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 Little Mountain Aged Care Service |
| **RACS ID:** | 5770 |
| **Name of approved provider:** | Churches of Christ in Queensland |
| **Address details:**  | 211 Parklands Boulevard LITTLE MOUNTAIN QLD 4551 |
| **Date of site audit:** | 12 November 2019 to 14 November 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 19 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:** | 01 February 2020 to 01 February 2023 |
| **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) | Met |
| Requirement 3(3)(b) | Not 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 |
| **Timetable for making improvements:** | By 03 February 2020  |
| **Revised plan for continuous improvement due:** | By 03 January 2020  |

**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 Little Mountain Aged Care Service (the Service) conducted from 12 November 2019 to 15 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** |
| --- | --- |
| Service Manager | 1 |
| Regional Catering Manager | 1 |
| Consumers | 14 |
| Representatives | 10 |
| Registered nurse | 3 |
| Hospitality staff | 5 |
| Clinical Support/Coordinators | 4 |
| Lifestyle Coordinator | 1 |
| Administration Manager | 1 |
| Care staffMaintenance  | 41 |
| Maintenance Area CoordinatorRegional ManagerCare Manager | 111 |

## 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:

2. The organisation:

(a) has a culture of inclusion and respect for consumers; and

(b) supports consumers to exercise choice and independence; and

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found that the organisation has met all six requirements under Standard 1.

Consumer experience interviews show that 100% of consumers and/or representatives agreed that staff always treat them with respect. The organisation uses regular consumer surveys and feedback mechanisms to ensure that consumers are satisfied that the staff treat them with respect and support them to maintain their identity and live the life they choose.

The organisation demonstrated that consumers are treated with dignity and respect, and that the service 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 ways their social connections are supported both inside and outside the service. The service promotes the value of culture and diversity through staff training, in the wide range of activities it offers for consumers with diverse backgrounds and preferences and in delivery of care that is tailored to the consumer.

Staff could provide examples of how they assist consumers to make choices, including giving consumers clear and accurate information and options to inform their choices. Consumers said they feel heard when they tell staff what matters to them and that they are able to make decisions about their life, even when it involves an element of risk.

Consumers and representatives said the organisation protects their privacy and confidentiality of their information, and they are satisfied that the 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. They could demonstrate their understanding that consumers receiving personal care can feel vulnerable and what they do to ensure consumers are made to feel respected and comfortable. The organisation demonstrated how electronic and filing systems support the protection of confidential information including consumer information, consistent with documented organisational policies and procedures.

#### 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:

(i) make decisions about their own care and the way care and services are delivered; and

(ii) make decisions about when family, friends, carers or others should be involved in their care; and

(iii) communicate their decisions; and

(iv) 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:

2. 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 four of five requirements in relation to Standard 2 were met.

The majority of consumers randomly sampled, agreed they get the care they need and they feel safe always or most of the time. Consumers said they have choices and are accommodated to do what they choose.

Staff could describe how consumers and others who contribute to the consumer’s care (including medical practitioners, allied health professionals, carers and family) work together to develop a services and care plan in accordance with consumer’s needs, goals and preferences.

Advance care planning and end of life wishes formed part of care planning, was well documented, and discussed with consumers and their representatives and included input from the palliative care nurse practitioner and medical practitioners.

Whilst the service has systems in place to recognise and respond to changes in a consumer’s condition, when circumstances change or when incidents occur, the Assessment Team identified care and service plans were not up to date to meet the consumer’s current needs, goals and preferences.

#### 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:

(i) 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

(ii) 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) 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:

2. 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 three of seven of the requirements under Standard 3 were met.

Most consumers randomly sampled confirmed they get the care they need always or most of the time. Consumers reported feeling safe and confident they are receiving quality care.

However, management were unable to demonstrate the care provided to all consumers is best practice. For example, pain management, behaviour management and care services provided was tailored to some consumers however could not be identified for all consumers.

The Assessment Team identified the service was unable to demonstrate effective management of consumers with high impact or prevalence risks with consumer care needs not being consistently documented. Timely referrals to other health professionals was identified as not consistently occurring.

The service was able to demonstrate through documentation review that the needs, goals and preferences of consumers nearing end of life are recognised and addressed, their comfort maximised, and their dignity preserved. Care staff demonstrated a good understanding of palliative care.

The service demonstrated that there are systems and processes in place to prevent and control infections. The service has provided information to consumers, staff and representatives about antimicrobial stewardship to increase their awareness.

#### 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:

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

##### Standard 3 Requirement 3(b) Not Met

The organisation demonstrates that 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) 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) Not Met

The organisation demonstrates that timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### Standard 3 Requirement 3(g) Met

The organisation demonstrates that minimisation of infection related risks through implementing:

(i) standard and transmission based precautions to prevent and control infection; and

(ii) 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:

2. 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 organisation has met all seven requirements under Standard 4.

Consumers and representatives interviewed said they are satisfied with the services they receive particularly in relation to their physical care and meals at the service. Consumers and representatives stated there is a variety of meals to choose from.

Consumers confirmed the service provides leisure interests, emotional and psychological support that satisfies their needs. Staff demonstrated how consumers are supported to do things of interest to them consumers who prefer individual to group activities. Consumers confirmed they interact in the broader community by participating in outings to places of interest including the local shopping centre. Consumers confirmed the service supports them to create or maintain friendships and relationships that enhance their quality of life.

The service could demonstrate how it supports consumers to connect with other supports and people outside the service. Consumers and representatives expressed satisfaction with how they are supported and enabled to live their daily life as they choose including having their emotional and spiritual needs and preferences respected. The service could demonstrate how information regarding consumers’ needs and preferences are communicated in a timely and appropriate manner. Staff could provide examples of how information about consumers is collected and shared, where relevant. Staff also demonstrated their knowledge of consumers’ individual needs and preferences in relation to activities, pastimes and independence.

The service demonstrated consumers are supported by equipment, which is safe, suitable, clean and well maintained by staff at the service. Management could demonstrate the services and support for daily living provided at the service are monitored, reviewed and any improvements are made, where needed.

#### 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:

(i) participate in their community within and outside the organisation’s service environment; and

(ii) have social and personal relationships; and

(iii) 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 that 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:

2. 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 the organisation met all three of the requirements in relation to Standard 5.

The service was observed to be welcoming with individual rooms decorated with photographs, personal items and memorabilia, clean and well maintained. The layout of the service enables consumers and visitors to move around freely with suitable furniture, fittings and signage for ease of navigating the service. Consumers have access to tidy outdoor areas with gardens, appropriate outdoor furniture and paths that enable free movement of the area.

Consumer experience interviews show that:

* A high proportion of consumers and representatives said consumers feel at home at the service always or most of the time.
* A high proportion of consumers and representatives said consumers feel safe at the service always or most of the time.

 Consumers and representatives expressed satisfaction that:

* The service is well maintained
* They have access to a range of equipment and furnishings which suit consumers’ needs.
* They have access to quiet rooms if needed and are encouraged to use all areas of the service including outdoor courtyards which are also used for activities and meals.
* They have access to the onsite café and the aquatic center.

Policies and procedures described systems for the purchase, service and maintenance of furnishings and equipment and how environmental related risks to consumers were identified and managed. Staff interviewed confirmed their understanding of the systems and maintenance arrangements.

#### 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:

(i) is safe, clean, well maintained and comfortable; and

(ii) 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:**

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:**

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:**

**Requirements:**

The Assessment Team found the organisation met all four requirements in relation to this Standard.

Consumer experience interviews show that 100% of consumers and representatives agreed staff follow up when they raise things with them always.

The service could demonstrate consumers and representatives know how to give feedback and make complaints and feel safe and comfortable doing so. The service demonstrated that consumers and representatives have access to advocates, language services and other methods for raising and resolving complaints.

The service demonstrated appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. The service further demonstrated feedback and complaints are reviewed and used to improve the quality of care.

#### 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:

2. 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:

#### Requirements:

The Assessment Team found that the service has met all five requirements under Standard Seven.

Consumer experience interviews show 100% of consumers agreed that staff know what they are doing, and they get quality care and services. The service uses consumer surveys, audits, consumer and representative feedback and meetings to ensure consumers are satisfied staff are well trained and there are enough experienced staff to enable them to provide safe and quality care.

The service demonstrated that the workforce is planned to enable, and the mix of members of the workforce enables the delivery and management of safe and quality services. Staff were observed to possess the requisite skills the organisation needs to assess, plan and coordinate care and services to meet the needs of consumers and deliver safe and quality care and services.

Staff confirmed the service’s workforce is planned, and the number and mix of members of the workforce deployed enables the delivery and management of safe and quality care and services.

Consumer experience interviews show 100% of consumers agreed that staff treat them with respect and observations of the delivery of care and services confirms that the workforce treat consumers with kindness and staff care about them.

Management gave examples of how they lead a culture of respect and could demonstrate staff are recruited, inducted, trained, equipped and supported to ensure consumers are made to feel respected, consistent with documented policies and procedures.

##### 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.

### 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:

2. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

#### Summary of Assessment of Standard 8:

#### Requirements:

The service demonstrated that its governance systems support the delivery of safe and quality aged care services. Consumers expressed confidence that the organisation is run in their best interests and described ways the service seeks their opinions to improve the service culture.

The service has governance systems in place to assess, monitor and drive improvement in the quality and safety of the care and services they provide, ensuring consumers have a quality experience.

The service seeks input from a wide range of consumers about their experience and the quality of care and services they have received. The service reviews and responds to the information it receives from consumers. Staff demonstrated they understand the service’s commitment to and processes for involving consumers.

The service has a range of organisational governance systems that promotes a culture of safe, inclusive and quality care and services. The service uses regular reviews and evaluation to identify needs and address continuous improvement priorities.

Effective risk management systems ensure the service identifies, minimises and manages risks to the safety and wellbeing of consumers, including supporting and identifying risks associated with clinical care and services.

##### 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 that effective organisation wide governance systems relating to the following:

(i) information management

(ii) continuous improvement

(iii) financial governance

(iv) workforce governance, including the assignment of clear responsibilities and accountabilities

(v) regulatory compliance

(vi) feedback and complaints

##### Standard 8 Requirement 3(d) Met

The organisation demonstrates that effective risk management systems and practices, including but not limited to the following:

(i) managing high-impact or high-prevalence risks associated with the care of consumers

(ii) identifying and responding to abuse and neglect of consumers

(iii) 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:

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure