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:** | Tuart Lodge |
| **RACS ID:** | 7268 |
| **Name of approved provider:** | Air Force Association (Western Australian Division) Incorporated |
| **Address details:**  | 19 Hughie Edwards Drive MERRIWA WA 6030 |
| **Date of site audit:** | 29 July 2019 to 31 July 2019 |

**Summary of decision**

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| **Decision made on:** | 29 August 2019 |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. |
| **Decision:** | To re-accredit the service under section 41 of the Rules. |
| **Further period of accreditation:** | 01 September 2019 to 01 September 2022 |
| **Assessment of performance with the Aged Care Quality Standards** |
| Standard 1 Consumer dignity and choice | Met |
| Standard 2 Ongoing assessment and planning with consumers | Met |
| Standard 3 Personal care and clinical care | Met |
| Standard 4 Services and supports for daily living | Met |
| Standard 5 Organisation’s service environment | Met |
| Standard 6 Feedback and complaints | Met |
| Standard 7 Human resources | Met |
| Standard 8 Organisational governance | Met |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 48 of the Rules.**

## Introduction

**This is the report of an assessment of Tuart Lodge (the Service) conducted from 29 July 2019 to 31 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 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 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** |
| --- | --- |
| Therapy assistant | 1 |
| Consumers | 6 |
| General manager residential services | 1 |
| Quality coordinator | 1 |
| Care staff | 5 |
| Representatives | 8 |
| Registered nurses | 2 |
| Acting facility manager | 1 |
| Clinical care coordinator | 1 |
| Residential care coordinator | 1 |
| Hospitality/domestic staff | 4 |
| Maintenance officer | 1 |
| Enrolled nurse | 1 |
| Occupational therapist | 1 |
| Chef | 1 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

The organisation:

a) has a culture of inclusion and respect for consumers; and
b) supports consumers to exercise choice and independence; and
c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found the organisation has met all six requirements of Standard 1. Of consumers and representatives randomly sampled, 100% confirmed they are treated with respect and dignity all or most of the time.

Staff were observed to interact with consumers respectfully and could readily identify consumer’s individual preferences and interests. The service promotes the value of diversity and culture through staff training and in a 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 and representatives report the organisation protects the privacy and confidentiality of their information and they are satisfied care and services, including personal care, are undertaken in a way that respects their privacy.

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 (a) Met

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

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

The organisation demonstrates that care and services are culturally safe.

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

The organisation demonstrates that each consumer is supported to exercise choice and independence, including to:
i) make decisions about their own care and the way care and services are delivered; and
ii) make decisions about when family, friends, carers or others should be involved in their care; and
iii) communicate their decisions; and
iv) make connections with others and maintain relationships of choice, including intimate relationships.

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 2:

The Assessment Team found the organisation has met all five requirements of Standard 2. Of consumers and representatives randomly sampled, 100% confirmed they get the care they need all or most of the time.

The organisation has various processes in place to support and deliver safe and effective care and services. Relevant risks to consumers safety, health and wellbeing are assessed and included in planning consumers care. This included advance care planning and end of life planning where applicable.

The organisation demonstrated ongoing partnering with consumers and the inclusion of others involved in the care of consumers.

The organisation demonstrated that current care plans are readily available to staff, and they demonstrated that outcomes of assessment and planning are available and are effectively communicated to the consumer.

Consumers and representatives report satisfaction with the assessment planning and delivery of care and services that are safe and effective.

Staff are provided with training and education to ensure they have the skills and knowledge to provide appropriate care and services.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that assessment and planning:

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

The Assessment Team found that the organisation meets all seven requirements under this standard. 100% said they felt safe always or most of the time and they get the care they need most of the time or always.

The organisation has systems and processes relative to the services they deliver that support the workforce to recognise, and respond to a consumer whose function, capacity or health condition changes or deteriorates. There are processes to identify and escalate concerns, so the organisation can assess and evaluate the situation and take action.

All consumers and representatives interviewed felt that each consumer receives safe and effective personal and clinical care that is tailored to their needs and optimises their health and well-being.

Staff delivers personal and clinical care and manages risk in a way that balances the consumers rights and preferences with their safety and the safety of others.

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

The organisation has developed and implemented and effective infection prevention and control program that is in line with national guidelines.

#### Requirements:

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

The organisation demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:
i) is best practice and
ii) is tailored to their needs and
iii) optimises their health and well-being.

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

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

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

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

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

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

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

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

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

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

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

The organisation demonstrates that minimisation of infection related risks through implementing:

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 4:

The Assessment Team found all seven requirements under Standard 4 were met. Of consumers and representatives randomly sampled, 100% confirmed they are encouraged to do as much as possible for themselves all or most of the time.

The organisation adequately demonstrated they make timely referrals to other organisations, provide quality meals and provide safe clean and well-maintained furniture.

Staff reported consulting with consumers about their needs, goals and preferences and individualising the care to meet these goals. Consumers and representatives reported being consulted about activities and things of interest to them and being encouraged to socialise within the service environment. Consumers also reported being supported to maintain social and personal relationships, and to participate in the community outside the organisation where able.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that services and supports for daily living assist each consumer to:
i) participate in their community within and outside the organisation’s service environment; and
ii) have social and personal relationships; and
iii) do the things of interest to them.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

The Assessment Team found that the organisation meets all three requirements under this standard. Of consumers and representatives randomly sampled, 100% confirmed they feel at home at the service.

The service was observed to be welcoming, clean and well maintained. The layout of the service environment enables consumers to move around freely, with suitable furniture, fittings and signage to help consumers navigate the area. Consumers have access to quiet areas and indoor and outdoor areas, including small gardens with tables and chairs. Consumers and representatives reported being able to access all areas when they wished to.

Staff confirmed procedures for the purchase, service and maintenance of furnishings and equipment, and document reviews confirmed the procedures were actioned. Management advised maintenance issues are discussed and recorded along with consumer feedback on the service environment.

#### Requirements:

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

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

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

The organisation demonstrates that the service environment:
i) is safe, clean, well maintained and comfortable; and
ii) enables consumers to move freely, both indoors and outdoors.

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

The Assessment Team found all four requirements under Standard 6 were met.

The organisation recognises that consumers have the right to make complaints about the care and services they receive from the organisation. Consumers are made aware of, and supported to, access alternative, external complaints handling options.

The organisation's complaint system gives every consumer equal access to make a complaint.

The organisation aims to have a best practice system for managing and resolving complaints for consumers, including an open disclosure process.

The organisation has a system to improve how they deliver care and services using information from complaints.

#### Requirements:

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

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

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

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

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

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

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

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

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found all five requirements under Standard 7 were met.

The organisation has a system to work out workforce numbers and the range of skills staff need to meet consumers’ needs and deliver safe and quality care and services.

The workforce behaves in a kind, caring and respectful way.

The workforce has the skills, qualifications and knowledge they need for their role to provide care and services. The organisation has systems to monitor staff scope of practice, responsibilities and skills.

The organisation reviews training, learning and development needs of the workforce regularly and when practices change. The organisation supports its staff to take up training, learning and development opportunities, so they can meet the needs of their role.

The organisation regularly assesses the performance and the capabilities of its workforce and performance reviews support continuous improvement and development of staff.

#### Requirements:

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

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

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

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

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

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

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

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

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

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

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found all five requirements under Standard 8 were met.

The organisation asks for input from a wide range of consumers about their experience and the quality of the care and services they receive, and this information is reviewed and responded to.

The organisation’s governing body is committed to, and leads, a culture of safety and quality improvement.

The organisation has effective information and financial management systems and feedback/reporting processes in place, actively purses continuous improvement and regularly monitors compliance with relevant legislation, regulations and guidelines, and supports and develops its workforce to deliver safe and quality care and services.

The organisation has systems and processes to identify and assess risks to health, safety and well-being of consumers. The organisation uses this information to improve its performance and how it delivers quality care and services.

The organisation is governed by a board and has an established organisational structure with defined roles and responsibilities. Clinical governance is the primary responsibility of the clinical governance committee, and a clinical governance framework is being developed. Management of the organisation and key personnel at the service have particular areas of responsibility for clinical leadership and systems that improve safety and quality.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that effective organisation wide governance systems relating to the following:
i) information management
ii) continuous improvement
iii) financial governance
iv) workforce governance, including the assignment of clear responsibilities and accountabilities
v) regulatory compliance
vi) feedback and complaints

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

The organisation demonstrates that effective risk management systems and practices, including but not limited to the following:
i) managing high-impact or high-prevalence risks associated with the care of consumers
ii) identifying and responding to abuse and neglect of consumers
iii) supporting consumers to live the best life they can

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

The organisation demonstrates that where clinical care is provided - a clinical governance framework, including but not limited to the following:
i) antimicrobial stewardship
ii) minimising the use of restraint
iii) open disclosure