Accreditation Decision and Report

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Eventide Lutheran Homes |
| **RACS ID:** | 3285 |
| **Name of approved provider:** | Lutheran Church of Australia Victorian District |
| **Address details:** | 72 Ballarat Road HAMILTON VIC 3300 |
| **Date of site audit:** | 16 July 2019 to 18 July 2019 |

**Summary of decision**

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| **Decision made on:** | 22 August 2019 | |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. | |
| **Decision:** | To re-accredit the service under section 41 of the Rules. | |
| **Further period of accreditation:** | 09 October 2019 to 09 October 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Standard 6 Feedback and complaints | | Met |
| Standard 7 Human resources | | Met |
| Standard 8 Organisational governance | | Met |

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

## Introduction

**This is the report of an assessment of Eventide Lutheran Homes (the Service) conducted from 16 July 2019 to 18 July 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 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** |
| --- | --- |
| Activities coordinator | 1 |
| Care staff | 5 |
| Chief executive officer | 1 |
| Consumers and representatives | 17 |
| Deputy director of nursing | 1 |
| Director of nursing | 1 |
| Endorsed enrolled nurse | 1 |
| Lifestyle staff | 1 |
| Registered nurse | 1 |
| Volunteer | 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:

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:

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

#### Summary of Assessment of Standard 1:

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

Of consumers randomly sampled, 100% said staff always treat them with respect. The organisation uses surveys, feedback and complaints mechanisms to ensure consumers are satisfied that staff treat them with respect and support them to maintain their identity and live the life they choose.

Staff were observed to interact with consumers respectfully and readily identified consumers’ individual preferences and interests. Consumers described the ways their social connections are supported within and outside the service. The service promotes the value of culture and diversity, including various religious faiths, through 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 provided 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 organisation 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 demonstrated their understanding that consumers receiving personal care can feel vulnerable and described how they ensure consumers are made to feel respected and comfortable. The organisation 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 (a) Met

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

##### Standard 1 Requirement (b) Met

Care and services are culturally safe.

##### Standard 1 Requirement (c) Met

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 (d) Met

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

##### Standard 1 Requirement (e) Met

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 (f) Met

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

### Standard 2: Ongoing assessment and planning with consumers Met

#### 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:

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:

Of consumers randomly sampled, 100% agreed they have a say in their daily activities most of the time or always. Consumers provided various examples of what this meant for them for example: I get to choose what I like to do each day. Consumers reported feeling safe and confident that staff listen to their goals and preferences, and that the organisation gets input from other professionals to ensure consumers get the right care and services to meet their needs.

Staff could describe how consumers and others who contribute to consumers’ care (including medical practitioners, allied health professionals, carers and family) work together to ensure assessment and planning has a focus on optimising health and wellbeing in accordance with the consumer’s needs, goals and preferences.

Consumers, representatives and staff described how care and services are reviewed regularly, when there is a change to consumers’ health or wellbeing status, needs or preferences. The organisation is responsive in their communication with consumers and seeks their input to update the care and services they are receiving. Each of the consumer’s care profiles reviewed by the Assessment Team evidenced care plans have been reviewed. Staff demonstrated an understanding of incidents and how these were identified, documented and reviewed to inform changes in consumers’ care.

The Assessment Team were satisfied that advance care planning and end of life planning forms part of the care planning. This was evidenced by representative feedback and review of documentation for a consumer who recently received palliative care in the service.

#### Requirements:

##### Standard 2 Requirement (a) Met

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 (b) Met

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 (c) Met

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 (d) Met

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 (e) Met

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:

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

#### Organisation statement:

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 met the seven requirements under Standard 3.

Of consumers randomly sampled, 100% said they get the care they need most of the time or always. 100% of consumers said they feel safe most of the time or always. Consumers provided various examples of what this meant for them. Consumers overall reported feeling safe and confident that they are receiving personal and clinical care that is right for them.

Staff described how best practice informs clinical care and how information is shared both within the organisation and with others outside the organisation. Staff demonstrated a good working understanding of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics. Staff also identified the highest prevalence risks for different cohorts of consumers and described how incidents are used to inform changes in practice.

Each of the care profiles reviewed by the Assessment Team evidenced the delivery of safe and effective care, including end of life care and evidenced individual goals and preferences of consumers who needs were specific. These included the management of pain relief, review of pain management strategies and close involvement of family and others.

The organisation demonstrated that they have a suite of policies and procedures underpinning the delivery of care and how they review practice (and policies) to ensure they remain fit-for-purpose.

#### Requirements:

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

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 (b) Met

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

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

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 (d) Met

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 (e) Met

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 (f) Met

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

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

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:

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:

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 randomly sampled, 100% said they that they are encouraged to do as much as possible for themselves most of the time or always. 100% said they like the food here most of the time or always. 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 provided various examples about how the service promotes emotional, spiritual and psychological wellbeing and what this means for them. Consumers also discussed how they are supported to maintain activities in the local community. Staff described how they identify and provide one to one engagement for consumers who prefer to stay in their room.

The service demonstrated that it 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 (a) Met

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 (b) Met

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

##### Standard 4 Requirement (c) Met

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 (d) Met

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 (e) Met

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

##### Standard 4 Requirement (f) Met

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

##### Standard 4 Requirement (g) Met

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

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

#### Consumer outcome:

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

#### Organisation statement:

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.

Of consumers randomly sampled 100 % said they feel at home here most of the time or always and described in various ways while the service is not home it is the next best thing. 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 supports consumers to move around freely, with suitable furniture, fittings and signage to help consumers navigate the service. There are a variety of dining areas to support consumers’ individual dining preferences and multiple spaces to relax and meet privately with visitors, a chapel and multipurpose areas. Consumers are supported and encouraged to access these and outdoor areas.

Of consumers randomly sampled, 100 % said that they felt safe most of the time or always and described in various ways the service is secure, there are always a lot of people around and their calls for assistance are responded to in a timely manner.

Management described their electronic management system for reporting and monitoring repairs and maintenance of fixtures, furnishings and equipment. Audits are conducted to assess potential risk areas and instigate improvements. The service seeks consumer feedback about how the service environment could be improved.

#### Requirements:

##### Standard 5 Requirement (a) Met

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

##### Standard 5 Requirement (b) Met

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 (c) Met

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

#### Summary of Assessment of Standard 6:

The Assessment Team found the service has met the four requirements under Standard 6.

Of consumers randomly sampled, 100% said that staff follow up when they raise things with them most of the time or always. Consumers reported overall, they are supported and encouraged to give feedback and make complaints and appropriate actions are taken.

Stakeholders are invited to complete surveys and encouraged to attend meetings for example bi-monthly ‘resident and representative’ meetings to provide feedback about care and services. Feedback forms are available in multiple areas throughout the service and secure lodgement boxes are located at reception and the rear entry/exit. The service provides pastoral care services to support consumers if they have an issue to discuss or are concerned about something or need someone to be their advocate. Staff described how they would support consumers to provide feedback and or make a complaint. Management said all feedback is logged on the service’s electronic document management system which enables assignment of person responsible, interdepartmental referrals such as maintenance and documentation of action/s taken.

The service has developed a framework for open disclosure for when things go wrong and demonstrated how it uses feedback and complaints to improve the quality and care of services.

#### Requirements:

##### Standard 6 Requirement (a) Met

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

##### Standard 6 Requirement (b) Met

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

##### Standard 6 Requirement (c) Met

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

##### Standard 6 Requirement (d) Met

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

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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 service has met the five requirements under Standard 7.

The service demonstrated they ensure the numbers and mix of the staff is planned, managed and reviewed to enable safe and quality care and services. The service demonstrated they generally ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. Management described how the service has drafted a diversity policy that considers the service’s faith-based philosophy and includes language skills, spirituality, sexuality and lifestyle. The policy includes definitions of diversity, cultural responsiveness, cultural safety, inclusion and access.

Of consumers randomly sampled, 100 % said staff always know what they are doing. The service demonstrated the workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers.

The service demonstrated they monitor staff qualifications and ensure through staff selection and education and training processes that the workforce is competent, and they have the knowledge and skills to effectively perform their roles. The organisation demonstrates that regular and ongoing assessment, monitoring and review of the performance of each member of the workforce is undertaken.

#### Requirements:

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

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 (b) Met

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

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

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

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

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

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

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

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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 service has met the five requirements under Standard 8.

The organisation demonstrated that they involve consumers in the design, delivery and evaluation of care and services, providing examples of how consumers are involved and engaged on a day to day basis. These include meetings, surveys and promotion of shared decision-making processes.

The governing body meets regularly, sets expectations for the service and regularly reviews risks from the service and consumer perspective. Governance systems support effective information management, financial governance, the workforce, compliance with regulation and feedback and complaints.

Of consumers randomly sampled, 100 % said this place is well run most of the time or always and described in various ways what this meant for them. The service has a continuous improvement program which drives the quality system and involves all stakeholders. Management said their self-assessment of care and services including use of chemical restraint requires ongoing review and development.

The clinical governance framework addresses anti-microbial stewardship, open disclosure and the use of restraint.

#### Requirements:

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

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

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

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 (c) Met

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 (d) Met

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 (e) Met

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