Estia Health Albany Creek

Performance Report

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**Commission ID:** 5786

**Provider name:** Estia Investments Pty Ltd

**Assessment Contact - Site date:** 1 July 2020

**Date of Performance Report:** 10 August 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 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 |

# 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.

# 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

Overall consumers considered that they feel like partners in the ongoing assessment and planning of their care and services.

For example:

* Overall, consumers said they are involved in care planning and their needs, goals and preferences are listened to by the service.
* Consumers said they are aware of the outcomes of assessment and planning and they have access to a summary care profile in their rooms. Consumers and their representatives said they feel the consumer’s care needs are met and care and services are delivered in line with their preferences.

Management and staff could describe how regular care planning reviews are completed and consumers and representatives are included in this process. Staff related how they update consumer assessments before reviewing their care plan for currency; the consumer’s care needs are adjusted where required. Staff described how the service also enables consumers and representatives to contribute when planning more complex or end of life care. Management described how monthly clinical incident reports are used to analyse and review consumer care, with related quality improvements being implemented.

The Assessment Team found that initial and ongoing assessment and care planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services. Care planning documents detail the individual consumer’s current, needs, goals and preferences. Outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is available to the consumer and representative. Where consumers experience an incident or change in health that impacts on their care needs, their care plans are reviewed and updated.

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

Overall sampled consumers considered that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers and representatives said they feel the consumer’s personal and clinical care needs are met. They gave various examples of how staff ensure care provided to consumers was right for them. This included regular discussions about the consumer’s current care requirements, the way it is delivered and any changes that occur in consumers’ health status.
* Consumers and representatives said timely and appropriate referrals occur as needed and consumers have access to relevant medical and allied health professionals when required.

Staff could describe consumers’ individual needs, preferences, the most significant personal or clinical care risks and how these were being managed or monitored in line with their care plans. Staff have a shared understanding of their responsibilities in relation to identifying, reporting and managing changes in consumers’ care needs, including following an incident. Staff demonstrated and awareness of processes to follow so information is shared when changes occur and/or when referrals are made to other health providers. Staff provided examples of how they minimise infection related risks.

The Assessment Team found the service has access to a suite of clinical care policies and guidelines in best practice care delivery, including for palliative and end of life care management; these are regularly reviewed and updated at an organisational level. Clinical incident data is collected, analysed, trended and learning opportunities identified to minimise similar incidents reoccurring. The data analysis is also used to drive the service’s plan for continuous clinical improvement for consumers.

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.*

# 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.