Performance

Report

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| Name: | Fronditha Anesi Aged Care Services - Thornbury |
| Commission ID: | 4535 |
| Address: | 335 Station Street, THORNBURY, Victoria, 3071 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 3 September 2024 |
| Performance report date: | 23 September 2024 |
| Service included in this assessment: | Provider: 1245 Fronditha Care  Service: 3045 Fronditha Anesi Aged Care Services - Thornbury |

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 Fronditha Anesi Aged Care Services - Thornbury (**the service**) has been prepared by L Glass, 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 were assessed |
| **Standard 7** Human resources | **Not applicable as not all Requirements were 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 |
| 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

Consumers and representatives are satisfied with the provision of consumer personal care and confirmed it meets the consumer’s needs and preferences. Consumers receiving clinical care such as pain and wound management are satisfied staff are ensuring effective and timely administration of medication and non-pharmacological measures for pain relief. Care planning documentation reflects charting of daily needs and where required, monitoring of consumer behaviours. Behaviour support plans are individualised and show informed consent has been obtained for the use of restrictive practices.

Consumers and representatives expressed satisfaction with the service’s infection control practices and attentive approach to managing infections. Care and clinical staff implement daily practices to minimise infection transmission and antibiotic use. There is a process for communication and staff training for infection control. Bi-monthly Infection Prevention and Control meeting minutes and monthly clinical meeting minutes demonstrated antimicrobial stewardship and infection control discussions and noted the occurrence of vaccination clinics. The service has policies and procedures for infection control and an up-to-date outbreak management plan in line with national guidelines for gastroenteritis, COVID-19 and acute respiratory infections.

Clinical staff explained the process to identify infections, appropriate use of antibiotics, practices to minimise infection related risk and regular staff education in an active outbreak. Care and environmental staff reflected on the importance of personal protective equipment (PPE) and regular high touch point cleaning.

The service schedules vaccination clinics and encourages consumers and staff to access influenza vaccination at the clinic. It has a very high percentage of consumers vaccinated with a COVID-19 booster and for influenza.

# Standard 7

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| Human resources | |  |
| Requirement 7(3)(a) | The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services. | Compliant |

Findings

The service demonstrated it has systems to ensure staffing numbers are planned and it delivers high quality care and services to consumers. Consumers and representatives stated that although communicating with agency and casual staff can be an issue, care needs are being met. While consumers provided mixed feedback about call bell wait times, consumers confirmed their care has not been impacted by waiting for call bell responses. Staff explained there is sufficient staff to provide care. The Assessment Team observed staff interacting and engaging with consumers and meeting their care needs in a timely manner.

Consumers confirmed staff know and understand their needs. Management stated there are enough staff with the correct skill set to provide quality outcomes for consumers. Staff competencies are monitored and recorded to ensure regulatory and legislative requirements are met. Documentation reviewed demonstrated a strategy to attract and retain culturally and linguistically appropriate workers and this is also recorded in the service’s plan for continuous improvement.

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)