Semaphore Residential Aged Care

Performance Report

122 The Esplanade   
SEMAPHORE SA 5019  
Phone number: 08 8340 1033 or 0410 207 201

**Commission ID:** 6194

**Provider name:** Rosha Pty Ltd

**Assessment Contact - Site date:** 7 October 2021

**Date of Performance Report:** 28 October 2021

# Performance report prepared by

Michelle Glenn, delegate of the Aged Care Quality and Safety Commissioner.

# 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)(g) | Compliant |

# Detailed assessment

This performance report details the Commissioner’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 others
* the provider did not submit a response to the Assessment Contact - Site report

the Performance Report dated 4 June 2021 for the Site Audit conducted 19 April 2021 to 20 April 2021.

# 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)(g) in Standard 3 Personal care and clinical care 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 the performance of the service in relation to Requirement (3)(g) in Standard 3. This Requirement was found Non-compliant following a Site Audit conducted 19 April 2021 to 20 April 2021 where it was found staff practices did not effectively promote appropriate antibiotic use to reduce the risk of antimicrobial resistance. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the Site Audit and have recommended Requirement (3)(g).

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Rosha Pty Ltd, in relation to Semaphore Residential Aged Care, Compliant with Requirement (3)(g) in Standard 3 Personal care and clinical care. I have provided reasons for my finding in the specific Requirement below.

### 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 service was found Non-compliant with Requirement (3)(g) following a Site Audit conducted 19 April 2021 to 20 April 2021 where it was found staff practices did not effectively promote appropriate antibiotic use to reduce the risk of antimicrobial resistance. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Developed a Suspected respiratory or chest infection procedure.
* Training and education provided to treating Medical Officers on the service’s antimicrobial stewardship policy.
* Training and education provided to clinical staff relating to antimicrobial stewardship principles.
* Training and education provided to care staff relating to the new Suspected respiratory or chest infection procedure and to increase awareness of antimicrobial stewardship principles.
* Implemented weekly clinical meetings to discuss care needs of high-risk consumers to improve clinical monitoring system and overall clinical governance.
* Compliance with antimicrobial stewardship principles is being monitored through review of progress notes and clinical meetings to ensure appropriate prescribing.

The Assessment Team provided the following evidence and information collected through interviews, observations and documents which are relevant to my finding in relation to this Requirement:

* The service demonstrated how it minimises infection related risks through implementing standard and transmission-based precautions to prevent and control infection, and practices to promote appropriate antibiotic prescribing and use to support optimal care and to reduce the risk of increasing antibiotic resistance.
* Consumers and representatives felt the service took infection-related risk minimisation seriously and indicated appropriate steps are undertaken to reduce infection related risks and prescribe medication appropriately.
* Clinical and care staff demonstrated knowledge of infection prevention and control practices and discussed antimicrobial stewardship principles and strategies they implement to minimise the need for antibiotics.
* The service has a dedicated Infection prevention and control lead for which a position description is currently being developed at an organisational level.
* Clinical data, including infections and antibiotic use, is reported and evaluated monthly at both a service and organisational level.
* The Assessment Team observed promotion of sound infection prevention and control practices during the Assessment Contact.
* Influenza and COVID-19 vaccination programs for consumers and staff are in place and vaccination status is monitored.

For the reasons detailed above, I find Rosha Pty Ltd, in relation to Semaphore Residential Aged Care, Compliant with Requirement (3)(g) 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.