Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Opal Rutherford |
| **RACS ID:** | 1023 |
| **Name of approved provider:** | DPG Services Pty Ltd |
| **Address details:**  | 4 Dietrich Close RUTHERFORD NSW 2320 |
| **Date of site audit:** | 15 October 2019 to 18 October 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 13 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:** | 23 November 2019 to 23 November 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 Opal Rutherford (the Service) conducted from 15 October 2019 to 18 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 | 21 |
| Consumer representatives  | 13 |
| Management | 3 |
| Clinical staff | 9 |
| Care staff | 12 |
| Hospitality and environmental services staff | 6 |
| Lifestyle staff | 3 |
| External contractors | 0 |
| Visiting service providers such as allied health professionals | 1 |
| Other | 0 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

#### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found that all six requirements in relation to Standard 1 were met.

100% of consumers randomly interviewed said staff treat them with respect always or most of the time and 100% of consumers randomly interviewed said staff were kind and caring always or most of the time. Staff were observed to interact with consumers respectfully and to know the individual needs of consumers.

The organisation demonstrates a culture of inclusion acknowledging each consumer’s individual identity with care and services tailored according to the preferences, needs and goals of the consumer. The service promotes choice and independence and consumers are encouraged to maintain social connections inside and outside the service.

Consumers are supported in what matters to them and in leading the life they wish even when it involves an element of risk and risk assessment is attended where indicated. Consumers said they feel heard by staff.

The organisation protects the privacy of consumers and records are stored securely with confidentiality maintained. Electronic records are password protected, and hard copy documents are stored in secure file cabinets in locked offices. Consumers said they were satisfied with the care and services they received, including personal care, with their personal privacy maintained.

#### Requirements:

##### **Standard 1 Requirement 3(a) Met**

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

##### **Standard 1 Requirement 3(b) Met**

The organisation demonstrates that care and services are culturally safe.

##### **Standard 1 Requirement 3(c) Met**

The organisation demonstrates that each consumer is supported to exercise choice and independence, including to:

1. make decisions about their own care and the way care and services are delivered; and
2. make decisions about when family, friends, carers or others should be involved in their care; and
3. communicate their decisions; and
4. make connections with others and maintain relationships of choice, including intimate relationships.

##### **Standard 1 Requirement 3(d) Met**

The organisation demonstrates that each consumer is supported to take risks to enable them to live the best life they can.

##### **Standard 1 Requirement 3(e) Met**

The organisation demonstrates that information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.

##### **Standard 1 Requirement 3(f) Met**

The organisation demonstrates that each consumer’s privacy is respected and personal information is kept confidential.

### Standard 2: Ongoing assessment and planning with consumers Met

#### Consumer outcome:

1. I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

#### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

#### Summary of Assessment of Standard 2:

The Assessment Team found that all five requirements in relation to Standard 2 were met.

100% of consumers randomly interviewed said they get the care they need always or most of the time and 88% of consumers randomly interviewed said they felt safe most of the time or always.

Care planning and assessment is well documented across the service and consumers say the service is responsive to adjustments in care and services when required. Most consumers interviewed did not have a copy of their care plan but knew they had one and consumers felt they did not need one as they were satisfied with the care they received.

Consumers reported their care and services are reviewed and when a change in condition occurs, they are quick to communicate changes needed and if medical attention is required. All care and service plans reviewed by the Assessment Team had been regularly evaluated. The organisation seeks input from various health professionals to ensure the consumer gets the right care that they need.

Staff demonstrated an understanding of incident reporting and the documentation process and the Assessment Team was able to observe how this process informs the service’s clinical indicator data and continuous improvement.

The service begins discussion about end of life planning and provides advanced care planning information on entry to the service. Management and registered nursing staff recognise that not all consumers are prepared to make these decisions on entry and respect and support the consumer in the process of decision making. Mechanisms are in place to monitor and review this. This information is held in the electronic information management system for easy reference.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that assessment and planning:

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

The Assessment Team found that all seven requirements in relation to Standard 3 were met.

Consumers and representatives interviewed by the Assessment Team provided mostly positive comments in relation to personal and clinical care. Of consumers randomly sampled and asked if the consumer thinks they get the care they need, 100% said they do always or most of the time.

The care manager and clinical care co-ordinator monitors consumers clinical care through review of clinical incidents such as consumer behaviours, wounds, weights, medications and infections. The process of review directs clinical review in conjunction with the clinical staff at the service and other specialist as needed, such as a behaviour specialist, wound specialist or dietician.

Interviews with registered nurses and enrolled nurses, together with documentation review indicate this process does occur, however there are some inconsistencies in practice in relation to delivering effective clinical care. Care staff gave examples of consumers care and demonstrated an understanding of the consumers’ care needs. Staff said handover is effective in communicating changes in care the consumer is to receive.

Whilst the organisation has systems in place to monitor and review against the requirements in Standard 3, the system is not consistently identifying issues. Documentation review identified some deficiencies in relation to pain management and high risk falls analysis. However, based on the majority of consumer and/or representative feedback together with the organisations overall clinical monitoring and care processes, the service demonstrates consumers care needs are being assessed and plans of care implemented.

#### Requirements:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

The organisation demonstrates minimisation of infection related risks through implementing:

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 4:

The Assessment Team found that all seven requirements in relation to Standard 4 were met.

The organisation demonstrated how it provides safe and effective services and supports for daily living. Consumers/representatives say the services provided enhances their independence and quality of life. 100% of consumers said they get the care they need most of the time or always; 82% of consumers say they are encouraged to be as independent as possible most of the time or always. Most consumers interviewed said they were provided access to activities of their choice.

The organisation demonstrated how it supports consumer’s mental health and wellbeing. Leisure and lifestyle staff said they support consumers who are identified as deteriorating and staff provide 1:1 socialisation and emotional support as needed.

Management demonstrated information about consumers’ needs and preferences is communicated within the organisation and consumers are consulted through various methods of information gathering. Case conferences with consumers and representatives ensures information is shared with other responsible parties. The organisation demonstrated consumers are encouraged to stay connected to their communities outside the service.

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

88% of consumers said they liked the food most of the time or always. The organisation demonstrated that it monitors consumers dietary needs and preferences. Consumers interviewed said they are generally satisfied with the services they receive specially in relation to meals and the care they receive.

#### Requirements:

##### **Standard 4 Requirement 3(a) Met**

The organisation demonstrates that each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.

##### **Standard 4 Requirement 3(b) Met**

The organisation demonstrates that services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

##### **Standard 4 Requirement 3(c) Met**

The organisation demonstrates that services and supports for daily living assist each consumer to:

1. participate in their community within and outside the organisation’s service environment; and
2. have social and personal relationships; and
3. do the things of interest to them.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

The Assessment Team found the organisation met all three of the requirements in relation to this Standard.

The organisation demonstrated that it provides a safe can comfortable service environment. Consumers said they have their own room with an ensuite bathroom. They can bring in items of furniture and memorabilia, such as photographs of family to decorate and personalise their room to make it as homelike as possible. Consumers and representatives spoke very favourably about how the service was maintained including the cleanliness of communal and personal areas. 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 organisation demonstrated they have systems for the purchase, service and maintenance of furnishings and equipment and environmental related risks to consumers were identified and managed.

Staff interviewed confirmed their understanding of the systems and maintenance arrangements and maintained records to monitor and review the living environment at the service.

The organisation has a system in place to manage the routine preventative maintenance of equipment to provide a safe and comfortable environment for consumers. As part of this program the organisation conducts routine environmental checks to ensure the building and equipment are well maintained. Equipment requiring specialist servicing is referred to specialist tradespeople. The organisation ensures all furniture, fitting and equipment used is safe, clean, well maintained and suitable for the needs and preferences of the consumers. Staff members are aware of their responsibility to report any items requiring maintenance or any hazards.

#### Requirements:

##### **Standard 5 Requirement 3(a) Met**

The organisation demonstrates that the service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.

##### **Standard 5 Requirement 3(b) Met**

The organisation demonstrates that the service environment:

1. is safe, clean, well maintained and comfortable; and
2. enables consumers to move freely, both indoors and outdoors.

##### **Standard 5 Requirement 3(c) Met**

The organisation demonstrates that furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

### Standard 6:Feedback and complaints Met

#### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

#### Organisation statement:

1. The organisation 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 all four requirements in relation to Standard 6 were met.

Information is provided to consumers and representatives about avenues for feedback and complaint in various meetings and forums and in key documents including consumer handbooks. Feedback is pro-actively sought from consumers and consumer representatives, staff and other stakeholders, and opportunities are also provided to raise concerns, during regular case conferencing. Management were seen to operate an open-door policy.

100% of consumers and representatives randomly sampled said staff followed up when they raised things with them most of the time or always. Consumers and representatives interviewed were aware of ways to suggest an improvement or make a complaint and said they are encouraged to do so.

The organisation demonstrated they review complaints and feedback they receive, act and respond to the person raising the complaint and/or providing the feedback. A review of the complaint’s registers showed the actions and responses including follow-up with the complainant when known. Management demonstrated effective monitoring and review of processes.

#### Requirements:

##### **Standard 6 Requirement 3(a) Met**

The organisation demonstrates that consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

##### **Standard 6 Requirement 3(b) Met**

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

##### **Standard 6 Requirement 3(c) Met**

The organisation demonstrates that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

##### **Standard 6 Requirement 3(d) Met**

The organisation demonstrates that feedback and complaints are reviewed and used to improve the quality of care and services.

### Standard 7:Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found all five requirements of Standard 7 to be met.

Consumer experience interviews show that 100% of consumers said staff treat them with respect and are kind and caring always or most of the time. Consumers reported the staff show kindness and are caring. Consumers felt staff know what they are doing and explain or follow up on information for them. Consumers also raised their concerns with recent staff shortages and the use of agency staff. However most agreed this has improved recently and are satisfied management are working to improve this.

The service has a roster in place which includes a registered nurse 24-hours, seven days a week. The service changes staff numbers based on consumer acuity and needs. Rosters have been completed. Staff recruitment processes are comprehensive and minimum education competencies are confirmed. The service has a structured orientation program in place which includes buddy shifts for both agency staff and permanent staff.

The service has a regular training and education and performance appraisals are completed annually. The workforce confirmed they have access to position descriptions, and extra training and education if they choose.

#### Requirements:

##### **Standard 7 Requirement 3(a) Met**

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

##### **Standard 7 Requirement 3(b) Met**

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

##### **Standard 7 Requirement 3(c) Met**

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

##### **Standard 7 Requirement 3(d) Met**

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

##### **Standard 7 Requirement 3(e) Met**

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

### Standard 8:Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found that all five requirements of Standard 8 to be met.

Most consumers interviewed through the consumer experience interviews said the service is well run most of the time or always. With approximately 12% saying the service is well run sometimes with areas of concern predominately in staffing and agency usage.

The organisation demonstrates they have an active governing body in place who meet regularly, receive and review risks to consumers and set organisational goals through a strategic plan. The organisations governance systems support regulatory compliance, clinical care, consumer feedback, antimicrobial stewardship and restraint minimisation. Workforce interviews confirmed they have received training in these systems and are aware of how their work contributes.

The organisation demonstrates they engage consumers in the development and delivery of care and services. This includes addressing and working to fix any areas of concern directly with the consumer and/or representative or through the organisation continuous improvement approach.

#### Requirements:

##### **Standard 8 Requirement 3(a) Met**

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

##### **Standard 8 Requirement 3(b) Met**

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

##### **Standard 8 Requirement 3(c) Met**

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

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

##### **Standard 8 Requirement 3(d) Met**

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

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

##### **Standard 8 Requirement 3(e) Met**

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

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