Opal Carine

Performance Report

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**Commission ID:** 7466

**Provider name:** DPG Services Pty Ltd

**Assessment Contact - Site date:** 3 July 2020

**Date of Performance Report:** 3 August 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** | **Compliant** |
| Requirement 3(3)(b) | Compliant |
| 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.

# STANDARD 3 COMPLIANT 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 Quality Standard is assessed as Compliant as two of the seven specific requirements have been assessed as Compliant.

The Assessment Team recommended Requirements (3)(b) and (g) as met, the other requirements in Standard 3 were not assessed. I find the Requirements (3)(b) and (g) in relation to Standard 3 Compliant and have provided my reasons for my decision in the body of the report.

The Assessment Team found consumers and representatives interviewed stated they receive personal care and clinical care that is safe and right for them. The following examples were provided by consumers during interviews with the Assessment Team:

* They are provided timely personal and clinical care that is safe and in the manner they have requested.
* They have access to appropriate clinical and other specialists to manage their complex health needs, including when there has been an incident affecting them.

The Assessment Team found the organisation has regular assessment and planning of each consumer’s clinical and personal care. Progress notes capture daily changes in consumer health and follow up completed by the clinical team. Care plans are updated following an incident or decline in health. The organisation has policies and procedures that support the workforce to deliver care that ensures effective management of high impact or high prevalence risks and reduces infection related risk for each consumer.

Clinical and care staff interviewed by the Assessment Team described individual consumer’s needs and preferences, and how they are informed of changes to each consumer’s care. Staff also identified high prevalence risks for individual consumers and strategies in place to minimise these risks.

### 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 Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the service’s last assessment and have recommended this requirement as met. Assessment Team’s report identified the following actions and improvements since the Assessment contact:

* Ensuring staff members effectively monitor consumer’s health and well-being following an incident of a fall, in accordance with the service’s procedure.
* Ensuring staff document assessment and monitoring of observations of consumers following incidents.
* Ensuring consumers at high risk of adverse outcomes following falls have adequate observations, monitoring and review by appropriate medical and health professionals.
* Identifying and responding to high prevalence, high impact risks to minimise harm to consumers.

### 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’s report provided evidence of actions taken to address deficiencies identified at the service’s last assessment and have recommended this requirement as met. Assessment Team’s report identified the following actions and improvements since the Assessment contact:

* Ensuring staff use appropriate PPE during potential and actual infection outbreaks to ensure the effective implementation of transmission-based precautions to minimise the risk of transmission of infection.
* Ensuring the service has an outbreak management plan, including ensuring signs are available to announce an outbreak, staff staying in dedicated wings and how to isolate consumers if an outbreak occurs. The service would ensure medical reviews of all impacted consumers. Catering would implement disposable crockery/cutlery. The cleaning staff have been provided with appropriate cleaning products. Laundry would be separated by area in the event of an outbreak, using appropriately labelled/coloured bags.

# 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.