Regis Nedlands

Performance Report

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**Commission ID:** 7149

**Provider name:** Regis Aged Care Pty Ltd

**Site Audit date:** 14 September 2021 to 16 September 2021

**Date of Performance Report:** 3 November 2021

# Performance report prepared by

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# Publication of report

This Performance Report **will 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 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 Commissioner’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 provider’s response to the Site Audit report received 19 October 2021, stated the provider would not be submitting a formal response to the report, but had considered the report in relation to opportunities for continuous improvement.

# 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 as six of the six specific requirements have been assessed as Compliant.

Consumers interviewed confirmed they are treated with dignity and respect, can maintain their identity and are supported to make informed decisions about the care and services they receive. Consumers confirmed they feel valued and are supported to continue doing the things they like and maintain their independence. Consumers stated staff respect their privacy.

The service has processes to identify each consumer’s unique needs including, cultural and religious preferences, life history and people important to them. The information is recorded and communicated to staff and others who provide care and services. The service provides appropriate and timely information to consumers, in a way which consumers can understand, both in writing and verbally through meetings. The service supports consumers to make choices including other people the consumer wishes to be involved in making decisions and consumer decisions and people involved in their care are recorded in the consumers’ care plans. The service has policies and procedures including dignity in risk processes to direct staff in supporting and delivering care which has the consumer at the centre.

Staff interviewed provided examples of how they support each consumer’s individual needs in line with the consumer’s choice and preference, including providing culturally appropriate supports and supporting consumers where risk is involved. Staff were observed to treat consumers with respect and supported consumers’ privacy including keeping consumer information and records confidential.

## 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*
4. *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 five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed they are involved in assessment and planning of consumers’ care. Consumers and their representatives confirmed they are informed of the outcomes of assessment and planning through discussions with staff and are involved and informed when changes occur including following incidents.

The service has an electronic assessment and care planning system and assessment tools including risk assessments and charting which are completed by qualified staff to inform the strategies in the care plan. Consumers’ care plans viewed had recorded consumers’ needs, goals and preferences in line with consumers’ current needs. Medical officers and other health professionals involved in assessment and care of the consumer have their directives recorded in the care plan. Consumers’ wishes for end of life are identified and documented in line with consumers’ choice. All consumers’ care plans viewed had regular reviews recorded including when changes occur and the outcomes of consultation with the consumer or their representatives recorded.

Staff interviewed demonstrated the assessment process including completing incident reports and charting to identify changes in consumer needs. Staff confirmed they have access to the care plans through portable electronic devices and changes or information about consumers are communicated through verbal and written handover 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.*

### 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 seven of the seven specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers are delivered safe and effective personal and clinical care. Consumers confirmed when incidents or changes occur the service identifies and takes appropriate action to prevent injury and impact to consumers and review consumers’ needs. Consumers confirmed they have access to medical officers and health specialists when they need them. Representatives for consumers nearing end of life confirmed the consumer receives appropriate care to support the comfort and dignity of the consumer.

Incident reports, progress notes and clinical handovers and meetings are used to identify changes or deteriorations in consumers’ cognitive and physical health and functioning. Consumer care plans viewed show specialists including physiotherapists and dementia and palliative care specialists are involved in the assessment and review of consumers to ensure appropriate strategies are implemented to care for consumers. The service has policies, procedures and assessment tools to guide the delivery of personal care and clinical care in line with best practice to optimise the consumers’ health and well-being.

Staff interviewed confirmed processes for identifying changes in consumer health and reporting incidents. Staff confirmed they are informed when changes to consumer care needs occur and are provided information including alerts and strategies to provide appropriate care. Staff provided examples of managing consumer personal and clinical care in line with the consumers’ current documented needs. Staff confirmed appropriate examples of how they identify and manage infections including infectious outbreaks. Staff said they have access to guidelines to direct how they manage infections including appropriate use of antibiotics.

The service has implemented improvements to address the deficits and non-compliance identified following an assessment contact and site audit in January 2021 and again at an assessment contact in August 2021 in relation to Standard 3 Requirement (3)(a).

### 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 supports 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 seven of the seven specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers receive the services and supports for daily living that are important for the consumers’ health and well-being and enable them to do the things they want. Consumers provided examples of being supported to attend and engage in a variety of individual and group activities. Consumers confirmed staff support them to remain independent and provide consumers with assistance to do activities of their choice.

The service has processes to identify and assess consumers’ needs and preferences in relation to social, emotional, spiritual and psychological well-being. The service develops plans to direct services and supports including activities to engage consumers’ spiritual and emotional supports through volunteers, visitors and church groups. Consumers’ participation in social and wellness activities including one to one support and individual activities are recorded and monitored to identify effectiveness of supports and changes in consumer needs. The service has dedicated therapy staff to assist and support consumers in doing the things of interest to them and engaging in social relationships within and outside the service.

Consumers’ dietary and nutritional needs and preferences are recorded and are available to staff where consumer meals are prepared and served. Consumers confirmed they receive quality meals and are able to have alternatives if requested.

Consumers are provided appropriate equipment to promote their independence and which is appropriate for their assessed needs. Equipment observed was well maintained and suitable for its purpose.

## 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 service 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.

Consumers interviewed confirmed they feel safe and at home living in the service and have access to indoor and outdoor living areas. Consumers confirmed they are satisfied the service environment and equipment are clean and well maintained.

Observations confirmed consumers are able to move freely throughout the service including outdoors and the environment was modern, spacious and open planned. The service appeared clean and well maintained with appropriate furnishings throughout the service to enhance the environment.

The service has scheduled and reactive cleaning and maintenance programs in place including accessing external contractors to service equipment and monitor safety systems. Staff confirmed the processes of cleaning and maintenance in line with the schedules and staff demonstrated how they request or report additional cleaning or maintenance when required. The service has monitoring systems in place to ensure the cleaning and maintenance systems are effective.

## 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 as four of the four specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed they knew how to provide feedback and make complaints, and they felt safe and comfortable in doing so including raising feedback and complaints with management and staff. Consumers and their representatives provided examples of how they can make complaints including through feedback forms, meetings and verbally to management. Consumers and their representatives confirmed when they have raised complaints they have been responded to and actions are taken to resolve the issues.

The service demonstrated it has effective complaints and feedback systems and an improvement log is maintained which records complaints and feedback and actions taken in response. Complaints and feedback are reviewed monthly for trends to identify areas for improvement. The service has an open disclosure policy which is used when things go wrong. Staff interviewed confirmed complaints processes and provided examples of supporting consumers to raise complaints including when verbal complaints are made.

## 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 five of the five specific requirements have been assessed as Compliant.

Consumers and their representatives interviewed confirmed consumers receive quality care and services from staff who are knowledgeable, capable and caring. Consumers stated staff were kind and know what they are doing and there are enough staff to provide care and services when they need it.

The service demonstrated it has systems supported by the wider organisation to recruit appropriately qualified staff and training and information is provided to enable staff to perform their roles. The service has planned rosters and staff allocation based on consumer needs and vacant shifts are filled by the organisation’s staff or relief ‘agency’ staff if required. The service has a mix of skilled staff including registered nursing staff and additional clinical support where required.

The service has processes in place for assessment, monitoring and regular review of performance of each member of the workforce. Where indicated through incident reporting and/or feedback staff are performance managed appropriately. The service provides additional staff training where required and an annual training program is in place.

Staff interviewed confirmed they are provided training and have opportunities to provide feedback including through performance reviews. Staff confirmed they have sufficient time and information to perform their roles and are aware of their responsibilities. Staff and management confirmed improvements in relation to rostering and filling vacant shifts have continued to be effective at ensuring sufficient numbers of staff across the service.

The Assessment Team observed staff interactions with consumers and their representatives were kind, caring and respectful. Where required staff were observed to use different ways to communicate taking into consideration the consumer’s identity, culture and diversity.

## 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 five of the five specific requirements have been assessed as Compliant.

Consumers interviewed were satisfied the service is well run and they feel partnered in improving the delivery of care and services. The service demonstrated it engages consumers through a variety of methods including through consumer groups, forums and meetings to identify suggestions and areas for improvement.

The service is supported by the wider organisation who provides policies and procedures to guide organisational governance systems including defining roles, responsibilities and accountabilities. The Board is provided with regular updates from all parts of the business including but not limited to financial, clinical, feedback, compliance and workforce. Continuous improvement is driven from all levels of the organisation and includes when incidents have impacted consumer care. The Board drives the culture of the organisation through its strategic plan and has set performance indicators to measure its progress which has a focus on consumer care.

The service has effective organisational risk management and clinical governance systems which are implemented at the service and staff practice is in line with organisational expectations in managing risks. The service has incident reporting systems to identify and respond appropriately to risks associated with consumer care and risks associated with elder abuse. The organisation has a clinical governance framework which supports infection control management, minimisation of the use of restraint and antimicrobial stewardship.

## 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*
4. *managing and preventing incidents, including the use of an incident management system.*

### 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.