Performance

Report

**1800 951 822**

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| Name: | TriCare Bundaberg Aged Care Residence |
| Commission ID: | 5936 |
| Address: | 12 FE Walker Street, BUNDABERG, Queensland, 4670 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 28 August 2024 |
| Performance report date: | 13 September 2024 |
| Service included in this assessment: | Provider: 7220 TriCare Bundaberg Aged Care Pty Ltd  Service: 3851 TriCare Bundaberg Aged Care Residence |

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 TriCare Bundaberg Aged Care Residence (**the service**) has been prepared by Kimberley Reed, 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.

# 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 provider’s response to the Assessment Team’s report received 06 September 2024
* other information and intelligence held by the Commission in relation to the service.

# Assessment summary

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| Standard 2 Ongoing assessment and planning with consumers | Not applicable as not all Requirements were assessed |
| **Standard 8** Organisational governance | **Not applicable as not all Requirements were 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 2

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| Ongoing assessment and planning with consumers | |  |
| Requirement 2(3)(b) | Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes. | Compliant |

Findings

The service had comprehensive care planning assessments for consumers on entry, including processes to coordinate with medical officers to ensure consents for vaccinations align with individual consumer care needs, goals and preferences. Care planning and assessment processes included obtaining consumers’ consent for care and services to be provided, ensuring that it aligned with best practices for informed decision-making and respected individual autonomy. Consumer care plans underwent regular review every six months, and as consumer care needs changed. Discussions were held with the consumer regarding their current needs, goals and preferences and included consumers’ nominated representatives in the planning and decision-making processes. Care planning processes included discussions with consumers and representatives on end of life planning and advance care directives.

In relation to COVID-19 and influenza vaccination programs, the following information was recorded in the Assessment contact report:

The service conducts an on-going program of influenza and COVID-19 vaccination clinics for consumers, and revisits consumer and representatives consent prior to each vaccination clinic. As part of the assessment and planning process for vaccination clinics, consent forms for COVID-19 and seasonal influenza vaccinations were distributed to both consumers and their representatives and were followed up in telephone conversations with the consumers and representatives. The service had detailed vaccination registers which contained evidence of consent, records of consumer vaccination status and follow-up requirements for when the next vaccination was due. Representatives were emailed with information and prompted with reminders about the benefits of vaccination and reminded to complete consent forms in accordance with consumer preferences.

Consumers confirmed they received COVID-19 and influenza vaccinations recently. Consumers confirmed their consent or their representative’s consent was obtained prior to vaccination, and the service had sought consumers’ preferences for the use of antiviral medication. Registered staff made consumers aware of the anti-viral medication for COVID-19 and offered a choice to accept this should they become unwell. The service held a stock system of antiviral medications on site and had ready access to the local Pharmacy stock.

Registered staff had access to the electronic care management system which recorded consumer consent of choice to decline vaccination for either the COVID-19 vaccination or seasonal influenza. The service produced reports including a summary of actions taken to obtain consent or record the consumer’s choice to decline. Registered staff confirmed after the vaccinations were administered, a progress note was placed into the consumer’s electronic file. Meeting minutes for consumer meetings evidenced COVID-19 and seasonal influenza vaccinations were discussed and promoted.

In relation to advanced care and end of life planning, the following information was recorded in the Assessment contact report:

End of life planning was part of the consumer entry and care planning process. Where a consumer did not have an advance care directive in place on entry, registered staff discussed their choices and advance care directive during the regular six monthly comprehensive care plan review. Changes in consumers’ health status were recorded into care plans as emerging care needs were identified with relevant care strategies discussed and implemented.

Individualised statement of choice documents demonstrated each consumer’s preferences for care and what was important to them to guide substitute decision makers and clinicians about the consumers’ personal values and wishes. The organisation’s Advance Care Planning Policy guides staff on enduring power of attorney and substitute decision maker guidelines. The policy communicates to staff the procedure for advanced care planning, persons responsible, records to document, understanding capacity to make decisions and supported decision making.

Based on the information recorded above, it is my decision this Requirement is Compliant as the assessment and planning processes identified consumers’ goals and preferences, including vaccination and end of life planning.

# Standard 8

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| Organisational governance | |  |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Compliant |

Findings

Management confirmed and documentation evidenced the service's governing body promoted and monitored the COVID-19 vaccination program by providing consumers the government regulated advice notifications to foster a culture of safe, inclusive, and informed care. The clinical governance framework and executive meeting minutes demonstrated the governing body actively oversaw and promoted the delivery of safe and effective care including the current COVID-19 vaccination program.

Management stated and documentation evidenced the current information regarding the COVID-19 vaccine advice and recommendations for 2024 document was distributed to consumers and representatives through consumer meetings, information sessions, emails, notice boards and regular newsletters. Consumers confirmed they were aware of the current program and could make their choice whenever they choose.

The service conducted three COVID-19 vaccination clinics in the past two months and have another booked for September 2024. Documentation identified that currently, 40 percent of consumers have received the 2024 COVID-19 vaccination, 15 percent have refused, and the remaining have yet to decide their choice or have not filled out the consent form.

The service’s COVID-19 vaccination rate was monitored and reviewed through key performance data including statistical data, review of consumer and representative feedback regarding consent to the current vaccination program and past uptake of the vaccination programs. These results were provided to key personnel and management to identify possible improvements on the program and identify the factors of consumers’ personal choice.

The service’s Plan for Continuous Improvement identified the shortfall in consumer vaccinations in July 2024 and implemented actions to address the low vaccination rates. Actions included regular clinic bookings with the local pharmacy, new posters and an informative consent form for consumers and their representatives, adding vaccinations to the consumer meeting agenda and information sessions on the benefits of ongoing vaccinations.

Based on the information recorded above, it is my decision this Requirement is Compliant, as the organisation’s governing body promoted a culture of safe, quality care including the promotion of vaccinations.

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)