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:** | Marina Residential Aged Care Service |
| **RACS ID:** | 3545 |
| **Name of approved provider:** | Jimroy Pty Ltd |
| **Address details:**  | 385 Blackshaws Road ALTONA NORTH VIC 3025 |
| **Date of site audit:** | 06 August 2019 to 08 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:** | 25 October 2019 to 25 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 Marina Residential Aged Care Service (the Service) conducted from 06 August 2019 to 07 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 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 | 18 |
| Representatives  | 4 |
| Management | 7 |
| Clinical staff | 8 |
| Care staff | 3 |
| Hospitality and environmental services staff | 5 |
| Lifestyle staff | 2 |
| External contractors | 3 |
| Visiting service providers such as allied health professionals | 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:

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 organisation has met all six requirements under Standard 1.

Consumer experience interviews show that 100% of consumers agree that staff treat them with respect all or most of the time. The organisation’s values include respect and valuing diversity, which is reinforced through staff reward and recognition programs. Management and senior staff model appropriate behaviour and take action when they become aware of any staff conduct that does not meet the organisation’s requirements.

The service demonstrated consumers are treated with dignity and respect and that the service actively promotes a culture of inclusion. Staff were observed to interact with consumers respectfully and could readily identify consumers’ individual preferences, interests and details of their life histories. The service promotes and values individual consumers’ culture and diversity with assessment processes that identify how consumers wish to live these aspects of their lives. The service offers a wellbeing program to reflect the diverse backgrounds and preferences of consumers. Staff described how the delivery of care is tailored to the consumer.

Consumers and representatives interviewed confirmed that they feel safe, respected and have a choice in their daily activities. Staff provided meaningful examples of how they help consumers to make choices and assist them in doing what they want to do, even if this involves an element of risk. Consumers described the ways their social connections are supported and how friendships have developed within the service.

Information about the service is provided to consumers through an initial information pack, a handbook, meetings, newsletters, case conferences and individual interactions. The majority consumers confirmed they are able to understand the service’s communications and they can make choices based on the information provided.

Consumers are satisfied that the service promotes and protects their privacy and confidentiality of information. The service demonstrated how information stored both electronically and in hard copy is kept secure and confidential and how confidential discussions are held privately.

#### 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:

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 the organisation has met all five requirements under Standard 2.

Of consumers sampled, 94% agreed that staff meet their care needs always or most of the time. Consumers described their direct engagement in the initial and ongoing assessment and planning of their care assists them to get the care and services they need. 100% of consumers reported feeling safe and confident that staff listen to their needs and preferences, and that the organisation gets input from other professionals to ensure consumers get the right care and services to meet their needs.

Staff could describe how consumers and others who contribute to the consumer’s care (including medical practitioners, allied health professionals, carers and family) work together to deliver a tailored care and service plan and monitor and review the plan as needed.

Consumers reported that their care and services are regularly reviewed and that when something goes wrong, or their needs or preferences change, the organisation is quick to communicate with them and seek their input to update the care and services they are getting. Each of the care and service plans reviewed by the Assessment Team evidence that plans had been regularly reviewed (with changes made) and included a date by which the next review of care and services must be undertaken. Staff demonstrate an understanding of adverse incidents or near-miss events 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:

1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and
2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

Standard 2 Requirement 3(d) Met

The organisation demonstrates that the outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.

Standard 2 Requirement 3(e) Met

The organisation demonstrates that care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

### Standard 3:Personal care and clinical care Met

#### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

#### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

#### Summary of Assessment of Standard 3:

The Assessment Team found that the organisation has met all seven requirements under Standard 3.

Of consumers interviewed, 94% agreed that staff meet their health care needs always or most of the time. Consumers report feeling safe and confident that they are receiving quality care.

Staff could describe how they ensure care is best practice, their opportunities for continuing education and how they ensure that information is shared both within the organisation and with others outside the organisation. Care staff were observed to be kind, caring and respectful to the consumers and sensitive to their individual needs and preferences. Staff are aware of consumers at risk and those vulnerable and how incidents and changes in personal and care needs prompt reviews and assessments. Care staff demonstrated a good working understanding of precautions to prevent and control infections and strategies to minimise the use of antibiotics. Staff could also identify the highest prevalence risks for different cohorts of consumers and how incidents were used to inform changes in practice.

Consumers gave various examples of how staff ensure the care provided was right for them including by regularly asking them about their care and the way it is delivered and through involving consumers in providing feedback about care and services to inform continuous improvement.

Each of the care and service plans reviewed by the Assessment Team evidenced the delivery of safe and effective care. Staff discussed how they manage the sensitive topic of understanding and attending to the individual needs of consumers at the end of their life.

The service demonstrated the ongoing multidisciplinary reviews and consultations with the consumer, family or representatives. The organisation also demonstrated that they have a suite of policies and procedures underpinning the delivery of care and how they review practice (and also policies) to ensure they remain fit-for-purpose, informed by advice from consumers and other experts.

#### Requirements:

Standard 3 Requirement 3(a) Met

The organisation demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:

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

Standard 3 Requirement 3(b) Met

The organisation demonstrates effective management of high impact or high prevalence risks associated with the care of each consumer.

Standard 3 Requirement 3(c) Met

The organisation demonstrates that the needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.

Standard 3 Requirement 3(d) Met

The organisation demonstrates that deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.

Standard 3 Requirement 3(e) Met

The organisation demonstrates that information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.

Standard 3 Requirement 3(f) Met

The organisation demonstrates timely and appropriate referrals to individuals, other organisations and providers of other care and services.

Standard 3 Requirement 3(g) Met

The organisation demonstrates minimisation of infection related risks through implementing:

1. standard and transmission based precautions to prevent and control infection; and
2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

### Standard 4:Services and supports for daily living Met

#### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and
well-being and that enable me to do the things I want to do.

#### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

#### Summary of Assessment of Standard 4:

The Assessment Team found that the organisation has met all seven requirements under Standard 4.

Consumers interviewed confirmed they are generally satisfied with the services they receive especially in relation to their physical care. 79% of consumers interviewed said they like the food all or most of the time, although some consumers expressed concerns that it was not always hot enough or met their dietary preferences.

The organisation adequately demonstrated that it makes timely referrals to other organisations, provides meals of a suitable quality, variety and quality and provides safe, suitable clean and well-maintained furniture.

The organisation demonstrated that is supports consumers to connect with other supports and people outside the service and seeks feedback from consumers about activities of interest to them within the service. The organisation generally demonstrated that is supports consumers emotional, spiritual and psychological well-being.

#### 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 organisation has met all 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 enabled consumers to move around freely, with suitable furniture, fixtures and signage to help consumers navigate the service. Consumers had ready access to tidy outdoor areas with gardens, furniture and pathways that enable free movement around the areas.

Policies and procedures described systems for the purchase, service and maintenance of furnishings and equipment and also how environmental risks to consumers were identified and managed. Staff interviewed confirmed their understanding of the systems, and record arrangements. Contractors confirmed cleaning was delivered as arranged. Management confirmed the service environment is routinely monitored for any emerging risk or maintenance required.

#### 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 organisation has met all four requirements under Standard 6.

The organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints. Action is taken in response to consumer complaints and feedback and complaints are reviewed and used to improve services.

Consumer interviews showed 88% of consumers and representatives interviewed are satisfied staff follow up when they raise things with them most of the time or always. Consumers and representatives interviewed expressed in different ways they had access to feedback and complaint processes. While generally consumers and representatives were comfortable to give feedback or complain, a very small proportion said in different ways they were not comfortable to do so. Staff interviewed provided examples on ways to assist consumers who chose to complain by seeking a resolution if possible, providing forms or immediately escalating the matter to a supervisor or management as appropriate.

Information on internal and external feedback and complaint processes are displayed on throughout the service. Consumers and representatives may raise complaints through consumer meetings, representative forums or through personal contact. The organisation invites feedback and complaints and demonstrated open disclosure framework.

Management said they analyse feedback information for trends which are discussed at meetings and identify improvements which are documented on a continuous improvement register. Management also monitor the effectiveness of their response to complaints through consumer feedback processes to check satisfaction with complaint resolution outcomes.

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

The organisation demonstrated that has a workforce that is sufficient, and is skilled and qualified to provide safe, respectful and quality care and services.

Consumer interviews show that 100% of consumers and representatives agreed that staff were kind and caring always or most of the time. Consumers and representatives spoke positively of the staff and described in various ways how staff interactions are kind, caring and respectful.

Consumer experience interviews show that 100% of consumers and representatives interviewed agreed that staff know what they are doing always or most of the time. The majority of consumers and representatives interviewed were satisfied with the number of staff, with one consumer or representative providing feedback that the service needs more staff.

Staff interviewed confirmed in various ways that they have enough staff and enough time to complete their tasks. Staff could describe what was important to individuals and were able to describe care that was respectful and that they were confident to report any care that was not meeting this requirement.

Management demonstrated monitoring processes to ensure that the workforce has sufficient, skilled and qualified staff and that these staff work in a kind and respectful way.

#### Requirements:

Standard 7 Requirement 3(a) Met

The organisation demonstrates that the workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.

Standard 7 Requirement 3(b) Met

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

Standard 7 Requirement 3(c) Met

The organisation demonstrates that the workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.

Standard 7 Requirement 3(d) Met

The organisation demonstrates that the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.

Standard 7 Requirement 3(e) Met

The organisation demonstrates that regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.

### Standard 8:Organisational governance Met

#### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

#### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

#### Summary of Assessment of Standard 8:

The Assessment Team found that the organisation has met all five requirements under Standard 8.

The service demonstrates the organisation’s governing body is accountable for the delivery of safe and quality care and services.

Consumer interviews showed 100% of consumers and representatives responded that the service was well run always or most of the time. 100% of consumers and representatives said consumers feel safe at the service.

A high proportion of consumers and representatives did not expressly comment on their engagement in care and service development and delivery, however various consumers and representatives confirmed they have opportunities to be involved in the development and delivery of care and services. They described ways the involvement may occur including consumer meetings and contact with staff or management when requested. The service demonstrated that consumers and representatives are involved in the development, delivery and evaluation of care and services.

Service performance is monitored and reviewed through review of quality indicator data including incident data, review of feedback and complaints, meal feedback forms and satisfaction surveys. Results are escalated to management and the head organisation as required. Service level responsibility and reporting requirements in relation to information governance, financial governance, workforce governance, regulatory compliance and feedback and complaints are clearly outlined and the head organisation’s executive body and sub-committees meet regularly.

High risk or high prevalence risk management includes individual consumers being provided with information regarding their right to take risks. Examples of support for consumers to take reasonable risks were provided. The service has recently reviewed restraint practices and strengthened the monitoring of the use of psychotropic medication. Management showed consumer and staff vaccination programs operate, staff participate in infection control training, infections are tracked and monitored and there are outbreak management procedures.

#### Requirements:

Standard 8 Requirement 3(a) Met

The organisation demonstrates that consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

Standard 8 Requirement 3(b) Met

The organisation demonstrates that the organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.

Standard 8 Requirement 3(c) Met

The organisation demonstrates effective organisation wide governance systems relating to the following:

1. information management;
2. continuous improvement;
3. financial governance;
4. workforce governance, including the assignment of clear responsibilities and accountabilities;
5. regulatory compliance;
6. feedback and complaints.

Standard 8 Requirement 3(d) Met

The organisation demonstrates effective risk management systems and practices, including but not limited to the following:

1. managing high impact or high prevalence risks associated with the care of consumers;
2. identifying and responding to abuse and neglect of consumers;
3. supporting consumers to live the best life they can.

Standard 8 Requirement 3(e) Met

The organisation demonstrates that where clinical care is provided—a clinical governance framework, including but not limited to the following:

1. antimicrobial stewardship;
2. minimising the use of restraint;
3. open disclosure.