James Brown Care Centre

Performance Report

171 Albert Street
OSBORNE PARK WA 6017
Phone number: 1300 665 073

**Commission ID:** 7081

**Provider name:** Amana Living Incorporated

**Assessment Contact - Site date:** 20 August 2020

**Date of Performance Report:** 20 October 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)(b) | 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
* the provider’s response to the Assessment Contact - Site report received 8 September 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

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

The purpose of the Assessment Contact was to assess Requirement (3)(b) in relation to Standard 3 Personal care and clinical care. The Assessment Team recommended Requirement (3)(b) met and I agree with the Assessment Team and find the service Compliant with this Requirement. All other Requirements in this Standard were not assessed, and an overall assessment of the Standard was not completed.

Consumers and their representatives interviewed confirmed they are satisfied the service manages high impact risks associated with clinical care effectively including when the consumers have incidents or occurrences of falls, pain, wounds, weight loss or behaviours associated with diagnosis of dementia.

Documentation and staff interviews confirmed the service has effective systems in place to identify, assess, plan and inform staff on how to manage risks associated with the care of consumers. Incidents are reported, investigated and appropriate actions are taken to ensure risks associated with consumer care are reduced and prevented.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

# 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 and therefore an overall rating for the Quality Standard is not provided.

The purpose of the Assessment Contact was to assess Requirement (3)(d) in relation to Standard 8 Organisational governance. The Assessment Team recommended Requirement (3)(d) met and I agree with the Assessment Team and find the service Compliant with this Requirement. All other Requirements in this Standard were not assessed, and an overall assessment of the Standard was not completed.

The organisation has a comprehensive risk management framework to guide the service in effectively managing and responding to risks associated with the care of consumers. Systems are monitored for effectiveness and changes are made to ensure consumers are safe and receiving optimum care. Staff are trained and demonstrated they understand elder abuse and indicated they respond to it appropriately. Documentation shows clinical incidents and incidents of alleged abuse are responded to appropriately and in a timely manner. Consumers are assisted by the service to live the best life they can and are supported to take risks and to do the things they like to do.

## 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.*

# 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.