Homewood Nursing Home

Performance Report

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BEXLEY NSW 2207  
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**Commission ID:** 2549

**Provider name:** Homewood Care Pty Limited

**Assessment Contact - Site date:** 25 August 2020

**Date of Performance Report:** 25 September 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** |  |
| Requirement 3(3)(g) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | 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

The Assessment Team did not assess all requirements of the standard and an overall summary for the Quality Standard is not provided.

The assessment team assessed one of the seven requirements under the standard. The one specific requirement that was assessed, is 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.*

The Assessment Team found that the approved provider is adequately minimising infection related risks through standard and transmission-based precautions. Personal protective equipment and hand hygiene stations were readily available throughout the facility. Staff were observed to be encouraging consumers to wash their hands or assisting consumers with use of hand sanitiser. The service monitors infections and antibiotic usage and discusses this at the Medical Advisory Committee (MAC meeting). The service has a COVID-19 management plan in place and has conducted a mock COVID exercise to test the process. The exercise helped management and staff understand the potential impact on the service of a consumer or staff member having COVID-19. Feedback from the exercise has led to improvements in the management plan. Further mock exercises are planned. Consumers and their representatives sampled said they had been consulted about the use of voluntary restrictions on movement and visitors to the service and agreed with the restrictions, although were looking forward to when they would be able to move about in the community and freely have visitors. They expressed confidence in how the service was managing the situation and were happy with the level of communication between management, consumers and their representatives.

I am of the view that the approved provider is compliant with this requirement as they have demonstrated appropriate minimisation of infection related risks.

# 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

The Assessment Team did not assess all requirements of the standard and an overall summary for the Quality Standard is not provided.

The assessment team assessed one of the five requirements under the standard. The one specific requirement that was assessed, is assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can.*

The Assessment Team found that the organisation has a robust quality and risk framework in place. The organisation has identified high impact and high prevalence risks to be monitored and there is monthly collation, analysis and reporting of related data at service and Board level. The organisation has policy and procedures about safeguarding consumers from elder abuse and for compulsory reporting which reflect relevant guidelines; and its policies and procedures generally reflect that consumers are to be supported to live the best life they can.

All consumers and representatives contacted by the Assessment Team provided positive feedback regarding the care provided to consumers and the way the organisation is managing the COVID-19 pandemic.

I am of the view that the approved provider complies with this requirement as they have effective and mature risk management systems.

# 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.