Ozcare Noosa Heads

Performance Report

80 Cooyar Street
NOOSA HEADS QLD 4567
Phone number: 07 5473 6300

**Commission ID:** 5477

**Provider name:** Ozcare

**Assessment Contact - Site date:** 15 July 2020 to 16 July 2020

**Date of Performance Report:** 21 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(a) | Non-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
* the provider’s response to the Assessment Contact - Site report received 13 August 2020.

# 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 Approved provider 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.

Consumers and or their representatives feel like partners in the ongoing assessment and planning of the consumer’s care and services. Consumers and or their representatives expressed their satisfaction that they are generally involved in the consumer’s care planning to some extent. Consumers and or their representatives expressed satisfaction that they are informed about the outcomes of assessment and planning have ready access to the consumer’s care and services plan.

The Assessment Team identified assessment and care planning documents did not consider the risks to the consumer’s health and well-being, in relation to chemical restraint assessment and authorisation.

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 Approved provider does not demonstrate that assessment and planning considered risk to consumers requiring chemical restraint. Monitoring processes are not effective in identifying consumers requiring chemical restraint. While the Approved provider has taken action to rectify monitoring records to identify consumers requiring chemical restraint, these processes were not in place at the time of the Assessment contact.

#### The Assessment Team identified the register maintained by the Approved provider in relation to consumers requiring psychotropic medication was inaccurate and had not identified consumers receiving psychotropic medication, which would constitute chemical restraint. Therefore, fifteen consumers not identified by the Approved provider receiving chemical restraint had not been assessed in relation to the risks and consent had not been obtained from the consumers’ representatives.

#### The Approved provider in its written response to the Assessment Team’s findings, has acknowledged consumers with a diagnosis of dementia receiving psychotropic medication will now be considered as receiving chemical restraint and consultation with consumers’ Medical officers in relation to consent documentation required for the administration of chemical restraint has been commenced. The Approved provider has committed to a review of the psychotropic drug register following every medical officer visit involving a change to medications.

#### The Assessment Team provided evidence of physical restraint not being appropriately assessed by the Approved provider, in reviewing the response from the Approved provider in conjunction with the Assessment Team’s findings, I am satisfied with the Approved provider’s risk assessment, authorisation and monitoring processes in relation to physical restraint.

#### It is my decision that monitoring processes were not accurate to identify consumers requiring chemical restraint, and while the Approved provide has taken immediate steps to rectify this deficit, these actions were not in place at the time of the Assessment contact to assess the risk for consumers requiring chemical restraint, and these processes are in their infancy and will require time to be evaluated for their effectiveness. Therefore, it is my decision this Requirement is non-compliant.

### 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 COMPLIANT 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

To understand the consumer’s experience and how the Approved provider understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed, and staff were asked about how they ensure the delivery of safe and effective care for consumers. The Assessment Team also examined relevant documents.

Consumers receive personal care and clinical care that is safe and right for them and they have access to health professionals as they need it. Consumers receive the care they need and they feel safe. Consumers and or their representatives gave various examples of how staff ensure the care provided to consumers was right for them. Consumers are referred to their Medical officer or other health professional when required to meet their changing personal or clinical care needs.

A review of consumer files identified care planning reflects the identification of, and response to, deterioration or changes in condition and provide adequate information to support effective and safe sharing of the consumer’s care.

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.*

The Assessment Team recommended this Requirement was not-met based on evidence relating to consumers requiring chemical restraint not being identified by the Approved provider. I have come to a different decision to the Assessment Team and have concluded consumers are receiving safe and effective personal and clinical care.

While monitoring processes were not effective in identifying consumers requiring chemical restraint, it is my decision this does not translate to a lack of safe and effective care. There is no evidence to support consumers have been chemically restrained inappropriately or that care delivered does not optimise the consumer’s health and well-being. Consumers and or their representatives provided positive feedback in relation to the quality of care and services provided and the conduct and sufficiency of staff. Staff have an understanding of their roles and responsibilities and are aware of the individual needs of consumers.

Therefore, it is my decision this Requirement is compliant.

### 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

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.

* Assessment and planning processes are required to be inclusive of consumers requiring chemical restraint.
* Monitoring processes need to be accurate in identifying consumers requiring chemical restraint.