Brentwood Residential Aged Care Facility

Performance Report

28 Glebe Street   
PARRAMATTA NSW 2150  
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**Commission ID:** 2600

**Provider name:** Allity Pty Ltd

**Assessment Contact - Site date:** 14 April 2021 to 15 April 2021

**Date of Performance Report:** 19 May 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** |  |
| Requirement 1(3)(a) | Compliant |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(a) | Non-compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others;
* the provider’s response to the Assessment Contact - Site report received 7 May 2021.

# STANDARD 1 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 relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

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.

For example:

* All consumers interviewed advised staff treat them with dignity and respect and respect their identity, culture and diversity.
* All consumers interviewed confirmed that their personal privacy was respected by the staff.

Staff interviewed were respectful when discussing consumers and demonstrated a good knowledge of the consumers’ background and preferences. They were able to outline the various habits some consumers have and how they accommodate those consumers’ needs. The Assessment Team also observed staff to interact with consumers in a respectful way, although they observed instances where staff members were observed to leave the door open when a consumer is in the bathroom.

The service has also demonstrated that they have continuous improvement initiatives in progress to improve their delivery of privacy and dignity to consumers.

## Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## 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.*

# STANDARD 3 NON-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 and services 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.

Most sampled consumers did consider 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 and have access to a medical officer or other health professional when they need it.

The Assessment Team also reviewed consumers’ care and services and noted they are generally reviewed and updated regularly including when there is a change to a consumer’s care needs. However, the service demonstrated gaps in care related to falls, behaviour, and skin integrity management.

The Assessment team did not assess all requirements for this Quality Standard. However, a decision of Non-compliant in one or more requirements results in a decision of Non-Compliant for the Quality Standard.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Non-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.*

The Assessment Team interviewed a sample of consumers and/or representatives who said their consumer receives the care they need and this care is in line with their preference.

The Assessment Team reviewed a sample of care documentation and identified several consumers receive care that is best practice, tailored to their needs, and optimises their health and wellbeing. However, the team identified two consumers whose care did not evidence monitoring or review that ensures their health and wellbeing is optimised.

One consumer of concern has behaviours of concern that involves ‘placing’ themselves on the floor multiple times a day, and the service was unable to demonstrate that this consumer is safeguarded from potential injury. The team observed the impact of this consumer’s behaviour onsite and noticed the consumer was bumping their head on the concrete multiple times while on the floor, was observed on one occasion to be struggling to get off the floor, and had grazes on their cheek; however, the service was unable to demonstrate they have undertaken risk assessments or used effective strategies to mitigate the consumer’s potential for injury from this behaviour.

The team also identified that the service does not closely monitor whether the consumer’s positioning on the floor is due to a fall or their behaviour. Records are not kept for occasions the consumer is found on the floor, the frequency is not monitored, neurological observations had not been taken for the consumer for a significant amount of years, and the consumer’s care plan is not reviewed because of finding the consumer on the floor. The absence of this monitoring and review differs from the service’s internal policy, which states that any consumers found on the floor is identified as having had a ‘fall’ and needs to be reviewed. The team also identified that the consumer’s care documentation evidences a few occasions the consumer has dislocated their shoulder, but the service did not evidence investigation into the cause or determine whether it was falls related.

Staff interviewed regarding this consumer stated that this behaviour was ‘normal’ for the consumer and were able to describe strategies to manage this behaviour when identified. They also described how they differentiated between this consumer having a fall and her ‘normal’ behaviour of lying down on the floor based on her observed mood. However, management acknowledged that the care and services provided to this consumer were not in line with the organisation’s policy and procedures in relation to falls and will review their falls policy and the care provided to this consumer. The provider has also responded to their gaps in considering the risks for this consumer and note they have organised for the consumer to see a Gerontologist which would help guide staff in risk assessment and planning, especially for a potential falls injury.

A second consumer of concern was identified to have a late identification of a pressure injury and its subsequent deterioration. I note that this deterioration was not recent (although the wound has not fully healed) and that the assessment team has not identified any other wound issues at the service. However, the Assessment Team noted there was no investigation as to the causation of this pressure injury within the service’s incident report system. The provider has responded and acknowledged that their management of the risk to this consumer did impact the consumer, and they have committed to reviewing all resident care plans for skin integrity issues, to review all recent clinical incidents to analyse and implement corrective actions and further training to staff.

I acknowledge the service delivers appropriate care to many consumers, although they are inconsistent with managing risks for some consumers in relation to wounds, falls, and behaviour. I note the provider has since taken many actions to rectify the identified non-compliance, and further time will be required to determine their effectiveness.

On balance, I find this requirement Non-Compliant.

# STANDARD 8 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, the service has established governance systems that are developed and managed by the board and committees and are used to guide the delivery of care and services.

The service was able to demonstrate effective policy and procedures relating to high risk and high prevalence risk. Staff were able to describe these policies and how they applied to their work, although staff practice did not always align.

Management advised Clinical Indicators are reviewed monthly and areas are identified where improvements can be made.

## Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## Assessment of Standard 8 Requirements

### 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.*

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

### Requirement 3(3)(a)

*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.*

* Ensure each consumer gets safe and effective care, particularly in relation to falls, behaviour, and skin integrity management.
* Ensure investigations into incidents occur to ensure care for consumers can continue to be tailored to their needs and optimises their health and wellbeing.