Coppin Centre

Performance Report

45 Moubray Street   
MELBOURNE VIC 3004  
Phone number: 03 9452 2250

**Commission ID:** 3376

**Provider name:** Royal Freemasons Ltd

**Site Audit date:** 25 February 2020 to 27 February 2020

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others

# STANDARD 1 COMPLIANT Consumer dignity and choice

### 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.

## Assessment of Standard 1

Overall consumers interviewed confirmed that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose.

For example:

* Consumers interviewed confirmed they are satisfied that staff treat them with respect, were aware of what is important to them including cultural backgrounds and support them to maintain their identity and live the life they choose.
* Consumers interviewed said they can make decisions about their life, even when it involves an element of risk and staff will ensure they are as safe as they can be doing the things they choose.
* Consumers said that the organisation protects the privacy and confidentiality of their information. They are satisfied that care and services, including personal care, are undertaken in a way that respects their privacy.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

* Feedback from staff and review of care planning documentation demonstrated that staff practice the principles of dignity and respect when engaging consumers on a day to day basis,
* Staff described how they respect consumers privacy and keep their personal information confidential.
* The Assessment Team observed respectful interactions between staff, consumers and visitors. The Assessment Team found that six of six specific requirements were met.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

### Requirement 1(3)(b) Compliant

Care and services are culturally safe.

### Requirement 1(3)(c) Compliant

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

make connections with others and maintain relationships of choice, including intimate relationships.

### Requirement 1(3)(d) Compliant

Each consumer is supported to take risks to enable them to live the best life they can.

### Requirement 1(3)(e) Compliant

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.

### Requirement 1(3)(f) Compliant

Each consumer’s privacy is respected and personal information is kept confidential.

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

### 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.

## Assessment of Standard 2

All consumers and representatives interviewed, confirmed they feel like partners in the ongoing assessment and planning of their care and services.

For example:

* All consumers and representatives interviewed confirmed they are satisfied they are getting the care they need in accordance with their needs, goals and preferences. Consumers gave examples of how they have been supported to take an element of risk by choosing not to follow healthcare professionals’ recommendations.
* Consumers and representatives provided examples when they were contacted by the service when changes were made to care delivery as a result of a change in consumers’ condition or as a result of a medical episode. They described use of their care plans to inform care reviews.
* Representatives stated they felt supported when completing end of life care planning.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewing their care planning documents in detail, asking consumers about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.

* The Assessment Team reviewed a sample of care plans which show regular reviews in consultation with the consumer and/or their representatives occur on a regular basis.
* Care staff were able to consistently describe how assessments allow them to identify risk to consumers’ care. The information given to the Assessment Team is reflected in the consumers’ care documentation and assessments.
* Staff could describe how consumers and others including representatives and health professionals contribute to the consumer’s care and how they work together to deliver a tailored care and service plan.
* Care conferences support consumer and representative access to care plans as part of the process.
* Monitoring and review occur in line with consumer preferences and/or as needed. Incidents and adverse events are reviewed and changes made when necessary.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

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.

### Requirement 2(3)(b) Compliant

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.

### Requirement 2(3)(c) Compliant

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.

### Requirement 2(3)(d) Compliant

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.

### Requirement 2(3)(e) Compliant

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 COMPLIANT Personal care and clinical care

### 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.

## Assessment of Standard 3

Overall most of the consumers sampled indicated that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers interviewed, gave examples of how they get the care that is right for them and feel the service listens and accommodates their individual needs.
* Representatives said they have been kept informed of incidents and changes in their consumers’ needs/condition which may require a change in care delivery after consultation with the consumer and/or their representative.
* Consumer care strategies are guided by best practice through taking into consideration recommendations from healthcare professionals to deliver safe and effective care in all clinical areas including for mobility, dietary needs, pain, skin care, complex nursing care and end of life care.
* Consumer files show consumers have timely and appropriate referrals and access to a range of visiting healthcare services and professionals including community based mobile assessment and treatment teams and community palliative care services.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed and staff were asked about how they ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

* Of the consumers sampled a review of their care plans and associated documents showed consultation from other healthcare professionals, which provides guidance to staff including relation to complex nursing care including but not limited; mobility and transfers, diabetic management, nutrition and hydration swallowing and other medical emergencies.
* Nursing and care staff interviewed, were able to consistently describe recent changes to consumer care needs and are aware of their current care strategies.
* The Assessment Team noted all files reviewed demonstrated pressure area care, safety and comfort and wound care regimes are in place and staff are satisfied they have access to equipment to promote optimal levels of health to consumers.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

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.

### Requirement 3(3)(b) Compliant

Effective management of high impact or high prevalence risks associated with the care of each consumer.

### Requirement 3(3)(c) Compliant

The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.

### Requirement 3(3)(d) Compliant

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.

### Requirement 3(3)(e) Compliant

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.

### Requirement 3(3)(f) Compliant

Timely and appropriate referrals to individuals, other organisations and providers of other care and services.

### Requirement 3(3)(g) Compliant

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 COMPLIANT Services and support for daily living

### 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.

## Assessment of Standard 4

Overall, consumers sampled confirm that they get the services and supports for daily living that are important for their health and well-being and that enables them to do the things they want to do.

For example:

* Consumers confirmed they are supported to do the things they like to do including having private time to read, celebrating important personal/religious events and participating in one to one or group activities inside or outside of the service.
* Consumers sampled felt supported to keep in touch with people important to them, including facilitation of telephone calls and helping them be ready for outings with family and friends.
* Consumers sampled spoke positively about the choice and quantity of food.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

* The Assessment Team identified a varied lifestyle activities program that is offered on a one to one or group basis. Strategies are in place to facilitate the inclusion of consumers living with sensory, physical and/or cognitive disabilities. Opportunities for alternate lifestyle supports are offered to consumers who choose not to participate in scheduled activities, and feedback from consumers was positive regarding the willingness of the service to respect their choices and provide as much or as little lifestyle support as they desired.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

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.

### Requirement 4(3)(b) Compliant

Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

### Requirement 4(3)(c) Compliant

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.

### Requirement 4(3)(d) Compliant

Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.

### Requirement 4(3)(e) Compliant

Timely and appropriate referrals to individuals, other organisations and providers of other care and services.

### Requirement 4(3)(f) Compliant

Where meals are provided, they are varied and of suitable quality and quantity.

### Requirement 4(3)(g) Compliant

Where equipment is provided, it is safe, suitable, clean and well maintained.

# STANDARD 5 COMPLIANT Organisation’s services environment

### 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.

## Assessment of Standard 5

Overall sampled consumers indicated that they feel they belong in the service and feel safe and comfortable in the service environment.

For example:

* Consumers sampled confirmed that they feel at home at the service, and what this means to them. One consumer said the service is “spacious and spotlessly clean” and she can display her needlework. Another consumer said she goes for regular walks in the gardens and has quiet time to read the daily newspaper.
* Most consumers and representatives sampled confirmed they find the environment safe, clean and well maintained. One consumer said that cleaning staff always knock and ask her permission to clean her room each day. Another consumer said she felt very safe and was being “well taken care of”.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The team also examined relevant documents.

* The service environment was welcoming and has several shared indoor and outdoor areas for consumers and their visitors to socialise or spend time in quiet reflection. There are signs and navigational aids for consumers and visitors, with a cafeteria and small shops near the entrance. Consumers’ rooms are personalised, and automatic doors facilitate access to most outdoor areas.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.

### Requirement 5(3)(b) Compliant

The service environment:

1. is safe, clean, well maintained and comfortable; and
2. enables consumers to move freely, both indoors and outdoors.

### Requirement 5(3)(c) Compliant

Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

# STANDARD 6 COMPLIANT Feedback and complaints

### 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.

## Assessment of Standard 6

Overall sampled consumers did consider that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

For example:

* Consumers and representatives interviewed felt they could make complaints and felt safe to do so. They were aware of external advocacy groups that could assist them if they were not satisfied with the organisation’s response to their concerns.
* Consumers interviewed felt that changes were being made at the service in response to complaints and feedback, particularly in regard to food issues. If they were unhappy, most consumers they felt that staff and management worked towards a quick resolution and they are satisfied with the outcome.

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

* Information on how to raise a complaint and the process then followed was on display around the service for consumers and their visitors to view. Feedback forms, complaints information and confidential ‘letterboxes’ were accessible around the service.
* The service has electronic systems, documented procedures and staff training to support the management of complaints. Complaints are actioned appropriately, and an open disclosure process is used when things go wrong. Complaints and feedback are recorded centrally, analysed and reported on to identify improvements and satisfactory resolutions.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

### Requirement 6(3)(b) Compliant

Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

### Requirement 6(3)(c) Compliant

Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

### Requirement 6(3)(d) Compliant

Feedback and complaints are reviewed and used to improve the quality of care and services.

# STANDARD 7 COMPLIANT Human resources

### 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.

## Assessment of Standard 7

Overall sampled consumers and representatives indicated that consumers get quality care and services when they need them and from people who are knowledgeable, capable and caring.

For example:

* Consumers and representatives said they find staff kind and caring. They said staff are gentle, friendly and obliging. Representatives said staff are most important to their consumer and staff a courteous and professional. They are satisfied with management’s responsiveness to feedback on staff performance.
* Most said staff know what they are doing with one saying agency staff can be a bit rushed and another the shifting of staff around has been unsettling.
* Consumers said staff usually respond promptly to call bells. Consumers said staff come and check the situation and if they say they are coming back, return later. Consumers said they never take too long.

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

* Several management positions have been reappointed in the last six months including the service manager, a quality manager, a clinical manager and a lifestyle coordinator.
* All shifts are allocated with regular staff available to fill shifts and all shifts are replaced. Regular agency staff are used where regular staff are not available. Call bell response times indicate staff respond in a timely manner.
* Interactions between consumers, representatives and staff were observed to be kind, caring and respectful. A range of staff speak other languages.
* The workforce is recruited to specific roles requiring qualifications, credentialing or competencies with orientation of new staff occurring. Staff performance is monitored and reviewed with action taken to address underperformance.
* Staff are trained and equipped to undertake their roles and supported to deliver outcomes for consumers. Limited dementia specific education has occurred with tailored education planned. The monitoring of orientation of agency staff is not fully effective.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

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.

### Requirement 7(3)(b) Compliant

Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

### Requirement 7(3)(c) Compliant

The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.

### Requirement 7(3)(d) Compliant

The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.

### Requirement 7(3)(e) Compliant

Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.

# STANDARD 8 COMPLIANT Organisational governance

### 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.

## Assessment of Standard 8

Overall sampled consumers indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* Consumers said the service is well run and they are encouraged to provide feedback with this considered and responded to. A consumer described their role mentoring new consumers. Consumers and representatives asked are satisfied open disclosure occurs.

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

* Consumers are encouraged to participate to the development and delivery of care and services and in consultation processes within the service and organisation.
* The Board utilises a range of information and takes action to promote a culture of safe, inclusive and quality care and services. This includes meeting with consumers in their service.
* There is an established process for communication of the new Charter of aged care rights. The organisation’s governing body requires a range of reporting to support their oversight in relation to regulatory compliance and the use of restraint. Mandatory reporting occurs as required and management understands requirements and obligations. The service has a continuous improvement plan developed from a range of sources including feedback and demonstrates a commitment to outcomes for consumers.
* There is a risk framework identifying high impact and high prevalence risks and abuse or neglect of consumers. There are processes to ensure action is taken and consumers are supported to live the best life they can.
* There is a clinical governance framework in place with reporting and monitoring occurring. This includes minimising the use of antibiotics. The use of physical and chemical restraint is monitored and minimised. Open disclosure occurs and is generally documented.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

### Requirement 8(3)(b) Compliant

The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.

### Requirement 8(3)(c) Compliant

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.

### Requirement 8(3)(d) Compliant

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.

### Requirement 8(3)(e) Compliant

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.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.