Juniper Korumup

Performance Report

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ALBANY WA 6330  
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**Commission ID:** 7227

**Provider name:** Uniting Church Homes

**Assessment Contact - Site date:** 16 March 2022

**Date of Performance Report:** 12 May 2022

# Performance report prepared by

Marek Dubovinsky, 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)(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 12 April 2022.

# 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. All other Requirements in this Standard were not assessed, therefore, an overall rating of the Standard is not provided.

The Assessment Team have recommended Requirement (3)(b) not met. The Assessment Team were not satisfied the service was able demonstrate effective management of high impact risks associated with weight loss for three consumers and skin care for two consumers.

I have considered the Assessment Team’s findings, the evidence documented in the Assessment Team’s report and the provider’s response and I have come to a different view and find Uniting Church Homes, in relation to Juniper Korumup, Compliant with Requirement (3)(b). I have provided reasons for my findings in 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 found the service was unable to demonstrate effective management of high impact risks associated with weight loss for three consumers and skin care for two consumers. This was evidenced by;

Consumer A

* The consumer was reviewed by a specialist approximately one month prior to the Assessment Contact and was commenced on a medication to manage a medical condition. Following the commencement of the medication, the consumer experienced significant weight loss and an incident. A case conference was completed.
* The consumer indicated following the changes in medication they don’t eat much.
* Staff advised the consumer refused lunch during the Assessment Contact.
* Food charting was commenced three weeks prior to the Assessment Contact and this was inconsistently completed.
* The consumer’s medical officer was aware the consumer had experienced weight loss.

Consumer B

* The consumer was observed not to consume their meals and staff interviewed advise the consumer refused their meal.
* A food intake chart was inconsistently completed.
* The consumer was not referred to a dietitian and is not on nutritional supplements.

Consumer C

* Two days prior to the Assessment Contact, the consumer was identified with a stage 2 pressure injury. The wound was assessed and a management plan implemented. In addition, the consumer was referred to allied health staff following the injury.
* Documentation prior to the injury showed the consumer is at a high risk of pressure injuries and the injury was not initially identified as a stage 1.
* The consumer lost 4kg in the past three months.

Consumer D

* The consumer’s wound deteriorated and the service had not contacted the wound specialist for clinical support.

The provider submitted a response to the Assessment Team’s report and refutes the Assessment Team’s findings. The provider asserts that they were compliant with the Requirement at the time of the Assessment Contact and submitted the following information and evidence relevant to my finding:

Consumer A

* A mobility review one month prior to the Assessment Contact due to the consumer’s decline.
* The consumers’ food intake charting records.
* Evidence the consumer’s medical officer was notified of ongoing weight loss.
* Staff advised the consumer was on a palliative care pathway

Consumer B

* Records confirming the consumer was reviewed by a medical officer six months prior and was approaching palliation.

Consumer C

* The consumer has a prescribed weight parameter and was in the prescribed weight range despite the weight loss and did not require a dietitian review.
* Treatment records confirming the consumer’s wound was monitored and continues to remain a stage 2 pressure injury.

Consumer D

* Records confirming the consumer’s wound is being managed by a suitably skilled health professional.
* Records confirming the consumer’s medical officer is aware of the chronic wound and has underlying medical issues.

I acknowledge the provider’s response and the additional information provided. Based on the Assessment Team’s report and the provider’s response, I have come to a different view and find at the time of the Assessment Contact, the service was able to demonstrate effective management of high impact or high prevalence risks associated with the care of each consumer.

In relation to Consumer A, I find the consumer’s risk of malnutrition was effectively managed. In coming to my finding I have noted the consumer’s medical officer was aware the consumer was experiencing weight loss and had undertaken a case conference. In addition, a dietitian review of the consumer was completed prior to and following the Assessment Contact. I recognise the service has not consistently monitored the intake of Consumer A’s nutrition and hydration needs and find this an area for improvement.

In relation to Consumer B, I find the consumer’s risk of malnutrition was effectively managed. In coming to my finding, I have noted the provider’s evidence which showed the consumer was reviewed by a medical officer and noted the consumer was unwell and for palliation six months prior to the Assessment Contact.

In relation to Consumer C, I find the consumer’s risk of pressure injury and malnutrition was effectively managed. In coming to my finding, I have noted the consumer was in the assessed ideal weight range. In relation to the management of the risk of pressure injury, I note the consumer had an assessment which identified the consumer was at high risk and following identification of the pressure injury, an assessment was completed in addition to referral to relevant allied health staff. I have noted from the information provided that the wound has remained stable.

In relation to Consumer D, I find the consumer’s wound and associated risks were effectively managed. Records provided by the provider supports my view the consumer’s wound is being effectively managed by a suitably skilled health professional.

Based on the information summarised above, I find Uniting Church Homes, in relation to Juniper Korumup, 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)(a) in Standard 7 Human resources. All other Requirements in this Standard were not assessed, therefore, an overall rating of the Standard is not provided.

The Assessment Team have recommended Requirement (3)(a) not met. The Assessment Team were not satisfied the service was able demonstrate the workforce is planned to enable, and the number and mix of members of the workforce deployed, results in the delivery and management of safe and quality care

I have considered the Assessment Team’s findings, the evidence documented in the Assessment Team’s report and the provider’s response and I have come to a different view and find Uniting Church Homes, in relation to Juniper Korumup, Compliant with Requirement (3)(a). I have provided reasons for my findings in 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 found the service was unable to demonstrate the workforce is planned to enable, and the number and mix of members of the workforce deployed, results in the delivery and management of safe and quality care. The number and mix of staff available is not sufficient to care for consumers with complex needs. This was evidenced by;

* Two consumers were observed not being provided meal services according to their care and service needs.
* The Assessment Team observed one area of the service to have no staff present for an approximate five-minute period.

Consumer A

* The consumer said they would prefer to have their personal hygiene attended to more frequently.
* Staff interviewed said the consumer is offered personal hygiene daily but refuses.

Consumer B

* The consumer is assessed as resistive to being provided personal hygiene. Three staff interviewed confirmed the consumer has challenging behaviours of concern and they need three staff which are not always available.
* The representative was satisfied with the care being provided.
* Records confirming the consumer was referred to a dementia specialist service where strategies were developed, specifically to support the attendance of personal hygiene.

The provider submitted a response to the Assessment Team’s report and refutes the Assessment Team’s findings. The provider asserts that they were compliant with the Requirement at the time of the Assessment Contact and submitted the following information and evidence relevant to my finding:

* Asserts the two consumers were provided meal services and staff respect consumers’ preferences if they chose not to consume their meals.
* Staffing levels are benchmarked on acuity of consumers and that despite having vacant bed numbers, the service is staffed at full occupancy.
* Additional nursing staff are being sponsored to work at the service and this process commenced prior to the Assessment Contact. One of the three staff commenced in the week after the Assessment Contact.

Consumer A

* Case conference completed one month prior which indicates the consumer is dissatisfied with the care and services being provided.
* The response indicates the consumer is provided personal hygiene daily and second daily.

Consumer B

* Acknowledged the consumer has a history of refusal of care and documentation of this refusal should have been recorded.

I acknowledge the provider’s response and the additional information provided. Based on the Assessment Team’s report and the provider’s response, I have come to a different view and find at the time of the Assessment Contact, the service was able to demonstrate 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.

In coming to my finding, I have considered the information in relation to both Consumer A and B and noted both consumers experienced challenging behaviours impacting on the delivery of care and services. I accept the provider’s response indicating they are currently staffed at full occupancy and staffing is based on industry standards. To further support my view, I have considered the mixed feedback provided from consumers and representatives and placed weight on the service’s proactive approach to recruiting further staff. Finally, I have noted the observations made by the Assessment Team and have considered this in the context of the short observation which may have not reflected an accurate representation of the staffing levels and associated service delivery.

Based on the information summarised above, I find Uniting Church Homes, in relation to Juniper Korumup, 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.