Performance

Report

**1800 951 822**

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| Name of service: | Hamersley Nursing Home |
| Service address: | 441 Rokeby Road SUBIACO WA 6008 |
| Commission ID: | 7773 |
| Approved provider: | Fresh Fields Management (NSW) Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 4 April 2023 |
| Performance report date: | 27 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 Hamersley Nursing Home (**the service**) has been prepared by M Glenn, 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.

# 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 consumers/representatives, staff and management; and
* a Performance Report dated 19 August 2022 for a Site Audit undertaken from 13 July 2022 to 15 July 2022.

The provider did not submit a response to the Assessment Team’s report.

# Assessment summary

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| Standard 2 Ongoing assessment and planning with consumers | 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 2

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| --- | --- | --- |
| Ongoing assessment and planning with consumers | |  |
| Requirement 2(3)(e) | Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer. | Compliant |

Findings

Requirement (3)(e) was found non-compliant following a Site Audit undertaken from 13 July 2022 to 15 July 2022 where it was found care and services were not regularly reviewed for effectiveness in response to changes in consumers’ condition and care and service needs. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to, undertaken a review of processes to ensure care plans are updated for consumers who have had an incident; and provided training to staff.

At the Assessment Contact undertaken on the 4 April 2023, it was found appropriate monitoring, reassessment and review of consumers’ care needs occurs, including in response to incidents and change in condition. Care files demonstrated timely review of consumers’ care and service needs in response to swallowing difficulties, falls, pain and weight loss, and evidenced referrals to General practitioners and Allied health services, with recommendations incorporated into consumers’ care plans. Staff were familiar with the care needs of consumers’ sampled and stated they are informed of any changes through access to care plans and handover processes. One representative was satisfied that the service communicates with them following changes to the consumers’ care and following incidents.

For the reasons detailed above, I find requirement (3)(e) in Standard 2 Ongoing assessment and planning with consumers 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)