McAuley Place

Performance Report

263 Agnes Street   
ROCKHAMPTON QLD 4700  
Phone number: 07 4921 3867

**Commission ID:** 5301

**Provider name:** Mercy Health and Aged Care Central Queensland Limited

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

**Date of Performance Report:** 24 December 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 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 Infection control monitoring checklist completed 25 November 2020.
* Updates from the provider regarding the Tuberculosis status of the service.

# 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 in this Standard; therefore a compliance rating or summary 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.*

Consumers and representatives interviewed expressed satisfaction with the organisation’s prevention and communication strategies for the management of COVID-19 and Tuberculosis. Consumers and their representatives confirmed that communication by the service was provided in person privately or via consumer meetings, letter, email and telephone.

Staff demonstrated an understanding of how they minimise the need for or use of antibiotics and ensure they are used appropriately. Staff gave examples such as use of personal protective equipment, reporting changes in skin integrity, early identification of consumers who may have an infection, encouraging pathology results before medical officers prescribe antibiotics, encouraging fluids to minimise the occurrence of urinary tract infections and ensuring good hand hygiene practices when delivering consumer care.

Management reported there are processes in place to monitor and reduce the use of antimicrobial medication. Staff confirmed they are encouraged to have an annual influenza vaccination. Registered staff advised they monitor staff practice ensuring staff practice hand hygiene and use of personal protective equipment. Staff reported the service has provided education related to minimising infection related risks. Management reported clinical data is collected to monitor infections and results are discussed at clinical meetings.

Registered staff were aware of monitoring of signs and symptoms in consumers and what actions to take if a consumer is suspected to be unwell, including signs and symptoms of Tuberculosis and COVID-19. Care and registered staff interviewed demonstrated an awareness of infection control practices and the additional practices implemented to manage a potential COVID-19 outbreak. Staff reported staffing levels are adequate and they have sufficient supplies and access to personal protective equipment.

Catering and cleaning staff could demonstrate an awareness of infection control practices and were satisfied with current arrangements. Hand sanitiser has been placed in multiple areas across the service, including on the cleaning trolley. Laundry services are conducted off site at Mercy Laundry Rockhampton. The service follows a colour coded system for skip bags to identify each wash type for example, contaminated wash items are placed in a dissolvable seam bag to reduce handling and as an infection control measure.

The service has all large, single ensuited consumer rooms on three levels of the building. The organisation has written policies and procedures relating to infection control and antimicrobial stewardship. The organisation has infection control guidelines for staff to follow in the event of an outbreak. Vaccination records show 28 consumers (100%) and 100% staff have received influenza vaccinations in 2020, through the service's annual vaccination clinic.

The service confirmed they are working closely with the Infectious Disease Unit and the Public Health Unit in the prevention and management of the current confirmed Tuberculosis event. Management advised they have been advised to follow standard precautionary PPE requirements where required. Management advised blood tests are scheduled for 26 November 2020 and chest x-rays will be conducted to a schedule at an imaging centre and a mobile x-ray will be available for consumers who are unable to mobilise.

While conducting the infection control monitoring (ICM) checklist (submitted), the Assessment Team reviewed the service’s outbreak management preparedness. Whilst the service’s outbreak management plan (OMP) did not include consolidated information listed in the checklist, the service could demonstrate how it could access relative information through other systems and folders in the event of an outbreak. Management advised the service is currently reviewing its OMP.

The service is accessed by one entry point at the front of the service which requires visitors to call staff on an annunciator to gain access to the screening point. Visitors are required to sign in, acknowledging the screening and entry conditions, have their temperature taken and provide evidence of a current certificate of vaccination. Review of the screening documents completed between the 22 November 2020 and 25 November 2020 identified:

The service advised they are currently not monitoring consumers daily by way of temperature checks, however, are monitoring consumers visually for any signs and symptoms of a change in health status. Management advised the daily temperature monitoring of consumers is not currently conducted due to no current cases of community transmissions of COVID 19 in Queensland, however if consumers leave the service they are health screened and temperature monitored on their return including following hospital visits. Following feedback, management advised given the current Tuberculosis event they would review their processes for monitoring consumers for changes to their health status.

# 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.