Performance

Report

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| Name: | William Beech Gardens - Bushmaster |
| Commission ID: | 2648 |
| Address: | 1 Madline Street, Condobolin, New South Wales, 2877 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 9 May 2024 |
| Performance report date: | 21 June 2024 |
| Service included in this assessment: | Provider: 643 RSL LifeCare Limited  Service: 1007 William Beech Gardens - Bushmaster |

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 William Beech Gardens - Bushmaster (**the service**) has been prepared by Therese Solomon, 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

The service demonstrated that consumers get safe and effective personal and/or clinical care tailored to their needs and preferences and is best practice. Consumers and/or representatives provided positive feedback about their care and staff practices around their care management. The documentation review of wounds, falls management, pressure injuries, restrictive practices, pain management, and complex care needs, demonstrated that care provided aligned with each consumer's care plan and best practice. Staff knowledge of consumer care needs was optimal.

Consumers reported the care they receive is right for them and meets their needs. Consumers and/or representatives stated the staff were excellent and assisted them with their care needs. Consumers stated staff were always polite, respectful, and caring toward them and ensured they received care and services required, including being referred to other services such as the medical officer or allied health, and assisted to attend activities of interest.

The service has a falls prevention and management policy and procedure to guide staff in appropriately assessing and managing consumers following a fall. Several consumers at the service have been identified as high falls risks, and staff stated interventions implemented for at risk consumers include sensors mats and crash mats, appropriate bed heights, regular toileting schedules and welfare checks, and assistance with care and mobilising. Other interventions include individual strength and mobility programs with the physiotherapist or group exercise sessions.

Management reported the service has environmental, mechanical, and chemical restraints in place at the service related to the care of some consumers. The care manager has identified the use of chemical restraint as an area for review with the intention to reducing their use. The service has processes and systems in place to check and review the effectiveness of restrictive practices, and the use of psychotropic medications where indicated. Consent for restrictive practices is obtained annually, or when there is a change, and is reviewed every 3 months in consultation with the medical officer. Behaviour support plans are in place for consumers, and these are also reviewed.

The service has several consumers who are identified as at risk for pressure injuries. Documentation review shows at risk consumers have interventions implemented to reduce the risk of developing pressure injuries including regular toileting schedules, skin care, repositioning attended and are encouraged to mobilize. Other interventions include air mattresses, and where needed consumers may also receive dietary reviews and nutritional supplements.

Based on the information provided by the Assessment Team, Requirement 3(3)(a) is found compliant.

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)