Whiddon Moree NH

Performance Report

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**Commission ID:** 2647

**Provider name:** The Frank Whiddon Masonic Homes of New South Wales

**Assessment Contact - Site date:** 21 July 2020

**Date of Performance Report:** 21 August 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)(b) | 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.

# 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.

For example:

Interviewed consumers confirmed they receive the care they need. Including personal hygiene, meals, medication, wound and skin care, management of pain, assistance with continence care needs, mobility and exercise.

All consumers interviewed confirmed they have access to a doctor or other health professionals when they need it.

To guide staff practice in providing clinical and personal care that is tailored to consumers’ needs and preferences. The service has policies and procedures in place. Staff demonstrated they have access to relevant clinical information and can share this information with allied and medical health specialists. Consumers with changing conditions are recognised and responded to, with referrals being made when required in a timely manner.

The Quality Standard has not been assigned a compliance rating as only one of the seven specific requirements have been assessed. This requirement was 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.*

The Assessment Team found that for consumers sampled, the key high impact or high prevalence risks that are identified in the admission process through assessment include: end of life, medical directives, chronic pain management, clinical deterioration, behaviours both physical and verbal aggression towards staff or other consumers and vaccination status. Risk assessments are completed and reassessed where indicated and reviewed by consumers, representative’s management and other medical providers.

The service’s approach to assessment and planning support outcomes for consumers are personalised, comprehensive and effective. For sampled consumers, interviews and documentation evidence that they are receiving personal care and or clinical care which is safe and right for them. The service was able to demonstrate there is a system to in place to identify and manage high impact or high prevalence risks associated with each consumer’s care.

I am satisfied that the service is compliant with this requirement as they have demonstrated that there is effective management of high impact of high prevalent and high impact risks associated with the care of each consumer.

# 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 to remain compliant with the Quality Standards.