Rubies Nursing Care

Performance Report

163 Langtree Crescent   
CRACE ACT 2911  
Phone number: 0420979572

**Commission ID:** 201416

**Provider name:** Rubies Nursing Pvt Limited

**Assessment Contact - Site date:** 3 November 2020

**Date of Performance Report:** 20 December 2020

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

|  |  |  |
| --- | --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** | |  |
| Requirement 2(3)(b) | Compliant | |
| **Standard 7 Human resources** |  | |
| Requirement 7(3)(d) | Compliant | |
| **Standard 8 Organisational governance** | **Non-compliant** | |
| Requirement 8(3)(d) | 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, consumers/representatives and others.
* the provider’s response to the Assessment Contact - Site report received 6 December 2020

# 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 this requirement under this Standard, the Assessment Team interviewed the consumer and or/their representative, asking them about how they are involved in assessment and care planning, reviewed their care planning documents in detail, and interviewed staff about how they use assessment and care planning documents and review these on an ongoing basis.

Consumers, and their representatives, interviewed advised that they have discussed their current needs, goals and preferences as part of the assessment process. They have been involved in the compilation of their care plan and have been provided with a copy as is required. They confirmed they are able to request changes to their care and services and how these will be delivered in line with their preferences and changing needs.

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## Assessment of Standard 2 Requirements

### 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.*

The Assessment Team found that the service demonstrated that 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.

I find that the approved provider is compliant with this requirement.

# 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 service provider understands and applies this requirement under this Standard, the Assessment Team interviewed consumers, asking about their experiences with the staff, reviewed policies and procedures, and interviewed staff about the initial orientation, ongoing training and support provided by the service and the adequacy of staff employed to complete tasks required.

Consumers and representatives interviewed said that the staff are respectful, kind and caring. They provided positive feedback about the care staff and said they are attentive to the consumer’s needs and are always on time. They were complimentary about the care coordinator and team leader, who they said are approachable and responsive. They said the service works closely with them, consults with them regularly and arranges care and services to meet their needs, goals and preferences. They said the service responds promptly and flexibly to any changes and/or requests they may make.

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

## Assessment of Standard 7 Requirements

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

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

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

I find that the approved provider is compliant with this requirement.

# STANDARD 8 NON-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

To understand the consumer’s experience and how the organisation understands and applies this requirement under this Standard, the Assessment Team interviewed consumers, asking about the care and services provided, reviewed mechanisms in place to mitigate risks, sighted relevant policies and procedures, and interviewed staff to determine in relation to how they identify and respond to elder abuse and support consumers to live the best life possible.

Policies and procedures are in place to support risk management, and a range of organisational, workforce and consumer risks are listed. However, these systems and practices have not effectively managed high impact or high prevalence risks associated with care of consumers or responded appropriately to abuse and neglect of consumers, to support consumers to live the best life they can.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements has been assessed as Non-compliant. A decision of Non-compliant in one or more requirements results in a decision of Non-compliant for the Quality Standard.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Non-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.*

The Assessment Team found that the service does not demonstrate effective risk management systems and practices that manage high impact or high prevalence risks associated with the care of consumers, identifying and responding to abuse and neglect of consumers and supporting consumers to live the best life they can.

In particular, the Assessment Team provided information that although the service has risk management systems and practices in place, they have not been effective in identifying falls risks for consumers and that consumers were not being assessed for their risk of falls, that training had not been provided to staff in incident management, and that incidents or near misses were not being recorded as required. In addition, while the service has identified a consumer that was at risk, it was unaware of potential avenues to have that addressed to protect the consumer. The lack of knowledge indicated that the service, for that consumer whom the service identified as being unhappy with their quality of life, did not support that consumer to live the best life they could.

The Assessment Team also found that there were some deficiencies in the service’s outbreak management plan, monitoring staff working across different areas and COVID19 screening.

In its response the approved provider did not dispute the findings and submitted details of the measures it had or would implement to address the areas identified.

While I acknowledge these improvements, I find that the approved provider is Non-compliant with this requirement.

# 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 8(3)(d)

*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.*

* Implement risk management systems and practices, including but not limited to the:

1. management of high impact or high prevalence risks associated with the care of consumers, especially falls risk, incident management, recording any incidents or near misses and the management of infection related risks, particularly COVID19;
2. identifying and responding to abuse and neglect of consumers, especially identifying and seeking organisations from which specialist advice can be sought; and
3. supporting consumers to live the best life they can.

* Monitor and review the effectiveness of these systems.