Southern Cross Care Raceview - St Mary's

Performance Report

129 Wildey Street
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**Commission ID:** 5225

**Provider name:** Southern Cross Care (Qld) Ltd

**Site Audit date:** 25 February 2021 to 26 February 2021

**Date of Performance Report:** 28 April 2021

# 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

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **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 |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | 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.
* the provider’s response to the Assessment Contact - Site report received 24 March 2021

# STANDARD 1 COMPLIANT Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

Overall, sampled consumers and representatives confirmed that consumers are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose.

Consumers and representatives interviewed confirmed that they are treated with respect by staff. Consumers and representatives interviewed confirmed that consumers are encouraged to do things for themselves, staff know them as individuals and know what is important to them. Consumers and representatives interviewed confirmed that consumers’ personal privacy is respected and how they can utilise the service to spend time alone or with others.

Feedback from staff interviews demonstrated that staff know what is important to each of the sampled consumers and could describe how they ensure that consumers’ preferences are known and respected. Care documentation provided guidance regarding people who are important to the consumer and their individual preferences in relation to care and services.

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

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

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

Consumers and representatives confirmed they are included in the assessment and care planning process. Consumers interviewed confirmed they are informed about the outcomes of assessment and planning.

Initial assessments are completed that identify consumer’s needs, goals and preferences. Risks are identified as part of the assessment and care planning process.

Care plans are reviewed on a three-monthly basis or as consumer care needs change.

Staff could describe how they use assessment and planning to inform how they deliver safe and effective care. Staff could describe what is important to the consumers sampled in terms of how their personal and clinical care is delivered, including their needs, goals and preferences.

The service accesses external services and allied health professionals as required to support consumer care

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

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

Consumers and representatives confirmed they receive the care they need and have access to a MO or other health professional when required. Consumers and representatives reported the service includes them in decisions about their care and care is tailored to their needs, goals and preferences. Consumers nearing the end of life receive safe and appropriate care which maintains their comfort and dignity.

Care documentation demonstrates deterioration or changes in the consumer’s health care needs are responded to in a timely manner.

Care staff could describe sampled consumers individual needs and preferences and how these are managed in line with their care plan. Staff could describe strategies used to manage high impact or high prevalence risks for consumers. Registered and care staff interviewed described how they support consumers who are nearing end of life and gave examples of interventions including mouth and eye care, repositioning and pain management to be delivered to maximise comfort and dignity.

Generally care documentation demonstrated required restraint authorisations were in place.

The service has processes in place to minimise infection-related risks.

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.*

The Assessment Team provided information that management did not demonstrate a shared understanding for the use of physical restraint, and restraint authorisation processes had not been consistently followed. Consumers have been restrained without appropriate authorisations.

The Approved Provider provided a response that including clarifying information, as well as care document extracts, restraint records, photographs of the living environment, policies and consumer survey results. The Approved Provider does not agree with the teams findings.

I acknowledge the Approved Provider was able to demonstrate that the service has an understanding of restraint, and that restraint authorisations were already completed for named consumers, bar one, who’s restraint authorisation was completed on the day of the audit. I also accept that the service has provided information via displayed posters and signage to indicate to consumers how to exit the building via the key pad locked door. Representatives were contacted during or just post the audit, and all confirmed their ongoing consent to the use of restraint, including pendant alarms.

I have considered the information contained in the Assessment Teams report as well as the Approved Providers response.

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.*

# STANDARD 4 COMPLIANT Services and support for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

Most of the sampled consumers consider that they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want.

Consumers interviewed throughout the service confirmed they feel supported by the service to do the things they like to do. Consumers interviewed said they feel supported to keep in touch with people who people who are important to them.

Most consumers interviewed advised they were happy with the food provided by the service and it was of a suitable quantity and quality however mixed feedback was received by consumers with respect to varying and availability of meal alternatives.

For the consumers sampled, staff explained what was important to them and what they liked to do and this aligned with consumer feedback and documentation. Staff explained how they know what is normal for consumers and when they identify a change in mood or emotional need they provide additional support and report to the nursing staff.

The Assessment Team observed a variety of activities being undertaken at the service during the audit. This included bingo, church services and an afternoon movie session.

Care plans reviewed under this Standard demonstrated lifestyle assessments had been undertaken to determine the preferences of each consumer.

Menu documentation and interview with hospitality staff demonstrated food options are varied and cater to specific dietary preferences, such as texture modified diets.

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

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

Overall sampled consumers considered that they feel they belong in the service and feel safe and comfortable in the service environment.

Most consumers sampled confirmed they feel safe living at the service, and they can freely and safely access indoor and outdoor areas. Consumers and representatives sampled reported the service is clean and well maintained. Consumers and representatives confirmed their visitors are welcome in the service and they have various areas where they can sit comfortably.

The Assessment Team observed the environment to be secure and clean and tidy.

Staff have an awareness of how to report items requiring maintenance; documentation identified reactive maintenance is attended in a timely manner and preventative maintenance is undertaken as scheduled.

Consumers are supported by staff to move freely around the service environment, both indoors and outdoors.

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

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

The Assessment Team provided information that the whilst the service is safe, clean and well maintained, consumers are not able to more freely within and outside the service environment. Two named consumers advised the Assessment Team that were not able to move freely around the service.

The Approved Provider provided a response that including clarifying information, as well as care document extracts, restraint records, photographs of the living environment, policies and consumer survey results. The Approved Provider does not agree with the teams findings.

I have reviewed the information provided by the Approved Provided and I am satisfied that both named consumers are supported to access areas of the service including outdoors and garden areas. Care plans and progress note extracts demonstrate that the service is aware of the named consumers desire to access garden areas and there are processes in place for this to occur.

I have considered both the Assessment Teams report and the Approved Provider response and I am satisfied that the service environement is safe, clean, well maintained and comfortable, and that consumers are able to move freely around the service environment.

I find this requirement is compliant.

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANT Feedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

Overall sampled consumers considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

Consumers and representatives’ interview could describe the changes the service has implemented to resolve their complaint and the resolution process in response to a complaint and/or feedback.

Staff could describe the processes available to consumers if they wished to lodge a suggestion or raise a complaint and registered and care staff said initially, they attempt to address the concern. They stated if this is unsuccessful, they will escalate the matter to management.

Management advised that complaints are entered into a register and the manager investigates and provides a response that includes ‘open disclosure’ before closing the complaint.

The organisation has a ‘compliments’ policy which sets out the organisation’s feedback and complaints procedures which includes open communication with the complainant. The policy sets out the organisation’s commitment to support consumers to make a complaint with assurance that no negative consequences will arise from raising a complaint.

The service has information available at reception for consumers on how to access advocacy support services should they require assistance to make a complaint or access to an interpreter service.

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

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANT 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

Overall sampled consumers indicated that they get quality care and services when they need them and from people who are knowledgeable, capable and caring.

Consumers interviewed confirmed that staff are kind and caring and respectful of their personal needs and culture. Consumers and representatives interviewed explained staff were aware of consumers’ care needs and preferences. Most consumers and representative advised they think there are adequate numbers of trained staff to provide the care consumers need in a timely manner.

Staff report receiving sufficient training to perform their roles effectively and feeling comfortable approaching management if they require additional support.

Staff at all levels of the service are recruited and qualified to perform their roles and are attentive when interacting with consumers and representatives. Staff competency is monitored at a service level to ensure care delivery is provided by appropriately trained staff.

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

## 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.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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

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

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 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

Overall sampled consumers and representatives indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

Consumers interviewed were of the opinion the service is well run and confirmed they are involved in the development delivery and evaluation of services. Consumers confirmed they are encouraged to make suggestions to enable the service to support them to live the best life they can.

The governing body meets regularly, sets clear expectations and regularly reviews risks from an organisational and consumer perspective. There are organisation wide governance systems and business strategy to support effective compliance with regulatory requirements and systems to manage the finances and resources needed to deliver safe and quality care.

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

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### 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.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# 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.