Performance

Report

**1800 951 822**

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| Name: | Baptistcare Morrison Gardens |
| Commission ID: | 7186 |
| Address: | 1A North Street, MIDLAND, Western Australia, 6056 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 16 July 2024 |
| Performance report date: | 5 August 2024 |
| Service included in this assessment: | Provider: 1595 BaptistCare NSW & ACT  Service: 4714 Baptistcare Morrison Gardens |

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 Morrison Gardens (**the service**) has been prepared by Therese Wilson, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-2).

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.

The report also specifies any areas in which improvements must be made to ensure the Quality Standards are complied with.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Assessment contact (performance assessment) – 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 team’s report received 23 July 2024 stating they will not be providing a response to the Assessment Team report.

# Assessment summary

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| --- | --- |
| Standard 3 Personal care and clinical care | Not fully 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

|  |  |  |
| --- | --- | --- |
| 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

As not all Requirements were assessed the overall rating for this Quality Standard is not applicable.

The service was previously non-compliant in this requirement following an assessment contact on 23 January 2024 as it was found the service did not manage high impact or high prevalence risks associated with consumer care, specifically in relation to the management of pressure injuries, falls and weight loss. The service implemented a range of improvements that included but was not limited to a falls committee, policy updates, a wound champion role, wound audit and a weekly multidisciplinary team meeting to discuss consumers with high impact and/or high prevalence risks.

The Assessment Team were satisfied with the improvements made and now recommends this requirement as met.

Consumers and representatives are satisfied their risks are managed and confirmed their care is managed well. Staff could describe the care they provide to consumers and provided examples of how they manage consumers risks. Care plans records show care is monitored and risks are managed effectively.

It is for these reasons I find Requirement (3)(b) compliant.

1. The preparation of the performance report is in accordance with section 68A of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-2)