Eldercare Oxford

Performance Report

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**Commission ID:** 6949

**Provider name:** Eldercare Inc

**Site Audit date:** 19 July 2021 to 21 July 2021

**Date of Performance Report:** 10 September 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

|  |  |
| --- | --- |
| **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 did not respond to the Site Audit report.

# 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

The Quality Standard is assessed as compliant as six of the six specific Requirements have been assessed as compliant.

Consumers considered they are treated with dignity and respect, can maintain their identity and live the life they choose. Consumers and representatives said consumers are supported and encouraged to exercise choice and independence and provided examples of how consumers’ privacy is maintained, how their culture, values and choices are respected, and how they are supported to make decisions about their care, take risks and maintain relationships. Consumers and representatives said consumers have positive relationships with staff and were satisfied that information consumers receive is easily accessible, appropriate, timely and accurate to enable them to exercise choice.

Staff demonstrated familiarity with consumers’ circumstances, life history, identity, background and things that are important to them, and provided examples of how this informs the provision of culturally safe care and services. Staff explained how they maintain consumers’ privacy, and support them to exercise choice and take risks.

Documentation, observations and interviews with consumers, representatives and staff demonstrated consumers are provided information to assist in making choices about how the care and services they receive is delivered, risky activities, meals and lifestyle activities.

The service has policies and procedures to guide staff in privacy and confidentiality, and supporting consumers to take risks, exercise choice and maintain independence.

Based on this evidence, I find the service compliant with all Requirements in Standard 1 Consumer dignity and choice.

## 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

The Quality Standard is assessed as compliant as five of the five specific Requirements have been assessed as compliant.

Consumers confirmed they feel like partners in the ongoing assessment and planning of their care and services. Consumers and representatives said the service works with them to develop a safe and effective care plan that reflects consumers’ current needs, goals and preferences, they are informed about the outcomes of assessment and planning and care plans are updated when consumers’ needs and preferences change.

Staff demonstrated an understanding of assessment and planning processes and described how they use information in consumers’ care plans to provide safe and effective care and services that is in line with their needs and preferences. Staff described personal and clinical care needs and preferences of sampled consumers, which were consistent with their care plans and information provided to the Assessment Team through consumer interviews.

Documentation showed care plans are informed by a range of assessments and details risks to consumers’ health and well-being, including risk mitigation strategies. Care plans were also inclusive of consumer needs, goals and preferences, and advance care and end of life planning. Care plans and progress notes were reflective of those involved in the care of the consumer, including relevant health specialists.

Documentation showed care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact the needs, goals and preferences of a consumer.

Based on this evidence, I find the service to be compliant with all Requirements in Standard 2 Ongoing assessment and planning with consumers.

## 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

The Quality Standard is assessed as compliant as seven of the seven specific Requirements have been assessed as compliant.

Consumers consider they receive personal and clinical care that is safe and right for them. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* care and services provided to consumers considers their individual preferences.
* appropriate action is taken in response to consumers’ clinical needs and when necessary, specialist input is sought in a timely manner.
* information about consumers’ conditions, needs and preferences is communicated with others where responsibility is shared.
* the service promptly recognised deterioration of two consumers’ mental health and provided appropriate emotional and psychological support.
* representatives are notified of incidents as they occur and are informed of action undertaken in response.

Staff reported they have access to policies and procedures relating to best practice care delivery and described strategies used to identify and manage high impact or high prevalence risks associated with the care of consumers. Staff provided examples of how they tailor care and services to meet consumers’ needs and preferences, and demonstrated an understanding of identifying and escalating deterioration of a consumer, standard and transmission based precautions for infection and minimising the need for, or use of, antibiotics.

Care plans reflected consumer needs and preferences, and were inclusive of appropriate information for the effective transfer of information to others where responsibility for care is shared. Care plans demonstrated effective risk management and best practice care is applied, with timely and appropriate referrals made to relevant individuals, organisations and providers of other care and services where necessary.

Care planning documentation showed the service seeks consumer and representative input regarding end of life planning and care is provided in line with the consumers’ goals and preferences, with their comfort maximised and dignity preserved.

Based on this evidence, I find the service compliant with all Requirements in Standard 3 Personal care and clinical care.

### 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

The Quality Standard is assessed as compliant as seven of the seven specific Requirements have been assessed as compliant.

All consumers felt the service supports them to do the things they want to do, and which are important for their health and well-being. For example:

* three consumers and one representative provided examples of the support consumers receive to enable them to do the things they want to do and maintain independence.
* three consumers provided examples of how their emotional, spiritual and psychological well-being is supported and confirmed staff regularly check in with them.
* consumers and representatives considered consumers are supported to participate in their community, build and maintain social relationships and do things of interest to them.
* consumers confirmed their condition, needs and preferences are known by staff, including religious affiliations and emotional needs.
* consumers and representatives confirmed consumers have access to other providers of care and services when needed, including massage therapists, allied health professionals, pastoral care support and personal care services.
* consumers were satisfied with the meals provided and confirmed there are alternative options available if they do not like what is on the menu.
* consumers and representatives considered their equipment is safe, clean and well-maintained.

Staff explained how care and services is planned to meet consumers’ individual needs and provided examples of how they engage consumers with varying levels of functional ability and ensure consumers’ spiritual, social and emotional needs are met.

Staff provided examples of how they work with external organisations and volunteers to support consumers’ to do things of interest to them and supplement the wellness and lifestyle programs offered. Catering and lifestyle staff demonstrated an understanding of consumers’ needs and preferences and described how this information is communicated and recorded. Staff reported they have access to the essential equipment they require.

Care plans were found to document consumers’ needs and preferences, including their life history, interests, preferences, religious/cultural/spiritual/social needs and likes/dislikes. Care plans documented the support consumers need to enable them to do the things they want to do and maintain independence. Consumer files showed timely and appropriate referrals to individuals, organisations and providers of other care and services for the provision of lifestyle support.

Lifestyle documentation shows group activities are diverse and individualised activity options are available.

Based on the above evidence, I find the service compliant with all Requirements in Standard 4 Services and supports for daily living.

## 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

The Quality Standard is assessed as compliant as three of the three specific Requirements have been assessed as compliant.

All consumers interviewed felt they belong in the service and feel safe and comfortable in the service environment. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* the environment is nice, welcoming, easy to navigate, clean and well‑maintained.
* consumers are encouraged to personalise their rooms and have items of importance around them.
* consumers feel safe and furniture, fittings and equipment is suitable to their needs and well‑maintained.

Staff demonstrated how they ensure the service environment and equipment is safe and well-maintained, including the process for actioning and prioritising maintenance issues.

The environment was observed to be clean, safe and welcoming. Consumers were moving freely with outdoor courtyards accessible. Furniture, fittings and equipment appeared to be safe, clean, well maintained and suitable for consumers.

Based on the above evidence, I find the service compliant with all Requirements in Standard 5 Organisation’s service environment.

## 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

The Quality Standard is assessed as compliant as four of the four specific Requirements have been assessed as compliant.

Consumers consider they are encouraged and supported to give feedback and make complaints, and appropriate action is taken to address feedback and complaints. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* they feel supported to provide feedback and make complaints about consumers’ care and services.
* they can provide feedback and make complaints in various ways, and are aware of external complaints processes and advocates.
* while there are formal processes in place, they are happy to raise any issues about consumers’ care and services with staff or management, and are confident appropriate action would be taken.
* their feedback and complaints have resulted in satisfactory changes and an apology is offered when appropriate.

Staff described how they assist consumers in making a complaint and providing feedback, including those with cognitive impairment or poor communication. Staff demonstrated an awareness of open disclosure and described open disclosure principals and explained it is important to apologise to consumers when things go wrong.

Information relating to advocacy services and internal and external complaints processes were observed in communal areas and are included in the consumer handbook and newsletter.

Complaints data showed complaints are documented, managed and resolved in accordance with the service’s policies. Complaints and feedback are analysed to identify trends and opportunities for improvement, and are reported at consumer, staff and quality and risk meetings. The service’s improvement plan demonstrated improvements and actions implemented as a result of suggestions from consumers and staff.

Based on the evidence above, I find the service compliant with all Requirements in Standard 6 Feedback and complaints.

## 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

The Quality Standard is assessed as compliant as five of the five specific Requirements have been assessed as compliant.

Most consumers consider they get quality care and services when they need them, from people who are knowledgeable, capable and caring. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* there are enough trained and skill staff to meet consumers’ clinical and personal care needs and call bell responses are timely.
* staff are kind, responsive, respectful, positive, and go out of their way to make consumers’ days brighter.
* staff are appropriately trained, competent and know how to meet the needs and preferences of consumers.

Staff considered they have adequate numbers of staff to provide care and services in accordance with consumers’ needs and preferences. Staff interviewed demonstrated knowledge of consumers’ history and some described consumers as family when speaking or referring to them.

Management stated call bell response times are reviewed in response to a complaint and on a monthly basis, and response times exceeding 10 minutes for the sample day are investigated and monitored.

Interviews with staff and management, and documentation showed staff appraisals are conducted, and competencies and training are monitored through various channels. When poor performance is identified, performance management processes are implemented.

Staff were observed to be calm and attending to consumers’ needs in a timely manner.

Based on the above evidence, I find the service compliant with all Requirements in Standard 7 Human resources.

## 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

The Quality Standard is assessed as compliant as five of the five specific Requirements have been assessed as compliant.

Documentation showed consumers in all areas of the service are engaged in the development, delivery and evaluation of care and services through the consumer focus group and resident meetings. While no consumers are actively engaged on the board, they are encouraged to provide feedback about the service delivery via various platforms, which is used to inform continuous improvement.

Documentation showed the organisation’s governing body is accountable for and promotes a culture of safe, inclusive and quality care and services by overseeing clinical incidents, audit results, hazards, feedback and complaints, strategic planning and corporate governance.

Interviews with consumers, representatives and staff, and documentation showed there are effective organisation wide governance systems in place to support information management, continuous improvement, workforce governance, regulatory compliance, financial governance and feedback and complaints. There are systems and practices are in place to ensure effective management of high impact or high prevalence risks, identifying and responding to abuse and neglect and supporting consumers to live the best life they can.

The organisation’s clinical governance framework guides clinical care, which staff could evidence through examples of open disclosure, minimising the use of restraint and antimicrobial stewardship.

Based on the above evidence, I find the service compliant with all Requirements in Standard 8 Organisational governance.

## 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*
4. *managing and preventing incidents, including the use of an incident management system.*

### 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.