Performance

Report

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Loxton District Nursing Home |
| Service address: | Drabsch Street LOXTON SA 5333 |
| Commission ID: | 6405 |
| Approved provider: | Riverland Mallee Coorong Local Health Network Incorporated |
| Activity type: | Assessment Contact - Site |
| Activity date: | 14 December 2022 |
| Performance report date: | 11 January 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 Loxton District Nursing Home (**the service**) has been prepared by K Richards, 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;
* the provider did not provide a response to the Assessment Team’s report; and
* the Performance Report dated 3 May 2022 for a Site Audit undertaken from 8 March 2022 to 10 March 2022.

# Assessment summary

|  |  |
| --- | --- |
| 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

|  |  |  |
| --- | --- | --- |
| 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

Requirements (3)(a) and (3)(g) were found non-compliant following a Site Audit undertaken from 8 March 2022 to 10 March 2022 where it was found:

* The service had not ensured each consumer was provided safe and effective care that was best practice, tailored to needs and optimised health and well-being in relation to diabetes, continuous oxygen therapy, and pain management, including following hospital directives.
* Staff practices did not support effective minimisation of infection related risks through the implementation of standard and transmission-based precautions to prevent and control infection.

The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Regular monitoring through audits, including for clinical care, environmental cleaning, infection prevention and control, hand hygiene and personal protective equipment competency.
* Staff have undertaken training in diabetes management, oxygen therapy, and pain. Clinical staff have received updated training on policies and processes to follow when a consumer returns from hospital admission.
* Monitoring of pain, diabetes, and clinical deterioration are reviewed daily by clinical and registered nurses.
* The service outbreak management plan was reviewed with ongoing reviews quarterly or as required in relation to any updates or legislation changes.
* Undertaking practical COVID-19 exercises with staff through ongoing reminder discussions and ad hoc spot checks of use of hand hygiene and donning and doffing processes, with care staff able to describe screening processes and mandatory use of personal protective equipment.

At the Assessment Contact undertaken on 14 December 2022, the Assessment Team found each consumer gets safe and effective care that is best practice, tailored to their needs, and optimises their health and well-being.

Consumers expressed satisfaction with personal and clinical care, and could describe delivery of tailored care in line with service guidelines and care planning in relation to monitoring and management of diabetes, use of continuous oxygen therapy, and management of specialised nursing needs, including indwelling catheters. Clinical and care staff were able to describe and provide information on consumer care and services in line with needs, care planning, and service policies. Management demonstrated effective monitoring systems for identifying deficiencies, including increased clinical oversight and auditing of clinical care.

For the reasons detailed above, I find Requirement (3)(a) in Personal care and clinical care compliant.

In relation to Requirement (3)(g), the Assessment Team found the service minimised infection related risks through implementing standard and transmission based precautions to prevent and control infection, and practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

Consumers confirmed cleaning processes are used, reducing infection related risks, and staff use personal protective equipment, such as masks and gloves, when undertaking personal care. Cleaning staff could describe processes for cleaning and laundry during consumer isolation for infection, and deep cleaning of room and fixtures once the consumer is cleared. Clinical staff could describe pathways for identifying infection, and non-pharmacological interventions in line with antimicrobial stewardship guidelines to reduce antibiotic use.

For the reasons detailed above, I find Requirements (3)(g) in Personal care and clinical care 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)