Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Bupa Echuca |
| **RACS ID:** | 3964 |
| **Name of approved provider:** | Bupa Aged Care Australia Pty Ltd |
| **Address details:**  | 7 Fehring Lane ECHUCA VIC 3564 |
| **Date of site audit:** | 29 October 2019 to 31 October 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 28 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:** | 09 January 2020 to 09 January 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 Bupa Echuca (the Service) conducted from 29 October 2019 to 31 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** |
| --- | --- |
| Consumers | 20 |
| Representatives | 5 |
| Administration staff | 1 |
| business administrator | 1 |
| Care staff | 4 |
| Chef | 1 |
| Cleaning staff | 1 |
| General Manager | 1 |
| General services staff | 2 |
| Maintenance officer | 1 |
| People Partner | 1 |
| Recreational Activities Officer | 1 |
| Regional Manager - North West Region | 1 |
| Regional Support Manager | 1 |
| Registered nurse | 2 |

## 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 that the organisation has met all six requirements under Standard 1.

Consumers said they are treated with dignity and respect and can make informed choices. 100% of consumers who participated in a consumer experience interview agreed staff treat them with respect always or most of the time. Feedback through other interviews highlighted consistent consumer satisfaction regarding how staff identified their individual needs and preferences. The service seeks information through regular consumer meetings, focus groups and through formal and informal complaints mechanisms.

The service demonstrated they actively promote a range of activities that support a wide range of cultural needs. Consumers say they feel staff treat them as an individual. Staff were observed to interact with consumers patiently and respectfully and could readily identify consumer’s individual preferences and interests. Work force orientation and training supports cultural safety.

Staff provided a number of meaningful examples of how they promote individuality and independence. 100% of consumers interviewed confirmed they are encouraged to do as much as possible for themselves. Consumers reported that they feel heard when they tell staff what matters to them and they are able to make decisions about their life. Staff confirmed that consumers’ choices are to be respected and supported even when it involves an element of risk.

Consumers reported they are satisfied with staff and that care and services, including personal care, are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of individuals. Consumers were confident their information was kept confidential and electronic consumer files were password protected and paper-based files are locked in cupboards.

#### 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 that the organisation has met all five requirements under Standard 2.

Of consumers randomly sampled, 100% agreed they have a say in their daily activities. All consumers and representatives interviewed could not recall if consultation occurred in regard to assessments and care plans however, all consumers agreed they are receiving the care they need. Consumers said they feel safe and are confident that staff listen to their goals and preferences, and that the service obtains input from other professionals to ensure consumers receive the right care and services to meet their needs.

Relevant staff interviewed showed they understood the process of updating and reviewing care plans and how they were notified of changes to care. Staff were able to identify how they work with others (including medical practitioners, allied health professionals, carers and family) to deliver tailored care and a service plan, and monitor and review the plan as needed.

Each of the care and service plans reviewed by the Assessment Team evidenced that the plans had been recently reviewed (with changes made where necessary) and included a date by which the next review of care and services must be undertaken. Advanced care plans including preferences for end of life care were also reviewed. In the event consumers did not wish to discuss end of life care, staff respected and documented this decision.

Staff demonstrated an understanding of adverse incidents or near miss events 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 that the organisation has met seven of the seven requirements under Standard 3.

The service was able to demonstrate it delivers consistently safe and effective personal and clinical care in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

Of consumers randomly sampled, 100% of consumers agreed they felt safe here and 100% of consumers agreed they get the care they need. Consumers provided various examples of how staff ensured the care provided was right for them.

Staff could generally describe how they ensure care is according to consumers’ preferences and right for them. Staff were able to identify inherent risks of consumer choices and supported them by explaining the risks to them in a manner that the consumer understands.

The majority of the plans of care reviewed by the Assessment Team evidenced the delivery of safe and effective care. Care plans reviewed contained advanced care planning and medical goals of care. Where applicable medical enduring power of attorney documentation were sighted.

#### 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 that the organisation has met all seven requirements under Standard 4.

Consumers interviewed confirmed satisfaction with services and supports for daily living that meets their needs. 100% of consumers who participated in a consumer experience report interview said they are encouraged to do as much as possible for themselves always or most of the time. Consumers said they were satisfied their emotional and spiritual needs are met. Consumers were satisfied that they are supported to participate within their community, do things of interest to them and have social and personal relationships. Consumer experience report interviews showed 100% of consumers liked the meals always or most of the time. Consumers are satisfied any changes in their condition is discussed with them and where needed referred to other health professionals in a timely manner.

The service demonstrated each consumer gets safe and effective services and supports for daily living that meet their goals and preferences. Care and lifestyle staff adapt ways to support consumers to live the life they want. Staff were observed to provide positive interactions to consumers and when interviewed were able to identify particular consumers who needed additional support. Consumers confirmed that staff provided additional support when needed.

The organisation monitors and reviews each requirement in this Standard using a regular individual review program, feedback mechanisms and survey results. The organisation demonstrated how this helps inform and drive improvements to the service.

#### 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 Not 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 that the organisation has met two of the three requirements under Standard 5.

The service environment was observed to be welcoming with individual rooms decorated with photographs and other personal items. Consumers interviewed commented on their satisfaction of the room size and how they were able to bring items from their homes. Consumers expressed satisfaction they are able to move around freely within each building and access the external living areas.

Staff and consumers said that the cleaning is generally satisfactory and maintenance is generally performed in a timely manner. Cleaning schedules and preventative maintenance are in place. Staff demonstrated an understanding of the service’s procedures to ensure a safe living environment. Management demonstrated that feedback and monitoring processes drive improvements.

#### 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:

(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 that the organisation has met all four requirements under Standard 6.

The organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints, have access to advocates and methods for resolving complaints, have appropriate action taken in response to their complaints, and, that complaints are reviewed and used to improve services.

Consumer experience interviews show 92% of consumers are satisfied staff follow up when they raise things with them. Consumers interviewed were aware of ways to raise a complaint.

Information about internal and external feedback processes is provided to all consumers and representatives. Brochures and information relating to feedback mechanisms are displayed throughout the service and available to consumers. Feedback and complaints are an agenda item at consumer and family meetings.

Management review, analyse and monitor all feedback received to identify trends and generate 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 that the organisation has met five of the five requirements under Standard 7.

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, respectful and quality care and services.

Consumers provided positive feedback about the workforce. Consumer experience interviews showed that 100% of consumers agreed that staff know what they are doing most of the time or always; that 100% of consumers agreed staff are kind and caring; and 91% of consumers agreed that staff follow up when they raise things with them. Consumers confirmed they feel staff value their identity, culture and diversity and their preferences are respected.

Staff interviewed were generally satisfied that they have enough time to complete their tasks, however, a number of staff across the service felt that there was at times a shortage of staff. Staff spoke positively about access to education and recent opportunities for advancement that have been offered to them. Staff identify the process to access consumers care plans to meet the care needs of consumers and identify the work instructions given are clear and updated regularly. Verbal and written handover is also conducted on each shift.

The majority of consumer feedback and observations by the Assessment Team showed staff generally interacting with consumers in a kind, caring and respectful manner.

Management explained, and documentation confirmed the service has processes in place for rostering of staff including replacement of planned or unplanned leave.

Staff interviewed were also satisfied that they have an awareness of relevant work instructions and confirmed they received copies of position descriptions on commencement of employment. Recruitment, selection, induction and orientation processes ensure staff have the required knowledge and skills to deliver services. Staff are recruited to specific roles requiring relevant qualifications and/or experience and are provided with position descriptions. Newly appointed staff are supported with buddy shifts and ongoing support is provided through supervision. The organisation’s human resources department monitors staff compliance including nursing registrations, police checks and monthly reports are provided to management of the service.

#### 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 that the organisation has met all five requirements under Standard 8.

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

Consumers confirmed they are involved in care planning, delivery and evaluation illustrating how this occurs in practice. Consumer experience report interviews showed 100% of consumers agree the service is well run and 100% of consumers agreed that they feel safe at the service.

Consumers and representatives interviewed said in various ways there are opportunities for them to be involved in care and services design and delivery. These include consumer and representative meetings, focus groups and one on one meetings with staff or management when requested. Care plans do not generally show documented consultation with the consumer however, staff show informal consultation occurs.

Service performance is monitored and reviewed at regional and organisational level through review of key performance data including incident data, review of consumer and representative feedback and satisfaction surveys. Results escalated to senior management and Board level as appropriate. Service level responsibility and reporting requirements in relation to information governance, financial governance, workforce governance, regulatory compliance and feedback and complaints is clearly outlined with the organisation’s governing body and sub-committees meet regularly. Results of these meetings outline the organisation’s strategic direction.

High risk or high prevalence risk management includes individual consumers being provided information regarding their right to take risk and examples of the way they have individually supported consumers was given. Recent staff training addressed restraint, including the evaluation of use and the use of restraint to minimise their use. These results as well as minimising the use of restraint are reviewed and addressed in management meetings.

#### 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