Performance

Report

**1800 951 822**

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| Name of service: | Baptistcare David Buttfield Centre |
| Service address: | 649 North Beach Road GWELUP WA 6018 |
| Commission ID: | 7275 |
| Approved provider: | BaptistCare NSW & ACT |
| Activity type: | Assessment Contact - Site |
| Activity date: | 14 August 2023 |
| Performance report date: | 7 September 2023 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Baptistcare David Buttfield Centre (**the service**) has been prepared by M Glenn, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

# Material relied on

The following information has been considered in preparing the 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 and representatives;
* the provider’s response to the assessment team’s report received 17 August 2023 acknowledging the recommendations made by the assessment team; and
* the Performance Report dated 8 June 2023 for an Assessment Contact - Site undertaken on 26 April 2023.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |

A detailed assessment is provided later in this report for each assessed Standard.

# 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 required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 3

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| Personal care and clinical care | |  |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant |

Findings

Requirement (3)(b) was found non-compliant following an Assessment Contact – Site undertaken on 26 April 2023 where it was found the service did not demonstrate effective management of high impact or high prevalence risks, specifically related to pressure injuries, weight loss, changed behaviours and falls. The assessment team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Training for registered staff that included management strategies for wound care, pressure injuries and weight loss.
* Improved clinical support for nutrition, hydration, weight management and wound management.
* Calibration of all scales for accurate weight measurement.
* Implementation of monthly falls management meetings to identify consumers with increased falls risk and identify improvements or strategies to reduce risk.

At the Assessment Contact undertaken on 14 August 2023, documentation showed all consumers are reviewed on admission and were found to have strategies in place to prevent falls. Staff followed procedures for effective management of wounds, pain, falls, changed behaviours and weight loss. A dietician monitors consumers’ nutrition and weight management monthly and all consumers are weighed at the beginning of each month to improve scheduled evaluation of weights. Clinical staff review psychotropic medication in relation to chemical restraint and opioid medication every month with a three-monthly review by the general practitioner. Consumers and representatives are satisfied with the care consumers receive.

For the reasons detailed above, I find requirement (3)(b) in Standard 3 Personal care and clinical care compliant.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)