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:** | Opal Bairnsdale |
| **RACS ID:** | 4522 |
| **Name of approved provider:** | Domain Aged Care (Victoria) Pty Ltd |
| **Address details:** | 79 Harnham Drive BAIRNSDALE VIC 3875 |
| **Date of site audit:** | 23 July 2019 to 25 July 2019 |

**Summary of decision**

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| **Decision made on:** | 29 August 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:** | 04 October 2019 to 04 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 Opal Bairnsdale (the Service) conducted from 23 July 2019 to 25 July 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 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 |
| Representatives | 4 |
| Administration officer | 1 |
| Care staff | 8 |
| Care Manager | 1 |
| Cleaning staff | 1 |
| General manager | 1 |
| Lifestyle coordinator | 1 |  |
| Maintenance officer | 1 |  |
| Nursing staff | 2 |  |
| Regional manager  Regional quality advisor | 1  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:

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:

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 demonstrated that all requirements under Standard 1 were met.

All consumers and representatives interviewed, including those who participated in the consumer experience report agreed that staff treat consumers with respect most of the time or always. The service uses complaints mechanisms conducts surveys and ‘resident and relative meetings’ to ensure that consumers are satisfied that staff treat them with respect and support them to maintain their identity and live the life they choose.

The service demonstrated that 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 and interests. Consumers described ways their social connections are supported and how they can continue the relationships they had established prior to entering the service.

Staff conduct assessment processes, to identify consumers’ needs and preferences and promote the value of culture and diversity. Management review staff training needs to identify if further education is required to ensure the delivery of personalised care. The service offers a variety of activities to meet the diverse backgrounds and preferences of consumers. Staff provided examples as to how they promote the dignity and choice for consumers who had expressed specific cultural and spiritual preferences.

All consumers and representatives interviewed, including those who participated in the consumer experience report agreed that staff explain things, most of the time or always. Consumers and representatives are satisfied the service promotes and protects consumers’ privacy and confidentiality of information. The service demonstrates how its electronic management processes support the protection of confidential information including consumer information. The service promotes the value of privacy and dignity through staff training and performance management processes, as required.

#### Requirements:

##### Standard 1 Requirement (a) Met

The organisation demonstrates that each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

##### Standard 1 Requirement (b) Met

The organisation demonstrates that care and services are culturally safe.

##### Standard 1 Requirement (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 (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 (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 (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:

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:

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 demonstrated that all requirements under Standard 2 were met.

Consumers and representatives reported that they get the care they need based on their input into care and service planning and assessments. Representatives provided examples of where they were consulted and following an incident and/or in response to a change in a consumer’s care needs. Staff described how care and services are reviewed regularly, when there is a change to consumers’ health or wellbeing status, needs or preferences. Management provided examples of how incidents and auditing processes influence change to care delivery to minimise recurrence of adverse events and ensure ongoing continuous improvement.

Staff could describe how consumers and others who contribute to the consumer’s care (including medical practitioners, allied health professionals, carers and family) work collaboratively to ensure assessment and planning has a focus on optimising health and wellbeing in accordance with the consumers’ needs, goals and preferences.

Consumers and representatives are satisfied they are regularly consulted to ensure care reflects individual needs. This was demonstrated in consumers’ care and service plan documentation which included planning for end of life; as evidenced by documentation for a consumer who is currently receiving palliative care in the service.

#### Requirements:

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

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

##### Standard 2 Requirement (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 (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 (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:

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

#### Organisation statement:

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 demonstrated that all requirements under Standard 3 were met.

Of consumers and representatives interviewed, including those who participated in the consumer experience report, 100% agreed that consumers receive the care they need, most of the time or always. Consumers and representatives reported consumers feel safe and confident that they are receiving quality care and provided examples of action taken in response to a change in clinical needs; this included referrals to health care professionals as required.

Staff could describe how they ensure consumers receive the care they need in accordance with personal preferences and health professional directives. Staff provided different examples of how collaborative and multidisciplinary care enhance consumers’ health and wellbeing in accordance with their preferences; this was further evidenced in care and service plan documentation.

Management demonstrated that staff are provided with continued opportunities for ongoing education and training; both internally and externally. Monitoring of clinical care occurs via feedback from consumers and representatives, incident reporting and audit processes.

The Assessment Team reviewed a care and service plan relating to a consumer receiving palliative care and it evidenced attention to pain relief, comfort measures and close involvement with family and medical professionals.

Policies and procedures are readily available to guide staff in the delivery of personal and clinical care. Care and service plan review by the Assessment Team demonstrated they are reviewed regularly.

#### Requirements:

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

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

##### Standard 3 Requirement (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:

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:

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 demonstrated that all requirements under Standard 4 were met.

Consumers and representatives interviewed are generally satisfied with the services they receive in relation to their physical care and food at the service. Of consumers and representatives, including those who participated in the consumer experience report, 80% said consumers like the food most of the time or always. A small proportion of consumer experience report participants indicated meals could be improved. One consumer was dissatisfied that they didn’t always know what they were being served as they were unfamiliar with the names of the dishes. Management advised there had been recent changes in the kitchen with a new chef to commence shortly, who will meet with consumers to address any feedback.

Consumers and representatives described activities that consumers could engage in, according to their preferences, even those that included an element of risk. In addition to attending activities within the service, staff and consumers described the variety of other ways in which community connections are maintained. This includes visits to the local community centre, the attendance of external social groups visiting the service, with visitors and their pets welcome and observed by the Assessment Team to be in attendance during the reaccreditation audit. The service has recently introduced an initiative where a consumer is matched with a compatible staff member by choice and through mutual agreement by both parties. Of consumers and representatives interviewed, including those who participated in the consumer experience report, 100% of participants agreed that consumers are encouraged to do as much as possible for themselves.

Management and staff discussed how they engage consumers in meaningful activities including, membership of the welcoming committee and the consumer lifestyle committee, assisting with office tasks, serving drinks at happy hour, completing security checks at the evening and assisting with meal preparation. One on one visits are available to consumers who do not wish to participate in group activities. Referrals occur to external organisations for additional emotional and social support as needed. These occur in a timely fashion.

Staff could describe individual preferences and how they support consumers to achieve these. The Assessment Team observed a range of activities in progress, with staff encouraging all consumers to attend and supporting them to do this; should they wish to do so.

#### Requirements:

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

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

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

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

##### Standard 4 Requirement (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:

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

#### Organisation statement:

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 demonstrated that all requirements under Standard 5 were met.

Of consumers and representatives interviewed, including those who participated in the consumer experience report, 100% said consumers feel at home here most of the time or always. Of consumers and representatives who participated in the consumer experience report, 100% said consumers feel safe most of the time or always, with 93% of these responses being always. Consumers reported the service was well maintained and kept at a comfortable temperature. Consumers have access to a range of equipment and furnishings.

The service has procedures to ensure the environment is safe, clean and well maintained. Dedicated staff and approved contractors oversee both reactive and preventative maintenance processes. A new cleaning system has recently been introduced to ensure compliance with cleaning and infection control standards. Communal areas are cleaned daily and consumers’ rooms detailed regularly. Staff interviewed confirmed understanding of these systems which are applied in accordance with consumers’ preferences.

The service actively seeks feedback about how the service environment could be improved. Consumers have access to small sitting areas to meet with family and friends and are encouraged to use all areas of the service including the lounge and outdoor areas, where happy hour and barbeque lunches are often held.

The service was observed to be welcoming with individual rooms decorated with memorabilia, photographs and other personal items and is clean and well maintained. The layout of the service enabled consumers to move around freely, with suitable furniture, fittings and signage to help consumers navigate the service. Consumers had ready access to tidy outdoor areas with gardens, benches and communal tables, and paths and handrails that enabled free movement around the area.

The service demonstrated and the Assessment Team observed that it provides safe, suitable, clean and well maintained furniture to ensure an environment that is comfortable and promotes independence and enjoyment.

#### Requirements:

##### Standard 5 Requirement (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 (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 (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:

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:

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 organisation demonstrated that all requirements under Standard 6 were met.

The service demonstrated consumers knew how to give feedback and make complaints. 100% of consumers and representatives interviewed, including those who participated in the consumer experience report, are satisfied that staff follow up when they raise things with them most of the time or always.

The service demonstrated that it encouraged consumers and their representatives to provide feedback and make complaints. Staff explained how they support consumers to provide feedback as required. Management demonstrated that appropriate action is taken in response to complaints and when things go wrong. The organisation has a ‘complaints management’ and ‘open disclosure’ policy and procedure which includes an electronic system to record, track and manage feedback and in turn is used to improve the quality of care and services. The Assessment Team observed feedback forms and suggestion boxes on display throughout the home.

Management provided examples of where consumer feedback had initiated changes to care and service. The service also provided examples of how ongoing monitoring and review of its performance, relevant to Standard 6, initiated improvements to the complaint management process.

#### Requirements:

##### Standard 6 Requirement (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 (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 (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 (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:

I get quality care and services when I need them from people who are knowledgeable, capable and caring.

#### Organisation statement:

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:

#### Requirements:

The Assessment Team found that the organisation demonstrated that all requirements under Standard 7 were met.

The service demonstrated they ensure the numbers and mix of the staff is planned, managed and reviewed to enable safe and quality care and services. 100% of consumers and representatives interviewed, including those who participated in the consumer experience report are satisfied that they are satisfied that staff know what they are doing, and that they get the care they need, most of the time or always.

Feedback from a small number of consumers and representatives indicated there was not always enough staff and that on occasions, there were delays in staff response to call bells. Management stated they continue to review rosters in relation to consumer needs and feedback. Recent recruitment has resulted in additional care staff being appointed and are currently completing orientation prior to being rostered.

Staffing levels and skill mix are reviewed regularly and in response to changes in care recipients' needs and there are processes to address planned and unplanned leave. There is a registered nurse on site, each shift, seven days a week. The service demonstrated workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. Management monitors staff qualifications and ensure, through staff selection and extensive education and training processes that the workforce is competent, and they have the knowledge and skills to effectively perform their roles. Staff are satisfied there is enough education opportunities and advised they complete mandatory education and accompanying competencies annually and additional training in response to an identified need.

The service demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identity, care and relationship needs and cultural and social significance. All consumers and representatives interviewed, including those who participated in the consumer experience report agreed that staff treat consumers with respect most of the time or always.

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

##### Standard 7 Requirement (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 (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 (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 (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 (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:

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

#### Organisation statement:

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 demonstrated that all requirements under Standard 8 were met.

All consumer and representatives interviewed, including those who participated in the consumer experience report are satisfied the service is well run, most of the time or always.

The service demonstrated that they involve consumers in the design, delivery and evaluation of care and services, providing numerous examples of how consumers are involved in the design of services and are engaged on a day to day basis. These include meetings, surveys, and shared decision-making processes. Consumers and representatives confirmed they are involved in care and service planning and delivery. For example, there are some consumers who are active members of the welcoming and the consumer lifestyle committee and regular consultation occurs regarding care delivery and menu planning.

The governing body meets regularly, sets expectations for the service and regularly reviews risks from the organisational and consumer perspective. Organisational wide governance systems support effective information management, continuous improvement, financial and workforce processes and regulatory compliance. There are established processes to identify, manage and report high impact or high prevalence risks, including incidence of elder abuse. The clinical governance framework addresses anti- microbial stewardship, open disclosure and minimising the use of restraint with policies, procedures and staff practice supporting this framework. Clinical key indicators are collected and reported monthly; discussed locally and nationally at relevant meetings with reports provided directly to the Board.

#### Requirements:

##### Standard 8 Requirement (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 (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 (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 (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 (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