Uniting Westmead

Performance Report

1 Caroline Street   
WESTMEAD NSW 2145  
Phone number: 02 9891 3755 / 0425 214 717

**Commission ID:** 2461

**Provider name:** The Uniting Church in Australia Property Trust (NSW)

**Assessment Contact - Site date:** 14 January 2021

**Date of Performance Report:** 17 March 2021

# 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 1 Consumer dignity and choice** |  |
| Requirement 1(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | 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 2 February 2021 .

# STANDARD 1 Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

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, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

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

## Assessment of Standard 1 Requirements

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

The Assessment Team found the service demonstrates that information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.

I have reviewed these findings and consider that the organisation is compliant with this requirement.

# 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 consumers considered that they receive personal care and clinical care that is safe and right for them.

The service was able to demonstrate it has an effective system to minimise infection related. The service has policies and procedures for antimicrobial stewardship and staff have a sound understanding of the process to mitigate the excessive use of antibiotics.

While the service generally gives consumers safe and effective personal and clinical care the Assessment Team found wound management was inconsistent and was not best practice. This could put consumers at risk of infection, skin deterioration and pressure injuries however the issues noted were largely due to Ommissions in wound care documentation and the did not appear to compromise the consumer’s health and well-being.

The Assessment Team did not assess all requirements and therefore an overall rating for the 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.*

The Assessment Team found the service does not demonstrate that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that is best practice; and is tailored to their needs; and optimises their health and well-being.

The Assessment Team provided information that while the service provides consumers safe and effective personal and clinical care that is tailored to their needs, wound management was inconsistent and was not best practice. The Assessment Team queried the service’s understanding of the use of medication as a chemical restraint when they identified six consumers prescribed medication for BPSD (behavioural and psychological symptoms of dementia).

The approved provider refuted the recommendation of the Assessment Team for this requirement. The approved provider submitted a response that included a plan for continuous improvement, wound charts, and education supplied to Registered Nurses in relation to wound care.

In relation to wound care the approved provider acknowledged the evidence provided by the Assessment Team around Ommissions in wound care documentation and provided information about how this issue has been previously identified as an improvement activity and described actions being taken to address.

The approved provider provided their psychotropic self-assessment in their response to the Assessment Teams report and I accept the approved provider’s response in relation to chemical restraint.

I have reviewed the Assessment Teams report and the approved provider’s response and find that for the two consumers identified their wound care management was not compromised by the issues found by the Assessment Team. I note that the approved provider currently is implementing improvement activities in relation to this.

I have reviewed these findings and consider that the organisation is compliant with this requirement.

### 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 found that minimisation of 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 reduce the risk of increasing resistance to antibiotics occurs.

The approved provider submitted a response in relation to the infection control monitoring checklist conducted during the performance review. I have reviewed this response and accept it meets the expectations of the commission. The approved provider will need to monitor relevant instructions and follow guidelines as supplied by the various agencies.

I have reviewed these findings and consider that the organisation is compliant with this requirement.

# 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.