The Haven Residential Aged Care

Performance Report

156 Bourke Street   
WAGGA WAGGA NSW 2650  
Phone number: 02 6925 5500

**Commission ID:** 2584

**Provider name:** Catholic Healthcare Limited

**Assessment Contact - Site date:** 14 October 2020

**Date of Performance Report:** 02 December 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** | **Non-compliant** |
| Requirement 3(3)(a) | Non-compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(c) | 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 4 November 2020.

**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 team also examined relevant documents.

Of consumers randomly sampled, most confirmed they receive the care they need.

The Assessment Team identified personal and clinical care being provided was not best practice, nor tailored to the consumer’s needs and optimising their health and wellbeing in relation to pain management, psychotropic medication use, pressure area care and wound care.

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)(a) Non-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.*

The Assessment Team provided information that demonstrated that sampled consumers did not receive safe and effective personal or clinical care that is best practice, tailored to their needs, and optimises their health and well-being.

The Assessment Team noted current staff practices and documentation issues related to pressure area care, wound management, pain management and minimisation of chemical restraint are not in accordance with best practice or optimising the consumers health and well-being.

The Assessment Team found

* Pressure area care – repositioning directives are not always clear or consistently recorded as being attended as required.
* Wound management – care staff were attending to complex wounds without supervision. Wounds were not being effectively managed, with deterioration and possible infection, not being identified and escalated for review.
* Pain management – documentation indicated consumers being identified with pain, such as during cares, or wound dressings, without pain management being addressed in a timely fashion.
* Minimisation of chemical restraint - psychotropic medications were being used as chemical restraint and not in accordance with restraint minimisation principles.

The approved provider submitted a response to the assessment teams report which included additional material clarifying matters raised in the report. This information provided some additional context and refuted some information in the Assessment Teams report. The approved provider’s response also included evidence of corrective actions taken since the assessment contact to address the gaps identified.

I have considered and accept evidence supplied by the approved provider that shows management and staff at the service are aware and understand their responsibilities related to the use of psychotropic medications and the minimisation of restraint. The approved provider acknowledged the issues identified in relation to pressure area care, wound management and pain management and has commenced a number of improvement activities, since the audit, to address these. The approved provider will need to monitor and evaluate these changes carefully to ensure they are effective and are sustainable.

For the requirement, each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that is best practice; and is tailored to their needs; and optimises their health and well-being, 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.

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

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

**Assessment of Standard 7 Requirements**

**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.*

The Assessment Team found that the service demonstrated the workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.

The Assessment Team provided information that in interviews with consumers, most were satisfied that staff were competent and trained to know what they were doing, however, some consumers identified that staff could use additional training in the use of mobility equipment and providing personal care. The Assessment Team found the service demonstrated they were previously aware and monitoring and assessing staff competency in these areas and providing additional training and performance management as required. The service demonstrated they use feedback and complaints to identify continuous improvements and monitor staff competency.

For the requirement that the workforce is competent, and the members of the workforce have the qualifications and knowledge to effectively perform their roles, I find this requirement compliant.

**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)(a)**

*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.*

Pressure area care

* Care plans accurately describe the pressure area care the consumer requires, care is provided as per the care plan and is documented.

Wound management

* All wound management is reviewed by a suitably qualified person and staff trained and equipped to provide effective wound care in accordance with best practice and the service’s policies and procedures.
* All wound care documentation is clear, detailed, and effective in monitoring the condition of a wound.

Pain management

* Consumer pain is identified, documented and managed in accordance with best practice.
* All staff are trained and equipped to provide effective pain management in accordance with best practice and the service’s policies and procedures.

General

* All improvements implemented are monitored and reviewed for effectiveness.