Performance

Report

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| Name: | Buckland |
| Commission ID: | 0571 |
| Address: | 39 Hawkesbury Road, SPRINGWOOD, New South Wales, 2777 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 12 December 2023 |
| Performance report date: | 22 January 2024 |
| Service included in this assessment: | Provider: 1455 The Buckland Convalescent Hospital  Service: 5396 Buckland |

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 Buckland (**the service**) has been prepared by Therese Solomon, 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 (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 19 January 2024.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not Applicable |
| **Standard 4** Services and supports for daily living | **Not Applicable** |

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)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | Compliant |

Findings

The Assessment Team identified that the service has infection control systems and processes in place to manage an outbreak and minimise infection related risks. Staff knowledge around infection control and antimicrobial stewardship was adequate in accordance with their role.

However, some staff and visitors were observed breaching infection control protocols, while some staff were not able to demonstrate an understanding of all areas of infection control processes.

Consumers and/or representatives provided mixed feedback on their satisfaction of the management of outbreaks and how the service manages infection control overall. Most consumers and/or representatives felt the service’s management of the outbreaks was good and staff are very careful.

The Approved Provider responded with additional documentation and a comprehensive plan for continuous improvement containing actions to address the identified non-compliance.

Based on the information provided by the Assessment Team and the Approved Provider, Requirement 3(3)(g) is found Compliant.

# Standard 4

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| --- | --- | --- |
| Services and supports for daily living | |  |
| Requirement 4(3)(c) | Services and supports for daily living assist each consumer to:   1. participate in their community within and outside the organisation’s service environment; and 2. have social and personal relationships; and 3. do the things of interest to them. | Compliant |

Findings

Consumers and/or representatives felt supported to participate in activities within and outside the service, have personal relationships and do things of interest to them. The lifestyle coordinator demonstrated a wide variety of activities available to consumers and provided examples of services and supports being adapted to consumer needs when their situation changes.

Care and lifestyle staff explained how consumers are encouraged to participate in the activities of interest to them by asking them to join activities that are recorded in their care plans. Care planning documentation identified activities of interest to consumers and the lifestyle coordinator demonstrated how this information is used to create monthly activities calendars including one to one engagement to best meet consumers’ needs and preferences.

Based on the information provided by the Assessment Team and the Approved Provider, Requirement 4(3)(c) if found 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)