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:** | Mertome Aged Care |
| **RACS ID:** | 7355 |
| **Name of approved provider:** | Fresh Fields Management (NSW) Pty Ltd |
| **Address details:**  | 30 Winifred Road BAYSWATER WA 6053 |
| **Date of site audit:** | 08 October 2019 to 10 October 2019 |

**Summary of decision**

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| --- | --- |
| **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:** | 15 December 2019 to 15 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 Auditreport may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Mertome Aged Care (the Service) conducted from 08 October 2019 to 10 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 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** |
| --- | --- |
| Occupational therapist and therapy assistant | 2 |
| Executive manager | 1 |
| Deputy director of nursing | 1 |
| Consumers | 17 |
| Regional manager | 1 |
| Catering staff and consumer catering assistant | 2 |
| Registered nurses | 3 |
| Physiotherapist | 1 |
| Care staff | 5 |
| Clinical quality coordinator | 1 |
| Director of quality and corporate services manager | 2 |
| National general manager operations | 1 |
| Administration assistant | 1 |
| Maintenance officer | 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 that the organisation has met all six requirements under Standard 1.

Consumer experience interviews show that 93% of consumers agreed that staff always treat them with respect, and 7% agreed that staff treat them with respect most of the time. The organisation uses regular consumer surveys and an anonymous feedback and complaints mechanism to ensure consumers are satisfied that staff treat them with respect and support them to maintain their identity and live the life they choose.

The organisation demonstrated that consumers are treated with dignity and respect, and the service actively promotes a culture of inclusion. Staff were observed to interact respectfully and could identify consumer’s individual preferences and interests. Consumers described the ways their social connections are supported both inside and outside the service. The service promotes the value and diversity through staff training, in the wide range of activities it offers for consumers, and in delivery of care that is tailored to the person.

Staff provided meaningful examples of how they help consumers make choices including giving consumers clear and accurate information and options to inform choice. Consumers feel heard when they tell staff what matters to them and are able to make decisions about their life even when it involves an element of risk.

The organisation protects the privacy and confidentiality of information, and consumers are satisfied that care and services including personal care, are undertaken in a way that respects their privacy. Staff maintain the privacy of consumers. The organisation demonstrated how electronic and filing systems support the protection of confidential information including consumer information, consistent with documented policies and procedures.

#### 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 all five requirements of Standard 2 were met.

Of consumers randomly sampled, 93% agreed that staff meet their healthcare needs always, and 7% meet their healthcare needs most of the time. Consumers engage in the initial and ongoing assessment and planning of their care and services they need. Consumers feel safe and are confident staff listen to their goals and preferences, and that the organisation seeks input from other professionals to get the right care and services to meet their needs.

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

Consumers’ care and services are regularly reviewed and that when needs arise the organisation communicate with them and seek their input to update the care and services they are getting. Each of the care and services plans reviewed showed regular review and included a date for next review. Staff demonstrated an understanding of adverse or near miss incidents and how these are identified, documented and reviewed by the service, to inform continuous improvement.

#### Requirements:

##### Standard 2 Requirement 3(a) Met

The organisation demonstrates that assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.

##### Standard 2 Requirement 3(b) Met

The organisation demonstrates that assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.

##### Standard 2 Requirement 3(c) Met

The organisation demonstrates that assessment and planning:

(i) is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and

(ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

##### Standard 2 Requirement 3(d) Met

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

##### Standard 2 Requirement 3(e) Met

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

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

**Consumer outcome:**

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

The Assessment Team found all seven requirements of Standard 3 were met.

Of consumers randomly sampled, 93% agreed that staff meet their healthcare needs always, and 7% meet their healthcare needs most of the time. Consumers reported feeling safe and confident they are receiving quality care.

Staff described how they ensure care is best practice, their opportunities for continuing education and how they ensure that information is shared both within, and with others outside the organisation. Care staff demonstrated an understanding of precautions to prevent and control infection. Staff could also identify the highest prevalence risks for the consumers and how incidents are used to inform changes in practice.

Consumers gave various examples of how staff ensured the care provided was right for them. This included regularly asking them about the care and the way it is delivered and through involving consumers in training session with staff.

Each of the care and services plans reviewed indicated the delivery of safe and effective care. This included the review of care and consumers who had been palliated with care reflecting attention to the needs and preferences of these consumers at the end of their life. A focus on pain relief, review of pain management strategies and close involvement with family and others was evident.

The organisation demonstrates they have a suite of policies and procedures underpinning the delivery of care and how they review practice and policies to ensure they remain fit for purpose, 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:

(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 all seven requirements of Standard 4 were met.

Consumers interviewed said they are satisfied with the services they receive in relation to their physical care. In relation to food, 36% of consumers interviewed reported they always like the food, 57% reported they like the food most of the time, and 7% of consumers reported they like the food some of the time.

The organisation demonstrated that it makes timely referrals to other organisations, it provides meals of a suitable quality, variety and quantity and provides safe, clean and well-maintained furniture. This was also observed by the Assessment Team.

The organisation demonstrates it supports consumers to connect with other supports and people outside the service. A regular nondenominational church service is offered to consumers residing at the service. The service seeks advice from consumers about activities of interest to them and supports consumers’ mental health and 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:

(i) participate in their community within and outside the organisation’s service environment; and

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

##### Standard 4 Requirement 3(d) Met

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

##### Standard 4 Requirement 3(e) Met

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

##### Standard 4 Requirement 3(f) Met

The organisation demonstrates that where meals are provided, they are varied and of suitable quality and quantity.

##### Standard 4 Requirement 3(g) Met

The organisation demonstrates that where equipment is provided, it is safe, suitable, clean and well maintained.

### Standard 5: Organisation’s service environment Met

#### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

The Assessment Team found the service met all three of the requirements under Standard 5.

Fourteen consumers were randomly sampled with 100% saying that feel at home at the service most of the time or always.

The service was observed to be welcoming, some consumer rooms were newly renovated, with renovations in progress or planned for the remaining rooms. The layout of the service enabled consumers to move around freely, with suitable furniture, fittings and signage to assist consumers to navigate between wings. Consumers had ready access to outdoor areas with maintained gardens, seats and communal tables.

Consumers reported the service was well maintained, any issues are resolved quickly, and the service welcomes visiting family and friends. All consumers interviewed reported they felt safe living at the service. Policies and procedures described systems for the purchase, service and maintenance of furnishings and equipment. Management and consumers reported the service environment has been a standing agenda item at consumer/relative meetings over past months, as organisational management has worked with consumers to plan and implement room and communal area renovations and to ensure any emerging risk or maintenance issue was quickly resolved.

#### 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.

Fourteen consumers were randomly sampled with 100% saying that staff will follow up with things raised with them most of the time or always.

The service demonstrated consumers knew how to provide feedback and make complaints, and consumers feel safe and comfortable in doing so.

Consumers have access to advocates, language services and other methods for raising and resolving issues including an online system that is available to the general public. Consumers approach staff and management or lodge feedback forms and issues raised were generally resolved to their satisfaction.

The service demonstrated 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 actioned. Appropriate items are actioned via the continuous improvement register. Outcomes are used to improve the quality of care across the service. Senior organisational personnel oversee the service’s continuous improvement processes to ensure stakeholder feedback and complaints are effectively managed and trends identified.

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

Fourteen consumers were randomly sampled, with 93% reporting they get the care they need always or most of the time. One consumer stated they get the care they need some of the time.

Consumers are satisfied there was a sufficient number of skilled staff to meet their needs. They described staff as kind and caring and reported staff provided their care in accordance with consumers stated preferences.

The organisation demonstrated the number and mix of staff was planned to support safe and quality care and services. Staff interviewed are satisfied there are sufficient staff rostered to deliver quality care and services to consumers.

The service demonstrated interactions between staff and consumers kind, caring and respectful of each consumer’s identity, culture and diversity, and this was confirmed by all consumers interviewed. The Assessment Team observed interactions between staff and consumers to be kind, respectful and friendly.

The service was able to demonstrate the workforce has appropriate qualifications and knowledge to effectively perform their roles. Staff were satisfied they received enough training to effectively perform their duties.

The service demonstrated the workforce is monitored on an ongoing basis and identified performance deficits are actioned. Currency of police certificates, mandatory training and other essential staff requirements are monitored at an organisational level.

Performance appraisal processes are established, and staff are encouraged to undertake additional training.

#### 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.

Fourteen consumers were randomly sampled with 100% stating the place is well run always or most of the time.

The service demonstrated they involve consumers in the design, delivery and evaluation of services. Consumers confirmed they were consulted about environmental and service delivery processes and provided examples of how this takes place.

The service respects the rights of consumers to take risks, and management and staff work with consumers to enable them to live the best life they can.

Established organisational systems ensure effective information management, continuous improvement, workforce governance and regulatory compliance systems are maintained. Organisational policies and procedures are updated as required to reflect current legislation and best management practices.

The clinical governance framework addresses anti-microbial stewardship and the minimisation of restraint. The service practises open disclosure and supports staff to understand and apply this 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.