Accreditation Decision

**Decision not to revoke accreditation following review audit**

**Decision to vary period of accreditation following review audit**

**Service and approved provider details**

|  |  |
| --- | --- |
| **Name of service:** | Beechwood Aged Care  |
| **RACS ID:** | 2580 |
| **Name of approved provider:** | Allity Pty Ltd |
| **Address details:**  | 3-17 Albert Street REVESBY NSW 2212 |
| **Date of review audit:** | 11 – 15 November 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 18 December 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 77 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service after receiving a review audit report. |
| **Decision:** | Not to revoke the accreditation of the service under section 77 of the Rules.To vary the period of accreditation under section 77(4)(a) of the Rules. |
| **Varied period of accreditation:** | 18 December 2019 to 18 June 2020 |
| **Assessment of performance with the Aged Care Quality Standards** |
| Standard 1 Consumer dignity and choice |  **Not Met** |
| Requirement 1(3)(a) | Not Met |
| Requirement 1(3)(b) | Not Met |
| Requirement 1(3)(c) | Met |
| Requirement 1(3)(d) |  Not Met |
| Requirement 1(3)(e) |  Not Met |
| Requirement 1(3)(f) |  Met |
| Standard 2 Ongoing assessment and planning with consumers |  **Not Met** |
| Requirement 2(3)(a) |  Not Met |
| Requirement 2(3)(b) | Not Met |
| Requirement 2(3)(c) |  Met |
| Requirement 2(3)(d) | Not Met |
| Requirement 2(3)(e) |  Met |
| Standard 3 Personal care and clinical care |  **Not Met** |
| Requirement 3(3)(a) |  Not Met |
| Requirement 3(3)(b) |  Not Met |
| Requirement 3(3)(c) |  Not Met |
| Requirement 3(3)(d) |  Not Met |
| Requirement 3(3)(e) |  Not Met |
| Requirement 3(3)(f) | Not Met |
| Requirement 3(3)(g) | Not Met |
| Standard 4 Services and supports for daily living |  **Not Met** |
| Requirement 4(3)(a) |  Not Met |
| Requirement 4(3)(b) |  Not Met |
| Requirement 4(3)(c) |  Not Met |
| Requirement 4(3)(d) |  Not Met |
| Requirement 4(3)(e) |  Met |
| Requirement 4(3)(f) | Not Met |
| Requirement 4(3)(g) |  Met |
| Standard 5 Organisation’s service environment | **Not Met** |
| Requirement 5(3)(a) | Met |
| Requirement 5(3)(b) | Not Met |
| Requirement 5(3)(c) |  Met |
| Standard 6 Feedback and complaints |  **Not Met** |
| Requirement 6(3)(a) |  Met |
| Requirement 6(3)(b) |  Met |
| Requirement 6(3)(c) |  Not Met |
| Requirement 6(3)(d) |  Not Met |
| Standard 7 Human resources |  **Not Met** |
| Requirement 7(3)(a) |  Not Met |
| Requirement 7(3)(b) |  Not Met |
| Requirement 7(3)(c) |  Not Met |
| Requirement 7(3)(d) | Not Met |
| Requirement 7(3)(e) |  Not Met |
| Standard 8 Organisational governance |  **Not Met** |
| Requirement 8(3)(a) |  Not Met |
| Requirement 8(3)(b) |  Not Met |
| Requirement 8(3)(c) | Not Met |
| Requirement 8(3)(d) | Not Met |
| Requirement 8(3)(e) |  Not Met |
| **Timetable for making improvements:** | By 31 March 2020 |
| **Revised plan for continuous improvement due:** | 2 January 2020 |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 80 of the Rules.**

Review Audit Performance
Assessment Report

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

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

## Introduction

**This is the report of an assessment of Beechwood Aged Care (the Service) conducted from 11 November 2019 to 15 November 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** |
| --- | --- |
| Consumers | 17 |
| Consumer representatives  | 11 |
| Management | 7 |
| Clinical staff | 7 |
| Care staff | 10 |
| Hospitality and environmental services staff | 5 |
| Lifestyle staff | 2 |
| Visiting service providers such as allied health professionals | 2 |
| Other | 1 |

## 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 Not 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:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The service meets one of the six requirements relating to this Standard.

The organisation does not demonstrate that each consumer is treated with dignity and respect, with their identity, culture and diversity valued. Whilst consumers spoke positively about many staff members who are respectful and treat consumers with respect, valuing their culture, identity and diversity issues there was negative feedback about some staff members.

The organisation did not demonstrate that each consumer is supported to exercise choice.

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

The organisation is unable to demonstrates that care and services are culturally safe. The organisation does not demonstrate 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

#### Requirements:

##### **Standard 1 Requirement 3(a) Not 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) Not Met**

The organisation demonstrates that care and services are culturally safe.

##### **Standard 1 Requirement 3(c) Not Met**

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

1. make decisions about their own care and the way care and services are delivered; and
2. make decisions about when family, friends, carers or others should be involved in their care; and
3. communicate their decisions; and
4. make connections with others and maintain relationships of choice, including intimate relationships.

##### **Standard 1 Requirement 3(d) Not 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) Not 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 Not 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:

1. 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 service does not meet any of the five requirements of this Standard.

The organisation did not demonstrate 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. Consumers do not feel confident that members of the workforce take the time to listen and understand how to support their health and wellbeing.

The service did not demonstrate 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. Consumers provided many examples of where their preferences are not considered. The service has a process for offering consumers the option of advanced care planning, but this has not been offered to all consumers and there is currently no system of knowing who has been offered and declined and who has not.

Consumers said they have participated in care conferencing, but they said they were told what their care was, they were not aware they could partner with staff in the development of a care plan in line with their needs and preferences.

While care plans are available where care is delivered the service did not demonstrate that outcome of assessment and planning is effectively communicated with consumers and are readily available to them. Consumers said they were not aware they could ask to see their care plans.

The service did not demonstrate that care and services are reviewed regularly for effectiveness, or when circumstances change or when incidents impact on the needs or preferences of the consumer.

#### Requirements:

##### **Standard 2 Requirement 3(a) Not 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) Not 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) Not Met**

The organisation demonstrates that assessment and planning:

1. 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
2. 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) Not 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) Not 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 Not 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:

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.

#### Summary of Assessment of Standard 3:

The service does not meet any of the seven requirements of this Standard.

The service was unable to demonstrate that each consumer gets safe and effective personal and clinical care. Management and staff were not able to show that care is best practice, tailored to consumers’ needs and optimises their health and wellbeing. Many Consumers said they did not feel safe and they do not get the care they need.

The service did not demonstrate effective management of high impact or high prevalence risks associated with the care of each consumer.

The service was not able to demonstrate that consumers end of life wishes are not always identified and their comfort and dignity preserved.

The service was unable to demonstrate that deterioration or change in a consumer’s mental health, cognitive or physical function, condition is recognised and responded to in a timely manner.

While the service has external providers contributing to the care and services provided to the consumers. Management were unable to demonstrate a system of communication between staff and these providers to ensure that care is provided. Staff at the service do not have access to or in some cases knowledge of information relevant to the consumers care needs because communication systems are not effective or confusing.

While the service demonstrated they do refer consumers to a range of allied health and visiting specialists, timely and appropriate referrals to individuals does not always occur and this has resulted in negative outcomes for consumers.

The service has not demonstrated minimisation of infection related risks through implementing standard and transmission-based precautions to prevent and control infection. The service has experienced a number of recent outbreaks, staff practise in hand hygiene have not been effectively monitored. The food safety program was found to have deficiencies in the recent food authority audit. Practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics were not evidenced.

#### Requirements:

##### **Standard 3 Requirement 3(a) Not Met**

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

1. is best practice; and
2. is tailored to their needs; and
3. optimises their health and well-being.

##### **Standard 3 Requirement 3(b) Not Met**

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

##### **Standard 3 Requirement 3(c) Not 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) Not 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) Not 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) Not Met**

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

##### **Standard 3 Requirement 3(g) Not Met**

The organisation demonstrates 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.

### Standard 4:Services and supports for daily living Not 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:

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.

#### Summary of Assessment of Standard 4:

The service meets two of the seven requirements of this Standard.

The organisation does not demonstrate 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.

The organisation does not demonstrate that services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

The organisation does not demonstrate that services and supports for daily living assist each consumer to participate in their community within and outside the organisation’s service environment; and have social and personal relationships; and do the things of interest to them. Whilst some consumers enjoy the lifestyle provided and said they are content with the community and activities available to them some consumers have minimal engagements and are not consulted or involved in planning or participation of the lifestyle program.

The organisation does not always demonstrate that information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. Consumers and representatives said at times staff are unaware of their needs and/or preferences.

The organisation does not demonstrate that where meals are provided, they are varied and of suitable quality and quantity There was considerable negative feedback about the meal service.

The organisation demonstrates timely and appropriate referrals to individuals, other organisations and providers of other care and services. Consumer and representative feedback was positive in respect to this requirement.

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

#### Requirements:

##### **Standard 4 Requirement 3(a) Not 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) Not 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) Not Met**

The organisation demonstrates that 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.

##### **Standard 4 Requirement 3(d) Not 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 timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### **Standard 4 Requirement 3(f) Not 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 Not Met

#### Consumer outcome:

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

#### Organisation statement:

1. 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 service meets two of the three requirements of this Standard.

While the service is welcoming, and easy to understand, and management are able to demonstrate the environment is clean and comfortable they were not able to demonstrate that it is safe and well maintained. Feedback from consumers and representatives included their dissatisfaction with the call bell and staff alert systems that have been unreliable for five months. Consumers are involved in and injured in incidents because they have not been able to call staff for assistance or because equipment used for monitoring and alerting staff to their need is not always working. The organisation demonstrates that furniture, fittings and equipment are generally safe, clean, and suitable for the consumers.

#### 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) Not Met**

The organisation demonstrates that the service environment:

1. is safe, clean, well maintained and comfortable; and
2. 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 Not 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:

1. 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 service meets two of the four requirements of this Standard.

There is current information about the organisation’s feedback systems in the residential agreement and handbook.

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

The organisation does not always demonstrate that appropriate action is taken in response to complaints and that an open disclosure process is used when things go wrong. There have been areas identified by consumers and representatives of longstanding that have not been improved following feedback.

Complaints and feedback have not been adequately reviewed or used to improve the quality of care and services.

#### 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) Not 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) Not Met**

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

### Standard 7:Human resources Not Met

#### 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.

#### Summary of Assessment of Standard 7:

The service does not meet any of the five requirements of this Standard.

The organisation is unable to demonstrate 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.

There was negative feedback about some staff members who are not kind and/or caring.

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

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

The organisation is unable to demonstrate that regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.

#### Requirements:

##### **Standard 7 Requirement 3(a) Not 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) Not 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) Not 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) Not 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) Not Met**

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

### 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:

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

#### Summary of Assessment of Standard 8:

The service does not meet any of the five requirements of this Standard.

While the organisation has developed plans to engage with consumers to gain their feedback about the care and services they were not able to demonstrate that his is currently occurring with the consumers at Beechwood.

The organisations governing body was not able to demonstrate a culture of safe inclusive quality care and services. The services incident and feedback system has identified many instances in which consumers have not been safe and have been subjected to poor treatment and interactions by staff and subjected to assaults and intrusion by other consumers.

The organisation did not demonstrate the effective management of workforce governance, or effective risk management systems and practices. The organisation has not effectively managed and investigated incidents where consumers are injured, and effective systems are not in place to manage high impact, high prevalence risk or to respond to allegations of abuse or neglect.

The organisation has developed a clinical governance framework and policy and practices to support antimicrobial stewardship, the minimisation of restraint use ,and the organisation’s response to open disclosure have been developed however the service’s management and staff were not able to demonstrate understanding and application.

#### Requirements:

##### **Standard 8 Requirement 3(a) Not 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) Not 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) Not Met**

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

1. information management;
2. continuous improvement;
3. financial governance;
4. workforce governance, including the assignment of clear responsibilities and accountabilities;
5. regulatory compliance;
6. feedback and complaints.

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

The organisation demonstrates 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.

##### **Standard 8 Requirement 3(e) Not Met**

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

1. antimicrobial stewardship;
2. minimising the use of restraint;
3. open disclosure.