Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Hixson Gardens Aged Care Facility |
| **RACS ID:** | 1018 |
| **Name of approved provider:** | Arete Health Care (Bankstown) Pty Ltd |
| **Address details:** | 1A Hixson Street BANKSTOWN NSW 2200 |
| **Date of site audit:** | 28 October 2019 to 31 October 2019 |

**Summary of decision**

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| **Decision made on:** | 05 December 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:** | 20 December 2019 to 20 December 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Not Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Not Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Met |
| Requirement 3(3)(e) | | Met |
| Requirement 3(3)(f) | | Met |
| Requirement 3(3)(g) | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Requirement 4(3)(a) | | Met |
| Requirement 4(3)(b) | | Met |
| Requirement 4(3)(c) | | Met |
| Requirement 4(3)(d) | | Met |
| Requirement 4(3)(e) | | Met |
| Requirement 4(3)(f) | | Met |
| Requirement 4(3)(g) | | Met |
| Standard 5 Organisation’s service environment | | Not Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Not Met |
| Requirement 5(3)(c) | | Met |
| Standard 6 Feedback and complaints | | Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Met |
| Requirement 6(3)(d) | | Met |
| Standard 7 Human resources | | Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Met |
| Requirement 8(3)(e) | | Met |
| **Timetable for making improvements:** | By 10 February 2020 | |
| **Revised plan for continuous improvement due:** | By 20 December 2019 | |

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

Site Audit Performance   
Assessment Report

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

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

## Introduction

**This is the report of an assessment of Hixson Gardens Aged Care Facility (the Service) conducted from 28 October 2019 to 31 October 2019.**

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

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

A Met rating for the Quality Standard means that all requirements of that Quality Standard have been assessed and rated as Met.

A Not Met rating for the Quality Standard means that one or more requirements of that Quality Standard has been assessed and one or more of those requirements have been rated as Not Met.

There will be no rating of the Quality Standard if only some of the requirements have been assessed and those requirements have been rated as Met.

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

## Assessment Details

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

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Consumers | 16 |
| Consumer representatives | 10 |
| Management | 3 |
| Clinical staff | 4 |
| Care staff | 8 |
| Hospitality and environmental services staff | 2 |
| Lifestyle staff | 3 |
| External contractors | 0 |
| Visiting service providers such as allied health professionals | 2 |
| Other | 0 |

## 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 recommend that three of the six requirements related to this Standard are met.

Consumer experience interviews show that 100% of consumers and/or representatives said staff treat them with respect always or most of the time. While 92% of consumers and/or representatives said they are encouraged to do as much as possible for themselves most of the time or always and provided the example of showering.

Other consumer feedback relating to his requirement included comments about lack of communication around goals, needs and preferences, staff not speaking English when they enter a room, and that staff do not always answer the call bell at night time leaving consumers to call out.

Several consumers stated they never have choice in the daily activities and some said they do not go to the dining room to watch Arabic television as this is not of interest and they do not enjoy the Arabic dialect used by other consumers. However all consumers were happy with activities and particularly the ability to attend Mass regularly.

The organisation was unable to provide the Assessment Team with a diversity policy and advised training and education on the new standards had not been completed by all staff. However, the Charter of Aged Care Rights had been provided to all consumers and most of these have been signed and returned to management.

The service provided examples of where potential risks have been identified for a consumer and the processes in place to manage this. Staff were observed to be respectful and kind in their interactions with consumers.

#### 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) 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:

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 recommend the organisation met all five of the requirements under this Standard.

The service has demonstrated the consumer’s needs, goals and preferences are considered in care planning and service delivery in order to optimise consumer outcomes.

Random sampling of consumers by the Assessment Team identified 92% all consumers said they have a say in their daily activities always, or most of the time. They said they can choose what activities they participate in, when to shower, where to relax, and how their services are delivered. Most consumers said staff support and encourage them to participate in their care and services by doing as much as possible for themselves.

Staff were able to articulate the service’s processes and approach to assessment and care planning and how these inform the delivery of care and services. They provided examples of how they worked together with consumers and their representatives to manage risks associated with consumers’ health and general welfare. Care planning and assessments are conducted by appropriately skilled staff and specialists. The service documents care plans and services delivered for each consumer.

Ninety two percent of consumers and/or representatives interviewed said they feel safe living at the organisation and their care and services are well planned to meet their needs.

#### 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:

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) 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:

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 recommend the organisation met all seven of the requirements under this Standard.

The organisation has demonstrated the service deliver consumer’s with 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 wellbeing. 92% of consumers randomly sampled said they get the care they need, and that staff are kind and caring. Consumers advised they have great confidence in the professional skills of the registered nurses and other staff. Consumers appeared well presented, for example hair combed, clean shaven, and wearing clean clothes. Consumers said they are getting care that reflects their individual needs. One consumer said they like to sleep in and have their breakfast and shower later in the morning.

Staff said they are kept updated with changes in consumers condition by the registered nurse, other staff or allied health professionals, and this is also documented in the care plans and progress notes. Staff gave examples of how they identify a deterioration of consumers’ health, these included: consumers who return from hospital, unexplained weight loss and decline in mobility. Clinical audits are regularly conducted to ensure management and staff are able to identify trends or variances in trends in relation to clinical care. Staff were also able to demonstrate effective management of high impact or high prevalence risks associated with care.

Care and services needs are identified and met by appropriately qualified staff, medical, allied health and other organisations to provide integrative care that optimises consumers health and wellbeing in consultation with the consumer and/or representatives.

#### 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:

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

##### **Standard 3 Requirement 3(b) 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) 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 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 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 met all seven of the requirements under this Standard.

The service has demonstrated that it supports consumers emotional, physical, spiritual and psychological wellbeing. This is achieved by understanding the needs and preferences of individual consumers and delivering appropriate care to meet consumer goals. Consumers and their representatives are asked to provide feedback to the service, formally and informally, to ensure that their needs are being met. The service has demonstrated it delivers services and supports for daily living in a safe and effective manner and in line with assessed needs, goals and preferences.

#### 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:

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 Not 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 has met two of three requirements in relation to this Standard.

Consumer experience interviews show that 92% of consumers said they feel at home in the service. Consumers reported the service is well maintained, clean and they have access to outdoors areas where they can spend time with their families or friends. However, some consumers on the second floor stated they do not have the lift access code and would like to go outside but there is no one to take them.

While the organisation has a proactive maintenance schedule in place observations by the Assessment Team identified chairs and lounges to be marked with urine and/or food. The outdoor courtyard did not have shade and the floor area was observed to be unclean.

The service was observed to be welcoming with individual rooms decorated with photographs and other personal items. Consumer’s bedrooms, bathrooms and other areas of the service were observed to be clean and well maintained.

#### 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) Not 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 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 organisation met all four requirements under this Standard.

The service has demonstrated it encourages and supports consumers and their families to provide feedback. The service uses this feedback to learn about ways by which improvements can be actioned to enhance consumers outcomes. The service has systems and process to manage and resolve complaints. The service uses information from incidents, meetings, external reviews and internal audits to initiate continuous improvements in the feedback and complaint management process. Consumers and their representatives endorsed the open and transparent manner in which the service managed complaints and the timely actions taken to resolve any complaints or implement improvements.

#### 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 all requirements of this Standard to be met.

Consumer experience interviews show that 100% of consumers said staff treat them with respect and are kind and caring always or most of the time. Consumers reported the staff always discuss their care with them. However, some consumers said staff don’t always come back when they say they will.

Of consumers and/or representatives interviewed 92% said they receive the care they need most of the time or always. Consumers said staff don’t always come back when they say they will, and the service could do with extra staff on the night shift. Otherwise consumers and/or representatives feel staff know what they are doing, explain or follow up on information for them.

The service has a roster in place which includes a registered nurse 24-hours, seven days a week. The service has access to a casual pool and does not use agency staff. Staff recruitment processes are comprehensive and minimum education competencies are confirmed. The service has a structured orientation program in place which includes buddy shifts.

The service has a regular training, education and performance appraisals for the workforce. Performance appraisals are completed annually and include a knowledge competency to complete each year. The workforce has access to position descriptions, and extra training and education if they choose.

#### 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 all five requirements of this Standard to be met.

All consumers and/or representatives interviewed through the consumer experience interviews said the service is well run most of the time or always. They did not provide any further information.

The organisation does not have a governing body in place however management and the general manager meet regularly to discuss the service and its performance. The general manager is confident should any issues be raised these will be communicated with him immediately through the management team. The service has a business plan in place which outlines achievements from the previous year. The organisations have systems to support regulatory compliance, clinical care, consumer feedback, antimicrobial stewardship and restraint minimisation.

The organisation demonstrates they engage consumers in the development and delivery of care and services. This includes addressing and working to fix any areas of concern directly with the consumer and/or representative or through the organisation continuous improvement approach.

#### 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.