Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Estia Health Albury |
| **RACS ID:** | 0886 |
| **Name of approved provider:** | Estia Investments Pty Ltd |
| **Address details:** | 289 Elizabeth Mitchell Drive THURGOONA NSW 2640 |
| **Date of site audit:** | 09 October 2019 to 11 October 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 11 November 2019 | |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. | |
| **Decision:** | To re-accredit the service under section 41 of the Rules. | |
| **Further period of accreditation:** | 17 December 2019 to 17 December 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Met |
| Requirement 3(3)(e) | | Met |
| Requirement 3(3)(f) | | Met |
| Requirement 3(3)(g) | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Requirement 4(3)(a) | | Met |
| Requirement 4(3)(b) | | Met |
| Requirement 4(3)(c) | | Met |
| Requirement 4(3)(d) | | Met |
| Requirement 4(3)(e) | | Met |
| Requirement 4(3)(f) | | Met |
| Requirement 4(3)(g) | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Met |
| Requirement 5(3)(c) | | Met |
| Standard 6 Feedback and complaints | | Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Met |
| Requirement 6(3)(d) | | Met |
| Standard 7 Human resources | | Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Met |
| Requirement 8(3)(e) | | Met |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 48 of the Rules.**

Site Audit Performance   
Assessment Report

The Commission makes the decision taking into account this site audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this site audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Estia Health Albury (the Service) conducted from 09 October 2019 to 11 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 | 17 |
| Representatives | 4 |
| ACFI Coordinator | 1 |
| Care director | 1 |
| Care staff | 3 |
| Cleaner | 1 |
| Cleaning team leader | 1 |
| Enrolled nurse | 1 |
| Executive director | 1 |
| Head chef | 1 |
| Laundry staff | 1 |
| Lifestyle coordinator | 2 |
| Maintenance officer | 1 |
| Property services manager | 1 |
| Registered nurse | 1 |
| Student | 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 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 the service has met the six requirements under Standard 1.

Of consumers and representatives randomly sampled,100% agreed that staff treat them with respect always or most of the time. The service uses consumer surveys and an anonymous feedback and complaints mechanism to ensure that consumers are satisfied that staff treat them with respect and support them to maintain their identity and live the life they choose.

The service 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 the ways their social and intimate relationships 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 person.

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

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, are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of consumers and 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 service also demonstrated how electronic management systems support the protection of confidential information including consumer information, consistent with documented 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 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 the service has met the five requirements under Standard 2.

Of consumers and representatives interviewed and those randomly selected to participate in the consumer experience report, 93% are satisfied that they have a say in their daily activities all of the time or most of the time. A small percentage explained that they prefer not to join in the activities offered as they prefer their own company.

Consumers said staff listen to their goals and preferences in day to day activities, and the service seeks the contribution from other healthcare professionals to ensure consumers receive the right care and services to meet their needs.

Staff interviewed demonstrated they understood the process of reviewing and updating care plans and how they were notified of changes to care. Staff were able to demonstrate service’s written processes for passing on relevant information to others (including medical practitioners, allied health professionals and carers) to deliver care and services through ongoing planning and assessment of consumers needs including regular monitoring and review.

Each of the care and service plans reviewed by the Assessment Team showed that they have been reviewed regularly and included referrals where necessary. This information is reflected in the daily handover documentation. Advanced care plans including preferences for end of life care were also reviewed.

Staff demonstrated an understanding of adverse incidents or near miss events and how these are identified, documented and reviewed by the service, to inform continuous improvement.

#### 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) 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 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 recommend that the organisation the seven requirements under Standard 3.

Of consumers and representatives interviewed and those randomly selected to participate in the consumer experience, 100% said they get the care they need all of the time or most of the time and 100% responded that they feel safe all of the time or most of the time.

Staff could describe how they ensure care is according to consumers’ preferences and is right for them. Staff were able to identify inherent risks of consumer choices and supported them by explaining the risks to them in a manner that the consumer understands monitoring and observation of the consumers.

Each of the care plans reviewed by the Assessment Team evidenced the delivery of safe and effective care including end of life strategies. Care plans and associated documents reviewed consultation from other healthcare professionals that guided staff in complex nursing care. Where applicable medical enduring power of attorney (including public advocates) documentation was sighted.

#### Requirements:

##### Standard 3 Requirement 3(a) Met

The organisation demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

##### Standard 3 Requirement 3(b) 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) 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 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 the service has met the seven requirements under Standard 4.

Of consumers and representatives randomly sampled, 93% said they that they are encouraged to do as much as possible for themselves most of the time or always. A total of 64% said they like the food most of the time or always, while 36% said some of the time stating it is not always cooked to their liking. Consumers stated there is variety in the menu however, if they request an alternate meal then this is catered for. Consumers reported overall services and supports for daily living are safe and effective and meals provided are varied and of suitable quality and quantity.

Consumers, representatives and staff provided various examples about how the service promotes emotional, spiritual and psychological wellbeing and what this means for them: Staff described how two consumers have psychologists who come and visit them in their rooms at their request. Staff described how one consumer chooses to stay in her room at all times. Staff provide one on one support to the consumer and regularly provide encouragement to her to visit communal areas of the service. Consumers said they are offered the opportunity go on bus trips each week. Destinations are discussed with consumers, so they can travel to a place of interest to them. Representatives described in various ways how staff support their loved ones emotional, spiritual and psychological wellbeing.

The service demonstrated that is makes timely referrals to other organisations and provides safe, suitable and well-maintained equipment and that staff are appropriately trained to use equipment. This was also observed by the Assessment Team.

#### 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 service has met the three requirements under Standard 5.

The service was observed to be welcoming with individual rooms decorated with memorabilia, photographs and other personal items and is 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 ready access to tidy outdoor areas with gardens and paths with handrails that enabled free movement around the area.

Consumers reported 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 seeks feedback about how the service environment could be improved and made more welcoming. The dining room provides social contact and activity, but also areas to meet in a small group provide similar opportunities, that provide comfort and privacy, to discuss personal matters, or to enjoy a family visit or special occasion.

Management confirmed that environmental audits are conducted to assess potential risk areas and instigate improvements. The service environment is discussed at meetings and where any emerging risk or environment issues are discussed along with consumer feedback on the service environment.

#### 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:

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:

2. 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 organisation has met the four requirements under Standard 6.

The service demonstrated that consumers are encouraged and supported to provide feedback and make complaints, have access to advocates and methods for resolving complaints, have appropriate action taken in response to their complaints, and complaints are reviewed and used to improve services.

Of consumers and representatives interviewed and those randomly sampled to participate in the consumer experience report 100% of consumers are satisfied staff follow up when they raise things with them. Other consumers and representatives interviewed provided positive feedback about staff and management’s responsiveness to any issues raised.

Information about internal and external feedback processes is provided to all consumers and representatives. Brochures and information relating to feedback mechanisms are displayed throughout the service and available to consumers in multiple languages. There are feedback boxes located in each area and level of the service. Feedback, complaints and compliments are an agenda item at consumer meetings. The organisation has an open disclosure framework.

Management review, analyse and monitor all feedback received to identify trends and generate improvements. Complaints data is reported through governance structures and tabled meetings of the organisation’s Board.

#### 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:

The Assessment Team found that the organisation has met all five requirements under Standard 7.

The organisation demonstrated that the workforce is planned to enable the delivery and management of safe, respectful and quality care and services.

Of consumers and representatives interviewed and those randomly selected to participate in the consumer experience, 100% said staff are kind and caring, 100% agreed that staff provide the care that they need and 93% said staff know what they are doing all of the time or most of the time.

A small proportion of consumers who responded some of the time, said that the majority of the staff know what they are doing. Management continue work towards developing strategies to ensure all consumers are satisfied.

The service demonstrated there are processes to ensure there are sufficient skilled and qualified staff to deliver safe, quality care and services. Staff said and roster documentation confirmed there is a process to replace planned and unplanned leave.

Staff were observed to be attentive, kind and caring in their interactions with consumers and representatives. The majority of staff said they have sufficient time to complete their workload and said staff absences are replaced.

Recruitment, selection, induction and orientation processes ensure staff have the required knowledge and skills to deliver services. Staff are recruited to specific roles requiring relevant qualifications and experience and are provided with relevant information to enable them to complete their tasks. Staff have access to a range of education to support them in their relevant positions and undertake compulsory ongoing education.

Management discussed processes to monitor staff performance. All staff are now required to participate in an annual performance review.

#### Requirements:

##### Standard 7 Requirement 3(a) Met

The organisation demonstrates that the workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.

##### Standard 7 Requirement 3(b) Met

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

##### Standard 7 Requirement 3(c) Met

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

##### Standard 7 Requirement 3(d) Met

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

##### Standard 7 Requirement 3(e) Met

The organisation demonstrates that regular assessment, monitoring and review of the performance of each member of the workforce.

### 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:

#### The Assessment Team found that the organisation has met all five requirements under Standard 8.

Of consumers and representatives interviewed and those randomly selected to participate in the consumer experience, 100% agreed that the service is well run.

The organisation demonstrated that they involve consumers in the design, delivery and evaluation of care and services, providing examples of how consumers are involved in the design of services and are engaged on a regular basis in various ways including meetings. Consumers interviewed confirmed they are involved in care planning, delivery and evaluation and provided examples of how this occurs in practice.

The governing body meets regularly, sets expectations for the service and regularly reviews risks. Organisational wide governance systems support effective information management, the workforce, compliance with regulation and clinical care.

The service has a continuous improvement program which drives the quality system and involves all stakeholders.

The clinical governance framework addresses anti-microbial stewardship, minimising the use of restraint and practising open disclosure when required. Staff interviewed understood these concepts and could explain how they were applied in practice.

#### Requirements:

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

The organisation demonstrates that consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

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

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

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

The organisation demonstrates 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