Future Life Care Services

Performance Report

7/93 Rockwood Crescent   
MEADOW HEIGHTS VIC 3048  
Phone number: 1800 352 273

**Commission ID:** 301025

**Provider name:** Future Life Care Pty Ltd

**Assessment Contact - Site date:** 3 March 2021

**Date of Performance Report:** 12 April 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Non-compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(f) | Non-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 visit, 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 19 March 2021

# 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

The Assessment Team assessed Requirements (3)(a), (d) and (e) in this Standard and have recommended these Requirements as met. All other Requirements in this Standard were not assessed at this Assessment Contact. Therefore, an overall rating of the Standard has not been provided.

I have considered the Assessment Team’s findings and evidence and based on the Assessment Team’s report, I find Future Life Care Pty Ltd, in relation to Future Life Care Services, to be Compliant with Standard 2 Requirements (3)(a), (d) and (e).

Consumers, and representatives interviewed confirmed taking part in assessment, care planning and review processes. All indicated they are satisfied with the care and services they are receiving. Consumers and representatives confirmed they receive a copy of their assessment and care planning documentation.

Staff were able to describe assessment and care planning processes which considers risks to consumers care needs, goal and preferences. Staff confirmed consumers and representatives are consulted during care plan development and receive a copy of the care plan.

Policies and procedures, assessment and care planning templates guide staff to identify consumers care needs goals and preferences. Care files reviewed demonstrated appropriate Assessment and care planning processes are undertaken to inform delivery of care.

### 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)(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 NON-COMPLAINT 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

The Assessment Team assessed Requirements (3)(a), (b), (d), (f) and (g) in this Standard and have recommended Requirements (3)(b) and (f) as not met. All other Requirements in this Standard were not assessed at this Assessment Contact.

I have considered the Assessment Team’s findings and evidence and based on the Assessment Team’s report, I find Future Life Care Pty Ltd, in relation to Future Life Care Services, to be Non-compliant with Standard 3, Requirements (3)(b) and (f) and Standard 3, Requirements (3)(a), (d) and (g) to be Compliant. I have detailed my reasons below in relation to the non-complaint requirements.

In relation to Requirement (3)(a), the Assessment team found from all consumers and representatives interviewed they confirmed they receive supports and services they need. Consumers could give specific examples of how staff tailored care to their needs and preferences. Staff interviewed could describe how they tailored care to the needs and preferences of specific individuals. Consumer files reviewed confirmed assessments for consumers consider current and previous medical diagnosis and validated assessment tools are used by staff at the service.

In relation to Requirement (3)(d), the Assessment Team found consumers and representatives were satisfied they could contact the service to advise them of any concerns with respect to their physical and condition and were comfortable to discuss changes to care. Staff interviewed provided specific examples for consumers where they had identified deterioration and how they responded in accordance with policies and procedures. Documentation reviewed confirmed staff are reporting identification of deterioration and staff receive ongoing training in identifying health decline.

In relation to Requirement (3)(g), the Assessment Team found consumers and representatives to be satisfied with the service’s infection control processes during the COVID-19 pandemic. Staff confirmed they have undertaken COVID-19 infection control training, have access to personal protective equipment. Documentation reviewed the service has monitored training of staff and has appropriate infection prevention and control procedures and kits available.

### 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) Non-compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

The Assessment Team found the service does not effectively manage high impact and high prevalence risks associated with falls risks and pain management for a consumer.

* Where a falls risk has been identified for a consumer, the service has not effectively assessed the consumer’s living environment for risks associated with falls. Where the consumer has experienced falls post initial assessment of a falls risk, the service has not effectively reassessed the consumer’s condition, risk of falls or implemented effective falls risk strategies to minimise or prevent further risk of falls.
* The service did not initiate timely referrals to a physiotherapist or occupational therapist to assist with identification of falls risk strategies.
* Where the consumer experienced pain post fall, the service did not initiate a timely assessment and review of the consumer’s pain.

The Approved Provider submitted a response to the Assessment Team’s report and asserts their commitment to meet their responsibilities as an Approved Provider and to address the deficiencies identified by the Assessment Team. The Approved Provider’s response includes an action plan for continuous improvement and staff and consumer education to rectify the identified issues. Actions related to this Requirement include:

* Education to all staff about the importance of falls risk assessments, pain assessment and timely follow up actions to minimise risks to consumers.
* Ensure staff are aware of and adhering to appropriate policies and procedures concerning risk management, care planning and assessment and identifying consumer risks.
* Education to consumers to identify signs of falls risk and to communicate any change in condition.

Based on the Assessment Team’s report and the Approved Provider’s response, I find the service Non-compliant with this Requirement. I acknowledge the service’s actions and improvements to rectify the deficiencies identified by the Assessment Team. However, I find at the time of the Assessment Contact, the service did not effectively reassess consumer’s falls risk, identify and implement and assess and monitor the consumer’s pain post fall.

In relation to the above I find the service non-compliant with this requirement.

### 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)(f) Non-compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

The Assessment Team found the service does not undertake timely and appropriate referrals to individuals, other organisations and providers of other care and services in relation to consumers that have experienced falls, declining mobility and dental needs. Two consumers were identified to not have timely and appropriate referrals initiated, for example:

* One consumer reviewed by the Assessment Team found the consumer was displaying signs of mobility and balance decline and requests were made by the consumer and representative for equipment to assist with mobility and balance. While the service provided equipment to assist and aid balance and mobility, there was no referral for an allied health assessment to review mobility, falls risk and suitability of the equipment for the consumer.
* One consumer reviewed by the Assessment Team who has poor vision and was an identified falls risk on entry to the service was not referred for an occupational therapy assessment and review of the consumer’s home, despite having identified the consumer has shower over a bath and no grab rails in the bathroom. In November 2020 the consumer was reported having a fall whilst attempting to exit the bathroom and other incident documentation indicated consumer fell whilst trying to exit the bathtub. The incident did not initiate a review of the fall incident, reassessed falls risk or a referral for an allied health review.

The Approved Provider submitted a response to the Assessment Team’s report and asserts their commitment to meet their responsibilities as an Approved Provider and to address the deficiencies identified by the Assessment Team. The Approved Provider’s response includes an action plan for continuous improvement, including development of enhanced processes to ensure referrals occur in a timely manner and there is a process to monitor and follow up on referrals and outcomes of referrals.

Based on the Assessment Team’s report and the Approved Provider’s response, I find the service Non-compliant with this Requirement. I acknowledge the service’s actions and improvements to rectify the deficiencies identified by the Assessment Team. However, I find at the time of the Assessment Contact, the service did not effectively undertake timely and appropriate referrals to ensure appropriate falls prevention strategies were implemented to minimise risks of falls.

In relation to the above I find the service non-compliant with this requirement.

### 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

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.

**Standard 3, Requirement (3)(b)**

*The service will ensure effective management of high impact or high prevalence risks associated with the care of each consumer.*

* Ensure care plans identify appropriate strategies, interventions and directives to ensure care delivery meets the assessed needs of individual consumers with specific attention to falls risk management.
* Ensure staff assess consumer condition following falls incidents and assess falls risk and pain and implement appropriate strategies and referrals where required.
* Monitor staff compliance with the service’s policies and procedures in relation to falls risk and pain management.

**Standard 3, Requirement (3)(f)**

*The service will ensure timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

* Ensure timely and appropriate referrals occur to individuals, other organisations and providers of other care and services where consumers have a change in condition or have an identified need, goal and preference that requires in relation to their care.
* Ensure staff follow up referrals in a timely manner to ensure consumer care needs are met.