Lions Haven For The Aged

Performance Report

9 Pendraat Parade
HOPE ISLAND QLD 4212
Phone number: 07 5530 8966

**Commission ID:** 5188

**Provider name:** Lions Haven for the Aged Limited

**Assessment Contact - Site date:** 1 July 2020

**Date of Performance Report:** 11 August 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(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 including 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 24 July 2020.

# STANDARD 2 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 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.*

The Assessment teams evidence demonstrates

* Registered staff complete initial assessments to identify consumers’ needs, choices and preferences and assessment and care plans are reviewed regularly and when there are changes in consumers status.
* Assessment and care plans are individualised and contain information relative to the risks to each consumer’s health and wellbeing. Care staff advised this information, as well as shift handovers, guide them in the delivery of safe and effective care and a copy of the care plan is available in the room for consumers.
* Staff interviewed demonstrated they are aware of the assessment and reassessment processes, which identifies risks to consumers’ safety, health and well-being. These risks included skin integrity, falls, nutrition and hydration, medication management and pain.
* Consumers/representatives confirmed the service involves themselves, MOs and other allied health professionals in the assessment process as required.

This requirement is Compliant.

# 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 Requirements

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

A review of consumers care planning documentation including care plans, progress notes and clinical monitoring charts, demonstrates many consumers generally get safe and effective care, which is tailored to their needs and optimises their health and well-being

However, the Assessment Team identified a consumer with a recent change in their health status. This change had not been escalated to enable reassessment and a review of the care plan and staff made a care decision outside of their scope of practice and were delivering care outside of the care plan.

The Assessment Team’s report and the approved providers response demonstrates that once this issue was raised with the service, action was taken. However, it was the Assessment Team that identified the concern and not the service itself.

The requirement is noncompliant because on the day of the assessment not all consumers were getting safe and effective care and the service did not identify this.

# 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 3(3)(a)

*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.*

The service has

* systems in place to identify and apply up to date guidance on best practice for delivering personal or clinical care
* systems in place to monitor whether personal and clinical care is tailored and delivers care in line with the consumer’s need, goals and preferences.
* systems to monitor the effectiveness of care practices in meeting this requirement
* staff who are competent and have the knowledge to provide personal and clinical care that is tailored to the consumer.