Estia Health Kogarah

Performance Report

74-76 Rocky Point Road
Kogarah NSW 2217
Phone number: 02 9053 1800

**Commission ID:** 2815

**Provider name:** Estia Investments Pty Ltd

**Assessment Contact - Desk date:** 15 November 2021

**Date of Performance Report:** 8 December 2021

# Performance report prepared by

G Cherry, delegate of the Aged Care Quality and Safety Commissioner.

# 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** |  |
| Requirement 1(3)(c) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(d) | Compliant |

# Detailed assessment

This performance report details the Commissioner’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 - Desk; the Assessment Contact - Desk report dated 15 November 2021 was informed by review of documents and interviews with staff, consumers/representatives and others
* the provider advised on 18 November 2021 they chose not to respond to the evidence bought forward in the Assessment Contact – Desk report
* Performance report dated 5 May 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

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## 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.*

Overall, sampled consumers consider they are treated with dignity and respect, including their personal privacy; they are supported to maintain their identity, and are satisfied information is provided enabling them to make informed choices to live the life they choose. Consumers said they are supported to maintain relationships of choice and choose who is involved in their care. Consumers expressed positive feedback of being supported to spend time with those of importance to them and maintain relationships with others within and external to the service.

Staff were observed to be providing care in a respectful manner and demonstrated understanding of consumers individual needs and preferences. Staff acknowledged care planning documentation guides care delivery, however they confirm with consumers that care remains aligned to their current preferences. Clinical staff described the process afforded for consumers to make informed decisions and risk mitigation strategies are implemented where required.

Review of documents demonstrated care planning documentation contains information relative to consumer’s individual needs. Consumers, and their nominated decision maker, are involved in assessment and care planning processes.

The service demonstrated education and training provided to staff in relation to this Standard, regular assessment and care planning review occurs to ensure currency, and social and lifestyle programs regularly evaluated with consumer input.

I find this requirement is compliant.

# STANDARD 3 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

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### 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.*

Sampled consumers consider they receive personal and clinical care that is right and safe for them. Consumers, and their representatives, expressed positive feedback regarding the responsiveness of staff to a deterioration in consumer’s health. They said clinical staff are consistently available to monitor and quickly respond to changes in consumer’s condition.

The service has a system to support the workforce in recognising and responding to changes in consumers’ functional capacity and/or deterioration of health. Processes for escalation and response in consumers’ mental health, cognitive or physical function are effective for those consumers sampled.

Staff advised they have received training relating to complex care needs, recognising signs of deterioration and clinical topics relevant to this Standard. There is a process to ensure all staff are aware of consumers’ current condition and when to escalate issues of concern to clinical staff. Staff gave examples of recently identified changes including the response by registered nurse’s and referral to medical officers and allied health professionals resulting in positive outcomes for consumers.

The organisation has a clinical assessment policy including links to additional best practice guidelines to support staff in understanding their responsibilities to a specific health care issue. Staff have access to clinical work instructions and flow charts to guide them in recognising and responding to a deterioration or change in a consumer's condition, and clinical audits monitor appropriate and timely responses occur. Review of documentation identified deterioration in a consumer’s cognitive or physical health status is investigated by clinical staff and escalated to a medical officer and/or an appropriate health specialist; where appropriate, transfer to hospital occurs in a timely manner.

Renewed processes promote effective communication between care staff, lifestyle and clinical teams to report on subtle changes in consumers’ presentation that may indicate early deterioration; clinical concerns and appropriate actions are discussed at weekly meetings. The service seeks assistance from specialists for acute care review and palliative care. Posters clearly articulating the process of identifying and assessing signs of deterioration are prominently displayed to promote staff awareness.

For those consumers experiencing complex behaviours, care plans detail specific strategies in an easily accessible format, and a documented summary is provided to staff detailing individualised strategies.

I find 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.