Palm Lake Care Mt Warren Park

Performance Report

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**Commission ID:** 5763

**Provider name:** Palm Lake Care Operations Pty Ltd

**Assessment Contact - Site date:** 4 June 2020

**Date of Performance Report:** 15 July 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 |

# 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 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 23 June 2020.
* Referral information received by the Commission.

# 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 of Standard 2, therefore, an overall compliance rating for the Quality Standard is not provided.

### 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.*

Consumers and representatives sampled expressed satisfaction with the provision of care at the service.

Through a review of consumers’ clinical documentation, the Assessment Team identified key risks had been identified and were being effectively managed. Examples related to the management of consumers’ skin integrity, falls, pain, self-administration of medications, restraint as well other complex health care needs.

In relation to chemical restraint, although some consumers’ restraint authorisation had not been consistently reviewed; progress notes sighted by the Assessment Team showed that regular reviews by the medical officer had occurred. The approved provider’s response included further information on the actions taken to update and monitor the review of these forms.

The Assessment Team also noted a number of improvement actions had been implemented by the service which included education for staff. Clinical staff interviewed could describe the high impact and high prevalent risks and registered staff were knowledgeable of consumers’ specific risks and the management of these.

# 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.