Myvista Mirrabooka

Performance Report

3 Doncaster Road
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**Commission ID:** 7419

**Provider name:** Stirling Ethnic Aged Home Association (Inc)

**Assessment Contact - Site date:** 3 June 2020

**Date of Performance Report:** 2 July 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** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| 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.

# STANDARD 2 COMPLIANTOngoing 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 one of the five specific requirements have been assessed as Compliant. The Assessment Team assessed Requirement (3)(a) in relation to Standard 2. All other requirements in this Standard were not assessed.

The Assessment Team recommended Requirement (3)(a) in Standard 2 as met. I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report to come to a view of compliance with Standard 2 and find the service is compliant with Requirement (3)(a).

Two consumers interviewed by the Assessment Team stated they were satisfied with assessment processes. Another consumer stated they would like allied health input into their care and only female staff to attend to their care needs. The Assessment Team provided this feedback to the management team who discussed actions that had been implemented.

The service demonstrated an initial assessment process with information gathered used to develop a care plan which is based on each consumer’s assessed needs and preferences. An assessment of risk is also completed during the initial assessment phase with discussions between staff and consumers relating to the risks undertaken and documented.

A sample of consumer files viewed by the Assessment Team demonstrated assessments have been or are being undertaken in line with the service’s processes. Staff interviewed described assessment and planning processes, including consultation with consumers. The Assessment Team noted there are policies and procedures available to staff to guide assessment and planning processes.

## 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.*

# STANDARD 7 COMPLIANTHuman 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 one of the five specific requirements have been assessed as Compliant. The Assessment Team assessed Requirement (3)(a) in relation to Standard 7. All other requirements in this Standard were not assessed.

The Assessment Team recommended Requirement (3)(a) in Standard 7 as met. I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report to come to a view of compliance with Standard 7 and find the service is compliant with Requirement (3)(a).

All three consumers interviewed by the Assessment Team stated staff are kind and caring and treat them like family. Consumers reported satisfaction with the current level of staff and felt confident they had access to qualified staff when they needed them. Consumers were also satisfied with the delivery of care and services and did not feel rushed when receiving personal care.

Staff interviewed by the Assessment Team stated they felt supported by the level of staffing currently in place at the service, confident in meeting the needs of consumers and are able to complete their tasks during their shift.

Rosters are developed based on consumer needs and acuity. There are processes to review rosters to ensure the delivery and management of safe and quality care and services. There are plans in place to ensure adequate staff numbers are allocated and maintained as consumer occupancy at the service increases.

## 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.*

# 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.

# Other relevant matters

I note that, whilst not assessed as part of the Assessment Contact, the Assessment Team has provided information in relation to Standard 5 Requirement (3)(c).

Two consumers and a representative interviewed by the Assessment Team were not satisfied with the air-conditioning system and also reported the showers take a long time to warm up. The Assessment Team discussed these issues with the management team and found:

* Issues with the air-conditioning system have been followed up over the past two weeks and the Assessment Team observed maintenance staff attending to the system on the day of the Assessment Contact.
* Issues with the water temperature have been reviewed by contractors and may not fully resolve until the service is at 80% consumer capacity. In the interim, to mitigate the problem, staff are required to turn on the washbasin taps to allow the water to come through the system each morning. The Assessment Team noted directives in relation to this process documented in the staff communication book.