Aruma Lodge

Performance Report

229 Beryl Street   
BROKEN HILL NSW 2880  
Phone number: 08 8080 1630

**Commission ID:** 0028

**Provider name:** Southern Cross Care (Broken Hill) Ltd

**Site Audit date:** 7 January 2020 to 9 January 2020

# 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 28 January 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

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

The Assessment Team found that all consumers confirmed 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 following examples were provided by consumers and representatives during interviews with the Assessment Team:

* In relation to staff, consumers said, “they are wonderful”, “the staff here are lovely” and “they treat me well”. Representatives said they see staff treating their family member with respect and kindness.
* Consumers described different activities which maintain their independence in ways they feel are important. All consumers said they feel they are free to do as they choose in the facility.
* Consumers and representatives confirmed their privacy is maintained. Consumers said they have places they can go for time to themselves and staff respect this.
* Consumers and representatives said staff and the management team are approachable; they listen to what is being said and do what they can to accommodate requests.

Initial and ongoing assessment processes assist the service to identify each consumer’s goals and what is important to them. Individualised care plans are developed from information gathered to assist staff to deliver care and services in line with consumers’ preferences.

Consumers described how staff and management respect them as individuals and how they are supported to exercise choice and independence, including through involvement in discussions to make decisions about the care and services they receive. Additionally, consumers’ choice of who they wish to be involved in decisions about their care and services is respected by staff.

Consumers said the service encourages them to feel as though they are in control of their lives. There are processes to support consumers to take risks to enable them to live their best life, and include a risk assessment process which is undertaken in consultation with consumers.

All consumer and representatives feel the service respects their privacy and personal information is kept confidential. Staff provided examples of how they respect and maintain consumers’ privacy.

## 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

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

The Assessment Team found that overall consumers and representatives confirmed consumers feel like partners in the ongoing assessment and planning of their care and services. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Consumers and representatives said they are consulted through monthly discussions and consumers’ needs and preferences are listened to and acted upon.
* Consumers and representatives said they have access care plans by request. All were aware of how to request these documents.
* All consumers confirmed their choices and decisions are respected by staff and management and they are provided with the services they choose.

The organisation has initial and ongoing assessment processes which are used to develop effective, personalised care plans which are readily available to consumers, representatives and staff. Staff described how they involve consumers and representatives in assessment, care planning and review processes. Consumers and representatives confirmed their involvement in these processes.

The Assessment Team found the organisation has monitoring processes in relation to Standard 2 to ensure initial and ongoing assessment and planning is undertaken and has a focus on optimising health and well-being in accordance with consumers’ needs, goals and preferences.

## 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

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

The Assessment Team found consumers and representatives confirmed consumers receive personal and clinical care that is safe and right for them. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Consumers and representatives said they are satisfied with personal and clinical care provided to consumers. Consumers described how their individual care is provided and confirmed this is right for them.
* Consumers and representatives confirmed consumers are able to access Medical professionals and other allied health specialists to address their care needs.

A range of assessments, including risk assessments, are conducted for consumers on entry, on a scheduled basis and as required. Care plans are developed and/or updated from information gathered which includes each consumer’s individual personal and clinical care needs, preferences and requirements.

The organisation has processes to identify, manage and monitor high impact and high prevalence risks. Staff interviewed were aware of high impact and high prevalence risks and described strategies they implement to minimise the possibility or impact of these risks for individual consumers.

The organisation has processes to ensure the needs, goals and preferences of consumers ending the end of life are recognised and addressed with their comfort maximised and dignity preserved.

The Assessment Team found the organisation has monitoring processes in relation to Standard 3 to ensure delivery of safe and effective personal and clinical in accordance with consumers’ needs, goals and preferences to optimise health and well-being.

### 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 Quality Standard is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

The Assessment Team found consumers confirmed they get services and supports for daily living that are important to them for their health and well-being and that enable them to do the things they want to do. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Consumers said staff support them to do the things they like doing and provided examples of how the activities calendar is changed to include things of interest to different people.
* Consumers said they are able to maintain relationships with people they care about, including connecting with family and friends outside the facility and developing friendships with others in the facility.
* The majority of consumers said they like the food. Two consumers were not satisfied with aspects of meals, such as presentation and one consumer said the food is not always to their likin. However, both consumers confirmed they are able to select other items from the menu or ask for something else.
* Consumers were complimentary of activities provided, both within the facility, and activities they are taken to in the community.

Consultation and initial and ongoing assessment processes assist to identify each consumer’s goals related to their physical health, social relationships and psychological, spiritual and environmental aspects of care. Individualised care plans are developed from information gathered and are regularly reviewed to ensure currency.

The lifestyle program takes into consideration what is important to each consumer. Activity plans and program are changed to suit consumer preferences and in response to consumer feedback. Consumers are provided with emotional and spiritual supports and are connected to other services or organisations where the need is recognised.

The service offers a varied menu and alternative options are available. Consumers provide feedback in relation to the menu through meeting forums and feedback processes.

The Assessment Team found the organisation has monitoring processes in relation to Standard 4 to ensure safe and effective services and supports daily living are in place that optimise consumers’ independence, health, well-being and quality of life.

## 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 services 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

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

The Assessment Team found the majority of consumers confirmed they feel they belong in the service and feel safe in the and comfortable in the service environment. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Consumers confirmed feel safe in the facility. One representative said their family member does not always feel safe due to wandering behaviour of another consumer, however, environmental solutions have been offered to the consumer.
* All consumers said they feel at home in the facility. They confirmed they are able to decorate their rooms as they wish and there are sufficient common areas within the facility they can go.
* Consumers and representatives said the facility, the furniture and the equipment are well maintained and kept clean.
* Consumers said they can leave the facility for external outings when they choose.

The Assessment Team observed the service environment to be welcoming, comfortable and clean with appropriate furniture and fittings. Consumers said they have access to indoor and outdoor areas of the service and are able to move about freely.

The Assessment Team found the organisation has monitoring processes in relation to Standard 5 to ensure a safe and comfortable service environment is maintained that promotes consumers’ independence, function and enjoyment.

## 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

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

The Assessment Team found all consumers and representatives confirmed they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Consumers and representatives said staff and management are approachable and always welcoming of feedback.
* Representatives said they are able to go to the manager’s office at any time to discuss their concerns. Consumers said the manager is available to discuss issues with them and walks through the home.
* Consumers and representatives who had provided feedback said their concerns were addressed promptly, staff talked them through the situation and resolutions met their expectations.
* Consumers and representatives said they feel staff and management are very accessible and listen to what they have to say.

The organisation is supported by an overarching feedback and complaints framework which includes an open disclosure approach to resolving complaints. Complaints data is documented, analysed, trended and reported through various meetings, including at Board level. Staff and management described examples of consumer feedback which had resulted in improvements for consumers and the organisation.

Information in relation to internal and external complaints avenues and advocacy is provided to consumers on entry and information is displayed and accessible at the service.

The Assessment Team found the organisation has monitoring processes in relation to Standard 6 to ensure feedback from consumers and others is sought and used to inform continuous improvements for individual consumers and the organisation.

## 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

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

The Assessment Team found the majority consumers and representatives confirmed consumers get quality care and services when they need them and from people who are knowledgeable, capable and caring. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* Consumers and representatives said staff are caring and respectful.
* Consumers and representatives said they feel staff have the knowledge to undertake their roles.
* The majority of consumers and representatives were satisfied with the responsiveness of staff. Most said staff are prompt and are always there to help when they need it. One consumer was not satisfied with call bell response times.

All consumers said staff treat them as individuals and they know them as people. The Assessment Team observed staff engaging with consumers on a personal level, using consumers’ names, talking about their family and their history and discussing topics of interest to the consumers.

The organisation demonstrated the workforce is recruited to specific roles and trained, equipped and supported to undertake those roles. Staff receive training on commencement and on an ongoing basis. There is an annual mandatory training program in place staff attendance is monitored.

The organisation has a staff and management performance framework which includes policies and processes for all workforce management requirements under the Quality Standards.

The Assessment Team found the organisation has monitoring processes in relation to Standard 7 to ensure the workforce is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## 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

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

The Assessment Team found that all consumers and representatives confirmed the organisation is well run and they can partner in improving the delivery of care and services. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* All consumers and representatives confirmed they are able to access management and speak to the manager, when they need to.
* Consumers and representatives said they are able to provide suggestions for improvement to staff and management.
* One consumer confirmed organisational management attend the facility at times and are approachable.

The organisation has governance framework which supports all aspects of the organisation, including information management, continuous improvement, financial, workforce and clinical governance, regulatory compliance and feedback and complaints. The Governance framework is overseen by the Board and various committees.

The organisation demonstrated that a clinical governance framework is in place, including antimicrobial stewardship and open disclosure, and there are processes to minimise the use of restraint.

Consumers have been provided the Charter of Aged Care Rights and staff have been provided with information relating the Aged Care Quality Standards.

The Assessment Team found the organisation has monitoring processes in relation to Standard 8 to ensure the organisation’s governing body is accountable for the delivery of safe and quality care and services.

## 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.