 Accreditation Decision and Report

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Bethanie Beachside |
| **RACS ID:** | 7315 |
| **Name of approved provider:** | The Bethanie Group Incorporated |
| **Address details:**  | 629 Two Rocks Road YANCHEP WA 6035 |
| **Date of site audit:** | 24 September 2019 to 27 September 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 28 October 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:** | 27 November 2019 to 27 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.**

## Introduction

**This is the report of an assessment of Bethanie Beachside (the Service) conducted from 24 September 2019 to 27 September 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** |
| --- | --- |
| Therapy assistants | 3 |
| Therapy team leader | 1 |
| Consumers | 16 |
| Laundry staff | 3 |
| Cleaning staff | 4 |
| Physiotherapist | 1 |
| Maintenance | 1 |
| Hospitality manager | 1 |
| Chaplain | 1 |
| Occupational therapist | 1 |
| Representatives | 4 |
| Registered staff | 7 |
| Care staff | 8 |
| Clinical nurse manager | 1 |
| Clinical nurse practitioner | 1 |
| Facility manager | 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 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 all six requirements for Standard 1 assessed as part of the Site Audit visit were met.

The consumer experience showed 100% of consumers felt staff treated them with respect.

The service uses consumer satisfaction surveys and an anonymous feedback mechanism to ensure consumers are satisfied staff treat them with respect, support them to maintain their own identity and live the life they choose.

The service demonstrated consumers are treated with dignity and respect and the service actively promotes a culture of inclusion. Staff were observed interacting with consumers in a kind, caring and respectful manner and were able to identify and support consumers individual preferences and interests.

Consumers reported the service protects the privacy and confidentiality of their information, and they were satisfied that care and services, including personal care are undertaken in a way that respects their privacy and maintains dignity. Staff gave examples of how they maintain consumers privacy and confidentiality and were observed delivering personal care in a manner that also respects this. The service also demonstrated how information technology (IT) and filing systems support the protection of confidential information including consumer information, consistent with documented policies and procedures.

#### 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 all five requirements of Standard 2 were met.

Of consumers randomly sampled, 100% agreed that staff meet their healthcare needs always or most of the time.

Consumers said their direct engagement in the initial and ongoing assessment and planning of their care helps them to get the care and services they need. Consumers reported feeling safe and confident that staff listen to their goals and preferences, and that the organisation seeks input from other professionals to get the right care and services to meet their needs.

Staff could describe how consumers and others who contribute to the consumer’s care (including medical practitioners, allied health professionals, carers and family) work together to deliver a tailored care and service plan and monitor the plan as needed.

Consumers reported their care and services are regularly reviewed and that when needs arise the organisation is quick to communicate with them and seek their input to update the care and services they are getting. Each of the care and services plans reviewed showed regular review and included a date for next review. Staff demonstrated an understanding of adverse or near miss incidents and how these are identified, documented and reviewed by the service, to inform continuous improvement.

#### 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 all seven requirements of Standard 3 were met.

Of consumers randomly sampled, 100% agreed that staff meet their healthcare needs always or most of the time. Consumers reported feeling safe and confident they are receiving quality care.

Staff could describe how they ensure care is best practice, their opportunities for continuing education and how they ensure that information is shared both within, and with others outside the organisation. Care staff demonstrated an understanding of precautions to prevent and control infection. Staff could also identify the highest prevalence risks for the consumers and how incidents are used to inform changes in practice.

Consumers gave various examples of how staff ensured the care provided was right for them. This included regularly asking them about the care and the way it is delivered and through involving consumers in training session with staff.

Each of the care and services plans reviewed indicated the delivery of safe and effective care. This included the review of care and consumers who had been palliated with care reflecting attention to the needs and preferences of these consumers at the end of their life. A focus on pain relief, review of pain management strategies and close involvement with family and others was evident.

The organisation demonstrates they have a suite of policies and procedures underpinning the delivery of care and how they review practice and policies to ensure they remain fit for purpose, informed by advice from consumers and other experts.

#### 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 was able to demonstrate all seven requirements in relation to Standard 4 were met.

The consumer experience showed 67% of consumers were satisfied with the food and of those that provided a negative response one consumer provided examples such as tough meat, temperature of food was not ideal, and food was sometimes too spicy. The service has introduced a food focus group in response to consumer feedback.

Consumers interviewed confirmed that they are satisfied with the services they receive in relation to their physical care.

The organisation demonstrated that it makes timely referrals to other organisation, provide meals to a suitable quality, variety and quality and provide safe suitable, clean and well-maintained furniture. This was observed by the Assessment Team.

#### 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 service met all three of the requirements under Standard 5.

Fifteen consumers were randomly sampled with 100% saying that they feel at home most of the time or always.

The service was observed to be welcoming, consumer rooms were decorated with, photographs, and other personal items of consumers choice, clean and well maintained. The layout of the service enabled consumers move around freely, with suitable furniture, fittings and signage to assist consumers to navigate between wings. Consumers had ready access to outdoor areas with maintained gardens, seats and communal tables.

Consumers reported the service was well maintained, any issues are resolved quickly, and the service welcomed family and friends to visit. All consumers interviewed reported they felt safe and at home living at the service. Policies and procedures described systems for the purchase, service and maintenance of furnishings and equipment. Management confirmed the service environment is a standing agenda item on staff, and resident relative meetings where any emerging risk or maintenance issue is discussed along with consumer feedback sought relevant to the service environment.

#### 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 service demonstrated it meets all four requirements under this Standard.

Fifteen consumers were randomly sampled with 100% saying that staff will follow up with things raised with them most of the time or always.

The service demonstrated consumers knew how to provide feedback and make complaints, and they felt safe and comfortable in doing so.

Consumers have access to advocates, language services and other methods for raising and resolving issues including an online system that is available to the general public. Consumers said they were happy to approach staff, management or lodge feedback forms and found that when they had raised an issue it was resolved to their satisfaction.

The service demonstrated that they take appropriate action in response to a complaint and the open disclosure process is used when something goes wrong. Consumers can lodge feedback and complaints anonymously.

Staff displayed an understanding of the complaints and feedback process and said they are happy to assist consumers who needed assistance to provide feedback or make a complaint.

Complaints and feedback are logged and reviewed for trends. Appropriate items feed into the continuous improvement system. Outcomes are used to improve the quality of care across the service. The organisation as a whole has an overview of all services so they can monitor and review complaints for organisation trends.

#### 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 service demonstrated it meets all five requirements under this Standard.

Fifteen consumers were randomly sampled with 93% saying they get the care they need always or most of the time. 7% of consumers say they get the care they need some of the time. The consumer said that is because it can take sometimes staff a while to respond to the call bell. The service is currently reviewing its call bell system to make it more efficient to provide consumers with optimum care.

Consumers interviewed are satisfied there are sufficient skilled staff to meet their needs. They described staff as kind and care and they provide care in a consumer preferred way.

The organisation demonstrated numbers and mix of staff are planned to support safe and quality care and services. Vacant shifts are filled, and recruitment is completed should vacancies arise. Staff are satisfied there are sufficient staff to deliver quality care and services.

The organisation demonstrated the interactions between staff and consumers are kind caring and respectful of each consumer’s identity, culture and diversity. Consumers said staff are kind caring and respectful and respected them culturally. Interactions between staff and consumers were observed to be kind caring and respectful and friendly.

The service was able to demonstrate that workforce is competent and has the qualifications and knowledge to effectively perform their role. Consumers say staff have the knowledge to deliver quality care and services. Staff are satisfied they receive enough training to effectively complete their duties. New staff are provided with orientation, support, and training.

The service was able to demonstrate regular assessment and monitoring of the workforce. Police checks, mandatory training and all essential requirements for staff are up to day and monitored for currency.

Performance appraisals are monitored to ensure they are completed when required and they encourage staff to undertake additional training. Staff said they received a performance appraisal on an annual basis and records show they were all current.

#### 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 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 service demonstrated it meets all five requirements under this Standard.

Fifteen consumers were randomly sampled with 100% stating the place is well run always or most of the time.

The service demonstrated they involve consumers in the design, delivery and evaluation of services. Consumers confirmed they are involved in the process and provided examples of how this takes place.

The governing body meets regularly and sets clear expectations how the service should be run. The service respects the rights of consumers to take risks and they work with consumers to enable them to live the best life they can.

There are organisational wide systems that support effective information management, workforce, compliance with regulation and clinical care. The policies and procedures provided are universal across the organisation and are updated regularly to reflect current legislation and best management practices.

The clinical governance framework addresses anti-microbial stewardship and the minimisation of restraint. The service practises open disclosure and supports staff to understand and apply the practice.

#### 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) 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