Helping Hand Aged Care - Lealholme Port Pirie

Performance Report

15 Halliday Street
PORT PIRIE SA 5540
Phone number: 08 8633 3233

**Commission ID:** 6173

**Provider name:** Helping Hand Aged Care Inc

**Assessment Contact - Site date:** 21 September 2021 to 22 September 2021

**Date of Performance Report:** 14 October 2021

# Performance report prepared by

Michelle Glenn, 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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 - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with consumers, representatives, staff and others
* email correspondence from the provider dated 7 October 2021 indicating the assessment report is reflective of the visit and, as such, will not be submitting a response

the Performance Report dated 25 August 2021 for the Assessment Contact conducted 25 May 2021 to 26 May 2021.

# 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

The Assessment Team assessed Requirement (3)(b) in Standard 3 Personal care and clinical care as part of the Assessment Contact. All other Requirements in this Standard were not assessed and, therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess the performance of the service in relation to Requirement (3)(b) in Standard 3. This Requirement was found Non-compliant following an Assessment Contact conducted 25 May 2021 to 26 May 2021 where it was found the service had not demonstrated that high impact or high prevalence risks associated with the care of each consumer had been effectively managed. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the Assessment Contact and have recommended Requirement (3)(b) met.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Helping Hand Aged Care Inc, in relation to Helping Hand Aged Care – Lealholme Port Pirie, Compliant with Requirement (3)(b) in Standard 3 Personal care and clinical care. I have provided reasons for my finding in the specific Requirement below.

### Assessment of Standard 3 Requirements

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

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

The service was found Non-compliant with Requirement (3)(b) following an Assessment Contact conducted 25 May 2021 to 26 May 2021 where it was found the service had not demonstrated that high impact or high prevalence risks associated with the care of each consumer had been effectively managed. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Implemented a high risk prevalence register outlining each individual consumer’s complex needs.
* Reviewed all clinical governance processes, including in relation to diabetes, falls, weight loss, advance care directives and pressure area care.
* Updated and redeveloped care assessments reflecting the first person and goal orientated plans.
* Undertaken a full review of the handover process.
* Training for staff relating to the Serious Incident Response Scheme and restrictive practices.
* Implemented a Resident of the day process. The process includes a comprehensive review of the consumer, clinical observations, review of assessments and a care review of consumers’ needs.
* Adapted and refined the Restrictive practices spreadsheet.
* Implemented a structured investigation tool for all consumers following a fall.
* Updated the post falls management protocol and implemented a falls risk register.

Information provided to the Assessment Team by consumers and staff through interviews and documentation sampled demonstrated:

* The service demonstrated effective management of high impact or high prevalence risks associated with the care of each consumer.
* Most consumers sampled considered that they receive personal care and clinical care that is safe and right for them.
* One consumer indicated they were happy with pain management being provided to them.
* Two consumers stated they were happy with the care they receive in relation to management of their specialised care needs.
* A sample of six consumer files sampled demonstrated identification and appropriate management of high impact or high prevalence risks, including falls, pain, specialised care needs and restrictive practices.
* In response to high impact or high prevalence risks, care files sampled demonstrated additional monitoring and reassessments occur, management strategies are reviewed and/or new strategies implemented and care plans are reviewed and updated.
* Staff sampled described strategies to manage consumers’ identified high impact or high prevalence risks in line with care plans.
* Staff described processes to escalate care where changes in a consumer’s condition are identified.
* Clinical staff described processes for managing pain and falls, including post falls monitoring, in line with the service’s processes.

For the reasons detailed above, I find Helping Hand Aged Care Inc, in relation to Helping Hand Aged Care – Lealholme Port Pirie, Compliant with Requirement (3)(b) in Standard 3 Personal care and clinical care.

# 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

The Assessment Team assessed Requirement (3)(a) in Standard 7 Human resources as part of the Assessment Contact. All other Requirements in this Standard were not assessed and, therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess the performance of the service in relation to Requirement (3)(a) in Standard 7. This Requirement was found Non-compliant following an Assessment Contact conducted 25 May 2021 to 26 May 2021 where it was found the service had not demonstrated that staff were available to ensure consumers were provided with care in a timely manner or in accordance with their needs and preferences. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the Assessment Contact and have recommended Requirement (3)(a) met.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Helping Hand Aged Care Inc, in relation to Helping Hand Aged Care – Lealholme Port Pirie, Compliant with Requirement (3)(a) in Standard 7 Human resources. I have provided reasons for my finding in the specific Requirement below.

## 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.*

The service was found Non-compliant with Requirement (3)(a) following an Assessment Contact conducted 25 May 2021 to 26 May 2021 where it was found the service had not demonstrated that staff were available to ensure consumers were provided with care in a timely manner or in accordance with their needs and preferences. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Developed a position statement to guide staff in minimising extended call bell response times and to provide targeted response times.
* Reviewed workforce sufficiency, recruitment plan and rostering strategy, including:
	+ Development of guidelines and considerations to provide guidance on workforce planning, rostering, leave management and reprioritising of responsibilities.
	+ Recruited 40 new staff, including Residential services manager, Care services manager, clinical staff, care staff, hotel services support staff, housekeeping team leader and administration staff.
* Reviewed role and position statements for hotel services and cleaning staff.
* Workforce survey to understand workforce satisfaction and implementation of workforce engagement program, workforce and staff appreciation days and increased visibility of management to provide coaching and support to staff.
* Daily monitoring of unfilled shifts and strategies to fill shifts due to unplanned leave, including use of electronic application.

Information provided to the Assessment Team by consumers and staff through interviews and documentation sampled demonstrated:

* The service has processes to ensure 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.
* Most sampled consumers stated they are happy at the service and with the level of care provided.
	+ Consumers stated staff are nice, they are happy with their care and satisfied with call bell response times.
* Staff sufficiency forms are completed and are based on assessment of consumer acuity, occupancy rates, clinical indicators and call bell response times. The forms are completed quarterly, however, staffing mix and level can be adjusted as required to meet consumer needs.
* There are processes to manage staffing shortfalls.
* Recruitment is ongoing to ensure staffing levels are maintained.
* Staff sampled stated that since staffing numbers have increased, they are able to spend more time with consumers and they go home feeling they have done a good job.
* Random sampling of call bell response times over 10 minutes occurs and are followed up with the consumer to understand impact and reflective practice processes are completed for staff involved.

For the reasons detailed above, I find Helping Hand Aged Care Inc, in relation to Helping Hand Aged Care – Lealholme Port Pirie, Compliant with Requirement (3)(a) in Standard 7 Human resources.

# 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.