Seabrae Manor

Performance Report

21 Buchanan Street   
Rothwell QLD 4022  
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**Commission ID:** 5378

**Provider name:** Tingari Group Pty Ltd

**Assessment Contact - Site date:** 14 July 2020

**Date of Performance Report:** 10 August 2020

# Publication of report

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

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| --- | --- |
| **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 |

# 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 31 July 2020.

# 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

Overall consumers considered that they feel like partners in the ongoing assessment and planning of their care and services.

Consumers and representatives reported being involved in the initial assessment and ongoing planning of the consumer’s care. They said they are informed about the outcomes of assessment and planning and have access to the consumer’s care and services plan if they wish. Consumers and representatives confirmed the service seeks input from others who contribute to care including medical officers, allied health professionals and family members.

The Assessment Team identified consumer care plans show they have been developed in consultation with the consumer and/or their representative and that they have been reviewed regularly and updated when changes have been required. Care plans demonstrated outcomes of assessment and planning are documented in a care and services plan that is available to the consumer. Staff interviewed are aware of consumers’ needs and preferences and strategies to follow to ensure needs and preferences are met.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## 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

Consumers and representatives said consumers receive the care they need and that personal and clinical care is safe and right for them. They reported they had been involved in discussions with staff about the care they receive, including end of life planning.

The service is guided by organisational policies and procedures in relation to clinical and personal care inclusive of pain, palliative care, restraint management, skin integrity, and pressure injury prevention and management. Senior clinical staff, medical officers and other health professionals are available for advice and support in relation to clinical care such as falls prevention, medication needs, nutrition, skin integrity, specialised complex care and palliative care. Processes are in place to support the management of restraint and the service monitors the use of psychotropic medication.

Care planning documentation demonstrated the delivery of safe and effective care and the involvement of medical staff and other health professionals. Staff review consumers’ care plans regularly and as required when consumers experience a deterioration, change in care or clinical incident.

Staff demonstrated an understanding of consumers’ needs and preferences. They were aware of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### 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.*

I have considered the Assessment Team’s report which identified deficiencies in the management of restraint, and the response submitted by the approved provider. The approved provider has submitted evidence that demonstrates the use of restraint has been discussed with families and authorised decision makers, is regularly reviewed and that authorisation and consent are in place. The use of psychotropics is being monitored and minimised where possible using non-pharmacological strategies.

Consumers and representatives said consumers get the care they need. They said they are advised when there is a change in the consumer’s condition and that staff know what is important for the individual.

The organisation has policies, procedures, tools and flow charts in place to support the delivery of care, including in relation to restraint, skin integrity, pressure injury prevention, and pain management. Incident data is collected, trended and analysed on a monthly basis.

Mechanisms are in place to communicate consumers’ clinical and personal care needs and staff could describe individual needs and preferences, and how these were being managed or monitored.

Care documentation generally reflected individualised care that is safe, effective and tailored to the specific needs and preferences of the consumer.

I am satisfied that overall, consumers receive personal and clinical care that is safe and effective and optimises their health and well-being, including in relation to restraint management. I find this requirement is Compliant.

### 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.*

# 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.