Zion

Performance Report

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**Commission ID:** 5013

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

**Assessment Contact - Site date:** 17 June 2020

**Date of Performance Report:** 16 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 2 Ongoing assessment and planning with consumers** |  |
| Requirement 2(3)(a) | Compliant |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| 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 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

### 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)(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 reviewed care planning documentation and identified interventions to support and manage the consumers’ identified care needs, including associated risks, are documented to support the delivery of safe and effective care.

Consumers and representatives interviewed expressed satisfaction with the assessment and care planning process and the care and services the consumer receives.

Nursing staff advised the service’s assessment and care planning processes includes consideration of consumers’ risks. Care staff reported they are provided with information about consumer’s care needs and preferences.

Procedures are available to guide staff when undertaking assessment and care planning; these include a three-monthly review by a registered nurse, a monthly ‘resident of the day’ review and an annual re-assessment process for each consumer.

For the reasons detailed above, this requirement is Compliant.

# 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

### 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)(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 reviewed consumers’ care planning documentation (including assessments, progress notes, medication charts and monitoring records). The Assessment Team identified consumers receive individualised care that supports their health and well-being.

Consumers and representative provided feedback that the personal and clinical care being provided at the service meets the consumer’s individual needs and preferences. Consumers reported satisfaction with wound care, pain management, diabetes management and skin care; they further reported that staff know their likes and dislikes.

Management described how they monitor the clinical and personal care that is provided. They provided examples of how nursing staff meet with members of the personal care team and allied health professionals to ensure care delivery is optimal. Clinical incident data is collected and analysed to identify emerging trends and to plan appropriate actions.

Staff said they receive assistance and support from registered nursing staff. They reported they have access to policies, procedures, flow charts and education that guides and supports them in their role.

For the reasons detailed above, this requirement is Compliant.

### 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 the service has identified and implemented effective processes to manage the high impact and high prevalence risks associated with the care of each consumer. Risks associated with the care of consumers were identified in care planning documentation and included falls, pain, pressure injuries, and complex behaviours.

Staff demonstrated an understanding of consumers’ needs and could describe how they provide care that both supports the consumer and minimises risk.

Mechanisms to monitor and evaluate care are in place and include:

* monitoring of incident data to identify trends and associated required actions,
* reassessment (including risk assessments) and care plan reviews, occur regularly and as required.

For the reasons detailed above, this requirement is 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.