



Site Audit Performance Assessment Report

Service details

Service name: James Grimes Care Centre
Commission ID: 5959
Provider name: Sundale Ltd
Location: 35 Doolan Street NAMBOUR QLD 4560
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Email address: ceo@sundale.org.au
Type/s of service: Residential care

Publication of report

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

Introduction

This is the report of an assessment of James Grimes Care Centre (the Service) conducted from 01 October 2019 to 03 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
Care staff	8
Chief executive officer	1
Consumers	17
Executive manager of aged care	1
Head chef	1
Health and safety representative	1
Housekeeping supervisor	1
Human resource manager	1
Lifestyle coordinator	1
Maintenance officer	1
Nurse educator	1
Pastoral carer	1
Registered staff	5
Representatives	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 service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- All respondents said staff treat consumers with respect most of the time or always.
- A high proportion of respondents (86%) said staff explain things to them. One respondent said staff never explain things to them and one consumer said staff explain things to them some of the time.
- A high proportion of respondents (86%) said consumers are encouraged to do as much as possible for themselves most of the time or always. Two respondents said they are never encouraged to do as much as possible for themselves explaining they are either not permitted to stand or must have staff assistance to walk. Risk assessments conducted by the service identified both respondents as requiring staff assistance to mobilise and that one consumer is unable to weight bear in safety.

The service uses informal and formal feedback mechanisms such as meetings, complaints processes and case conferences 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 service demonstrated that consumers are treated with dignity and respect and that the service actively promotes a culture of inclusion. Staff were observed to interact with consumers respectfully and provided examples of consumers' individual preferences and interests. Consumers described the ways their social connections are supported both inside



and outside the service. The service promotes the value of culture and diversity through staff training, in the range of activities it offers for consumers with diverse backgrounds, and in celebrating and acknowledging days of significance to the consumers. Consumer preferences are respected and incorporated into care delivery.

Staff could provide meaningful examples of how they help consumers make choices, including how they respect their rights to take risks. Consumers said they are able to make decisions about their life and can involve others in decision making.

Consumers said the organisation protects the privacy and confidentiality of their information, and that they are satisfied that care and services, including personal care, are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of consumers. The service demonstrated how electronic and hard copy information 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:

- (i) make decisions about their own care and the way care and services are delivered; and
- (ii) make decisions about when family, friends, carers or others should be involved in their care; and
- (iii) communicate their decisions; and
- (iv) make connections with others and maintain relationships of choice, including intimate relationships.

Standard 1 Requirement 3(d) Met

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

Standard 1 Requirement 3(e) Met

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

Standard 1 Requirement 3(f) Met

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



Standard 2:

Ongoing assessment and planning with consumers

Met

Consumer outcome:

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

Organisation statement:

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

Summary of Assessment of Standard 2:

The Assessment Team found that the service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- All respondents said consumers get the care they need most of the time or always

Consumers and their representatives said consumers always have a say in their daily activities. Consumers said their direct engagement in the initial and ongoing assessment and planning of their care helps them to get the care and services they need. Consumers reported feeling safe and confident that staff listen to their preferences, and that the service seeks input from other professionals to ensure they get the right care and services to meet their needs. Staff could describe how consumers and others who contribute to the consumer's care (including medical practitioners, allied health professionals, carers and family) work together to deliver a tailored care and service plan and monitor and review the plan as needed.

The service's monitoring system identified consumer's individual advance care planning and end of life planning has not been consistently captured for all consumers currently residing in the service. The service is consulting with consumers and their representatives about their advance care planning and end of life needs, goals and preferences on entry to the home and on an ongoing basis. Consumers and their representatives said they are consulted when there is a change in healthcare needs and documentation indicates consumers or consumers' representatives are consulted about individual needs of the consumer. Management said the service has a process in place to ensure all consumers have the opportunity to be involved in the assessment and planning of the consumer's individualised advance care planning and end of life plan, when they choose to do so.

Consumers reported that their care and services are regularly reviewed and that when something goes wrong, or their needs or preferences change, the organisation is quick to communicate with them and seek their input to update the care and services they are getting.



Each of the care and service plans reviewed showed plans had been regularly reviewed (with changes made) and included a date by which the next review of care and services must be undertaken. Staff demonstrated an understanding of adverse incidents or near-miss events and how these were identified, documented and reviewed by the service, to inform continuous improvement.

Requirements:

Standard 2 Requirement 3(a) Met

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

Standard 2 Requirement 3(b) Met

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

Standard 2 Requirement 3(c) Met

The organisation demonstrates that assessment and planning:

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

Standard 2 Requirement 3(d) Met

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

Standard 2 Requirement 3(e) Met

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

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

Consumer outcome:

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



Organisation statement:

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

Summary of Assessment of Standard 3:

The Assessment Team found that the service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- All respondents said consumers get the care they need most of the time or always.

Consumers and their representatives expressed they receive personal and clinical care which meets their needs, and preferences. Consumers advised there is sufficient members of the workforce readily available to assist when required and the mix of workforce members enables them to receive tailored personal and clinical care that optimises their health and well-being.

Consumers say they always get the care they need and gave various examples of how staff ensured the care provided was right for them. This included regularly asking them about their care and the way it is delivered and through involving consumers in providing feedback on how staff deliver their personal and clinical care needs.

Staff meet consumers' personal care, clinical care or both personal and clinical care which they tailor to consumers' preference. They can identify high prevalent risks and utilise other health professionals to support consumers' personal and clinical needs. Members of the workforce exercise best practice through organisational support and seek opportunities for continuing professional development.

Staff could describe how there are opportunities for continuing education that is based on best practice and how they ensure that information is shared both within the organisation and with others outside the organisation. Care staff demonstrated an understanding of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics. Staff could identify strategies to manage consumers with high prevalence risks.

Each care plan is reviewed three-monthly and indicates the delivery of safe and effective care. This includes a review of care of consumers whose condition changed or at the end of their life. A focus on pain relief, review of pain management strategies and close involvement of family and others was evident.

The organisation consults with consumers when high impact or high prevalence risks are identified such as bed rails and supports consumers through risk assessments to make decisions about their care ensuring their physical, emotional and psychological preferences are met and risks minimised.



The organisation demonstrated they have policies and procedures underpinning the delivery of care and how they review practice and policies to ensure they remain current and informed by advice from consumers and other health professionals.

Requirements:

Standard 3 Requirement 3(a) Met

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

- (i) is best practice and
- (ii) is tailored to their needs and
- (iii) optimises their health and well-being.

Standard 3 Requirement 3(b) Met

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

Standard 3 Requirement 3(c) Met

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

Standard 3 Requirement 3(d) Met

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

Standard 3 Requirement 3(e) Met

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

Standard 3 Requirement 3(f) Met

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

Standard 3 Requirement 3(g) Met

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

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



Standard 4: Services and supports for daily living

Met

Consumer outcome:

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

Organisation statement:

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

Summary of Assessment of Standard 4:

The Assessment Team found that the service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- All respondents said consumers have a say in their daily activities most of the time or always.
- A high proportion of respondents (86%) said consumers like the food most of the time or always. Two consumers said they like the food some of the time explaining that either the meals are not consistently tasty and/or they feel the chef is not sufficiently skilled.

Consumers interviewed said they are satisfied with the service they receive especially in relation to supports for daily living and their physical care. Consumers said they usually had someone to talk to when needed and that staff were available to provide emotional support. Consumers also said they were satisfied with the activities offered at the service and were able to provide advice about activities of interest to them within the service.

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

Management could demonstrate the services and support for daily living provided at the service are monitored and reviewed, and improvements are made where needed.

Requirements:

Standard 4 Requirement 3(a)

Met

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



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

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

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

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

- (i) participate in their community within and outside the organisation's service environment; and
- (ii) have social and personal relationships; and
- (iii) do the things of interest to them.

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

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

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

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

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

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

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

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

**Standard 5:
Organisation's service environment** **Not Met**

Consumer outcome:

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

Organisation statement:

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

Summary of Assessment of Standard 5:

The Assessment Team found that the service met two of the three requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;



- All respondents said consumers feel safe at the service.
- Over half of respondents (64%) said consumers feel at home at the service most of the time or always. Three respondents said consumers feel at home some of the time and two said they never feel at home explaining they never wanted to live in aged care and/or they miss their loved ones.

The service could not demonstrate the service is safe and well maintained. The Assessment Team observed potential hazards to consumers including areas being used by construction workers not cordoned off, strong fumes generated by glue, torn/stained and/or decaying floor and wall coverings, and an outdoor structure used by consumers in a state of disrepair.

Consumers said:

- The service was kept at a comfortable temperature
- They have access to a range of furniture and equipment and felt safe using them.
- They have access to outdoor living areas, gardens and lounge areas to use as a quiet space to meet with family or friends.
- They are encouraged to use all areas of the service including an activities area, library, canteen and chapel.

Requirements:

Standard 5 Requirement 3(a) Met

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

Standard 5 Requirement 3(b) Not Met

The organisation demonstrates that the service environment:

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

Standard 5 Requirement 3(c) Met

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

Standard 6: Feedback and complaints Met

Consumer outcome:

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



Organisation statement:

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

Summary of Assessment of Standard 6:

The Assessment Team found that the service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- A high proportion of respondents (93%) said staff follow up when they raise things with them most of the time or always. One respondent said staff follow up some of the time explaining they feel staff are slow to respond to requests.

Consumers and representatives reported they are aware of complaints and feedback avenues available to them and they feel comfortable to access them if needed. Where feedback has been provided representatives advised of satisfaction with the process of addressing their concern and with open disclosure.

Staff demonstrated knowledge of how to enable consumers and representatives to access feedback processes and advocacy services as needed. They also demonstrated how verbal feedback is communicated so that management can address it.

Management demonstrated that all feedback received is responded to verbally or in writing and actions taken are reviewed to ensure the complainant's satisfaction. Complaints are escalated to Executive management as per the service's policy and an open disclosure process is used when things go wrong. Feedback and complaints are reviewed by management and result in continuous improvement activities.

Requirements:

Standard 6 Requirement 3(a) Met

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

Standard 6 Requirement 3(b) Met

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

Standard 6 Requirement 3(c) Met

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

Standard 6 Requirement 3(d) Met

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



Standard 7:

Human resources

Met

Consumer outcome:

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

Organisation statement:

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

Summary of Assessment of Standard 7:

The Assessment Team found that the service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- All respondents said staff are kind and caring most of the time or always.
- All respondents said staff know what they are doing most of the time or always.

Consumers and representatives said there are sufficient staff to meet consumers' needs and requests for assistance. They find staff professional and knowledgeable about consumer's individual needs and preferences. Consumers and representatives gave examples of how staff demonstrate kindness and caring and show respect for consumers' individual needs.

The service demonstrated that processes ensure the workforce is planned to ensure appropriate numbers and skill mix of staff to ensure the delivery and management of safe and quality care services. Temporary staff are used to ensure staff numbers are maintained at all times. Police certificate and registration requirements are monitored and reviewed regularly. Education is provided to meet mandatory requirements as well as service needs. Recruitment processes ensure new staff are selected according to criteria. Induction and orientation provide new staff with information in relation to the organisation and the service, including expectations of conduct and regulatory requirements. Buddy shifts are provided to ensure new staff are familiar with service routines and individual consumer needs and preferences.

Staff demonstrated skills and knowledge required of their roles. They were familiar with individual consumer's needs and preferences and daily routines. Staff expressed satisfaction with the range of education opportunities at the service and with their access to supervision and support when required.

Staff performance has been monitored via observation of practice and feedback from staff and consumers. Any performance concerns are addressed and documented. Formal performance appraisal processes are currently being introduced.



Improvements in relation to staffing have been made including a new model of care introduced in late 2018, a new Clinical Nurse position established in early 2019 and increased lifestyle staffing to provide seven-day coverage, in September 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 that the service met all requirements under this standard.

Fourteen randomly selected consumers/representatives were invited to complete a consumer experience interview. Results show that;

- All respondents said the service is well run most of the time or always.



The organisation demonstrated that they involve consumers in the delivery and evaluation of care and services, providing examples of how consumers are engaged and consulted in the planning of changes as well as on a day to day basis. Consumer's representatives confirmed they are involved in care planning and delivery and provided examples of how this occurs.

The governing body meets regularly, sets clear expectations for the organisation and regularly reviews risks from an organisational and consumer perspective. A new Board is in place and a five-year strategic plan has been launched and communicated to stakeholders. A new executive management structure has been introduced with positions appointed to and clear communication lines to the Chief executive officer and the Board. Committees such as a clinical governance committee and a risk committee are being established to provide further advice and support to the Board.

There are organisational governance systems to support effective information management, the workforce, compliance and regulation, complaints management and open disclosure and clinical care. The clinical governance framework addresses anti-microbial stewardship, best practice and minimising the use of restraint. 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