Performance

Report

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| Name of service: | Caladenia Nursing Home |
| Service address: | Rutledge Street KILMORE VIC 3764 |
| Commission ID: | 4431 |
| Approved provider: | Kilmore District Health |
| Activity type: | Assessment Contact - Site |
| Activity date: | 11 April 2023 |
| Performance report date: | 28 April 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 Caladenia Nursing Home (**the service**) has been prepared by D.Fekonja, 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.

# 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)(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

Requirement 3(3)(a) was found non-compliant following a Site Audit from 14 June 2022 to 17 June 2022. The deficits identified at that time included the management of restrictive practices and skin integrity that did not always reflect best practice. Chemical restraint is not consistently identified, utilised as a last resort, or reviewed regularly with the aim to minimise or cease. For one consumer with dementia, pain was not always identified as a possible trigger of the displayed behaviours and was not managed effectively. There were also inconsistencies in wound management evaluation.

The Assessment Team found the service has implemented improvements to address the identified deficits as specified in the service’s plan for continuous improvement (PCI) including:

* Providing training in a number of clinical areas including wound care, pain management, behaviour management, and restrictive practices.
* The service’s electronic system has been updated to include prompts to remind staff to enter data to update consumer care documents in alignment with the organisation’s updated policies and procedures. It also sends reports alerting the nurse unit manager to areas of concern concerning wounds, pain and behaviour management.
* Internal quality audits are conducted every 4 to 6 weeks in different consumer care plan areas to identify gaps. Results and actions for improvement are reported to the organisation’s ‘Aged Care Meeting’ where shortfalls are addressed.
* An Australian National Aged Care Classification (ANACC) nurse is overseeing the psychotropic register, providing education to staff in areas of restraint and quality indicators.
* A medication review of polypharmacy is being conducted with a view to reducing the amount of psychotropic medication prescribed and administered.

Consumers expressed satisfaction with how the service manages their personal and clinical care including the provision of wound and pain management and restrictive practices. All consumers subject to restrictive practices had informed consent documented and behaviour support plans in place. Chemical restraint was confirmed to be used as a last resort with non-pharmacological measures trialled first.

There were minor gaps in the consistency of documenting intervention strategies however staff and consumer interviews confirmed it is happening and that the gaps were due to time constraints. Further audits will be conducted to ensure all documentation is correctly completed.

Wounds were well managed and the active wounds register and progress notes reflect weekly reviews completed by the registered nurse with corresponding dates. Complex and chronic wounds are reviewed by an ‘experienced registered nurse’ in line with the service’s procedure.

The service has validated assessment tools, updated policies and procedures, and available resources including the ‘best practice documents’ from regional Wounds Victoria to guide staff in wound management.

Based on the information provided by the Assessment Team I am satisfied the service is now compliant with Requirement 3(3)(a).

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)