Standard is assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(b) Non-compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

The Assessment Team observed that consumers were able to move freely around the service and access common areas and the internal outdoor courtyard at their leisure. However, the Assessment Team made a number of observations that indicated the service environment was not safe, clean, well maintained and comfortable:

* The internal courtyard has artificial grass which is uneven with raised ridges, indents and depressions evident, creating a falls risk to consumers.
* A number of consumer bathrooms had mould in the tile grout.
* A shower chair was observed placed under a bathroom handwashing sink, limiting access for consumers with mobility aids.
* An out of order signed had been placed on a visitor’s toilet, however a maintenance request had not been raised.
* Food items stored in the kitchen fridge and freezer were observed not to be safely sealed.
* Skip bins were observed overflowing with rubbish.
* Electrical items in the maintenance shed were either not tagged or inspection tags had expired.

In their response, the Approved Provider did not dispute the findings of the Assessment Team. The Approved Provider identified continuous improvement actions to rectify all issues raised by the Assessment Team and a review of the service’s continuous improvement register demonstrates that most of these actions have been completed since the assessment contact and the issues closed out by the service.

Based on the findings of the Assessment Team, and that the Approved Provider does not dispute the findings of the team, I am of the view that the Approved Provider does not complies with this requirement. While I accept that the service quickly worked to rectify the issues raised by the Assessment Team, the service needs time to implement more proactive and preventative processes to identify and action risks to the cleanliness and safety of the service environment to meet compliance of this requirement.

# 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.

### Requirement 5(3)(b)

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

The Approved Provider must demonstrate that:

* The service has effective processes in place to identify and actions risks to the safety, cleanliness and maintenance of the service environment.
* The service environment enables consumers to move freely and safely indoors and outdoors.
* The service has implemented all actions mentioned in their plan for continuous improvement, submitted with their response to this Assessment Contact.