Bupa Queens Park

Performance Report

142 Carrington Road   
WAVERLEY NSW 2024  
Phone number: 02 8305 9100

**Commission ID:** 2420

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

**Assessment Contact - Site date:** 11 June 2021

**Date of Performance Report:** 13 July 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

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| --- | --- |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(b) | Non-compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(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 6 July 2021.

# 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 plans and assessments were reviewed, and staff were asked about how they ensure the delivery of safe and effective care for consumers. The Assessment Team also examined relevant documents.

Overall, consumers and representatives interviewed by the Assessment Team considered that consumers receive personal care and clinical care that is safe and right for them.

While consumers and representatives gave mostly positive feedback about clinical and personal care, review of care documentation by the Assessment Team did not demonstrate effective management of high impact or high prevalence risks associated with the care of each consumer. The service identified falls and skin injuries resulting from falls as their high impact and high prevalence risks across the service. Whilst the service has implemented various strategies for falls management and prevention, deficits were identified in completion of neurological observations post-unwitnessed falls and pain charting as per the organisation’s policy for most consumers sampled by the Assessment Team.

The Quality Standard is assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Non-compliant

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

Care documentation reviewed by the Assessment Team did not consistently demonstrate the effective management of high impact or high prevalence risks associated with the care of each consumer. The service identified falls and skin injuries resulting from falls as their high impact and high prevalence risks. Care documentation reviewed by the Assessment Team demonstrated the service has implemented some strategies to minimise the risk of falls for consumers. However, the Assessment Team found that while post-fall neurological observations were generally completed, they were not consistently completed in line with the organisation’s policy for three consumers. The Assessment Team found that post-fall pain charting was not completed in line with the organisation’s policy for two consumers. For one consumer, information regarding low blood pressure was not effectively communicated in the consumer’s care documents.

In their response, the approved provider acknowledges that pain charting and some post-fall observations were not completed in line with the organisation’s policies. The approved provider’s response identifies that for one consumer, limited observations were completed to be in line with the consumer’s care preferences. The approved provider states that clinical judgement was used for some consumers for decreased monitoring that deviated from the organisation’s policy.

For the consumer with limited information in their care planning documents regarding low blood pressure, the approved provider’s response identifies that since the Site Audit the service has requested the consumer’s medical officer to provide further information about the consumer’s acceptable blood pressure range. The service is also completing more regular blood pressure monitoring and improving care planning documentation to communicate the consumer’s care needs regarding this.

The approved provider’s response identifies continuous improvement actions implemented since the Site Audit to ensure that staff are following the organisation’s policies regarding post-falls management. This includes staff training and education and review of documentation practices to ensure appropriate communication for staff for delivery of care.

The approved provider demonstrated that for some incidents, deviating from the organisation’s policies regarding post-fall management may have been clinically justified. However, care documentation reviewed by the Assessment Team identified several incidents for three consumers where the service was not consistently following their post-fall management policies for pain charting and neurological observations. For one consumer, information in their care planning documents about risks associated with their care was not comprehensive to ensure effective management.

I find this requirement is Non-compliant.

# 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.

Most consumers and representatives interviewed by the Assessment Team considered that consumers get quality care and services when they need them and from people who are knowledgeable and capable. Consumers interviewed confirmed that staff are kind and caring and attend to their needs in a timely manner. Consumers interviewed confirmed that staff know what they are doing and felt confident that they had the skills and knowledge to meet their care and lifestyle needs.

The service demonstrated an effective staff training program including orientation training, and ongoing education to all staff specific to their roles and in relation to the Quality Standards. The service demonstrated incidents, specific consumer needs, and staff performance reviews are used to identify staff training needs. The service demonstrated that the workforce is recruited, trained, equipped and supported to deliver the outcomes required by the Quality Standards.

One of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

# 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)(b)

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

The approved provider must demonstrate:

* The high impact or high prevalence risks associated with the care of consumers are effectively identified and managed.
* Consumer post-falls management is consistently completed in line with the organisation’s policies and procedures.
* Risks associated with the care of consumers are effectively communicated in consumer care planning documents to enable the effective management of identified risks.