Sylvan Woods Nursing Home

Performance Report

500 Old Cleveland Road East
BIRKDALE QLD 4159
Phone number: 07 3207 2830

**Commission ID:** 5937

**Provider name:** Allity Pty Ltd

**Assessment Contact - Site date:** 12 November 2020

**Date of Performance Report:** 21 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(d) | 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.
* the provider’s response to the Assessment Contact - Site report received 10 December 2020.

# STANDARD 2 Ongoing assessment and planning with consumers

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

The Assessment Team did not assess all requirements and therefore an overall compliance rating and summary for this Quality Standard is not provided.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

Consumers and representatives were satisfied assessment and planning occurred on entry to the service and they were involved in the assessment process.

The Assessment Team confirmed registered nurses complete initial assessments, including consideration of risks to the consumer’s health and well-being, which informs the delivery of safe and effective care.

Staff interviewed by the Assessment Team described how the registered nurse consults with consumers and their representatives regarding the consumer’s needs, goals and preferences. Medical officers and other allied health professionals, including physiotherapy, dietary and speech pathology, were involved in the assessment process as required.

The organisation has policies, procedures and flowcharts to guide staff practice and these are accessible electronically and in hard copy. The service has a suite of evidence-based assessment tools available for staff to use.

# 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 and therefore an overall compliance rating and summary for this Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

Consumers and consumer representatives sampled reported satisfaction with the safety and effectiveness of personal and clinical care.

Care planning documents reflected personal and clinical care that is safe, effective, best practice and tailored to meet individual consumer’s needs. The Assessment Team identified information in care planning documents was consistent with the information provided by consumers/consumer representatives when interviewed, and consistent with feedback from management and staff about the service’s policies and procedures.

Registered and care staff demonstrated an awareness of sampled consumers care needs. The Clinical Manager monitors the delivery of clinical and personal care, which includes feedback from consumers/consumer representatives, review of key clinical data, such as consumer falls, skin tears and infections, and analysing clinical incidents/data to identify trends.

Staff training records for the period September to October 2020, identified staff have completed training in minimising restraint, psychotropic medication and wound management. The Clinical Manager advised staff have access to on-line training that provides a variety of training modules in best practice consumer care

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

The service records high impact and high prevalence clinical and personal risks for consumers in care plan information, incident documentation and on risk assessments.

For the consumers sampled, care planning documents indicated their risk of falls and risk of developing pressure related injuries had been identified. Staff could describe the most significant clinical and personal care risks for the consumers sampled and strategies they implemented to manage or minimise the risk.

The Assessment Team reviewed the monthly clinical indicator reports for September and October 2020 which identified the service trends, analyses and responds to high impact and high prevalence risks. Clinical indicators were discussed at monthly meetings and were used to identify improvements in the delivery of consumer care.

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

For the consumers sampled, care documentation reflected the identification of, and response to, deterioration or changes in condition.

Registered nurses provided examples of when a deterioration or change in the condition of the sampled consumers was recognised and responded to. They described, and care documentation demonstrated, how consumer reassessment and care plan updates occurred following changes to care needs, including on return from hospital. Care staff advised they report changes to the registered nurse either verbally or through the completion of the service ‘Stop and Think’ form. Registered nurses are available on-site 24 hours per day, and they can seek after-hours support from the older person’s outreach team at the local hospital.

Staff have access to clinical work instructions and flow charts to guide them in recognising and responding to a deterioration or change in a consumer’s condition.

### 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 organisation has documented policies relating to infection control and practices to reduce the risk of resistance to antibiotics. The service minimises the risk of infections by monitoring the types of infections within the service, including the use of antibiotics and has provided training to staff.

Registered and care staff interviewed described how infection related risks are minimised. Registered staff monitor staff performance to ensure staff practice hand hygiene and use of personal protective equipment appropriately. All staff reported increased education and knowledge related to infection control measures pertaining to COVID-19 precautions.

The service monitors, trends and analyses clinical indicators including infections and the use of antibiotics monthly and implements actions as needed to improve clinical care. Management maintains vaccination records for consumers and staff; 100% of staff received the influenza vaccinations for 2020.

# 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.