Japara Trugo Place

Performance Report

120 Mason Street
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**Commission ID:** 3998

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

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

**Date of Performance Report:** 22 June 2021

# 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Non-compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Non-compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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 21 May 2021.

# STANDARD 2 Non-CompliantOngoing 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

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 – reviewing their care planning documents in detail, asking consumers about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.

Not all sampled consumers considered they felt like partners in the ongoing assessment and planning of their care and services. In particular, two consumers did not have behaviour assessments and behaviour management care plans following a priority one incident. Representatives of both consumers expressed dissatisfaction with how the service engaged them as partners following the incident.

For example:

* Care planning documents provided did not always show evidence of assessment and care planning information for consumers. Care documents that were created contained consumers’ goals, preferences, health risks and individual preferences.

The Quality Standard is assessed as Non-compliant as one of the requirements in the Standard has been assessed as Non-compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Non-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.*

The Assessment Team found:

* Care documentation viewed did not always evidence that care planning includes relevant assessment and risk identification.
* While staff interviewed knew consumers’ risks and described strategies to ensure their safe and effective care this was not evident within all care planning documentation.
* Care planning documents did not always provide evidence of initial and ongoing assessments and risk assessments that meet the changing needs and preferences informing the delivery of safe and effective care and services.

The approved provider’s response to the Assessment Team report included a detailed Plan for Continuous Improvement and outcomes to date to:

* Provide Care Evaluation training to all Japara Leadership, Nursing and Care staff
* Inform all residents of the new process of evaluating their care.
* Review and improve admission process to include care consultation at specified times and including resident preference in the care plan.
* Review targeted resident’s assessments and care plans and initiate specialist reviews and update care plans accordingly.
* Audit all resident assessments.
* Educate and train all Registered Nurses on review and updating of care plans within 24 hours and Serious Incident Response Training (SIRS).
* Review the process of behaviour charting.
* Educate and train all Registered Nurses about behaviour charting - assessment and documenting behaviour, including details relating to triggers, interventions and outcomes and charting

Whilst I acknowledge the planned education and actions taken by the approved provider to address the deficits in consumers’ care plans it will take time to determine the effectiveness of these actions and to ensure they inform thedelivery of safe and effective care and services. I therefore find this requirement Non-Compliant.

# STANDARD 3 Non-CompliantPersonal 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 other relevant documents.

Most sampled consumers considered that they receive personal care and clinical care that is safe and right for them. However, the Assessment Team found that the service did not adequately assess and manage behaviours for two consumers.

For the consumers in the Assessment Team’s sample, clinical processes were observed for most clinical areas. Some examples of different clinical needs demonstrated the effective management of individualised risk relevant to each consumer. However, the Assessment Team found that the absence of behaviour management processes for two consumers may place them at increased risk of further incidents of aggression towards each other.

The Quality Standard is assessed as Non-compliant as one of the requirements in this Standard has been assessed as Non-compliant.

### 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.*

### 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:

* For the consumers sampled, clinical processes were observed for most clinical areas.
* Some examples for different clinical needs demonstrated where there was individualised risk relevant to that consumer and how the risks are managed by the service.
* The service did not assess the behavioural care needs of two consumers, nor did they implement a behavioural care plan for either consumer. This absence of effective behaviour management placed consumers at increased risk of further behaviours of concern.

The approved provider’s response to the Assessment Team report included a detailed Plan for Continuous Improvement and outcomes to date to:

* Review the behaviour assessments for the two consumers.
* Provide education and training on behaviour assessment, review and care plans including assessment and documenting behaviour, including details relating to triggers, interventions and outcomes and charting.

I acknowledge the actions taken by the approved provider to address the deficits identified by the Assessment Team, including reviews, assessments, care consultations and education in place for a range of staff. However, I also consider that not assessing the behavioural care needs of consumers to be an area of potential risk for consumers. The outcomes from actions undertaken and improvements from education will take time to be fully implemented. Consequently, I find this requirement is Non-Compliant.

# 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

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Most consumers considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring.

For example:

* Most consumers and representatives interviewed are satisfied that the number and mix of staff meets their needs.

An overall rating for this Quality Standard is not given as only one of the five specific requirements has been assessed.

## 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.*

# 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.

* Ensure all consumers have individualised care plans that are informed by assessments that include the consideration of risk.
* Ensure staff receive effective training and support to enable them to complete assessments, care plans and reviews of consumers’ care needs and to provide effective care through understanding of triggers for behaviour, strategies for intervention and management and
* undertake regular review of effectiveness in relation to managing identified behaviour and mitigating risk associated with behaviours.