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:** | Rosalie Nursing Care Centre |
| **RACS ID:** | 5802 |
| **Name of approved provider:** | Alzheimer's Association of Queensland Inc |
| **Address details:** | 18 Howard Street ROSALIE QLD 4064 |
| **Date of site audit:** | 08 July 2019 to 10 July 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 16 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:** | 11 October 2019 to 11 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 |
| **Timetable for making improvements:** | N/A | |
| **Revised plan for continuous improvement due:** | N/A | |

**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 Rosalie Nursing Care Centre (the Service) conducted from 08 July 2019 to 10 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** |
| --- | --- |
| Assistant in nursing | 5 |
| Leisure and lifestyle coordinator | 1 |
| Music Therapist | 1 |
| Administration officer | 1 |
| Representatives | 10 |
| Consumers | 7 |
| Registered nurse | 2 |
| Medical officer | 1 |
| Leisure and lifestyle staff | 1 |
| Maintenance officer | 1 |
| Catering staff | 1 |
| Cleaning staff | 1 |
| Director of care | 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 has a culture of inclusion and respect for consumers; and supports consumers to exercise choice and independence; and respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

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

Consumer experience interviews show that 100% of consumers agreed that staff always treat them with respect and explain things to them. The organisation uses an anonymous feedback and complaints mechanism 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 organisation 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 consumer’s individual preferences and interests. Consumers described the ways their social connections are supported both inside and outside the service. The service promotes the value of culture and diversity through staff training, in the wide range of activities it offers for consumers with diverse backgrounds and preferences and in delivery of care that is tailored to the person.

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

Consumers said the organisation protects the privacy and confidentiality of their information, and that they are satisfied that care and services, including personal care, are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of consumers. They could demonstrate their understanding that consumers receiving personal care can feel vulnerable and what they do to ensure consumers are made to feel respected and comfortable. The organisation demonstrated how electronic and filing systems support the protection of confidential information including consumer information, consistent with documented policies and procedures.

#### Requirements:

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

Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

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

Care and services are culturally safe.

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

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

Each consumer is supported to take risks to enable them to live the best life they can.

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

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

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 has met all five requirements in relation to Standard 2.

Of consumers randomly sampled, 92% agreed that they have a say in their daily activities. staff meet their healthcare needs always or most of the time. Consumers said their direct 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, carers 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 organisation is quick to communicate with them and seek their input to update the care and services they are getting. Each of the care and service plans reviewed showed plans had been regularly reviewed (with changes made) and included a date by which the next review of care and services must be undertaken. Staff demonstrated an understanding of adverse incidents or near-miss events and how these were identified, documented and reviewed by the service, to inform continuous improvement.

The Assessment Team was satisfied that advance care planning and end of life planning formed part of care planning. This was evidenced by documentation for five consumers’ who said they had discussed their end of life and palliative care wishes with staff. There was evidence that the outcomes of such planning were documented in care plans.

#### Requirements:

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

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

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

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 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

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 all seven of the requirements in relation to Standard 3 were met.

Of consumers randomly sampled, 100% agreed that staff meet their healthcare needs and that they feel safe always or most of the time. Consumers reported feeling safe and confident that they are receiving quality care.

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 and service plans reviewed indicated the delivery of safe and effective care. A focus on pain relief, review of pain management strategies and close involvement of family and others was evident.

The organisation demonstrated they have a suite of policies and procedures underpinning the delivery of care and how they review practice and policies to ensure they remain fit-for-purpose, informed by advice from consumers and other experts.

#### Requirements:

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

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

Effective management of high impact or high prevalence risks associated with the care of each consumer.

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

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

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

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

Timely and appropriate referrals to individuals, other organisations and providers of other care and services.

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

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 all seven requirements in relation to Standard 4 were met.

Consumers interviewed said they are satisfied with the services they receive especially in relation to their physical care and the food at the service. A number of consumers stated that the organisation supported them to go on outings outside the service. They said they could influence and choose the activities they participated in at the service such as movie and pizza nights, bus trips and thai chi groups. They also said that they enjoyed talking to other consumers and staff when they were feeling down and that staff provided emotional support.

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

The organisation demonstrated that it supports consumers to connect with other supports and people outside the service. It demonstrated it seeks advice from consumers about activities of interest to them within the service. The organisation demonstrated that it supports consumer’s mental health and wellbeing. The organisation provided evidence on how it supports the emotional, spiritual and psychological wellbeing of consumers in a systemic way. Staff advised they speak and engage with consumers on a daily basis.

#### Requirements:

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

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

Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well being.

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

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

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

Timely and appropriate referrals to individuals, other organisations and providers of other care and services.

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

Where meals are provided, they are varied and of suitable quality and quantity.

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

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 the organisation met all three of the requirements in relation to this Standard.

Of consumers randomly sampled, 92% said that they feel at home here and 100% said that they feel safe most or all of the time. The service was observed to be welcoming with individual rooms decorated with memorabilia, photographs and other personal items, 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 raised gardens, benches and communal tables, and paths that enabled free movement around the area.

Consumers said:

* The service was well maintained and kept at a comfortable temperature.
* They have access to a range of equipment and furnishings and felt safe using them.
* The organisation regularly sought their feedback about how the service environment could be improved and made more welcoming with four consumers describing specific changes that had been made in response to feedback.
* They have access to quiet areas including an adjacent house to meet with family and friends and are encouraged to use all areas of the service including the outdoor areas, where morning teas, movie nights and other activities are held.

Policies and procedures described systems for the purchase, service and maintenance of furnishings and equipment and how environmental related risks to consumers were identified and managed. Staff interviewed confirmed their understanding of the systems and maintenance arrangements. Service agreements with contractors confirmed external services were well managed and delivered as arranged. Management confirmed that the service environment is a standing agenda item for all management and staff meetings and meetings where any emerging risk or maintenance issues are discussed and recorded in a log including any consumer feedback on the service environment.

#### Requirements:

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

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 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

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 the organisation met all four requirements in relation to this Standard.

The organisation could demonstrate consumers know how to give feedback and make complaints and feel safe and comfortable doing so. Further, they demonstrated that consumers have access to advocates, language services and other methods for raising and resolving complaints. The organisation demonstrated that: appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

Staff could explain what they are required to do when feedback or complaints are made. Records of workforce orientation and training included information about open disclosure processes and staff interviewed knew what an open disclosure process was. Feedback and complaints are reviewed and used to improve the quality of care. The organisation provided a log of compliments and complaints, and how these feeds into their plan for continuous improvement. The organisation demonstrated how the complaints were used to improve the quality of care and services for individuals or across the organisation.

#### Requirements:

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

Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

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

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

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

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:

The Assessment Team found that the organisation demonstrated that all five requirements in relation to Standard 7 were met.

The organisation demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. Consumers provided various examples of what this meant to them including in relation to events of cultural significance, specific care and relationship needs and availability of staff speaking other languages. Interactions between consumers, representatives and staff were observed to be kind, caring and respectful.

The organisation demonstrated the workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. New staff are satisfied with the orientation and support provided. Training and development plans occur as part of probation monitoring and recruitment. The organisation demonstrated that the number and mix of staff is planned to enable safe and quality care and services.

Consumers consistently noted that staff are attentive to their needs. Consumers said activities staff are available on the weekend. Staff interviewed are satisfied there are enough experienced staff to enable them to provide safe and quality care. Review of documentation indicates shifts are consistently filled with casuals which has reduced usage of agency staff. There were no issues identified in relation to call bell response times.

Staff have appropriate qualifications, they consistently have the skills and knowledge to effectively perform their roles. For example:

* Consumers said staff are very empathic and know how to use equipment, and provide adequate oral and dental care and they are able to effectively engage consumers living with dementia.
* Staff interviewed are satisfied with the support they receive when learning new skills. Staff described the range of education and training they receive including dementia specific training and Social Role Valorisation Training (SRVT) which underpins the philosophy of care used in the organisation.
* There are resources available to identify training needs and competency development and review. The education calendar is reviewed and updated annually and reflects education needs identified from the training needs analysis, staff discussion, incidents or audits.
* Monitoring processes are effective with staff completing mandatory education as required. Competency based assessments are routinely implemented following incidents.

#### Requirements:

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

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

Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

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

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

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

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 the organisation demonstrated that all requirements in relation to Standard 8 were met.

Of consumers randomly sampled, 92% agreed that the place is well run. The organisation 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 co-design of services and engaged on a day-to-day basis. Consumers said they are involved in care planning, delivery and evaluation, providing various examples of how this occurs in practice.

The management team 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 regulation 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. Consumers and their representatives confirmed that when restraint was used the service first contacted them for their consent and contacted them after the application of restraint to discuss alternative options for the future.

#### Requirements:

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

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’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

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

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

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