Churches of Christ Care Oak Towers Aged Care Service Oakleigh

Performance Report

139 Atherton Road   
OAKLEIGH VIC 3166  
Phone number: 03 8574 4000

**Commission ID:** 3077

**Provider name:** Churches of Christ in Queensland

**Site Audit date:** 11 March 2021 to 12 March 2021

**Date of Performance Report:** 28 April 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.

# 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.

Most consumers consider they are treated with dignity and respect, can maintain their identity, culture and diversity make informed choices about their care and services and live the life they choose. Care planning documents reflected the diversity of consumers, their backgrounds and care needs. Staff speak respectfully to consumers and treat them in a respectful manner.

Consumers interviewed confirm they are encouraged to do things for themselves and staff know what is important to them. Consumers interviewed confirm their personal privacy is respected, including when they are being provided care in their rooms.

Discussions with staff and review of care planning documents also outline the consumers are supported to maintain social connections with family and friends.

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, 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 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.

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.

Although the service did not formally identify chemical restraint, consumers who require the use of chemical restraint are effectively assessed and monitored and reviewed according to regulatory requirements. Consultation with representatives occurs.

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 COMPLIANT 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

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

Most consumers consider they receive the services and supports for daily living that are important for their health and well-being, enabling them to do the things they want to do. Consumers feel supported by the service to do the things they like to do.

The service promotes each consumer’s emotional, spiritual and psychological well-being. Pastoral care is provided to consumers, with a focus on ensuring consumers have meaning in their life.

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.

Overall consumers advised they like the food provided by the service, outlining there is enough food, variety of meals, and quality of food is sufficient. A four-week rotating menu is currently in place. There are multiple meal options for breakfast, lunch and dinner, with a variety of different meals on offer across the four weeks. Menus are changed three to four times a year. There are systems in place to ensure that they are provided meals in line with their dietary requirements and preferences. Consumers are offered food six times per day, with care staff monitoring how much food the consumers eat.

The lifestyle team conduct daily activities for consumers of various levels of cognitive and physical function. The service interacts with various organisations and people to provide lifestyle activities to consumers. There is a gardening group for the consumers, visits by choirs and excursions were conducted prior to COVID-19.

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.

The service was assessed to be welcoming, offering various communal spaces allowing for consumer engagement and interaction. The service was also observed to be reasonably uncluttered, allowing the free movement of consumers. Consumers in all wings of the service were able to access outdoor areas.

Most consumers consider they feel they belong in the service, and feel safe and comfortable in the service environment. The service is generally clean and well maintained but there were concerns about the overgrown garden and cobwebs on windows.

Consumers interviewed did not feel at home, however they did feel supported by the service to be independent and to interact with other consumers. Consumers are supported to personalise their own rooms and are able to spend time in the various communal living areas.

Consumers and feedback from representatives indicated that consumers feel safe when using mobility aids or where lifting equipment is used. Staff were able to describe how equipment, furniture and fittings are cleaned and maintained.

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 – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

Consumers consider they are encouraged and supported to give feedback and make complaints, and appropriate action is taken. The service collects feedback from a variety of sources and collates this within their electronic register for opportunities to improve.

Overall, consumers and representatives interviewed expressed in various ways they are encouraged and supported to provide feedback and make complaints. A consumer said they could go to the nurse in charge of their area, if they had a comment or concern and could also use a form. A consumer said feedback information is located in different areas of the service and consumers could fill out the form or verbally raise their feedback.

Overall, consumers and representatives interviewed expressed in various ways their feedback is used to improve the quality of care and services.

The organisation has a suite of systems and process to encourage feedback and complaints, and to review and act on feedback and complaints. These include applying an open disclosure process where relevant.

The service records compliments, complaints and suggestions along with actions taken and outcome (and later evaluation) within their electronic (GMA) continuous improvement plan. A priority is allocated and the related Quality Standard(s) is recorded to enable trending. When a complaint is registered a notification is sent to the service’s senior team and the regional manager.

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.

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

Overall, consumers and representatives interviewed, expressed in various ways, staff have skills and knowledge to meet their care needs. A consumer said experienced staff are competent, explaining how staff administering medications, stick to the times on the medication chart.

Most consumers and representatives, expressed in various ways how the number and mix of the workforce enables safe, quality care and services, to be delivered to them. There was mixed feedback in relation to call bell response times.

The service has a range of systems and process to ensure the number and mix of their workforce is adequate and unplanned leave is replaced. Management demonstrated the service has a variety of systems and process to recruit, train and support staff to deliver the outcomes required by these Standards. The service has a suite of documents and processes to monitor and review their workforce, including conducting annual appraisals.

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).

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

The service manager said they engage consumers in the development, delivery and evaluation of their care and services in a variety of ways. For example: Bi monthly ‘resident committee’ meetings, food and wellbeing surveys.

The organisation reports to a Board with approximately six members including their chief executive officer (CEO) and a registered nurse who have aged care experience. The Board is provided with reports covering all incident types, complaints and Aged Care Quality and Safety Commission reports for the previous month. The Board reviews and seeks to understand trends and what is being done about trends. Consumers are also encouraged to reach out to the Board via a ‘message in a bottle” component of the wellbeing survey.

The organisation has a suite of systems and processes in relation to governance, risk management and clinical governance framework; which were generally applied by the service. Improvements are required in regard to management and investigation of incidents.

The service demonstrated that there is a clinical governance framework in place which includes antimicrobial stewardship, minimising the use of restraint, and an open disclosure process. The service requires further education in what they consider to be chemical restraint, however, generally monitor and manage antipsychotic medications well.

Management said opportunities for continuous improvement are informed by feedback forms, suggestions, meetings, incidents, audits internal (Health Check Reports) and external audits.

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.