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:** | Greenview |
| **RACS ID:** | 3982 |
| **Name of approved provider:** | Allity Pty Ltd |
| **Address details:**  | 33-37 Mitcham Road DONVALE VIC 3111 |
| **Date of site audit:** | 13 August 2019 to 14 August 2019 |

**Summary of decision**

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| **Decision made on:** | 18 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:** | 06 November 2019 to 06 November 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 Greenview (the Service) conducted from 13 August 2019 to 14 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:

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| **Type** | **Number** |
| --- | --- |
| Consumers | 16 |
| Representatives | 3 |
| General manager | 1 |
| Operations manager | 1 |
| Care managers | 2 |
| Registered nurses | 3 |
| Care staff | 6 |
| Lifestyle coordinator | 1 |
| Occupational therapist | 1 |
| Dietitian | 1 |
| Laundry staff | 1 |
| Catering staff | 4 |
| Cleaning staff | 1 |

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## 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 organisation meets all six requirements under Standard 1.

#### A majority of consumers and respective representatives interviewed confirmed staff treat consumers with respect and value their privacy. The Assessment Team observed the service to be culturally aware, safe and inclusive of individual consumers choices. This was also reflective in a sample review of consumer care files.

#### Staff were observed to engage with consumers in a kind and respectful manner. Staff could provide examples of how they treat consumers with dignity and respect while acknowledging individual cultural identities and diversity. Consumers described how the service allows for them to maintain local and broader community social connections and can keep and make new friendships. Key staff complete assessments that include consumer choice, way of life, dignity measures and social, cultural, spiritual and religious assessments to guide staff and support the consumer in care. The service reviews staff training needs to identify if further education is required ensuring delivery of appropriate care in all areas of consumer care delivery.

#### The organisation has a process to ensure consumers and interested stakeholders can provide comments, concerns and or complaints. There is an inclusive process to gather further feedback through consumer experience surveys, resident and relative meetings, audit results and informal observations of staff practices help support the standard of consumer dignity and choice.

#### All consumers and respective representatives said consumers are encouraged to do as much as possible for themselves most of the time and always. Staff and management interviews provided examples of how they help consumers to make their own choices and assist them to achieve an independent life as much as possible with a considered approach to risk taking activities.

#### Consumers report satisfaction with how staff and management of the service protects their privacy and confidentiality of information. The service illustrated how information is securely stored both electronically and in hard copy versions. Staff were able to confirm education in relation to privacy and confidentiality.

#### 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 organisation meets all of the five requirements under Standard 2.

All consumers and respective representatives interviewed confirmed consumers do have a say in their daily activities. Consumers and representatives explained they are partnered with skilled staff who conduct assessment and care planning processes about care and choices. Changes in consumer care is made with the consultation of the consumer and or their representative. Risks to each consumer’s health and wellbeing are identified and considered in the care planning process. Evidence of this was sighted in consumer care file review in various forms including choice general practitioner visits and choices of how consumers prefer their clinical, lifestyle, personal care tailored to them. Consumers and representatives expressed consumer goals and preferences are considered during initial and ongoing review processes and that consumers are referred to health care professionals where appropriate.

Staff gave examples of how they support consumer care by following directives outlined in individual consumer care plans as a means of guidance. The Assessment Team sighted evidence that consumer’s care and wellbeing is monitored and reviewed by the clinical and lifestyle team including general practitioners, allied health professionals and specialists who help with recommendations and support for the consumer. There is a regular care plan review and care consultation process which engages the consumer and or representative who both confirm this process occurs in their presence.

Care and service documentation reviewed by the Assessment Team demonstrated there is regular review of care involving the consumer and or their respective representative. Staff demonstrated an understanding of how to recognise and report adverse events and management describe ways of how this information is used to inform the service’s continuous improvement plan for better consumer outcomes.

#### 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 organisation meets all seven requirements under Standard 3.

Of consumers and respective representatives interviewed, all said consumers they feel safe here and that they get the care they need most of the times and always. Consumers said they are being consulted with on a routine basis regarding their care and personal needs, goals and preferences. Consumers and representatives expressed confidence in that staff know what to do to meet their personal and health care needs and if there is a change in consumer care needs. The Assessment Team were provided with examples from consumers and representatives as to how staff and management support consumer care.

The organisation demonstrated consumers who identify as high impact or high prevalence risks are assessed and managed in consultation with the consumer and or their representative.

Sample file review of consumer’s care and lifestyle plans revealed care is delivered in a safe, prompt and effective manner. When there are changes in consumers’ wellbeing and or health condition, these aspects of care were identified and actioned by internal service staff or engaged with general practitioners, specialist services and allied health professionals.

The service provides consumers with palliative care and end of life wishes and these are documented. However, the Assessment Team and management self-identified there is a necessity to improve knowledge, assessment and storage processes for palliative care and end of life plans. Management have arranged for education, improved assessment processes and plan a new retrieval system for palliative care information.

Staff demonstrated an understanding of infection prevention and control practices appropriate to their positions. The service is working to ensure antibiotic use is monitored appropriately. The service demonstrated processes used by the organisation to ensure care is best practice through ongoing education, performance appraisals, use of policies and procedures and access to external specialist services. Management demonstrated a plan for continuous improvement in relation to palliative care and end of life wishes during the site audit.

#### 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 organisation meets all seven requirements under Standard 4.

Consumers interviewed confirm satisfaction with the services and supports for daily living that are important to them. 100% of consumers and representatives who participated in the consumer experience report indicated consumers are encouraged to do as much as possible for themselves most of the time or always. Consumers are satisfied they are able to participate within their community, do things of interest to them and have social and personal relationships to optimise their independence, health, wellbeing and quality of life. 71% of consumers and representatives who participated in the consumer experience report like the meals most of the time or always. Management said they are engaging with consumers about food through consumer forums and the chef is available to meet with consumers.

Care plans are developed and include information about consumer goals and strategies for achieving them. Care and lifestyle staff said they are encouraged to adapt to ways consumers can be supported to live the life they want to. Staff demonstrated a good understanding of individual consumer needs and preferences and gave examples of how these are met. Staff provided examples of how they assist consumers optimise independence, health, wellbeing and quality of life. Examples include bus outings, art and cooking classes, mind games and word searches. The service has a process to review consumer needs on a six-monthly basis. Consumers interviewed are satisfied they can participate within their community, do the things of interest to them and have social and personal relationships.

Consumers said any changes in their condition is discussed with them and they are satisfied this information, along with any changes in their needs and preferences, is communicated within the organisation and with their representatives. Representatives of consumers said they are kept informed of any changes in the condition of their consumer living in the service.

The organisation monitors and reviews each requirement in this Standard using a regular individual review program, ‘resident’ of the day reviews, feedback mechanisms and survey results. The organisation demonstrated how this helps inform and drive improvements to the service.

#### 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 that the organisation meets all three requirements under Standard 5.

The service was observed to be welcoming with individual rooms decorated with memorabilia, photographs and other personal items, clean and well maintained. 100% of consumers and representatives who participated in the consumer experience report are satisfied they feel at home at the service. Consumers have access to or are helped to access courtyards with paved pathways and gardens. Doors to the courtyards were observed to be unlocked during the visit. Each wing has communal areas and a dining room within easy access of the consumer’s room. Consumer areas are appropriately furnished.

Building works are currently in progress at the service, the service is refurbishing independent living apartments into residential care rooms, the anticipated completion date is September 2019. All fire and evacuation diagrams reflect the changes. Consumers and representatives interviewed were aware of the building works.

100% of consumers randomly sampled as part of the consumer experience said they feel safe at the service most of the time or always.

A preventative and reactive maintenance program ensures a structured approach managing the living environment. Staff demonstrated an understanding of the service’s procedures to ensure a safe living environment. Management demonstrated that feedback and monitoring processes drive improvements.

#### 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 meets all four requirements under Standard 6.

The service demonstrated consumers knew how to give feedback and make complaints. 93% of consumers and representatives who participated in the consumer experience report, are satisfied that staff follow up when they raise things with them most of the time or always. Two consumers/representatives commented that communication when they first entered the service could have been better.

The service demonstrated that it encouraged consumers and their representatives to provide feedback and make complaints. Staff explained how they support consumers to provide feedback as required. Management demonstrated that appropriate action is taken in response to complaints and when things go wrong. The organisation’s complaints system incorporates ‘open disclosure’ processes. The service records comments, complaints and suggestions within an electronic system. Management documents issues and actions taken including feedback to the complainant. Items which require an improvement activity to occur to improve the quality of care and services are recorded on their plan for continuous improvement. The Assessment Team observed feedback forms and suggestion boxes on display throughout the home.

Management provided examples of where consumer feedback had initiated changes to care and service. The service also provided examples of how ongoing monitoring and review of its performance, relevant to Standard 6, initiated improvements to the complaint management process.

#### 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 meets all 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.

93% of consumers and representatives who participated in the consumer experience report, are satisfied that staff know what they are doing. 100% of consumers and representatives who participated in the consumer experience report indicated that they get the care they need, most of the time or always. Three consumers or their representatives discussed occasions when they felt the call bell response times were too long, one indicated that times have improved. Four consumers or their representatives discussed unfamiliar faces amongst staff and that they do not know them.

Management stated they continue to review rosters in relation to consumer needs, feedback and organisational requirements as new beds are filled. Recent recruitment has resulted in additional staff being appointed and commencing work at the service. In response to consumer suggestions a ‘photo board’ of new staff has been placed in communal areas to assist consumers and representatives to become familiar with new staff.

Staffing levels and skill mix are reviewed regularly and in response to changes in consumers’ needs. There are processes to address planned and unplanned leave. There is a registered nurse on site, each shift, seven days a week. The service demonstrated workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. Management with support from the organisational People and Culture team, monitors staff qualifications and ensures, through staff selection, planned education and training processes that the workforce is competent, and they have the knowledge and skills to effectively perform their roles. Staff are satisfied there is enough education opportunities and advised they complete mandatory education and accompanying competencies annually and additional training in response to an identified need.

The service demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identity, care and relationship needs and cultural and social significance. 100% of consumers and representatives who participated in the consumer experience report indicated that staff are kind and caring most of the time or always.

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

#### 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 meets all five requirements under Standard 8.

All consumer and representatives interviewed, including those who participated in the consumer experience report are satisfied the service is well run, most of the time or always.

The service demonstrated they involve consumers in the design, delivery and evaluation of care and services, providing numerous examples of how consumers are involved on a day to day basis. These include meetings, surveys, and shared decision-making processes. Consumers and representatives confirmed they are involved in care and service planning and delivery. For example, there are some consumers who are attending a new food forum and involved in menu planning.

The organisation has a range of executive teams which meet regularly, sets expectations for the service and regularly reviews risks from the organisational and consumer perspectives. Organisational wide governance systems support effective information management, continuous improvement, financial and workforce processes and regulatory compliance. There are established processes to identify, manage and report high impact or high prevalence risks, including identifying and responding to abuse and neglect of consumers. The clinical governance framework addresses anti-microbial stewardship, open disclosure and minimising the use of restraint with policies, procedures and staff practice supporting this framework. Clinical key indicators are collected and reported monthly; discussed locally at relevant meetings with reports provided directly to the relevant organisational team and Board level.

#### 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