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:** | Johnson-Goodwin Memorial Homes |
| **RACS ID:** | 3292 |
| **Name of approved provider:** | Johnson-Goodwin Memorial Homes |
| **Address details:**  | 22 Camp Street DONALD VIC 3480 |
| **Date of site audit:** | 20 August 2019 to 21 August 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 24 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:** | 01 November 2019 to 01 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 Johnson-Goodwin Memorial Homes (the Service) conducted from 20 August 2019 to 21 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 | 3 |
| Accounts / Payroll staff | 1 |
| Administration officer | 1 |
| Care Manager | 1 |
| Care staff | 4 |
| Catering staff | 2 |
| Cleaning staff | 1 |
| Executive officer | 1 |
| Lifestyle staff | 1 |
| Occupational therapist | 1 |
| Quality manager | 1 |
| Registered nurse | 2 |

## 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 organisation has met all six requirements under Standard 1.

Consumer experience interviews show that 100% of consumers and representatives said they are treated with respect, encouraged to do as much as possible for themselves and that staff explain things to them most of the time or always.

The service demonstrated consumers are treated with dignity and respect and they actively promote a culture of diversity and inclusion. Consumers are encouraged to exercise their choice and to be as independent as possible in the life they choose to live. The service offers a variety of activities to reflect consumers’ preferences. The service encourages feedback and conducts surveys to monitor consumers’ satisfaction.

Staff were observed to interact with consumers respectfully and could readily identify consumer’s individual goals, preferences and interests. The service provides staff training to ensure they are equipped to deliver personalised and culturally appropriate care. Staff demonstrated knowledge and provided practical examples of how they respect consumers privacy

Consumers and representatives are satisfied that the service promotes and protects privacy and confidentiality of information. The service demonstrated how information is stored and kept secure and confidential. The service promotes the value of privacy and dignity through staff training and performance management monitoring.

#### 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:

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:

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 has met all five requirements under Standard 2.

Consumer experience interviews show that 100% of consumers and representatives said they have a say in their daily activities most of the time or always. Consumers and representatives said in various ways they are satisfied care is planned and delivered effectively.

The service demonstrated assessment and planning is completed in consultation with the consumer and others the consumer wishes to have involved. Consumers said their care is well planned, they are consulted, and their needs are met and aligned with their preferences and what is important to them. Consumers and representatives confirmed the service communicates with them promptly if there is a change in the consumer’s health status.

Consideration of risks to the consumer’s health and well-being informs the delivery of care and services. Review of care plans and risk assessments showed risk management strategies are documented in the progress notes or on a risk assessment but not all risks are formally assessed and included in the risk care plan domain and some risks have inconsistent information. Staff could describe risk management strategies for individual consumers.

Staff said they engage with other providers to assist in the delivery of care. They described how they use care plan information to deliver safe and effective care and services, including end of life care planning if this is something consumers wish to discuss.

Care documentation reviewed by The Assessment Team demonstrated regular review and updating in consultation with the consumer and/or their nominated representative. Staff showed an understanding of how to identify and report adverse incidents or hazards and management demonstrated how the information is used 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:

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:

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 has met all seven requirements under Standard 3.

Consumer experience interviews show that 100% of consumers and representatives said they felt safe and get the care they need most of the time or always. Consumers and representatives said in various ways they are confident consumers are receiving care that is safe and right for them.

The service demonstrated they provide and understand how to deliver safe and effective personal and clinical care and services. Consumers and representatives gave examples of individualised care and services that optimise consumers’ health and well-being. Management and staff described how they apply their knowledge and practices to ensure personal and clinical care and services meet consumers’ needs and preferences and optimises their health and well-being.

Each consumer’s care plan reviewed demonstrated care is delivered safely and effectively. Changes in consumers’ condition were identified and communicated to appropriate parties including representatives, medical practitioners, specialist services and allied health professionals. The service demonstrated that risks associated with individual consumers are identified, assessed and managed in consultation with the consumer or their representative.

Staff demonstrated an understanding of infection prevention and control practices appropriate to their positions and the service is working with medical officers to ensure antibiotic use is monitored and appropriate. Processes used by the service to ensure care is best practice include policies, procedures and best practice guidelines.

#### 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 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:

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:

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 has met all seven requirements under Standard 4.

Consumer experience interviews show that 100% of consumers and representatives said they are encouraged to do as much as possible for themselves most of the time or always and 83% agreed they liked the food most of the time or always. One consumer said they only like the food some of the time and one consumer said they never like the food. A small number of consumers expressed some dissatisfaction with some aspects the meals offered by the service saying they would like more choice and an improvement in the temperature of the meals served. Management said they would review consumer dining experience to ensure they are meeting the needs of all consumers living at the service.

Consumers and representatives interviewed expressed satisfaction with the services they receive and the range of activities available to them. Consumers and representatives said in various ways they are confident consumers are receiving care that is safe and right for them.

Policies and procedures provide guidance and support for staff to ensure consumer needs goals and preferences for daily living are provided. Care plans detail information regarding consumers’ needs and preferences and strategies to ensure these are met. Local religious groups conduct church services and staff facilitate visits from other spiritual advisors according to consumer wishes. The service provides emotional, psychological and spiritual well-being through assessment and referral to professionals with the relevant expertise to provide guidance and assistance

The service demonstrated it seeks consumer input regarding all aspects of the service. Maintenance systems ensure equipment and furniture are safe, suitable, clean and well maintained. Records reflect incidents are recorded, investigated, actioned and evaluated.

#### 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 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 organisation has met all three requirements under Standard 5.

Consumer experience interviews show that 100% of consumers and representatives said they feel at home here most of the time or always. Consumers and representatives provided feedback in various ways about the service environment being welcoming, clean and well maintained and outlined they can access outdoors areas.

The service environment was observed to be clean, tidy and well maintained. Staff could describe maintenance processes and how they report any issues they identify. Cleaning staff were observed to be carrying out their duties within the service.

Management outlined processes to monitor the service environment and the maintenance processes. The service has recently had an environmental audit completed by Dementia Services Australia to identify areas to improve the environment for people living with dementia. Management are waiting for the report to commence undertaking improvement initiatives.

#### 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:

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 the organisation has met all four requirements under Standard 6.

Consumer experience interviews show that 100% of consumers and representatives said staff follow up on things most of the time or always. Consumers and representatives provided feedback in various ways how they can raise complaints. Two consumers provided feedback about successful resolution of a complaint and three said while they have not needed to raise a complaint were confident it would be followed up. One consumer spoke about a current complaint they have raised and were happy with the progress of the management of the complaint so far.

The organisation demonstrated that it seeks feedback from consumers and representatives via a number of mechanisms including feedback forms, consumer meetings, surveys and a new initiative of ‘Morning tea with the CEO’. Staff described in various ways how they could address a complaint made by consumers including fixing the issue themselves, reporting the issue to management or obtaining a feedback form for the consumer to complete.

Management demonstrated an open disclosure approach to the management of incidents and is embedding this in their feedback and complaints management processes. Interpreters and advocacy groups can be accessed to support consumers if required.

Management demonstrated how feedback from consumers and representatives has been used to improve and enhance care and services within the organisation and how these systems link to continuous improvement opportunities.

#### 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 the organisation has met all five requirements under Standard 7.

Consumer experience interviews show that 100% of consumers and representatives said they get the care they need, and staff are kind and caring most of the time or always. Consumers and representatives provided feedback in various ways regarding their satisfaction with staffing levels and staff responsiveness. Of consumers and representatives randomly interviewed 92% said they think staff know what they are doing most of the time or always, one consumer or representative said some of the time and said staff do not always look around at what is going on but did not provide further information.

Management demonstrated how the workforce is planned and monitored. Staff confirmed in various ways they have enough staff to ensure they provide safe and quality care and services. Staff provided feedback about increases to staffing that occurred earlier in the year in response to feedback from staff.

Education is provided across a range of areas to ensure staff are provided with knowledge on various topics, including a number of mandatory topics. The service arranges and provides education in various formats including face to face, via online learning and offsite at training sessions. Staff interviewed and observed demonstrated knowledge and skills relating to consumers’ care needs and requirements and outlined where they could access information if they were unsure.

A recruitment process is in place to ensure the recruitment of appropriately qualified staff to the service. Orientation and buddy shifts are provided to new staff to help them settle into the service and learn their role.

The organisation demonstrated that it monitors the performance of staff members. Supervisors are encouraged to provide feedback to management in relation to individual performance. Where concerns are identified a performance management process is implemented. Staff said in various ways they feel confident to raise concerns about their colleagues if required and that management would listen and respond.

#### 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 organisation has met all five requirements under Standard 8.

Consumer experience interviews show that 92% of consumers and representatives said the the place is well run most of the time or always with one consumer answering some of the time due to concerns they have with the kitchen. Consumers and representatives provided feedback in various ways they are involved in the development, delivery and evaluation of care and services.

The service has a continuous improvement plan that is developed from a range of sources including feedback forms, meeting minutes, audits and observations. Information is provided to consumers through a range of formats including newsletters and emails. Consumer information from meetings, surveys, incidents and complaints is reported to the board for monitoring.

The governing body meets regularly and review risk from an organisational and consumer perspective. There are organisation wide governance systems to support effective information management, the workforce and compliance with regulation to ensure safe and effective care delivery is maintained. Management has identified they need to strengthen their clinical governance processes and said a clinical governance committee is being established as a sub-committee to the board. Management is currently working through completion of the ‘Clinical governance in aged care’ toolkit produced by the Quality and Safety Commission.

#### 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:

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 that 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