Performance

Report

**1800 951 822**

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| Name: | Howard Solomon Aged Care Facility |
| Commission ID: | 7250 |
| Address: | 91 Hybanthus Road, FERNDALE, Western Australia, 6148 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 14 December 2023 |
| Performance report date: | 16 January 2024 |
| Service included in this assessment: | Provider: 927 Grand Lodge of Western Australian Freemasons Homes for the Aged Inc  Service: 4777 Howard Solomon Aged Care Facility |

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 Howard Solomon Aged Care Facility (**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 (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.

The approved provider did not submit a response to the assessment team’s report.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 4** Services and supports for daily living | **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 |
| 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

Effective processes are in place to ensure each consumer receives safe and effective personal and/or clinical care. Staff described how they tailor care to consumers’ needs and ensure best practice is applied. Documentation showed care and services are provided in line with consumers’ needs detailed in their care plans. Consumers and representatives were satisfied that consumers get safe and effective personal and clinical care that is best practice, tailored to their needs and optimises their health and well-being.

Organisational policies and procedures are followed when community transmission starts to occur. Staff attend relevant training, prevent transmission of infections, and apply antimicrobial stewardship principles in their practice. Multiple infectious outbreaks occurred in 2023, all showing that the systems in place identified them quickly, and transmission-based precautions were implemented to contain the spread of infection. Clinical staff described how they apply antimicrobial stewardship principles in their everyday practice, including ensuring that specimens are collected when consumers show symptoms of infection to reduce the risk of antimicrobial resistance. Consumers stated staff practise good hygiene when assisting them and were confident in the service’s ability to manage an infectious outbreak.

Based on the assessment team’s report, I find requirements (3)(a) and (3)(g) in Standard 3 Personal care and clinical care compliant.

# Standard 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

Observations showed consumers being served food that was in line with the texture modified dietary requirements documented in their care plans. Improvements were made to the quality of meals after receiving consumer feedback and consultation occurs with consumers before any new menu is finalised. Consumers interviewed were satisfied meals were varied and of suitable quality and quantity.

Based on the assessment team’s report, I find requirement (3)(f) in Standard 4 Services and supports for daily living 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)