Benetas St Paul's Terrace

Performance Report

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**Commission ID:** 3055

**Provider name:** Anglican Aged Care Services Group

**Site Audit date:** 17 May 2022 to 20 May 2022

**Date of Performance Report:** 17 June 2022

# Performance report prepared by

Vanessa Stephens, 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 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | 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 Site Audit; the Site Audit 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 Site Audit report received on 14 June 2022.

# STANDARD 1 COMPLIANTConsumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

Overall, sampled consumers considered that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. For example:

* Consumers described how they feel respected and valued. Consumers also expressed satisfaction that their cultural needs and preferences are respected.
* Consumers described how they are supported to maintain their independence by exercising choice about how their care is delivered.
* Consumers described how they make and communicate decisions about their care, choose who is involved in their care and that they can make connections and maintain relationships.
* Consumers expressed satisfaction with the way information is communicated to them and described in various ways how staff maintain their privacy.

Staff described how they support consumers to take risks and support them to understand the benefits and possible harm when they make decisions involving risk.

Care planning documents reflect consumer diversity and were consistent with preferences as described by consumers and their representatives. Care plans reflect that care and services provided at the service are culturally safe.

The Assessment Team observed staff treating consumers with dignity and respect.

The Quality Standard is assessed as compliant as six of the six specific requirements have been assessed as compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANTOngoing 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

Overall, consumers and representatives interviewed said they are involved in initial and ongoing assessment and planning of their care and services. Consumers are satisfied that care is based on an ongoing partnership with them and includes involvement from health care professionals.

Most consumers and representatives expressed satisfaction regarding communication related to assessment and care planning. Most consumers said they are not aware they have a care plan. The service stated that on admission, consumers and families are informed they can request a copy of consumer care plans.

Staff said they have ready access to information to support delivery of safe and effective care and services to consumers through assessment, care planning and associated documentation. Staff described how they engage with consumers and their representatives in relation to end of life planning.

The service utilises a suite of assessment tools, charts and reviews to identify any potential deficits in consumer health and well-being. These are completed on entry to the service and on an ongoing, scheduled basis thereafter.

Sampled consumer files included information on the current needs, goals and preferences of consumers, including advance care directives. File review demonstrates there is evidence of ongoing review and updates, including when circumstances change.

The Quality Standard is assessed as compliant as five of the five specific requirements have been assessed as compliant.

## 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.*

### 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.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

### 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.*

### 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.*

# STANDARD 3 COMPLIANTPersonal 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

Most sampled consumers considered that they receive personal care and clinical care that is safe and right for them. For example:

* Most consumers and their representatives expressed satisfaction with the personal and clinical care provided.
* Most consumers and their representatives said they are satisfied with the responsiveness of service staff and other health professionals when there has been a change in consumer function or capacity.
* Consumers and their representatives confirm that referrals occur to medical officers and other health professionals when their care needs require specialist input.

Clinical and care staff described effective management of high impact or high prevalence risks associated with the care of each consumer. Staff demonstrated an understanding of the needs of consumers nearing the end of life. Management and clinical staff explained the service’s processes for minimising the use of antibiotics.

Assessments and care plans reviewed identified appropriate interventions and strategies to support clinical care in a number of areas. Sample file review indicates management of high impact or high prevalence risks associated with the care of each consumer is mostly effective.

Care planning documents including progress notes, handover sheets, referrals, charts and care plans provide adequate information to support safe and effective information sharing.

Overall, the Assessment Team observed consistent and effective infection prevention and control practices during the site audit, including staff using personal protective equipment correctly and performing hand hygiene.

The Quality Standard is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

### 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.*

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

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

### 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.*

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

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

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

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# STANDARD 4 COMPLIANTServices and supports for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

Overall, sampled consumers considered that they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do. For example:

* Consumers mostly expressed satisfaction with the supports provided to meet their needs, goals and preferences.
* Consumers said they are satisfied with how staff support their spiritual and emotional well-being.
* Consumers and their representatives said they can participate within and outside the service environment and do things that are of interest to them. Consumers said they can maintain relationships that are important to them with family and friends and they are supported by the service to do this.
* Consumers and their representatives described how they have access to other organisations and services to meet their needs.
* Most consumers and their representatives were satisfied with the quality of food at the service and said they are offered sufficient quantity and choice.

Staff provided examples of how they promote consumer well-being and described the relationships and interests of consumers, both within and outside the service. Staff described how they contact outside organisations and involve them in supporting the care and services provided to consumers.

A review of sampled care planning documents and staff feedback demonstrated there is a process in place to ensure that information about consumer condition, needs and preferences are communicated within the service and with others responsible for the delivery of care and services.

The Assessment Team observed consumers with differing mobility and cognition care needs being supported to participate in activities by staff. The Assessment Team also observed a range of equipment to support lifestyle activities and social participation and observed that the equipment was clean and well maintained.

The Quality Standard is assessed as compliant as seven of the seven specific requirements have been assessed as compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*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.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*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.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANTOrganisation’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

Consumers said they feel safe and comfortable at the service and expressed satisfaction with the service’s cleanliness and the general environment. Consumers reported that furniture and equipment are clean and maintenance occurs promptly.

The service offers a layout of separate apartments each with its own dining and lounge areas. Consumers were observed to freely access external courtyards via automated opening doors and wide corridors allowed for free movement within the service. Communal spaces such as the coffee shop area and a large mixed-use meeting area contribute to consumer capacity to engage and interact. Cleaning staff described the process by which equipment, furniture and fittings are cleaned and maintained. The Assessment Team observed the service environment to be welcoming, clean and well maintained.

The Quality Standard is assessed as compliant as three of the three specific requirements have been assessed as compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

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

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

# STANDARD 6 COMPLIANTFeedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

Overall, sampled consumers considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken. For example:

* Consumers and representatives are satisfied with the feedback and complaints process and feel encouraged and supported to speak up when they have concerns. Consumers provided examples of when they have made complaints and how responsive management were in rectifying matters.
* Consumers and representatives expressed satisfaction in the response by management to complaints raised or feedback provided and how staff and management acknowledge mistakes made and apologise if things go wrong.
* Consumers and representatives described in various ways how feedback and complaints had resulted in improving the quality of care and services.

Staff described how they support consumers to raise concerns. Staff were able to describe the process of open disclosure.

The service conducts regular consumer pulse surveys and information gathered is reviewed and monitored by management. The service logs issues or suggestions on the service’s plan for continuous improvement which is reviewed at both a site and organisational level.

The Assessment team observed written materials on display regarding complaint processes and accessing advocacy and language services.

The Quality Standard is assessed as compliant as four of the four specific requirements have been assessed as compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANTHuman 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

Overall, sampled consumers considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. For example:

* All consumers interviewed said that staff interact in a kind, caring and respectful manner. Consumers confirmed that staff are sufficiently skilled enough to meet their care needs and expressed satisfaction regarding staff knowledge.
* Most consumers expressed satisfaction with the number of staff available.
* Consumers expressed satisfaction that staff are suitably recruited, trained and equipped to support their care needs.

Most clinical and care staff expressed satisfaction that there is sufficient personnel to provide care and services to consumers in a timely manner. Management described how staff are recruited to meet the requirements of the role and how they monitor staff competency. Management demonstrated processes to assess, monitor and review the performance of staff employed at the service.

Roster documentation demonstrates shifts are filled, including unplanned leave. Staff confirmed participation in mandatory and ongoing training. Documentation demonstrates staff have qualifications relevant to their role and that their competency is monitored.

Throughout the site audit, the Assessment Team observed staff treating consumers in a kind, caring and respectful manner.

The Quality Standard is assessed as compliant as five of the five specific requirements have been assessed as compliant.

## 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.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANTOrganisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

Consumers are satisfied the service is well run and explained how they are involved and have input into their care and services.

Clinical, care and lifestyle staff explained how they engage consumers and their representatives to ensure consumers receive the care that is right for them. Staff demonstrated an understanding and practical application of how they respond to abuse and neglect. Staff described how they support consumers to live their best life by using a dignity of risk approach.

Management demonstrated how the Board is engaged with and accountable for delivery of safe, inclusive, and quality care and services. Management demonstrated how their clinical governance framework provides an overarching monitoring system for clinical care. The framework addresses key clinical governance areas such as antimicrobial stewardship and minimising the use of restraint.

The service also demonstrated effective governance systems in relation to information management, continuous improvement, financial and workforce governance, and regulatory compliance.

The Quality Standard is assessed as compliant as five of the five specific requirements have been assessed as compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# 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.