St Elizabeth Home

Performance Report

1 Symonds Road
DEAN PARK NSW 2761
Phone number: 02 8818 8503

**Commission ID:** 0023

**Provider name:** St Elizabeth Home Limited

**Assessment Contact - Site date:** 15 June 2020

**Date of Performance Report:** 10 July 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 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(b) | Non-compliant |
| **Standard 8 Organisational governance** | **Non-compliant** |
| Requirement 8(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.
* the provider’s response to the Assessment Contact - Site report received 6 July 2020.

# 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

The service has not effectively managed high impact or high prevalence risks to enable consumers to enjoy life and live comfortably at the service. Consumers with challenging behaviours have not been managed to minimise harm or threats to their safety or wellbeing. Restraint use has not been managed effectively.

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

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Non-compliant

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

The Assessment Team provided information that the service has not effectively managed high impact or high prevalence risks to enable consumers to enjoy life and live comfortably at the service. Consumers with challenging behaviours have not been managed to minimise harm or threats to their safety or wellbeing. There was evidence of unauthorised use of restraints.

The Approved Provider provided a response that included some clarifying information and corrections to the Assessment Teams report. The Approved Provider acknowledged and accepted the Commission’s findings in relation to this Requirement. The Approved Provider has also outlined improvement actions that are to be undertaken including reviews of processes, education for staff and clinical reviews of consumers.

I find the requirement non-compliant.

# STANDARD 8 NON-COMPLIANTOrganisational 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

Effective risk management systems and practices are not always sustained. Issues identified include deficits in identifying and responding to behaviour management, abuse and neglect of consumers and supporting consumers to live the best lives they can.

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

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Non-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.*

The Assessment Team provided information that effective risk management systems and practices are not always sustained. Issues identified include deficits in identifying and responding to behaviour management, abuse and neglect of consumers and supporting consumers to live the best lives they can.

The Approved Provider provided a response that included some clarifying information and corrections to the Assessment Teams report. The Approved Provider acknowledged and accepted the Commission’s findings in relation to this Requirement. The Approved Provider has also outlined improvement actions that are to be undertaken including education for management and a review of staffing.

I find the 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.

* Ensure effective management of high impact or high prevalence risks associated with the care of each consumer including:
	+ Behaviour management
	+ Management of restraint
	+ Education for staff on the management of high impact or high prevalence risks and the use of restraints.
* Ensure effective risk management systems and practices, including but not limited to the following:
* managing high impact or high prevalence risks associated with the care of consumers;
* identifying and responding to abuse and neglect of consumers;
* supporting consumers to live the best life they can.
* Review monitoring processes to ensure they are effective in monitoring compliance with clinical governance and the management of high impact or high prevalence risks.