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:** | Juniper Numbala Nunga |
| **RACS ID:** | 7426 |
| **Name of approved provider:** | Uniting Church Homes |
| **Address details:** | 37 Sutherland Street DERBY WA 6728 |
| **Date of site audit:** | 12 November 2019 to 14 November 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 13 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:** | 18 February 2020 to 18 February 2023 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | 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 | | Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | 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 |

**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 Juniper Numbala Nunga (the Service) conducted from 12 November 2019 to 14 November 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** |
| --- | --- |
| Care staff | 5 |
| Clinical care coordinator | 1 |
| Consumers | 13 |
| Registered nurse | 1 |
| Representatives | 3 |
| Residential manager | 1 |
| Therapy assistant | 1 |
| Volunteer | 1 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

#### Organisation statement:

2. The organisation:

(a) has a culture of inclusion and respect for consumers; and

(b) supports consumers to exercise choice and independence; and

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found the organisation demonstrated that all six requirements in relation to Standard 1 were met.

The organisation demonstrated consumers are treated with dignity and respect, with their culture, identity and diversity valued. 100% of consumers interviewed reported they do as much as possible themselves and staff explain things to them. Consumers reported they like having Aboriginal workers and they are supported to maintain family connections within and outside the service. Consumers are supported to take risks to enable them to live the best life they can with protocols in place to minimise risk. Information is communicated clearly to consumers or representatives of their choice, and consumers are supported by alternate decision makers when this is appropriate. Family and friends were observed to spend time at the service and staff demonstrated they understand and respect consumers cultural values.

#### 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 demonstrated that all five requirements in relation to Standard 2 were met.

Consumers assessment and planning is conducted by registered and allied health staff and a care plan is developed to optimise consumers health and well-being. Registered and allied health staff undertake initial and ongoing assessment and planning of care. Risks to the consumers’ health are identified and care is planned to deliver consumers safe and effective care and services. Consumers are reviewed regularly by the Derby Aboriginal Health Service and consumers are referred to other health services including dieticians, speech pathologists and geriatricians for additional care as required. Reassessment is conducted as required and consumers’ plans of care are updated accordingly. The service supports and encourages consumers and representatives to make decisions regarding consumers’ end of life planning. Special needs and preferences related to consumers end of life is documented for staff to follow. Consumers reported they can talk to staff about what they want each day and representatives said they are involved in consumers’ care. Registered staff reported they have adequate training and equipment to provide end of life care. Care staff said they have access to consumers’ care plans to guide the consumers care and have additional information about the daily care of consumers at the commencement of each shift.

#### 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 demonstrated that all seven requirements in relation to Standard 3 were met.

The organisation demonstrated each consumer gets safe and effective personal and clinical care that is tailored to their needs, optimises their health and well-being and is best practice. The service plans of care for consumers based on assessment undertaken by registered nurses. Consumers at risk of clinical issues that have high impact on their health and well-being have strategies to minimise risk of clinical issues such as pain or pressure injuries. Systems are in place to monitor consumers health including falls, weight and medication. Consumers are supported to discuss their needs and preferences relating to the end of life and information regarding end of life is documented for staff to access. Consumers with deterioration health status are monitored by staff and the Derby Aboriginal Regional Health and their clinical needs are actioned. Consumers are referred to other clinical services to undertake additional health care. Consumers reported the staff are kind and caring and their health is looked after. The service monitors infections and have appropriate policies and procedures regarding infection control. Staff reported they have training in infection control and hand hygiene and have adequate personal protective equipment to access as required.

#### 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 demonstrated that all seven requirements in relation to Standard 4 were met.

The organisation demonstrated consumers are provided with safe and effective services to optimise their independence, health and well-being. 100% of consumers randomly sampled said they are encouraged to do as much as possible for themselves most of the time or always. Consumers are supported and assisted to maintain their emotional and spiritual well-being and are supported to attend religious services within the service or in the wider community. Consumers are supported to have social relationships within and outside the community and calendars show regular bus trips into town are scheduled. Staff reported the regular bus trips into town assist consumers maintain relationships within the town and undertake activities of interest to them. 86% of consumers randomly sampled said they like the food most of the time or always. Consumers reported they like kangaroo tail and the menu has culturally appropriate meals including kangaroo tail, kangaroo stew and damper. The service monitors equipment to ensure it is safe, suitable and well maintained to provide safe care.

#### 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 organisation met all three requirements under this Standard.

The service environment was observed to be clean, welcoming and well maintained. Consumers have an individual room and bathroom or share with other consumers. Living areas are furnished with a variety of seating and other furniture, and has Aboriginal art posted throughout the service. Staff interviewed confirmed their understanding of risk and described how consumers safety is monitored and maintained. The service enables consumers to move freely around the service with access to outdoor areas. Management reported the refurbishment of the service includes the outdoor area to improve consumers’ connection to country. There are processes to maintain the environment to ensure fixtures and fittings are safe, comfortable and fit for use.

#### 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 the service demonstrated it meets all four requirements under this Standard.

The service demonstrated, and consumers interviewed confirmed they knew how to provide feedback and make complaints, and they felt safe and comfortable in doing so. Consumers have access to advocates and language services and other methods for raising and resolving complaints.

Of consumers were randomly sampled 92% said staff will follow up with things raised with them most of the time or always. One consumer said staff follow up with things some of the time as they were awaiting a transfer to another facility and felt that staff talked about it but they were not being moved as yet.

The service demonstrated that they take appropriate action in response to a complaint and the open disclosure process is used when something goes wrong. Consumers can lodge feedback and complaints anonymously. Staff displayed an understanding of the complaints and feedback process and said they were happy to assist consumers who needed assistance to provide feedback or make a complaint. Complaints and feedback are logged and reviewed for trends and outcomes are used to improve the quality of care across the service.

#### 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 service demonstrated it meets all five requirements under this Standard.

Of consumers randomly sampled 92% said that staff know what they are doing always or most of the time. 8% said they know what staff are doing some of the time. The consumer said this was because some of them don’t always know, they are the new staff and the ones who have been here for a while are good.

Consumers interviewed are satisfied there were sufficient skilled staff to meet their needs. They described staff as kind and care and they provide care in a way suited to them. The organisation demonstrated the interactions between staff and consumers are kind caring and respectful of each consumers identity, culture and diversity. Consumers said staff were kind caring and respectful and respected them.

The organisation demonstrated number and mix of staff are planned to support safe and quality care and services. Vacant shifts are filled, and recruitment is completed should vacancies arise. Consideration is given to the vary staff levels required due to seasonal influences in the area. Staff are satisfied there are sufficient staff to deliver quality care and services.

The service is able to demonstrate that its workforce is competent, and they have the qualifications and knowledge to effectively perform their roles. Consumers say staff have the knowledge to deliver quality care and services and were very complimentary of the staff overall. Staff were satisfied they received enough training to effectively complete their duties. New staff are provided with orientation, support, training and mentoring by experienced staff.

The service was able to demonstrate regular assessment and monitoring of the workforce. Police checks, mandatory training and all essential requirements for staff are up to date and monitored for currency.

Performance appraisals are monitored to ensure they are completed when required and they encourage staff to undertake additional training. Staff said they received a performance appraisal on an annual basis and records show they were all current.

#### 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 demonstrated it meets all five requirements under this Standard.

The service demonstrated they involve consumers in the design, delivery and evaluation of services. Consumers confirmed they are involved in the process and provided examples of how this takes place. The service respects the rights of consumers to take risks and they work with consumers to enable them to live the best life they can.

Of consumers randomly interviewed 92% said the place was well run most of the time or always. One consumer said it was like being in gaol. The assessment Team spoke with management about this who explained that the guardian did not previously let the consumer out of the service. The Assessment Team reviewed the documentation which showed they liaised with the guardian, put safeguards in place and they were now allowed outside of the service.

There are organisational wide systems that support effective information management, workforce, compliance with regulation and clinical care. The policies and procedures provided are universal across the organisation and are updated regularly to reflect current legislation and best management practices.

The clinical governance framework includes the minimisation of restraint. The service practises open disclosure and supports staff to understand and apply the 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.