Accreditation Decision

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

**Service and approved provider details**

|  |  |
| --- | --- |
| **Name of service:** | Uniting Lillian Wells North Parramatta |
| **RACS ID:** | 2774 |
| **Name of approved provider:** | The Uniting Church in Australia Property Trust (NSW) |
| **Address details:** | 2B Fennell Street NORTH PARRAMATTA NSW 2151 |
| **Date of site audit:** | 02 October 2019 to 04 October 2019 |

**Summary of decision**

|  |  |  |
| --- | --- | --- |
| **Decision made on:** | 16 October 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:** | 08 November 2019 to 08 November 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Met |
| Requirement 3(3)(e) | | Met |
| Requirement 3(3)(f) | | Met |
| Requirement 3(3)(g) | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Requirement 4(3)(a) | | Met |
| Requirement 4(3)(b) | | Met |
| Requirement 4(3)(c) | | Met |
| Requirement 4(3)(d) | | Met |
| Requirement 4(3)(e) | | Met |
| Requirement 4(3)(f) | | Met |
| Requirement 4(3)(g) | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Met |
| Requirement 5(3)(c) | | Met |
| Standard 6 Feedback and complaints | | Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Met |
| Requirement 6(3)(d) | | Met |
| Standard 7 Human resources | | Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Met |
| Requirement 8(3)(e) | | Met |

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

Site Audit Performance   
Assessment Report

The Commission makes the decision taking into account this Site Audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this Site Audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Uniting Lillian Wells North Parramatta (the Service) conducted from 02 October 2019 to 04 October 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Service against the Aged Care Quality Standards (the Quality Standards) in accordance with the Aged Care Quality and Safety Commission Rules 2018.**

This report contains detailed findings about the performance assessment of the Service against each Quality Standard and the requirements within each Quality Standard. The Quality Standard and assessed requirements are rated as either Met or Not Met.

A Met rating for the Quality Standard means that all requirements of that Quality Standard have been assessed and rated as Met

A Not Met rating for the Quality Standard means that one or more requirements of that Quality Standard has been assessed and one or more of those requirements have been rated as Not Met.

There will be no rating of the Quality Standard if only some of the requirements have been assessed and those requirements have been rated as Met.

This Report is to be read in conjunction with the Quality Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Quality Lead | 1 |
| Business Lead | 1 |
| Head of Residential Operations | 1 |
| Quality Improvement Specialist | 1 |
| Assets manager/maintenance | 1 |
| Representatives | 8 |
| Acting Service Manager | 1 |
| Care Manager | 1 |
| Registered nurse | 2 |
| Consumers | 9 |
| Service Manager (Acting) | 1 |
| Catering manager | 1 |
| Cleaning staff | 1 |
| Catering staff | 2 |
| Administration staff | 2 |
| Physiotherapist | 1 |
| Care staff | 6 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

2. The organisation:

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

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

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

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

17 consumer/representatives were interviewed at random.

100% of consumer/representatives interviewed said that “staff treat them with respect”, “they are encouraged to do as much as possible for themselves” and that “staff explain things to them” most of the time or always.

100% of consumer/representatives said that they “feel at home here” most of the time or always

Uniting Lillian Wells North Parramatta is operated by Uniting a member of the Uniting Church.

The organisation uses regular feedback through the comments and complaints system, ongoing assessment of consumers’ needs and preferences, staff appraisals, audits, surveys, data collection, resident and relative meetings and regular care conferencing and informal feedback through conversations with consumers/representatives 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. Consumers were observed to have visitors of choice at any time of day. Staff were observed to interact with consumers respectfully and could readily identify consumer’s individual preferences and interests. Consumers/representatives described the ways their social connections are supported both inside and outside the service and these were communicated in the Uniting Lilian Wells Nursing Home monthly newsletter. The service promotes the value of culture and diversity through staff training aligned with the Uniting Capability Framework (2019), and current Aged Care Quality and Safety Standards. Culture and diversity are reflected in the wide range of activities Lilian Wells Nursing Home offers for consumers with diverse backgrounds and preferences and in delivery of care that is person centred. Staff could provide meaningful examples of how they help consumers make choices to connect with and engage in social activities of choice within and outside the home. Consumers/representatives and staff said they feel listened to and confident to raise issues, knowing these will be followed up and action communicated back to them. Staff could provide examples of enabling consumers/representatives to make decisions about their life, even when it involves an element of risk.

Consumers/representatives said the organisation protects the privacy and confidentiality of their information, and that they are very satisfied that care and services, including personal care, which is undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of consumers. They could demonstrate their understanding of privacy, respect and compassion by recognising that consumers may wish to have quiet time in their room and sometimes need to express emotion privately. Staff were observed knocking doors and waiting to be invited to enter and offering a compassionate gesture of comfort. 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**

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

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

The organisation demonstrates that care and services are culturally safe.

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

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 2:

The assessment team found that all of the five requirements related to Standard 2 were met.

17 consumer/representatives were interviewed at random.

Consumer experience interviews show that 100% confirmed that they have a say in their daily activities most of the time or always. Most consumers were able to explain how they have been involved in care conferences and review of their care plans.

Staff could describe how consumers and others who contribute to the consumers care (including medical practitioners, allied health professionals, representatives and relevant family members) work together to plan and review tailored care. Staff demonstrated understanding of adverse incidents and how these were identified, documented and reviewed by the service to inform continuous improvement.

The service has a system for regular and responsive reassessment and planning of care and services including consideration of risks to the consumers health and well-being. An additional round of case conferences and review of care plans is occurring to provide each consumer and their representative an opportunity to adjust and sign their care plan.

Assessment and planning identifies and addresses the consumers current needs. On most of the consumer files reviewed, the service identified goals and preferences of the consumer in each area of the care plan. Over 80% of consumers at the service have chosen to complete advanced care directives.

The registered nurse or care team manager communicates the outcomes of assessments and recommended care plan through timely discussions and case conferences.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that assessment and planning:

(i) is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and

(ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

#### The Assessment Team found that all requirements in relation to standard 3 were met.

17 consumer/representatives were interviewed at random.

Consumer experience interviews show that 100% of consumers indicated they get the care they need most of the time or always and 100% of consumers responded they feel safe most of the time or always.

Staff were able to describe how they can easily access policies, their opportunities for education, and how they ensure information is shared both within and with others who partner in providing care.

Timely referrals occur to medical practitioners, specialists, allied health professionals and spiritual leaders.

A nurse practitioner visits the service regularly and reviews consumers who are unwell and assists with management of palliative care. Consumers end of life wishes are documented and staff are respectful of the consumers wishes. Care staff and the service’s chaplain and or the consumers preferred spiritual support provide emotional support and guidance to the consumer and their family during palliative care.

Care staff demonstrated an understanding of infection control, including regular handwashing.

The assessment team was satisfied that care is provided in accordance with the organisation best practice policy and guidelines and optimises consumer well-being.

Consumer experience interviews show that 100% of consumers said that staff explain things to them most of the time or always.

This was further evidenced by observations of consumers remaining in bed for extended periods. Some of the staff acknowledged that they adjust the care delivered when they are busy but advise consumers if this is considered to impact on an individual consumer’s care. Incidents are analysed, and care adjusted. Incidents are reported through the organisation’s electronic information management system.

#### Requirements:

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

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

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

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

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

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

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

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

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

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

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

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

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

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

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

(i) standard and transmission based precautions to prevent and control infection; and

(ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 4:

17 consumer/representatives were interviewed at random.

100% of consumer/representatives interviewed said they “like the food” most of the time or always.

100% of consumer/representatives said that they “are encouraged to do as much as possible for themselves” most of the time or always

The Assessment Team found that all seven requirements in relation to Standard 4 were met. consumers/representatives interviewed said they are very satisfied with the services they receive at the home. Representatives described improvements in their consumer’s clinical, psychological health and wellbeing between entering the home and present.

The lifestyle and pastoral teams described interviews with consumers/representatives to inform completion of a full B10 Lifestyle assessment form, including history of culture, work life and preferences and provided examples demonstrating knowledge of social and cultural preferences and understanding of consumer behaviours. Staff provided examples of pastoral support for consumers, if requested, and of support to access spiritual and cultural leaders and services of choice. All consumers/representatives interviewed said staff were kind and caring and a few gave examples of emotional support offered when they were feeling down. Representatives were aware of how to access the Lillian Wells Support Group.

The organisation demonstrated that it supports consumers to connect with other supports and people outside the service and consumers were observed enjoying live music and dancing with staff, including engaging in recreational activities, bus outings and enjoying quiet time. Staff were observed consulting consumers giving choice about participating in activities of interest to them within the service and offering choice for consumers not to take part or to choose alternative activities on the daily program.

Consumers/representatives described suggestions put forward and how these were included in design of the consumer/representative newsletter and menu options. Representatives were especially appreciative of the level of updates received about their consumer’s condition and enjoyment of activities. Consumers were observed moving independently between indoor and outdoor spaces.

The organisation demonstrated relevant knowledge and application of effective strategies to support consumers with mental health conditions and consumers with psychological and behavioural issues. The organisation demonstrated that it makes timely referrals to other organisations.

The organisation demonstrated that it provides meals of a suitable quality, variety and quantity that are enjoyed by consumers and that it provides safe, suitable, clean well-maintained fixtures, fittings and an outdoor courtyard and gardens. A refurbishment project is currently underway to support the home’s care model.

#### Requirements:

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

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

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

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

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

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

(i) participate in their community within and outside the organisation’s service environment; and

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

The Assessment team found the organisation demonstrated that all requirements in relation to Standard 5 are met.

17 consumer/representatives were interviewed at random.

100% of consumer/representatives interviewed said they “feel safe at the home” most of the time or always.

100% of consumer/representatives said that they “feel at home here” most of the time or always

The organisation demonstrated that they are providing consumers with a safe and comfortable environment that they find welcoming, easy to understand, and that optimises each consumer’s sense of belonging, independence, interaction and function.

Consumers/representatives interviewed are happy with the service environment stating that it is relaxed, welcoming, safe and comfortable.

Uniting Lillian Wells is located in the thriving Sydney suburb of North Parramatta close to shops, transport and medical services.

Consumers reside in single and shared rooms located in the Grevillea, Jacaranda and Wisteria Wings. Wings are linked to the central administration area, communal dining, lounge, activities areas and outdoor garden. Consumer/representatives felt that the environment assisted consumers to maintain independence. They stated that a well maintained, clean and hygienic environment was maintained at all time. Consumers said they are consulted and kept up to date regarding proposed changes to the environment citing as an example the building/refurbishment project currently underway. They are looking forward to the completion of this project which will improve the living environment creating a more homelike atmosphere.

The service was observed to be welcoming with spaces for consumers to interact with others and spaces for quiet reflection in the wings, the administration block and outdoors. The current staged building refurbishment project will increase the number of smaller quiet indoor areas where consumers can relax in comfort. Consumers are welcome to decorate their rooms with memorabilia, photographs and other personal items. The Assessment Team observed that the layout of the building enables consumers to move freely around both indoors and out, with suitable well-maintained furniture, fittings and equipment provided. The outdoor courtyard is well used as it is popular with consumers and visitors alike.

The organisation demonstrated that the services environment including furnishing fittings and equipment are safe, clean, well maintained and comfortable; and enables consumers to move freely, both indoors and outdoors. It employs a range of effective strategies to maintain this. These include policies and procedures for the purchase, service and maintenance of furnishing and equipment, a cleaning program and systems to identify and manage environment risks. Management and staff interviewed confirmed that they are familiar with the use of these systems.

#### Requirements:

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

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

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

The organisation demonstrates that the service environment:

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

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

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

17 consumer/representatives were interviewed at random.

100% of consumers/representatives said “staff follow up when you raise things with them" most of the time or always.

Interviews with 17 consumers/representatives revealed that they are aware of, and feel comfortable to use the feedback mechanisms, which include both internal and external complaint mechanisms. For example, meetings with management, the residents’ meetings, staff meetings, use of feedback forms for feedback and complaints, and external complaints bodies and advocacy groups.

The organization demonstrates that consumers are encouraged and supported to provide feedback and/or make a complaint. Management and staff have participated in relevant training and could describe how they support consumers to provide feedback or make a complaint.

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. For example, the service provides a choice of well-publicized complaint mechanisms that can be used by stakeholders including consumers, relatives and staff.

The organisation demonstrated that feedback and complaints are reviewed by management and the Board and is being used to improve the quality of care and services for individuals or across the organisation. Numerous examples of the services responsiveness to feedback and complaints were provided.

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

#### Requirements:

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

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

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

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

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

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

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

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

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found that all the requirements of Standard 7 were met.

17 consumer/representatives were interviewed at random. They said “staff are kind and caring”, “staff know what they are doing” and “they get the care they need”.

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, respectful and compassionate.

The organisation demonstrated the workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. A system is in place to monitor staff performance. Regular performance appraisal has been replaced with ‘Continuous Conversations’. Staff recruitment is ongoing. The number and mix of staff is appropriate to enable safe and quality care and services. For example, rostered shifts are consistently filled and registered nurses are available to provide care to consumers 24 hours per day.

Staff have appropriate qualifications, skills and knowledge to effectively perform their roles. The Assessment Team observed effective strategies being applied to support safe and effective care of consumers with dementia and mental health conditions, including strategies trialled to minimise or avoid use of chemical and physical restraint. The Training calendar and register evidences a range of training and education relevant to the current Age Care Quality Standards is offered and attended.

Regular performance appraisal has been replaced with ‘Continuous Conversation’ increasing the rate of appraisal which are on target for completion December 2019.

#### Requirements:

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

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

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

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

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

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

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

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

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

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

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment team found the organisation demonstrated that all requirements in relation to Standard 8 are met.

***Consumer Experience Interviews***

17 consumer representatives were interviewed at random.

100% of consumer/representatives interviewed said “the place is well run” most of the time or always.

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 are engaged on a day to day basis.

Consumers and representatives interviewed confirmed that they can partner in improving the delivery of care and services. Consumer/representatives said they are involved in care and service planning, delivery and evaluation, providing various examples of how this occurs in practice.

The Uniting governing body and executive teams meet regularly, set 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 effectively addresses anti-microbial stewardship, open disclosure and minimising the use of restraint. Management and staff interviewed understood these concepts and could explain how they were applied in practice.

#### Requirements:

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

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

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

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

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

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

(i) information management

(ii) continuous improvement

(iii) financial governance

(iv) workforce governance, including the assignment of clear responsibilities and accountabilities

(v) regulatory compliance

(vi) feedback and complaints

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

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

(i) managing high-impact or high-prevalence risks associated with the care of consumers

(ii) identifying and responding to abuse and neglect of consumers

(iii) supporting consumers to live the best life they can

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

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

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure