Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Parklands Residential Aged Care Facility |
| **RACS ID:** | 5445 |
| **Name of approved provider:** | Queensland Health |
| **Address details:** | 138 Thuringowa Drive KIRWAN QLD 4817 |
| **Date of site audit:** | 22 October 2019 to 24 October 2019 |

**Summary of decision**

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| **Decision made on:** | 19 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:** | 10 December 2019 to 10 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 | | Not Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Not 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 |
| **Timetable for making improvements:** | By 20 January 2020 | |
| **Revised plan for continuous improvement due:** | By 04 December 2019 | |

**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 Parklands Residential Aged Care Facility (the Service) conducted from 22 October 2019 to 24 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** |
| --- | --- |
| Facility Manager | 1 |
| Dietitian | 1 |
| Administration officer | 1 |
| Clinical nurse consultant | 1 |
| Nurse unit manager | 2 |
| Consumers | 14 |
| Representatives | 6 |
| Operational service officer | 1 |
| Registered staff | 4 |
| Catering staff | 3 |
| Lifestyle staff | 2 |
| Care staff | 6 |
| Regional service group manager | 1 |
| Cleaning staff | 2 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

2. The organisation:

(a) has a culture of inclusion and respect for consumers; and

(b) supports consumers to exercise choice and independence; and

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found that the service has met all six requirements under Standard 1.

Consumer experience interviews resulted in all consumers identifying that staff treat them with respect most of the time or always. The organisation uses case conferences, consumer and representative feedback and meetings to monitor consumer satisfaction and foster a culture of respect where consumers maintain their identity and live the life they choose.

The service demonstrated actively it promotes a culture of inclusion through staff conduct and inclusive procedures that involve the consumer. Consumers could define how their relationships are supported both inside and outside the service. Staff were observed to interact with consumers in a respectful manner and could identify consumer’s individual preferences and interests. The service acknowledges culture and diversity through collaborative assessment and the provision of care that is tailored to the consumer.

Consumer experience interviews resulted in a high proportion of consumers confirmed staff explain things to them most of the time or always. Consumers said staff consistently discuss their care with them and felt involved in how their care is delivered.

Staff demonstrated an accurate and personalised knowledge of the care needs of individual consumers and described how they help consumers make choices, by explaining options and risks involved, to inform their choice.

#### 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 that the service has met all five requirements in relation to Standard 2.

Of consumers randomly sampled, all reported they have a say in their daily activities always or most of the time. Consumers said their engagement in the initial and ongoing assessment and planning of their care helps them to get the care and services they need. Consumers reported feeling safe and confident that staff listen to their goals and preferences, and that the organisation seeks input from other professionals to ensure they get the right care and services to meet their needs.

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

Consumers reported that their care and services are regularly reviewed and that when something goes wrong, or their needs or preferences change, the service is quick to communicate with them and seek their input to update the care and services they are getting. Each of the care plans reviewed showed plans had been regularly reviewed (with changes made). Staff demonstrated an understanding of incidents and how these were identified, documented and reviewed by the service, to inform continuous improvement.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that assessment and planning:

(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 that the service met all seven of the requirements in relation to Standard 3.

All respondent to consumer experience interviews said they feel safe here always and they get the care they need most of the time or always.

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

Consumers gave various examples of how staff ensured the care provided was right for them. This included regularly asking them about their care and the way it is delivered.

Each of the care plans reviewed indicated the delivery of safe and effective care.

The organisation demonstrated they have a suite of policies and procedures underpinning the delivery of care and how they review practice and policies.

#### 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 that the service met all seven requirements in relation to Standard 4.

Consumers interviewed confirmed their satisfaction with the services and supports they received from the service and confirmed they are encouraged to do as much as possible for themselves most of the time or always.

Consumers reported they decorate their rooms to suit their needs and way of life. The service provided daily activities which were inclusive and covered a range of activity types to suit consumer capability and interest. Staff were observed to provide encouragement and engagement to all consumers in a kind and respectful manner. Consumers were observed receiving one-to-one interactions with staff to provide emotional support to anxious and private consumers.

The service demonstrated referrals are made to external contractors and health professionals in a timely manner. Consumers confirmed they were confident the service would provide access to appropriate external services if needed. Consumers experience interviews identified a high proportion of consumers said they like the food here most of the time or always. Consumers also reported they were satisfied with the quality, variety and quantity of the meals provided. The service demonstrated effective maintenance of equipment, furniture, fixtures and the living environment, which is reviewed regularly through a preventative maintenance program.

The service demonstrated that it supports consumers to connect with the external community through established partnerships with education institutes and community organisations. Consumer feedback regarding meals, activities and care delivery is collected regularly and used to improve service delivery. The service demonstrated consistent support to consumers emotional, spiritual and psychological wellbeing through consumer-specific social activities and cultural celebrations.

#### 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 Not 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 two of the three requirements under this Standard.

The service was observed to be welcoming, clean and well lit; with clear signs to direct visitors and consumers around the environment. A high proportion of consumers responded they felt at home here most of the time or always.

Consumer’s rooms were decorated with, photographs, memorabilia and personal items. The organisation was clean, and consumers confirmed their rooms were cleaned regularly.

The layout of the service enabled consumers, representatives and visitors to access all areas of the organisation, with furniture and fittings to generally be suitable. The Assessment Team observed most of the wooden outdoor furniture to be in poor condition and requiring replacement.

Consumers had ready access to outdoor areas with gardens, outdoor furniture, and paths that enabled free movement around the area. However, the gardens were observed to be overgrown with excessive amounts of dry leaf litter laying on the ground. Consumers and staff expressed concerns that the lack of maintenance to the gardens posed a potential risk for fire or snake hazards.

Staff interviewed confirmed their understanding of reporting hazards and broken equipment to maintenance. Management confirmed maintenance requests are discussed at staff meetings and all purchases are reviewed and cleared by management before being approved. Consumers confirm they had adequate access to equipment and furniture with maintenance issues being addressed in a timely manner.

#### 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) Not Met

The organisation demonstrates that the service environment:

(i) is safe, clean, well maintained and comfortable; and

(ii) enables consumers to move freely, both indoors and outdoors.

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

2. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

#### Summary of Assessment of Standard 6:

The Assessment Team found the organisation met all six requirements in relation to Standard 6.

Consumer experience interviews resulted in all consumers confirming staff follow up when they raise things with them most of the time or always. The service uses surveys, meetings and case conferences as communication channels to facilitate feedback from consumers and representatives.

The majority of consumers are satisfied with the service’s complaints management process and felt supported and confident in providing feedback if required. Staff were able to describe the process of assisting residents in accessing internal and external complaints mechanisms including advocates and public representatives.

The service demonstrated appropriate action is taken in response to complaints and an open disclosure process is used when fault is identified. The organisation further demonstrated feedback and complaints are reviewed and used to improve the quality of care.

#### 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 this standard.

Consumer experience interviews indicate that staff know what they are doing, are kind and caring most of the time or always.

The service demonstrated that processes ensure the workforce is planned to ensure appropriate numbers and skill mix of staff is appropriate for the delivery of safe, respectful and quality care and services. Police certificate and registration requirements are monitored and reviewed regularly. Education is provided to meet mandatory requirements as well as service needs. Consumers/representatives said there are sufficient staff to meet their needs and deliver care.

Staff held qualifications relevant to their roles and were familiar with individual consumer’s needs, preferences and daily routines. Recruitment and performance monitoring processes ensure staff competence is maintained and where non-performance is identified, management address it in a timely manner.

#### 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 organisation has met all five requirements under this standard.

Consumer experience interviews indicate that the service is well run most of the time or always.

The service demonstrated they involve consumers in the delivery and evaluation of care and services, providing examples of how consumers are supported on a day-to-day basis. Consumers/representatives said they are involved in initial care planning and delivery and provided various examples of how this occurs.

The governing body meets regularly, sets clear expectations for the organisation and regularly reviews risks from an organisational and consumer perspective. There are organisation wide governance systems to support effective information management, the workforce, compliance with regulations and clinical care. The clinical governance framework addresses anti-microbial stewardship, open disclosure and minimising the use of restraint. Staff interviewed understood these concepts and could explain how they were applied in practice.

The risk management framework supports consumers to live the best life they can and addresses identifying and responding to abuse or neglect of consumers. Staff could describe how they would respond to such incidents and management demonstrated appropriate systems in place to support staff. Clinical governance systems support the effective management of high-impact or high-prevalence risks including pressure injuries, restrictive practices and falls. The service staff demonstrated an understanding of adverse or near-miss events and how these were documented and reviewed by the service, to inform continuous improvement.

#### 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