Wahroonga

Performance Report

1 Wahroonga Street
BILOELA QLD 4715
Phone number: 07 4992 8300

**Commission ID:** 5128

**Provider name:** Lutheran Church of Australia - Queensland District

**Assessment Contact - Site date:** 28 April 2021 to 29 April 2021

**Date of Performance Report:** 17 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

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| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(a) | Non-compliant |
| **Standard 3 Personal care and clinical care** | **Non-compliant** |
| Requirement 3(3)(a) | Non-compliant |
| Requirement 3(3)(b) | Non-compliant |
| Requirement 3(3)(f) | 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 21 May 2021
* other information and intelligence held by the Commission in relation to the service.

# 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

The Assessment Team did not assess all requirements of this Standard and therefore an overall summary for the Quality Standard is not provided. However, a decision of Non-compliance in one or more requirements results in a compliance rating of Non-compliance for the Quality Standard.

## Assessment of Standard 2 Requirements

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

Initial and ongoing assessment and planning processes were not effective in identifying and considering risks to consumers’ health and well-being. Documentation utilised to inform care delivery was not inclusive of the individual risk to consumers.

Assessment of wounds were not accurate and did not reflect or address the condition of the wounds for five named consumers, inaccuracies included measurements and frequency of wound care. Two of these consumers experienced deterioration of their wounds. Falls risk documentation had not been completed for four months for a consumer with a history of falls. Pressure area risk assessment were not completed for two consumers on entry to the service. Restraint authorities did not contain authorisations from consumers or their representatives.

Monitoring processes have been ineffective in identifying deficits in the assessment and planning of consumer care. While policies and procedures were available to guide staff in completing assessments and care planning, these were not followed by staff.

The Approved provider in its written response has committed to addressing the deficits in assessment and care planning through the action plan completed following the Assessment contact visit. Actions include, care planning processes will be regularly included in the service’s newsletter to remind consumers and representatives of the availability to be included in assessment and care planning processes. Further in-depth case conference discussions will take place including the availability of care plans for consumers and representatives. Registered staff will be supported by the Care partner clinical support member to provide additional oversight in relation to best practice. A weekly audit of care planning and assessment processes will commence.

While I acknowledge the actions taken and planned by the Approved provider to rectify these deficits, these actions are yet to be completed or tested for their effectiveness. Therefore, it is my decision this Requirement is Non-compliant as assessment and planning processes did not consider risks to individual consumers.

# 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 Assessment Team did not assess all requirements of this Standard and therefore an overall summary for the Quality Standard is not provided. However, a decision of Non-compliance in one or more requirements results in a compliance rating of Non-compliance 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.*

Consumers did not receive safe and effective care that was tailored to their needs to optimise their health and well-being. A consumer representative was not satisfied with the delivery and management of wound care. Monitoring processes were ineffective in identifying deterioration in wounds. The care of wounds and pressure injuries was not timely or effective.

A consumer representative was not satisfied with wound care provided by the service and was required to provide wound care subsequent to wound care provided by the service to ensure the wound was clean and odour free. Referral processes to a wound care specialist did not occur for the consumer.

For the named consumer diagnosed with a malignant growth on their forehead, wound care directives were not followed as prescribed. The consumer’s medical officer prescribed regular monitoring and photographs to be taken to monitor the growth progression. Wound charting did not include the need for the wound to be covered until 21 January 2021, when it was noted the consumer removed the dressing covering the wound. The clinical decision to cover the wound was not documented. Wound photographs or measurements were not taken on two occasions in February 2021, and the wound was noted to be affected by maggots on 22 February 2021.

Wound charting completed 22 February 2021 described the growth as now a wound and dimensions indicated the wound had deteriorated. The wound was cleaned and maggots were removed. Review of the wound were inconsistent and did not occur with regularity. While staff described the wound as much larger on 18 April 2021, descriptions or size of the wound were not included to determine the healing progress of the wound. The Approved provider in its written response has included case conferencing information that supports the consumer’s next of kin wishes to keep the consumer comfortable. I also note however a discussion regarding the referral to a wound care specialist was not documented as part of the case conference discussion.

The Approved provider in its response to the Assessment Team’s findings has created an action plan with multiple actions to address the deficiencies in wound care. While I acknowledge these actions and the commitment of the Approved provider to improve wound care at the service, at the time of the Assessment contact wound care delivery was not safe and effective for consumers, and a consumer had negative care outcomes based on poor wound care delivery.

For four named consumers requiring physical and chemical restraint, authorisation documentation did not support the involvement or consent by the consumer or their representative to the use of restraints. Monitoring processes to track the number of consumers requiring restraint were not effective and did not demonstrate steps taken to reduce the number of restraints used at the service. The Approved provider via its action plan has committed to a review of restraint authorisation processes and an audit of restraint documentation to be completed by 30 June 2021.

Based on the information contained above, it is my decision consumers did not receive safe and effective clinical care and therefore this Requirement is Non-compliant.

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

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

The risk to consumers was not effectively managed. Incidents were not documented or reviewed to implement preventative strategies to decrease the risk of further incidents occurring. For two consumers incident reports were not documented when incidents occurred, and consequent follow up investigations to the incidents were delayed.

For one named consumer who experienced three falls between December 2021 and January 2021, incident reports were retrospectively completed and recorded in the incident management system on 18 April 2021. Incident reports indicate the consumer was reviewed following the falls, however it is unable to be determined if these reviews occurred in a timely manner given the length of time between the incident occurring and the incident reports being completed. It is noted the consumer sustained a further seven falls in April 2021, which demonstrates falls prevention strategies were not effective. The consumer was observed to have a sensor mat and hip protectors in place during the Assessment contact.

For a consumer who sustained two skin tears in February 2021, incident reports were not completed until 20 April 2021. Documentation does not support the consumer’s next of kin was notified at the time of the incidents occurring.

A third consumer experienced an unwitnessed fall 16 October 2020 and was not transferred to hospital despite the consumer being prescribed blood thinning medication.

For a named consumer identified in Requirement 3 (3) (a) wound care was not provided as prescribed and they sustained deterioration to their wound. This does not support the management of their high risk of developing deterioration to their chronic wound.

Management stated clinical incidents were to be recorded in the service’s electronic care system to support the creation of clinical indicators. The clinical indicator report contained inaccuracies in relation to chronic wounds. Progress notes are reviewed to identify when incidents occur, and progress notes are reviewed to monitor incidents that have been resolved. A delay of up to two months after the initial incident occurring was noted and the creation of an incident report. This does not support an effective incident management system to address the high-impact for consumers when incidents have occurred.

The Approved provider has included in its action plan actions to be taken in relation to incident reports including daily review of progress notes to ensure incidents have been recorded and education and mentoring to be provided to clinical management staff in relation to incident management.

In effective incident management processes have not supported the management of consumers with high-impact or high-prevalence risk, therefore it is my decision this requirement is Non-compliant.

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

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

Referrals have not occurred in a timely manner for consumers with identified needs. A consumer experienced deterioration in their wounds without referral to a wound care specialist. Dietetic services have not been sought for an obese consumer with diabetes and chronic leg ulcers.

For a named consumer who entered the service with a malignant growth on their forehead which had deteriorated to a large wound found to be infested with maggots, referral to a wound care specialist has not occurred. The Approved provider in its written response has included case conferencing information that supports the consumer’s next of kin wishes to keep the consumer comfortable. I also note however a discussion regarding the referral to a wound care specialist was not documented as part of the case conference discussion.

For another named consumer diagnosed with diabetes, obesity and is at risk of developing pressure injuries, referral to dietetic services had not occurred. Despite the consumers feedback they wished to lose weight.

While the service had referral processes in place these did not occur for the named consumers above. The Approved provider’s action plan completed to address deficiencies in this Requirement contains numerous actions to address the deficits in referral processes. However, these were not in place at the time of the Assessment contact and will require additional time to implement and evaluate for their effectiveness. Therefore, it is my decision this Requirement is 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.

* 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.
* Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:
	+ is best practice; and
	+ is tailored to their needs; and
	+ optimises their health and well-being.
* Effective management of high impact or high prevalence risks associated with the care of each consumer.
* Timely and appropriate referrals to individuals, other organisations and providers of other care and services.