**Performance**

**Report**

**1800 951 822**

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| --- | --- |
| Name of service: | The District Nurses |
| Service address: | 2 Birdwood Avenue MOONAH TAS 7009 |
| Commission ID: | 300344 |
| Home Service Provider: | Hobart District Nursing Service |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 3 November 2022 |
| Performance report date: | 21 November 2022 |

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 The District Nurses (**the service**) has been prepared by M Murray, 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.

# Services included in this assessment

**Home Care:**

* The District Nurses - SOUTHERN, 23611, 2 Birdwood Avenue, MOONAH TAS 7009

**CHSP:**

* Short Term Restorative Care (STRC), 8116, 2 Birdwood Avenue, MOONAH TAS 7009
* CHSP Transport, 4-7WB8TG5, 2 Birdwood Avenue, MOONAH TAS 7009
* Social Support - Individual, 4-7WB8TIW, 2 Birdwood Avenue, MOONAH TAS 7009
* Allied Health and Therapy Services, 4-7WBK8V7, 2 Birdwood Avenue, MOONAH TAS 7009
* Specialised Support Services, 4-7WBK8YI, 2 Birdwood Avenue, MOONAH TAS 7009
* CHSP Personal Care, 4-7WBK919, 2 Birdwood Avenue, MOONAH TAS 7009
* Nursing, 4-7WBK94K, 2 Birdwood Avenue, MOONAH TAS 7009
* Domestic Assistance, 4-7WBK97L, 2 Birdwood Avenue, MOONAH TAS 7009
* Home Maintenance, 4-7WBK9AC, 2 Birdwood Avenue, MOONAH TAS 7009
* Flexible Respite, 4-7WBK9DN, 2 Birdwood Avenue, MOONAH TAS 7009
* Allied Health and Therapy Services, 4-7WBK8V7, 14 Willis Street, LAUNCESTON TAS 7250
* Domestic Assistance, 4-7WBK97L, 14 Willis Street, LAUNCESTON TAS 7250
* Flexible Respite, 4-7WBK9DN, 14 Willis Street, LAUNCESTON TAS 7250
* Nursing, 4-7WBK94K, 14 Willis Street, LAUNCESTON TAS 7250
* Short Term Restorative Care (STRC), 8116, 14 Willis Street, LAUNCESTON TAS 7250

# Material relied on

The following information has been considered in preparing the performance report:

* The Assessment Team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff, consumers/representatives and others.

# 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.

# Other relevant matters:

Non-compliance of requirements 3(3)(a); 3(3)(d) and 3(3)(e) was identified during an early assessment of performance conducted in September 2021.

# Assessment summary for Home Care Packages (HCP) and Short-term Restorative Care Programme (STRC)

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| --- | --- |
| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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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.

# Standard 3

|  |  |  |  |
| --- | --- | --- | --- |
| Personal care and clinical care | | HCP/STRC | CHSP |
| 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 | Compliant |
| Requirement 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Compliant | Compliant |
| Requirement 3(3)(e) | Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared. | Compliant | Compliant |

Findings

I have relied on the Assessment Team report in forming my view on compliance, the report evidences the following:

* Consumers and representatives gave positive feedback on the personal and clinical care they receive, commenting variously that staff know what care is to be delivered and use the appropriate equipment. Nursing staff demonstrated that clinical care is delivered according to documented treatment plans that draw on best practice principles. Including adopting evidence based treatments in consultation with specialists, having ready access to consumables, keeping the consumer informed of, and involved in the treatment and providing feedback to relevant people. Care documentation showed the service maintains regular monitoring and oversight of clinical care.
* The service demonstrated any deterioration or change of a consumer’s cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. Consumers and representatives expressed confidence that staff are familiar with the consumers and would be in a position to identify if the consumer’s health, function or condition had deteriorated or changed. Consumers and representatives provided examples of when such notifications were made and follow up was actioned by staff. Support staff are aware of their responsibilities in reporting deterioration or change in the consumer and said they receive training along with prompts and reminders to immediately report any signs of deterioration. There was evidence in care documentation of support staff and others notifying the service of a change in the consumer with appropriate action being taken by the service in response.
* The service demonstrated that information about consumers is documented and communicated within the organisation, and with others where responsibility for care is shared. The Assessment Team viewed evidence of communication with allied health providers, general practitioners, geriatricians, specialist wound services, family members and equipment suppliers involved in the consumer’s care and services. Consumers and representatives confirmed in various ways that staff know consumers and they do not need to repeat information about their needs and preferences. Staff advised relevant information about consumers’ care and services is documented and communicated through treatment and care planning documents available in the electronic care system, and include assessments, support plans, progress notes and case notes. Care planning documentation evidenced comprehensive progress notes and case notes are used to communicate internally and externally with those involved in supporting consumers’ health and wellbeing.

I am satisfied based on the evidence summarised above that the service complies with the Requirements as outlined in the table above.

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)