Smithfield Residential Care Centre

Performance Report

1 Warooka Drive
SMITHFIELD SA 5114
Phone number: 08 8254 4700

**Commission ID:** 6166

**Provider name:** Allity Pty Ltd

**Site Audit date:** 2 February 2021 to 4 February 2021

**Date of Performance Report:** 7 May 2021

# Publication of report

This Performance Report **may be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with consumers, representatives, staff and others.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### 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.

## Assessment of Standard 1

The Quality Standard is assessed as Compliant as six of the six specific Requirements have been assessed as Compliant.

The Assessment Team found overall, sampled consumers considered that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* staff respect consumers’ identity and treat them with respect.
* described how consumers maintain connections with family and people important to them.
* described how staff respect consumers’ choice to be independent with daily activities and do things of importance to them.
* receive relevant information and consumers’ privacy is respected.
* complimentary about how consumers are treated and described staff interactions as “lovely”, “kind” and “excellent”.

Care plans and lifestyle documents sampled included specific information relating to consumers’ cultural needs and background, emotional support and spiritual aspects of care. Consumers sampled confirmed staff value their culture, values and diversity, understand their needs and preferences and make them feel safe. Staff sampled were familiar with consumers’ backgrounds and provided examples of culturally safe care and sampled consumers’ cultural needs and preferences.

Documentation viewed by the Assessment Team demonstrated information provided to consumers is current, accurate and timely. Information is made available to consumers through newsletters, meeting forums and noticeboards. Staff sampled described ways they provide information to consumers who do not speak English or who have a cognitive impairment. Staff were observed to deliver care in a way which promoted and respected consumers’ privacy and personal information is kept confidential.

Consumers sampled stated they are supported to exercise choice and independence, maintain relationships and make decisions about their own care. Staff described how they support and engage consumers in making informed choices about their care and services, including through informal conversations. Additionally, staff described how they support consumers from non-English speaking backgrounds to make decisions relating to their care.

Consumers sampled confirmed they are supported to take risks and do not feel restricted in their movements or choice of activity. Consumer files and risk assessments viewed by the Assessment Team demonstrated activities where consumers wish to undertake an activity involving an element of risk, assessments are initiated and strategies to mitigate risks are implemented in consultation with the consumer and/or representative to ensure consumers are able to undertake these activities safely.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 1 Consumer dignity and choice.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

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

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*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.*

### Requirement 1(3)(d) Compliant

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

### Requirement 1(3)(e) Compliant

*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.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANTOngoing assessment and planning with consumers

### 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:

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.

## Assessment of Standard 2

The Quality Standard is assessed as Compliant as five of the five specific Requirements have been assessed as Compliant.

The Assessment Team found most consumers considered that they feel like partners in the ongoing assessment and planning of their care and services. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* are involved in care and planning processes.
* are informed of outcomes of care plan reviews and have access to care plans on request.
* consumer needs, goals and preferences, including in relation to risks have been identified and used to inform care and services.
* provided examples of professional services consumers have received and representatives stated they are informed of any changes to consumers’ health status.

A range of clinical and lifestyle assessments are completed on entry and on an ongoing basis, including when a change in consumers’ health and well-being is identified. Information gathered from consultation with consumers and/or representatives and assessment processes is used to develop detailed care plans which incorporate each consumer’s goals, needs and preferences. Additionally, a range of clinical risk assessment tools are utilised, relative to each consumer’s perceived risks, including for skin, falls, malnutrition, pain and depression. Individualised management strategies are developed to minimise impact of risks and are included in care plans. Staff described assessment and planning process and confirmed they have ready access to assessment and care planning documentation to assist with delivery of care and services to consumers.

Consumer files sampled demonstrated consumers’ needs, goals and preferences are identified through assessment and planning processes. This included advance care planning and end of life planning. All sampled consumer files included an advance care plan and end of life wishes which were signed by consumers and/or their representatives and the Medical officer. A care file viewed by the Assessment Team for a consumer who was actively palliating, included a comprehensive palliative care plan which detailed the consumer’s end of life needs, goals and preferences.

Consumers and representatives confirmed they are involved in assessment and care planning processes and are aware they can access care plan documents on request. Additionally, representatives stated they are informed of care plan reviews and when changes to care needs occur in response to decline in consumers’ health. Care staff described how they are informed of any changes to consumer care.

The Assessment Team found the organisation has monitoring processes to ensure initial and ongoing assessment and planning is conducted in partnership with consumers and has a focus on optimising health and well-being in accordance with consumers’ needs, goals and preferences.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 2 Ongoing assessment and planning with consumers.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*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.*

### Requirement 2(3)(b) Compliant

*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.*

### Requirement 2(3)(c) Compliant

*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.*

### Requirement 2(3)(d) Compliant

*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.*

### Requirement 2(3)(e) Compliant

*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 COMPLIANTPersonal care and clinical care

### 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.

## Assessment of Standard 3

The Quality Standard is assessed as Compliant as seven of the seven specific Requirements have been assessed as Compliant.

The Assessment Team found most consumers sampled considered that they receive personal care and clinical care that is safe and right for them. Consumers interviewed stated they get the care they need and are satisfied with the personal and clinical care provided.

Staff have access to a range of mechanisms to ensure care and services provided to consumers is best-practice. Clinical staff were aware of how to access further support and information on best practice as required. A range of validated risk assessments are used by the service with information gathered used to develop strategies and care plans.

High-impact or high-prevalence risks associated with the care of consumers are identified through assessment processes, and individualised management strategies are developed and documented in care plans to ensure care and services are delivered in line with consumers’ assessed needs and preferences. Areas of risk viewed by the Assessment Team in consumer files included skin, pain, behaviours, wound management and falls management. Clinical and care staff sampled were knowledgeable about high impact or high prevalence risks for consumers sampled and described strategies to minimise impact of those risks.

The service has processes to identify each consumer’s needs, goals and preferences in relation to end of life. Staff described processes implemented when a consumer is at end of life, including documentation completed. For a consumer who was actively palliating, an end of life pathway was completed and progress notes demonstrated ongoing consultation with the Medical officer and the consumer’s family.

Where changes to consumers’ health are identified, additional charting, assessments and monitoring processes are implemented and referrals to Medical officers and/or allied health specialists initiated. Care staff sampled stated they report changes to consumers’ health and well-being to senior clinical staff. Additionally, where changes to consumers’ care and service needs occur in response to deteriorating health, there are processes to ensure these are communicated to staff.

The service has an effective infection control system in place to prevent and control infections. Consumers sampled stated they observe staff washing their hands and their rooms are regularly cleaned. Clinical and care staff demonstrated knowledge and understanding of antimicrobial stewardship principles and described practical strategies initiated to minimise spread of infection.

The Assessment Team found the organisation has monitoring processes in place to ensure delivery of safe and effective personal and clinical care, in accordance with consumers’ needs, goals and preferences to optimise health and well-being.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 3 Personal care and clinical care.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*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.*

### Requirement 3(3)(b) Compliant

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

### Requirement 3(3)(c) Compliant

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

### Requirement 3(3)(d) Compliant

*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.*

### Requirement 3(3)(e) Compliant

*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.*

### Requirement 3(3)(f) Compliant

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

### Requirement 3(3)(g) Compliant

*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 COMPLIANTServices and support for daily living

### 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.

## Assessment of Standard 4

The Quality Standard is assessed as Compliant as seven of the seven specific Requirements have been assessed as Compliant.

The Assessment Team found most consumers sampled considered that they get the services and supports for daily living that are important for their health and well-being and enable them to do the things they want to do. The following examples were provided by consumers during interviews with the Assessment Team:

* are supported to do things they like to do.
* satisfied with the activity program and have a variety of things to do, including an individualised lifestyle program.
* supported to keep in touch with people who are important to them and have private spaces within the service to maintain their relationships with others.

Initial and ongoing assessment processes assist to identify each consumer’s background, needs and preferences, including life story and experiences, past and current interests and religious and cultural practices. Individualised care plans are developed from information gathered and include support strategies to assist staff to deliver care and services in line with consumers’ needs and preferences. For sampled consumers, staff described what was important to consumers and how they assist and support consumers to do things important to them.

The lifestyle program includes a range of activities and takes into consideration consumers’ functional ability. The program incorporates the eight elements of holistic wellness to ensure consumers are provided a well-balanced and varied schedule of activities. The activity schedule is reviewed on a regular basis. Consumers and representatives sampled stated staff are attentive to consumers’ emotional and psychological well-being and staff sampled provided examples of how they support consumers’ emotional and psychological well-being.

Care plan documentation sampled included information relating to how consumers are supported to participate in the community, maintain friendships and identified people who are important to them. Additionally, consumer files sampled demonstrated information about consumers’ conditions, needs and preferences is documented and communicated within the service and with others where responsibility is shared. Staff described referral processes, including volunteer services and external organisations.

The service has processes to identify each consumer’s nutrition and hydration needs and preferences. Catering staff described how they use consumers’ dietary information to ensure meals are provided in line with consumers’ needs, goals and preferences. The service’s menu offers a range of meal options which are balanced and of suitable quality and quantity. Consumers sampled stated they like the food and are provided alternatives. Consumer satisfaction with meals was also demonstrated through the results of a recent food survey.

The Assessment Team observed equipment provided to consumers to be clean, safe and well maintained. Scheduled audits, cleaning and maintenance programs are in place to ensure equipment is safe and maintained. These processes were supported by feedback provided to the Assessment Team by cleaning and maintenance staff.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 4 Services and supports for daily living.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*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.*

### Requirement 4(3)(b) Compliant

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

### Requirement 4(3)(c) Compliant

*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.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

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

### Requirement 4(3)(f) Compliant

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

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### 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.

## Assessment of Standard 5

The Quality Standard is assessed as Compliant as three of the three specific Requirements have been assessed as Compliant.

The Assessment Team found overall, consumers considered that they feel they belong in the service and feel safe and comfortable in the service environment. The following examples were provided by consumers during interviews with the Assessment Team:

* happy with the environment and feel their family members were made to feel welcome when they visited.
* confirmed the environment was safe, clean and well maintained.
* confirmed they can access outdoor areas.

The Assessment Team observed the service environment to be welcoming and easy to understand and optimised consumers’ sense of belonging, independence, interaction and function. Additionally, the environment was noted to be safe, clean, well maintained and comfortable. Consumer rooms were also noted to be decorated with consumers’ personal belongings. Consumers are able to move freely both indoors and outdoors and were seen to be enjoying the outdoor areas, frequenting the café and walking in the garden.

There are preventative and reactive maintenance processes in place and maintenance staff described how maintenance tasks are reported, actioned and resolved. Cleaning processes are in place and staff described their responsibilities for cleaning, including specific processes related to COVID-19. Contracted services are utilised to maintain and inspect the service environment and equipment.

The Assessment Team found the organisation has monitoring processes to ensure a safe and comfortable service environment is provided that promotes consumers’ independence, function and enjoyment.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 5 Organisation’s service environment.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

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

### Requirement 5(3)(b) Compliant

*The service environment:*

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

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANTFeedback and complaints

### 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.

## Assessment of Standard 6

The Quality Standard is assessed as Compliant as four of the four specific Requirements have been assessed as Compliant.

The Assessment Team found overall, sampled consumers consider that they are encouraged and supported to give feedback and make complaints, and appropriate action is taken. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* they would talk to staff if they had an issue.
* are aware of other methods of raising complaints, including through the use of advocacy groups, meeting forums and surveys.
* confirmed the service actions their feedback.

Consumers and representatives are provided with information in relation to internal and external feedback and complaints avenues, language services and advocacy services on entry. Information in relation to feedback mechanisms and advocacy was also observed displayed throughout the service. Consumers are encouraged and supported to provide feedback through a range of avenues, including meeting forums, surveys and directly to management during daily ‘walk arounds’.

Staff described how they support consumers to raise concerns, including assisting consumers to complete feedback forms or notifying senior staff. Management demonstrated an awareness of open disclosure principles and practices and described an incident where open disclosure processes had been applied.

A complaints register is maintained and documentation viewed by the Assessment Team demonstrated appropriate actions had been initiated in response to complaints, in line with the service’s process. Documentation viewed demonstrated feedback and complaints are reviewed and used to improve the quality of care and services.

The Assessment Team found the organisation has monitoring processes to ensure input and feedback from consumers, carers, the workforce and others is sought by the service and used to inform continuous improvements for individual consumers and the organisation.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 6 Feedback and complaints.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

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

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANT Human resources

### 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.

## Assessment of Standard 7

The Quality Standard is assessed as Compliant as five of the five specific Requirements have been assessed as Compliant.

The Assessment Team found consumers sampled considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. The following examples were provided by consumers and representatives during interviews with the Assessment Team:

* staff come promptly and attend to care needs when required.
* satisfied staff are skilled enough to meet consumers’ care needs.
* satisfied with the level of knowledge of staff.
* satisfied with call bell response times.

There are processes to ensure the workforce is planned and the number and mix of staff deployed enables delivery of quality care and services. The service has processes to ensure the skill mix of employees is considered in addition to staffing levels based on occupancy rates and acuity of consumers. There are processes to manage planned and unplanned leave.

The Assessment Team observed staff interactions with consumers to be kind, caring and respectful. Monitoring processes ensure staff undertake their duties in a respectful manner. Documentation viewed by the Assessment Team demonstrated where a complaint had been received relating to staff being disrespectful, appropriate action had been taken.

Recruitment and initial onboarding processes, in addition to a scheduled training program ensure staff have the relevant knowledge and qualifications to perform their roles. Annual competencies are undertaken by staff in line with their scope of practice. Documentation viewed by the Assessment Team confirmed staff training is monitored and there are processes to follow -up where training has not been completed within the required time frame. Staff interviewed said they receive training, support and professional development opportunities and are supervised in their role by nursing staff.

A staff performance appraisal and development process is in place, including probationary and annual reviews. Performance review processes, feedback, clinical indicator trends/findings and audits are used by management to identify staff knowledge and skills deficits. Staff interviewed described how the performance appraisal process works for them and how they have been supported to undertake additional training.

The Assessment Team found the organisation has monitoring processes to ensure the workforce is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 7 Human resources.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*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.*

### Requirement 7(3)(b) Compliant

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

### Requirement 7(3)(c) Compliant

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

### Requirement 7(3)(d) Compliant

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

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANTOrganisational governance

### 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.

## Assessment of Standard 8

The Quality Standard is assessed as Compliant as five of the five specific Requirements have been assessed as Compliant.

The Assessment Team found overall, consumers and representatives sampled considered that the organisation is well run and they can partner in improving the delivery of care and services. The following examples were provided by consumers during interviews with the Assessment Team:

* described being involved in the delivery and evaluation of care and services through meeting forums and care plan review processes.
* the service is well run as staff know what they are doing, staffing is sufficient and staff are approachable.

The organisation has a governance structure to support all aspects of the organisation, including information management, continuous improvement, financial governance, workforce and clinical governance, regulatory compliance and feedback and complaints. There are processes to ensure these areas are monitored and reported at various service and organisational meeting forums and to the Board. Board members have had training on the Aged Care Quality Standards and are aware of their responsibilities. The values of the governing body are promoted and communicated throughout the service.

Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement through a range of avenues, such as focus groups, meeting forums, feedback processes and surveys. Improvements within the service are communicated to consumers and representatives through meeting forums and email correspondence.

The organisation demonstrated effective risk management systems and practices in relation to identifying and responding to abuse and neglect of consumers; and supporting consumers to live the best life they can. Additionally, the organisation has policies and procedures to guide staff practice in relation to antimicrobial stewardship, minimising use of restraint and open disclosure. Staff interviewed demonstrated an awareness of these policies and described how they implement these within the scope of their roles.

Based on the evidence documented above, I find Allity Pty Ltd, in relation to Smithfield Residential Care Centre, to be Compliant with all Requirements in Standard 8 Organisational governance.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

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

### Requirement 8(3)(c) Compliant

*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.*

### Requirement 8(3)(d) Compliant

*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.*

### Requirement 8(3)(e) Compliant

*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.*

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.