Bupa Bankstown

Performance Report

82 Allum Street
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**Commission ID:** 0979

**Provider name:** Bupa Aged Care Australia Pty Ltd

**Assessment Contact - Site date:** 19 August 2020

**Date of Performance Report:** 24 September 2020

# Publication of report

This Performance Report **may 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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 1 September 2020.

# STANDARD 1 COMPLIANT/NON-COMPLIANT

# STANDARD 3 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 relevant documents.

Overall the sampled consumers and representatives considered that consumers receive personal care and clinical care that is safe and right for them. They confirmed that consumers get the care they need. For example:

* A consumer said they are looked after very well, they get their medications on time and staff often attends to their care needs in a prompt manner.
* A representative said it is ‘very reassuring’ to them that the consumer’s care needs are being met.
* Two representatives expressed satisfaction about the way the service managed each of the consumers specific clinical issues. Clinical issues included pressure injury and weight loss.

The Assessment Team found that high impact and high prevalence risks including falls and behaviour risks, are proactively managed with interventions put in place to minimise risks for the consumers. There is a multidisciplinary team which includes external clinical and allied specialists, to carry out root cause analyses, the instigation of action plans, and putting in place relevant interventions following high impact incidents. There has been a decreasing trend of the service’s behaviours of concern and in falls incidents with significant injuries.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

The Assessment Team found the service generally demonstrates effective management and monitoring of high impact and high prevalence risks associated for the sampled consumers. The review of evidence provided by the Assessment Team demonstrates that key high impact or high prevalence risks are identified in care planning documentation and are being managed for the consumers. They include risks associated with falls, challenging behaviours, skin integrity, weight loss, medication and diabetes management.

Interviews with consumers and/or their representatives, and staff demonstrate overall satisfaction with the provision of care and staff knowledge about their roles in providing care to minimise and manage high impact or high prevalence risks.

I have reviewed these findings and consider that the approved provider is compliant with this requirement.

# STANDARD 7 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.

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

Staff interviewed confirmed they normally have enough time to complete their duties on their shift.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

## 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.*

The Assessment Team found the service has made changes to staffing in response to feedback from consumers and the performance assessment process. Staffing has been increased and there are a variety of methods used to monitor the effectiveness of the current staffing regime. Call bell and sensor mat trending reports indicate improved response times. Staff said they were busy but generally had enough time to complete their tasks. The service has an adequate pool of replacement staff, staff are multiskilled and receive training to assist them in responding to consumer’s needs. The Assessment Team observed staff supervising and being available to groups of consumers.

I have reviewed these findings and consider that the approved provider is compliant with this requirement.

# 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).

Consumers/representatives interviewed confirmed the service is well run. They said management are accessible, approachable and responsive to the concerns of consumers and families. They said the communication is very good and consumers and representatives are kept informed of matters relating to them.

The organisation has policies and procedures, education for staff and monitoring systems to ensure risk management at the service is effective.

The Assessment Team did not assess all requirements 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.*

The Assessment Team found the organisation has risk management strategies which provide service level, as well as organisational oversight in key areas. This includes ensuring organisational systems effectively identify high impact and high prevalence risks and staff proactively manage positive outcomes for consumers. In response to identified risks the service has purchased equipment to mitigate these risks. Relevant information is disseminated to staff through memos and at their regular meetings and staff have been provided with relevant education to support effective risk management.

The organisation also has systems in place to ensure neglect or abuse of consumers is identified and responded to appropriately. The Assessment Team provided examples of how management have supported dignity of risk for consumers to live the best life they can.

I have reviewed these findings and consider that the approved provider is compliant with this requirement.

# 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.