Leslie Place Aged Persons Hostel

Performance Report

6 Cedar Street
KILLARNEY QLD 4373
Phone number: 0746641488

**Commission ID:** 5228

**Provider name:** Killarney Memorial Aged Care Ltd

**Assessment Contact - Site date:** 12 January 2021 to 13 January 2021

**Date of Performance Report:** 16 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 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 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 Infection Control Monitoring Checklist completed at the time of the Assessment Contact.

# 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

Consumers and representatives spoke highly of staff and said that staff valued the consumers. They described how staff understood consumers’ needs and preferences, were familiar with their cultural background, former occupation and family relationships; they said staff knew how the consumers liked to spend their time.

Consumers described how staff support them to exercise choice and to maintain relationships and their independence. They said they were provided with information about activities, meals and other care related services to assist in their decision making. Consumers said they received an information package on entering the service and had access to newsletters, consumer meetings and minutes, and an activities calendar. They said they were supported to take risks and enjoyed the freedom they had living at the service.

Staff consistently spoke in a respectful manner about consumers and understood their personal circumstances and life experiences. Staff could describe consumers’ interests including their spiritual and religious preferences as well as how the care they deliver is influenced by the consumers’ preferences.

Staff explained how they support consumers to make choices that involve an element of risk and said the service undertakes risk assessments and implements risk minimisation strategies to support consumer safety. The outcomes arising from these discussions were evident in the consumers’ care planning documentation.

Staff described how consumers’ information is stored in a password protected computer or held in secured work areas. Private information can only be accessed by those staff who need the required information.

Care planning documentation generally included information on the consumers’ life journey, cultural background, spiritual preferences, family relationships and individual personal preferences. Information about authorised decision makers and consumers’ Enduring Power of Attorney was included in the consumers’ files. The Assessment Team identified that in some instances information in care plans did not reflect consumers ‘current care and lifestyle preferences and the management team commenced addressing this at the time of the Assessment Contact. The Assessment Team found however, that staff demonstrated a sound knowledge and understanding of consumers and this information was discussed at handover and was included in progress notes.

Staff were observed to treat consumers with dignity and respect, to protect their privacy and to and to greet them in a manner that was familiar and friendly. Privacy was respected. Visitors were warmly welcomed to the service and were observed meeting with consumers both inside and outside the service.

Education and training were provided to staff and include dignity, respect and the Aged Care Quality Standards. A compulsory orientation program is conducted for new staff and includes Code of Conduct, privacy and confidentiality.

Policies and procedures specific to this Standard provide guidance for staff in relation to diversity and the organisation’s mission, vision and values reflected the expectation that people are to be treated with respect.

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

## 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 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

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## 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.*

Consumers and representatives were satisfied with the delivery of care and services and with the skills and knowledge of the workforce. Consumers and representatives said staff attend to their requests for assistance promptly and understand their needs.

Staff said they have sufficient time to complete their duties each day and that vacant shifts are filled. They said that they are busy and work together as a team to complete their work. Staff said they have regular handover and have access to consumers’ care planning documentation. They said if they require further advice or guidance about care delivery then they liaise with the registered nursing staff. Registered staff explained how they can escalate their concerns if a consumer deteriorates and this can include transferring a consumer to hospital or contacting staff at the local emergency department.

Management and staff said that a roster is developed in advance and that in the event staff take unplanned leave, then this is filled by casual staff. The Assessment Team confirmed that there were no vacant shifts in the roster in recent weeks. Staffing is monitored by reviewing call bell response times to track those calls that exceed the service’s maximum waiting time.

For the reasons detailed, this requirement is Compliant.

# 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.