Altona Gardens Care Community

Performance Report

28-30 Rymill Court   
ALTONA NORTH VIC 3025  
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**Commission ID:** 3536

**Provider name:** DPG Services Pty Ltd

**Site Audit date:** 3 December 2020 to 4 December 2020

**Date of Performance Report:** 8 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.
* the provider’s response to the Site Audit report received on 21 December 2020.

# 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Overall sampled consumers considered that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. For example:

* Feedback included that staff always treat them well and that they find staff respectful.
* Consumers and representatives interviewed said that staff understand consumers’ cultural needs and adjust the way care and services are delivered in line with this.
* Consumer and representatives are satisfied consumers are supported to exercise choice and independence around making care decisions, making connections and maintaining relationships.
* Consumers sampled advised they felt comfortable and confident that their personal privacy with one consumer saying “they know I am private and independent, and they respect my privacy.”

Care planning documentation demonstrated how the service supports consumers to take risks to live the best life they can.

Staff provided examples of how consumers are supported with decision making and maintaining social interaction. Staff discussed examples of how they respect consumers’ privacy.

Staff were observed to interact with consumers in a respectful manner and their practice promoted consumer privacy.

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

## 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewing their care planning documents in detail, asking consumers/representatives about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.

Overall sampled consumers/representatives indicated that they feel like partners in the ongoing assessment and planning of their care and services. For example:

* Consumers/representatives said they had involvement in the planning of care needs, they review their care plans with staff and the majority of consumers/representatives know they can readily access their care plans.
* Consumers/representatives indicated staff listen to their views about what consumers want and need to work out what care and services are important to them. Information about advance care planning is provided and consumers/representatives say they will discuss this with staff when the time is right.
* Consumers/representatives said staff advise them of any changes to consumer needs or condition and contact them when incidents occur.

Recent staff training in relation to assessments has been implemented and the organisation now demonstrates recently strengthened assessment and planning processes to identify consumers’ needs, goals and preferences, and risks to their health and well-being. Care planning and assessment documentation for consumers sampled detailed individual needs and preferences, goals and consideration of risk. Care planning documents are regularly reviewed for effectiveness, updated when needs and circumstances changed and included advanced care planning information according to consumer/representative wishes.

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

## 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers generally through observations and representative feedback, as consumers lived with moderate or severe dementia and other neurological conditions. Consumer care plans and assessments were reviewed, and staff were asked about how they ensure the delivery of safe and effective care for consumers. The Assessment Team also examined relevant documents.

Overall sampled consumers/representatives considered that consumers receive personal care and clinical care that is safe and right for them. For example:

* Consumers/representatives interviewed said consumers are provided with care that meets their needs and preferences and have access to medical practitioners and other health professionals when they need it.
* Representatives of a consumer on a palliative care trajectory were satisfied with the care provided to the consumer.
* Consumers/representatives interviewed said they are always notified in a timely manner of any changes in the consumer’s condition.
* Consumers/representatives interviewed indicated consumer needs and preferences are effectively communicated in a timely manner.
* Consumers/representatives described their satisfaction with the actions the service has taken to minimise infection, including COVID-19.

The organisation demonstrated the delivery of safe and effective personal care and clinical care. Personal care and clinical care include the implementation of clinical care plans and a risk management framework. High prevalence and/or high impact risks and quality indicators are identified, monitored, reported at local and organisational levels and actions to minimise risk occur. Organisational policies and procedures based on best practice evidence support staff in the provision of personal care and clinical care. An organisational dementia services lead position provides specialist advice on care for consumers living with dementia. Medical practitioners and other health specialists are consulted as needed.

#### The service has an infection control policy and an outbreak management plan to support the service in practicing transmission-based precautions and preparing for a possible infection outbreak. The service also has an antimicrobial stewardship policy that guides staff in the appropriate use of antibiotics.

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

### Assessment of Standard 3

### 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

While most consumers sampled for this standard could not provide verbal feedback due to living with a diagnosis dementia or other neurological diseases, a small number of consumers and most sampled representatives considered that consumers get the services and supports for daily living that are important for health and well-being and that enable consumers to do the things they want to do. For example:

* Representatives interviewed provided examples of how their consumer is supported in daily living as preferred and to optimise independence.
* Representatives interviewed indicated satisfaction that consumers’ emotional, spiritual and psychological wellbeing were promoted. They were satisfied communication about consumer needs occurred within the organisation and with others as appropriate.
* Consumers/representatives said consumers can choose from a variety of suitable meals and snacks, the food is good and it meets consumers’ needs.

Consumers are supported by staff to maintain relationships and connections with those people who are important to them and do things of interest to them. Lifestyle and other staff demonstrate they know the consumers. Staff described ways they provide effective services and supports for consumers including meal services.

Care plans reflect the current goals, and preferences of consumers to optimise their independence, quality of life and maximise their health and wellbeing. Care planning documents reflect examples of the involvement of others to support consumers’ lifestyle and abilities during COVID restrictions.

Dining experiences are relaxed and social with meals served in the dining area or in other areas according to consumer preference.

Staff have access to appropriate equipment when it is needed and described how they report equipment faults. Maintenance staff described established systems for cleaning and servicing of equipment including emergency maintenance.

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

## 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

While consumers sampled were unable to provide verbal feedback, representatives interviewed said consumers feel they belong and are safe and comfortable in the service environment. For example:

* Representatives said staff were attentive and the service made consumers and them feel welcome.
* Representatives said the service environment is easy to understand.
* Representatives interviewed are satisfied with service cleaning and maintenance and said consumers can move freely in the safe environment with staff assistance as needed.

The service environment has clear signage and consumers were observed to move freely indoors and outdoors. The service environment was observed to be safe, clean and well maintained.

Preventative and corrective maintenance occurs in a timely manner and an effective cleaning schedule is in place.

Staff described cleaning and maintenance processes and ways they assist consumers as appropriate to access the external environment. Staff said the availability of equipment has recently increased and they described how the equipment used for moving and handling consumers is safe, cleaned regularly and sanitised.

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

## 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

Most sampled consumers considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken. For example:

* Consumers and representatives provided feedback that consumers feel safe and they are encouraged to provide feedback at any time to the service.
* Consumers and representatives sampled were generally satisfied with the action taken by management in relation to feedback, and that management practiced open disclosure processes in their response.

Staff described how they support consumers and representatives to raise any concerns and documentation reviewed identified how feedback and complaints were actioned and assisted in improving the service.

Management described how complaint data is reviewed and how action is taken to improve the quality of care and services. Complaint documentation reviewed identified prompt action taken by management.

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

## 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

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Most sampled consumers considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. For example:

* While most consumers and representatives sampled are satisfied there are sufficient staff to meet their care needs, there was some feedback in relation to number of night shift staff. Consumers said they generally do not wait long for call bell response.
* Consumers sampled expressed that staff were kind and caring and that staff were gentle when they provided care.
* Consumers and representatives sampled agreed that staff know what they are doing and have the appropriate training and qualifications to perform their role.

The roster is reviewed regularly by management to ensure skill mix and sufficiency of staff to each wing. Staff are satisfied with the number of staff rostered.

Staff interviews, observations and relevant documentation demonstrate how the service ensures the workforce is competent and qualified.

The service has documented the education support provide to staff and most consumers and staff agree that the workforce is trained and equipped to deliver the outcomes required by the standards.

Documentation and interviews demonstrate there are processes to monitor performance of workforce.

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

## 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

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

Most sampled consumers considered that the organisation is well run and that they can partner in improving the delivery of care and services. For example:

* Consumers and representatives interviewed confirmed that the service is well run. Feedback included a representative being “absolutely rapped” with the service with particular focus on how the service handled the COVID-19 outbreak.
* Consumers stated that management “do their best” and that the “place is well run”, adding that this was the case especially through the lockdown.
* Consumers interviewed explained how they are part of their care process by being consulted about their care plans and asked on a regular basis to provide feedback about the service.

Management provided a number of examples demonstrating how the governing body promotes a culture of safe, inclusive and quality care.

Documentation and management and staff practice demonstrate effective governance systems in relation to information management, continuous improvement, financial management, workforce governance and regulatory compliance.

The service has effective risk management systems and a clinical governance framework. Management and staff demonstrated an understanding of the application of relevant policies and procedures.

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

## 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.