Kanangra Hostel

Performance Report

10 Kanangra Drive
DELORAINE TAS 7304
Phone number: 03 6362 8300

**Commission ID:** 8030

**Provider name:** Aged Care Deloraine Inc.

**Assessment Contact - Site date:** 3 August 2022 to 4 August 2022

**Date of Performance Report:** 1 September 2022

# Performance report prepared by

J Liau, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(g) | Compliant |

# Detailed assessment

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 Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this 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 staff, consumers/representatives and others.

# STANDARD 3 Personal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

Two requirements were assessed and found Compliant. An overall rating for this Quality Standard is not given as only two of the seven specific requirements have been assessed.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*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.*

The service was found non-compliant in this requirement at the last visit. The Assessment Team found the service had implemented improvements to address the deficits identified at the last visit.

The Assessment Team found the service has systems in place to identify and apply up-to-date guidance on best practice for delivering personal care and clinical care. The service demonstrates they tailor and deliver personal and clinical care in line with the consumer’s needs, goals and preferences in minimising restrictive practices, managing pain and managing skin integrity. The service ensures that the competency and knowledge of the workforce to provide personal and clinical care is tailored to the consumer and reflects best practice.

Consumers and representatives said clinical care and personal care meets the needs of consumers. Interview with staff confirmed they are involved with the care of consumers through discussions, monitoring and regular reviews. Documentation viewed by the Assessment Team demonstrated effective management of wounds, pain, restrictive practices and infections.

I am satisfied the approved provider has demonstrated that each consumer gets safe and effective personal care, clinical care, or both that is best practice, tailored to their needs and optimised their health and well-being. Based on the evidence provided I consider that the approved provider has demonstrated compliance with this requirement. I therefore find this Requirement Compliant.

### Requirement 3(3)(g) Compliant

*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.*

The Assessment Team found the service is able to demonstrate that systems and processes are in place to prevent and control infection and to support appropriate use of antimicrobials. The service has policies and guidelines to assist with the minimisation of infection and appropriate antibiotic prescribing.

Interview with consumers confirmed they were satisfied their infections are managed effectively and that they observe staff wearing the appropriate personal protective equipment (PPE), performing hand hygiene, and cleaning their rooms and communal areas.

Staff demonstrated an understanding of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics. The service has a staff and consumer vaccination program and records are maintained for Influenza and COVID-19 vaccinations.

Based on the evidence provided I consider that the approved provider has demonstrated compliance with this requirement. I therefore find this Requirement Compliant.

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.