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:** | Japara Capel Sands |
| **RACS ID:** | 3548 |
| **Name of approved provider:** | Japara Aged Care Services Pty Ltd |
| **Address details:**  | 8-16 Capel Avenue CAPEL SOUND VIC 3940 |
| **Date of site audit:** | 07 August 2019 to 09 August 2019 |

**Summary of decision**

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| **Decision made on:** | 09 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:** | 20 October 2019 to 20 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 Japara Capel Sands (the Service) conducted from 07 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** |
| --- | --- |
| Allied Health | 1 |
| Care staff | 4 |
| Clinical staff | 3 |
| Consumers | 13 |
| Hospitality and environmental services staff | 3 |
| Lifestyle staff | 2 |
| Maintenance officer | 1 |
| Management | 4 |
| Representatives | 3 |

## 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 that the service met all six requirements under standard one.

Consumer experience interviews show that 93% of consumers and representatives randomly interviewed agreed that staff treat them with respect all or most of the time. Of the consumers and representatives sampled 85% of consumers said they are encouraged to do as much as possible for themselves most of the time or always.

The organisation uses feedback, surveys and consumer meetings to confirm that consumers are satisfied that staff treat them with respect and help them maintain their identity and live the life they choose.

The organisation demonstrated that consumers are treated with dignity and respect. Staff were observed to interact with consumers in a way that promoted dignity and respect. Staff are provided with training opportunities in relation to privacy and dignity and training incorporates customer service.

Staff could provide meaningful examples of how they help consumers make choices and identified through the performance assessment ways to improve their engagement with consumers. Staff were able to identify consumers who wish to undertake risk activities and ways they monitor and review this.

The privacy and confidentiality of consumer information is maintained, and consumers are satisfied that their privacy is maintained. Staff were able to describe ways they maintain privacy during care delivery and how they make consumers feel respected and comfortable.

#### 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 that all requirements under standard two were met.

Consumer experience interviews show that 100% of consumers and representative randomly interviewed are satisfied with the care provided all or most of the time. Consumers reported feeling safe and confident that staff listen to their goals and preferences, and that the service gets input from other professionals to get the right care and services to meet their needs.

Staff could describe how consumers and others who contribute to the consumers care (including health professionals) work together to deliver care and service plan and monitor and review the plan as needed.

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

#### 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:

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

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

Each of the care profiles reviewed by the Assessment Team evidenced the delivery of safe and effective care, including end of life care and evidenced individual goals and preferences of consumers who needs were specific.

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

#### Requirements:

##### Standard 3 Requirement 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 service has met the seven requirements under Standard 4.

Of consumers and representatives randomly interviewed, 64% said they like the food here most of the time or always. Consumers reported overall services and supports for daily living are safe and effective and meals provided are of suitable quality and quantity.

Staff could outline individual interventions used to support consumers in relation to spiritual and emotional wellbeing. This included knowing representatives and engaging consumers in activities of interest to them inside and outside the service. Staff could outline dietary needs of consumers and what they do if a consumer does not like the meal. Staff confirmed they have sufficient equipment available for use. Management demonstrated responsiveness to feedback by scheduling a food focus group meeting.

The service demonstrated that it makes timely referrals to other organisations and provides safe, suitable and well maintained equipment and that staff are appropriately trained to use the equipment.

#### 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 the service has met the 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.

The layout of the service enables consumers to move around freely within and outdoor courtyards. There is suitable furniture, fittings and handrails to help consumers ambulate in the service. Consumers have access to courtyards with paved pathways and outdoor furniture.

The Assessment Team observed that the service was well maintained and kept at a comfortable temperature and provided a range of equipment and furnishings for consumers to use.

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 organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints, have information to access to advocates and methods for resolving complaints, have appropriate action taken in response to their complaints and that complaints are reviewed and used to improve services.

Consumer experience interviews show 100% of consumers are satisfied staff follow up when they raise things with them. Consumers interviewed were aware of ways to raise a complaint.

Information about internal and external feedback processes is provided to all consumers and representatives. Brochures and information relating to feedback mechanisms is displayed and available to consumers. There are secure feedback boxes located throughout the service. Feedback, complaints and compliments are an agenda item for the resident and relative/representative meetings. The organisation has developed an open disclosure framework.

Management advised they analyse feedback information for trends, discuss at meetings and identify improvements which are documented on the continuous improvement plan. The quality team review and monitor all feedback received and reports are provided to the quality, compliance and risk committee. Management also monitor the effectiveness of their response to complaints through consumer surveys; the recent survey indicating high levels of satisfaction with the management of complaints.

#### 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 has met 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.

Consumers provided positive feedback about the workforce. Consumer experience interviews showed that 86% of consumers agreed that staff know what they are doing most of the time or always; that 100% of consumers agreed staff are kind and caring; and, that 100% of consumers agreed they get the care they need.

The service demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identify, culture and diversity. Interactions between consumers, representatives and staff were observed to be kind, caring and respectful.

The service demonstrated the workforce is recruited to specific roles, trained and equipped to undertake these roles and support to deliver outcomes for consumers. New staff are provided induction, orientation processes and buddy shifts.

The service demonstrated they monitor staff qualifications and ensure through staff selection and education and training processes that the workforce is competent, and they have the knowledge and skills to effectively perform their roles.

The organisation demonstrates understanding of ongoing assessment, monitoring and review of the performance of each member of the workforce.

#### 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 the service has met the fire requirements under Standard 8.

Of consumers and representatives randomly interviewed 85% said this place is well run most of the time or always.

The service demonstrated that they involve consumers (who wishes to be involved) in the design, delivery and evaluation of care and services, providing examples of how consumers are involved in the design of services and are engaged on a day to day basis. These include resident of the day process, meetings, surveys and feedback mechanisms.

The governing body meets regularly, sets expectations for the service and regularly reviews risks from the organisational and consumer perspective. Organisational wide governance systems support effective information management, the workforce, compliance with regulation and clinical care.

The service has a continuous improvement program which drives the quality system and involves all stakeholders.

The clinical governance framework addresses anti-microbial stewardship, open disclosure and minimising the use of restraint. Staff interviewed understood these concepts and could explain how they were applied in practice.

#### 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