Sandpiper Lodge

Performance Report

35 Washington Street   
GOOLWA SA 5214  
Phone number: 08 8555 7700

**Commission ID:** 6259

**Provider name:** Southern Cross Care (SA, NT & VIC) Incorporated

**Assessment Contact - Site date:** 20 December 2021

**Date of Performance Report:** 1 February 2022

# Performance report prepared by

Michelle Glenn, 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

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | 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 consumers, representatives, staff and others
* the provider did not submit a response to the Assessment Contact - Site report.

# 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

The Assessment Team assessed Requirement (3)(b) in Standard 3 Personal care and clinical care as part of the Assessment Contact and have recommended Requirement (3)(b) met. All other Requirements in this Standard were not assessed, therefore, an overall rating of the Standard is not provided.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Southern Cross Care (SA, NT, & VIC) Incorporated, in relation to Sandpiper Lodge, Compliant with Requirement (3)(b) in Standard 3 Personal care and clinical care. I have provided reasons for my finding in the specific Requirement below.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

The Assessment Team provided the following evidence and information collected through interviews, observations and documents which are relevant to my finding in relation to this Requirement:

* Overall, consumers sampled considered that they receive personal and clinical care that is safe and right for them. Consumers and representatives expressed satisfaction with management of risks relating to incidents, wounds, pain and falls.
* High impact or high prevalence risks are identified through a range of avenues, including through use of validated risk assessment tools. Information gathered is used to develop care plans which incorporate personalised strategies to manage identified risks. Care plans sampled had been reviewed regularly and updated following incidents.
* Consumers identified as high risk are flagged through the electronic care management system, with requirement for a daily progress note from the Registered nurse and weekly review through High risk resident meetings.
* Consumer care files sampled demonstrated appropriate management and review of risks related to falls, behaviour and pain. Care files demonstrated where issues are identified, additional monitoring and reassessments occur, care plans are reviewed and updated and referrals to allied health specialists and/or Medical officers initiated.
* Clinical and care staff sampled identified risks related to sampled consumers and described management strategies in alignment with consumers’ care plans. Additionally, care staff described actions initiated in response to incidents involving consumers, in line with their scope of practice.

For the reasons detailed above, I find Southern Cross Care (SA, NT, & VIC) Incorporated, in relation to Sandpiper Lodge, Compliant with Requirement (3)(b) in Standard 3 Personal care and clinical care.

# STANDARD 8 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 Assessment Team assessed Requirement (3)(d) in Standard 8 Organisational governance as part of the Assessment Contact and have recommended Requirement (3)(d) met. All other Requirements in this Standard were not assessed, therefore, an overall rating of the Standard is not provided.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Southern Cross Care (SA, NT, & VIC) Incorporated, in relation to Sandpiper Lodge, Compliant with Requirement (3)(d) in Standard 8 Organisational governance. I have provided reasons for my finding in the specific Requirement below.

## Assessment of Standard 8 Requirements

### 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.*

The Assessment Team provided the following evidence and information collected through interviews, observations and documents which are relevant to my finding in relation to this Requirement:

* The organisation demonstrated effective risk management systems and practices in relation to managing high impact or high prevalence risks; identifying and responding to abuse and neglect; supporting consumers to live the best life they can; and managing and preventing incidents, including use of an incident management system.
* High impact or high prevalence risks associated with the care of consumers are managed through a range of avenues, including meeting forums to ensure effective communication, consistent recording of incident notifications and care and service approaches by staff and management across all levels of the organisation. A Critical incidents register is maintained to ensure critical incidents are reported, escalated, and managed and Serious Incident Response Scheme policy and processes are in place to ensure compliance with legislative requirements.
* In relation to identifying and responding to abuse and neglect, incidents of abuse and neglect are managed and documented through the Serious Incident Response Scheme incident management system. Staff sampled indicated risk-based training, as well as mandatory training sessions on subject areas, such as elder abuse and the Serious Incident Response Scheme are provided by the service.
* Consumers have choice and control on how they live their life. Policy and procedure documents facilitate consumers wishing to take risks and guide processes for risk assessment, care, support, and completion of the risk discussion form. Consumers’ privacy and choice are respected, and risks are assessed and communicated with consumers.
* An incident management system is in place to record consumer and staff incidents. Incidents are reviewed and analysed and staff have been trained to use the system effectively. Staff indicated they have completed training on the Serious Incident Response Scheme, restrictive practices and behaviour support plans and described how they use the learnings to identify and respond to abuse and neglect of consumers.

For the reasons detailed above, I find Southern Cross Care (SA, NT, & VIC) Incorporated, in relation to Sandpiper Lodge, Compliant with Requirement (3)(d) in Standard 8 Organisational governance.

# 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.