Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Nellie Melba Retirement Village |
| **RACS ID:** | 4582 |
| **Name of approved provider:** | Ryman Aged Care (Australia) Pty Ltd |
| **Address details:**  | 2 Collegium Avenue WHEELERS HILL VIC 3150 |
| **Date of site audit:** | 08 October 2019 to 09 October 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 12 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:** | 28 December 2019 to 28 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 Nellie Melba Retirement Village (the Service) conducted from 08 October 2019 to 09 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** |
| --- | --- |
| Consumers and representatives | 30 |
| Assistant to the manager | 1 |
| Care staff | 7 |
| Head chef | 1 |
| Lifestyle officer | 1 |
| Regional operations manager | 1 |
| Registered nurses | 2 |
| Quality managerUnit coordinators | 12 |
| Village manager | 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 service has met all six requirements under Standard one.

Consumers and/or representatives said they are treated with dignity and respect and can make informed choices. Of consumers and representatives randomly sampled for a consumer experience interview 100% agreed staff treat them with respect and 100% said staff explain things to them. Feedback through other interviews included consumer and representative satisfaction regarding how staff identified their individual needs and preferences.

The service seeks information through regular consumer surveys, meetings and formal and informal complaints mechanisms. Consumers say staff make their visitors feel welcome to the service. Staff were observed to interact with consumers patiently and respectfully and could readily identify consumers’ individual preferences and interests. Workforce orientation and training supports cultural safety.

Consumers interviewed confirmed they can make decisions about their life and felt supported to do what they want at the service. Staff provided a number of meaningful examples of how they promote individuality and independence. Staff confirmed that consumers’ choices are respected and supported even when it involves an element of risk.

Consumers and representatives reported they are generally satisfied with communication from staff and that care and services, including personal care are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of individuals. Consumers were confident their information was kept confidentially.

#### 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 service has met the five requirements under Standard two.

Consumers and/or representatives said in various ways they had input into the planning of their care and services and any risks to health and wellbeing.

The organisation has a suite of comprehensive assessments and validated risk assessment tools that are used by qualified staff to assess consumer’s needs, preferences and risks and develop their care plan. The organisation has an online library which is accessible to all staff. The library contains policies and procedures including those to guide assessment and care planning. Consumers confirmed in various ways how they are involved in assessment and planning of their care and services on an ongoing basis.

The service has a process in place to review consumers care needs every three months or as needs and preferences change. Staff described how they access consumers’ care plans; a summary care plan called 'helping hand' and a daily schedule of consumers’ care needs via a surface tablet in each consumer’s room.

Staff describe how consumers and others contribute to the consumer’s care including representatives, medical practitioners and allied health professionals. Staff demonstrated an understanding of reporting and managing incidents or near-miss events.

#### 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 service has met the seven requirements under Standard three.

Of consumers and/or representatives randomly sampled for a consumer experience interview 100% said, they get the care they need most of the time or always. Consumers provided various examples of what this meant to them including “I only want female carers and this is accommodated.”

Consumers randomly and purposefully interviewed described in various ways timely and appropriate referrals to other organisations and providers of other care and services.

Staff described how they communicate changes in consumers’ health and wellbeing which is reviewed by the registered nurse and how they are informed of changes via handover.

The Assessment Team observed while the service’s handover documentation contains detailed information regarding consumers’ care needs information is not always current and/or consistent with assessments, care plan and dietary requirements spreadsheet. Language used to describe texture modified diets was inconsistently applied.

Staff described the organisation’s system to refer consumers to specialists including geriatrician, speech pathologist, dietitian, physiotherapist and palliative care specialists.

The organisation monitors their practices via their care plan review process, feedback mechanisms, surveys, audits and results are discussed at relevant meetings.

The organisation promotes and offers staff annual influenza vaccinations.

#### 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 service has met the seven requirements under Standard four.

Of consumers and/or representatives randomly sampled for a consumer experience interview 88% said, they have a say in daily activities most of the time or always. A majority of consumer related this question to activities of interest to them and described in various ways what this meant to them. When asked if they are encouraged to do as much as possible for themselves 100% said most of the time or always however did not provide further explanation regarding what this meant to them.

Staff described how consumers interests, feedback, participation and observations are used to put together activity calendars and these were observed on display throughout the services and on noticeboards in consumers room. Activity calendars are also advertised via the services website for representatives to access.

Of consumers and/or representatives who participated in a consumer experience interview 71% said, they like the food most of the time or always and described in various ways what this meant to them. Of others, 29% said they like the food some of the time and described in various ways what this meant to them.

The Assessment Team observed equipment used to support lifestyle services such cleaning and kitchen to be safe, suitable, clean and well maintained.

#### 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 that the service met all three requirements under Standard five.

Of consumers and/or representatives randomly sampled for a consumer experience interview 88% said, they feel at home most of the time or always and provided various examples of what this meant to them. While 12% of consumers said, they never feel at home described how they felt abandoned at the service by their representatives.

Of consumers and/or representatives who participated in a consumer experience interview 88% said, they feel safe here most of the time or always. Of other consumers 12% said, they never feel safe however, did not provide further explanation regarding what this meant to them.

The service a new building was observed to be welcoming and clean. The layout of the service enabled consumers to move around freely, with suitable furniture and fittings. Consumers have access to outdoor areas that enabled free movement.

Management confirmed that maintenance and cleaning occur as per schedule and as needed. Staff described maintenance processes and how they report any issues they identify. Cleaning and laundry staff were observed to be carrying out their duties within the service.

#### 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 that the service met all four requirements under Standard six.

The organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints and have appropriate action taken in response to their complaints. Feedback and complaints are reviewed and used to improve services.

Of consumers and representatives randomly sampled for a consumer experience interview 93% said staff follow up when they raise things with them. Consumers and representatives expressed in different ways they either had no cause to complain or would raise their concern with staff who offered encouragement and support. Staff interviewed were able to give examples of ways to assist consumers to complain by providing forms and immediately escalating the matter to the nurse or management as appropriate.

Information on internal and external feedback and complaint processes are available to consumers and they are also able to raise complaints through consumer meetings. The organisation has developed an open disclosure framework and management demonstrated an awareness of this providing examples of open disclosure.

Management analyse feedback information for trends, discuss at meetings and identify improvements which are documented on the continuous improvement plan. Not all verbal complaints are recorded on the complaints register, however management were able to demonstrate how feedback and complaints have led to improvements to care and services.

#### 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 that the service met all five requirements under standard seven.

The organisation demonstrated 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, respectful and quality care and services.

Consumers provided positive feedback about the workforce. Of consumers and representatives randomly sampled for a consumer experience interview 100% agreed staff are kind and caring and 94% of consumers agreed that staff know what they are doing with 6% indicating they have minimal interactions with staff. Consumers confirmed they feel staff value their identity, culture and diversity and their preferences are respected. Consumer feedback and observations by the Assessment Team showed staff interacting with consumers in kind, caring and respectful ways.

Staff interviewed were satisfied that they have enough time to complete their tasks and management are responsive to their feedback. All staff spoke positively about education opportunities and were satisfied they have access to relevant work instructions. Staff identify the process to access consumers’ care plans to meet the care needs of consumers and identify the work instructions given are clear and updated regularly. Verbal and written handover is also conducted on each shift.

Management explained, and documentation confirmed the service has processes in place for rostering of staff and replacing unplanned leave. Staff provided examples of occasions where the roster has been adjusted to meet the changing needs of consumers.

Recruitment, selection, induction and orientation processes ensure staff have the required knowledge, qualifications and skills to deliver services. The organisation monitors staff compliance including nursing registrations, police checks and monthly reports which are provided to management of the service.

#### 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 that the service met all five requirements under Standard eight.

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

Of consumers and representatives randomly sampled for a consumer experience interview 93% agreed the service is well run. Consumers and representatives are contacted following entry to the service to check satisfaction with services, they can attend consumer meetings and individual meetings with staff or management as requested. The service demonstrated they involve consumers in the development, delivery and evaluation of care and services in relation to some aspects of the service. Staff show informal consultation occurs with consumers.

Service performance is monitored and reviewed at organisational level through review of key performance data including incident data, review of consumers and representative feedback and satisfaction surveys with results provided to management and the Board as appropriate. There are dedicated responsibilities and reporting requirements in relation to information, financial and workforce governance, regulatory compliance and feedback and complaints.

High risk or high prevalence risk management includes individual consumers being provided information regarding their right to take risk and completion of risk assessments by staff. These results, as well as minimising the use of restraint are reviewed and addressed in management meetings.

#### 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.