St Basil's Lakemba

Performance Report

130 Croydon Street   
LAKEMBA NSW 2195  
Phone number: 02 9784 3200

**Commission ID:** 0098

**Provider name:** St Basil's Homes

**Assessment Contact - Site date:** 6 May 2021 to 7 May 2021

**Date of Performance Report:** 7 June 2021

# 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** | **Non-compliant** |
| Requirement 3(3)(a) | Non-compliant |
| Requirement 3(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 1 June 2021

# STANDARD 3 NON-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

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 – 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.

The consumer feedback was mixed with some sampled consumers considering that they receive personal care and clinical care that is safe and right for them, while some other consumers and representative expressed concerns with care provision such as the management of pain and wounds.

While consumers (or representatives on their behalf) gave some positive feedback about clinical and personal care, the review of care and service records does not support that clinical care provided to the consumers sampled is best practice nor optimises consumers’ health and wellbeing. Care plans do not include information about risks for consumers and interventions are not adequate to minimise risk. For the consumers sampled, care and service records do not reflect the identification of, and timely response to deterioration or changes in condition. While there are systems in place for communicating information about the care of consumers, these have not been effective for all consumers sampled.

The Assessment team did not assess all requirements for this Quality Standard. However, a decision of Non-compliant in one or more requirements results in a decision of Non-Compliant for the Quality Standard.

**Assessment of Standard 3 Requirements**

### Requirement 3(3)(a) Non-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 identified the service does not have effective care that demonstrates consistent assessment, intervention, monitoring, review and evaluation of care according to best practice. Consumers therefore do not receive clinical and personal care that is tailored to their needs or optimises their health and wellbeing.

The Assessment Team reviewed a sample of consumer documentation and identified various concerns with clinical care. Falls are not consistently monitored, post-fall observations are not always conducted to ensure a consumer’s safety and well-being, and care is not reviewed to reassess or manage risks to prevent future falls. Significant weight loss for some consumers have occurred and they have not received consistent monitoring or a timely and appropriate response. The service also did not demonstrate consistent management of consumer wounds, with some consumer care not evidencing reviews or documented strategies to manage the wounds. Pain is not always identified, assessed, and monitored consistently; in some instances, the service did not evidence they investigated pain (or other physical concerns) as the cause of challenging behaviour before administering chemical restraint to consumers, which demonstrated both inappropriate pain management and minimisation on the use of restraint. The service also did not follow medical directives from health professionals to manage the care of consumers which would have optimised their health outcomes.

The provider has since given further information to refute some individual consumer examples of concerns above, although they acknowledge in some cases that documentation of care is not always completed in a clear manner to evidence the care provided. The provider has acknowledged many of the concerns raised and have planned a range of continuous improvement actions to address the issues; this includes completing reviews for consumers identified with gaps in their care, increased monitoring of identified consumers, completing a wound audit for consumers, further education to staff regarding clinical issues, development of policies and procedures to amend existing gaps in processes, and further relevant actions.

I find this requirement Non-compliant.

### 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 identified that processes for the escalation and response to deterioration in consumers’ condition have not been effective for all consumers sampled.

The Assessment Team interviewed a sample of consumers who were generally satisfied with the care provided, although a few consumer representatives raised a few concerns about their consumer’s wellbeing or hydration being managed at the service. Staff interviewed described how they manage deterioration and escalate changes in conditions according to their internal processes.

On the other hand, the Assessment Team reviewed a sample of care documentation and identified that escalations to the medical officers or a response by registered nurses is not always evident, and adverse outcomes have occurred to consumers. For example, one consumer’s falls was not evident to have been managed appropriately, and staff did not identify in a timely manner any possible deterioration that might’ve resulted from the falls, and this eventually resulted in significant harm to a consumer.

The provider has responded that they will implement continuous improvement actions as a result of these findings, including further training for staff.

I find this requirement Non-Compliant.

# 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 3(3)(a)

*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.*

* Ensure consumer care documentation is updated to reflect their current care requirements, and when recommendations from external health professionals are provided. Also, ensure that documentation consistently records care that is provided to a consumer, which will evidence the level of care delivered to the service and also enable staff to be aware of the care delivered to the consumer.
* Ensure the management of falls, weight loss, wound management, pain management, and challenging behaviour are improved to ensure that care of consumers are best practice, tailored to their needs, and optimises their health and wellbeing.

### Requirement 3(3)(d)

*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 staff engage in practices to readily recognise and respond to deterioration in consumers, such as monitoring of consumers after incidents such as falls. This might involve further training of staff or improvement of systems within the service to ensure deterioration is readily recognised.