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Performance Report

27 Prisk Street
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**Commission ID:** 7884

**Provider name:** Uniting Church Homes

**Site Audit date:** 20 October 2020 to 22 October 2020

**Date of Performance Report:** 18 January 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 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| 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 Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 COMPLIANT 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

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers are treated with dignity and respect and the service and staff value each consumer’s unique identity, culture and diverse needs. Consumers stated staff respect their privacy including during the provision of care when staff ensure the consumer’s dignity is maintained. Consumers confirmed the service encourages them to make decisions about their care and the staff support them in their choices including where risks are involved, or the consumer has a cognitive impairment. Consumers confirmed they are supported to maintain relationships of their choosing including within and outside the service.

The service has systems to identify and communicate to those providing care the individual, cultural and unique needs and identity of each consumer. Decisions in relation to consumers’ choices and others’ consumers would like involved in decisions about their care are gathered and documented in consumers’ care plans. Where consumers choose to take risks to do the things they enjoy the service consults with them and implements strategies to support them to continue doing the things they choose, and these are documented in a care plan. Staff provided examples of giving consumers information in ways which the consumer could understand and enabled them to make choices.

Observations show the staff treat consumers with dignity and respect and provided care and interactions which demonstrated an understanding of individual consumer’s identities. Consumers were observed to have their privacy maintained and staff stored and discussed confidential consumer information appropriately.

## 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.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANT 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

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers feel like partners in the ongoing assessment and planning of their care. Consumers confirmed they are involved in care planning to the extent they wish to be involved, and they feel the organisation listens to what the consumer wants. Consumers and their representatives confirmed the service identifies the consumers’ preferences in relation to care and provides an opportunity to discuss advance care directives and end of life wishes. Consumers and their representatives confirmed regular meetings occur to discuss care and they are informed when changes or incidents occur.

The service has a comprehensive suite of assessment and care planning tools and guidance to support staff in completing assessments. Consumers’ assessments and plans viewed demonstrated consumers’ needs and preferences are identified through assessment on entry to the service, risk assessments are completed to identify any risks associated with the care of the consumer. Care plans have the consumers’ goals and preferences documented and have clear strategies to direct staff in the provision of care and in managing risks. Consumers’ assessments and plans are developed in consultation with specialists and others providing care including medical officers, physiotherapists and nurse practitioners. There is a planned approach to reviewing and evaluating assessments and plans including on a regular basis and when changes or incidents occur.

## Assessment of Standard 2 Requirements

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

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### 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.*

### 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.*

### 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.*

# STANDARD 3 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

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

Consumers and representatives interviewed confirmed they consumers receive personal and clinical care which is tailored to consumers’ needs, including medication and pain management and assistance with showering and personal hygiene. Consumers and their representatives confirmed consumers with complex clinical needs are provided safe and quality care and risks associated with the consumers’ clinical care including pain, falls and weight loss are managed effectively.

Staff interviewed confirmed they provide personal and clinical care to consumers in line with the documented assessed needs including implementing appropriate strategies to manage risks associated with consumers’ care. Incident reports show consumers’ incidents are reported and appropriate investigation and actions are taken to identify and manage risks, changes and trends in the consumers’ care needs. Consumers’ files viewed demonstrated consumers nearing the end of life are identified and appropriate care is implemented to manage consumers’ needs to ensure comfort and dignity are maintained. Staff interviewed they have access to current consumer information and verbal and written handovers are effective at communicating changes in consumers’ care needs. Consumers’ files viewed confirmed where health specialists and medical officers are involved in the assessment and planning of consumers’ clinical needs the information is documented and communicated to those providing care and referrals to others occur in a timely manner.

### 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) Compliant

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

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### 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.*

### 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.*

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

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

### 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.*

# STANDARD 4 COMPLIANT Services and support for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers received the services and supports for daily living that are important for their health and well-being and that enables them to do they things they want to do. Consumers confirmed they are assisted to engage in a variety of meaningful activities of their preference including spending time with family and friends, engaging with the community. Consumers confirmed the service supports them to maintain their cultural and spiritual practices and staff encourage and support consumer independence. Consumers confirmed staff spend time with them to support their social and emotional needs. Consumers confirmed they are provided quality meals to suit their needs and alternative choices to the main meal are available and there are always snacks including fruit, biscuits and sandwiches available between meals.

The service has processes to consult with consumers and their families to identify what is important to consumers and what supports and services they require to enhance their quality of life. Consumer files viewed show assessments are completed and care plans are developed which are tailored to each consumer’s lifestyle needs to direct staff in supporting consumers in line with consumer preferences including required equipment to promote independence. Staff interviews confirmed there are dedicated lifestyle staff seven days a week to provide assistance to consumers to engage in activities and provide emotional and social support. The service provided examples where volunteers are utilised to provide additional social and emotional support to consumers. Staff preparing and delivering meals for consumers have access to consumers’ current dietary needs and preferences. Equipment used by consumers was observed to be clean and well maintained and documentation confirmed procedures are in place to ensure the safety of all equipment used by consumers.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

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

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT 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

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed they feel they belong in the service and feel safe and comfortable in the service environment. Consumers confirmed they have access to indoor and outdoor living areas and family and visitors are made to feel welcome in the environment.

The service is a modern four-storey building built in 2019 which has single rooms with private bathrooms, with connecting rooms to cater for couples. The service was observed to be clean, uncluttered and easy to navigate. Indoor and outdoor areas are inviting, and furniture and fittings are fit for purpose.

The service has effective processes for scheduled and as required cleaning and maintenance of the environment and equipment. The service ensures equipment is safe for use including providing staff training on the safe use of equipment, and staff confirmed reporting processes for hazards or faulty equipment.

## 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.*

### 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.*

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANT 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

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed they feel comfortable and supported in raising complaints and providing feedback and are confident management responds appropriately and values their feedback. Consumers provided examples where improvements and changes had been made as a result of their feedback and complaints.

The service maintains a complaint register which records all complaints and actions taken to resolve the complaints. Monthly reports include a summary and trending of complaints. Management provided examples on managing recent complaints including through consultation and meetings with the complainant and provided examples of improvements implemented as a result of feedback.

The service actively supports and encourages consumers and their representatives to provide feedback and complaints through a variety of methods and information on how to make a complaint is available throughout the service and in the consumer handbook. The service completes surveys and holds regular meetings to provide other opportunities to gather consumer feedback. Staff interviewed confirmed they support consumers in making complaints and ensure verbal feedback is communicated to management.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

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

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

# STANDARD 7 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 Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed described staff and management as kind, caring, friendly and skilled in their roles. Consumers confirmed staff are knowledgeable and know what they are doing and provide a high level of care. Consumers and their representatives confirmed there are sufficient numbers of staff to provide care in line with consumers’ needs.

The service demonstrated it is continually reviewing staffing levels based on consumers’ needs, to ensure quality care and service are delivered. Staff rosters and allocations show appropriate numbers and skill mix of staff and vacant shifts are filled. The service provides staff effective training on commencement of employment and on an ongoing basis to ensure staff are competent and skilled in performing their roles. The performance of staff is monitored through performance reviews and as required review of staff performance when issues arise. The service monitors and records staff qualifications, police certificates and training to ensure all are current and in line with legislative requirements.

## 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.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### 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.*

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

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

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

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

# STANDARD 8 COMPLIANT 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

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

Consumers interviewed confirmed they feel the service is well run and the service involves them through feedback processes to be involved in the evaluation and development of care and services.

The service has governance systems supported by the wider organisation and overseen by a Board who is accountable to the delivery of care and services and receives regular reports and information on the service. Policies and procedures guiding the delivery of care and services and the governance of the service, are reviewed regularly and updated when required to reflect changes, improvements and ensure the service meets its regulatory responsibilities. The service has effective governance systems in place to monitor and manage information, the workforce, feedback and complaints, financial management and ensure continuous improvement is imbedded.

The service has an effective risk management framework to guide staff practice in identifying, reporting and managing risks associated with the care of consumers and in their response to elder abuse. Incident reports, meeting minutes and consumer records show staff practice is consistent with the organisation’s expectations and policies in relation to risk management.

The service has a clinical governance framework which is effective at ensuring the service has access to policies and guidelines on infection control, antimicrobial stewardship, minimising the use of restraint and the use of open disclosure when things go wrong. Management and staff were able to demonstrate the service effectively implements the clinical governance policies and monitors and reports on infections, clinical incidents and restraint use.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### 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.*

### 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.*

### 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.*

### 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.*

# 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.