Performance

Report

**1800 951 822**

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| Name: | HammondCare - Wahroonga |
| Commission ID: | 1035 |
| Address: | 3 - 9 Woonona Avenue South, WAHROONGA, New South Wales, 2076 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 1 May 2024 |
| Performance report date: | 20 June 2024 |
| Service included in this assessment: | Provider: 749 HammondCare  Service: 7975 HammondCare - Wahroonga |

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 HammondCare - Wahroonga (**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)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | 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 Assessment Team found the service has effective processes to identify and manage high impact and high prevalence risks associated with the care of consumers. The service uses clinical indicator data to assist with identification of risks to consumers, and the service ensures oversight and review of these high impact and high prevalence risks through regular meetings. For consumers sampled, the Assessment Team found risks associated with behaviours requiring support, unplanned weight loss, pressure injuries, pain, and falls were effectively managed. Most consumers and representatives interviewed by the Assessment Team provided positive feedback regarding the clinical care consumers receive at the service.

I find the service has demonstrated the effective management of high impact and high prevalence risks associated with the care of consumers.

I find Requirement 3(3)(b) 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)