Performance

Report

**1800 951 822**

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| Name: | Villa Maria Catholic Homes Wantirna Aged Care Residence |
| Commission ID: | 4282 |
| Address: | 355 Stud Road, WANTIRNA SOUTH, Victoria, 3152 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 23 January 2024 to 24 January 2024 |
| Performance report date: | 15 February 2024 |
| Service included in this assessment: | Provider: 433 Villa Maria Catholic Homes Limited  Service: 2803 Villa Maria Catholic Homes Wantirna 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 Villa Maria Catholic Homes Wantirna Aged Care Residence (**the service**) has been prepared by L Glass, 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.

# 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 |

Findings

I have considered the information provided in the Assessment Team report including the recommendation that the requirement is met. Based on the information in the Assessment Team report I find requirement 3(3)(a) Compliant.

During an Assessment Contact on 8 August 2023 the service was found non-compliant in Standard 3 Requirement 3(3)(a). The scope of the Assessment Contact on 23 January 2024 to 24 January 2024 was to assess the service’s progress in returning to compliance.

On 8 August 2023 evidence in the form of observations, care file documentation, staff and consumer interviews demonstrated wound care was not occurring in line with documented specialist directives, care plans, or best practice. Pressure area care was not attended to for consumers identified at high risk of pressure injury. Recommended equipment was observed not to be in place, and care documentation such as wound assessment and monitoring charts were not reflective of consumer’s current wound status. Care file documentation and consumer interviews demonstrated consumer’s pain was not always assessed and managed in relation to painful wounds.

During an Assessment Contact on 23 January 2024 to 24 January 2024, the Assessment Team noted the service has implemented a range of improvements that have rectified the non-compliance. All consumers and representatives were satisfied, and confident clinical care was managed competently and in line with consumer’s current needs and preferences. Staff interviews reflected best practice principles are implemented and followed in relation to skin integrity, complex wound management, and pain, to optimise consumers health and wellbeing.

A wound specialist has conducted a review of all consumer’s wounds, staff have undertaken education in wound and pain management, and a range of initiatives, supplies and tools have been introduced to assist staff in providing consumers with effective wound care and pain management. This includes initiatives for more consistent monitoring and documenting of wound care and pain management. A policy review, wound chart assessments, training records, observation of consumer management plans and consumers confirmed the improvements and actions to address non-compliance had been implemented.

All consumers and representatives interviewed were satisfied with improvements that have occurred in relation to skin care, wound and pain management. Files of consumers experiencing pain in relation to wound management and relevant diagnosis evidenced effective pain assessment and management, in consultation with consumers, and input from the medical officer and wound specialist. Staff demonstrated an understanding of wound and pain management, the importance of observation and communication about changes to consumer’s wounds and pain and the monitoring and review of any pain consumers experience. There has been an increase in the use of pain charting tools and the collated information is reported in the monthly care manager meeting minutes.

1. The preparation of the performance report is in accordance with section s 68A of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)