Weeroona Aged Care Plus Centre

Performance Report

14 Trebartha Street
BASS HILL NSW 2197
Phone number: 02 9645 3220

**Commission ID:** 0014

**Provider name:** The Salvation Army (NSW) Property Trust

**Assessment Contact - Desk date:** 21 September 2021 to 22 September 2021

**Date of Performance Report:** 21 October 2021

# Performance report prepared by

Pat Yin Lai, delegate of the Aged Care Quality and Safety Commissioner.

# 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** |  |
| Requirement 3(3)(c) | Compliant |
| **Standard 5 Organisation’s service environment** |  |
| Requirement 5(3)(c) | Compliant |

# Detailed assessment

This performance report details the Commissioner’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 - Desk; the Assessment Contact - Desk report was informed by observations at the service via photographical evidence, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 3 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 service demonstrated that a holistic approach to the provision of care for consumers who are nearing the end of life is undertaken. The service demonstrate that the goals and preferences of consumers nearing the end of life are recognised and addressed or that their comfort is maximised and dignity maintained.

Management advised there were no consumers palliating at the time of the assessment contact, and therefore no consumers were interviewed in relation to palliative care. However, of the consumers interviewed, it was reported that their last wishes were discussed with staff and they have had the opportunity to complete an advance care directive.

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### 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.*

The service demonstrated that they support the needs, goals, and preferences of consumers near the end of life.

The Assessment Team interviewed a sample of consumer and representatives, who reported that they have discussed their last wishes with staff and have had the opportunity to complete an advanced care directive. There were no consumers on a palliative pathway that was interviewed to obtain feedback on palliative care, as management advised there were no consumers currently receiving palliative care at the service.

The Assessment Team reviewed a sample of care plans for consumers nearing the end of their lives, and also for deceased consumers who had recently received palliative care at the service. The team confirmed that their documentation indicates that their care needs have been identified, their wishes and directives are incorporated into their care plans and associated documents, and they have a palliative pathway/end of life plan. Furthermore, the team noted that for deceased consumers that were on a palliative pathway, their progress notes and care plans indicated that their needs were appropriately met.

The Assessment Team interviewed management staff who noted that the service had improved consumer care and services after the last performance assessment, particularly in relation to the provision of palliative/end of life care. They provided various examples, such as the creation of a new committee to discuss this area of care, seeking regular feedback from consumers and representatives, and relevant training sessions provided to staff. Clinical and care staff interviewed confirmed the additional training they have received, and were able to describe how they addressed or increased care needs consumers nearing the end of life.

The Assessment Team sighted supporting documents that indicated palliative care was appropriately managed at the service. For example, the team sighted palliative and end of life care policies and procedures that guided staff practice, and the feedback register which contained compliments from representatives of consumers that were previously on a palliative pathway.

Based on the evidence at the time of assessment, I find this requirement Compliant.

# STANDARD 5 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

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment via photographic evidence, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

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

For example:

* Consumers interviewed confirmed they feel at home in the service, and that they enjoy a life that is of quality and satisfaction. They said the service is clean and well maintained and that they have a say in how often their rooms are cleaned. One consumer said he had seen staff use equipment to assist other consumers with mobility and staff looked like they knew what they were doing.

Staff demonstrated they have a sound knowledge of the use of equipment, how to mitigate infection through sanitisation of the living environment and environmental safety protocols in regard to furniture, fitting and equipment at the service. Staff have been trained in the use of equipment and the maintenance of the living environment to support quality of life.

Through photographic evidence the Assessment Team was able to confirm the service environment is clean and well maintained, equipment is serviced in a timely manner and furniture and fitting are monitored to ensure the safety of consumers.

There are systems in place to ensure the service provides consumers with a safe well-maintained environment and deliver appropriate care and service with the appropriate use of service equipment. The service has access to organisational supports that ensure monitoring of service provision and timely approvals for repairs and procurement of external services and equipment. Staff are trained and monitored for appropriate practice in the use and cleaning of equipment. Service staff have been training in infection control protocols and emergency response.

Not all requirements were assessed and therefore an overall rating for the Quality Standard is not provided

## Assessment of Standard 5 Requirements

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

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

The service demonstrated that furniture, fittings, and equipment are safe, clean, well maintained and suitable for the consumer.

The Assessment team interviewed consumers and representatives who expressed satisfaction with the service environment. They felt that furniture, fittings, and equipment are clean, safe, well maintained and suitable for consumers. They described how the equipment used is regularly maintained and clean, and any faults have been resolved in a timely manner.

The Assessment Team interviewed care staff who were able to describe the current procedures for cleaning equipment before and after use and completing the daily checklist for functionality. They were also able to outline the various needs and preferences regarding the use of mobility equipment with consumers. Furthermore, they were able to demonstrate sound knowledge of the safe and effective use of equipment, and the process to escalate equipment for repair or decommission. The maintenance staff also described the same process and were in alignment with care staff.

The Assessment Team were able to observe the service environment through photographic evidence and confirmed they were observed to be safe, clean and well maintained.

The Assessment Team also reviewed documents provided by the service which evidenced maintenance of the service environment, including a preventative maintenance schedule, relevant policies and procedures, and agreements with external services for the audit and support of equipment.

Based on the evidence at the time of assessment, I find this requirement Compliant.

# 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.