The Manor Nursing Home

Performance Report

2 Guy Street
KINGS MEADOWS TAS 7249
Phone number: 03 6345 2100

**Commission ID:** 8784

**Provider name:** OneCare Limited

**Assessment Contact - Site date:** 30 September 2020

**Date of Performance Report:** 6 October 2020

# Publication of report

This Performance Report **may 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)(b) | Compliant  |
| Requirement 3(3)(g) | Compliant |

# Detailed assessment

This performance report details the Commission’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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumer representatives – consumer care plans and assessments were reviewed and staff were asked about how they ensure the delivery of safe and effective care for consumers. The Assessment Team also examined relevant documents.

Overall consumers’ representatives considered that consumers receive personal care and clinical care that is safe and right for them and felt infection prevention strategies including those for COVID-19 are being undertake by the service.

Consumers were not interviewed at this assessment contact in line with minimising infection control risks relating to COVID-19 for consumers.

An overall compliance finding for Standard 3 is not provided as the Assessment Team did not assess all requirements at this visit.

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

Care planning documentation identified consumers at risk of falls and with impaired skin integrity. There was evidence of incident management, treatments, and communication with health professionals to minimise the risks associated with each consumer’s care needs. Representatives said consumer care is effectively managed, they are communicated with regularly regarding incidents, clinical treatments, medication changes and medical officer visits. Staff described their approach to caring for consumers and provided evidence in line with effective management of risks identified for each consumer discussed.

Requirement 3(3)(b) is assessed as 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.*

Consumer representatives expressed a high level of satisfaction with the services infection control practices. Staff said the service has access to head office support and the COVID-19 outbreak management plan has been discussed with them and is available at the nurses’ station. The Assessment Team observed personal protective equipment to be readily available. Antibiotic use is monitored and minimised and representatives said that the service notifies them when antibiotics are being prescribed for consumers and the reason.

Requirement 3(3)(g) is assessed as 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.