Eldercare The Village

Performance Report

4-6 Centenary Avenue   
MAITLAND SA 5573  
Phone number: 08 8832 2293

**Commission ID:** 6102

**Provider name:** Eldercare Australia Ltd

**Assessment Contact - Site date:** 25 July 2022 to 26 July 2022

**Date of Performance Report:** 18 August 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)(b) | Compliant |
| **Standard 7 Human resources** |  |
| Requirement 7(3)(b) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | 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 6 August 2022 stating that a formal response to the Assessment Team’s recommendations will not be submitted.

# 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)(b) 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)(b) 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)(b) Compliant

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

The Assessment Team was satisfied the service demonstrated effective management of high impact or high prevalence risks associated with the care of consumers. The Assessment Team provided the following evidence relevant to my finding:

* Consumers and representatives were satisfied with the care consumers receive. Representatives confirmed they are notified when incidents occur, including any action taken in response.
* Staff described the process for identification, management and review of high impact or high prevalence risks, including in relation to falls, mobility, weight loss, behaviours and use of electronic equipment. Staff demonstrated understanding of risks associated with sampled consumers’ care and provided examples of strategies to manage these risks.
* Care files sampled showed identification of risks associated with the care of consumers, such as use of motorised wheelchairs, falls, wounds, pain, food and fluid intake, and behaviours. Risk mitigation strategies were documented and evaluated for effectiveness. For four sampled consumers, additional monitoring and charting of risks had occurred and external provider input sought ,where appropriate, to ensure risks were effectively managed.
* Documentation showed staff do not consistently document the efficacy of as required medication, and Medical officer directives in relation to one consumer’s medication were not consistently followed. There was no evidence of adverse outcomes to consumers or ineffective management of risk.
* Clinical governance meetings are held regularly to review consumers’ risks and associated management strategies.

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

# 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)(b) 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)(b) 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)(b) Compliant

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

The Assessment Team was satisfied the service demonstrated workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. The Assessment Team provided the following evidence relevant to my finding:

* Consumers and representatives interviewed said staff are kind and caring, treat consumers with respect and take an interest in consumers’ preferences.
* Staff demonstrated knowledge of consumers’ history and described them as family.
* Induction processes outline the service’s expectations for staff when interacting with consumers.
* Staff were observed interacting with consumers in a calm, caring and positive manner. Volunteers were observed engaging with consumers and undertaking activities that reflected their background, identity and culture.

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

# STANDARD 8 Organisational 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

The Assessment Team assessed Requirement (3)(d) in Standard 8 Organisational governance 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)(d) in Standard 8 Organisational governance. I have provided reasons for my finding under the specific Requirement below.

## Assessment of Standard 8 Requirements

### 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.*

The Assessment Team was satisfied the service demonstrated effective risk management systems and practices in relation to managing high impact or high prevalence risks associated with consumers, identifying and responding to abuse and neglect of consumers, supporting consumers to live the best life they can, and managing and preventing incidents. The Assessment Team provided the following evidence relevant to my finding:

* The organisation’s risk management framework includes policies to guide staff in managing high impact or high prevalence risks associated with the care of consumers, including nutrition and hydration, weight loss, pain, falls and wounds.
* Regular audits are undertaken to identify trends associated with high impact or high prevalence risks and ensure staff are effectively performing their roles.
* Staff have received training in relation to identifying and responding to abuse and neglect of consumers, incident management and the Serious Incident Response Scheme.
* The organisation has an incident management system which is used to report incidents, including those associated with care or abuse and neglect of consumers. Sampled incidents were reported within the organisation and to relevant external agencies, in line with regulatory obligations.
* There are processes to ensure consumers live their best life by being supported to make choices which involve an element of risk.

Based on the information summarised above, I find the service compliant with Requirement (3)(d) in Standard 8 Organisational governance.

# 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.