Pemulwuy Aged Care

Performance Report

11 Pastoral Circuit
Pemulwuy NSW 2145
Phone number: 02 8863 9000

**Commission ID:** 1057

**Provider name:** Allity Pty Ltd

**Assessment Contact - Site date:** 12 March 2021

**Date of Performance Report:** 28 April 2021

# 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 3 Personal care and clinical care** | **Non-Compliant** |
| Requirement 3(3)(a) | Non-Compliant |
| **Standard 7 Human resources** | **Non-Compliant** |
| Requirement 7(3)(a) | Non-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 and consumers/representatives.
* the provider’s response to the Assessment Contact - Site report received 8 April 2021.

# STANDARD 3 Non-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

### Consumer outcome

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.

Most sampled consumers considered that they receive personal care and clinical care that is safe and right for them. Consumers interviewed said the staff are kind and caring and they are well looked after.

Assessments and care planning documents were not specific to the consumers and contained generic information that could be applicable to anyone.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Non-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 found progress notes and care planning documents were in place for consumers sampled that reflected safe and effective care, however they were not tailored to consumers and individualised to their specific needs. Interventions were generic not person centred, and the service did not follow its own policies regarding updating assessment and care planning.

The Assessment Team reviewed a sample of care plans and found that the care for consumers were not individualised for pain management, falls prevention or skin integrity. The Assessment Team also found that the service stated in the entry meeting that consumers on anticoagulant therapy are transferred to hospital for review this did not occur for one consumer.

Consumers and representatives interviewed said they got the care and services they needed. However, increased periods of waiting for staff to attend to consumers who required assistance was mentioned throughout interviews. Some consumers noted the service are very kind and caring however they believed there were not enough staff to attend to their care needs.

The Approved Provider submitted information to address the issues raised by the Assessment Team. The Approved Provider confirmed that improvements needed to be made and presented a comprehensive continuous improvement plan to support the improvement process required to ensure quality care for the consumers. This included reviewing all care plans, reviewing staffing competencies monthly, and training staff in pain management, falls management, skin integrity and restraint. While the approved provider has made changes and has a plan for continuous improvement, I’m not satisfied that this demonstrates compliance with the requirement at the time of the assessment contact. As the approved provider does not dispute the finding of the Assessment Team, my finding concurs with the recommendation of the Assessment team.

I am of the view that the Approved Provider does not comply with this requirement as it has not demonstrated that 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.

# STANDARD 7 NON-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

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 call bell response reports.

Some sampled consumers and representatives did not consider that consumers get quality care and services when they need them and from people who are knowledgeable, capable and caring.

The majority of consumers interviewed spoke favourably regarding regular staff members being kind and caring. However, some sampled representatives and consumers did not consider that quality care and services were being provided to consumers when they needed them and from people who were knowledgeable and capable.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Non-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.*

The Assessment Team had feedback from representatives and consumers that indicated their concerns regarding the ability to provide care and services in relation to the number of staff. Consumers and representatives are dissatisfied with level of staffing and they are not confident that they demonstrated adequate skills and knowledge of their care needs. Consumers are concerned with the use of agency staff and the impact it has on them and that phone calls go unanswered. Cleaning standards were also highlighted by consumers and representatives as an area that seems to slip when staff are stretched. Lastly, that they’re dissatisfied with communication from staff.

A review of call bell response reports noted a range of calls across the site more than 30 minutes. In addition, staff and management confirmed that staffing numbers had not been adequate and that they were taking actions to recruit.

The Approved Provider submitted information to address the issues raised by the Assessment Team. The Approved Provider confirmed that improvements needed to be made and presented a comprehensive continuous improvement plan to support the improvement process required to ensure quality care for the consumers. This included reviewing the staff roster, looking for improvements to the continuity of care, seeking more feedback from consumers at the Residents’ Meeting and reviewing cleaning schedules and doing daily checks on cleaning standards. While the approved provider has made changes and has a plan for continuous improvement, I’m not satisfied that this demonstrates compliance with the requirement at the time of the assessment contact. As the approved provider does not dispute the finding of the Assessment Team, my finding concurs with the recommendation of the Assessment team.

I am of the view that the Approved Provider does not comply with this requirement as it has not demonstrated that 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.

### Requirement 3(3)(a)

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.
* Work through continuous improvement plan ensuring improvements are made to care plans and staff training specifically in relation to pain management, skin integrity, restraint and falls management.
* Ensure staff complete all training and competencies and improve system for managing this information so it is current and used to inform required action.

### Requirement 7(3)(a)

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.

* Work through continuous improvement plan ensuring improvements are made to staffing levels and rostering, continuity of care, reduction of call bell wait times and cleaning services.
* Ensure that cleaning checks are completed daily.
* As advised ensure a review of mobility and transfer plans is completed.