Rose Mumbler Village

Performance Report

55 Judith Drive
NORTH NOWRA NSW 2541
Phone number: 02 4428 9401

**Commission ID:** 0368

**Provider name:** Illaroo Co-operative Aboriginal Corporation

**Assessment Contact - Site date:** 20 January 2022 to 21 January 2022

**Date of Performance Report:** 23 February 2022

# Performance report prepared by

Gill Jones, delegate of the Aged Care Quality and Safety Commissioner.

# 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

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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 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 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 15 February 2022.

# STANDARD 3 NON-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

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.

Overall sampled consumers consider that they receive personal care and clinical care that is safe and right for them.

For example:

Consumers said they are satisfied with the care they receive at the service.

While consumer’s were satisfied with the care they receive, the Assessment Team found that consumers do not always get safe and effective personal care. There is a general lack of understanding of the principles of best practice. Although staff are kind to consumers care provision is not always tailored to consumer needs and does not optimise consumer health and wellbeing. Assessment and care planning does not adequately address consumer risks, preferences or needs.

The Quality Standard is assessed as Non-compliant as one of the seven specific requirements have been assessed as Non-compliant.

### 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 service does not have an effective clinical management system. While care provision is well intentioned it is not always safe and effective; is not best practice, not tailored to consumer needs and does not always optimise consumer health and wellbeing. Deficits were identified in consumer assessment, care planning, pain management, wound care, diabetic management, clinical observation, weight management, incident and falls management and restrictive practices.

Staff and management do not have an understanding of requirements relating to restrictive practises and consent for potential chemical restraint. Some consumers do not have valid decision makers identified. There is no assessment to identify capacity for informed consent. Consumers do not have behavioural management plans and risk assessments have not been undertaken in relation to potential physical restraint such as bedrails.

In their response to the Assessment Team’s report, the approved provider acknowledged the shortfalls in the clinical care being provided including the deficits in supporting documentation and measures taken to clinically monitor and track consumer’s health and wellbeing. The approved provider stated they have recognised the changes that need to be made including improving care practices through staff training, improving the use of IT systems so care provided is captured more effectively, replacement or refurbishment of some equipment and a full review of all care plans to ensure quality care is being provided at all times. This approved provider stated this work has commenced.

I find this requirement is not met as the approved provider was unable to demonstrate each consumer gets safe and effective clinical care and personal care that is best practice, is tailored to their needs and 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 a range of records including staff rosters, training records and performance reviews.

Overall sampled consumers consider 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, caring and respectful of their identity. All consumers said staff know what they are doing. The consumers interviewed said it is lovely to be able to be supported by your own community.

Consumers and staff interviewed confirmed that they think there are adequate staff to provide person centred, quality care and services. Both consumers and staff confirmed call bell response have been responded to in a timely manner.

The Assessment Team acknowledges the positive feedback from the consumers and staff regarding sufficient staffing to provide quality care and services. The Assessment Team also acknowledges the difficulty in staffing during the COVID-19 pandemic. However, evidence of the delivery of care and services undertaken by suitably qualified members of staff consistent with safe and quality care was not demonstrated.

It was not demonstrated there are robust organisational systems for training, equipping and supporting staff or establishing staff competency relevant to their role The Assessment team found evidence of the service being left without clinical oversight for 48hours. Based on the Assessment Team findings it has not been demonstrated that the service is planned to enable safe and quality care of services.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## 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’s findings from this Assessment Contact overall show that current staffing has not enabled safe and effective care and services for the consumers. Gaps were identified in staff training to support delivery of safe and effective quality service. Management advised of staff training being completed and continued recruitment taking place to increase suitably qualified staffing at the service.

In their response to the Assessment Team’s report, the approved provider acknowledged the shortfalls in their performance but highlighted the difficulty in recruiting and training suitable staff to work in aged care. The approved provider stated that the situation with staffing is ongoing and extremely difficult to resolve. They acknowledged they need more staff on shifts and have developed several recruitment initiatives to try to attract staff and have engaged with the local college to improve staff training. The approved provider stated that staffing ratios, education and upskilling staff was a high priority. They have engaged a consultant to assist with improving staff education, clinical experiences and care planning for all consumers.

I find this requirement is not met as the approved provider was unable to demonstrate 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

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.

### 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.*

By ensuring

* Staff are adequately trained and supported to deliver clinical care that is best practice, meets the consumer’s need an optimises their health and wellbeing.
* Staff are trained in record keeping principles and the use of the data management system in place so that documentation captures care provided more effectively
* Care provided to each consumer is based on their current need and
* Equipment provided is safe for use.

### 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.*

By ensuring

* Staff are adequately trained and adequate numbers of staff are on shift to enable the delivery of safe and quality care and services.