Kalkarni Residency

Performance Report

Lot 456 Whittington Street
BROOKTON WA 6306
Phone number: 08 9642 0199

**Commission ID:** 7423

**Provider name:** Baptistcare WA Limited

**Assessment Contact - Site date:** 20 May 2021

**Date of Performance Report:** 1 July 2021

# Publication of report

This Performance Report **will 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 |

# 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 consumers, representatives, staff and management
* the Performance Report dated 19 October 2020 for the Assessment Contact conducted 5 August 2020 to 6 August 2020
* the provider did not submit a response to the Assessment Contact report.

# 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 assessed Requirement (3)(b) in Standard 3 as part of the Assessment Contact. All other Requirements in this Standard were not assessed and, therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess Requirement (3)(b) in Standard 3. This Requirement was found Non-compliant following an Assessment Contact conducted 5 August 2020 to 6 August 2020. The service has implemented a range of actions to address the deficiencies identified which are detailed in the specific Requirement below.

The Assessment Team have recommended Requirement (3)(b) in this Standard met. I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report to come to a view of compliance with Standard 3 Requirement (3)(b) and find the service Compliant with Requirement (3)(b). I have provided reasons for my finding in the specific Requirement below.

### 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.*

The service was found Non-compliant with Requirement (3)(b) following an Assessment Contact conducted 5 August 2020 to 6 August 2020 where it was found the service did not demonstrate effective management of falls risks and management of pressure injuries for one consumer. The Assessment Team’s report for the Assessment Contact provided evidence of actions taken to address deficiencies, including, but not limited to:

* Reviewed and updated the Discharge from hospital checklist. All discharge information is now uploaded to consumers’ electronic care records through a progress note. The new process ensures information provided on discharge are reviewed, the consumer reassessed and the care plan updated.
* Developed an information sheet which is used at handover as a quick reference for care staff on the floor. The sheet includes information current to consumers’ needs and identified risks. The form is updated each day or shift as changes to consumers’ needs change.
* To increase oversight of high impact or high prevalence risks, Registered nurses have commenced portfolios relating to medication, palliative care, wounds, falls, minimisation of restraint and infection control.
	+ Each Registered nurse is developing toolbox sessions as part of the portfolio which will be rolled out to care staff.
* Rostered two nurses on the morning shift to ensure there is enough clinical cover to manage consumers’ assessed clinical needs.
* Introduced a monthly Resident of the day process to ensure regular review of consumers’ clinical needs and follow up. Reviews commenced in April 2021 and have resulted in referrals for consumers to allied health specialists and changes to consumers’ needs.
* In response to hearing impairment being identified as a high impact condition, a project has been initiated. The project involves all consumers having their hearing tested, review of current hearing aids and testing to look at other factors which might be contributing to their hearing impairment.
	+ On the day of the Assessment Contact, staff were being provided training by the Audiologist. The education includes sessions on maintenance of hearing aids, changing batteries and understanding how dementia can further impact consumers with hearing loss. Strategies were being provided to assist staff to increase their communication skills.

Information provided to the Assessment Team by consumers, representatives and staff through interviews and documentation sampled demonstrated:

Overall, sampled consumers considered that they receive personal care and clinical care that is safe and right for them. Consumers confirmed they are supported to take risks and the service implements strategies to mitigate the risks. Representatives sampled were satisfied with the care provided to consumers and stated staff inform them of any changes to consumers’ health and well-being.

Consumer files sampled demonstrated appropriate management of a range of clinical care needs, including falls, medications, pain, wounds, mobility and specialised nursing care needs. Where changes to consumers’ health or well-being had been identified, additional monitoring had been implemented, assessment processes, including in relation to risk had occurred, care plans updated and referrals to General practitioners and/or allied health specialists had been initiated.

Clinical and care staff sampled were aware of high impact or high prevalence risks related to the individual consumers sampled. Additionally, staff described strategies they implement to mitigate risks in line with information documented in care plans and consumers’ assessed needs.

For the reasons detailed above, I find Baptistcare WA Limited, in relation to Kalkarni Residency, Compliant with Requirement (3)(b) in Standard 3 Personal care and clinical care.

# 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.