Performance

Report

**1800 951 822**

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| Name of service: | Villa Maria Catholic Homes Providence Aged Care Residence |
| Service address: | 9 Griffith Street BACCHUS MARSH VIC 3340 |
| Commission ID: | 3058 |
| Approved provider: | Villa Maria Catholic Homes Limited |
| Activity type: | Assessment Contact - Site |
| Activity date: | 28 June 2023 |
| Performance report date: | 20 July 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 Villa Maria Catholic Homes Providence Aged Care Residence (the service) has been prepared by V Stephens, 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 - 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

# Assessment summary

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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.

# 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

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| 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)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | 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 |

Findings

**Requirement 3(3)(a)**

The service demonstrated provision of individualised personal and clinical care that is safe and effective, with documentation demonstrating that pain, falls, and wounds are effectively managed. All sampled consumers and their representatives expressed satisfaction that staff are providing appropriate clinical and personal care.

The Assessment Team reviewed current wound charts for 3 sampled consumers and found they are completed in accordance with the service’s skin care pressure injury and wound management policy, including photographs with measurements and dressing frequency and type. File review evidenced the involvement of a wound specialist nurse in managing complex wounds. All sampled care documentation demonstrated pain monitoring, management and evaluation.

**Requirement 3(3)(b)**

The service demonstrated that they effectively identify and manage high impact or high prevalence risks. The service has policies, protocols, and risk-related tools for monitoring and assessing risks. Care documentation provided evidence of assessing and managing high impact and high prevalence risks when care is reviewed. Staff demonstrated an understanding of the high impact and high prevalence risks associated with consumers. All consumers and most consumer representatives said they were satisfied that care is effectively managed.

Consumers requiring complex clinical care in relation to continuous oxygen management, falls, and diabetes management had appropriate individualised care plans in place. There were clear medical practitioner directives for individual consumers, including diabetic management plan review dates. Consumers experiencing weight loss are monitored weekly and referred to their medical practitioner or dietitian. The service also demonstrated effective management or risks associated with catheters and urinary tract infections.

**Requirement 3(3)(d)**

The service demonstrated how deterioration or change in consumer condition is recognised and responded to in a timely manner. Care documentation reflects appropriate actions taken in response to deterioration or change in a consumer’s health. Consumers and their representatives expressed satisfaction regarding staff response to declining health. Staff provided examples of how deterioration or changes are identified, actioned, and communicated.

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)