Accreditation Decision

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

**Service and approved provider details**

|  |  |
| --- | --- |
| **Name of service:** | Karingal Nursing Home |
| **RACS ID:** | 5442 |
| **Name of approved provider:** | Queensland Health |
| **Address details:**  | Hospital Road DALBY QLD 4405 |
| **Date of site audit:** | 01 October 2019 to 03 October 2019 |

**Summary of decision**

|  |  |
| --- | --- |
| **Decision made on:** | 04 November 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:** | 05 December 2019 to 05 December 2022 |
| **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.**

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 Karingal Nursing Home (the Service) conducted from 01 October 2019 to 03 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 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 Quality 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  | 19 |
| Consumer representatives  | 11 |
| Management | 12 |
| Clinical staff | 9 |
| Care staff | 9 |
| Hospitality and environmental services staff | 5 |
| Lifestyle staff | 3 |
| Visiting service providers such as allied health professionals | 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:

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 found that the service met the six requirements under Standard 1.

The service demonstrated consumers’ personal information is kept confidential. We observed staff being respectful with consumer interaction, demonstrating each consumer’s privacy and dignity was being observed through staff entering consumer rooms, knocking or waiting for permission to enter and addressing them with names of the consumers’ choosing.

The service demonstrated staff treat consumers with dignity and respect, as evidenced by consumer feedback about staff interactions with them. Our observations of staff engagement with consumers identified examples of respectful practices such as ensuring call bells are left within reach and respecting consumer choices.

Consumers confirmed they are able to exercise choice and are encouraged to be independent. Consumers reported they are able to make decisions about their lifestyle even when it involves risk. Staff could discuss various ways they support consumers to make choices by providing them with information to inform their choices.

#### 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 Not 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 found that four of five requirements in relation to Standard 2 were met.

The majority of consumers and representatives are satisfied the service was meeting their healthcare needs. Consumers confirmed they are involved in the assessment process and care planning ensures they receive the care and services they need. Consumers reported feeling safe, confirmed they are consulted about their preferences and that they are referred to other professionals to get the care and services they need.

Consumers confirmed discussions regarding end of life planning are part of the care planning process. Documentation including advanced health directives and end of life plans are available in consumer files.

Consumers reported their care and services are regularly reviewed in consultation with their representative.

The service discusses the care and services plan with the consumer on a regular basis and updates the information in care and service plans.

The service could not consistently demonstrate processes and activities which reflect the intent of this requirement and did not demonstrate monitoring and review of the risks associated with the use of chains on consumer doors and consumers who choose to smoke.

#### Requirements:

Standard 2 Requirement 3(a) Not 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 Not 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 found that six of seven requirements in relation to Standard 3 were met.

Consumers reported the service generally meets their healthcare needs and gave various examples of how staff provide care that is right for them. This included regularly asking them about their care and by referring them to other providers when required including podiatry, physiotherapists, occupational therapists and dieticians.

Staff could describe the care they provide to individual consumers and demonstrated an understanding of the needs of consumers nearing the end of their life. Staff confirmed they are provided with training and demonstrated an understanding of infection control practices.

The service demonstrates information is shared within the service and with others outside the service and there are organisational policies and procedures that underpin the delivery of care, which are known by clinical staff.

The Assessment Team was not satisfied the service’s practices were meeting their legislative obligation to minimise restrictive practices.

#### 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) Not 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 that the service met seven of the seven requirements in relation to Standard 4.

Consumers interviewed said they were satisfied with the service’s support in relation to daily living that are important to their health and wellbeing.

Consumers confirmed the service provides leisure interests, emotional and psychological support that mostly meets their needs. Staff demonstrated how consumers are supported to do things of interest to them consumers who prefer individual to group activities. Consumers confirmed they interact in the broader community by participating in outings to places of interest. Consumers confirmed the service supports them to create or maintain friendships and relationships that enhance their quality of life.

The service could demonstrate how it supports consumers to connect with other supports and people outside the service. Consumers expressed satisfaction with the how they are supported and enabled to live their daily life as they choose including having their emotional and spiritual needs and preferences respected. The service could demonstrate how information regarding consumers’ needs and preferences is communicated in a timely and appropriate manner.

Staff could provide examples of how information about consumers is collected and shared, where relevant.

The service demonstrated consumers are supported by equipment, which is safe, suitable, clean and well maintained by staff at the service or external contractors. Management could demonstrate the services and support for daily living provided at the service are monitored, reviewed and any improvements are made, where needed.

#### 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 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 that the service met three of the three requirements in relation to Standard 5.

The service was observed to be welcoming with individual rooms decorated with photographs, memorabilia and personal items. The service was clean and well maintained, and consumers confirmed their rooms were cleaned to their satisfaction. The layout of the service enabled consumers, representatives and visitors to access all areas of the service, with suitable furniture, fittings and signage to help consumers navigate the service. Consumers had ready access to clean outdoor areas with gardens, outdoor furniture, and paths that enabled free movement around the area. Consumer were encouraged to use all areas of the service including an activities area where social gatherings, exercise sessions and craft classes are held.

Staff interviewed confirmed their understanding of the reporting hazards and the maintenance process. Management confirmed maintenance and the service environment are a standing agenda items for meetings with the organisation’s management staff where any emerging risk or continuous improvements are discussed.

#### 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:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

#### Summary of Assessment of Standard 6:

The Assessment Team found that the service met four of the four requirements in relation to Standard 6.

Consumers and representatives report they are aware of feedback and complaints avenues available to them and they feel comfortable to access them if needed. Consumers advised that when they have provided feedback, they are satisfied with the actions implemented in response to that feedback. Consumers/representatives also reported the service responded to their complaints in accordance with the principles of open disclosure.

Staff demonstrated knowledge of how to assist or enable consumers and representatives to access feedback processes and advocacy services as needed.

The service provided a log of compliments and complaints and demonstrated how these feed into the plan for continuous improvement.

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

Consumer experience interviews show consumers agreed that staff know what they are doing and that they get quality care and services. The service uses consumer surveys, audits, consumer and representative feedback and meetings to ensure consumers are satisfied that staff are well trained and there are enough experienced staff to enable them to provide safe and quality care.

Staff possess the required skills and qualifications the service needs to meet the consumers’ needs and deliver safe and quality care and services.

Consumer experience interviews show 100% of consumers agreed that staff treat them with respect and observations of the delivery of care and services confirms that the workforce treat consumers with kindness and staff care about them.

The service provides regular ongoing training to staff.

Management demonstrated how they are actively involved in staff culture and foster an environment of respect. Management could demonstrate staff are recruited, inducted, trained, equipped and supported to ensure consumers are made to feel respected, consistent with documented policies and procedures.

#### 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 Not 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 the service met three of the five requirements in relation to Standard 8.

The organisation demonstrated consumers are engaged in the development, delivery and evaluation of care and services. Consumers said their feedback and input to service delivery is sought by staff and management. Documentation to support this include minutes of meetings, feedback forms and resident agreements.

Staff were observed using appropriate and respectful terms to address consumers. Staff said they know how to raise issues with management for themselves, on behalf of consumers and representatives. The Assessment Team observed posters in the staff room supporting a culture of safety and the delivery of quality care and services.

The organisation demonstrated they have organisation wide governance systems in relation to continuous improvement, financial governance, regulatory compliance and feedback and complaints.

The organisation has risk management systems and practices to identify consumers at risk such as falls assessments, restraint authorisations and smoking assessments. The Assessment Team noted restraints are not clinically assessed or reassessed. Appropriate risk assessments have not been undertaken for consumer smoking or the use of chains across consumer doorways.

Staff said they have sufficient information to undertake their duties safely and are aware of their responsibilities in relation to incident reporting.

The organisation demonstrated they have a clinical governance framework in relation to antimicrobial stewardship and application of open disclosure, however, they failed to demonstrate an understanding, application, monitoring and review of minimising the use of restraints.

#### 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) Not 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) Not 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) Not 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.