Kurrajong & District Community Nursing Home

Performance Report

129 Old Bells Line of Road
KURRAJONG NSW 2758
Phone number: 02 4573 1701

**Commission ID:** 2694

**Provider name:** Kurrajong and District Hospital Society Inc

**Assessment Contact - Site date:** 6 August 2020

**Date of Performance Report:** 9 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 |

# 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 considered 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

### Consumer outcome

To understand the consumer’s 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.

Overall sampled consumers considered that they receive personal care and clinical care that is safe and right for them.

For example:

Consumers interviewed said they are satisfied with the care they receive. They said the staff are very good and know what they are doing. They said staff wash their hands regularly, use gloves when they attend to their care and maintain good general hygiene.

They confirmed they have been kept informed about COVID-19 and understand why there are visitor restrictions and why they must maintain social distancing.

The service has systems in place for the prevention and control of infections. Staff are trained in infection control practices and the service has sufficient PPE.

Hospitality staff were seen to be implementing appropriate infection control practices in relation their services.

The service has a program for monitoring the effectiveness of its infection control program.

The service has a policy for antimicrobial stewardship and staff are aware of ways to support the appropriate use of antibiotics.

The service has a specific plan for minimising the risk of COVID-19 and managing an outbreak. Strategies for minimising the risk were seen to be in place.

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

### 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 service minimises infection related risks through being aware of and practicing standard and transmission-based precautions. Management and staff have also completed additional education on correct donning and doffing techniques for personal protective equipment. The assessment team also found that staff understand, promote and can describe the practical steps they take to reduce the risk of increasing resistance to antibiotics. The service has implemented several improvements to improve the prevention of infections, and to reduce the risk of overprescribing of antibiotics at the service. The service engages with external specialists in these areas to assist them in providing effective antimicrobial stewardship. These improvements continue to be monitored and reviewed by management and were confirmed in place by the assessment team. The assessment team also noted the service was clean, with sufficient equipment, supplies, and personal protective equipment for regular and emergency use.

In addition, management and staff provided a detailed response to the assessment team concerning the service’s outbreak management plan for managing COVID-19 and how that plan is reviewed and updated, together with details of redundancy protocols in place to ensure continuity of care and management at the service and how it ensures there are sufficient resources available to deal with an outbreak.

I have reviewed these findings and consider that the organisation is compliant with this requirement.

# 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 to remain compliant with the Quality Standards.