Estia Health Dalmeny

Performance Report

25-29 Noble Parade
DALMENY NSW 2546
Phone number: 02 4476 8744

**Commission ID:** 0594

**Provider name:** Estia Investments Pty Ltd

**Site Audit date:** 3 March 2020 to 6 March 2020

**Date of Performance Report:** 24 March 2020

# 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 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

Most sampled consumers confirmed that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose.

For example:

* All consumers interviewed said staff treat them with respect. One consumer said she sometimes feels like a bit of an outsider because she is not from the area, but staff were observed interacting with and visiting the consumer regularly, talking about the time they spend together during the performance assessment.
* Consumers said they are encouraged and supported to do things of interest to them and staff help to ensure they do as much as they can to enjoy their life. Staff encourage and support consumers to maintain independence by being part of walking, gardening, craft and men’s groups.
* All consumers interviewed said they feel respected; care and services are provided with dignity, and their privacy is respected and maintained.

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 staff demonstrated knowledge about the consumers they care for. While the Assessment Team observed gaps in documentation regarding consumers’ life story, staff explained very particular aspects of consumers lives. Staff interviewed were familiar with consumers’ personal preferences, how they preferred care to be delivered and things of personal interest to individual consumers.

The Quality Standard is assessed as Compliant as all 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 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

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

For example:

* Consumers and representatives interviewed confirmed they are regularly included in the care planning and assessment process. This occurs every three months or when needs or condition change.
* All consumers and representatives interviewed advised they have participated in advanced care planning conversations since entering the service. One representative advised she wasn’t ready to complete the documentation and the service was respectful of her wishes.
* Representatives interviewed advised that they have never asked for a copy of their consumer’s care plan but were confident they would obtain one if they asked. This was confirmed by management.

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.

* Care plans were found to address consumer’s needs, goals and preferences. These were found to be in line with the sampled consumers/representative’s stated needs, goals and preferences. Evidence of regular three monthly and as needed review according to organisation protocol was observed by the Assessment Team.

The Quality Standard is assessed as Compliant as all 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 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

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

For example:

* Sampled representatives felt their consumers receive the care that they need. The care is safe and is tailored to their specific needs and requests.
* All representatives advised that their consumers have easy access to medical officers, allied health providers and other specialist health care professionals as necessary.
* All representatives interviewed stated they trust care staff to deliver safe and quality care to their consumers. They also stated that they receive regular updates when consumer’s condition changes or incidents occur.

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.

* Assessment and care planning was found to be individualised and reflect each consumer’s voice with the assistance of their representatives as necessary. Regular three monthly care plan reviews are undertaken by nursing staff. Case conferences are offered annually or as necessary to consumers and representatives to review all aspects of care and services received. Advanced care planning commences on entry to the service or when consumers are ready to have such discussions.
* Regarding wound management and the assessment and documentation of wounds. The Assessment Team found that nursing staff tending to wound care at the service do not always follow best practice recommendations. Consumer preferences regarding wound care were found to be documented on staff work logs in place of progress note or wound charts. There was one occurrence where the incident of a new wound was found documented on a behaviour chart. On other occasions, where a new wound occurred near or adjacent to an existing wound, a new wound chart was not commenced, with staff instead continuing to document wound care for more than one wound under the pre-existing wound. Wound photography is sometimes done without consumer or site identification contained in the photographs.

The Quality Standard is assessed as Compliant as all 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 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

Overall sampled consumers and representatives confirmed that they get the services and supports for daily living that are important to their health and well-being and that enable them to do the things they want to do.

For example:

* For the consumers and representatives randomly sampled, interviews confirmed that they are supported by the service to do things they like to do. Examples include offering choice for group or individual activity participation, gardening, concerts and going for walks.
* The consumers and representatives interviewed confirmed that they are supported to keep in touch with people who are important to them and visitors are always welcome. For example, the consumers and representatives consistently said the service is a family community and supports them to involve others when wanted.
* For the consumers interviewed, most consumers said they like and enjoy the food and they are always offered an alternative option. Consumers consistently said they would like to see less egg dishes and more prawns and steak on the menu. This was discussed with management for their consideration.
* A representative of one consumer said during the bush fire emergency, the service kept the family well informed and they were impressed by the service’s efforts to ensure consumer safety and provide family constant updates despite the challenging events that presented.

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.

* Review of lifestyle supports including catering and the lifestyle program demonstrated adequate provision of services to meet consumers’ needs and preferences. Whilst there were gaps in documentation for consumers leisure care plans and assessments; this information was captured in other forms of care planning documentation and during staff interviews. Consumers and representatives expressed satisfaction during interview with regards to the lifestyle program and staff supporting consumers’ choice, independence, and well-being.

The Quality Standard is assessed as Compliant as all 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 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

Overall sampled consumers indicated that they feel they belong in the service, and feel safe and comfortable in the service environment.

For example:

* All consumers interviewed said they feel safe and are comfortable living at the service.
* Consumers and representatives interviewed said the service is very homelike, there is plenty of room for people to spend time participating in activities or spending a quiet moment to themselves in the well-furnished lounge rooms or outdoor areas.
* All consumers interviewed are satisfied with the cleanliness of their bedrooms, common rooms, furniture and fixtures. Consumers said maintenance issues are addressed promptly, the service is regularly cleaned, and they are complimentary of the laundry service.
* Consumers and representatives are particularly proud of and comforted by the way management and staff kept them informed of the emergency during the recent bushfires. Consumers and representatives said they take great comfort in knowing that staff worked with families and emergency services to keep them safe during the emergency.

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 environment is comforting, well maintained and clean. The environment helps consumers to move about freely in both internal and external areas of the service. Management and staff regularly review their emergency procedures and liaise with emergency services personnel to ensure there are contingencies in the case of an emergency.

The Quality Standard is assessed as Compliant as all 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 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

Most consumers said they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken to resolve their concerns.

For example:

* Consumers and representatives interviewed know how to provide feedback or make a complaint and do so when required.
* Consumers and representatives interviewed are satisfied that their feedback is heard and management work with them to make changes, where necessary, to resolve concerns.

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.

* There are established processes for the management of feedback and complaints. Management and staff demonstrated understanding of preferred practices which is confirmed through sample review of complaints’ documentation and interview with consumers and representatives.

The Quality Standard is assessed as Compliant as all 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 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

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

For example:

* Consumers and representatives said staff are responsive to consumers’ needs. They said staff understand consumers’ routines and are reliable as to the time they provide care and support. Consumers said they seldom need to ring their call-bells to request assistance. They said this is because staff frequently check on them and attend to them as necessary.
* Representatives particularly expressed a high level of satisfaction with the availability and skills of staff. Consumers and representatives are confident that staff are competent when attending to consumers. Representatives said they have no concerns about the consumers’ care when they are not there as they are confident that staff provide consumers with the level of care they expect.
* Systems are in place to identify training needs, provide education to staff and monitor staff performance. Staff did not identify any issues regarding the adequacy of staff numbers. Resident/relative meeting minutes and staff meeting minutes did not identify any issues with the adequacy of staff numbers or skills.

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.

* Consumers spoke highly about the standard of care and support provided to them by staff. They said there are enough staff and their care needs are reliably supported so they seldom need to ring their call-bells. A review of documents showed that absent staff are generally replaced when necessary so that shifts are not worked short-staffed.

The Quality Standard is assessed as Compliant as all 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 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

Overall sampled consumers indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* Consumers and representatives expressed the view that the service is well run and that management communicates effectively with them. They spoke highly about the performance of staff working in all areas of the home.
* Consumers and representatives are involved in discussions about the consumers’ care needs particularly when there is a change or an incident. Formal care plan reviews are undertaken with consumers and/or representatives at least annually.
* Consumers and representatives said they find the resident/relative meetings useful for giving feedback about care, services and lifestyle. Consumers and representatives gave examples of where they have been involved in a partnership in improving the delivery of services. Two consumers attend the service’s continuous improvement committee meetings and said they have input into discussions and find the meetings interesting.
* Feedback from consumers is sought through meetings, surveys, conversations and feedback forms. Consumers confirmed that they are aware of how to provide feedback and that management addresses concerns to their satisfaction and in a timely manner.

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).

The organisation provides oversight across a range of management systems as part of the organisational governance program. This includes undertaking audits and surveys and responding to feedback to monitor the performance of individual services within the group. The service provides information to the Board and executive on a range of clinical indicators to enable management to monitor any trends. This information enables management to develop and implement strategies to minimise risks to consumers.

The Quality Standard is assessed as Compliant as all 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.