Wyoming Nursing Home

Performance Report

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**Commission ID:** 2355

**Provider name:** Wyoming Nursing Home Pty Ltd

**Assessment Contact - Site date:** 21 August 2020

**Date of Performance Report:** 1 October 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(d) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(b) | 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 considered 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 17 September 2020.

# STANDARD 2 Ongoing 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.

Overall sampled consumers said that they partner in the ongoing assessment and planning of their care and services and this included participating in care conferences to plan and review their needs, goals and preferences. Most consumers interviewed confirmed that they are informed about the outcomes of assessment and planning. However, some of the consumers stated they were not aware they could access their care and services plan if they wish*.*

The Assessment Team found that the sampled care plans adequately detail care needs across the care domains, including complex care, which is assessed and documented by clinical and lifestyle staff in accordance with the consumer’s individual needs and preferences. In addition, consumer care needs are communicated to staff members using a variety of methods. The service demonstrated in most instances the outcomes of consumers assessment and planning including advanced care and end of life planning, are communicated, documented and are available to the consumer and staff.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

**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.*

The Assessment Team found that feedback from consumers and representatives sampled supported that needs, goals and preferences were identified in care planning and in accordance with consumer wishes. For example:

* One consumer said that the frequency for personal care was delivered in accordance with their wishes and by a staff member whom they had requested.
* One consumer’s preference for specific recreational activities were facilitated by care staff although the consumer was not able to fully participate in these activities as they had done previously.
* One consumer said that they were able to talk about their end of life wishes easily with staff.

The Assessment Team found that care planning documentation for sampled consumers, in general, identified, documented and addressed each consumer’s needs, goals and preferences in relation to sleep and wake times, personal care, pain management, meal sizes and lifestyle choices. Advance care and end of life care plans had been recently reviewed for those consumers sampled and details of advance care plans/directives are included in care plan documentation.

Staff could describe what is important to each consumer sampled in terms of how their personal and clinical care is delivered based on individual needs and preferences

The service has policies and procedures to guide staff on best practice around palliative care approach and guidance on advanced care planning.

I have reviewed these findings and consider that the organisation is compliant with this requirement as they have demonstrated in various ways that consumer needs are identified and addressed.

### Requirement 2(3)(d) Compliant

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

The Assessment Team found that care and services plans are regularly updated to ensure that up to date information guides individual consumer care delivery. Care planning involves discussion with consumers and their representatives and feedback from those interviewed generally supported that this process does occur. Staff confirmed that information about consumers care planning outcomes and needs are available to them and that this information is also communicated at shift handover and via the message board. Staff interviewed were able to provide information on how they would manage the specific needs of individual consumers sampled. The service has procedures to guide the regular review and updating of care planning information.

I have reviewed these findings and consider that the organisation is compliant with this requirement as they have demonstrated that outcomes of care planning is communicated to consumers and that care plans are available to the consumer.

# 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.

Most consumers sampled considered that they receive personal and clinical care that is safe and right for them. Some consumers said that they would sometimes wait longer for staff to attend to them.

Staff could describe the particular high impact or high prevalence risks for consumers within the service and also the most significant high impact risks for the consumers.

The Assessment Team did not assess all requirements and therefore an overall rating for the Quality Standard is not provided.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(b) Compliant

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

The Assessment Team found that the organisation trend, analyse and respond to some high impact or high prevalence risks and that the overall approach to assessment and planning is aimed to achieve sound outcomes for consumers. However, they found that some high impact risks were not always minimised or adequately managed for each of the sampled consumers. For example, impacts of risks relating to skin integrity, psychotropic medication management including consent for use, medication and nutritional management were not always consistently managed, reviewed or documented.

The Approved Provided has responded to these findings with further documentation concerning sampled consumers to demonstrate appropriate management of high impact and high prevalence risks within the service. The evidence provided in most instances verified dates where reviews were conducted, extracts of documentation was supplied, however there were no care records provided.

I am persuaded that the Approved Provider’s response together with the information from the team that the service are trending and analysing high impact and high prevalence risks at the service demonstrated that high impact or high prevalence risks are managed appropriately.

I consider that the service is complaint with this requirement.

# 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.