All Care Aged Care The Vales

Performance Report

60-66 States Road
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**Commission ID:** 6933

**Provider name:** Tickled Pink Aged Care Pty Ltd

**Assessment Contact - Site date:** 27 January 2021 to 28 January 2021

**Date of Performance Report:** 26 February 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | 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 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.

# STANDARD 2 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 Assessment Team assessed Requirement (3)(a) in relation to Standard 2 Ongoing assessment and planning with consumers. Based on the Assessment Team report I find the service Compliant with this Requirement. All Requirements in this Standard were not assessed and therefore an overall rating of the Standard is not provided

The service demonstrated assessment and planning is undertaken by qualified staff and allied health professionals using verified tools in consultation with consumers and/or their representatives. Sampling of consumer care records showed assessment include current needs, referrals, evidence of consultation with consumers and their nominated representatives, medical officers, specialist and allied health professionals. Risk assessment is undertaken for all identified risks and includes consumer/representative input, discussion of risks and where appropriate authorisation to undertake activities involving risk.

Staff interviewed described how assessment and planning processes are used to support the provision of care and services to each consumer. Consumers and representatives interviewed confirmed they have access to their care plans if desired. Consumers and representatives confirmed they are consulted to provide information individual to their needs. Strategies from these discussions are agreed to manage ongoing care and risk are documented. Examples provided included where dietary needs and strategies to manage a wound were discussed and documented with a representative to ensure staff had enough detail to provide safe and quality care.

Staff have access to policy and processes to to ensure consumer assessmetns are undertaken and reviewed regularly or updated as consumer needs change.

## 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.*

# STANDARD 3 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 Assessment Team assessed Requirement (3)(b) in relation to Standard 3 Personal care and clinical care. Based on the Assessment Team report I find the service Compliant with this Requirement. All Requirements in this Standard were not assessed and therefore an overall rating of the Standard is not provided

The service demonstrated there are processes in place to identify and provide personal and clinical care that is safe and right for the consumer. Through sampling of care documents the Assessment Team found the service identifies and implements strategies to manage high impact, high prevelance risks including charting and ongoing evaluation to ensure management of the risk is right and safe.

Where required other medical and allied health professionals have been consulted and involved in the implementation of strategies to reduce risk involving challenging behaviour. Staff demonstrated awareness of the sampled consumers and strategies to manage their care. Staff were observed to use strategies recorded effectively.

Most consumers and representatives interviewed confirmed they are satisfied with the care provided to manage their complex health conditions. One representative was not satisfied with the care provided. However, follow up by the Assessment Team showed consideration was given to consumer risk and strategies were in place including regular monitoring, provision of agreed care with the representative, referral to a medical officer and information available to staff in different formats to ensure the care provided was safe.

### Assessment of Standard 3 Requirements

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

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

# STANDARD 8 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 Assessment Team assessed Requirement (3)(d) in relation to Standard 8 Organisational governance. Based on the Assessment Team report I find the service Compliant with this Requirement. All Requirements in this Standard were not assessed and therefore an overall rating of the Standard is not provided

The service demonstrated there are effective risk management systems in relation to the management of high impact, high prevalence risks associated with the care of consumers. Processes include documented regular review of of known risks.

The Assessment Team sampled policies and processes available to staff for guidance. These included the identification, assessment and monitoring of high impact, high prevalence risk for consumers, identification of elder abuse and manadatory reporting and, how the service supports consumers to live their best life.

The service collates clinical indicators which are reviewed monthly at the service. A quarterly Quality and Board meeting discusses clinical incidents, serious incidents, restraint usage, compulsory reporting and complaints raised.

## Assessment of Standard 8 Requirements

### 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.*

# 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.