Performance

Report

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Warrigal Care Mt Warrigal |
| Service address: | 5 Rowland Avenue MOUNT WARRIGAL NSW 2528 |
| Commission ID: | 0181 |
| Approved provider: | Warrigal Care |
| Activity type: | Assessment Contact - Site |
| Activity date: | 3 August 2023 |
| Performance report date: | 12 November 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 Warrigal Care Mt Warrigal (**the service**) has been prepared by E Woodley, 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.
* the performance report dated 19 August 2022 following the Site Audit conducted 8 June 2022 to 10 June 2022.

# Assessment summary

|  |  |
| --- | --- |
| Standard 3 Personal care and clinical care | Non-compliant |

A detailed assessment is provided later in this report for each assessed Standard.

# Areas for improvement

Areas have been identified in which **improvements must be made to ensure compliance with the Quality Standards**. This is based on non-compliance with the Quality Standards as described in this performance report.

* Requirement 3(3)(a) – The approved provider must demonstrate that clinical and personal care is best practice, tailored to the consumer’s needs and optimises their health and well-being. Assessment, management and review of psychotropic medications, consumer behaviour support planning, and management post-fall is in line with best practice. Skin integrity is appropriately assessed, managed and monitored to optimise consumer’s health and well-being.

# Standard 3

|  |  |  |
| --- | --- | --- |
| 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. | Non-compliant |

Findings

The Quality Standard is assessed as non-compliant as one of the seven specific Requirements have been assessed as non-compliant.

The service was previously found non-compliant in Requirement 3(3)(a) following a Site Audit conducted 8 June 2022 to 10 June 2022 due to inconsistent practice regarding restrictive practices, behaviour support planning and wound management.

At the Assessment Contact conducted 3 August 2023, the Assessment Team found gaps remained in the service’s practices regarding restrictive practices and behaviour support planning. The Assessment Team found lack of effective and timely review of chemical restrictive practices, and consumer behaviour support plans were not updated to reflect consumer’s current behaviours and effective strategies to address them. Care documentation for sampled consumers indicated that wounds are not being identified at an early stage, and review of identified wounds is not effective to monitor for healing and/or deterioration. The Assessment Team found risks associated with the post-fall management of one sampled consumer.

The approved provider did not provide a response to the Assessment Contact report. Therefore, I am not satisfied that the service has ensured that each consumer receives safe and effective clinical care that is best practice, tailored to their needs, and optimising their health and well-being.

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