Clayton Church Homes - Onkaparinga Valley

Performance Report

38 Nairne Road
WOODSIDE SA 5244
Phone number: 08 8389 7566

**Commission ID:** 6847

**Provider name:** Clayton Church Homes Inc

**Assessment Contact - Site date:** 11 August 2022

**Date of Performance Report:** 6 September 2022

# Performance report prepared by

Janine Renna, 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** |  |
| Requirement 4(3)(c) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(a) | 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 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; and
* the provider’s response to the Assessment Contact - Site report received on 26 August 2022, acknowledging the Assessment Team’s findings.

# 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 assessed Requirement (3)(g) in Standard 3 Personal care and clinical care as part of the Assessment Contact and have recommended the service meets the Requirement. As all other Requirements in this Standard were not assessed, an overall rating of the Standard has not been provided.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find the service compliant with Requirement (3)(g) in Standard 3 Personal care and clinical care. I have provided reasons for my finding under the specific Requirement below.

### Assessment of Standard 3 Requirements

### 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.*

The Assessment Team was satisfied the service demonstrated effective standard and transmission based precautions, and practices to promote appropriate antibiotic prescribing and use have been implemented to minimise infection related risks. The Assessment Team provided the following evidence relevant to my finding:

* Consumers and representatives were satisfied with how coronavirus (COVID-19) outbreaks have been managed and confirmed consumers were monitored and well informed at all times.
* Four staff were satisfied with the level of support they received during COVID-19 outbreaks, as additional staff were rostered, they were well informed and personal protective equipment (PPE) stocks were adequate. All staff confirmed they have completed infection training, including hand hygiene, COVID-19, and donning and doffing of PPE.
* Handwashing and sanitiser stations were observed in hallways throughout communal areas and PPE stations were set up at entry points and included donning and doffing instructions, and handwashing and ‘cover your cough’ signs. Staff were wearing face masks and shields and were observed washing their hands after providing care to consumers.
* Management confirmed management of outbreaks are regularly reviewed and changes are made to the Outbreak management plan when areas for improvement are identified.
* There are processes to ensure consumers who reside in ‘red zones’ are not isolated.
* Antimicrobial stewardship is a standard agenda item at the service’s Medication advisory committee and infections are regularly monitored at both the service level and through head office, with appropriate interventions actioned when required.

Based on the information summarised above, I find the service compliant with Requirement (3)(g) in Standard 3 Personal care and clinical care.

# STANDARD 4 Services 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

The Assessment Team assessed Requirement (3)(c) in Standard 4 Services and supports for daily living as part of the Assessment Contact and have recommended the service meets the Requirement. As all other Requirements in this Standard were not assessed, an overall rating of the Standard has not been provided.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find the service compliant with Requirement (3)(c) in Standard 4 Services and supports for daily living. I have provided reasons for my finding under the specific Requirement below.

## Assessment of Standard 4 Requirements

### 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.*

The Assessment Team was satisfied the service demonstrated services and supports for daily living assist each consumer to participate within their community, have social and personal relationships, and do the things of interest to them. The Assessment Team provided the following evidence relevant to my finding:

* Consumers said they are supported to engage in activities of interest and foster social and personal relationships that are important to them, both within and outside the service environment.
* Lifestyle assessments are undertaken and used to identify consumers’ needs and interests, and are documented in a care plan to guide staff in providing tailored and appropriate service delivery. Care planning documentation was reflective of sampled consumers’ interests.
* Consumers’ attendance to activities is monitored and one-to-one support is offered as needed.
* Staff provided examples of how consumers are supported to participate in their community and maintain relationships of choice, including during COVID-19 outbreaks.

Based on the information summarised above, I find the service compliant with Requirement (3)(c) in Standard 4 Services and supports for daily living.

# 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

The Assessment Team assessed Requirement (3)(a) in Standard 7 Human resources as part of the Assessment Contact and have recommended the service meets the Requirement. As all other Requirements in this Standard were not assessed, an overall rating of the Standard has not been provided.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find the service compliant with Requirement (3)(a) in Standard 7 Human resources. I have provided reasons for my finding under the specific Requirement below.

## 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 was satisfied the service demonstrated 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 the following evidence relevant to my finding:

* Consumers and representatives were satisfied with the number of staff and said consumers did not have too wait long for staff to attend to their needs. Consumers acknowledged COVID-19 has impacted staffing numbers, however, said it did not impact on the delivery of services and supports, and staff were always apologetic if they were delayed.
* Staff said they have enough time to conduct their duties and overall, there are enough staff rostered each day.
* There are processes for planning and managing the workforce to ensure the number of staff are sufficient to meet consumers’ needs. The staffing model is based on the number of consumers and their acuity, and the number and mix of staffing is adapted in response to changing needs of consumers.
* Management said the service is actively recruiting, particularly for personal care workers, however, the service faces challenges due to its location; the service has employed the services of an external recruitment consultant to assist with this process.
* The organisation monitors and reports on the service’s workforce structure, such as vacant shifts, agency usage and recruitment at the site level and the executive through sub-committees and the Board. The organisation’s current workforce strategy is focused on improved recruitment methods and the retention of staff.

Based on the information summarised above, I find the service compliant with Requirement (3)(a) in Standard 7 Human resources.

# 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.