Accreditation Decision

**Decision to re-accredit service following a site audit**

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Annie Green Court |
| **RACS ID:** | 1004 |
| **Name of approved provider:** | Mission Australia |
| **Address details:** | 47 Redfern Street Redfern NSW 2016 |
| **Date of site audit:** | 08 October 2019 to 10 October 2019 |

**Summary of decision**

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| **Decision made on:** | 06 November 2019 | |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. | |
| **Decision:** | To re-accredit the service under section 41 of the Rules. | |
| **Further period of accreditation:** | 26 November 2019 to 26 November 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Met |
| Requirement 3(3)(e) | | Met |
| Requirement 3(3)(f) | | Met |
| Requirement 3(3)(g) | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Requirement 4(3)(a) | | Met |
| Requirement 4(3)(b) | | Met |
| Requirement 4(3)(c) | | Met |
| Requirement 4(3)(d) | | Met |
| Requirement 4(3)(e) | | Met |
| Requirement 4(3)(f) | | Met |
| Requirement 4(3)(g) | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Met |
| Requirement 5(3)(c) | | Met |
| Standard 6 Feedback and complaints | | Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Met |
| Requirement 6(3)(d) | | Met |
| Standard 7 Human resources | | Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Met |
| Requirement 8(3)(e) | | Met |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 48 of the Rules.**

Site Audit Performance   
Assessment Report

The Commission makes the decision taking into account this Site Audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this Site Audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Annie Green Court (the Service) conducted from 08 October 2019 to 10 October 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Service against the Aged Care Quality Standards (the Quality Standards) in accordance with the Aged Care Quality and Safety Commission Rules 2018.**

This report contains detailed findings about the performance assessment of the Service against each Quality Standard and the requirements within each Quality Standard. The Quality Standard and assessed requirements are rated as either Met or Not Met.

A Met rating for the Quality Standard means that all requirements of that Quality Standard have been assessed and rated as Met

A Not Met rating for the Quality Standard means that one or more requirements of that Quality Standard has been assessed and one or more of those requirements have been rated as Not Met.

There will be no rating of the Quality Standard if only some of the requirements have been assessed and those requirements have been rated as Met.

This Report is to be read in conjunction with the Quality Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Building Manager | 1 |
| Business Manager | 1 |
| Care staff | 9 |
| Chef | 1 |
| Consumers | 16 |
| Director of Care | 1 |
| General Manager | 1 |
| Kitchen Hand | 1 |
| Leisure and Lifestyle staff | 2 |
| Nurse Educator | 1 |
| Pastoral Care staff | 1 |
| Quality and Compliance Manager | 1 |
| Registered Nurse | 1 |
| Registered Nurse (Aged Care Funding Instrument/Care Plans) | 1 |
| Representatives | 3 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Met

#### 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:

2. The organisation:

(a) has a culture of inclusion and respect for consumers; and

(b) supports consumers to exercise choice and independence; and

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found the organisation met all six of the requirements in relation to this Standard.

Most consumers interviewed said they feel they are treated with dignity and respect and they are supported to make decisions about care and services and exercise independence. Service staff demonstrated awareness of practices to ensure each consumer is treated with dignity and respect and their cultural needs and preferences are considered. The organisation demonstrates they provide consumers with information that is accurate and enables consumers to exercise choice and decision making. The organisation demonstrated a commitment to respecting consumers’ privacy and personal information.

#### Requirements:

##### Standard 1 Requirement 3(a) Met

The organisation demonstrates that each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

##### Standard 1 Requirement 3(b) Met

The organisation demonstrates that care and services are culturally safe.

##### Standard 1 Requirement 3(c) Met

The organisation demonstrates that each consumer is supported to exercise choice and independence, including to:

(i) make decisions about their own care and the way care and services are delivered; and

(ii) make decisions about when family, friends, carers or others should be involved in their care; and

(iii) communicate their decisions; and

(iv) make connections with others and maintain relationships of choice, including intimate relationships.

##### Standard 1 Requirement 3(d) Met

The organisation demonstrates that each consumer is supported to take risks to enable them to live the best life they can.

##### Standard 1 Requirement 3(e) Met

The organisation demonstrates that 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.

##### Standard 1 Requirement 3(f) Met

The organisation demonstrates that each consumer’s privacy is respected and personal information is kept confidential.

### Standard 2: Ongoing assessment and planning with consumers Met

#### Consumer outcome:

1. 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:

2. 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.

#### Summary of Assessment of Standard 2:

The Assessment Team found the organisation met all five of the requirements in relation to this Standard.

All consumers/representatives agreed staff meet the consumer’s healthcare needs ‘always’ or ‘most of the time’. Most consumers confirmed they are involved in the initial and ongoing assessment and planning of the consumer’s care, which helps the consumer to get the care and services they need and prefer. One consumer said they are not involved in planning their care. All consumers/representatives agreed the consumer feels safe ‘most of the time’ or ‘always’. The organisation gets input from other professionals as required to ensure consumers get the appropriate care and services to meet their needs. Most consumers confirmed they are consulted regarding their goals and preferences.

#### Requirements:

##### Standard 2 Requirement 3(a) Met

The organisation demonstrates that 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.

##### Standard 2 Requirement 3(b) Met

The organisation demonstrates that 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.

##### Standard 2 Requirement 3(c) Met

The organisation demonstrates that assessment and planning:

(i) 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

(ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

##### Standard 2 Requirement 3(d) Met

The organisation demonstrates that 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.

##### Standard 2 Requirement 3(e) Met

The organisation demonstrates that 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: Personal care and clinical care Met

#### 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:

2. 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

#### Summary of Assessment of Standard 3:

The Assessment Team found the organisation met all seven of the requirements in relation to this Standard.

All consumers/representatives interviewed said the consumer feels safe living at the service ‘most of the time’ or ‘always’. All consumers/representatives interviewed also agreed the consumer gets the care they need ‘most of the time’ or ‘always’. Staff described how they ensure care is best practice, they described their opportunities for continuing education and how they ensure information is shared both within the organisation and with relevant others outside the organisation. Care staff demonstrated a good working understanding of precautions to prevent and control infection and the steps they take to minimise the need for antibiotics. Staff were also able to identify the highest prevalence risks for the various consumers at the service and how incidents were used to inform changes in practice. Consumers gave various examples of how staff ensured the care provided was right for them, including by regularly consulting them about their care and the way it is provided. Each of the care and service plans reviewed by the Assessment Team evidenced the delivery of safe and effective care. Consumers are consulted regarding their end of life wishes and their preferences are documented. The organisation demonstrated they have a range of policies and procedures to guide and inform staff in the provision of care.

#### Requirements:

##### Standard 3 Requirement 3(a) Met

The organisation demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

##### Standard 3 Requirement 3(b) Met

The organisation demonstrates that effective management of high impact or high prevalence risks associated with the care of each consumer.

##### Standard 3 Requirement 3(c) Met

The organisation demonstrates that the needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.

##### Standard 3 Requirement 3(d) Met

The organisation demonstrates that 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.

##### Standard 3 Requirement 3(e) Met

The organisation demonstrates that 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.

##### Standard 3 Requirement 3(f) Met

The organisation demonstrates that timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### Standard 3 Requirement 3(g) Met

The organisation demonstrates that minimisation of infection related risks through implementing:

(i) standard and transmission based precautions to prevent and control infection; and

(ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

### Standard 4: Services and supports for daily living Met

#### 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:

2. 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.

#### Summary of Assessment of Standard 4:

The Assessment Team found the organisation met all seven of the requirements in relation to this Standard.

The service was able to effectively demonstrate that consumers receive safe and effective services which support them in their daily living. This includes providing services and assistance in linking or referring consumers to external support services such as community visitors and NDIS social support services, for those consumers under the age of 65 years old. The organisation has a range of staff including social workers, social worker students and a pastoral carer who can assist or provide guidance to other services such a psychiatrist to promote consumers’ emotional, spiritual and psychological well-being.

The organisation was able to clearly demonstrate that consumers’ needs and preferences in relation to services and support for daily living, emotional and psychological well-being are clearly communicated to staff within the service. Information in care plans provides staff with clear information on consumers’ cultural needs and wishes as well as emotional and psychological support to enable them to provide an individualised approach.

The service was able to demonstrate, based on feedback from consumers, that meals are sufficiently varied and of suitable quality. Consumer feedback is used in the development of the menu to ensure it reflects consumers’ wishes. The service also has systems in place to ensure compliance with relevant food safety regulations.

The service is able to effectively demonstrate that there are systems in place to ensure that any equipment provided to enable staff to care for consumers is safe, suitable, clean and well maintained. Management undertakes a program of routine servicing of equipment to ensure it is operating within appropriate guidelines. Staff are aware of the need to report any items which are defective as well as cleaning the equipment when required.

#### Requirements:

##### Standard 4 Requirement 3(a) Met

The organisation demonstrates that 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.

##### Standard 4 Requirement 3(b) Met

The organisation demonstrates that services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

##### Standard 4 Requirement 3(c) Met

The organisation demonstrates that services and supports for daily living assist each consumer to:

(i) participate in their community within and outside the organisation’s service environment; and

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

##### Standard 4 Requirement 3(d) Met

The organisation demonstrates that information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.

##### Standard 4 Requirement 3(e) Met

The organisation demonstrates that timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### Standard 4 Requirement 3(f) Met

The organisation demonstrates that where meals are provided, they are varied and of suitable quality and quantity.

##### Standard 4 Requirement 3(g) Met

The organisation demonstrates that where equipment is provided, it is safe, suitable, clean and well maintained.

### Standard 5: Organisation’s service environment Met

#### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

#### Organisation statement:

2. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

#### Summary of Assessment of Standard 5:

The Assessment Team found the organisation met all three of the requirements in relation to this Standard.

Feedback from consumers indicates the environment is welcoming. Consumers said they have their own room with an ensuite bathroom. They can bring in items of furniture and memorabilia, such as photographs to decorate and personalise their room to make it as homelike as possible. Consumers spoke very favourably about how the service was maintained including the cleanliness of communal and personal areas. Consumers advised they were able to move freely around the service and had access to all levels of the building via lifts. Each consumer is able to have a swipe card which enables them to come and go as they choose. This card also enables consumers to access the ground floor garden area. The service also has a smoking area on each level of the building to enable consumers to smoke when they wish to do so.

The organisation has a system in place to manage the routine preventative maintenance of equipment to provide a safe and comfortable environment for consumers. As part of this program the organisation conducts periodic environmental checks to ensure the building and equipment are well maintained. Equipment requiring specialist servicing is referred to specialist tradespeople. The organisation ensures all furniture, fittings and equipment used is safe, clean, well maintained and suitable for the needs and preferences of the consumers. Staff members are aware of their responsibility to report any items requiring maintenance or any hazards.

#### Requirements:

##### Standard 5 Requirement 3(a) Met

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

##### Standard 5 Requirement 3(b) Met

The organisation demonstrates that the service environment:

(i) is safe, clean, well maintained and comfortable; and

(ii) enables consumers to move freely, both indoors and outdoors.

##### Standard 5 Requirement 3(c) Met

The organisation demonstrates that furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

### Standard 6: Feedback and complaints Met

#### 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:

2. 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.

#### Summary of Assessment of Standard 6:

The Assessment Team found the organisation met all four of the requirements in relation to this Standard.

Feedback from consumers indicated they are aware of how to raise issues and felt able to do so with the director of care. Key staff indicated they are aware of the need to refer any issues raised with them to management.

The service has a monthly meeting which also provides a forum in which consumers and their representatives can be consulted about matters as well as raising any issues or concerns. The service has also introduced consumer representatives on each level of the service. Consumers are able to talk with a representative who can then bring issues to management if the consumer does not feel able to raise issues themselves or is unable to attend the resident meeting.

Information on external avenues to resolve concerns is on public display around the service including comments forms on each level of the service. Information is also provided with the resident handbook and residential agreement. The service has policies and processes to manage complaints. Feedback is used by the service to undertake improvements.

#### Requirements:

##### Standard 6 Requirement 3(a) Met

The organisation demonstrates that consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

##### Standard 6 Requirement 3(b) Met

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

##### Standard 6 Requirement 3(c) Met

The organisation demonstrates that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

##### Standard 6 Requirement 3(d) Met

The organisation demonstrates that feedback and complaints are reviewed and used to improve the quality of care and services.

### Standard 7: Human resources Met

#### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

#### Organisation statement:

2. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

#### Summary of Assessment of Standard 7:

The Assessment Team found the organisation met all five of the requirements in relation to this Standard.

The service demonstrated it has a workforce that is appropriately skilled and qualified to provide safe, respectful and quality care and services. The workforce is planned to ensure the service maintains adequate numbers and mix of staff to cater to consumer needs. The organisation demonstrates that the workforce is educated and trained to ensure staff have adequate skills and qualifications to perform their roles or are supported in working towards same. Staff are provided with equipment and training relevant to their roles. There are processes to assess, monitor and review staffs’ competency and performance in their roles. Consumers confirmed that staff treat them with respect, are kind and caring and gave examples of what this meant to them.

#### Requirements:

##### Standard 7 Requirement 3(a) Met

The organisation demonstrates that 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.

##### Standard 7 Requirement 3(b) Met

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

##### Standard 7 Requirement 3(c) Met

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

##### Standard 7 Requirement 3(d) Met

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

##### Standard 7 Requirement 3(e) Met

The organisation demonstrates that regular assessment, monitoring and review of the performance of each member of the workforce.

### Standard 8: Organisational governance Not Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found the organisation met four out of five requirements in relation to this Standard.

The organisation demonstrated that consumers have a say in the way care and services are provided to them including acknowledgement of their preferences for delivery of services. Most consumers interviewed said they have a say in their daily activities and the place is well run. The service and its staff are supported by an organisational governance framework which promotes a culture of safe, inclusive and quality care.

The organisation implements processes to monitor, manage and evaluate consumers who display high impact, high prevalence risks associated with their care and emotional well-being however, the potential for harm to consumers and/or others does not trigger high-risk behaviour monitoring unless the risk of harm is imminent or has already occurred.

There are processes to identify and respond to abuse and neglect of consumers however not all incidents of abuse are reported to the Department of Health.

Management are improving staffing to ensure relevant qualified staff are available at the service to provide safe and effective clinical governance. New processes have been implemented to ensure safe and correct storage and administration of restricted medications. There are processes to address antimicrobial stewardship, support open disclosure and minimise the use of restraint.

The service’s approach to risk management supports consumers to live the best life they can. Staff interviewed demonstrated awareness of these systems and how they are applied in practice. Feedback from consumers and their representatives about the service and management of care and services was predominantly favourable.

#### Requirements:

##### Standard 8 Requirement 3(a) Met

The organisation demonstrates that consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

##### Standard 8 Requirement 3(b) Met

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

##### Standard 8 Requirement 3(c) Met

The organisation demonstrates that effective organisation wide governance systems relating to the following:

(i) information management

(ii) continuous improvement

(iii) financial governance

(iv) workforce governance, including the assignment of clear responsibilities and accountabilities

(v) regulatory compliance

(vi) feedback and complaints

##### Standard 8 Requirement 3(d) Not Met

The organisation demonstrates that effective risk management systems and practices, including but not limited to the following:

(i) managing high-impact or high-prevalence risks associated with the care of consumers

(ii) identifying and responding to abuse and neglect of consumers

(iii) supporting consumers to live the best life they can

##### Standard 8 Requirement 3(e) Met

The organisation demonstrates that where clinical care is provided - a clinical governance framework, including but not limited to the following:

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure.