Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Churches of Christ Care Gracehaven Aged Care Service Bundaberg |
| **RACS ID:** | 5245 |
| **Name of approved provider:** | Churches of Christ in Queensland |
| **Address details:** | 71 Dr Mays Road BUNDABERG QLD 4670 |
| **Date of site audit:** | 15 October 2019 to 17 October 2019 |

**Summary of decision**

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| **Decision made on:** | 04 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:** | 09 December 2019 to 09 December 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) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | |  |
| 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 | | Not Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Not Met |
| Requirement 6(3)(d) | | Not Met |
| Standard 7 Human resources | | Not Met |
| Requirement 7(3)(a) | | Not 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 24 February 2020 | |
| **Revised plan for continuous improvement due:** | By 24 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 Churches of Christ Care Gracehaven Aged Care Service Bundaberg (the Service) conducted from 15 October 2019 to 18 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 | 12 |
| Consumer representatives | 9 |
| Management | 9 |
| Clinical staff | 3 |
| Care staff | 9 |
| Hospitality and environmental services staff | 5 |
| Lifestyle staff | 4 |
| Volunteer | 2 |
| Administration staff | 2 |
| Chaplain | 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 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 service has met four of six requirements under Standard 1.

Consumer experience interviews show that the majority of consumers/representatives agreed that staff treat consumers with respect most of the time or always. A high proportion of consumers/representatives also said they are encouraged to do as much as possible for themselves most of the time or always, and the majority of consumers/representatives said staff explain things to them most of the time or always.

Consumers described the ways their social connections are supported both inside and outside the service. The service promotes the value of culture and diversity in the wide range of activities it offers consumers and in the delivery of personalised care.

Consumers report that the service protects the privacy and confidentiality of their information, and that they are satisfied that care and services, including personal care, is undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of consumers while providing care. The service also demonstrated how electronic and paper documentation is protected to preserve confidentiality of consumer information, consistent with policies and procedures.

The service could not adequately demonstrate:

* Each consumer is treated with dignity and respect.
* Consumers are supported to exercise choice and independence regarding their own care and services and they are supported to communicate their decisions in relation to their care.
* It identifies who the consumer wishes to have involved in their care.

#### 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) Not 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 Assessment Team found that the service has met three of five requirements under Standard 2.

Consumer experience interviews show that all consumers/representatives agreed consumers have a say in their daily activities most of the time or always.

While staff reported consumers care and services’ plan are regularly reviewed in consultation with the consumer, and where possible, their representative, there were inconsistencies with this process.

The service could not adequately demonstrate:

* A review of all consumer documentation was included in the annual care and services’ plan review including Statements of Choice, Advance Health Directives and/or end of life planning.
* Consumers/representatives are effectively partnered in the assessment and planning process.
* Processes for understanding who the most appropriate partners in care planning are for consumers.

#### 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) Not 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) 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 that five of seven requirements in relation to Standard 3 were met.

Consumer experience interviews show that a high proportion of consumers/representatives said the consumer gets the care they need most of the time or always. All consumers reported feeling safe at the service.

Consumers reported the service generally meets their healthcare needs and gave various examples of how staff provide care that is right for them. This included asking them about their care and by referring them to other providers when required.

Staff could describe the care they provide to individual consumers and demonstrated an understanding of the needs of consumers nearing the end of their life. Staff confirmed they are provided with training and demonstrated an understanding of infection control practices.

The service demonstrates information is shared within the service and with others outside the organisation and that the policies and procedures underpinning the delivery of care are reviewed regularly.

The service could not adequately demonstrate:

* Delivery of safe and effective personal and or clinical care, in accordance with the consumer’s needs, goals and preferences to optimise consumers health and well-being.
* Changes or deterioration in consumers’ health are consistently recognised and escalated.
* Effective clinical care for managing high impact or high prevalence risk in relation to the care of consumers.

#### 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) 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 that the service met five of seven requirements under Standard 4.

Consumer experience interviews show that a high proportion of consumers/representatives said consumers are encouraged to do as much as possible for themselves most of the time or always. Consumer experience interviews show that all consumers/representatives said consumers like the food most of the time or always.

Consumers said their leisure interests, emotional and psychological needs are met, and staff could demonstrate ways this is done in a supportive manner. Staff demonstrated how consumers are supported to do things of interest to them including one to one and group activities, pastimes and outings to places of interest.

The service demonstrated consumers and staff are supported by equipment which is safe, suitable, clean and well maintained through staff at the service and external contractors.

The service could not adequately demonstrate:

* Consistent and accurate information is maintained on consumers’ meal preferences, likes/dislikes and allergies.
* Consumer dissatisfaction with meals was actioned.

#### 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) 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 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 service met all three requirements under Standard 5.

All consumers/representatives interviewed advised consumers feel safe at the service most of the time or always. Consumer experience interviews show that a high proportion of consumers/representatives said the consumer feels at home at the service most of the time or always. Consumers/representatives expressed satisfaction that:

* The service was well maintained and kept at a comfortable temperature.
* They have access to a range of equipment and furnishings and felt safe using them.
* The service regularly sought their feedback about how the service environment could be improved.

The service was observed to be welcoming with consumers’ rooms decorated with memorabilia, photographs and other personal items, and were clean and well maintained. The layout of the service enabled consumers to move around freely, with suitable furniture, fittings and signage to help consumers navigate the service. Consumers had access to tidy outdoor areas with walking paths and handrails that enabled free movement around the service.

#### 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 Not 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 service met two of four requirements under Standard 6.

Consumers experience interviews show a high proportion of consumers/representatives said that staff follow up on things most of the time or always. While most consumers/representatives said they are encouraged and supported to provide feedback and make complaints, other consumers/representatives interviewed expressed dissatisfaction with the actions taken in response to their complaints.

The service could not adequately demonstrate:

* Complaints are consistently identified and recorded through the various feedback mechanisms employed by the organisation.
* Effective monitoring of complaints to inform appropriate and timely actions and identify improvement activities.
* Appropriate action is taken following a complaint, with complainants contacted following a complaint to gauge their satisfaction with any actions taken or to offer apology.
* The appropriate use of open disclosure.

#### 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) Not 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) Not 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 Assessment Team found the organisation has not met all five requirements under Standard 7.

All consumers experience interviews show that consumers/representatives said staff are kind and caring. Consumer experience interviews show that the majority of consumers/representatives said staff know what they are doing most of the time or always and that consumers gets the care they need most of the time or always. Other consumers/representatives interviewed expressed dissatisfaction with aspects of care and services.

Following review of consumers’ clinical files and organisational documentation, interviews with staff and management and observation of staff practices, the Assessment Team identified deficiencies in staff knowledge and understanding of the provision of safe, quality care and services.

The organisation could not adequately demonstrate:

* There is sufficient staff to meet consumers’ care and service needs.
* Workforce interactions with consumers are kind, caring and respectful.
* The workforce is trained and supported to deliver outcomes required by these standards.
* Education processes to ensure staff are supported to understand and apply safe and quality care and services are effective, or that staff have the necessary competencies to provide care and services.
* Monitoring of staff practices to identify deficiencies to support effective provision of care and services to consumers.

#### 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) 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) Not 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) Not 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) Not 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 the organisation has not met all five requirements under Standard 8.

Some consumers and representatives expressed dissatisfaction with aspects of care and services, and most consumers and their representatives advised they were not a partner in improving the delivery of care and services they receive.

The organisation’s governing body has not met the requirements of this Standard in relation to governance of the service including effective organisational systems that support effective information management, feedback and complaints, and clinical governance for the delivery of safe and effective care.

The organisation could not adequately demonstrate:

* Effective clinical governance framework that demonstrates effective provision of clinical care.
* Effective use of information to provide care to consumers.
* Effective consultation occurs with consumer or the consumer’s delegated representative to enable and support decision making in relation to care and services.
* An effective risk management system for managing high impact or high prevalence risks.
* Effective risk management systems for identifying and responding to abuse and neglect of consumers.
* Effective risk management systems to support consumers to live their best life.
* Effective restraint minimisation processes.
* An effective open disclosure process.

#### Requirements:

##### **Standard 8 Requirement 3(a) Not 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) Not 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) Not 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.