Victoria Grange Residential Aged Care Facility

Performance Report

502-514 Burwood Hwy
VERMONT SOUTH VIC 3133
Phone number: 03 9955 4200 / 1800 026 388

**Commission ID:** 3822

**Provider name:** Australian Unity Care Services Pty Ltd

**Assessment Contact - Site date:** 12 February 2021

**Date of Performance Report:** 5 May 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(e) | 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 5 March 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

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

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. For example:

* Consumers are satisfied with the assistance and support staff provide to them to mobilise safely.
* Representatives are satisfied consumers are provided with comfort, support and care at the ends of their lives.
* Consumers interviewed provided positive feedback on the knowledge of staff in relation to their needs and preferences and noted staff check with them before care or assistance is provided.

Staff described the range of specialised care provided. Comprehensive falls mitigation strategies are documented in each consumer’s mobility and transfer care plan, which is updated as changes occur. Falls management is consistent with the established policies and guidelines. Behaviour management includes referral and minimising the use of psychotropic medications. The monitoring of call bells supports falls prevention, however nursing staff were observed not always responding to escalated calls. Documentation of psychotropic medications is not always complete.

Staff interviews, documentation review and observations confirmed end of life needs are met, and comfort is maintained in line with consumer wishes.

Clinical and care staff have access to up-to-date information about each consumer’s condition and their needs and preferences through care plan summaries or comprehensive care plans. Handover processes provide clinical and care staff with an update of any variances in consumers’ care needs and preferences. Handover documentation does not list all consumers to support effective handover. The service provides information to others involved in the provision of care.

Staff and management described infection control practices, minimising the use of antimicrobials, processes for identifying infections, social distancing and infection control training provided. However, the Assessment Team identified deficits in outbreak prevention, management and planning. The service’s response provided additional information in relation to these deficits, including improvements where required.

The Requirements 3(3)(b), 3(3)(c), 3(3)(e) and 3(3)(g) are assessed as compliant.

### 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.*

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

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

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### 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 identified deficits in outbreak prevention, management and planning during the application of the Commission’s Infection Control Monitoring Checklist and recommended the requirement as non compliant. The service’s response provided additional information in relation to each of the areas raised by the Assessment Team and the actions implemented where relevant.

In consideration of all the available information, including actions taken by the service, I am satisfied that, on balance, the service is compliant with this requirement.

# STANDARD 7 Human resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

A comprehensive process is established to address an incident of mandatory reporting involving staff as the alleged physical aggressors in an incident that involved a consumer. Management developed and implemented a comprehensive staff management program. This program has resulted in positive outcomes for the consumer and the staff involved.

The Requirement 7(3)(e) is assessed as compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# 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.