Accreditation Decision

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Carmelite |
| **RACS ID:** | 6958 |
| **Name of approved provider:** | Southern Cross Care (SA & NT) Incorporated |
| **Address details:** | 7 Spence Avenue MYRTLE BANK SA 5064 |
| **Date of site audit:** | 09 October 2019 to 10 October 2019 |

**Summary of decision**

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| **Decision made on:** | 21 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:** | 13 January 2020 to 13 January 2023 | |
| **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) | | 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 | | Not Met |
| Requirement 3(3)(a) | | Not 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 | | Not Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Not Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Not Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Not Met |
| Requirement 8(3)(e) | | Met |
| **Timetable for making improvements:** | By 24 February 2020 | |
| **Revised plan for continuous improvement due:** | By 06 December 2019 | |

**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 Carmelite (the Service) conducted from 9 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** |
| --- | --- |
| Consumers | 17 |
| Consumer representatives | 2 |
| Management | 3 |
| Clinical staff | 4 |
| Care staff | 5 |
| Hospitality and environmental services staff | 5 |
| Lifestyle staff | 2 |
| Visiting service providers such as allied health professionals | 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 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 Assessment Team found that the organisation did not meet one requirement of standard 1.

94% of consumers randomly surveyed said staff treat them with respect most of the time or always. 100% of consumers interviewed said that they are encouraged to do as much as they can for themselves most of the time or always. 94% of consumers randomly interviewed said that staff explain things to them most of the time or always.

Not all consumers interviewed by the Assessment Team were satisfied they are treated with dignity and respect at all times. The Assessment team was provided with examples from consumers where they said staff spoke amongst themselves in a language other than English whilst providing care to them. Management advised this concern had been raised by consumers and there had been actions implemented to address the issue, however feedback from consumers, representatives and staff confirmed that this concern has not been resolved.

Staff interviewed by the Assessment Team could describe in various ways how they provide care and services to ensure the cultural safety of consumers in the home. Staff could describe the specific cultural needs of consumers in the home.

The organisation demonstrated that is has effective systems and processes in place to ensure that staff deliver care services in a safe and effective way for consumers. the organisation demonstrated that it monitors effectiveness of consumer services through various feedback mechanisms.

#### 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) 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:

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) 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:

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 Assessment team finds the organisation meets Standard 2.

94% of consumers randomly interviewed said they have a say in their daily activities most of the time or always. Consumer and representative feedback indicated that consumers are satisfied with their involvement in assessment and planning processes.

The organisation could demonstrate that ongoing assessment and planning of care and services is undertaken in partnership with consumers and their representatives. The organisation demonstrated care and planning processes are consistent with the organisation’s policies and procedures and each consumer’s needs, goals and preferences in relation to their health and well-being are identified and incorporated into assessment and planning processes.

#### 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:

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) 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 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 Assessment Team found the organisation could not demonstrate it meets requirement 3 (a) of Standard 3.

Consumer and representative feedback indicated that consumers are satisfied with the provision of personal and clinical care and services delivered by the organisation.

The Assessment Team identified the organisation does not always ensure each consumer gets safe and effective personal care that is best practice, tailored to needs and optimises health and wellbeing. The organisation could not demonstrate that staff who are required to provide physical assistance to consumers always follow the directives in the care plans. The Assessment Team identified one consumer requiring two staff to assist with bed mobility; and another consumer requiring two staff to assist with transfers. The Assessment team identified both consumers had been repositioned on at least one occasion with just one staff member. This had placed both consumers and staff members at risk of injury. While the organisation had identified and undertaken performance management activities in relation to one of these incidents, the Assessment Team observed the practice is still occurring.

The organisation could demonstrate that where consumers requirements involved clinical care, staff practices were consistent with the organisation’s policies and procedures.

#### 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) 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) 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 timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### **Standard 3 Requirement 3(g) 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 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 Assessment Team found the organisation could demonstrate it meets all requirements in Standard 4.

76% consumers randomly interviewed said they like the food most of the time or always. Consumer and representative feedback indicated that consumers are satisfied with the services provided by the organisation.

The Assessment Team identified the organisation provides safe and effective services that meet the consumers’ needs, goals and preferences. The organisation demonstrated they deliver various services and supports to promote emotional, spiritual and psychological wellbeing of each consumer. Consumers confirmed they are supported to participate in various and meaningful activities both within and outside the home. Staff said they have ready access to current information about consumers and provided examples of consumers’ preferences which aligned with information provided in their care plans. The organisation demonstrated consumers are appropriately referred to specialists. The Assessment Team observed equipment throughout the home which looked clean and well maintained.

#### 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:

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) 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) 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:

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 Assessment Team found that the organisation meets all requirements of standard 5.

Of consumers randomly interviewed, 94% said they feel at home here most of the time or always. Of consumers randomly interviewed, 100% said they feel safe most of the time or all of the time. Consumers and representative feedback received confirmed that they were satisfied that the service environment was clean, tidy and comfortable. Consumer and representative feedback received confirmed that consumers feel at home.

Staff could describe the various systems and processes in place to ensure the service environment is safe for consumers such as hazard identification processes and environment and equipment audits. Management of the organisation could demonstrate that they keep a safe and comfortable environment for consumers.

The service environment was observed to be calm, welcoming and homely for consumers. The organisation has reactive and preventative maintenance schedules in place to ensure equipment and assets are maintained appropriately.

#### 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:

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 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 Assessment Team found that the organisation did meets all requirements in standard 6.

93% of consumers randomly interviewed said staff follow up when they raise things with staff most of the time or always. Consumers and representatives confirmed through interviews that they were comfortable to raise complaints or provide feedback to the organisation. Consumers and representatives described the various mechanisms available to provide feedback and confirmed when they had provided feedback they were satisfied with the resolutions.

Staff could describe feedback processes to the Assessment Team and could explain what they would do with feedback from a consumer and how they could assist them. Management provided examples of the various consumer feedback mechanisms which include resident meetings, consumer surveys, consumer feedback forms and general daily discussions with consumers.

The Assessment Team identified that there are mechanisms to provide feedback and consumers had access to these mechanisms the organisation could not demonstrate that appropriate action is always taken in response to complaints. The Assessment Team identified that where consumers have made complaints the organisation has actively worked to review, escalate and taken appropriate action in response to these complaints.

#### 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 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 organisation could not demonstrate that it meet requirements (b) of Standard 7.

Of consumers randomly sampled, 100% said they get the care they need most of the time or always. Of consumers interviewed as part of the consumer experience survey, when asked if staff are kind and caring, 94% responded most of the time or always. Of consumers randomly interviewed 100% of consumers said staff know what they are doing most of the time or always.

Consumer and representative feedback indicated that consumers are satisfied they get quality care and services, from kind and caring staff and who know what they are doing. However, some consumers said there are some staff who speak languages other than English in front of them, while attending to their care and this makes them feel uncomfortable.

The Assessment Team identified the organisation does not ensure all staff are respectful to all consumers. The organisation had identified some staff speak languages other than English in front of some consumers and issued directives to all staff requesting this behaviour cease, however as evidenced by consumer feedback provided to the Assessment Team, this action has not yet been effective. The organisation could demonstrate they have sufficient staff, and the right mix of staff to provide safe and quality care and services to consumers. The organisation also demonstrated their workforce is competent and staff have the qualifications and knowledge to effectively undertake their roles; and they recruit, train and equip staff to provide the care and services which meet the standards.

#### 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) 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) 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 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 Assessment Team found that the organisation did not demonstrate requirement 3(d) of standard 8 is met.

Of consumers randomly interviewed 94% of consumers said they thought the place was well run most of the time or always.

The organisation could demonstrate that consumers are involved in the development and design of their care services and are regularly engaged to provide ongoing feedback. Consumers could provide various examples of how the organisation involves them in care delivery and service planning.

Management and staff could describe in various ways how the organisation has governance structures in place to ensure it is accountable with relevant legislative and regulatory requirements, however the organisation could not demonstrate that staff practices were consistent with mandatory reporting requirements.

The Assessment Team identified that the organisation had an effective system in place to manage consumer incidents and hazards throughout the home, however staff practice was inconsistent with incident reporting procedures. The clinical governance framework addresses anti-microbial stewardship, open disclosure and minimising the use of restraint. Staff interviewed understood these concepts and could explain how they were applied in 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 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) 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.