Goodhew Gardens

Performance Report

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**Commission ID:** 0697

**Provider name:** Anglican Community Services

**Assessment Contact - Site date:** 19 January 2021

**Date of Performance Report:** 24 February 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** |  |
| Requirement 1(3)(a) | Compliant |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(a) | 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 16 February 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

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 considered 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:

* Most consumers interviewed confirmed that they are treated with dignity and respect by the care staff and other staff who assist them with their care. They were able to provide examples of staff attending to their needs, speaking to them with respect, and understanding their needs. However, two representatives stated they have seen consumers being treated in an abrupt/non-respectful manner. As a response to this feedback, the provider has since provided further training to staff in regards to respecting the consumer.
* Staff, including leisure and lifestyle and care staff, observed and interviewed demonstrated they were aware of the care needs, individual preferences and cultural and religious backgrounds of the consumers at the service.
* Written feedback provided by consumers and/or their representatives during 2020 and 2021 indicated staff treated consumers with respect and dignity.
* The team observed that non-English speaking consumer’s had their cultural aspects integrated into their care and lifestyle activities, and documents were translated into their language for their use.

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)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

# STANDARD 3 Non-Compliant 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

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.

The consumers and/or representatives on their behalf provided mixed feedback in relation to the care consumers received.

For example:

* Some consumers felt happy with the care and services they received and believed they got the care they needed.
* However, some representatives felt staff were unable to provide adequate care required for the consumers. They have provided examples of instances where care has not been adequately delivered, and a few representatives have attributed it to a lack of staff in the service.

The Assessment Team also found that the service did not deliver care that is best practice in regards to pain management, skin integrity, and continence management.

The Assessment team did not assess all requirements for this Quality Standard. However, a decision of Non-compliant in one or more requirements results in a decision of Non-Compliant for the Quality Standard.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Non-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 Assessment Team interviewed a sample of consumers and/or representatives and received mixed feedback. Many consumers sampled were happy with the care and services they received, and believed they got the care they needed. However, other representatives and consumers advised that their needs are not adequately met. For example, a few representatives advised that there is inadequate staff numbers to address consumers’ continence needs or falls in a timely manner.

The Assessment Team reviewed the documentation related to the care of consumers and identified some gaps in personal and clinical care. One consumer did not have their skin integrity appropriately managed or monitored; the consumer had big red rashes which remained unnoticed by staff until it was observed and notified by the consumer’s representative. These rashes were eventually managed by the service with noted improvements. However, the consumer has since developed a new rash and was identified to have incontinence associated dermatitis, and this rash has not improved but had broken down further by the time of this assessment.

Another consumer also did not have his pain management adequately monitored, as the effectiveness of the analgesia he received was not assessed in a timely manner to record whether it has been effective or requires review. Similarly, another consumer received a recommendation from a geriatrician to monitor his pain to ‘query unmet need’, but the Assessment Team did not observe his pain being chartered or reviewed as a response at the time of the assessment.

The provider has since responded stating that staff will be provided further training in evaluating effectiveness of PRN (prescribed as needed) medication, pain assessment and charting and on recognising deterioration in consumers. A full plan review of the aforementioned consumers will also occur, and the staff roster will also be adjusted to ensure continuity of care for consumers.

I find this requirement non-compliant.

### 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 interviewed consumers and their representatives and found that deterioration in some consumers was not recognised and responded to in a timely manner. For example, one representative stated staff did not recognise when his father was unwell and exhibited rashes and changes in cognition and alertness. Another representative stated that staff failed to recognise a cellulitis in their consumer. The Assessment Team reviewed these consumers’ care planning documentation and confirmed that staff had not recognised these changes in physical or cognitive function in a timely manner.

The Assessment Team interviewed a sample of staff whom were not aware of the resources available to them to assist in evaluating deteriorating consumers, although the Assessment team did identify that the service had a range of documents related to this requirement.

The provider has since responded that staff will be provided further training in recognising deterioration in consumers.

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 3(3)(a)

*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 service to ensure consumers get personal and clinical care that is best practice and optimised to their health and wellbeing. This includes, but is not limited to, ensuring a consumer’s continence needs are met, and evaluating the effectiveness of pain management and skin integrity management. Staff should receive further education/training in best practice as outlined in the provider’s continuous improvement plan.

### 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 service to ensure a consumer’s condition is accurately monitored and documented so that any changes or deterioration in a consumer is readily recognised and responded to in a timely manner. Ensure all staff are trained in recognising deterioration in consumers and trained in the resources and processes available within the service to assist them to recognise, escalate and respond to deterioration.