Royal Freemasons - Monash Gardens Hostel

Performance Report

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**Commission ID:** 3250

**Provider name:** Royal Freemasons Ltd

**Assessment Contact - Site date:** 22 April 2021

**Date of Performance Report:** 13 May 2021

# 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(d) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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

# STANDARD 2 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 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.

The Assessment Team found care and services are reviewed regularly for effectiveness, when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

Care plans reflect changes in care as a result of reviews. All care plans sampled show evidence of review on a regular basis and when circumstances change. Reviews occur following incidents with changes made as appropriate.

The Assessment Team found consumers and representatives could describe how they are involved in reviewing the effectiveness of a consumer’s care including when changes or incidents impact on well-being. Representatives said they are kept informed about changes to the health of the consumer and any recommended changes in care.

Staff could describe how they escalate and advise of changes to consumers’ needs and document changes in the progress notes including changes in accordance with the consumer’s needs, goals and preferences.

The overall Quality Standard is not assessed as only one of the five specific requirements have been assessed.

## Assessment of Standard 2 Requirements*.*

### 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 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 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.

The Assessment Team found the service demonstrated that each consumer receives personal and clinical care that is effective and safe, optimises their health and well-being, is tailored to their needs and is best practice.

The Assessment Team found that care planning documents demonstrated consumers’ personal care, skin integrity, wound care and pain is managed to meet their individual needs and aligned with best practice principles. Consumers who require the use of chemical restraint are effectively assessed and monitored and reviewed according to regulatory requirements. Consultation with representatives occurs.

Care planning documents sampled appropriately identified the high-impact or high-prevalence risk in care delivery for consumers at the service. The service effectively monitors clinical indicators to identify high-impact and high-prevalence risk at the service and identify opportunities for improvement. Risk is reassessed when the consumer presents with a change in their condition. Assessments and care plans sampled are current. The service demonstrated a multidisciplinary approach to minimising risks to the consumer and strategies are individualised. Staff were able to identify the risks associated with the care of individual consumers and how they managed these.

The service has policies which provide guidance on the identification and assessment of risk and actions to manage risk to consumers.

Care planning documents such as assessments, progress notes and care plans demonstrated that deterioration is identified and appropriately responded to. Staff were able to describe how they identified deterioration in consumers such as changes to behaviour, mobility, appetite and cognition. Staff were able to describe how they responded to these changes.

The service has a current policy ‘recognising and responding to deterioration in health and wellbeing procedure’ which guides staff practice.

The overall Quality Standard is not assessed as only three of the seven specific requirements have been assessed.

### 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)(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.*

# STANDARD 7 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

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 consumers said that staff assistance was provided in a timely manner and staff were responsive to their needs. Staff reported that they are able to provide safe care to consumers and that shifts are usually covered. Information provided about call bell reports, rosters and allocation records demonstrated that the workforce is planned to ensure an appropriate skill mix and number of staff in various roles. Management reported that staff recruitment processes are ongoing.

Most consumers and representatives said they are satisfied with the number and mix of staff and provided positive feedback about responsiveness to calls for assistance and care and services delivered.

The overall Quality Standard is not assessed as only one of the five specific requirements have been assessed.

## 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.*

# 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.