Glaica House

Performance Report

22 Flora Parade
TUNCURRY NSW 2428
Phone number: 02 6554 5521

**Commission ID:** 0210

**Provider name:** Great Lakes Aged & Invalid Care Association Ltd

**Assessment Contact - Site date:** 7 July 2020 to 8 July 2020

**Date of Performance Report:** 28 July 2020

# 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

|  |  |
| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| **Standard 5 Organisation’s service environment** |  |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| **Standard 6 Feedback and complaints** |  |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| **Standard 8 Organisational governance** |  |
| 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 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.

# 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 Requirements

### 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.*

A review by the Assessment Team identified for the consumers sampled, the care planning documents are reflective that others are involved in the assessment and planning process. Documentation and interviews with consumers and representatives demonstrate this process is occurring at the organisation.

### 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.*

A review by the Assessment Team of documentation and interviews with consumers and their representatives demonstrate the consumers outcomes are communicated and the care planning document is available to the consumers and representatives.

### 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.*

A review by the Assessment Team of documentation and interviews with consumers and their representatives as well as the Assessment Team’s observation of consumers care, demonstrates the care and services are regularly reviewed.

# 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 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.*

The organisation was able to demonstrate each consumer gets safe and effective personal care, clinical care or both personal and clinical care during the two-day assessment contact. This was demonstrated by interviews, a review of documents and the Assessment Teams observations during the two-day assessment contact.

### Requirement 3(3)(b) Compliant

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

The organisation was able to demonstrate a system is effectively in place to identify and manage high impact or high prevalence risks associated with the care of each consumer.

### 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.*

The organisation is able to demonstrate deterioration or changes in a consumer’s health status 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.*

A review of documentation and interviews with consumers and/or their representatives and staff demonstrate the organisation has an effective communication system in place.

### Requirement 3(3)(f) Compliant

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

A review of documentation and interviews with consumers and/or their representatives and staff demonstrate the organisation has an effective referral system in place.

# STANDARD 5 Organisation’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 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.*

The Assessment Team observed the service environment is welcoming. Upon entering the service there is an open reception foyer area with notices, sign in books and screening for everyone entering the service. Consumers interviewed were happy with the environment and said it was well kept, clean and comfortable. Several said they liked to go outdoors and the Assessment Team observed consumers and family members sitting chatting in the grounds.

### 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.*

Consumers were observed to be relaxing in large clean well-furnished lounge and sitting areas as well as in the gardens. The service environment is safe, clean and well-maintained.

# STANDARD 6 Feedback 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 Requirements

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

The assessment team found feedback and complaints are reviewed and used to improve the quality of care and services.

# 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 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.*

Consumers were complimentary of the care provided by staff and said they were kind and caring. A number of consumers said there were insufficient staff as they were always very busy and they felt sorry for them. Several consumers said they had to wait sometimes when they rang the bell but none had any comments that this had any significant effect on their care.

### 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.*

Consumers interviewed said they feel confident that staff are skilled enough to meet consumers’ care needs. Consumers said their experience is that staff are aware of how to manage and provide their personal care and clinical care requirements.

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

The consumers interviewed said that staff all perform their duties in a professional and competent manner. They said they were very happy with staff performance.

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational 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 Requirements

### 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.*

Overall, sampled consumers feel the organisation promotes a safe and inclusive culture and is accountable for quality care and services. Consumers sampled said they felt included in the way care and services were delivered. One consumer interviewed, said the service has individual consumer cluster committees where consumers have input into how care and services are delivered through a discussion of issues. For example, a recent discussion occurred in relation to the number of consumers that required assistance with feeding in a cluster. As a result of consumer concerns’ management adjusted staffing accordingly to the committee’s satisfaction. Consumer cluster meeting minutes confirmed this.

### 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.*

The assessment team found that the organisation has effective organisation wide governance systems in place.

### 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.*

The organisation was able to demonstrate a system is in place and effective in identifying and managing high impact or high prevalence risks associated with the care of each consumer. The abuse and neglect of consumers are identified and responded to appropriately. Consumers are supported to live the best life they can.

A consumer risk register has been completed with relevant consumers identified and authorities and strategies in place. The organisation has completed individual risk assessments for consumers.

### 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.*

The service has appropriate governance systems in place including a clinical governance framework.

The organisation provided:

* a documented clinical governance framework
* a policy relating to antimicrobial stewardship
* a policy relating to minimising the use of restraint
* an open disclosure policy.