Japara Brighton-Le-Sands

Performance Report

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**Commission ID:** 2484

**Provider name:** Japara Aged Care Services Pty Ltd

**Assessment Contact - Site date:** 4 December 2020

**Date of Performance Report:** 5 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

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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.

# 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 did not assess all requirements of this Standard and therefore an overall compliance rating for the Quality Standard is not provided.

### 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.*

Consumers interviewed by the Assessment Team stated they were happy at the service and received the care they needed. Consumers said the service was very quick to notify their doctors when they needed to see them. A number of consumers stated they received medications at appropriate times and their pain was managed. Consumers receiving psychotropic medication were observed by the Assessment Team to be alert.

Staff were able to describe the personal care and clinical care needs of consumers in their care. They said they were able to contact a registered nurse by phone if necessary.

The service’s quality management team was responsible for updating procedures to ensure current best practice. Staff were informed of updates by email. The quality manager said all staff had access to best practice resources on the organisation’s intranet.

In relation to specific clinical care, the Assessment Team established that a three-day assessment of a consumer was conducted before a restraint was applied, including a risk assessment and consultations with the consumer, their family and the consumer’s doctor. The service ensured staff were educated in using restraints.

Skin assessments were completed for all admissions and annually or as required. Registered nurses were responsible for evaluating wounds and completing wound assessments. Referrals were made to a wound clinical nurse consultant if wounds did not improve.

Consumers were assessed for pain on admission or when consumers complained of pain or after a fall. In addition to medications, staff were encouraged to apply non-pharmacological pain relief.

Dietary lists were kept by the kitchen to inform staff of consumers requiring thickened fluids and modified diets. Consumers’ weights were monitored monthly or more intensively following weight loss. Consumers were reviewed by a dietician.

Based on the Assessment Team’s findings, I find this requirement is Compliant.

### 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.*

Consumers interviewed by the Assessment Team said they believed the staff were very good with infection control and would be able to manage an outbreak. Consumers and representatives said staff monitored them for symptoms of Covid-19.

Clinical and other staff were able to describe strategies to ensure antibiotics were used appropriately. All staff interviewed understood and acknowledged the importance of hand hygiene in minimising infections and confirmed that they had attended infection control training.

The service recorded all staff flu vaccination dates and obtained copies of vaccinations from staff and visitors.

The service conducted daily Covid-19 screening of each consumer that included taking their temperature and observing consumers for other signs of illness.

The service had notice boards, signs, posters and other sources of information throughout the facility for staff, consumers and visitors on infection prevention and control, including hand hygiene and social distancing.

Based on the Assessment Team’s findings, I find this requirement is Compliant.

# STANDARD 7 Non-compliant 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 did not assess all requirements of this Standard and therefore an overall compliance rating for the Quality Standard is not provided.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Non-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 interviewed by the Assessment team stated they received quality care and services from people who were knowledgeable, capable and caring. Consumers complimented the staff on their quiet and attentive manner and were appreciative of the care they provided. Consumers said staff did not rush them, although several consumers stated they were concerned about the length of time staff could take to respond to call bells. Some consumers said it was 20 to 30 minutes before their call bell was answered. Some consumers also stated that due to staff being busy, they did not always get a shower at their preferred times.

All consumers interviewed said they were satisfied with the leisure and lifestyle activities. Staff from the leisure and lifestyle team indicated they were supported to provide activities and had enough time to do so. The leisure and lifestyle staff indicated they were satisfied with the number of staff employed and stated that an additional member of staff had recently commenced.

All consumers interviewed indicated satisfaction with the cleaning and maintenance services, both in their rooms and in the common areas. Cleaners interviewed indicated that they had adequate time to attend to their tasks.

Staff confirmed that vacant shifts were mainly filled by staff employed by the service.

Generally, staff said they didn’t feel they were rushed to do their work although sometimes it was busy.

Meeting minutes sighted and discussions with staff indicated that management consulted with consumers and staff on the adequacy of staff. Based on feedback, the recruitment of additional clinical and care staff had commenced.

I note that the service had a recruitment exercise underway at the time of the Assessment Contact visit. However, at the time of the visit, the Assessment Team identified concerns that requests for assistance were not responded to in a timely manner. I find the service has not established that it provided care and services to consumers when needed or that the service had sufficient staff to provide quality care and services. Therefore, 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 7(3)(a) – Ensure that the service’s 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.