Pearl Supported Care

Performance Report

11 Waratah Crescent   
Fannie Bay NT 0820  
Phone number: 08 8646 1800

**Commission ID:** 7017

**Provider name:** Southern Cross Care (SA & NT) Incorporated

**Site Audit date:** 21 January 2020 to 23 January 2020

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **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 |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | 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 site audit; the site audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the Approved Provider did not provide a respond to the Assessment Teams’ report.

# STANDARD 1 COMPLIANT 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

The Quality Standard is assessed as compliant the six specific requirements have been assessed as compliant.

The Assessment found that overall consumers confirmed that 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.

The following examples were provided by consumers during interviews with the Assessment Team:

* Consumers interviewed described how staff made them feel respected and valued as an individual, they provided examples such as staff respecting their daily choices to attend or not attend activities, respecting when they preferred their hygiene care to be attended to and assisting them when required.
* Consumers interviewed confirmed that they are encouraged to do things for themselves and that staff know what is important to them.
* Consumers interviewed confirmed that their personal privacy is respected.
* Consumers sampled described how staff valued their culture, values and diversity, they provided examples such as staff respecting them as an individual, knowing what sports they used to play and now watch on television, talking about things that are of interest to them and supporting them to continue doing things of interest to them such as gardening

## Staff interviewed described how they assist individual consumers to continue doing what is important to them, such as maintaining relationships with people who are important to the consumer and assisting consumers with activities they enjoy. Documentation viewed detailed what is important to the consumer and that they are supported to take risks to enable them to live the best life they can

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

### Requirement 1(3)(b) Compliant

Care and services are culturally safe.

### 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 make connections with others and maintain relationships of choice, including intimate relationships.

### Requirement 1(3)(d) Compliant

Each consumer is supported to take risks to enable them to live the best life they can.

### Requirement 1(3)(e) Compliant

Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.

### Requirement 1(3)(f) Compliant

Each consumer’s privacy is respected, and personal information is kept confidential.

# STANDARD 2 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

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

The Assessment Team found that overall consumers interviewed confirmed that they feel like partners in the ongoing assessment and planning of their care and services.

The following examples were provided by consumers during interviews with the Assessment Team:

* Consumers interviewed confirmed that they are involved in their care planning. One consumer said they want to stay independent as much as possible, and love to water their plants/garden. They said staff assist them to achieve this goal. Care planning documents and staff interviews reflected this consumers’ goal and interest.
* Consumers interviewed confirmed that they are informed about the outcomes of assessment and planning and can have access to their care and service plans if they wish.
* Consumers interviewed confirmed that they are partners in their care and service. Consumers described how they and the people important to them are involved in assessment and planning, they provided examples such as their son or daughter’s involvement. Consumer representatives said they are contacted following any changes to their family member’s health condition and are asked for input in relation to their family member’s needs and preferences.

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.

Care plan reviews are completed six-monthly or as required by qualified staff. Care planning documentation viewed showed the consumer’s goals, needs and preferences are documented including advance care planning if the consumer wishes and that they are updated regularly or when circumstances change.

Care plans are individualised relative to the risks to each consumers health and well-being, for example, a consumer who smokes has a risk assessment in place to ensure their safety while smoking and a consumer who uses their gopher on outings has a risk assessment in place to ensure they are safe while out in the community.

## 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 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

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

The Assessment Team that found overall consumers interviewed consider that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers interviewed confirmed that they get the care they need.
* Consumers interviewed confirmed that they have access to a doctor or other health professionals when they need it.

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 – 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 team also examined relevant documents.

* Assessment and care plans are reviewed six-monthly or as required to ensure consumer’s needs, goals and preferences remain current, with interventions to optimise consumers’ health and well-being.

### 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.

# STANDARD 4 COMPLIANT Services and support for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

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

The Assessment Team found that Consumers interviewed confirmed they get the services and supports for daily living that are important for their health and well-being and enable them to do the things they want to do.

For example:

* Consumers interviewed confirmed they are supported by the service to do the things they like doing such as accessing social groups within the service (for example, café morning teas, attending movies) or participating independently in external activities (going out for meals or to other venues) in the wider community.
* Consumers interviewed confirmed they are encouraged to participate in activities that align with their previous hobbies and interests.
* Consumers interviewed confirmed their family and friends are welcomed at the service and are provided appropriate privacy.
* Consumers interviewed confirmed the food is good and they are provided with enough food choices to meet their preferences. They confirmed they get enough to eat and drink and can always ask for more.

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 – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

* The activities schedule provides a variety of activities and choices tailored to meet the needs of consumers with varying degrees of physical and cognitive dysfunction.
* The Lifestyle coordinator said the service aims for consumers to attend at least twenty activity programs each month. The Assessment Team viewed documents which showed the service monitors attendance rates and satisfaction with lifestyle services.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.

### Requirement 4(3)(b) Compliant

Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

### Requirement 4(3)(c) Compliant

Services and supports for daily living assist each consumer to:

1. participate in their community within and outside the organisation’s service environment; and
2. have social and personal relationships; and
3. do the things of interest to them.

### Requirement 4(3)(d) Compliant

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

### Requirement 4(3)(e) Compliant

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

### Requirement 4(3)(f) Compliant

Where meals are provided, they are varied and of suitable quality and quantity.

### Requirement 4(3)(g) Compliant

Where equipment is provided, it is safe, suitable, clean and well maintained.

# STANDARD 5 COMPLIANT Organisation’s services environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

The Quality Standard is assessed as compliant as three of the three specific requirements have been assessed as compliant.

The Assessment Team found that Consumers interviewed feel they belong in the service and feel safe and comfortable in the service environment.

The following examples were provided by consumers during interviews with the Assessment Team:

* Consumers sampled, confirmed the environment was pleasant and provided a nice place to live.
* Consumers sampled, confirmed the environment is safe, clean and well maintained.
* Consumers sampled, confirmed the furnishings, fittings and equipment are suitable and they feel safe when staff are using equipment with them.

The Assessment Team observed the environment to be welcoming. The building was light, airy and spacious with good signage and various shared and private spaces where consumers were free to interact. Visual navigational aids used to assist consumers with memory impairment included shadow boxes containing personal items at the entrance of their rooms and wide, uncluttered corridors which were visually pleasing and encouraged consumers’ mobility. Consumers had visual and physical access to various outdoor garden areas via large windows, wide doorways leading onto accessible pathways with comfortable outdoor seating.

The Assessment Team observed consumers’ rooms which were spacious, personalised and with a mix of functional furniture. Ensuite bathrooms provided room to manoeuvre. Lounge and dining areas were well maintained, clean and filled with chairs with arms that aided consumers’ independent transfers.

The Assessment Team viewed the maintenance log which showed regular maintenance of the service environment and management of ad hoc maintenance requirements.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.

### Requirement 5(3)(b) Compliant

The service environment:

1. is safe, clean, well maintained and comfortable; and
2. enables consumers to move freely, both indoors and outdoors.

### Requirement 5(3)(c) Compliant

Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

# STANDARD 6 COMPLIANT Feedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

The Quality Standard is assessed as compliant the four specific requirements have been assessed as compliant.

The Assessment Team found that consumers feel that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

For example:

* Consumers and representatives interviewed confirmed they are encouraged to discuss concerns with managers, at consumer meetings and via feedback forms.
* Consumers and representatives interviewed confirmed they feel safe raising issues and are confident managers respond appropriately.
* One consumer representative said they frequently raise concerns with the manager and that they are responsive to resolve their concerns.

The Assessment Team found that the service supports and encourages feedback. The service has systems and processes in place to ensure that ensure that consumer feedback is regularly sought. The service reviews and reports on complaints received and feedback and complaints are used to improve the quality of care services.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

### Requirement 6(3)(b) Compliant

Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

### Requirement 6(3)(c) Compliant

Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

### Requirement 6(3)(d) Compliant

Feedback and complaints are reviewed and used to improve the quality of care and services.

# STANDARD 7 COMPLIANT 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

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

The Assessment Team found that overall consumers confirmed that they get quality care and services when they need them and from people who are knowledgeable, capable and caring.

For example:

* Consumers interviewed confirmed that staff are kind and caring and that they know what they are doing.
* Consumers generally thought there were adequate staffing levels. Three representatives expressed anxiety about their confidence in the service maintaining adequate staffing levels particularly during meal times and evenings to ensure for example, consumers who may require personal care during that time have their needs met in a timely manner. One representative said the services has been addressing this issue. The Assessment Team did not identify specific impacts on consumers in relation to this issue.

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.

* The service demonstrated staff are competent, qualified and receive ongoing training and annual performance appraisals. The service demonstrated they responded to recent consumer and representative concerns in relation to the adequacy of staffing levels and continue to monitor the situation.

## 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.

### Requirement 7(3)(b) Compliant

Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

### Requirement 7(3)(c) Compliant

The workforce is competent, and the members of the workforce have the qualifications and knowledge to effectively perform their roles.

### Requirement 7(3)(d) Compliant

The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.

### Requirement 7(3)(e) Compliant

Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.

# STANDARD 8 COMPLIANT Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

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

The Assessment Team found that overall consumers considered that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* Consumers and representatives sampled confirmed that the service is well run, and were generally satisfied with care and services across all Standards.
* Consumers and representatives interviewed confirmed that they contribute to the development, delivery and evaluation of care services through various feedback mechanisms which includes care plan reviews, consumer/focus group meetings, consumer surveys and individual feedback to staff verbally and in writing

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

* The service demonstrated understanding of their responsibilities in relation to all of the Quality Standards.
* The organisation has policies and procedures which are designed to promote a culture of safe, inclusive and quality care. For example, Board members and managers have developed a ‘Better for life’ framework which includes an organisational dashboard to display consumer feedback and data relating to clinical and quality of life indicators, experiences and incidents at each service outlet. While the dashboard is still in a developmental phase, it has commenced providing service level (and comparative data) to assist organisational monitoring of key risks issues including consumer fall rates, antipsychotic medication use rates, infection and antibiotic use rates, restraint use, weight loss, pressure injury and polypharmacy.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

### Requirement 8(3)(b) Compliant

The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.

### Requirement 8(3)(c) Compliant

Effective organisation wide governance systems relating to the following:

1. information management;
2. continuous improvement;
3. financial governance;
4. workforce governance, including the assignment of clear responsibilities and accountabilities;
5. regulatory compliance;
6. feedback and complaints.

### Requirement 8(3)(d) Compliant

Effective risk management systems and practices, including but not limited to the following:

1. managing high impact or high prevalence risks associated with the care of consumers;
2. identifying and responding to abuse and neglect of consumers;
3. supporting consumers to live the best life they can.

### Requirement 8(3)(e) Compliant

Where clinical care is provided—a clinical governance framework, including but not limited to the following:

1. antimicrobial stewardship;
2. minimising the use of restraint;
3. open disclosure.

# 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.