AnglicareSA Westbourne Park

Performance Report

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**Commission ID:** 6204

**Provider name:** Anglicare SA Ltd

**Assessment Contact - Site date:** 14 December 2021

**Date of Performance Report:** 27 January 2022

# Performance report prepared by

Janine Renna, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(b) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |

# Detailed assessment

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 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
* the provider did not respond to the Assessment Contact - Site report
* performance report following a Site Audit conducted on 21 to 23 June 2021.

# 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)(b) in Standard 2 Ongoing assessment and planning with consumers as part of the Assessment Contact. All other Requirements in this Standard were not assessed; therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess the performance of the service in relation to Requirement (3)(b) in this Standard. This Requirement was found non-compliant following a Site Audit conducted on 21 June to 23 June 2021, where it was found assessment and planning processes did not identify and address two consumers’ current needs, goals and preferences. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the Assessment Contact and have recommended Requirement (3)(b) met.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find the service compliant with Requirement (3)(b) in Standard 2 Ongoing assessment and planning with consumers. I have provided reasons for my finding under the specific Requirement below.

## Assessment of Standard 2 Requirements

### 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.*

This Requirement was found non-compliant following a Site Audit conducted on 21 to 23 June 2021, as the service was unable to demonstrate assessments and care planning documentation consistently identifies and addresses two consumers’ current needs, goals and preferences. The Assessment Team’s report provided evidence of actions taken to address deficits identified, including, but not limited to:

* assessments were conducted and meetings held with one consumer to ensure their care and service needs and preferences are documented,
* a six monthly dietary review of all consumers has been implemented,
* processes have been reviewed to ensure lifestyle assessments are undertaken within two to three days following entry, and
* staff have been provided additional training.

The Assessment Team provided the following information collected through interviews and documentation which are relevant to my finding in relation to this Requirement:

* All consumers interviewed reported their needs, goals and preferences are recognised and influences the delivery of care.
* Staff demonstrated an understanding of consumers’ needs, goals and preferences, and described the processes for end of life and advance care planning. Staff described how they access consumers’ information to ensure they are kept up-to-date with changes to consumers’ delivery of care.
* Management described systems and processes to support a consumer centred assessment of needs, goals and preferences.
* Sampled care plans were individualised and reflected consumers’ needs, goals and preferences, including end of life planning. Advance care directives were documented in multiple systems and available in various formats. Staff interviewed demonstrated an awareness of how to access consumers’ information.
* For two consumers nearing end of life, documentation demonstrated care and services were delivered in line with their preferences.
* The service has policies and procedures to guide staff practice in relation to advanced health directives.

Based on the information summarised above, I find the service compliant with Requirement (2)(b) in Standard 2 Ongoing assessment and planning with consumers.

# 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)(a) in Standard 3 Personal care and clinical care as part of the Assessment Contact. All other Requirements in this Standard were not assessed; therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess the performance of the service in relation to Requirement (3)(a) in this Standard. This Requirement was found non-compliant following a Site Audit conducted on 21 June to 23 June 2021, where it was found the service did not demonstrate that each consumer got safe and effective personal and clinical care that was tailored to their needs and optimised their health and well-being, specifically in relation to wound care, mobility and continence care.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find the service compliant with Requirement (3)(a) in Standard 3 Personal care and clinical care. I have provided reasons for my finding under the specific Requirement below.

### 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.*

This Requirement was found non-compliant following a Site Audit conducted on 21 June 2021 to 23 June 2021. While it was found clinical care in relation to two consumers’ pain and wounds were managed in line with best practice, the service was unable to demonstrate personal and clinical care provided to one consumer was tailored to their needs and preferences, specifically in relation to mobility, continence and wound care. The Assessment Team’s report provided evidence of actions taken to address deficits identified, including, but not limited to:

* implementation of changes to manual handling competency training,
* review and update of wound management procedures and checklists to include management, monitoring, documenting of bruises, and
* the affected consumers’ care plan has been updated to reflect their mobility and continence needs and preferences.

The Assessment Team provided the following information collected through interviews and documentation which are relevant to my finding in relation to this Requirement:

* Consumers and representatives said they were satisfied with the personal and clinical care consumers receive and reported staff are aware of their needs and preferences.
* Staff reported they refer to care plans, handover sheets and face-to-face handover to assist them in providing safe and effective care in line with consumers’ needs and preferences. Staff described individualised personal and clinical care needs of sampled consumers in line with their care plans.
* Management reported evidence based and best practice clinical assessment tools are used for assessment of pain, depression and dementia, and identification of risks associated with pressure injuries and falls. Staff interviewed were familiar with these clinical assessment tools.
* Documentation demonstrated best practice care delivery in relation to restrictive practices, skin integrity and pain.
* The service has policies and procedures to guide staff in relation to pain management, restrictive practices, wound management and skin integrity, and falls prevention and management.

Based on the information summarised above, I find the service compliant with Requirement (3)(a) in Standard 3 Personal care and clinical care.

# 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.