Bupa Caulfield

Performance Report

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**Commission ID:** 3606

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

**Site Audit date:** 16 June 2021 to 18 June 2021

**Date of Performance Report:** 19 July 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 08 July 2021. The service agreed with all findings in their response.

# STANDARD 1 COMPLIANTConsumer 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

Consumers and representatives 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. They confirmed that staff treated them well and are respectful and kind. Consumer privacy is respected and staff ensure personal information is stored securely.

Staff are aware of individual consumer’s preferences and care plans contained detailed information about their past life and current preferences. Consumers and representatives confirmed feeling safe and staff were able to demonstrate how culturally safe care is provided to the consumers at an individual level. The staff workforce is diverse, and as a cohort, they speak over 20 languages.

Consumer and representative feedback demonstrate that consumers feel supported to exercise choice and independence around making care decisions, making connections and maintaining relationships.

Management demonstrated how they engage and support consumers are supported to take risks. The service ensures a risk assessment is completed in relation to the risk associated with the activities and discussion is had with the consumer and their representative.

Consumers and representatives interviewed mostly expressed satisfaction with the information they receive is current and up to date and are given choices daily in relation to food choice and lifestyle activities. There is some improvement required in relation to ensuring preferences around personal care are communicated effectively.

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

Consumers and representatives said their care and services are planned around what is important to them. They describe their participation in assessment and care planning, and discussions of care plans with staff.

Care documentation shows care planning includes relevant assessment and risk identification, reflecting consumers’ current goals, needs and preferences. Documented advance care wishes are evident and end of life planning occurs. Care planning documents demonstrate consumers, and/or their representatives and others, are involved in care planning and are used as the basis of care delivery, and are easy to understand. Care plans reflect changes in care as a result of reviews.

Staff know consumers’ risks and can describe strategies to ensure safe and effective care is provided and are aware of what is important to consumers in terms of how care is delivered. Staff describe how consumers, representatives, health professionals and other organisations contribute to the consumer’s care and how they work together to deliver a tailored care and service plan.

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 COMPLIANTPersonal 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

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

Consumers and representatives said care is safe, meets consumers’ needs and is effectively managed. Representatives are satisfied consumer comfort, end of life care and support is provided. Referrals to health professionals occur in a timely manner.

Staff interviews, and documentation reflect individualised care is safe, effective and tailored to the specific needs and preferences of the consumer. This includes best practice management to optimise health and well-being of skin integrity, pain, restraint and behaviours. Other high impact or high prevalence risks associated with the care of each consumer, are effective.

Consumers who require the use of chemical restraint are effectively assessed and monitored and reviewed according to regulatory requirements. Consultation with representatives occurs.

Risks associated with diagnoses or decline documented in care plans are mostly reflected in care delivery and are responded to and generally managed effectively.

End of life needs are met in line with consumer wishes and comfort is maintained. The service is responsive to changes in health and well-being and takes timely action with monitoring occurring. Infections are identified, antimicrobial use minimised and monitored. The service demonstrates the minimisation of infection related risks is effective.

Care documents including electronic progress notes and handover documents provide adequate and clear information to support effective and safe sharing of the consumer’s care needs.

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 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

Consumers stated they receive safe and effective services and supports for daily living. Consumers said they are supported to participate in activities of their choosing and which add to the quality of their life. For example, one consumer is assisted to join online singing sessions by lifestyle staff. Lifestyle staff described how activities are planned and tailored to consumers’ interests. Consumers choose the activities of their choice that is provided on different floors.

The Dementia Support Unit (Acacia) has a different set of programmes planned. The activities are dependent on what the consumer’s needs at the time. Activities provided include relaxing music, daily newspaper discussion and tactile therapy.

Consumers are supported by staff at the service to maintain emotional, spiritual and psychological well-being. The consumer’s preferences for how they want to be supported is documented and communicated to those providing care and services to the consumer.

Consumer’s personal relationships are supported and individual consumer interests are documented. Consumers confirm they are assisted to participate in their community and keep in touch with people who are important to them, with most being visited frequently by family members.

There is a variety of communication strategies including handover sheets, the shift to shift handover process, dietary analysis forms are utilised to inform lifestyle and kitchen of any change in consumers’ dietary requirements and preferences. Appropriate referrals are made as required to other organisations and providers of care.

Overall consumers are satisfied with food provided, for some consumers who were not satisfied it was due to personal preference. Dietary analysis forms inform kitchen staff of consumers’ dietary needs, preferences and allergies. Dietary requirements are reviewed by dietitian and there is a system to inform any changes of consumers’ dietary changes are communicated to the kitchen.

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 COMPLIANTOrganisation’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

Most consumers consider they feel they belong in the service, and feel safe and comfortable in the service environment. The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. There is a range of communal spaces comfortably furnished providing opportunities for consumer socialisation.

Consumers are supported to personalise their own rooms and are able to spend time in the various communal living areas. Consumer rooms are decorated with photographs of family, artwork and other items of significance to them.

Consumers are free to move about all areas of the facility but due to current restrictions are only able to move around their level.

Consumers said the furniture, fittings and equipment in the service is clean and well maintained. They expressed confidence in knowing that if repairs are required maintenance staff is prompt and responsive. There is a variety of equipment available suitable for individual consumer needs.

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 COMPLIANTFeedback 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, consumers and representatives consider they are encouraged and supported to give feedback, make complaints, and are confident their feedback will be actioned.

The staff demonstrated an understanding of how to help consumers provide feedback. The service continues to encourage consumers and representatives to provide feedback and make complaints through flyers and at meetings. Complaint forms are available at nursing stations and inside the consumer file located in each consumers room.

Staff said they seek feedback and ask if there are any concerns regarding care being provided through the care planning review process.

Consumers and representatives said they were aware of internal and external avenues to provide feedback and or make a complaint, and all said they would feel comfortable issues or concerns with management.

Consumers and representatives said management respond quickly, and their concerns were mostly addressed. In addition, management were able to describe actions taken to resolve complaints and demonstrated an understanding of open disclosure. The service has a policy in relation to open disclosure and staff were able to describe what they understood by the term.

All complaints are reported to the relevant committees and management to ensure adequate action is taken and identify any training needs or improvement opportunities.

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 COMPLIANTHuman 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, consumers considered they get quality care and services when they need them and from people who are knowledgeable, capable and caring. Consumers and representatives expressed in various ways how staff have skills and knowledge to meet their care needs.

Consumers and representatives expressed general satisfaction with the numbers of staff available. Consumers and representatives noted staff were rushed at times, but this did not impact on the quality of care provided. The service demonstrated the workforce is planned to ensure a suitable mix of skills and staff numbers in various roles to enable the delivery of safe and effective care and services.

Staff have qualifications relevant to the role and their competency is monitored. Records demonstrate that staff participate in mandatory training annually and additional training is provided as needed or at the request of staff.

A review of the rosters by the Assessment Team showed that shifts are covered, and call bell audits demonstrate a timely response to consumer calls.

Consumers and representatives described various ways in which staff were kind, caring and gentle when providing care. The Assessment Team observed staff interactions with consumers were positive. Staff spoke in a respectful manner about consumers during interviews and illustrated an in depth understanding of each consumer’s needs and preferences.

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 COMPLIANTOrganisational 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, consumers consider the organisation is well run and they partner in improving the delivery of care and services.

Consumers provided examples of how they can be involved in the development, delivery and evaluation of care and services through resident of the day meetings, providing feedback to care staff, surveys and resident/relative meetings.

Management discussed conducting quarterly surveys to obtain additional feedback. The results are then discussed at staff meetings and with the management team to action improvements. Some of the improvements actioned from resident/representative forums include:

* + Purchasing a pool table for residents to use.
	+ Installing an automatic door for the common lounge on the ground floor when residents had difficulty accessing this area.
	+ Changes to meals to improve quality and taste.

The activity schedule is developed with consumer and representative feedback and attendance records are maintained to best suit consumer needs.

The service employs an internal auditing risk team to monitor and review performance at the organisational and local level every six months. This includes reviewing key performance data including incident data, consumer and representative feedback and satisfaction surveys to identify and analyse trends. Reports on incidents and KPI data are reviewed by the organisations quality team and key information reviewed at Board level, to consider changes to policies and procedures.

The organisation provided a documented risk management framework, including policies describing how:

* + high impact or high prevalence risks associated with the care of consumers is managed
	+ the abuse and neglect of consumers is identified and responded to
	+ consumers are supported to live the best life they can
	+ incidents are managed and prevented.

High impact and high prevalence risks are proactively identified, monitored and reviewed. Risk areas are identified and addressed in policies and procedures and the workforce operates within these policies and procedures. The service continually monitors risks such as the use of psychotropic medications and infections. Incidents are used to identify knowledge gaps and improvements to policies and procedures.

The organisation provided a documented clinical governance framework that includes clinical care. There are processes in place to manage antimicrobial stewardship, minimising the use of restraint and manage open disclosure.

Staff had been educated about the policies and were able to provide examples of their relevance to their work. One staff member discussed how the use of restraint was minimised at the service and this aligned with the policies and procedures reviewed by the Assessment Team. They described where restraint was used, it was monitored, evaluated for effectiveness and discussed with the consumer, their representatives and general practitioner.

Management discussed a current partnership with Monash University to monitor and increase awareness of the use of antibiotics at the service. Consent was obtained from consumers and their representatives to take swabs from wounds over a 16 month period. Education was provided to all staff regarding this study and written materials are maintained at nurses’ stations with diagrams for when to cultures are to be taken from wounds.

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 has committed to actively pursue continuous improvement in order to remain compliant with the Quality Standards especially in relation to consumer’s personal hygiene and the area of infection control.