SummitCare Baulkham Hills

Performance Report

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Phone number: 02 8865 3600

**Commission ID:** 1062

**Provider name:** SummitCare Baulkham Hills (NSW) Pty LTD

**Assessment Contact - Site date:** 7 October 2020

**Date of Performance Report:** 04 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 provider’s response to the Assessment Contact - Site report received 12 November 2020

# 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

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 consumer/representatives considered that they received personal care and clinical care that is safe and right for them.

For example:

Consumer representatives interviewed confirmed that consumer infections are managed well by the service, and that the service keeps them informed when consumer infections occur, their treatment and progress.

The organisation demonstrated effective minimises infection related risks through standard transmission-based precautions to prevent and control infection. Strategies have been put into place to manage a potential COVID-19 outbreak. These include determining a location to accommodate any affected consumers; management of supplies of personal protective equipment (PPE) and introducing competencies on the donning and doffing of PPE. The organisation has also made significant improvements in the management of antimicrobial stewardship, however, there is prophylactic antibiotic use with negative test results for infection, and contradictory records regarding antibiotic use and consumer test results which undermines accurate targeting of areas for improvement to reduce resistance to antibiotics.

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 provided information that the organisation demonstrates how it effectively minimises infection related risks through standard transmission-based precautions to prevent and control infection. The Assessment Team noted that, while the service has taken significant steps to improve the management of antimicrobial stewardship, their infection register indicates there is still a high proportion of inappropriate prophylactic antibiotic usage with negative infection test results; potentially increasing the risk of antibiotic resistance.

#### The Assessment Team reviewed documentation that indicated inconsistencies between consumers’ progress notes, and the infection control register regarding antibiotic use and test results. This potentially could undermine the capability of the service’s antimicrobial stewardship committee/medication advisory committee to accurately monitor and formulate corrective action with regard to antimicrobial resistance.

The approved provider provided a response that included clarifying some information in the report, benchmarking results, infection reporting criteria checklist, infection line listing information, drug usage reports, and their policies on antimicrobial stewardship. In the response is also actions that have occurred since the assessment contact, including education provided, webinars attended, and staff meetings held, discussing antimicrobial stewardship.

I have considered and accept the Approved Providers response. I acknowledge the approved provider has demonstrated an understanding of this requirement. I note improvement activities have occurred and the Approved Provider has addressed the small inconsistencies identified by the Assessment Team at the time of the audit specifically, regarding the inconsistencies in documentation and monitoringantibiotic usage in comparison to the negative test results. This issue will be re-examined at a future assessment to ensure practices promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

For the requirement, 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.

I find this requirement is compliant.

# 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.