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:** | Green Gables Private Hostel |
| **RACS ID:** | 3220 |
| **Name of approved provider:** | Wickro Pty Ltd |
| **Address details:**  | 15 Coulstock Street EPPING VIC 3076 |
| **Date of site audit:** | 08 August 2019 to 09 August 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 10 September 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 Green Gables Private Hostel (the Service) conducted from 08 August 2019 to 09 August 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 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 | 17 |
| Representatives | 2 |
| Care service manager | 1 |
| Care staff | 6 |
| Chief executive office | 1 |
| Cleaning staff | 1 |
| Cook | 1 |
| Director of nursing | 1 |
| Group general manager | 1 |
| Group quality manager | 1 |
| Laundry staff | 1 |
| Lifestyle staff | 1 |
| Maintenance officer | 1 |
| Physiotherapist | 1 |
| Quality and risk manager | 1 |
| Registered nurse | 2 |
| Rostering 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 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 recommends that the organisation has met all six requirements under Standard 1.

The service demonstrated that consumers are treated with dignity and respect and the service actively promotes a culture of inclusion. Of consumers and representatives randomly sampled, 93% said staff treat them with respect most of the time or always. Consumers said they feel heard and staff are nice when providing care. Staff feedback included identifying consumers as individuals and the importance of communication with the consumers when providing care.

Cultural diversity is celebrated in various ways with the service providing cultural days and celebrations of national days. External services, volunteers and church groups are used to help support cultural safety for consumers. Staff interviewed identified ways consumers cultural, spiritual and religious needs are respected and supported. Staff were observed to interact with consumers respectfully and could identify consumer’s individual preferences and histories.

Consumers and representatives report that they are confident the service protects the privacy and confidentiality of consumers’ information and they are satisfied with care and services. The service also demonstrated they support the protection of confidential information through the processes for sharing information on consumers conditions with staff and relevant health professionals and the secure storage of consumers care files.

Staff provided meaningful examples of how they help consumers make choices, including by giving consumers and representatives clear and accurate information. Staff also provide examples of how they help consumers to make choices and assist them in doing what they want to do, even if this involves an element of risk. Consumers and representatives interviewed confirm they feel well informed and supported to maintain their identity and live the life they choose

The service has recently used independent companies to conduct a consumer experience survey and a cultural safety audit to ensure that consumers are satisfied their care needs are met. The service has used the results of these surveys and audits to improve processes and practice.

#### 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 randomly sampled, 93% agreed they have a say in their daily activities always or most of the time, while 7% said they have a say in their daily activities some of the time. Consumers and representatives provided various examples of what this meant to them. Consumers overall reported they are a partner in ongoing assessment and care planning that supports them to get the care and services they need.

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

Consumers, representatives and staff described how care and services are reviewed regularly and when there is a change to the health or wellbeing status of the consumer. Interviews and documentation confirmed the organisation is responsive in their communication with consumers and their representatives’ when changes occur in the care and services the consumer is receiving.

Staff demonstrated an understanding of incidents occurring in the service and management demonstrated how incident analyses and subsequent learnings inform continuous improvement.

Management demonstrated assessment and planning processes to address consumer’s needs, goals and preferences relating to advance care and end of life planning if the consumer wishes.

#### 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 found the service has met the seven requirements under Standard 3.

Of consumers and representatives randomly sampled, 93% agreed always or most of the time that the consumer feels safe in the service and gets the personal and clinical care that is right for them. 7% of consumers and representative randomly sampled said the consumer feels safe in the service some of the time. Consumers and representatives provided various examples of what this meant for them.

Staff and management could describe the collaborative process used to tailor both clinical and personal care to the individual to optimise their health and wellbeing. Management demonstrated how information is shared both within the service and with others outside the service. Staff demonstrated a working understanding of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics. Management demonstrated their internal processes for identifying high prevalence risks and how these risks are monitored and reviewed on an ongoing basis.

Management demonstrated how they have recognised and responded to deterioration in a consumer’s mental health or physical function in a timely manner.

Care and service plans reviewed by the Assessment Team evidenced the delivery of safe and effective care, including end of life care, wound management, medication management and specialised nursing care. Management demonstrated how timely and appropriate referrals to other health services occur for consumers and how relevant correspondence is included in care plans.

Management demonstrated how various policies relating to clinical care are informed by industry best practice and accessible to staff.

#### 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 recommends that the organisation has met all seven requirements under Standard 4.

Consumers interviewed confirmed satisfaction with services and supports for daily living that meets their needs. 93% of consumers who participated in a consumer experience interview said they are encouraged to do as much as possible for themselves always or most of the time. Staff provide examples how consumers are encouraged to be active members of the community and how existing and new relationships are supported by the service. Consumers provided examples on how they feel their emotional and spiritual needs are met. 93% of consumers said they liked the meals always or most of the time. Management continue to consult with consumers to increase satisfaction with their dining experience.

The service demonstrates the process of providing information to health professionals when a consumer’s health needs change. Consumers and representatives are satisfied any changes in their condition are discussed with them and where needed, referrals to other health professionals occur in a timely manner.

Care and lifestyle staff adapt ways to support consumers to live the life they want and help support consumers with their individualised activity plans which involve group, solo and one to one activity. Staff were observed to engage in respectful interactions with consumers and identified consumers who required additional support.

The service monitors and reviews each requirement in this Standard through formal review of individual consumer’s care needs, feedback mechanisms and surveys.

#### 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:**

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 under Standard 5.

The service was observed to be welcoming and decorated with memorabilia depicting the history of the service. Consumers’ individual rooms were observed to be decorated with photographs and other personal items consumers have brought from home. The service environment is clean and well maintained. This includes external areas where gardens, paths and furnishings were observed to be clean and safe for use. Consumers were observed to move freely within the service with some using walking aids to support their independence. Appropriate furniture, fittings, signage, and clear internal corridors support consumers to move freely.

Consumers expressed satisfaction with how the service and staff maintain a safe, clean and comfortable environment that is welcoming and provides comfortable temperature control systems. Consumers have access to quiet sitting areas within and outside the service that allow family, friends and other visitors to maintain relationships in a comfortable environment.

The organisation has procedures to monitor and ensure the environment is safe, clean and well maintained. Key staff and a range of contracted services attend to the service’s corrective and preventative maintenance and fire and safety schedules. Cleaning systems ensure compliance with cleaning and infection control guidelines. Staff interviewed confirmed their understanding of these systems and confirmed consumers preferences are a priority.

Staff interviewed confirmed their understanding of how to report hazard and incidents. Management ensure monitoring and review of the service’s environment using audits, surveys and various feedback mechanisms. Management discuss information with staff and consumers through appropriate meetings.

**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 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 met all four of the requirements in relation to Standard 6.

All consumers and representatives interviewed said management and staff encourage feedback. 100% of consumers and representatives randomly sampled said staff follow up when things are raised, most of the time or always. Several consumers and representatives interviewed spoke about their satisfaction with management’s action and response to complaints they had made in the past.

The service demonstrated that it encourages and supports consumers and their representatives to provide feedback and make complaints. The service informs consumers about these processes and how they can access assistance to make a complaint using advocates and language services, if required. The service seeks feedback in many ways including through internal feedback forms, meetings and surveys. Consumers and their representatives are informed of how to make external complaints, if required.

The service has policies and procedures to guide staff on how to deal with complaints including an ‘open disclosure’ policy. The service has a system to record, track and manage feedback. Staff interviewed demonstrated an understanding of how to help consumers provide feedback. Feedback is reviewed and analysed to identify trends leading to improvements in care and services. Feedback received may initiate improvements to systems, equipment provision and consumer activity. These improvements are recorded on the services plan for continuous improvement.

**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:**

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 met all five requirements under Standard 7.

The high majority of consumers and representatives randomly sampled said they receive the care they need, staff are kind and caring and that staff know what they are doing, either always or most of the time.

The organisation continuously monitors and reviews their roster to reflect current and changing consumer care needs.

The organisation provides staff with orientation, induction and a preceptor program to introduce new staff to the service. The education program ensures staff complete mandatory training, provide support to all staff with additional specialised education. The organisation has recently implemented education regarding the new Aged Care Quality Standards for all staff to become aware of and to apply new learnings. During the site audit the Assessment Team observed various interactions between consumers, their representatives and staff that were respectful, kind and caring.

The organisation has recruitment processes to ensure quality and experienced staff have the qualifications, skills and knowledge to successfully complete their job. The organisation has a senior management team that oversees staff education and an education calendar is developed. The organisation has a process to support staff during performance appraisals and processes for performance management.

**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 is undertaken.

**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:**

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 met all five of the requirements in relation to Standard 8.

Consumers and representatives interviewed said management and staff encourage feedback and seek their opinion on care and services. Of consumers and representatives randomly sampled, all said they always feel safe and the majority said the home is well run, most of the time or always.

The organisation’s governing body is accountable for the delivery of safe and quality care and services. They engage and consult with consumes and their representatives in the delivery and evaluation for care and services.

The organisation’s governing body promotes a culture of safe and quality care and service through policy and procedures, staff education and day to day contact with the workforce. The governance and organisational process includes regular management reports that ensure that the governing body monitors financial performance. A risk management framework is in place and a risk register is reviewed by the governing body on a regular basis.

The governance framework includes the ongoing monitoring of continuous improvement, regulatory compliance, complaints, high-impact or high-prevalence risks, and abuse and neglect. The clinical governance framework includes antimicrobial stewardship, minimising the use of restraint and open disclosure.

**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 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) 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) 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.