Estia Health Kogarah

Performance Report

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Kogarah NSW 2221
Phone number: 02 9546 7522

**Commission ID:** 2815

**Provider name:** Estia Investments Pty Ltd

**Assessment Contact - Site date:** 25 March 2021

**Date of Performance Report:** 05 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** | **Non-compliant** |
| Requirement 1(3)(c) | Non-compliant |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(d) | Non-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 provider’s response to the Assessment Contact - Site report received 13April 2021

# STANDARD 1 NON-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

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 did not consider they can make informed choices about their care and services and maintain relationships. For example, consumers reported they are not supported to maintain relationships with others and some consumers provided feedback that their choices and preferences relating to care needs have not been identified. Some sampled staff members were unable to identify examples on how they support consumers to maintain contact with people who are important to them.

The Quality Standard is assessed as Non-compliant as one of the six specific requirements have been assessed as Non-compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(c) Non-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.*

The assessment team found that the service conducts regular consumer meetings and surveys to involve consumers in decision making and to exercise choice and independence. However, sampled consumers advised that they are not supported to maintain contact with family and friends and exercise their choice and independence. Some consumers sampled reported that despite communicating their preferences regarding how aspects of care is delivered this does not always occur leading to distress for the consumers. Some consumers expressed dissatisfaction that they were not supported to be independent and supported to do things of choice.

Some consumers and their representatives provided feedback that they were not provided with appropriate mechanisms to maintain contact with their loved ones during visitor restrictions related to Covid-19. Although management advised that iPads were introduced during restrictions for consumers to stay in contact with family, staff were unable to identify examples of how they support consumers to stay in touch with people who are important to them.

The approved provider response clarified that some consumers were supported to maintain contact with family via facetime during visitor restrictions and acknowledged that this was a difficult time to support consumers to maintain relationships. The approved provider submitted documentation to argue that consumers preferences for care delivery are followed, however this documentation is unable to negate the feedback provided by consumers during the assessment contact that their care preferences are not always followed.

I find this requirement Non-compliant.

# STANDARD 3 NON-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

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.

Most consumers and/or their representatives interviewed expressed satisfaction with the quality of the care. However, review of care documentation for sampled consumers showed that deterioration and changes to consumers’ mental and physical health is not always recognised and responded to in a timely manner. Specifically, gaps were identified in behavioural symptoms and falls not being responded to in a timely manner and that recommendations made by medical practitioners and other allied health professionals are not always followed or responded to.

The Quality Standard is assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(d) Non-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.*

The assessment team reported that a nurse advised that monthly meetings occur with a nurse practitioner where discussions take place regarding how to respond to clinical deterioration. During the assessment contact, the assessment team requested procedures for supporting staff to recognise and respond to deterioration in a consumers’ condition however these were not provided. The assessment team reported that the processes, escalation and response to deterioration were not clear and were ineffective for the consumers sampled.

Of the consumers sampled, the assessment team found that for one consumer who presented with behavioural issues this was not recognised and responded to in a timely manner and despite this consumer’s behaviours escalating, further investigations as recommended by external behaviour specialist and medical professional for example a urinalysis, delirium screen or pain monitoring was not completed. For a consumer who experienced increasing falls, the response demonstrated insufficient investigation into contributing factors and the medical practitioner’s recommendation was not actioned. The assessment team reported that although medical review was sought for a consumer who experienced difficulty breathing and chest pain, the clinical deterioration was not monitored and responded to consistent with recommendations.

The approved provider response refuted the assessment team’s findings and submitted evidence that falls investigation for the consumer did occur and I no longer find this specific issue a concern. However, while the approved provider refuted other findings the evidence provided did not adequately demonstrate that escalating behavioural issues were recognised and responded to in a timely manner for the consumer along with screening tools completed to eliminate possible contributing factors. Additionally, the response provided a rationale for why medical recommendations were not followed for the consumer experiencing falls, however the response did not adequately address nor was able to negate that clinical deterioration was not monitored and responded to for the consumer who experienced difficulty breathing and chest pain.

I find this requirement Non-compliant.

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

### Requirement 1(3)(c)

*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.*

The approved provider must demonstrate:

* That consumers are provided with support and opportunities to maintain contact with people they choose to
* That consumers preferences for how care is delivered is considered and to consult with consumers to confirm that care is being delivered consistent with their preferences

### Requirement 3(3)(d)

*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.*

The approved provider must demonstrate:

* That all staff are aware of the processes and escalation and response to any deterioration in the consumers condition.
* That underlying contributing factors are considered and appropriate screening tools completed in a timely manner for consumers who present with increasing behavioural symptoms.