Blue CareHervey Bay Masters Lodge

Performance Report

33 Jensen Drive  
URRAWEEN QLD 4655

Phone number: 07 3253 4224

**Commission ID:** 5244

**Provider name:** The Uniting Church in Australia Property Trust (Q.)

**Site Audit date:** 10 December 2020 to 12 December 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.

# 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 confirmed 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:

* Consumers interviewed confirmed that they are treated with respect and a small number of consumers who had concerns with staff attitude in the past said that this had improved since they reported it to management.
* Consumers interviewed confirmed that they are encouraged to do things for themselves and that staff know what is important to them.
* Consumers interviewed confirmed that their personal privacy is respected.

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.

* Feedback from staff interviews confirmed staff’s knowledge about what is important to each of the sampled consumers and could describe how they ensure that consumer preferences are known and respected. Care documentation outlined the consumer’s background and important relationships and provided detailed guidance regarding their individual preferences in relation to care and services.

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

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**

Overall sampled consumers confirmed that they feel like partners in the ongoing assessment and planning of their care and services.

For example:

* Consumers interviewed confirmed that they are involved in care planning to the degree that they wish.
* Consumers interviewed confirmed that they are informed about the outcomes of assessment and planning have ready access to their care and services plan if they wish.

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 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.

* Care planning documents identified consumers’ needs, goals and preferences and staff demonstrated an awareness of what is important to consumers in regard to their provision of care and services. Consumers’ involvement was evident in their documentation as was the input from representatives and other professionals such as medical officers and allied health professionals. Information in care plans was current, relevant and sufficient to direct staff.

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**

Consumer outcome

Overall sampled consumers considered that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers interviewed confirmed that they get the care they need’ staff know their needs and provide appropriate care.
* Consumers interviewed confirmed that they have access to a doctor or other health professional when they need it.
* Consumers and representatives confirmed they have been involved in discussions with staff about end of life and advance care planning.

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 ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

* The service is guided by organisational policies and guidelines in relation to clinical and personal care as well as care pathways inclusive of pain care, pain and behaviour, skin integrity, pressure injury prevention and management. Organisational Advisory Groups are available for advice and support in relation to clinical care such as falls prevention, medication, nutrition, skin integrity, specialised complex and palliative care. Staff review consumers’ care plans regularly and as required when consumers’ experience a deterioration, change in care or clinical incident.
* Restraint is utilised following discussions with doctors, provision of information to consumers and their representative and as a last resort when other strategies are not successful. Restraint is reviewed regularly and signed authorities are monitored.

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**

Overall sampled consumers confirmed that they 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.

For example:

* Consumers interviewed confirmed that they are supported by the service to do the things they like to do. They advised they have choices when it comes to meals, activities, going out and where to spend their days. They said they are supported to attend outings and activities according to their preference.
* Consumers interviewed confirmed that they are supported to keep in touch with people who are important to them by means of receiving visitors at the service, going out on social leave, and through contact by telephone or computer.
* Consumers interviewed advised that they like the food and they have input into the menu. They said their feedback leads to improvements in meals and variety.

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.

* Review of the activity and outings calendar and discussion with staff demonstrated a wide variety of activities are offered to meet the different needs and preferences of consumers. For consumers who require or would like additional emotional or spiritual support, referrals to appropriate services are made and visits are organised. Regular inter-denominational church services are held at the service.

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 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**

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

For example:

* Consumers interviewed confirmed they feel safe and find the environment comfortable.
* Consumers interviewed confirmed that they feel at home, providing examples of how their visitors feel welcome and what makes the service nice to live in.
* Consumers interviewed confirmed that the service is clean and well maintained.
* Consumers said they feel free to go outside when they want and can go on outings and social leave.

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.

* The environment was observed to be welcoming, clean, well-maintained and easy to move around, inside and outside. Consumers reside in single rooms with ensuite; a secure wing provides a safe environment for consumers who are confused and at risk of harm if they leave unattended.
* Equipment was observed to be clean, well maintained and appropriate to consumer needs.
* Maintenance staff monitor the environment to ensure it is safe and well maintained. Any maintenance issues are reported and actioned within a timely manner when possible. If they cannot be rectified, there is an escalation process to head office and other management strategies are implemented until the issue is rectified.

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 considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

For example:

* Consumers interviewed felt they could make complaints and felt safe to do so.
* Consumers interviewed felt that changes were made at the service in response to complaints and feedback.

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.

* Consumers sampled who had raised complaints or concerns said their feedback was acknowledged and changes were implemented in response; they said management and relevant staff had apologised and that care/services had improved following their raising of the issue. The Assessment Team also reviewed the feedback and complaints register and noted that consumer suggestions and complaints are recorded along with actions taken to address the complaint or implement the suggestion where relevant and results are documented including evaluation of the effectiveness of actions taken.

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 indicated that they get quality care and services when they need them and from people who are knowledgeable, capable and caring.

For example:

* Consumers interviewed confirmed that staff are kind and caring.
* Consumers interviewed confirmed that staff know what they are doing.
* Consumers interviewed confirmed that they think there are adequate staff.

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.

* Consumers interviewed said most staff are wonderful and gave examples of staff who do special things for them, for example, decorations to mark their birthday and special events to assist them to celebrate anniversaries. Staff described how they receive education and new staff are buddied with experienced staff until they are confident. Staff rosters show that unplanned leave is generally replaced; call bell response times are monitored and opportunities for staff development are provided, including orientation and annual update training in mandatory topics and staff are encouraged to further their studies and improve their skills.

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 indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* Consumers interviewed confirmed that the service is well run.
* Consumers could provide examples of how they are involved in the development, delivery and evaluation of care and services.

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).

* The organisation demonstrated that they involve consumers in the delivery and evaluation of care and services, providing examples of how consumers are engaged and consulted in the planning of changes as well as on a day to day basis.
* The Board meets regularly, sets clear expectations for the organisation and regularly reviews risks from an organisational and consumer perspective.
* There are organisational governance systems to support effective information management, the workforce, compliance and regulation, complaints management and open disclosure and clinical care. The clinical governance framework addresses anti-microbial stewardship, best practice and minimising the use of restraint. Staff interviewed understood these concepts and could explain how they were applied in practice.

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;

supporting consumers to live the best life they can.

# 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.