Ozcare Mackay

Performance Report

15 Charlotte Street
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**Commission ID:** 5767

**Provider name:** Ozcare

**Assessment Contact - Site date:** 23 September 2020

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# 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 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | 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

Consumers and representatives stated they were involved in the initial assessment and ongoing care planning of the consumer’s care and they were informed about the outcomes of assessment and planning. They said they had access to their care and services plan if they wished. Consumers and representatives said the service sought input from other providers who were involved in the consumer’s care, including medical officers, allied health professionals and family members.

Care plans evidenced the involvement of consumers and their representatives in the development of care plans and the regular review of care plans. Care plans were individualised and contained information relevant to the risks to each consumers’ health and well-being. Care planning documentation included advanced care planning and end of life planning. Staff advised they had access to care plans for consumers through the electronic care management system.

Staff advised they were aware of consumers’ needs, goals and preferences. Staff were given information about care needs during handover at the start of each shift. Staff were able to describe to the Assessment Team the relevant risks to consumers’ health and well-being, including pain, skin integrity and falls.

The service has organisational policies, procedures and guidelines regarding assessment, reassessment and care planning processes, including referral and review by allied health professionals on return from hospital. The service also had policies for palliative care and end of life care planning to guide staff practice. Staff have access to training relevant to their position.

Registered staff interviewed by the Assessment Team described the referral process to medical specialists and allied health professionals. There was a process for ensuring changes made by external professionals was communicated to the service and staff. The documentation evidenced referrals to medical officers and allied health professionals and external specialist clinics including local hospital services.

The service monitored clinical indicators, including skin integrity, pressure injuries, medication incidents, falls and incidents of hospitalisation.

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

## 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.*

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

### Requirement 2(3)(d) Compliant

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 COMPLIANTPersonal 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

Most consumers and representatives said that consumers get the care they needed and they had access to medical officers or other health professionals when they needed it.

Care planning documents reflected the identification of, and response to, a deterioration or a change in a consumer’s condition or health status. Clinical records reflected referrals to a range of allied health and other professionals including physiotherapists, podiatry, dieticians and a dementia advisor, and demonstrated directives were being implemented and followed.

Progress notes and other documents reflected individualised care that was safe, effective and tailored to the specific needs and preferences of the consumer. A review of care documentation by the Assessment Team evidenced risks associated with the care of consumers were identified using formal assessment tools, and strategies to manage or minimise the risks were implemented. Assessments were linked to best practice models of care and included a range of risk-based assessments. The service collected and analysed data on falls, medication incidents, infections, wounds, behaviours of concern, weight change and use of restraint.

Staff identified pain as an issue with consumers entering the service and described how the service was addressing this issue through assessment, pain charting and regular pain medication if required.

The service said all consumers receive pressure injury prevention management, which included repositioning or other pressure relieving strategies or devices.

The psychotropic register provided by the service evidenced diagnosis, the medication prescribed, and consultation and review by a medical officer. Restraint authorisation documentation was in place and was reviewed regularly by the consumers’ medical officers. Regular monitoring was undertaken when restraints were in use.

The organisation’s palliative approach and end of life care documentation provided clear guidance for staff about commencing discussions with consumers and representatives, when reviews of advanced care plans should occur and the resources that were available to support staff and consumers. Registered nurses were on-site 24 hours per day and staff could also access medical officers, hospital services and other organisational expertise.

Staff had access to clinical information to guide them in recognising and responding to a deterioration or change in a consumer’s condition, including pain charts, weight monitoring charts, skin integrity and incident reports. Care staff described their responsibility to report any changes or deterioration in a consumer’s condition to the registered nurse immediately.

File reviews demonstrated that consumers experiencing behaviours as a result of living with dementia were referred to the organisation’s dementia advisor who reviewed the consumers and provided reports to guide care staff in managing the consumers’ challenging behaviours.

Staff demonstrated a knowledge of infection control practises relevant to their duties. They stated they received training in infection control, donning and doffing of personal protective equipment and handwashing competencies. Staff advised they had completed COVID-19 training as part of their orientation program. The service advised all staff have received an influenza vaccination.

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

### 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.*

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

### Requirement 3(3)(e) Compliant

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# 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.