Performance

Report

**1800 951 822**

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| Name: | Fitzgerald Memorial Aged Care Facility Limited |
| Commission ID: | 0383 |
| Address: | 1 Rum Corp Lane, WINDSOR, New South Wales, 2756 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 15 May 2024 to 16 May 2024 |
| Performance report date: | 21 June 2024 |
| Service included in this assessment: | Provider: 1030 Fitzgerald Memorial Aged Care Facility Limited  Service: 399 Fitzgerald Memorial Aged Care Facility Limited |

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 Fitzgerald Memorial Aged Care Facility Limited (**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 (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.

# 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

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 not compliant in Requirement 3(3)(a) following an Assessment Contact conducted 8 January 2024 to 9 January 2024.

At the Assessment Contact conducted 15 May 2024 to 16 May 2024 the Assessment Team found continuous improvement action had been effective in improving personal and clinical care delivery for consumers. This continuous improvement included enhanced consumer review processes, internal audits, staff education and training, increased clinical oversight, and review of consumer assessments. Overall, consumers and representatives interviewed by the Assessment Team expressed satisfaction with the personal and clinical care consumers were receiving. This included wound care, falls management, nutrition and hydration, and communication with the service that optimises their health and well-being.

The service demonstrated the effective management of behaviours requiring support and restrictive practices in line with current legislative requirements. This included identification of restrictive practices, minimisation of restrictive practices, informed consent processes, and behaviour support plans with alternative strategies to the use of restraints. Care and clinical staff interviewed described potential triggers and individualised strategies to assist in managing behaviours for consumers sampled.

The service demonstrated effective monitoring and management of falls, wounds, bowels, blood glucose levels, and unplanned weight loss, utilising a multidisciplinary approach with allied health professionals. Staff interviewed were knowledgeable about management strategies for falls, wounds, pain, and weight loss, including escalation pathways. However, one consumer and one representative identified concern regarding pain management. The Assessment Team identified gaps in the monitoring of administered pain relief for effectiveness for these two consumers. The service responded to the gaps for the two consumers during the Assessment Contact and updated their pain management processes to ensure more consistent evaluation of interventions.

The service demonstrated consumers are receiving safe and effective personal and clinical care that is in line with best practice, tailored to their needs, and optimising their health and well-being. 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)