Bupa Berwick

Performance Report

359 Narre Warren North Road
NARRE WARREN NORTH VIC 3804
Phone number: 03 9796 9677

**Commission ID:** 3676

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

**Site Audit date:** 5 January 2021 to 7 January 2021

**Date of Performance Report:** 5 February 2021

# 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 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 29 January 2021
* the Infection Control Monitoring Checklist.

# 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 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:

* Consumers and representatives reported that their privacy is respected, and they feel confident personal information is kept confidential
* Consumers and representatives stated staff treat them with respect. Consumers described how staff are aware of what is important to them and encourage them to do things for themselves. Consumers stated staff know their cultural and faith backgrounds and respect their wishes for family connection and appropriate care.
* Consumers and representatives stated they are able to exercise choice in decisions about consumers’ care and the way their care is delivered. Consumers described how they are able to maintain their sleep and rest routines and are able to choose when they would like to have a shower and other activities of daily living.
* Staff spoke of individual consumers’ choices and maintaining relationships inside and outside the service and of the importance to consumers. Care planning documentation reflects this information
* Consumers and representatives reported the information they receive is current and enables them to exercise choice.
* Consumers described being supported to take risks, living their best life and being able to be involved in activities in which they find enjoyment.
* Management and staff were able to demonstrate practices in relation to privacy, dignity and confidentiality.

Staff were observed to interact with consumers respectfully and were able to describe consumers’ individual preferences and discussed how care is provided in alignment with these preferences. Staff were able to demonstrate an understanding of individual consumers’ key relationships with family and friends.

Processes are in place to ensure care documentation reflects consumers’ choice. Individual consumers’ care plans contain strategies to support relationships with key people in their lives. These processes are supported through organisational policies and procedures.

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 and their representatives confirmed that consumers feel like partners in the ongoing assessment and planning of their care and services. For example:

* Most consumers and representatives confirmed they are satisfied they are involved in planning their care and services.
* Consumers and representatives provided examples of when they were contacted by the service and had discussions about care planning after a change in the consumer’s long-term care needs.
* Consumers and representatives said they have received information on requesting a copy of the completed care plan.

The Assessment Team observed care planning documents had a comprehensive suite of assessments completed, and interventions that reflected consumers’ described needs and preferences. Regular and as needed review of care plans was evident and responsive to changing needs, preferences and circumstances.

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 relevant documents.

Of the consumers interviewed, the majority consider that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers stated they get the care they need when they need it. Three consumers stated staff support them to remain independent with some aspects of their care, which is consistent with their preferences.
* Consumers stated care provided by nursing and care staff is of a high standard and in line with their individual preferences. Consumers expressed satisfaction with staff response to their requests for assistance.
* Consumers and representatives stated consumers have access to visiting medical officers, allied health staff and other specialists.
* There are registered nurses on duty 24 hours per day, seven days a week, to provide and supervise clinical care.
* Staff described the care needs and preferences of individual consumers and the Assessment Team observed staff providing care in accordance with the consumers’ care plans.
* Care file documentation is comprehensive for each consumer. While the Assessment Team identified concerns with the paper-based file system the response from the approved provider demonstrated the consumer’s condition, needs and preferences are documented and communicated within the organisation, and with others where responsibility for care is shared.

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.*

The Assessment Team found this requirement is not met because while the sampled consumer care files contain comprehensive information, the team found information is not filed chronologically, with medical and allied health professionals’ notes not generally incorporated in the file’s progress notes. Feedback from a visiting health professional expressed concern about the entries in the care files not being reviewed promptly by clinical staff. One representative expressed concern about updated recommendations by medical practitioners not being addressed by clinical staff.

The approved provider’s response demonstrated it had investigated the matters raised in the Assessment Team report providing evidence that the service has actively reviewed and updated the current system of documentation and communication. Systems and processes are in place to ensure information is documented and communicated effectively and system alerts are in place to address any errors or omissions should they occur. The investigation by the service indicates the team’s findings reflected a one-off gap rather than systemic issues with no detrimental outcomes or impact on the identified consumers. The evidence submitted by the provider supported this claim. A continuous improvement plan demonstrates education has been undertaken to support staff and visiting professionals to improve and ensure all documentation is current, changes to medication are recorded and next of kin are always advised of any changes to a consumer’s arrangements.

I have reviewed the information available and considered the findings of the Assessment team and the response for the approved provider. Based on the evidence available I am satisfied that the service has effective systems in place to ensure that 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. I find the service is compliant with requirement 3(3) e.

### 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 COMPLIANTServices 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. Staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

Overall consumers did confirm 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 confirmed they are supported to do the things they would like to do, which includes participating in structured group activities and individualised activities within the service. These activities include watching movies and television programs in their rooms, reading newspapers, playing word games, participating in group activities, especially music appreciation. Spending time with family and friends has been via access to electronic devices and other visitor arrangements. With the visitor restrictions lifted in October 2020, visitors are now welcome to the service, with all visitors adhering to the service’s infection control measures
* Consumers confirmed they are supported to keep in touch with people who are important to them, including the service welcoming back their family and friends for scheduled visits.
* The majority of the consumers spoke positively about the choice, quality and quantity of the food.

A lifestyle activities program is run each day across the service with a variety of activities aimed at the individual needs of the consumers. The lifestyle team also provides support to those consumers who chose not to participate in the formal activities. Lifestyle care planning documentation identifies consumers’ lifestyle needs and preferences and is updated when consumers’ needs change. The Assessment Team observed group lifestyle activities in progress as well as individual lifestyle activities provided one to one by staff. Lifestyle staff are included in the team approach of assessment and review process for consumers requiring behaviour interventions and activities.

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 generally feel they belong in the service and feel safe and comfortable.

For example:

* Consumers mostly feel at home in the service. Their rooms are personally decorated including personal items of furniture and items of significance to them.
* Consumers generally said they feel safe and comfortable at the service.
* Overall consumers said the service is clean and well maintained and they are able to access outdoors and all areas of the service.

The service is welcoming, spacious and well lit. It offers a range of communal spaces that optimise consumer socialisation. The service was observed to be clean and uncluttered enabling the free movement of consumers.

Maintenance occurs as scheduled and as needed and an effective cleaning schedule is in place. Regular audits and monitoring of internal and external areas are completed as well as regular audits of furniture, equipment and fittings.

Evacuation maps were observed throughout the service.

Consumers were observed moving freely indoors, outdoors and across the service.

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 by asking them about how they raise complaints and the organisation’s response. The team also examined the feedback folder, an analysis of consumer food satisfaction, and the feedback policy. The Assessment Team also tested staff understanding and application of the requirements under this Standard.

Overall most consumers feel encouraged and supported to give verbal feedback. Consumers and representatives who have made written complaints described having their issues addressed appropriately.

While the service’s feedback policy asks staff to document all verbal feedback and complaints on a feedback form, most staff advised they prefer to address feedback and complaints promptly instead of documenting the issue. The Assessment Team observed the analysis of trends in feedback and complaint data.

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, call bell response times, and orientation sheets.

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

For example:

* Most consumers interviewed said staff are kind and caring.
* All consumers interviewed considered the staff know about their personal care needs.
* Most consumers feel there are enough staff on duty and said they do not have to wait too long after using the call bell.
* The service engages in regular performance monitoring of staff and keeps records of staff training. Training is tailored to the role being performed by the staff member.

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).

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

For example:

Consumers and representatives generally said the service is well run and expressed satisfaction with the level of interaction with the management team.

The organisation’s governing body is accountable for the delivery of safe and quality care and services. It promotes a culture of safe and quality care and service through established policies and procedures, staff education and the monitoring of the performance of the service’s workforce.

The service has an established board of management and governance committees to support their oversight in relation to regulatory compliance, clinical governance, antimicrobial stewardship and the use of restraint. A range of policies and procedures is available to guide staff 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;*
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.