Performance

Report

**1800 951 822**

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| Name: | Aubrey Downer Aged Care Home |
| Commission ID: | 0137 |
| Address: | 23 Sunnyside Avenue, POINT CLARE, New South Wales, 2250 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | 14 September 2023 |
| Performance report date: | 9 November 2023 |
| Service included in this assessment: | Provider: 2819 Fresh Fields Aged Care (NSW) - No 1 Pty Ltd  Service: 153 Aubrey Downer Aged Care Home |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Aubrey Downer Aged Care Home (**the service**) has been prepared by G Cherry, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

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 Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies any areas in which improvements must be made to ensure the Quality Standards are complied with.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Assessment contact (performance assessment) – site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives, and others.
* Performance Report dated 21 June 2023

# Assessment summary

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| Standard 4 Services and supports for daily living | Not applicable as not all requirements have been assessed |

A detailed assessment is provided later in this report for each assessed Standard.

# 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 required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 4

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| Services and supports for daily living | |  |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| Requirement 4(3)(c) | Services and supports for daily living assist each consumer to:   1. participate in their community within and outside the organisation’s service environment; and 2. have social and personal relationships; and 3. do the things of interest to them. | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |

Findings

The Quality Standard was not fully assessed. Four requirements were assessed and found compliant.

Requirement 4(3)(a)

Previously the service did not demonstrate consumers receive effective lifestyle services/supports to meet their needs as staff did not support activities occurring. Responsive actions include recruitment of additional lifestyle staff to facilitate the service’s lifestyle programs (supplemental programs conducted by care staff on weekends), review of the lifestyle program and engagement of consumers to ensure the program meets needs/preferences (including spiritual needs), completion of lifestyle assessments/care plans, and provision of staff education relating to meaningful activities conducted by a Lifestyle and National Disability Insurance Scheme (NDIS) Coordinator.

Sampled consumers consider they are supported to participate in activities of choice, with alternate activities available. Interviewed staff demonstrate awareness of each consumer’s interest to enable frequent engagement, advising receipt of additional training/support to provide meaningful activities of consumers choice. Review of care planning documents detail currency of information aligned with consumer feedback and staff knowledge. Consumers were observed participating in group and/or independent activities and staff interacting with consumers in a caring/supportive manner. Management advised of ongoing recruitment activities to employ additional lifestyle staff noting additional hours allocated to care staff to assist in administering the lifestyle program to mitigate/minimise consumer impact.

Requirement 4(3)(b)

Previously the service did not demonstrate adequate provision of services/supports to promote consumer’s emotional, spiritual, and psychological well-being as the service did not offer religious or spiritual activities to meet consumers’ needs. Responsive actions include review of consumer’s spiritual and religious needs/preferences via engaging consumers, updating assessment/care plans, scheduling non-denominational services into the lifestyle program, consumer access to iPads enable participation in video streaming of local church services, engagement with local spiritual and religious services to develop a religious support program and community volunteer services to develop supports for consumers’ emotional, spiritual and religious needs.

Sampled consumers/representatives consider consumers receive support to ensure their emotional, spiritual, and psychological wellbeing needs are met. Consumers are supported to attend external church and religious services of their choosing and engage with family/friends to access religious services held within the service and/or via streaming services. They gave examples of staff support relating to their emotional needs. Assessment and care planning documents reflect each consumer’s current personalised preferences. Interviewed staff demonstrate knowledge of each consumer’s needs/preferences. Management and staff demonstrate a variety of methods used to support consumers spirituality in a way they prefer. While not all consumers engage in programmed activities, they demonstrate awareness of available activities if they choose to attend.

Requirement 4(3)(c)

Previously the service did not demonstrate provision of adequate consumer support for those who wished to engage in activities of interest nor access the community. Responsive actions include facilitating a program of regular community bus outings, and use of taxi services, forming connections with local community organisations, engaging consumers in the development of lifestyle programs with support from Lifestyle & NDIS Coordinator.

Sampled consumers/representatives consider the service provides support for consumer participation in their community, maintain social and personal relationships and do the things of interest. Examples include regular group outings, Management and staff describe processes to support consumers and demonstrate thorough knowledge of individual consumer’s relationships and interests. Consumers were observed receiving support with transport options, accessing multiple communal areas to maintain relationships of choice and participate in activities/outings of interest and staff ensuring privacy when appropriate. Assessment and care planning documents demonstrate current, detailed, personalised information reflecting social preferences, meaningful relationship preferences and personal interests.

Requirement 4(3)(e)

Previously the service did not demonstrate an effective system to provide referrals to advocacy support and other services. Responsive actions include providing relevant information to consumers relating to external support services via subscribing to advocacy network newsletter, engaging volunteers to provide tailored consumer support and review/amend consumers care plans as appropriate.

Management described processes to support consumers with timely/appropriate referrals to other providers/organisations, including access to (and awareness of) advocacy services. Care planning and service documents demonstrate evidence of collaboration with external providers to support individual consumer needs. Interviewed staff gave examples of individual consumer referrals to other providers. Examples include engagement with Seniors Rights Service, who attended the service to communicate with consumers/representatives in relation to advocacy services. Information relating to availability of external advocacy services was observed throughout the service and consumers note awareness of external services including how to access them. Management advised a referral to an external visiting volunteer minister resulted in provision of individual pastoral care. Management and staff explained ongoing efforts to engage with external support networks, including religious groups, schools, volunteer networks, Older Person’s Advocacy Network, community clubs and a library service. Document review demonstrate progress of this engagement process.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)