Arcare Parkinson

Performance Report

20 Bufalino Street
Parkinson QLD 4115
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**Commission ID:** 5417

**Provider name:** Arcare Pty Ltd

**Site Audit date:** 6 July 2021 to 8 July 2021

**Date of Performance Report:** 5 August 2021

# 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 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

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.

The service demonstrated that consumers are treated with dignity and respect, and that their identity, cultural background and diversity is acknowledged and valued. Care staff consistently demonstrated they are familiar with consumer backgrounds and gave examples of how those influence the care they provide on a day-to-day basis.

The service demonstrated the provision of culturally safe care and services. For the consumers sampled, staff described how individual consumer’s culture and background influences how they deliver care and services.

The service demonstrated that consumers are supported to maintain their independence, make connections, and make decisions of their own choosing. Consumers/representatives described how consumers are supported to maintain relationships and connections with important others including those involved in their care. Staff demonstrated knowledge, awareness and understanding of sampled consumer choices and preferences and described how each consumer is supported to make informed decisions about their care and services.

The service was able to demonstrate how it supports consumers to exercise choice and live their life the way they wish to, even when that involves risks. Clinical staff discuss any risks identified throughout the assessment process to provide the consumer opportunities to exercise choice and make informed decisions regarding their care and services. The service demonstrated information is provided to consumers in a way that enables them to exercise informed choice.

Consumers/representatives sampled confirmed that consumer privacy is respected.

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

#### The service demonstrated assessment and planning, including risks to consumer’s health and wellbeing, informs the delivery of safe and effective care and services. Consumers/representatives sampled expressed satisfaction with the assessment and care planning processes and the care and services received. Staff demonstrated an understanding of risk reduction strategies for the consumers sampled.

#### The service demonstrated assessment and planning identifies and addresses the consumer’s goals and preferences including advanced care and End of life (EOL) planning. Consumers/representatives sampled, described what was important to them in terms of how their care is delivered, including how the service understood their care needs, goals and preferences.

The service demonstrated assessment and planning is based on ongoing partnership with the consumer and others which the consumer wishes to include and involves other providers of care when appropriate. Consumers/representatives reported they were involved in assessment and planning on an ongoing basis. The Assessment Team observed staff interacting with consumers to assist them to choose things that they wanted to eat or activities they wanted to do,

The service demonstrated the outcomes of assessment and planning are effectively communicated and documented in a care plan readily available to the consumer/representative. And also demonstrated care and services are regularly reviewed for effectiveness, and when circumstances change or when incidents impact the consumer. Consumers and representatives confirmed the consumer’s care and services are regularly reviewed when the consumers circumstances have changed or incidents impact on the needs, goals, or preferences of the consumers.

The service has policies and procedures to guide and support evaluation of care and care plan review completion.

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

Consumers received personal care and clinical care that was safe and right for them, based on best practice guidelines and tailored to the needs of the consumer. Consumers had access to a Medical officer and other health professionals when they need it. Consumers confirmed staff informed them about their care and provided personalised care to meet their needs and preferences.

The service demonstrated each consumer gets safe and effective personal and clinical care that is best practice, tailored to their needs and optimises their health and wellbeing. Staff demonstrated individual knowledge of consumers’ personal and clinical care needs and how they meet these.

The service demonstrated it effectively manages high prevalence risks associated with the care of each consumer. Staff were aware of individual consumer’s risks and the current risk management strategies.

The service demonstrated the needs, goals and preferences for consumers nearing end of life are recognised and addressed and their comfort maximised, and dignity preserved. Registered Nurses and care staff interviewed described how they support consumers nearing end of life and gave examples of interventions such as mouth and eye care, repositioning and pain management to maximise comfort and dignity.

The service demonstrated it recognises and responds to deterioration or change in the clinical, cognitive or physical functions of consumers, in a timely manner. Consumers/representatives said staff respond promptly to any changes in their condition.

The service demonstrated information about the consumer’s condition, needs and preferences is documented and communicated within the organisation and with others where responsibilities are shared. And also demonstrated it makes timely and appropriate referrals to individuals and other providers of healthcare services.

The service demonstrated it has minimised the risk of infection through the implementation of standard and transmission-based precautions and uses antimicrobials appropriately so as to minimise antibiotic resistance. The organisation has written policies and procedures relating to antimicrobial stewardship, infection control management and an emergency management plan for COVID-19.

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

### 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 service demonstrated that consumers receive services and supports for daily living that are tailored to their needs, goals and preferences enabling them to live a life of their choosing, optimising their independence, health, well-being and quality of life. Consumers/representatives sampled said the service’s lifestyle program supported their lifestyle needs and consumers are encouraged to be as independent as possible.

The service demonstrated it provides services and supports for consumers to promote their emotional, spiritual and psychological well-being. Consumers/representatives sampled generally reported staff are kind and caring and said there is always someone they can talk to, especially if they are feeling ‘low’ or spiritually challenged.

The service demonstrates that consumers are supported to participate in the community within and outside the service, have social and personal relationships and engage in personal interests. Consumers described how they participate in their community within and outside the service environment. Consumers described how they keep in touch regularly with people important to them via telephone and electronic tablets. Representatives said they feel welcomed at the service and staff are available to discuss any issues or concerns. Staff interviewed were able to describe how they support consumers to socialise or maintain personal relationships and are aware of people who are important to individual consumers.

The service demonstrates that information about consumer’s condition, needs and preferences are communicated effectively within the organisation and with others where responsibility for care is shared.

The service demonstrated that where meals are provided, they are varied and of suitable quality and quantity. Consumers interviewed overwhelming confirmed they enjoy the meals offered at the service. They said they are satisfied with the quality and quantity of meals, they are provided with alternative meal options and can request more food when required.

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

Overall sampled consumers considered that they feel they belong in the service and feel safe and comfortable in the service environment.

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

The service was observed to be safe, comfortable, clean and well maintained, and consumers/representatives expressed satisfaction with the cleanliness of the service. Overall consumers reported they find the environment to be clean and maintained and they feel safe at the service. Consumers reported they can move freely about the service both inside and outside and feel safe in doing so. The Assessment Team reviewed the service maintenance logs that demonstrated maintenance issues are addressed in a timely manner.

Consumers/representatives sampled, said the furniture, fittings and equipment are well maintained, clean, safe and suitable for their use. Consumers confirmed staff are competent in the use of equipment and said they feel safe when staff use the equipment to provide care and services.

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

Overall sampled consumers/representatives considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

The service demonstrated consumers and their representatives are encouraged and supported to provide feedback and make complaints.

The service demonstrates consumers are made aware of and have access to internal and external mechanisms to raise and resolve complaints. The Assessment Team observed feedback forms on display and accessible throughout the service alongside locked boxes in which to submit completed forms. Staff demonstrated an understanding of the complaints management system and could describe how they respond to consumer/representative feedback, including the escalation of concerns to registered staff and management.

The service demonstrates appropriate action is taken in response to complaints and an open disclosure process is employed when things go wrong. Consumers/representatives advised that in the event they have provided feedback or raised a concern, management has responded promptly, there has been positive and transparent communication during the process, and staff or management have apologised appropriately.

The service demonstrates feedback and complaints are used to improve the quality of care and services provided.

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

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

#### The number and mix of members of the workforce is planned to enable the delivery and management of safe and quality care and services. Overall sampled consumers/representatives reported there are enough staff to deliver safe and quality care meeting consumer needs and preferences. Staff are generally satisfied with the service’s staffing model and management takes appropriate action to address staff concerns.

#### Interactions between staff and consumers were observed to be are kind, caring and respectful. Consumers/representatives were satisfied with workforce interactions.

Members of the workforce have the qualifications applicable to their roles. They are competent and have the knowledge required to effectively perform their roles. Consumers/representatives reported they are comfortable with the knowledge and competence of the workforce.

The service demonstrates the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. Management regularly assesses, monitors and reviews the performance of their workforce. Incidents or complaints prompt performance reviews and performance management practices.

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

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

Consumers and representatives said they are engaged in the development of care and services and provided opportunities to have ongoing input into the delivery of care and services in a variety of ways. Management is actively engaged with consumers who wish to discuss their delivery of care and services or provide feedback or suggestions for change.

The organisation demonstrated that the governing body promotes and is accountable for a culture of safe, inclusive and quality care and services. Management have established effective organisation wide governance systems. Staff said they have access to policies and procedures on the organisation’s intranet and attend monthly staff meetings and workshops.

Effective risk management systems have been developed by the organisation and embedded within the service. The service provides clinical care and has an embedded clinical governance framework.

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.*
4. *managing and preventing incidents, including the use of an incident management system.*

### 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.