Annie Green Court

Performance Report

47 Redfern Street   
Redfern NSW 2016  
Phone number: 02 9305 9100

**Commission ID:** 1004

**Provider name:** Mission Australia

**Assessment Contact - Site date:** 7 January 2021

**Date of Performance Report:** 18 March 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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
* the provider’s response to the Assessment Contact - Site report received 2 February 2021.

# STANDARD 1 COMPLIANT/NON-COMPLIANT

# STANDARD 2 COMPLIANT/NON-COMPLIANT

# 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

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 – their care plans and assessments were reviewed, and staff were asked about how they identify deterioration or change in a consumer's mental health, cognition or physical function, capacity or condition. The Assessment Team also examined relevant documents and considered how the service minimises infection related risks.

The service generally demonstrated the effective monitoring of deterioration or change in consumer's mental health while respecting their autonomy and choices.

Two specific requirements of this Standard were assessed and I have found them both to be compliant. As not all requirements were assessed an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### 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.*

The Assessment Team provided evidence that the service does monitor changes in physical function, capacity and condition and takes suitable actions when changes occur but found that changes in consumers mental health is not always recognised or responded to when a consumer’s mental health status changes or deteriorates.

In its response the Approved Provider submitted information about the nature of its consumers and the challenges faced. It provided clarity on its management of the consumers identified and how it respects their autonomy and choices and submitted details of the care and services provided.

While the service identified some areas for improvement, I consider it could demonstrate, in the circumstances identified, that it adequately identified and responded to the deterioration or change of the consumer’s mental health.

I find this requirement Compliant.

### 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.*

I find this requirement Compliant. ARD 4 COMPLIANT/NON-STANDARD 5 COMPLIANT/NON-COMPLIANT

# STANDARD 7 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, rosters.

While some consumers spoke about the numbers of staff, the service was able to demonstrate that the number and mix of staff was sufficient.

One (1) specific requirement of this Standard were assessed and I have found it to be compliant. As not all requirements were assessed an overall rating for the Quality Standard is not provided.

## 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.*

The Assessment Team found that there is not always an adequate number of staff to deliver and manage safe and quality care and services and identified that some consumers expressed concern about the number of staff and that some staff felt there was not always enough time to attend to all tasks.

In its response the Approved Provider acknowledged some areas for improvement, including in relation to the provision of activities on the day of the Assessment Contact but provided information on how it manages staffing levels and adjusts them as required to manage care tasks, and how it provides care and services. It gave clarity on some aspects of the information provided, including coverage of shifts. I consider that the service could demonstrate that its 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.

I find this requirement Compliant.

# 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.