Accreditation Decision

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

**Service and approved provider details**

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| **Name of service:** | Charles Chambers Court |
| **RACS ID:** | 0482 |
| **Name of approved provider:** | Mission Australia |
| **Address details:** | 11 Hunt Street SURRY HILLS NSW 2010 |
| **Date of site audit:** | 16 September 2019 to 18 September 2019 |

**Summary of decision**

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| **Decision made on:** | 14 October 2019 | |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. | |
| **Decision:** | To re-accredit the service under section 41 of the Rules. | |
| **Further period of accreditation:** | 06 November 2019 to 06 November 2021 | |
| **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 | | Not Met |
| Requirement 3(3)(a) | | Not Met |
| Requirement 3(3)(b) | | Not Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Not Met |
| Requirement 3(3)(e) | | Not 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) | | Not 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 | | Not Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Not Met |
| Requirement 8(3)(d) | | Not Met |
| Requirement 8(3)(e) | | Met |
| **Timetable for making improvements:** | By 17 January 2020 | |
| **Revised plan for continuous improvement due:** | By 29 October 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 Charles Chambers Court (the Service) conducted from 16 September 2019 to 18 September 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Service against the Aged Care Quality Standards (the Quality Standards) in accordance with the Aged Care Quality and Safety Commission Rules 2018.**

This report details the findings of this performance assessment and contains a detailed report about the performance of the Service against each Quality Standard assessed and the requirements within each Quality Standard assessed rated as either, Met or Not Met.

For a ‘Not met’ finding, the Assessment Team has provided information about why the requirement was Not 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 | 16 |
| Consumer representatives | 1 |
| Management | 5 |
| Clinical staff | 2 |
| Care staff | 11 |
| Hospitality and environmental services staff | 1 |
| Lifestyle staff | 3 |
| Other | 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:

Most consumers interviewed said they feel they are treated with dignity and respect and they are supported to make decisions about care and services and exercise independence. Service staff demonstrated awareness of practices to ensure each consumer is treated with dignity and respect and their cultural needs and preferences are considered. The organisation demonstrates they provide consumers with information that is accurate and enables consumers to exercise choice and decision making. The organisation demonstrated a commitment to respecting consumers privacy and personal 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 Not 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 organisation meets two out of five requirements for this standard.

Of consumers randomly sampled, most agree that they have a say in their daily activities always or most of the time and their needs, goals and preferences are considered in care and service delivery.

The organisation was not able to demonstrate effective practices are implemented to involve consumers as partners in care development and delivery nor involving others in a timely manner. The outcomes of assessment and planning are not effectively communicated or made available to consumers. Changes to consumer’s care and service needs, as a result of incidents, accidents or changes to consumers emotional needs; are not consistently reflected in care documentation or delivery ensuring that consumers are safe and risks are minimised where possible.

#### 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) Not 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) Not 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) Not 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 organisation meets three out of seven requirements for this standard.

Of consumers randomly sampled, all agree they get the care they need always or most of the time.

The organisation was unable to demonstrate that each consumer gets safe and effective personal care, clinical care that is best practice; is tailored to their needs; and optimises their health and well- being. The organisation does not demonstrate effective systems to manage consumers with identified high impact, high prevalence risks associated with their behaviour, mobility and propensity to engage in substance abuse.

Practices to assess, monitor and review consumers mental health, cognitive or physical function, capacity or condition post incidents is not recognised and responded to in a timely manner and is impacted by low staffing at times of increased risk to consumers and lack of registered nursing staff.

The needs, goals and preferences of consumers nearing the end of life are addressed and consumers who require palliative care are transferred to other services such as hospitals or hospices.

The organisation has links with external services implement appropriate referrals with other services and individuals when required.

The organisation has a system for minimisation of infection related risks and practices to promote appropriate antibiotic prescribing practices with evidence of antimicrobial stewardship policy to support appropriate administration of antibiotics.

#### 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) Not 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) Not 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) Not 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 organisation provides services to manage consumers health and wellbeing and enables them to do the things they want to do. The organisation optimises consumers’ health and well-being by respecting their spirituality, provide emotional support when needed, be involved in the community and live the life they choose. The organisation provides consumers with meals and the equipment they require to maintain independence and consumers are satisfied with the manner in which these are provided.

The organisation failed to demonstrate that information about consumers current conditions and needs is communicated within the organisation so that relevant clinical and emotional care is made available and can be provided.

#### 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) Not 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:

Consumer experience interviews show that 93% said they feel at home always or most of the time. The other 7% of consumers interviewed did not provide further explanation. Consumers reported the service is well maintained, clean and they have access to outdoors areas where they can spend time with their families or friends.

All consumers randomly interviewed said they feel safe at the service most of the time or always. The services recent consumer survey found that 100% of consumers were satisfied with the maintenance of the service environment.

The organisation demonstrated there are established processes for assessing the safety, cleanliness, maintenance and suitability of furniture, fittings and equipment through environmental audits. Preventative and corrective maintenance systems are effective and provide a satisfactory service environment for consumers.

The service was observed to be welcoming with individual rooms decorated with photographs and other personal items. Consumer’s bedrooms, bathrooms and other areas of the service are clean and well maintained. Regular environmental walkarounds are conducted to ensure facilities are maintained.

The organisation demonstrated they have an adequate process for review and evaluation of the service environment which includes consumer feedback.

#### 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:

Consumer experience interviews show that 100% of consumers said staff follow up when you raise things with them always or most of the time. Consumers confirmed that they can provide feedback and make complaints and have confidence that appropriate action will be taken.

There are mechanisms to facilitate consumers and interested persons to provide feedback or make a complaint. The organisation has feedback forms which are readily available throughout the service. Secure confidential suggestions boxes are also available at the service.

Brochures, posters and booklets are available at the service promoting and explaining the internal and external complaint mechanisms available to them.

Consumers have access to advocates, language services if required and other methods for raising and resolving complaints. Staff have received recent training which included supporting consumers to provide feedback and make complaints.

The organisation demonstrated that appropriate action is undertaken in response to a complaint and this is carried out in a timely manner.

Feedback and complaints are reviewed and investigated and used to improve the quality of care. Meeting minutes demonstrate that feedback and complaints are a standard agenda item for management. The organisation has a feedback and complaints register and can demonstrate how suggestions and complaints are used to improve services within its continuous improvement plan.

#### 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 meets four out of five requirements for this standard.

The workforce is not effectively planned to ensure appropriately qualified and skilled staff are always available to deliver safe and quality care and services. Despite this all consumers/representatives randomly interviewed said they get the care they need most of the time or always. Comments were mostly complimentary regarding staff. Staff described how the organisation supports them in their role and how they work towards achieving positive outcomes for individual consumers. However, the Assessment Team found that on occasion consumers care needs are not met in a safe or satisfactory level to meet the Standards.

86% of consumers/representatives randomly interviewed said staff are kind and caring most of the time or always. Various examples were provided of what this meant to consumers including that they are well cared for. Staff interactions were observed to be respectful. Staff were able to articulate the action they would take should a lack of respect be shown to consumers. The organisation was able to demonstrate a clear process for addressing any issues raised regarding respect for consumers and taking appropriate action in response.

All consumers/representatives randomly interviewed said staff know what they are doing most of the time or always. Consumers noted that the majority of staff know what they are doing and provide the care and services they need in a competent manner. However, the Assessment Team observed some inconsistencies in the care management of some consumers. Staff demonstrated knowledge of individual consumer’s needs and preferences and explained how they meet these on a daily basis. Staff advised they feel supported in performing their respective roles and comfortable in making suggestions for improvement. Currency of professional qualifications, skills and competencies and staff performance are monitored and reviewed by the organisation in an effective and consistent manner.

The organisation demonstrated the workforce is recruited to specific roles with workplace mentoring, mandatory training and optional education programs, competency assessments and specific training where relevant to individual consumer’s care and service needs. Performance appraisals from part of probation, with annual review or review as required and feed into further development.

#### Requirements:

Standard 7 Requirement 3(a) Not 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 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 organisation meets three out of five requirements for this standard.

The organisation demonstrated that consumers have a say in the way care and services are provided to them including acknowledgement of their preferences for delivery of services. Most consumers interviewed said they have a say in their daily activities and the place is well run. The service and its staff are supported by an organisational governance framework which promotes a culture of safe, inclusive and quality care.

The organisation does not have effective practices to identify, manage, monitor and evaluate consumers with high impact, high prevalence risks associated with their care and emotional well-being.

Processes to ensure relevant staff are available at the service at all times to ensure safe and effective clinical governance is not completely effective with gaps identified in staffing and correct storage and administration of medications. The service does, however, have adequate processes to address antimicrobial stewardship, supports open disclosure and minimising the use of restraint

The service’s approach to risk management supports consumers to live the best life they can. Staff interviewed demonstrated awareness of these systems and how they are applied in practice. Feedback from consumers and their representatives about the service and management of care and services was predominantly favourable.

#### 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) Not 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.