Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Catholic Healthcare Brigidine House |
| **RACS ID:** | 0626 |
| **Name of approved provider:** | Catholic Healthcare Limited |
| **Address details:**  | 7 Coogee Bay Road RANDWICK NSW 2031 |
| **Date of site audit:** | 12 November 2019 to 14 November 2019 |

**Summary of decision**

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| **Decision made on:** | 16 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 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:** | 24 December 2019 to 24 December 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 | Not 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) | 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 | 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 |
| **Timetable for making improvements:** | By 31 January 2020  |
| **Revised plan for continuous improvement due:** | By 31 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 Catholic Healthcare Brigidine House (the Service) conducted from 12 November 2019 to 14 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 | 12 |
| Consumer representatives  | 4 |
| Management | 3 |
| Clinical staff | 3 |
| Care staff | 7 |
| Hospitality and environmental services staff | 3 |
| Lifestyle staff | 0 |
| External contractors | 2 |
| Visiting service providers such as allied health professionals | 1 |
| Registered Nurse Co-ordinator for the Brigidine Order | 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:

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 the organisation met all six of the requirements under this Standard.

Consumers provided evidence of how they are treated with dignity and respect, and live the life they choose; for example, one consumer stated, “They call me by my preferred name”, “staff are always very friendly” and “staff always knock on doors”. Consumers expressed satisfaction with the care they receive. A consumer stated “(the best thing is) “there is a sense of you”. Staff were able to describe how they were familiar with consumers and their lives, and demonstrated an understanding of consumers’ individual preferences, culture and what they liked to do.

Consumers are supported to participate in activities that may be perceived to be of risk to them. Staff are able to describe how they use problem solving solutions, to minimise risk and tailor solutions to help consumers live the life they choose. Staff provided examples of how they supported consumers to have choice and control, including when that choice involves risk. Consumers said the “staff know what I like”. Consumers stated “they (staff) listen to me”

Consumers said to the Assessment Team that staff explain things to them, and they have choice of the services they get and when these services are provided. For example, one consumer said, “They have regular resident meetings and I can have a say” and “They look after you here”.

#### 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:

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 found the organisation met all five of the requirements under this Standard.

The service has demonstrated that the consumer’s needs, goals and preferences are considered in care planning and service delivery in order to optimise consumer outcomes.

Random sampling of consumers by the Assessment Team identified that all consumers said “they have a say in their daily activities” always, or most of the time. They said they can choose what activities they participate in, when to shower, where to relax, and how their services are delivered. Most consumers said that staff support and encourage them to participate in their care and services by doing as much as possible for themselves.

Staff were able to articulate the service’s processes and approach to assessment and care planning and how these inform the delivery of care and services. They provided examples of how they worked together with consumers and their representatives to manage risks associated with consumers’ health and general welfare. Care planning and assessments are conducted by appropriately skilled staff and specialists. The service documents care plans and services delivered for each consumer.

All consumers/representatives interviewed said they feel safe living at the organisation and their care and services are well planned to meet their needs.

#### 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 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 met all seven of the requirements under this Standard.

The organisation has demonstrated the service deliver consumer’s with 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 wellbeing. All consumers randomly sampled said they get the care they need, and that staff are kind and caring. All consumers advised they have great confidence in the professional skills of the nurses and other staff. Consumers appeared well presented, for example hair combed, clean shaven, and wearing clean clothes. Consumers said they are getting care that reflects their individual needs. One consumer said they like to sleep in and have their breakfast and shower later in the morning.

Staff said they are kept updated with changes in consumers condition by the registered nurse, other staff or allied health professionals, and this is also documented in the care plans and progress notes. Staff gave examples of how they identify a deterioration of consumers’ health, these included: consumers who return from hospital, unexplained weight loss and decline in mobility. Clinical audits are regularly conducted to ensure management and staff are able to identify trends or variances in trends in relation to clinical care. Staff were also able to demonstrate effective management of high impact or high prevalence risks associated with care.

Care and services needs are identified and met by appropriately qualified staff, medical, allied health and other organisations to provide integrative care that optimises consumers health and wellbeing in consultation with the consumer and/or representatives.

#### 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:

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 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 Assessment Team found the organisation did not met one of the seven requirements under Standard 4.

Consumers provided evidence of how they are supported to optimise their independence for example one consumer stated, “there’s plenty of things to do” and Staff let me be myself” Consumers expressed satisfaction with the care they receive. Staff were able to describe how the organisation supports the emotional, psychological and spiritual well-being of consumers. Spiritual services are provided for all consumers who wish to participate. The service has several denominations of Christianity and ensure all are included when preparing schedules.

The organisation demonstrated that each consumer receives 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 provides services for daily living that promote each consumer’s emotional, spiritual and psychological well-being. Information about the consumer’s condition, needs and preferences is communicated where responsibility for care is shared. Timely and appropriate referrals are made for the consumer when external services are required. Equipment at the service is safe, suitable, clean and maintained.

Random sampling of consumers by the Assessment Team identified 85% like the food always or most of the time and 15% of consumers likes the food some of time or never. Some consumers and representatives interviewed spoke about dissatisfaction with the food service, including disliking the meals.

The complaints register reviewed indicates that from February to September 2019 there were fourteen complaints regarding various issues with food including the type and quality of meals and the shortage of food supplies on the long weekend.

The Assessment Team discussed issues raised by consumers. The service provided a memo to go to consumers and representatives on the day of the Performance Assessment, 13 November 2019 with proposed meeting dates to discuss menus for the home.

The organisation demonstrated that each consumer receives 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 provides services for daily living that promote each consumer’s emotional, spiritual and psychological well-being. Information about the consumer’s condition, needs and preferences is communicated where responsibility for care is shared. Timely and appropriate referrals are made for the consumer when external services are required. Equipment at the service is safe, suitable, clean and 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) 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 Assessment Team found that the organisation did not meet one of the three requirements in relation to Standard 5.

The service is welcoming and easy to understand, optimises each consumer’s sense of belonging, independence, interaction and function. However, the Assessment Team identified that air conditioning in the home has not been consistent throughout the facility causing some consumers discomfort and distress.

The service was not able to demonstrate that the service environment enables consumers to move freely, both indoors and outdoors and enables them to feel comfortable in their environment. Issues were identified with air conditioning that causing consumers to open or close their doors in order to obtain privacy or feel the air conditioning in the corridors of the home.

The organisation has systems and processes to ensure furniture, fittings and equipment are safe, clean and well maintained and suitable for the consumer.

#### 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 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 demonstrated that all four requirements in relation to Standard 6 were met.

The Assessment Team found that the service consumers and representatives feel encouraged and supported to give feedback and make complaints and has met all four of the requirements under this Standard.

Consumers and representatives interviewed said that were comfortable raising any concerns they had with staff or management. They gave examples of issues they had raised with the service and how they were resolved. Consumers said they were aware of the complaints process and how to make a complaint.

The service supports consumers to provide feedback through internal and external complaint forms and provides information through the resident welcome pack regarding how to make a complaint.

Management takes appropriate action in response to complaints and an open disclosure process used when things go wrong. Staff could explain what they are required to do when feedback or complaints are made, and records indicate they have been provided with training to support consumers provide feedback.

A feedback and complaints register is maintained by the service and identified that complaints are actioned promptly and escalated when necessary. The service’s plan for continuous improvement identified that feedback and complaints were used to improve the quality of care. Complaints are reviewed and trended and reported to the Board for any actions to be followed up.

#### 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:

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 Assessment Team found that the organisation demonstrated that all requirements in relation to Standard 7 were met.

The organisation demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. Consumers provided various examples of what this meant to them including in relation to events of cultural significance, specific care and relationship needs and availability of staff speaking other languages. Interactions between consumers, representatives and staff were observed to be kind, caring and respectful. Whilst are busy they do not feel they lack the time to do what they need to do, and consumer are generally happy with the care received at the service.

The organisation demonstrated the workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. New staff are satisfied with the orientation and support provided. The organisation monitors regulatory compliance in terms of human resource and is actively assessing adequacy in staffing levels. Performance appraisals occur as part of probation monitoring and annually for all staff and recruitment is ongoing.

#### 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 is undertaken.

### 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:

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 all five requirements under Standard 8 were met.

The organisation demonstrated how they involve consumes and their representatives in the delivery and evaluation of care and services. Consumers confirmed they are involved in care planning, delivery and evaluation of care.

The governing body meets regularly, sets clear expectations for the organisation and regularly reviews risk from an organisational and consumer perspective. There are organisation wide governance systems to support effective information management, the workforce, compliance with regulation and clinical care. The clinical governance framework addresses anti-microbial stewardship, open disclosure framework and minimising the use of restraint. Staff interviewed understood these concepts and could explain how they are applied in the service. Consumers and their representatives confirmed when restraint is used the service first contacts them for consent and discussed alternative options with them.

#### 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) 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.