BlueCross Hansworth

Performance Report

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**Commission ID:** 3679

**Provider name:** Third Age Australia Pty Ltd

**Site Audit date:** 30 June 2021 to 2 July 2021

**Date of Performance Report:** 3 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

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 other relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Overall, consumers consider 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 said that they are treated with dignity and respect, and that their identity, culture and diversity is valued.
* Consumers expressed satisfaction that staff support them to take risks and enable them to live the best life they can.
* Consumers expressed satisfaction their privacy is respected, with personal information being kept confidential and indicated that their privacy was respected by staff when providing care.

Consumers are provided with information that is current, accurate and timely enabling them to exercise choice, where possible. Information around menu and lifestyle activities is communicated in a clear way to consumers.

Care planning documentation reviewed reflected consumers’ cultural needs and their individual preferences.

Staff spoke of individual consumer’s choices and maintaining relationships inside and outside the service and of its importance to consumers.

Staff were observed treating consumers with dignity and respect and demonstrated giving individual consumers choices when providing assistance and care during meal service and lifestyle activities.

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

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.

Overall, consumers consider they are partners in the ongoing assessment and planning of their care and services.

For example:

* Overall, consumers and representatives are satisfied that assessment and care planning identifies current risks, needs, goals and preferences and consumers receive the care they need.
* Though not all consumers currently have an advance care plan, care planning is occurring according to consumers’ wishes.
* Consumers and representatives confirmed their satisfaction with their involvement in care planning as well as others the consumer wishes to include. Representatives said informal approaches can be made to staff at any time and they are satisfied with staff communication.
* Consumers and representatives interviewed are satisfied that consumer care is reviewed regularly and following a change in circumstances or after an incident such as a fall.

Care planning documentation provides evidence of initial and ongoing assessment with individualised plans identifying risks to health and well-being. End of life wishes are reviewed regularly and when a change or deterioration in condition is identified. Care planning involves input from other organisations such as wound, medical and dementia specialists.

Management described how initial and ongoing assessment, in partnership with consumers and representatives, informs care plan development and reviews. Clinical staff identify risk, and risk assessments are completed where consumers express their desire to do things such as being undisturbed at night or mobilise independently in the community. Staff described what is important to consumers in terms of how their care is delivered. Care staff described how they escalate concerns to clinical staff, and document any changes in a consumer’s condition.

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

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 other relevant documents.

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

* Overall, consumers expressed satisfaction with the safe and effective personal and clinical care they receive and their satisfaction with pain and wound management.
* Consumers and representatives are satisfied with the comfort and care they receive as they approach the end of life and reported they are provided with support that is required.
* Consumers expressed satisfaction with access and referral to their medical practitioner and other health professionals as needed.

The service demonstrated appropriate referral to, assessment by and collaboration with specialists to ensure care is safe, effective and tailored to consumers’ individual needs. The use of chemical restraint is effectively assessed, monitored and reviewed according to regulatory requirements in consultation with consumers and/or representatives.

Consumers who may experience high impact and high prevalence risks such as weight loss and falls are identified and assessed. Strategies to reduce risk to the consumer are initiated and reviewed.

Information about each consumer’s condition, needs and preferences is documented in the care plan and progress notes and communicated within the service. Information is shared with external services as required.

Clinical and care staff demonstrated knowledge and understanding of personal and clinical care needs both routinely and at the end of life in line with consumer wishes.

Management support staff through provision of training in relevant areas and with personal protective equipment to reduce cross infection. The medication advisory committee meeting agenda indicates a standing item related to antimicrobial stewardship where a pharmacy report is provided on infections and antibiotic usage.

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

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.

Overall, consumers considered that they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do.

For example:

* Consumers said staff are supportive when they are feeling low.
* Consumers described how they can do things of interest either within or outside of the service and how the service supports them to maintain family and social connections.
* Consumers said that family and friends are always made to feel welcome when they visit and are treated respectfully.
* Overall, consumers expressed satisfaction with the quantity, quality and variety of food provided and indicated that they can provide feedback.

Care planning documents contain clear and up to date information about consumer needs and preferences for services and supports for daily living.

Care planning documents show timely referral and support provided by individuals and organisations for consumer participation and wellbeing. Lifestyle staff described links with a range of community groups to enhance consumer experiences.

Staff described how they access the care plans to understand individual consumer needs and preferences and are informed when needs change. Care staff are also given printed handover sheets at the commencement of their shift.

Consumers were observed using a variety of lifestyle equipment and resources throughout the service that were clean and in good repair.

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

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.

Overall, consumers considered that they have a sense of belonging, and feel safe and comfortable in the service environment.

For example:

* Consumers confirmed they feel comfortable and safe and the service is well equipped to promote independence and enjoyment.
* Consumers advised that the internal and external environment is pleasant, and they can personalise their own living areas. Consumers’ relatives and friends are made to feel welcome.
* Consumers noted that bedrooms and communal areas are kept clean and maintenance occurs promptly when requested.

The Assessment Team found the service environment to be welcoming, clean and well maintained. The service offers communal areas of various sizes, both inside and outside.

The service has three levels and has communal spaces on each floor that optimise consumer engagement and interaction. The service is clean and uncluttered enabling free movement for the consumers. There is a main dining room on the same level as the entrance, as well as a smaller dining area in the memory support unit.

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

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.

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 and representatives interviewed advised they feel safe raising concerns directly with staff at the service.
* Consumers and representatives are satisfied the service takes prompt and appropriate action in response to complaints and an open disclosure process is used.
* Most consumers and representatives advised they are not aware of advocacy services or external avenues for raising complaints. However, they stated this is not an issue as they feel comfortable talking to staff about any concerns. Information regarding advocates, language services and other methods of raising a complaint are accessible at the service.

The service documents all complaints and feedback on an electronic register, which is visible by executive committees and the board.

Complaints and feedback are reviewed at least monthly. Where trends are noted, action is taken to improve the overall quality of care and services provided at the facility.

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

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.

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

For example:

* Consumer and representative feedback regarding sufficiency of staff was mixed, particularly in relation to vacant shifts, use of agency staff and call bell response times. While some were satisfied with staffing, others expressed that they felt that the service is understaffed and it is affecting the care provided to them.
* Consumers and representatives advised that most staff are kind, caring and respectful when providing care. The Assessment Team observed positive staff interactions with consumers.
* Consumers and representatives expressed satisfaction that staff are trained and supported to provide care to the consumer. Staff are satisfied with the quality of training provided.

Management described how the service monitors staff qualifications, registrations and police checks. Staff cannot be rostered on if their police check is not current.

The service demonstrated it has a system in place for regular assessment, monitoring and review of the performance of each member of the workforce. Staff confirmed they have a regular staff appraisal in addition to receiving ongoing informal feedback from their supervisor and/or management.

The Assessment Team noted the mixed consumer and representative feedback regarding sufficiency of staff. Consumers who were able to voice their needs and/or attend to their own personal care stated that staffing issues were not impacting the quality of their care. Staff confirmed that, while they are rushed, they have time to complete required tasks. Management explained the flexibility in their current roster and described actions being taken to recruit more staff and reduce call waiting times for consumers.

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

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.

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

For example:

* Overall, consumers and representatives advised that the service is well run.
* Consumers and representatives described the various ways they are able to make suggestions and be engaged in the delivery of care at the service. This included resident advisory committees, resident/relative meetings and food focus groups.

The service demonstrated the organisational governance systems in place and how their application results in best outcomes for consumers.

The organisation’s risk management framework ensures risks are reported, escalated and reviewed by management at service level and by the organisation’s executive, including the Board.

The organisation’s clinical governance framework includes monitoring and review of antimicrobial use, the use of restraint and open disclosure.

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.*

### 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.