Mona Tait Gardens

Performance Report

160 Ellenborough Street   
Kaleen ACT 2617  
Phone number: TBA

**Commission ID:** 2918

**Provider name:** Morshead Home for Veterans and Other Aged Persons Limited

**Assessment Contact - Site date:** 29 January 2021

**Date of Performance Report:** 18 March 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

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| --- | --- |
| **Standard 1 Consumer dignity and choice** |  |
| Requirement 1(3)(c) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(a) | 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 24 February 2021

# STANDARD 1 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

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, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

All consumers sampled said that they could make their own choices and decisions and felt the service respected their independence, including those who they want involved with their care. Staff were able to describe how they work with consumers to support them to exercise choice and independence, and communicate decisions about their care, services and relationships of choice.

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

## Assessment of Standard 1 Requirements

### 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.*

The Assessment Team found that the service demonstrates that each consumer is supported to exercise choice and independence, including to make decisions about their own care and the way care and services are delivered, making decisions about when family, friends, carers or others should be involved in their care, communicating their decisions, and making connections with others and maintain relationships of choice, including intimate relationships.

The Assessment Team provided information that all consumers interviewed confirmed they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. All consumers interviewed described how they were supported to exercise choice, maintain their independence and maintain relationships.

I am of the view that the approved provider complies with this requirement as they have demonstrated in practical ways how each consumer is supported to exercise choice and independence.

# STANDARD 2 NON-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

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.

Most sampled consumers and consumer representatives said they felt satisfied in relation to the ongoing assessment and planning of consumer care and services. However, the detail in consumer’s care plans was observed to contain minimal individualised information and updates to changes in consumer care needs.

For example:

* Consumers and consumer representatives sampled said they were not provided with a copy of the care plan following admission to the service or after case conference meetings. Nursing staff who conduct both types of interviews/reviews confirmed that they do not provide or ask the representatives if they want a copy of the care plan at the completion of the meeting, however if the consumer or representative were to request a copy then they would be given.
* The majority of the consumer assessments and care plans reviewed were not fully completed, contained some inaccuracies or were not entirely reflective of the consumer’s current care needs and preferences.
* Care plans show nominal input from the consumers or their representatives and the goal section on the care plans is made up of generic tick box statements that are routinely all selected despite the consumer’s individual needs and wants.
* Some staff were unable to identify when a review of a care plan or risk assessment was to occur, or how the service’s care planning and assessment process ensured safe and effective care for consumers.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have 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 that the service did not demonstrate that 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 provided information that consumer’s assessments and care planning documents have a number of deficiencies identified that could compromise the delivery of safe and effective care and services. Care plan documents did not clearly identify when the consumers care needs changed and if the care plan was updated in a timely manner to reflect those changes. Care plans also had incomplete individual assessment information for consumers, particularly in the areas of spiritual, emotional, intimacy, relationships, goals and leisure activities. Care plans were also identified with conflicting or incorrect information within the care plan, that could jeopardise effective care for those consumers. While some care plans detailed risks to consumers health and well-being, strategies for mitigating those risks were not available.

The approved provider in its response to the Assessment Team’s report has committed to a review of all care plans of consumers named in the report. The approved provider has supplied a plan for continuous improvement and has not refuted the Assessment Team’s findings of the service at the time of the audit. The approved provider will need to monitor and evaluate these changes carefully to ensure they are effective and are sustainable.

I am of the view that the approved provider does not comply with this requirement as they have not demonstrated how they effectively consider the risks to consumers health and well-being when undertaking assessment and planning.

# 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.

All consumers interviewed indicated they get quality care when they need it and from people who are knowledgeable, capable and caring. For example:

* They receive assistance from staff in a kind and caring way.
* They do not feel that staff are rushing them during care and service delivery and they generally do not have to wait long before staff respond to their calls for assistance.
* They are confident that staff are well trained, competent and skilled in the care they provide.

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.*

The Assessment Team found that the service demonstrates that 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.

The Assessment Team provided information that all consumer feedback was positive with consumers saying they get the care and services they need. Consumers said call bells are answered in a timely manner most of the time. The service’s roster/staff allocation sheets show that vacant shifts are filled which staff confirmed when interviewed. A sample of average call bell response times for ten consumer rooms demonstrated nine of these rooms had an average call bell response time of less than five minutes, with average response times ranging from around one minute to just under five minutes for those nine rooms.

I am of the view that the approved provider complies with this requirement as they have demonstrated the workforce enables the delivery and management of 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.

### Requirement 2(3)(a)

*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.*

Demonstrate that care is appropriate, safe and unique to each consumer’s needs, and that it is reviewed and evaluated in a timely manner. Staff are trained, equipped and supported in best practice in assessment and planning, and identification of risk. Ensure strategies are effectively documented.