Warrina Innisfail Villanova Centre

Performance Report

28-38 Charles Street
INNISFAIL QLD 4860
Phone number: 07 4061 7677

**Commission ID:** 5274

**Provider name:** Warrina Innisfail

**Assessment Contact - Desk date:** 23 September 2020

**Date of Performance Report:** 20 October 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 - Desk; the Assessment Contact - Desk report was informed by interviews with management.
* the Infection control monitoring checklist completed 3 September 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

The Assessment Team did not assess all Requirements in this Standard; therefore an overall compliance rating or summary 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 gathered information from Management specific to the service’s coronavirus (COVID-19) preparedness and infection control processes and provided evidence to demonstrate actions the service has taken to assess and minimise infection related risks on the care of aged care consumers, including the impact of a potential COVID-19 outbreak.

Management advised the Assessment Team that since the monitoring assessment contact was conducted on 17 September 2020, the service has continued with the “holistic” approach of screening consumers with any changes in their condition being escalated to the in-charge person on shift. Management have reviewed the ‘Safer Care Victoria’ screening tool and advised the organisation will be implementing the use of the screening tool for all consumers commencing 24 September 2020. Management said they have adapted the screening tool to include additional steps to suit their service. For example, the staff member in charge has been included in the reporting and communicating of any changes of consumers to other staff via the electronic mail system, telephone messaging system, payroll notifications and noticeboards. Management advised senior staff are on call for any issues or concerns that may occur after hours.

The Assessment team were informed staff who work at the co-located services will not be required to wear a mask while at work unless they have worked at the local hospital, then a mask will be required to be worn. Staff who work at the organisation’s service which is not on the same campus as this service will be required to wear a mask while at work, regardless if they have worked or not at the local hospital, due to the difference in geographical location.

Based on the information summarised above, the service has acted to and/or continues to implement a range of strategies, procedures and practices to prepare for and minimise the risk of a potential COVID-19 outbreak, and therefore my decision is this Requirement is complaint.

# 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.