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 Villa Maria Centre |
| **RACS ID:** | 0549 |
| **Name of approved provider:** | Catholic Healthcare Limited |
| **Address details:**  | 15a Blackman Parade UNANDERRA NSW 2526 |
| **Date of site audit:** | 22 October 2019 to 25 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:** | 15 December 2019 to 15 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 | 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 Catholic Healthcare Villa Maria Centre (the Service) conducted from 22 October 2019 to 25 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 | 23 |
| Consumer representatives  | 5 |
| Management | 2 |
| Clinical staff | 1 |
| Care staff | 19 |
| Hospitality and environmental services staff | 8 |
| Lifestyle staff | 4 |
| External contractors | 1 |
| Pastoral carers | 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:

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 all six requirements under Standard 1 were met.

Of consumers/representatives randomly sampled for the consumer experience report, all said staff treat them with respect and are kind and caring most of the time or always. Consumers and their representatives were satisfied personal care is undertaken in a respectful way and consumers’ dignity valued. The service demonstrated that it actively promotes a culture of inclusion.

Staff were observed to interact with consumers respectfully and could readily identify consumer’s individual preferences and interests. Consumers described the ways their social connections are supported both inside and outside the service. The service promotes the value of cultural safety and diversity through staff training, in the range of activities it offers for consumers and choices offered to consumers with diverse backgrounds.

Staff could provide meaningful examples of how they help consumers make choices, including by giving consumers clear and accurate information and options to inform their choice. Consumers/representatives said consumers have a say in their care and services and that they can make decisions about their life even when it involves an element of risk.

Consumers said the service protects the privacy and confidentiality of their information, and that they are satisfied 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 consumers. The service demonstrated how electronic and hard copy filing systems support the protection of consumers’ confidential information.

#### 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:

Management and staff described processes for initial and ongoing assessment and care planning for consumers and demonstrated understanding of risks to the consumer’s health and well-being. Review of documentation shows assessments and care plans are being completed, they are consistently identifying consumer needs and preferences and leading to the development of effective and extensive care plans. Care plans include consideration of risks to the consumer’s health and wellbeing and effective strategies to inform the delivery of safe and effective care and services for the consumer. When risks emerge, they are investigated and appropriate action taken, including further meaningful review of the care plan. Management demonstrated effective monitoring and review 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:

Staff could describe the processes used to ensure best practice in delivering care to consumers and how information is shared within the organisation and with others externally. Staff were also able to identify prevalence of risk and how incidents are used to identify gaps in care. Consumers and representatives stated they were satisfied with the level of care consumers received and agreed the staff had the skills to provide safe and effective care.

The care and advance care plans evidenced the focus to meet the needs of the consumer nearing end of life. The plans outline their preferences in relation to pain management, resuscitation, environment and involvement of family and friends during their last moments. The organisation has systems in place which assist staff to recognise deterioration in consumers and end of life signs.

Staff make referrals to appropriate external health professionals in a timely manner and are able to document and communicate consumer needs and preferences within the organisation. There is a strong focus on mandatory and elective staff education ensuring they have the knowledge and skills set to provide optimum care to all consumers.

Staff demonstrated good working knowledge of how to prevent and control infection. However, there is little evidence that the service is actively pursuing practices to minimise the use of antibiotics.

#### 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) Not Met**

The organisation demonstrates minimisation of infection related risks through implementing:

1. standard and transmission based precautions to prevent and control infection; and
2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

### Standard 4:Services and supports for daily living 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 that all seven requirements under Standard 4 were met.

The service demonstrated that it supports consumers emotional, physical, spiritual and psychological wellbeing. This is achieved by staff understanding the needs and preferences of individual consumers and delivering appropriate care to meet consumer goals. Consumers and their representatives are asked to provide feedback to the service, formally and informally, to ensure that their needs are being met. The service has demonstrated that it delivers services and supports for daily living in a safe and effective way.

Consumers interviewed said they are satisfied with the cleaning, laundry, food and other services and supports which optimise their independence and let them live the best life they can. There is a pastoral care team and a recreation liaison officer team with dedicated roles to improve and customise lifestyle programs. Care staff are educated to deliver person centred care and engage meaningfully with consumers when delivering care and facilitating one to one or other activities. Each consumer has an individualised pastoral care plan and activities care plan.

The service demonstrated that it provides safe, suitable, clean and well-maintained equipment. The Assessment Team’s observations of the laundry and kitchen areas confirmed they are well designed, have safe working areas and that equipment and machinery are maintained and clean. Management ensure safe work practices are being followed, environmental and equipment audits are being completed and resources allocated to ensure preventative and reactive maintenance is completed in a timely manner.

#### 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 organization has meet all three requirements under Standard 5.

The service was observed to be welcoming, clean and maintained. Consumers’ rooms were observed to be decorated with memorabilia, photographs and other personal items. The layout of the service enables consumers to move around, with suitable furniture, fittings and signage to help consumers navigate the service. Consumers have free access to clean outdoor areas with communal areas and benches. There are paths and handrails that enable free movement around the area.

Consumers did not raise any concern about the service furnishings, equipment or environment. Consumers confirmed that the service is always clean and there are plenty of communal and private areas for use individually or with family and visitors. Consumers interviewed confirmed that they are satisfied and could not identify any areas for improvement.

The service has a system in place for cleaning and maintenance of equipment and furnishings, and how it identifies and manages environmental risks to consumers. Staff interviewed demonstrated an understanding of those systems and processes. Consumers indicated that cleaning, maintenance and laundry services are delivered appropriately.

Management regularly secures formal and informal feedback from staff, consumers and representatives, and conducts meetings to discuss it, address concerns and work towards continuous improvement.

#### 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 into and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

#### Summary of Assessment of Standard 6:

The Assessment Team found the service has met all four of the requirements under this Standard. Consumers and representatives reported to feel encouraged and supported to give feedback and make complaints / raise 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 and multi-lingual leaflets / posters regarding how to make a complaint.

The organisation has posted the charter of aged care rights at the service which includes the consumers’ rights to complain free of reprisal, and to have their complaints dealt with fairly and promptly, and to have a person of their choice, including an aged care advocate, support them or speak on their behalf. Management has given the charter to each consumer (or representative if required) and given them the opportunity to sign a copy acknowledging their understanding.

Management takes appropriate action in response to complaints and an open disclosure process is 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 showed complaints are actioned promptly and escalated when necessary. The service’s plan for continuous improvement demonstrated that feedback and complaints were used to improve the quality of care. Complaints are reviewed and trended and reported to the organisation's management for any follow up actions.

#### 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 the organisation met all five requirements under this standard.

The organisation demonstrates that they have systems and processes in place to ensure they recruit, train, and support sufficient staff to deliver safe, inclusive quality care to each consumer. Staff have the knowledge and skills to perform their roles and consumers are satisfied with the care provided.

The organisation has processes for monitoring and reviewing consumer current needs, goals and preferences, and monitors and reviews the delivery of quality care and services. Management ensures that there is sufficient staff and they are recruited and trained to deliver safe and quality care and services to consumers. Staff described how there are enough staff rostered to meet consumers’ preferences and needs.

Consumers and representatives interviewed said they get the care they need from staff who are adequately trained and are kind and caring and respectful of their identity, culture and diversity. Staff performance is regularly assessed, monitored and reviewed.

#### 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 the service met all five requirements under this standard.

The service demonstrated they have an active governing body who promote a culture of safe, inclusive and quality care and services. The Board receive and review risks to consumers, set organisational goals, are accountable for the vision and direction of the organisation whilst ensuring the service is welcoming and able to provide care that is best practice.

The organisations governance systems support regulatory compliance, clinical governance and consumer feedback. The organisation has reviewed and implemented policies and procedures which reflect the Aged Care Quality Standards, including restraint, antimicrobial stewardship and open disclosure. Governance structures are in place to monitor and improve the organisations performance against these standards. Whilst the service has a policy on the use of antimicrobial stewardship the service is not adequately monitoring the use of antibiotics.

The organisation demonstrates they have systems in place to engage consumers in the development and delivery of care and services and, of the consumers randomly sampled, 95% said the service is well run always or most of the time.

#### 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.