Mona Tait Gardens

Performance Report

160 Ellenborough Street   
Kaleen ACT 2617  
Phone number: 2 6242 2500

**Commission ID:** 2918

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

**Assessment Contact - Site date:** 8 December 2021

**Date of Performance Report:** 4 January 2022

# Performance report prepared by

G Cherry, delegate of the Aged Care Quality and Safety Commissioner.

# 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

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |

# Detailed assessment

This performance report details the Commissioner’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 did not submit a response to the Assessment Contact - Site Report

# 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

Consumers were sampled, their care plans, assessments and relevant documents reviewed, and staff interviewed on how they ensure safe and effective care for consumers.

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

### 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.*

The service demonstrated an effective system to ensure consumers receive care reflective of best practice principles and tailored to their needs.

Review of documentation demonstrated regular review of care plans detailing individualised care needs relating to wound and pain management processes. Care planning documentation demonstrated various strategies implemented prior to the use of restrictive practices such as psychotropic medications. Consultation is sought prior to medication administration to ensure informed consent. There is a documented system monitoring the use of medications, including psychotropic medication of which the service demonstrated a recent reduction in use.

Most consumers expressed satisfaction pain is well managed and they get effective care tailored to their needs. The management team advised awareness of a delay in pain medication for a consumer.

Registered staff advised of training relating to pain management and restrictive practices and care staff gave examples of care provided and the process of escalating concerns to registered staff.

Policy and procedure documentation are available to provide guidance to staff, who also have availability to resources and research as necessary. The service’s continuous improvement plan detailed the process of implementation, monitoring and review when new processes are introduced as a result of identified deficits.

I find 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.