Aegis Amherst

Performance Report

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**Commission ID:** 7410

**Provider name:** Aegis Aged Care Group Pty Ltd

**Site Audit date:** 30 September 2020 to 2 October 2020

**Date of Performance Report:** 28 January 2021

# Publication of report

This Performance Report **may be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

Consumers interviewed confirmed they are treated with dignity and respect, can maintain their identity and are supported to make informed decisions about the care and services they receive. Consumers confirmed they feel valued and are supported to continue doing the things they like and maintain their independence. Consumers stated staff respect their privacy.

The service has processes to identify each consumer’s unique needs including, cultural and religious preferences, life histories and people important to them. The information is recorded and communicated to staff and others who provide care and services. The service provides appropriate and timely information to consumers, in a way which consumers can understand, both in writing and verbally through meetings. The service supports consumers to make choices including other people the consumer wishes to be involved in making decisions and consumer decisions and people involved in their care are recorded in the consumers’ care plans. The service has policies and procedures including dignity in risk processes to direct staff in supporting and delivering care which has the consumer at the centre.

Staff interviewed provided examples of how they support each consumer’s individual needs in line with the consumer’s choice and preference, including providing culturally appropriate supports and supporting consumers where risk is involved. Staff were observed to treat consumers with respect and supported consumers’ privacy including keeping consumer information and records confidential.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed they are involved in assessment and planning of consumers’ care and majority stated they feel partnered in process. Consumers and their representatives confirmed they are informed of the outcomes of assessment and planning through discussions and case conferences with staff. However, they don’t have access to a written copy of the care plan.

The service has an electronic assessment and care planning system and assessment tools including risk assessments and charting are completed by staff to inform the strategies in the care plan. Consumers’ care plans viewed had recorded consumers’ needs, goals and preferences in line with consumers’ current needs. Medical officers and other health professionals involved in assessment and care of the consumer have their directives recorded in the care plan. Consumers’ wishes for end of life are identified and documented in line with consumers’ choice. All consumers’ care plans viewed had regular reviews recorded including when changes occur and the outcomes of consultation with the consumer or their representatives recorded.

Staff interviewed demonstrated the assessment process including completing incident reports and charting to identify changes in consumer needs. Staff confirmed they have access to the care plans through portable electronic devices and changes or information about consumers are communicated through verbal and written handover processes.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

### Requirement 2(3)(d) Compliant

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 COMPLIANT Personal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers are delivered safe and effective personal and clinical care. Consumers confirmed when incidents including medication errors, falls and challenging behaviours occur the service identifies and takes appropriate action to investigate and prevent or reduce further incidents. Consumers confirmed they have access to medical officers and health specialists when they need them. Representatives for consumers nearing end of life confirmed the consumer receives appropriate care to support the comfort and dignity of the consumer.

Incident reports, progress notes and clinical handovers and meetings are used to identify changes or deteriorations in consumers’ cognitive and physical health and functioning. Consumer care plans viewed show specialists including physiotherapists and dementia and palliative care specialists are involved in the assessment and review of consumers to ensure appropriate strategies are implemented to care for consumers. The service has policies, procedures and assessment tools to guide the delivery of personal care and clinical care in line with best practice to optimise the consumers’ health and well-being.

Staff interviewed confirmed processes for identifying changes in consumer health and reporting incidents. Staff confirmed they are informed when changes to consumer care needs occur and are provided information including alerts and strategies to provide appropriate care. Staff provided examples of managing consumer personal and clinical care in line with the consumers’ current documented needs. Staff confirmed appropriate examples of how they identify and manage infections including infectious outbreaks. Staff said they have access to guidelines to direct how they manage infections including appropriate use of antibiotics.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*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.*

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### Requirement 3(3)(d) Compliant

*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.*

### Requirement 3(3)(e) Compliant

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*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.*

# STANDARD 4 COMPLIANT Services and support for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers receive the services and supports for daily living that are important for the consumers’ health and well-being and enable them to do the things they want. Consumers provided examples of being supported to attend and engage in a variety of individual and group activities including: walking, bus outings, singing, emotional and social support from therapy staff and volunteers and religious services. Consumers confirmed staff support them to remain independent and provide consumers with assistance to do activities of their choice.

The service has processes to identify and assess consumers’ needs and preferences in relation to social, emotional, spiritual and psychological well-being. The service develops plans to direct services and supports including activities to engage consumers’ spiritual and emotional supports through volunteers, visitors and church groups. Consumers’ participation in social and wellness activities including one to one support and individual activities are recorded and monitored to identify effectiveness of supports and changes in consumer needs. The service has dedicated therapy staff to assist and support consumers in doing the things of interest to them and engaging in social relationships within and outside the service.

Consumers’ dietary and nutritional needs and preferences are recorded and are available to staff where consumer meals are prepared and served. Consumers confirmed they receive quality meals and are able to have alternatives if requested and provide feedback to improve meals.

Consumers are provided appropriate equipment to promote their independence and which is appropriate for their assessed needs. Equipment observed was well maintained and suitable for its purpose.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers feel safe and at home in the service and have access to indoor and outdoor living areas including a cinema. Consumers confirmed they are supported to personalise their rooms and their visitors are always made to feel welcome. Consumers stated they are satisfied the service is clean and well maintained

Observations of the service environment show the service is clean and well maintained and is welcoming with a large foyer and clear directions and staff to assist in navigating the service. The dementia support area has doors leading to an outdoor area which the consumers were observed to be enjoying.

The service has a scheduled and reactive cleaning and maintenance system in place to ensure the service is clean and maintained. The maintenance system includes the use of contractors to maintain and safety check equipment. Hazard reporting systems ensure any safety issues are identified and reported for appropriate action.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANT Feedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed they have access to a variety of ways to make complaints and provide feedback to the service including verbally to staff and management, through feedback forms, surveys and meetings. Consumers and their representatives are satisfied the service takes appropriate action when complaints are made. However, one consumer was not satisfied with how the service managed their complaints.

The service has an effective complaints system and a complaints and feedback register is maintained by management to monitor and ensure all complaints are investigated and appropriate action taken. The complaints register shows all complaints are recorded including outcomes of investigation, discussions with the complainant and actions and outcomes. The service actively uses feedback to feed into their continuous improvement system. Where incidents occur, or things go wrong the service openly acknowledges and communicates this and has an open disclosure policy.

Staff interviewed confirmed the feedback and complaints processes and provided examples of how they support consumers who wish to raise concerns including those who raise complaints verbally. Observations show consumers and their representatives have access to internal and external complaints and advocacy information.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANT Human resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers receive quality care and services from staff who are kind and caring and skilled in their roles. Consumers and their representatives interviewed confirmed there are adequate numbers of staff to provide care to consumers when they need it. Consumers are satisfied with staff performing their roles well, however some consumers indicated ‘agency’ relief staff are not always nice or know what they are doing.

The service has a process to monitor staff performance and when concerns are identified management implement appropriate performance management and actions. The service has a planned approach to rostering and allocating staff based on the needs of consumers and vacant shifts are filled through casual staff pool or ‘agency’ relief staff. Staff performance reviews occur regularly, and annual training is monitored for effectiveness and the service uses feedback, incidents and staff surveys to identify additional staff training required. Staff are recruited through a corporate process based on their skills and qualifications and professional registrations and police certificates are recorded and monitored.

Staff interviewed confirmed regular and additional training provided to them including toolbox training and training at staff meetings. Staff confirm they participate in regular performance reviews and staff surveys.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANT Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers are engaged by the service to provide feedback, suggestions and have input into the development of care and services and improvements at the service.

The service is supported by the wider organisation which oversees the development of policies and procedures to direct care and service delivery including the promotion of safe, inclusive and quality care and services. Governance systems are in place to ensure effective information management, feedback and complaints systems, continuous improvement processes, financial governance and the service understands and meets its regulatory requirements. The service completes regular reports to the organisation and has regular meetings to ensure systems are monitored for effectiveness.

The service has a risk management system which directs staff in the identification and management of risks associated with care of consumers and how to identify and respond to elder abuse. Incidents are recorded including outcomes of investigations and actions taken and reported and discussed regularly to identify trends. The service has a clinical governance framework supported by the wider organisation and current guidelines are in place to minimise the use of restraint, ensure antimicrobial stewardship and direct the use of open disclosure. Clinical incidents and trends are analysed and discussed at clinical meetings including areas for improvement and action.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.