 Yallambee Lodge

Performance Report

1 Binalong Street
COOMA NSW 2630
Phone number: 02 6452 1669

**Commission ID:** 0352

**Provider name:** Snowy Monaro Regional Council

**Assessment Contact - Site date:** 16 December 2020

**Date of Performance Report:** 29 January 2021

# 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

|  |  |
| --- | --- |
| **Standard 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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.

# 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.

Most sampled consumers and/or their representatives were able to confirm they are partners in their ongoing assessment and care planning.

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

## Assessment of Standard 2 Requirements

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

The Assessment Team found the service demonstrates 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.Care plans reviewed provided evidence of assessment and planning that considered risks to the consumer’s health and well-being, and informed safe and effective care and services.

The Assessment Team provided information that consumer care planning documents demonstrate that assessments are completed in a timely manner for new admissions, and these assessments inform the consumer’s care plan and daily care needs. Consumers said they have been involved in the care planning processes. While most consumers were not familiar with the term ‘care plan’ they were able to describe discussions, staff have had with them about their care.

The Assessment Team found that issues demonstrated during previous assessment contacts have been resolved and the service has recently implemented a new electronic care planning system. Consumer care records were paper based before the implementation of this system. Assessments are completed electronically on the system and relevant information automatically populates into consumer’s care plans. This new electronic system also has daily tasks for staff to complete for each consumer. Once completed, these tasks are documented as part of the consumer progress notes. These tasks are informed by assessment and planning of consumer needs.

I find this requirement is compliant as the approved provider can demonstrate assessment and planning process include consideration ofrisks to consumers health and well-being and adequately inform the delivery of safe and effective care and services.

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and* *when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

The Assessment Team found that care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

The Assessment Team provided information that for the consumers sampled; care planning documents generally demonstrated evidence of review, both on a regular basis and when consumer circumstances changed, or incidents occurred. While one consumer’s care planning documents and assessments including a FRAT, mobility assessment, nutrition and skin integrity were not reviewed following a fall and subsequent return from hospital the Assessment Team recognised that most of the consumer’s assessments had only been completed a couple of days before the fall. Management advised that the consumer was now palliating and so some of the assessments were not completed on her return from hospital to maintain her comfort.

For all consumers sampled, care plans and the majority of assessments had been reviewed in at least the last twelve months, in line with the service’s Residential Aged Care – Assessment and Planning Policy. The service has implemented a return from hospital checklist that outlines what care services are to be reviewed/updated, what assessments are to be undertaken and what monitoring is required upon a consumer’s return to the service from hospital.

I find this requirement is compliant as the approved provider can demonstrate care and services are reviewed for effectiveness when circumstances change or when incidents impact on the needs, goals and preferences of 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 sampled consumers considered that they receive personal care and clinical care that is safe and right for them.

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)(a) 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 found that the service demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that is best practice; is tailored to their needs; and optimises their health and well-being.

The Assessment Team provided information that care documents they reviewed, demonstrated that care and clinical interventions are tailored to the needs of consumers and are generally effective in meeting their needs and optimising their health and well-being. While there were some gaps in clinical documentation including photos not regularly taken of wounds, and when they are taken, most do not include a wound ruler to measure for healing or deterioration. Consumers are regularly reviewed for pain and interventions identified in care plans are implemented when required, however, for one consumer the effectiveness of these interventions is not always evaluated. Consumer interviews demonstrated they get the care they need.

The service has policies and procedures relating to use of restraint, pain management and skin integrity and generally these policies and procedures are followed and reflect best practice.

The Assessment Team found that issues demonstrated during previous assessment contacts have been resolved and the service has recently implemented a new electronic care planning system which has helped the staff become aware of consumers ongoing needs.

I find this requirement is compliant as the approved provider can demonstrate as the service can adequately demonstrate that each consumer gets safe and effective personal care which is best practice, tailored to their needs and optimises their health and well-being.

# STANDARD 7 Human resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Most sampled consumers considered staff provide safe quality care which is delivered when they need it and that staff are knowledgeable, capable and caring.

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

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

The Assessment Team found that the workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.

The Assessment Team provided information that the staffing review has been completed with rosters established and generally filled. The review of staffing has increased overall care staff hours, and also ensured a consistent mix of suitable staff in each area over the 24-hour period.

Consumers confirmed staff are kind, caring, competent, provide safe quality care, follow up in a timely manner when they raise issues and promote their independence. Some consumers said staff will do anything for them, know their history and streamline access to activities that are important to them. Most consumers said staff responded to call bells promptly.

Staff provided mixed responses to whether there are enough staff, with most saying they are able to meet consumers’ needs and preferences. Call bell reports are monitored and long waits over 15 minutes are responded to, and any trends identified and analysed.

I find this requirement is compliant as the approved provider can demonstrate the workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.

# 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.