Performance

Report

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| Name of service: | IRT Thomas Holt Kirrawee |
| Service address: | 1-25 Acacia Road North KIRRAWEE NSW 2232 |
| Commission ID: | 0157 |
| Approved provider: | Illawarra Retirement Trust |
| Activity type: | Assessment Contact - Site |
| Activity date: | 12 January 2023 |
| Performance report date: | 8 February 2023 |

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 IRT Thomas Holt Kirrawee (**the service**) has been prepared by J Durston, 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 - Site; the Assessment Contact - Site report was informed by a site assessment on 12 January 2023, observations at the service, review of documents and interviews with staff, consumers/representatives, and others, and
* the Performance Report dated 27 May 2021 in relation to the Site Audit conducted from 19 to 22 April 2021.

The provider did not submit a response to the Assessment Team’s report for the Assessment Contact.

# Assessment summary

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

# 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 preference 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)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |

Findings

Following a Site Audit conducted from 19 to 22 April 2021, the service was found to be non-compliant with Requirements 4(3)(a), 4(3)(b) and 4(3)(e), as deficits were identified in the provision of safe and effective services and supports for daily living. Care plans did not include personalised needs, goals, preferences, or evidence of timely and appropriate referrals to promote the emotional spiritual, psychological well-being of sampled consumers. Lifestyle assessments were not integrated with other care planning domains. The service did not evidence consumer involvement in identifying their needs and reviewing and updating their care plans, and staff did not demonstrate knowledge of sampled consumers’ backgrounds, and lifestyle needs and preferences. Lifestyle activities were not accessible to all consumers.

During the Assessment Contact on 12 January 2023, the service provided evidence it had initiated a range of continuous improvements in response to the findings of the 2021 Site Audit. The Assessment Team’s report included actions taken by the service to address the non-compliance and recommends Requirements 4(3)(a), 4(3)(b) and 4(3)(e) met.

In relation to Requirement 4(3)(a), most sampled consumers received services and supports for daily living that promote their social spiritual and psychological well-being and quality of life. Most consumers said they are satisfied with services and supports provided for daily living and that they optimise their health, independence, and well-being. Consumers described activities on the calendar they enjoy doing.

Staff demonstrated a good understanding of sampled consumers’ needs, goals and preferences and care strategies for meeting them, aligned to care and lifestyle plans. They explained the support needs of a sampled consumer living with anxiety and were observed providing the consumer with appropriate emotional support that appeared to reassure them.

Care documentation showed lifestyle assessments are current and detailed. The service has added its paper-based consumer ‘knowing me’ document to the electronic care documentation system, providing a detailed personal context for all care planning domains. The document has been upgraded to include more comprehensive information about consumers’ community, personal interests and support needs, goals, and preferences. The service’s activity calendar is now reviewed monthly and contains more activities suggested by consumers, and there is now a wheelchair accessible bus available for outings once a week.

In relation to Requirement 4(3)(b), most sampled consumers were generally satisfied that services and supports for daily living optimise their emotional, spiritual and psychological well-being. Sampled consumers described spiritual support they receive and activities they enjoy, including bingo, bowls, exercise groups and singalongs. One consumer stated they have no issues with the activities now but noted there still are not many activities on the weekend.

Care documentation showed the service has updated sampled consumers’ care plans to include their social, emotional, and psychological support needs. The service has recruited new spiritual volunteers and ministers to have one-to-one sessions with consumers. A pastoral newsletter has been created, and staff have received training on palliation and understanding emotional support.

In relation to Requirement 4(3)(e), management and staff identified consumers living with loss, grief, loneliness and mental health conditions, and explained they had been referred to an external service called Emotional Well-being for Older People, to meet their needs. A staff member said they had referred a consumer to an external support organisation when they were feeling down. Staff were observed referring to an assessment report for a new consumer who had been reviewed by Dementia Support Australia to better understand their needs goals and preferences.

The service is referring consumers to external bilingual support services and community cultural groups to meet their cultural needs. The service has introduced exercise physiology sessions, delivered by an external provider, to help maintain consumers’ strength and overall well-being.

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

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