Estia Health Blakehurst

Performance Report

394 Princess Highway
BLAKEHURST NSW 2221
Phone number: 02 9265 7900

**Commission ID:** 1094

**Provider name:** Estia Investments Pty Ltd

**Assessment Contact - Site date:** 7 April 2021

**Date of Performance Report:** 18 May 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

|  |  |
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| **Standard 1 Consumer dignity and choice** |  |
| Requirement 1(3)(c) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(b) | 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 approved provider’s response to the Assessment Contact - Site report received 29 April 2021.

# STANDARD 1 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 sampled consumers considered that they are treated with dignity and respect, able to maintain their identity and make informed choices about their care and services. Consumers interviewed said they are supported to maintain contact with family, friends and others as they choose. A consumer said the staff are very good and that they always knock and wait for a reply before entering the room. Staff were able to provide examples of how they support consumers to exercise choice and independence

The Quality Standard is not assessed as only one of the six specific requirements have been assessed. The one requirement assessed was found to be Compliant.

## Assessment of Standard 1 Requirements

### 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.*

# 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

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.

Some sampled consumers considered that they feel like partners in the ongoing assessment and planning of their care and services and that they have input into the assessment and planning process. Review of documentation identified that consumer goals and needs are generally identified. However, consumers preferences and risk assessments are not always documented in the care plan.

The Quality Standard is not assessed as only one of the five specific requirements have been assessed. The requirement assessed was found to be Complaint.

## Assessment of Standard 2 Requirements

### 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.*

The Assessment Team found that overall, consumers said they are consulted regarding their needs and preferences and are involved in the assessment and planning process upon entry to the service and provide input into the interim care plan although they had not received a copy of the interim care plan. All consumers and representatives said they complete advanced care planning documents upon entry to the service. Staff were able to describe the individual care preferences for consumer’s and review of care plans demonstrated they are developed to include consumer goals. However, the assessment team identified that consumer goals and needs are not always documented for each consumer. For one consumer who advised of their preference for showers prior to breakfast, this preference had not been updated in the care plan.

The approved provider disputed the assessment team’s findings and advised that consumers are offered a copy of their interim care plan, however most decline this as the full care plan is their preference. The approved provider acknowledged that a consumer’s shower preferences were not documented in the care plan, however advised that this had been recorded in the progress notes. The approved provider asserted that while this preference was not included in the care plan it was known to staff, recorded and acted upon. Due to gaps in documentation the assessment team found this requirement Non-compliant. However, based on the approved provider response and the overall positive feedback from consumers and representatives confirming their input into the assessment and planning process, I find this requirement 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.

Most sampled consumers considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. Overall, consumers and their representatives said they feel staff are competent and capable to perform their roles.

Staff interviewed confirmed that they feel competent to perform their roles and management were confident that staff have the required skills and knowledge to perform their roles due to the screening and selection process, orientation and onboarding training, along with ongoing competency assessments.

The Quality Standard is not assessed as only one of the five requirements have been assessed. The requirement assessed was found to be Compliant.

## 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 most consumers and representatives said they feel staff are competent and capable to perform their respective roles. Staff confirmed that they feel they have the required competencies in being able to perform their roles effectively. One consumer commented that some staff can be loud during their communication and that not all consumers are hearing impaired. Another consumer expressed the view that a small percentage of staff do not want to do their jobs.

Management informed the assessment team that competencies are undertaken throughout the year for various roles and competencies can be added to the education program to address any specific clinical needs of the consumers. The assessment team identified that some care staff and nursing staff had not completed their medication competency, however the service has only recently commenced, and the Executive Director confirmed that all competencies would be completed by May 2021. The assessment team reported that information they requested relating to the core competencies specific to individual roles was not provided.

The approved provider response accepted the personal view of a consumer that a small percentage of staff do not want to do their jobs, however argued that this does not reflect the overall competency of the workforce. The approved provider confirmed that they have commenced additional education to staff on individual communication strategies for consumers and not assuming a level of hearing loss in any consumer. The approved provider response clarified that the individual role competencies are able to be accessed via the organisations intranet and provided an example of this.

While the assessment team identified some gaps in relation to this requirement, the approved provider response demonstrated that the service has systems in place to ensure that staff are competent, complete core competencies and a commitment to providing education to address specific areas.

I am satisfied 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.