Performance

Report

**1800 951 822**

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| Name of service: | Windsor Park Aged Care |
| Service address: | 110 Star Street CARLISLE WA 6101 |
| Commission ID: | 7844 |
| Approved provider: | Fresh Fields Aged Care Pty Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 23 June 2023 |
| Performance report date: | 13 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 Windsor Park Aged Care (**the service**) has been prepared by M Glenn, 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.

# 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 provider’s response to the Assessment Team’s report received on 7 July 2023 acknowledging the recommendations made by the Assessment Team; and
* the Performance Report dated 5 October 2022 for an Assessment Contact - Site undertaken on 30 August 2022.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 4** Services and supports for daily living | **Not applicable as not all requirements have been assessed** |
| **Standard 5** Organisation’s service environment | **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)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | Compliant |

Findings

The service has an effective infection prevention and control program that aligns with nationally recognised guidelines and the service’s policies and procedures. A clinical staff member acts as a designated infection prevention and control lead, is formally trained, and responsible for overseeing and monitoring staff practice. All staff said they have received infection prevention and control related training and could describe the precautions to be followed to minimise the risk of infection.

The service has policies and procedures related to antimicrobial stewardship, monitoring of infections and for the prescribing of antimicrobials. Documentation showed antibiotic therapy is only prescribed when a consumer is symptomatic, has a history of infection related illness, or has a confirmed infection through pathology assessment. A report of consumer infections is reviewed monthly by management to monitor and target trends.

For the reasons detailed above, I find requirement (3)(g) in Standard 3 Personal care and clinical care compliant.

# Standard 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

The service demonstrated meals provided are varied and are of suitable quality and quantity. Specific dietary and nutritional requirements are provided to the caterers and documented in consumers’ files. Kitchen staff are aware of individual consumer requirements, including the processes implemented and used to ensure correct sizing, fluid viscosity and any modified dietary needs. Options for alternative meals are available if a consumer is not happy with the meal choice provided and meals were observed to be well presented and checked by staff to ensure the correct meal is served to the consumer. Most consumers said they enjoyed the food and there was plenty to eat with enough variety and choice available.

For the reasons detailed above, I find requirement (3)(f) in Standard 4 Services and supports for daily living care compliant.

# Standard 5

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| Organisation’s service environment | |  |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Compliant |

Findings

Requirement (3)(b) was found non-compliant following an Assessment Contact on 30 August 2022 where the service was unable to demonstrate the service environment was safe, clean, well maintained and comfortable. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Completed a range of reactive and preventative maintenance project works which addressed outstanding items previously identified as causing impact to consumers’ safety, environmental cleanliness, and the facility’s presentation and maintenance schedule.
* The implementation of a streamlined work order request system which provides a centralised reporting and analysis review system for repairs and maintenance.

At the Assessment Contact undertaken on 23 June 2023, the service environment was observed to be clean, safe and well maintained with consumers observed moving freely indoors and outdoors. Staff were observed regularly cleaning high touchpoint areas and could explain the process for reporting issues related to cleanliness. Cleaning staff could describe how they ensure consumer rooms are maintained and how they tailor their routines to accommodate consumers’ personal preferences. The maintenance team demonstrated established systems and processes for facilitating repairs and for conducting preventative maintenance work. Consumers, representatives and staff were complimentary of the recent refurbishment and renovation works, including the cleanliness and maintenance of the service environment.

For the reasons detailed above, I find requirement (3)(b) in Standard 5 Organisation’s service environment care 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)