Burpengary Gardens Care Community

Performance Report

149 - 163 Rosehill Drive
BURPENGARY QLD 4505
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**Commission ID:** 5478

**Provider name:** DPG Services Pty Ltd

**Assessment Contact - Site date:** 9 September 2021

**Date of Performance Report:** 1 October 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 4 Services and supports for daily living** |  |
| Requirement 4(3)(f) | 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.
* other information and intelligence held by the Commission regarding the service.

# STANDARD 2 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

The Assessment Team did not access all requirements of this Standard and therefore an overall compliance rating or summary for the Quality Standard has not been provided.

## 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.*

Consumers and representatives expressed satisfaction with the service’s assessment and care planning processes and the care and services consumers received.

The Care Manager described the services processes for consumer assessment and care planning including a care plan review every four months in collaboration with consumers, representatives and other health professionals. Care staff provided examples of assessment and care planning information that guided them in the care and services delivery of consumers.

Care documentation for consumers reflected comprehensive assessments are completed upon consumers entry to the service and reviewed every four months or when changes occur. Assessments include the identification of consumers’ clinical risks, needs, goals, choices and preferences.

Organisational and service policies, procedures and guidelines are available to guide staff in consumer care and service delivery. The service had an electronic care system which included a suite of evidenced-based assessment tools to support the assessment and care planning process.

For the reasons detailed, this requirement is Compliant.

### 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.*

Consumers and representatives considered they felt involved in the ongoing partnership with the service in relation to consumer’s assessment and care planning. One named consumer said their care needs and preferences change regularly due to a health condition, and confirmed involvement in assessment and care planning to meet individual care requirements.

Registered staff said consumer care plans are reviewed every 4 months, and weekly consumer reviews are completed after consideration of consumer information in progress notes, incident reports and other correspondence. Care staff are informed of changes to consumer’s care planning via handover from Registered staff and notifications in the electronic care documentation system.

The Assessment Contact – Site Report provided information which evidenced Registered staff review consumer care plans following incidents for effectiveness of individual strategies. The service had policies and guidelines to guide staff in assessment and care planning processes, including incident management.

 For the reasons detailed, this requirement is 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

The Assessment Team did not access all requirements of this Standard and therefore an overall compliance rating or summary for the Quality Standard has not been 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 service demonstrated risks for individual consumer including wounds, falls and behaviours are effectively managed. Consumers expressed satisfaction with the care provided by staff and described how the service managed their individual personal and clinical care risks. For example, one named consumer described how staff have provided wound care to a wound on the consumers leg which was improving.

Staff described the most significant clinical and personal care risks for the consumers, including examples of strategies implemented to minimise the risk/s associated such as review of consumers prescribed psychotropic medication to determine effectiveness.

Care documentation reflected effective management of individual risk/s for named consumers, for example for one named consumer, care documentation identified a wound care plan with directives for care identified to guide staff; regular monitoring of the wound via measurement of wound size and wound photographs; a referral to a wound specialist and regular review by the consumer’s Medical Officer

The service reports and trends consumer clinical incidents such as falls, weight loss and psychotropic medication usage.

For the reasons detailed, this requirement is Compliant.

# STANDARD 4 Services 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

The Assessment Team did not access all requirements of this Standard and therefore an overall compliance rating or summary for the Quality Standard has not been provided.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

Overall, consumers and representatives provided positive feedback in relation to meals provided at the service. They expressed satisfaction with the quality, variety and presentation of meals and described they choose meals from a menu offering a selection of main meals with alternatives available. Consumers said they have enough food and reported snacks are available between meals.

The service monitors consumer satisfaction with the meal service through various mechanisms including surveys, menus are provided on a monthly basis and are changed in response to ongoing consumer feedback from consumers including at the monthly consumer meeting.

Consumers’ specific dietary requirements and preferences were reflected in care plans including allergies and preferences, and staff described how these are communicated via dietary profiles located in the kitchen and dining areas.

The Assessment Contact - Site report provided information which evidenced the service undertakes regular surveys in relation to consumer food satisfaction and the August 2021 survey reported 95% consumer satisfaction. Review of monthly consumer meeting minutes identified food is a standing agenda item, and consumers are provided the opportunity to review service menu at this meeting and provided feedback to Management.

For the reasons detailed, this requirement is Compliant.

# 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.