Accreditation Decision

**Decision not to revoke accreditation following review audit**

**Decision not to vary period of accreditation**

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Estia Health Mudgeeraba |
| **RACS ID:** | 5991 |
| **Name of approved provider:** | Estia Investments Pty Ltd |
| **Address details:**  | 21-25 Old Coach Road MUDGEERABA QLD 4213 |
| **Date of review audit:** | 04 September 2019 to 10 September 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 25 October 2019 |
| **Decision made by:** | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 77 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service after receiving a review audit report. |
| **Decision:** | Not to revoke the accreditation of the service under section 77 of the Rules*.*Not to vary the period of accreditation under section 77(4)(a) of the Rules*.* |
| Accreditation expiration date: | 05 May 2020 |
| Assessment of performance with the Aged Care Quality Standards |
| Standard 1 Consumer dignity and choice | Not Met |
| Requirement 1(3)(a) | Not Met |
| Requirement 1(3)(b) | Not Met |
| Requirement 1(3)(c) | Not Met |
| Requirement 1(3)(d) | Met  |
| Requirement 1(3)(e) | Met |
| Requirement 1(3)(f) | Met |
| Standard 2 Ongoing assessment and planning with consumers | Not Met |
| Requirement 2(3)(a) | Not Met |
| Requirement 2(3)(b) | Met  |
| Requirement 2(3)(c) | Met  |
| Requirement 2(3)(d) | Not Met |
| Requirement 2(3)(e) | Met  |
| Standard 3 Personal care and clinical care | Not Met |
| Requirement 3(3)(a) | Not Met |
| Requirement 3(3)(b) | Not Met |
| Requirement 3(3)(c) | Met  |
| Requirement 3(3)(d) | Met  |
| Requirement 3(3)(e) | Not Met |
| Requirement 3(3)(f) | Met  |
| Requirement 3(3)(g) | Met  |
| Standard 4 Services and supports for daily living | Not Met |
| Requirement 4(3)(a) | Met  |
| Requirement 4(3)(b) | Met  |
| Requirement 4(3)(c) | Not 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 | Not Met |
| Requirement 7(3)(a) | Not Met |
| Requirement 7(3)(b) | Not Met |
| Requirement 7(3)(c) | Met  |
| Requirement 7(3)(d) | Met  |
| Requirement 7(3)(e) | Met |
| Standard 8 Organisational governance | Not Met |
| Requirement 8(3)(a) | Met |
| Requirement 8(3)(b) | Met |
| Requirement 8(3)(c) | Not Met |
| Requirement 8(3)(d) | Met  |
| Requirement 8(3)(e) | Met  |
| Timetable for making improvements: | By 27 January 2020 |
| Revised plan for continuous improvement due: | By 8 November 2019  |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 80 of the Rules.**

Review Audit Performance
Assessment Report

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

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

## Introduction

**This is the report of an assessment of Estia Health Mudgeeraba (the Service) conducted from 04 September 2019 to 10 September 2019.**

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

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

For a ‘Not met’ finding, the Assessment Team has provided information about why the requirement was Not Met.

This Report is to be read in conjunction with the Quality Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Consumers | 19 |
| Consumer representatives  | 8 |
| Management | 6 |
| Clinical staff  | 8 |
| Care staff | 15 |
| Hospitality and environmental services staff | 9 |
| Lifestyle staff | 3 |
| Clinical Nurse Specialist | 1 |
| Visiting service providers such as allied health professionals | 3 |
| Care Director | 1 |
| Administration officer | 1 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Not Met

#### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

#### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found the service has not met all six of the requirements under Standard 1.

Whilst some consumers interviewed said they are treated with dignity and respect, and can maintain their identity and make informed choices about their care and services to live the life they choose, other consumers did not feel the same.

The service has not met the requirements of this Standard in regard to being able to demonstrate a culture of inclusion and respect, supporting consumers to exercise choice and independence or respecting their privacy.

The service could not adequately demonstrate:

* Each consumer is treated with dignity, respect or that their cultural identity and diversity is valued.
* Care is consistently delivered in a culturally safe way.
* Consumers are supported to exercise choice and independence regarding their own care and services and they are supported to communicate their decisions in relation to their care.
* Consumers are supported to take risks in enable them to live the best life that they can.
* Information provided to each consumer is current, accurate and provided in a timely manner and in a format that is easy for the consumer to understand.
* Consumers’ privacy is respected, and their personal information kept confidential.

#### Requirements:

Standard 1 Requirement 3(a) Not Met

The organisation demonstrates that each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

##### **Standard 1 Requirement 3(b) Not Met**

The organisation demonstrates that care and services are culturally safe.

Standard 1 Requirement 3(c) Not Met

The organisation demonstrates that each consumer is supported to exercise choice and independence, including to:

1. make decisions about their own care and the way care and services are delivered; and
2. make decisions about when family, friends, carers or others should be involved in their care; and
3. communicate their decisions; and
4. make connections with others and maintain relationships of choice, including intimate relationships.

Standard 1 Requirement 3(d) Not 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) Not 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) Not Met

The organisation demonstrates that each consumer’s privacy is respected and personal information is kept confidential.

### Standard 2: Ongoing assessment and planning with consumers Not Met

#### Consumer outcome:

1. I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

#### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

#### Summary of Assessment of Standard 2:

The Assessment Team found the service has not met all five requirements under Standard 2.

While the majority of consumers and representatives said they get the care they need, most said the service does not consistently partner and consult with the them to help them to receive the care and services they need for their health and well-being. Some consumers and representatives reported that care delivery had not changed when feedback had been provided to the service and they do not feel they have ongoing partnership in the planning and review of the consumer’s care.

Review of consumer records, interview with management and staff and observation of practices indicated management and staff did not have a shared understanding of processes to consistently enable and support consumers, including their representatives and health professionals to work together to deliver a tailored care and service plan and monitor and review the plan when required.

The service could not adequately demonstrate:

* A consistent awareness among management that there is a need to include all types of risks to the consumer’s health and wellbeing when conducting assessments.
* Care plans address the current needs, goals and preferences of the consumer.
* Advance care planning and end of life planning are attended to in a timely manner.
* Consumers and representatives participate in the care planning or have discussions with staff about the consumer’s care and service needs.
* Issues of concern raised by consumers and representatives are addressed.
* The outcomes or recommendations from other organisations, individuals and providers of other care and services are consistently reflected in consumers’ care plans.
* The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and service plan.
* Monitoring processes are effective in consistently identifying and/or managing changes in consumer’s care needs.

#### Requirements:

Standard 2 Requirement 3(a) Not Met

The organisation demonstrates that assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.

##### **Standard 2 Requirement 3(b) Not Met**

The organisation demonstrates that assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.

Standard 2 Requirement 3(c) Not Met

The organisation demonstrates that assessment and planning:

1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and
2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

Standard 2 Requirement 3(d) Not Met

The organisation demonstrates that the outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.

Standard 2 Requirement 3(e) Not Met

The organisation demonstrates that care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

### Standard 3:Personal care and clinical care Not Met

#### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

#### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

#### Summary of Assessment of Standard 3:

The Assessment Team found the service has not met six of the seven requirements under Standard 3.

While the majority of consumers and representatives interviewed said the consumers get the care they need, feedback from some consumers and representatives identified deficiencies regarding strategies employed for the safe and effective personal and clinical care.

Review of consumer records, interview with management and staff and observation of practices indicated management and staff did not have a shared understanding of processes to consistently ensure delivery of safe and effective, personal and clinical care.

The service could not adequately demonstrate:

* Delivery of 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 consumers health and well-being.
* Effective systems to undertake regular monitoring or to seek consumer feedback to ensure consumers are satisfied with personal or clinical care in accordance with their needs, goals and preferences.
* There is sufficient workforce is to ensure consumers’ personal and clinical care needs are met in accordance with their needs and preferences.
* Effective clinical care for managing high impact or high prevalence risk in relation to the care of consumers.
* Care planning for consumer’s nearing the end of life is consistently current and is reflective of the consumer’s individual needs, goals and preferences.
* Registered staff consistently record they have identified or actioned changes in consumer care needs in a timely manner and referrals to the Medical officer (MO) have been actioned and/or followed up in timely manner.
* Clinical monitoring to identify changes in consumer’s care needs is carried out by staff as directed.
* Information about the consumer’s condition, needs and preferences is documented and communicated within the service.
* Timely and appropriate referrals are being made for some consumers in relation to interpreter services, physiotherapy services, speech pathology services, wound specialists, mental health and dementia specialist services and/or appropriate follow up has been actioned.

#### Requirements:

Standard 3 Requirement 3(a) Not Met

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

1. is best practice; and
2. is tailored to their needs; and
3. optimises their health and well-being.

Standard 3 Requirement 3(b) Not Met

The organisation demonstrates effective management of high impact or high prevalence risks associated with the care of each consumer.

Standard 3 Requirement 3(c) Not Met

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

Standard 3 Requirement 3(d) Not Met

The organisation demonstrates that deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.

Standard 3 Requirement 3(e) Not Met

The organisation demonstrates that information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.

Standard 3 Requirement 3(f) Not Met

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

Standard 3 Requirement 3(g) Met

The organisation demonstrates minimisation of infection related risks through implementing:

1. standard and transmission based precautions to prevent and control infection; and
2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

### Standard 4:Services and supports for daily living Not Met

#### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and
well-being and that enable me to do the things I want to do.

#### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

#### Summary of Assessment of Standard 4:

The Assessment Team found the organisation has not met three of seven requirements under Standard 4.

While most consumers and representatives felt they receive the services and supports for daily living that are important for the consumers’ health and well-being and enable them to do the things that they want to do, other consumers and representatives expressed dissatisfaction with aspects of their services and supports.

Following review of consumers’ clinical files, interview with staff, management, consumers, representatives and observations of staff practices, the Assessment Team identified deficiencies in staff knowledge and understanding in the provision of services and supports for daily living.

The organisation could not adequately demonstrate:

* Each consumer receives safe and effective services and supports for daily living to support their identified needs, goals and preferences.
* Each consumer has current and relevant documentation to support their daily living and promote their emotional and spiritual well-being.
* Each consumer has access to activities that meet their individual interests and preferences.

#### Requirements:

Standard 4 Requirement 3(a) Not 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) Not 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) Not Met

The organisation demonstrates that services and supports for daily living assist each consumer to:

1. participate in their community within and outside the organisation’s service environment; and
2. have social and personal relationships; and
3. do the things of interest to them.

Standard 4 Requirement 3(d) Met

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

Standard 4 Requirement 3(e) Met

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

Standard 4 Requirement 3(f) Met

The organisation demonstrates that where meals are provided, they are varied and of suitable quality and quantity.

Standard 4 Requirement 3(g) Met

The organisation demonstrates that where equipment is provided, it is safe, suitable, clean and well maintained.

### Standard 5:Organisation’s service environment Met

#### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

#### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

#### Summary of Assessment of Standard 5:

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

All consumers interviewed said that they felt safe at the service. Consumers and representatives said the service’s fittings and equipment are kept clean, tidy and well maintained.

The service was observed to be welcoming with individual ensuited rooms which consumers personalised with ornaments, photographs and other personal items. The layout of the service including the two secure areas enabled consumers to move around freely throughout the various internal and external areas of the service, with suitable furniture, fittings and signage to help consumers navigate the service. Consumers have access to large outdoor areas which have raised gardens, comfortable seating, communal areas and paved areas that enable free movement.

The service was able to demonstrate:

* There were processes to ensure the furnishings, fittings and equipment are regularly serviced and well maintained.
* There are preventative and corrective maintenance schedules.
* Staff interviewed have an understanding of the systems and maintenance processes used at the service.
* There were service agreements in place with all external contractors.

#### Requirements:

Standard 5 Requirement 3(a) Met

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

Standard 5 Requirement 3(b) Met

The organisation demonstrates that the service environment:

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

Standard 5 Requirement 3(c) Met

The organisation demonstrates that furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

### Standard 6:Feedback and complaints Not Met

#### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

#### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

#### Summary of Assessment of Standard 6:

The Assessment Team found the organisation has not met all four requirements under Standard 6.

While most consumers and representatives said they are encouraged and supported to provide feedback and make complaints, other consumers and representatives interviewed expressed dissatisfaction with the actions taken in response to their complaints.

The service could not adequately demonstrate:

* Complaints are consistently identified and recorded through the various feedback mechanisms employed by the organisation.
* Effective monitoring of complaints to inform appropriate and timely actions and identify improvement activities.
* Appropriate action is taken following a complaint, with complainants contacted following a complaint to gauge their satisfaction with any actions taken or to offer apology.
* Effective systems to ensure consumers are provided with access to advocacy and language services.
* Effective systems to ensure staff are supported to provide feedback without fear of reprisal.

#### Requirements:

##### **Standard 6 Requirement 3(a) Not 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) Not Met

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

Standard 6 Requirement 3(c) Not Met

The organisation demonstrates that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

Standard 6 Requirement 3(d) Not Met

The organisation demonstrates that feedback and complaints are reviewed and used to improve the quality of care and services.

### Standard 7:Human resources Not Met

#### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

#### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

#### Summary of Assessment of Standard 7:

The Assessment Team found the organisation has not met all five requirements under Standard 7.

While most consumers and representatives provided a range of examples of how staff interactions are kind, caring and respectful and they generally get the care they need, other consumers and representatives expressed dissatisfaction with aspects of care and services.

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

The organisation could not adequately demonstrate:

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

#### Requirements:

Standard 7 Requirement 3(a) Not Met

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

Standard 7 Requirement 3(b) Not Met

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

Standard 7 Requirement 3(c) Not Met

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

Standard 7 Requirement 3(d) Not Met

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

Standard 7 Requirement 3(e) Not Met

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

### Standard 8:Organisational governance Not Met

#### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found the organisation has not met all five requirements under Standard 8.

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

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

The organisation could not adequately demonstrate:

* An effective risk management system for managing high impact or high prevalence risks.
* Effective clinical governance framework that demonstrates effective provision of clinical care.
* Effective use of information to provide care to the consumers.
* Effective consultation occurs with consumers or the consumer’s delegated representative to enable and support decision making in relation to the care and services.
* Consumers are engaged in the development, delivery and evaluation of care or are consistently supported in that engagement.

#### Requirements:

Standard 8 Requirement 3(a) Not Met

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

Standard 8 Requirement 3(b) Not Met

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

Standard 8 Requirement 3(c) Not Met

The organisation demonstrates effective organisation wide governance systems relating to the following:

1. information management;
2. continuous improvement;
3. financial governance;
4. workforce governance, including the assignment of clear responsibilities and accountabilities;
5. regulatory compliance;
6. feedback and complaints.

Standard 8 Requirement 3(d) Not Met

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

1. managing high impact or high prevalence risks associated with the care of consumers;
2. identifying and responding to abuse and neglect of consumers;
3. supporting consumers to live the best life they can.

Standard 8 Requirement 3(e) Not Met

The organisation demonstrates that where clinical care is provided—a clinical governance framework, including but not limited to the following:

1. antimicrobial stewardship;
2. minimising the use of restraint;
3. open disclosure.