Windsor Park Aged Care

Performance Report

110 Star Street   
CARLISLE WA 6101  
Phone number: 08 9472 9488

**Commission ID:** 7844

**Provider name:** Fresh Fields Aged Care Pty Ltd

**Assessment Contact - Desk date:** 3 July 2020

**Date of Performance Report:** 3 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** | **Compliant** |
| Requirement 3(3)(a) | 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 a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 3 COMPLIANT 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 recommended Requirement (3)(a) as met, the other requirements in Standard 3 were not assessed. I find the Requirement (3)(a) in relation to Standard 3 Compliant and have provided my reasons for my decision under the specific requirement.

The Assessment Team found the organisation has a current policy in relation to the use of restraint and restrictive practices. This includes the purpose, outcomes, definitions, organisation’s approach, assessment of the need for, and application of, restraint and consent. A register is also used to monitor the restraints for compliance. The management team reported there has been a reduction in the use of restraints, from 33 to eight.

The Assessment Team viewed eight consumers’ documentation about physical restraints that showed they all contained an assessment of the need for restraint and that non-restraint alternatives been trialled, a behaviour assessment rating, a care plan and the consent.

### 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’s report provided evidence of actions taken to address deficiencies identified at the service’s last assessment and have recommended this requirement as met. Assessment Team’s report identified the following actions and improvements since the Assessment contact:

The Assessment Team’s report indicated the restraint register showed there are currently six consumers with bilateral bedrails, one with pelvic positioning lap belt and one dignity suit. The Assessment Team noted all physical restraints, except the dignity suit, are regularly monitored for restraint harm minimisation as per the type of restraint (e.g. two hourly for bed rails).

However, the Assessment Team were informed by management that monitoring of the dignity suit is not required, as harm minimisation is commensurate with risk taking activity.

The Assessment Team also noted the restraint care plans do not show potential harm/risk for the individuals when the physical restraint is applied and strategies to prevent these. The ‘responsible person’ giving the consent acknowledges the need for the use of restraint and gives consent to the application of the restraint care plan, which includes the type of restraint and circumstances/situations when restraint may be used.

Based on my review of the Assessment Team’s report I would encourage the service to ensure best practice for delivering personal and clinical care in particular to physical restraint and compliance with relevant legislation.

For the reasons detailed above, I find that the approved provider does comply 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.