Performance

Report

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Bowral House Nursing Home |
| Service address: | 87 - 89 Kangaloon Road BOWRAL NSW 2576 |
| Commission ID: | 2644 |
| Approved provider: | Thompson Health Care Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 10 August 2023 |
| Performance report date: | 6 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 Bowral House Nursing Home (**the service**) has been prepared by E Woodley, 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.

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 - 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.
* the Performance Report dated 7 April 2022 following the Site Audit undertaken from 1 March 2022 to 9 March 2022.

# Assessment summary

|  |  |
| --- | --- |
| Standard 1 Consumer dignity and choice | Not applicable as not all requirements have been assessed |
| **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 1

|  |  |  |
| --- | --- | --- |
| Consumer dignity and choice | |  |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant |

Findings

The Quality Standard was not fully assessed, and therefore has not received a compliance rating. One of the six specific Requirements has been assessed and found compliant.

The service was previously found non-compliant in Requirement 1(3)(f) following a Site Audit undertaken from 1 March 2022 to 9 March 2022 as the service did not demonstrate consumer privacy was respected and personal information was kept confidential.

During the Assessment Contact conducted 10 August 2023, the Assessment Team found continuous improvement action implemented by the service had been effective in rectifying the non-compliance. Consumers and representatives interviewed by the Assessment Team consistently reported that consumers privacy is respected, and they had no concerns about the confidentiality of consumer information. The Assessment Team found consumer personal information was securely stored to restrict unauthorised access. Staff interviewed described ways they ensure consumer’s privacy is respected and how they maintain the confidentiality of personal information.

I find Requirement 1(3)(f) is compliant.

# Standard 3

|  |  |  |
| --- | --- | --- |
| Personal care and clinical care | |  |
| Requirement 3(3)(a) | 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. | Compliant |

Findings

The Quality Standard was not fully assessed, and therefore has not received a compliance rating. One of the seven specific Requirements has been assessed and found compliant.

The service was previously found non-compliant in Requirement 3(3)(a) following a Site Audit undertaken from 1 March 2022 to 9 March 2022 as the service did not demonstrate personal and clinical care provided to consumers was consistently safe, effective and tailored to their needs.

During the Assessment Contact conducted 10 August 2023, the Assessment Team found continuous improvement action implemented by the service had been effective in rectifying the non-compliance. A review of care documentation for sampled consumers demonstrated diabetic management plans have been reviewed and are reflective of consumer’s current needs, post fall review, monitoring and observations were attended to optimise consumer well-being, and consumer pain is assessed and both non-pharmacological and pharmacological interventions are used to manage consumer’s pain. The service demonstrated effective assessment, management and review of psychotropic medications and restrictive practices.

I find Requirement 3(3)(a) is 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-1)