Southern Cross Care Tenison Swansea Residential Aged Care

Performance Report

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**Commission ID:** 0556

**Provider name:** Southern Cross Care (NSW & ACT) Limited

**Assessment Contact - Site date:** 4 February 2021 to 5 February 2021

**Date of Performance Report:** 19 March 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(e) | Non-compliant |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(d) | Non-compliant  |
| Requirement 3(3)(e) | Compliant |

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# 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 Assessment Team’s infection control monitoring checklist completed during the site assessment.
* The provider’s response to the Assessment Contact - Site report received Tuesday 9 March 2021.

# STANDARD 2 NON-COMPLIANTOngoing 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.

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

Assessment and planning identified and addressed the consumer’s current needs, goals and preferences for most consumers, however care and services plans are not regularly reviewed for effectiveness when circumstances change or when incidents impact on a consumer’s needs, goals or preferences.

The Quality Standard is assessed as Non-Complaint as one of the five specific requirements has been assessed as Non-Complaint.

## 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.*

### Requirement 2(3)(e) Non-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.*

The Assessment Team provided information that care plans and other clinical documentation are reviewed regularly, however this is not always done in a rigorous way when circumstances change, or when incidents occurred, particularly in the management of skin integrity and pressure injuries which impact upon the consumers health and wellbeing.

For a consumer who had a recent fall, with resulting injury, that required hospitalisation, the plan of care did not adequately document effective review of the falls risk or sufficiently outline the level of assistance required by the consumer post hospitalisation.

For a consumer who developed a pressure injury the contributory factors were recognised however the plan of care was not updated with any additional corrective measures for skin integrity management. For another consumer identified as at a high risk of developing pressure injuries an observed pressure injury was not documented on a wound chart for regular review and monitoring at the time of the site assessment. Staff interviewed advised the Assessment Team they would generate a wound chart for the consumer.

The approved provider in providing a response to the Assessment Team’s findings considers 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. However, the approved provider did acknowledge there was omissions in wound charting, and for one consumer the care provided could have been more robust at the time an incident occurred.

The approved provider in their response reports improvements are underway to address issues identified by Assessment Team, including improvements in wound management practices and the establishment of a falls committee, however time is needed to complete the planned actions and to demonstrate their effectiveness.

I have considered the Assessments Teams report and the approved provider response and I find that care and services are not consistently reviewed regularly for effectiveness, particularly when circumstances change, or an incident had impacted on consumers care needs.

I find this requirement is Non-compliant.

# STANDARD 3 NON-COMPLIANTPersonal 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 and examined relevant documents – 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.

Consumer information is communicated within the service and with others involved in their care where responsibility for care is shared however deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is not recognised and responded to in a timely manner.

The Quality Standard is assessed as Non-Complaint as one of the seven specific requirements has been assessed as Non-Complaint.

### Assessment of Standard 3 Requirements

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

The Assessment Team provided information that deterioration or change of consumer’s health, cognitive or physical function, capacity or condition is not always recognised and responded to in a timely manner, particularly for the management of skin integrity and pressure injuries for some consumers.

While registered nurses and care staff can explain the processes established for recognising deterioration or change in a consumes capacity or condition, these processes are not consistently followed. For example:

* For one consumer a pressure injury recognised at the time of an incident was not recognised or responded to previously in routine skin assessments or during episodes of personal care.
* For a consumer who sustained a skin injury requiring hospital transfer and suturing the severity of the wound was not recognised or responded to in a timely manner.
* For another consumer identified as at high risk of developing a pressure injury with longstanding chronic wounds a timely referral to a wound care specialist had not occurred as per the organisations policy for management of chronic wounds.

The approved provider in providing a response to the Assessment Team’s findings considers 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. The approved provider’s written response includes corrective actions implemented in response to issue raised by the Assessment Team in relation to wound management. These actions have occurred since the assessment contact with time needed to complete the planned actions and to demonstrate their effectiveness.

I have considered the Assessment Teams report and the approved provider response and I find at the time of the site assessment deterioration or change of a consumer’s capacity or condition is not consistently recognised and responded to in a timely manner.

I find this requirement non-compliant.

### 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.*

# 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.

The approved provider is required to:

Accreditation Standard 2: Ongoing assessment and planning with consumers

* Ensure care and services are reviewed regularly for effectiveness, and when circumstances change or incidents impact on the needs, goals or preferences of the consumer.
* The services fall committee is to undertake regular analysis, review and monitoring of falls that occur including updating plans of care to effectively guide falls prevention strategies.

Accreditation Standard 3: Personal care and clinical care

* Review and improve processes to ensure 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.
* Ensure all staff receive education on providing effective pressure area care, maintaining skin integrity and the management of wounds.