



Aged Care Quality and Safety Commission

Final Assessment report

Category 6

Renewal of registration audit



Northern Coalfields Community Care Association Ltd

Residential care home	Jacaranda Grove
Residential care home ID	ARCH-05240
Audit dates	8/05/2026-18/06/2026
Assessment report date	17/07/2026

Acknowledgement of Country

The Aged Care Quality and Safety Commission acknowledges the Traditional Custodians of Country throughout Australia and their connections to land, water and community. We pay our respect to their Elders past, present and emerging, and extend that respect to all Aboriginal and Torres Strait Islander peoples



1. Scope and approach

This audit was conducted as part of the Aged Care Quality and Safety Commission (Commission) audit methodology process. The scope of this audit was limited to the following Aged Care Quality Standards (Quality Standards):

- Quality Standard 1: The Individual
- Quality Standard 2: The Organisation
- Quality Standard 3: The Care and Services
- Quality Standard 4: The Environment
- Quality Standard 5: Clinical Care
- Quality Standard 6: Food and Nutrition
- Quality Standard 7: The Residential Community

The following information has been considered in preparing this final assessment report:

- the documents and records you submitted
- interviews with your management, governing body members and senior management, workers (employees, agency, subcontractors), and others
- observations of the residential care home environment and delivery of care and services as appropriate
- interviews with older people or their supporters
- information we have about you as an organisation or person and your residential care homes
- provider response to the preliminary assessment report received on 6/07/2026
- review of other materials as relevant.



This final assessment report is split into 2 sections:

- **executive summary:** this provides an overview of the auditee and audit, as well as findings at a Quality Standards level
- **detailed findings:** this provides the findings of the audit at an Outcome level, including evidence to support any non-conformance with the Quality Standards.

The findings in this report have been rated using the following rating scale:

Rating	Description
Conformance	The provider has demonstrated it can establish, implement, monitor and continuously improve governance arrangements, systems and processes to meet the requirements of the Outcome/Quality Standard and deliver person-centred quality care.
Minor non-conformance	The provider has demonstrated it can establish, implement, monitor and continuously improve governance arrangements, systems and processes to meet the requirements of the Outcome/Quality Standard, but some gaps are identified. Identified gaps are not systemic and do not present high risk. In this context: • not systemic means the gap only affects a minor part of the whole system or process (relevant to the Outcome/Quality Standard) • do not present high risk means the gap does not present significant risks or immediate consequences to the health, safety and wellbeing of older people or workers.
Major non-conformance	The provider has not demonstrated it can establish, implement, monitor and continuously improve governance arrangements, systems and processes to meet the requirements of the Outcome/Quality Standard and is likely to present significant risks to older people and workers. The provider needs to carry out significant actions to conform with an Outcome/Quality Standard and/or the identified risks posed to older people is high.



**Out of scope/
not applicable**

The Quality Standard/Outcome is out of scope for the audit or not applicable to the provider due to the nature of services provided.



2. Executive summary

Northern Coalfields Community Care Association operates one category 4 and 5 and two category 6 care delivery locations, Jacaranda Grove and Mountain View Lodge.

Day to day operations are managed by the provider's leadership team, and the delivery of all funded aged care services are overseen by an executive management team and governed by a board of directors.

Northern Coalfields Community Care Association delivers a range of care and services which include domestic home assistance, transport services, maintenance and repairs, social support, personal care, nursing care, allied health services and respite care, dementia care and palliative care and support.

As part of this audit, the audit team conducted various evidence gathering activities to assess the provider's conformance with the Quality Standards. Evidence gathered included several interviews from provider and residential care home interviews.

1. Number of provider representatives interviewed: 2
2. Number of governing body representatives interviewed: 3
3. Number of senior management representatives interviewed: 3

Number of interviews conducted with the residential care home:

1. Management: 2
2. Workers: 7
3. Older people: 9
4. Supporters: 1



Experience of older person

Overall, older people and their supporters at Jacaranda Grove provided positive feedback regarding the funded aged care services they utilise. Older people confirmed that they felt respected and cared for by aged care workers, and reflected that the provider is considerate of their environment, choices, needs, goals and preferences. Older people and their supporters stated they are able to work in partnership with the provider to ensure their delivered care and services are tailored to their needs.

Experience of aged care worker

Overall, aged care workers provided positive feedback regarding their employment at Northern Coalfields Community Care Association. They reported feeling supported by management to provide high quality care to older people within the service, stating they have the education and equipment they need to do their jobs to the best of their ability. They outlined feedback mechanisms they are encouraged to utilise and gave examples of support and actions taken by the service's management team to ensure a positive and safe working environment.



Audit ratings

Table 1: audit rating summary

Quality Standard	Audit rating
Quality Standard 1: The Individual	Conformance
Quality Standard 2: The Organisation	Conformance
Quality Standard 3: Care and Services	Conformance
Quality Standard 4: The Environment	Conformance
Quality Standard 5: Clinical Care	Conformance
Quality Standard 6: Food and Nutrition	Conformance
Quality Standard 7: The Residential Community	Conformance

Overall, based on the evidence considered, the audit found that Northern Coalfields Community Care Association Ltd | Jacaranda Grove can establish, implement, monitor and continuously improve governance arrangements, systems and processes for delivering safe and quality care.

Across the Quality Standards audited, 33 Outcomes were rated as conformance. The provider has demonstrated it can establish, implement, monitor and continuously improve governance arrangements, systems and processes to meet the requirements of the Outcome/Quality Standard and deliver person-centred quality care.

Provider response and Assistant Director Audit assessment. This assessment report has been finalised incorporating the provider's response to the preliminary assessment report. The provider agreed with all findings presented in the preliminary assessment report.



3. Performance summary by Quality Standard

Quality Standard 1: The Individual

Quality Standard 1: The Individual		Conformance
Older person's expectation	I have the right to be treated with dignity and respect and to live free from any form of discrimination. I make decisions about my funded aged care services, with support when I want or need it. My identity, culture and diversity are valued and supported, and I have the right to live the life I choose. My organisation or person understands who I am and what is important to me, and this determines the way my funded aged care services are delivered.	
Outcome		Rating
1.1 Person-centred care		Conformance
1.2 Dignity, respect, and privacy		Conformance
1.3 Choice, independence, and quality of life		Conformance
1.4 Transparency and agreements		Conformance

1.1 Person-centred care:

The provider demonstrates that the safety, health, wellbeing and quality of life of older people is a central concept in the delivery of their funded aged care services. The provider's policies and procedures outline the importance and understanding of valuing the identity, culture, ability, diversity, beliefs and life expectations of older people.

At the care delivery location, interviews and documentation reflected older people's individuality is recognised and considered to design and deliver tailored care and services. Older people and supporters confirmed aged care workers treat them with dignity and respect and know who is important to them and the importance of their inclusion in care. The Audit Team observed aged care workers



interacting with older people in a caring and respectful manner. Documentation reviewed by the Audit Team identified individual needs, goals and preferences for each person.

1.2 Dignity, respect and privacy:

The provider demonstrates that care provided to older people is free from discrimination, abuse and neglect, upholding the Statement of Rights. The provider demonstrates the importance of personal privacy, dignity and respect.

At the care delivery location, older people confirmed care is delivered in a way that is free from discrimination, abuse and neglect and that their rights are upheld. Aged care workers interviewed stated they have received training in relation to the Statement of Rights and were observed by the Audit Team treating older people with respect. Documentation reviewed demonstrates that each individual's identity, culture and beliefs are identified and strategies are placed to support the older person with their needs and preferences.

1.3 Choice, independence and quality of life:

The provider's policies demonstrate their support of older people to exercise choice and make decisions about the care and services provided to them. The provider aids older people and their supporters to make decisions that are informed and provides them with adequate information and resources which are easy to understand. The provider supports older people to exercise dignity of risk in order to maintain their independence and quality of life.

At the care delivery location, older people and their supporters described how they are supported to be independent and can choose how they spend their day. Aged care workers interviewed knew each individual in their care well and were aware of their individual preferences. Documentation reviewed by the Audit Team confirms that the service supports each older person to make choices, and works with them to mitigate any risks involved with choices they wish to make.

1.4 Transparency and agreements:

The provider's policies and procedures demonstrate that before entering agreements, older people and their supporters are given the opportunity to exercise autonomy and are given the time they need to consider agreements prior to finalisation. Older people and their



supporters are given opportunities to seek advice, and advocacy services are offered and encouraged by the provider. Older persons and their supporters were satisfied they had been provided with the information and support they needed to enter into agreements when they came to the service. Documentation provided to the Audit Team as well as discussions with the service's management team reflected that billing and agreements are consistently reflected upon and reviewed for continuous improvement. Feedback registers, lifestyle schedules and meeting minutes provided to the Audit Team reflect ongoing encouragement for older people and their supporters to utilise advocacy services.

Older person experience

Older people and their supporters provided positive feedback that their individuality is recognised, including that they feel aged care workers know what is important to them. Older people confirmed they have choice over their care and services, saying they are supported to make decisions when interventions to their care are required. Older people feel welcome and included, saying aged care workers encourage them to engage with the residential community but respect when this is not their preference.



Quality Standard 2: The Organisation

Quality Standard 2: The Organisation		Conformance
Older person's expectation	The organisation is well run. I can contribute to improvements to funded aged care services. My provider and aged care workers listen and respond to my feedback and concerns. I receive funded aged care services from aged care workers who are knowledgeable, competent, capable and caring.	
Outcome		Rating
2.1 Partnering with individuals		Conformance
2.2 Quality, safety and inclusion culture		Conformance
2.3 Accountability, quality system and policies and procedures		Conformance
2.4 Risk management		Conformance
2.5 Incident management		Conformance
2.6 Complaints and feedback management		Conformance
2.7 Information management		Conformance
2.8 Workforce planning		Conformance
2.9 Human resource management		Conformance
2.10 Emergency and disaster management		Conformance

2.1 Partnering with individuals:

The provider demonstrates that they engage into meaningful partnerships with older people in order to inform organisational priorities and ongoing continuous improvement measures.



At the care delivery location, older people confirmed that they are encouraged to provide feedback about their care and services they receive, and stated that management are responsive in considering any suggestions and addressing any concerns. Documentation provided to the Audit Team including feedback registers and meeting minutes reflect that the service works in partnership with the older people they provide services and supports to, and the opinions and views of older people are taken seriously to inform ongoing actions for continuous improvement.

2.2a Quality, safety and inclusion culture to support aged care workers to deliver quality care:

The provider demonstrates that aged care workers are supported with a culture of inclusion, quality and safety which enables them to provide optimal service delivery to older people. The provider has a focus on continuous improvement and prioritised the diversity, safety, health and wellbeing of aged care workers.

At the care delivery location, aged care workers interviewed confirmed the care and services they provide is monitored and management are supportive in addressing any issues or concerns that arise. Interviews with older people confirmed that they feel safe and included when services are provided by the aged care workers. Documentation provided to the Audit Team and interviews with aged care workers reflects that there is ongoing considerations and support measures in place for staff culture, physical and psychological safety. Management demonstrated that staff engagement informs ongoing continuous improvement actions, including the installation of new coffee machines and additional staff members in areas of high workload throughout the facility.

2.2b Quality, safety and inclusion culture to support individuals:

The provider demonstrates older people are provided with a culture of inclusion, quality and safety. Positive organisational culture is present, with ongoing strategic business planning reflecting inclusion and prioritising the physical and psychological safety of older people receiving funded aged care services.

At the care delivery location, older people confirmed they are consulted by management regarding the appropriateness of the services provided. It was demonstrated throughout interviews and documentation that considerations of cultural, physical and psychological



safety are actioned by all staff members and improvements relating to this occurs regularly. This included a more inclusive lifestyle assessment and ongoing assessment and planning considerations for each older person.

2.3 Accountability, quality system and policies and procedures:

The provider has ongoing actions in place to ensure they are accountable for the delivery of funded aged care services. Oversight of all aspects of operations is maintained. Demonstrated actions are in place to ensure ongoing review of the organisation's policies and procedures, ensuring upkeep and driving continuous improvement of care and service delivery.

At the care delivery location, the management team demonstrated that the provider's policies and procedures, actions to ensure ongoing oversight and data collection, and outlined roles and responsibilities for each staff member were embedded into everyday practice. Aged care workers interviewed are aware of policies and procedures and their roles and responsibilities; and were observed carrying out their duties in accordance with them. Documentation provided to the Audit Team demonstrates ongoing practices in open disclosure and ongoing monitoring of the service's overall performance.

2.4 Risk management:

The provider has risk management systems in place to identify, manage and continuously review risks to each older person, aged care workers and the organisation as a whole.

At the care delivery location, aged care workers demonstrated they understand risk management proportionate to their roles. A review of documentation provided to the Audit Team reflects that new and ongoing risks are being identified and managed in accordance with the provider's risk management framework. Interviews with older people and their supporters reflected risk management measures are embedded into everyday practice, including ongoing assessment and planning, as well as ongoing review of the current health of each older person, monitoring for change and review.



2.5 Incident management:

The provider has incident management systems in place ensuring older people and aged care workers are safeguarded. Incidents that occur are acknowledged, responded to, managed and reflected upon.

When an incident occurs at the care delivery location, it is evident that processes for incident management are actioned in a timely and supportive way for each older person. Interviews with older people and their supporters reflected satisfaction with the way incidents are managed, stating they are alerted when incidents occur and are included within the review process. Aged care workers described procedures for managing incidents, in line with policy and procedure. Documentation confirms incidents are being recorded, managed and actions placed are reviewed for effectiveness.

2.6a Complaints and feedback management for aged care workers:

The provider encourages and supports aged care workers to make complaints and provide feedback in an open and safe environment. Complaints are acknowledged and managed with transparency and dignity, are reviewed within a timely manner and reflected upon for continuous improvement.

At the care delivery location, policies and procedures in relation to the feedback brought forward by all staff is embedded. Aged care workers and other staff members were aware of processes for making complaints and providing feedback. They confirmed management are responsive to any matters raised. Documentation such as feedback registers, continuous improvement plans and ongoing staff surveys provided to the Audit Team, reflects clear pathways for staff members to raise concerns and demonstrates that concerns raised are appropriately discussed and managed. Actions are placed to rectify any issues raised.

2.6b Complaints and feedback management for individuals:

The provider encourages and supports older people and their supporters to make complaints and provide feedback in an open and safe environment. Feedback is acknowledged and an open disclosure process is in place to assure older people and their supporters that their complaint is taken seriously and action is being taken in a timely manner to resolve the issue that has been raised.



The care delivery location audit reflects that policies and procedures in relation to the feedback brought forward by older people and their supporters is embedded. Four interviews with individuals and/or their supporters demonstrated that they were aware of how to make complaints and were comfortable to do so. Aged care workers were able to demonstrate ongoing support and understanding of complaint processes for each individual. The audit team observed the provider encouraging feedback and complaints, with visualised signage and other mechanisms for feedback collection throughout the facility, in areas which can be easily accessible to all individuals.

2.7 Information management:

The provider demonstrates that information related to individuals within their organisation is accurate, current and secure. Information that relates to care and services is in language which is plain and easy to understand for all involved in delivery of that service.

At the care delivery location, aged care workers confirmed they have the information they need to provide appropriate care and services to older people. Information is shared between aged care workers and allied health professionals as needed and privacy and confidentiality of personal information was observed being maintained. Older people and their supporters confirmed they are satisfied that information about them, such as care planning documents, is private, accurate, provided to them and that they are kept informed about information when it changes or updates.

2.8 Workforce planning:

The provider manages their workforce and plans for future workforce needs.

At the care delivery location, older people confirmed there are sufficient aged care workers to meet their needs. Aged care workers discussed shift planning and spoke of how management have added staff members to areas where higher workloads were required. Documentation provided to the Audit Team demonstrates that care minutes are consistently being met, agency staffing is used as little as possible and where possible, changes to staffing numbers and mix have been made to ensure high quality care is being provided to each older person residing at their facility.



2.9 Human resource management:

The provider demonstrates workers are skilled and competent in their roles and are checked to ensure they hold relevant qualifications. Aged care workers are trained and supported by the provider to ensure they are able to work effectively in their roles.

At the care delivery location, documentation provided to the Audit Team by management demonstrates that each worker is subject to safety checks and checks of their qualifications and experience. Education is provided to staff members regularly in relation to their scope of practice. Aged care workers interviewed confirmed they have undertaken mandatory training and could describe their roles and responsibilities. They confirmed there is adequate training and support to aid in the delivery of funded aged care services for each older person within their care.

2.10 Emergency and disaster management:

The provider has emergency and disaster plans in place which considers and includes the health, risks, safety and wellbeing of older people and aged care workers. At the care delivery location, documentation demonstrates that emergency and disaster planning is continuous and ongoing. Aged care workers stated they had been trained in relation to emergency and disaster management and could describe their role if an emergency occurred. The Audit Team observed fire training which was in progress for newly recruited aged care staff at the time of the onsite audit.

Older person experience

Older people and their supporters provided positive feedback about the organisation, including that they felt comfortable to raise complaints and concerns and have opportunities to contribute to ongoing improvement to funded aged care services. They confirmed that they are encouraged to make complaints, detailing where feedback had resulted in improvements. Older people and their supporters feel that staff are competent and capable, stating staff regularly communicate information and risks about care.



Quality Standard 3: The Care and Services

Quality Standard 3: Care and Services		Conformance
Older person's expectation	The funded aged care services I receive: • are safe and effective • optimise my quality of life, including through maximising independence and reablement • meet my current needs, goals and preferences • are well planned and coordinated • respect my right to take risks.	
Outcome		Rating
3.1 Assessment and planning		Conformance
3.2 Delivery of funded aged care services		Conformance
3.3 Communicating for safety and quality		Conformance
3.4 Planning and coordination of funded aged care services		Conformance

3.1 Assessment and planning:

The provider demonstrates active engagement with older people and their supporters in developing and reviewing an individual's care and services plans through ongoing communication. Plans are reviewed on a regular basis and assessments attended are holistic and inform the current needs, goals, risks and preferences of each older person, aiming for risk prevention and overall improvement of health and wellbeing.

The care delivery location demonstrates ongoing processes for planning and assessment for each individual, made with each individual and their supporters in a way which is person centred and understandable. Documentation viewed by the Audit Team reflects ongoing meaningful reviews and care planning for each individual, including advanced care planning. Plans are risk informed and person



centred. Interviews with older people and their supporters were positive, demonstrating a focus on open communication and partnership. Interviews with aged care workers show escalation processes are in place when a risk is identified, triggering further review.

3.2 Delivery of funded aged care services:

The provider demonstrates that funded aged care services offered and delivered are meeting the needs, goals and preferences of each older person, aiming for reablement, maintenance of function and optimisation of their quality of life. Policy and procedures outline that services are delivered in a way which is culturally safe and appropriate for individuals with cultural and diverse needs and backgrounds.

The care delivery location audit demonstrated that each older person is receiving care that is tailored to their needs, goals and preferences and is focused on being culturally safe, trauma aware and healing informed. Care documentation focuses on planning the needs and the minimisation of risk for each older person and aims for reablement when this aligns with the needs of the older person. Interviews with aged care workers and older people reflect ongoing support for the use of equipment and devices to aid older people in their everyday life. Referral processes occur in a timely manner. Documentation provided to the Audit Team demonstrates that restrictive practices are used as a last resort and are subject to consistent review for risks and management. Informed consent is demonstrated throughout documentation and this was confirmed by supporters and staff.

3.3 Communicating for safety and quality:

The provider ensures that critical information relating to the provision of funded aged care services is communicated to older people and their supporters in a way which is effective and supports communication between the provider and all allied health professionals involved with their care. When risk increases, changes to an individual's health or deterioration occurs, escalation and communication processes are clearly outlined within policy and procedure documents.



The care delivery location audit validated that information about individuals and their funded aged care services is effectively communicated. Documentation provided to the Audit Team demonstrates that when the health of an older person changes or if deterioration occurs, it is recognised and escalated through appropriate channels. Critical information is communicated effectively to aged care workers, allied health professionals and relevant supporters, for each older person to receive timely and the appropriate care they need. Aged care workers interviewed confirmed that critical information about older people is communicated regularly during handovers and is documented in a communication book. Care planning documentation reflects this and these are reflected in the older persons care plans. Older people and their supporters stated they are informed when a change in health or circumstances occurs.

3.4 Planning and coordination of funded aged care services:

The provider demonstrates that older people are receiving funded aged care services that are planned and coordinated.

The care delivery location audit validated that the services are planned and coordinated in partnership with each older person. Supporters and other people supporting individuals are recognised as a partner in care, and are involved in processes related to the services they receive. Care documentation such as discharge documentation and care and service plans reviewed by the Audit Team confirmed processes outlined by policy and procedures are embedded in relation to communication when older people are transferred to and from hospital. Aged care workers described how coordinated transitions occur, and their roles in ensuring effective communication and transfer of relevant information is occurring.

Older person experience

Older people and their supporters provided positive feedback about care and services. They confirmed that they are consulted and work in partnership with staff to design the services they need. Older people and their supporters are made aware of critical information about their aged care services. They confirmed risks to their health, safety and wellbeing are communicated to them and where necessary access to external supports is coordinated in partnership.



Quality Standard 4: The Environment

Quality Standard 4: The Environment		Conformance
Older person's expectation	I feel safe when receiving funded aged care services. Where I receive funded aged care services through a service environment, the environment is clean, safe and comfortable and enables me to move around freely. Equipment is safe, appropriate and well-maintained and precautions are taken to prevent the spread of infections.	
Outcome		Rating
4.1 Environment		Conformance
4.2 Infection prevention and control		Conformance

4.1b Environment – services delivered other than in the individual's home:

The provider demonstrates that individuals are able to access funded aged care services in an environment that is clean, safe comfortable and well maintained. The provider ensures that environments within areas other than an older person's home are optimised for an older person's sense of belonging, interaction and function. Equipment provided for usage is assessed for safety, is well maintained and meets the needs of each older person.

The care delivery audit verified that the physical environment is inclusive and promotes the functional independence of older people with varying mobility levels, allowing for safe movement in both internal and external spaces. Older people and their supporters confirmed the environment and equipment they use is fit-for-purpose and well maintained. Documentation such as cleaning and maintenance schedules and logs, as well as interviews with staff and management, reflect responsive and preventative maintenance is occurring, managing and reducing environmental risks where possible.



4.2 Infection prevention and control:

The provider demonstrates that they have an effective system for infection, prevention and control. The provider has a suite of policies and procedures which clearly outline the roles and responsibilities for each aged care worker in regard to environmental infection control practices, outbreak management plans and disease and immunisation screening and requirements.

During the care delivery location audit, the service demonstrated that their systems for infection prevention and control (IPC) are effectively translated into practice. IPC leads are appropriately qualified and trained and available for staff at the facility. Older people reported satisfaction with hygienic standards and all staff were observed adhering to standard and transmission-based precautions during care delivery. Aged care workers confirmed they receive ongoing education and compliance training related to infection prevention and control. Documentation provided to the Audit Team reflects that vaccination screening occurs for everyone with access to the facility and is encouraged for all staff, older people and supporters.

Older person experience

Older people and their supporters provided positive feedback about the environment, including that spaces are kept tidy. Older people stated they are encouraged and supported to personalise their rooms and confirmed maintenance issues are promptly addressed. Older people confirmed that when they had experienced an infection their rights and wellbeing had been prioritised.



Quality Standard 5: Clinical Care

Quality Standard 5: Clinical Care		Conformance
Older person's expectation	I receive person-centred, evidence-based, safe, effective, and coordinated clinical care services by registered health practitioners, allied health professionals, allied health assistants and competent aged care workers that meets my changing clinical needs and is in line with my goals and preferences.	
Outcome		Rating
5.1 Clinical Governance		Conformance
5.2 Preventing and controlling infections in delivering clinical care services		Conformance
5.3 Safe and quality use of medicines		Conformance
5.4 Comprehensive care		Conformance
5.5 Safety of clinical care services		Conformance
5.6 Cognitive Impairment		Conformance
5.7 Palliative and end-of-life Care		Conformance

5.1 Clinical governance:

The provider's governing body demonstrates ongoing continuous improvement and oversight of all clinical care and services provided. The governing body has incorporated clinical governance as a strategic priority.

The care delivery location audit validated the provider's systems and processes were providing sufficient oversight, monitoring, and continuous improvement to deliver clinical care and services. The provider has a digital clinical information system which supports integration of data and oversight of clinical records and risks. Aged care workers communicated they had sufficient access to



information and support to carry out their roles effectively. Older peoples care documentation was clear, current and available for aged care workers to access.

5.2 Preventing and controlling infections in delivering clinical care services:

The provider ensures antimicrobials are used appropriately to reduce the risks of increasing antimicrobial resistance. The provider demonstrates they have protocols in place to minimise risks of infections and control infections when they take place.

At the care delivery location, interviews with clinical staff and aged care workers demonstrated that infection risks are identified and confirmed the engagement of allied health professionals in managing infections when they occur. The Audit Team observed the implementation of appropriate hand hygiene practices among aged care workers. Interviews with older people reflected that they were informed of their care needs in relation to the use of antibiotics and told the Audit Team that staff and allied health professionals constantly reviewed their medications and use of antibiotics.

5.3 Safe and quality use of medicines:

The provider demonstrates ongoing support and encouragement for qualified staff to use and administer medications in a way which maximises benefits and minimises risk of harm. The provider ensures all expected clinical standards are met, and medications are managed in a way which is safe for older people, continually monitored and reviewed for ongoing improvement. Medication related adverse effects are reported and reviewed by all levels of management for ongoing risk management and prevention measures.

At the care delivery location, documentation demonstrated continuity of each older person's medication regime and confirmed that medication reviews are conducted regularly and when the need arises. The service has recently updated their medication management system to a digital platform. Staff have told the Audit Team that they are confident in the new system and adequate training was provided. The new system supports remote prescribing, alerts for allergies and alerts for high risk medications. Interviews with older people, their supporters and with staff confirms that older people are given information about their medications and assistance is provided to ensure safe administration.



5.4 Comprehensive care:

The provider ensures older people receive comprehensive, safe and quality clinical care and services which are evidence based, person centred and delivered by appropriate clinical staff members. Clinical care is documented to include assessment planning, prevention, treatment and management, and aims to quickly recognise changes in health, optimise reablement, maintenance of function and quality of life. The organisation's systems support a coordinated, multidisciplinary approach to care aimed to the needs, goals and preferences of each older person.

At the care delivery location, documentation provided to the Audit Team demonstrated care to older people residing within the service is person centred, evidence based and comprehensive. It includes ongoing assessment and review to prevent, plan and treat past, current and ongoing medical conditions. Review of documents confirmed that where clinical risks to older people are identified, the older person and their supporter (where appropriate) are consulted as part of the development of care planning and management. Interviews with clinical staff and aged care workers confirmed ongoing collaboration with external individuals, including supporters and allied health professionals. Clinical staff were able to discuss ongoing plans for individual older people residing within the service.

5.5 Safety of clinical care services:

The provider demonstrates identification and monitoring of high impact and high prevalence risks in the delivery of clinical care and services.

At the care delivery location, interviews with aged care workers and clinical staff, as well as documentation confirmed clinical risks are identified and managed by individualised clinical strategies. Documentation provided to the Audit Team including care planning documents, oversight documents such as high impact high prevalence risk data and incident registers demonstrated that risks are recognised and reviewed for minimisation of incidents or potential harmful impacts to older people. Interviews with older people and supporters confirmed they are informed about their own clinical risks and have the opportunity to ask questions and collaborate in the creation of clinical risk management strategies as part of care delivery.



5.6 Cognitive impairment:

The provider ensures that individuals who experience cognitive impairment receive care that optimises clinical outcomes and aligns with their needs, goals and preferences. The provider's policies and procedures support and guide staff in the identification and management of changing behaviours.

At the care delivery location, aged care workers and clinical staff demonstrated that the provider identifies events that may lead to behavioural change. Aged care workers confirmed that they receive training to support people living with dementia and cognitive impairment. Documentation reviewed by the audit team, including behaviour planning documentation, confirmed supporters are consulted and their insights are recognised when developing personalised strategies and behavioural management plans to support cognitive decline. Interviews with older people and their supporters reflected that clinical staff work in partnership with them to support and manage ongoing risks of their delirium, dementia or other forms of cognitive impairment.

5.7 Palliative and end-of-life care:

The provider recognises the needs, goals and preferences of individuals for palliative and end of life care. Systems are in place to ensure pain is managed, allied health is present if needed and supporters are informed and supported, whilst maintaining the dignity of older people experiencing those circumstances.

At the care delivery location, older people stated that service staff actively seeks input from them and their supporters when developing advance care plans. Conversations surrounding end of life planning are encouraged and supported by all service staff in line with the organisation's policies and procedures. Interviews with supporters confirmed that pain and comfort is actively managed and prioritised during end of life care, including the use of medications in line with each older person's preferences. Documentation reflects that family members of those experiencing end of life are informed and supported, and all care and services aim to maintain the dignity and respect of each older person experiencing the end of life process.



Older person experience

Older people and their supporters stated they are satisfied with the clinical care they receive. Older people and supporters are given timely and accurate clinical information and are supported to make decisions about clinical risks. Older people stated they are satisfied with the safety of clinical care and have confidence in the clinical capability of staff. Older people receiving palliative care are comfortable and their preferences at end of life are identified and respected.



Quality Standard 6: Food and Nutrition

Quality Standard 6: Food and Nutrition		Conformance
Older person's expectation	I receive plenty of food and drinks that I enjoy. Food and drinks are nutritious, appetising and safe, and meet my needs and preferences. The dining experience is enjoyable, includes variety and supports a sense of belonging.	
Outcome		Rating
6.1 Partnering with individuals on food and drinks		Conformance
6.2 Assessment of nutritional needs and preferences		Conformance
6.3 Provision of food and drinks		Conformance
6.4 Dining experience		Conformance

6.1 Partnering with individuals on food and drinks:

The provider partners with individuals to deliver a quality food and drinks service.

At the care delivery location, older people communicated that they are encouraged to provide suggestions and feedback to improve food and drinks within the service via meetings or through direct feedback to service staff. Observations of the dining experience of older people reflect a clear identification of choice, satisfaction and a pleasant dining experience within the service, reflecting organisational processes are embedded within the service.

6.2 Assessment of nutritional needs and preferences:

The provider demonstrates understanding of the nutritional needs of each individual and assesses current needs, abilities and preferences in relation to what and how they eat and drink.



The care delivery location audit validated that the provider's systems and processes supported the assessment and documentation of individual's nutritional needs and preferences. Older people and their supporters communicated that personal preferences on food choices were available and provided, and staff at the service are ensuring nutritional elements are considered with alternative options available at the time of choice and for last-minute changes. Documentation reviewed by the Audit Team reflects that risks which impact the provision of food and drinks, such as a physical or clinical condition, is taken into consideration to ensure harmful effects are minimised where possible.

6.3 Provision of food and drinks:

Individuals are provided with food and drinks that meet their nutritional needs, are appetising and flavoursome and provides them with choices about what they eat and how much they eat and drink.

The care delivery location staff were observed ensuring that food and drinks provided to older people are able to be accessed at any time of day or night. The Audit Team observed fridges freely available at any time, with nutritional snacks as well as a cafe style coffee machine and fruit on all dining tables. Service staff implement processes to support older people's and supporters' access to food and drinks at times of their choosing. Discussions with older people expressed satisfaction with the availability and choice of food and drinks within the service. Documentation provided to the Audit Team reflect that partnership with older people regarding menu choices is occurring, and the safe delivery of food and drinks aligns with health and safety standards.

6.4 Dining experience:

The provider demonstrates dining experience meets the needs and preferences of individuals to support social engagement, function and quality of life.

The care delivery location audit reflected satisfaction with the dining experience by all older people interviewed. Interviews with older people and their supporters supported the sufficiency of work force to meet their dining needs. The Audit Team observed older people



exercising choice about what, where and when they consumed their food and drinks. Interviews with older people and staff demonstrated that there are areas within the service where individuals are able to share their meals with their visitors.

Older person experience

Older people and their supporters provided positive feedback about food and dining, including that there is always sufficient aged care workers available to support the consumption of food and drinks. Older people and supporters expressed satisfaction with the provision of meals, saying they can eat what they want and have access to meals throughout the day. Older people confirmed they enjoy the dining experience, confirming they can eat meals where they want and can share meals with family and friends.



Quality Standard 7: The Residential Community

Quality Standard 7: The Residential Community		Conformance
Older person's expectation	I am supported to do the things I want and to maintain my relationships and connections with my community. I am confident in the continuity of my care and security of my accommodation.	
Outcome		Rating
7.1 Daily living		Conformance
7.2 Transitions		Conformance

7.1 Daily living:

The provider demonstrates an aim for each individual to have an optimised quality of life and promotes the skills and strengths of each older person to enable them to do the things they wish to do.

The care delivery location audit substantiated that these mechanisms are effectively optimising older people's quality of life and proactively promoting the use of their skills and strengths. Feedback obtained from older people indicated satisfaction regarding the support provided to maintain engagement and their perceived safety within the residential care home. Observational evidence confirmed that the delivery of daily living and leisure activities is aligned with the individual skills and interests of the older people. Documentation provided to the Audit Team throughout the audit demonstrated that the service is respectful to individual choices in the way each older person wishes to live their life and lifestyle activities are organised in partnership with older people and their supporters.



7.2 Transitions:

The provider demonstrates that transitions are well coordinated.

The care delivery location audit demonstrated processes for transitions in care are implemented to optimise the needs of each older person. An older person interview from the care delivery location audit validated that these systems successfully support older people in experiencing safe and well-coordinated transitions of care. They reported satisfaction with the management of these transitions, specifically regarding hospital transfers. Aged care workers stated they are performing hospital transfer checks and return from hospital reassessments as part of the provider's risk management and clinical governance frameworks. Documentation provided to the Audit Team show ongoing review and management of transitions processes to ensure transitions in care are reviewed and improved upon in the future.

Older person experience

Older people expressed a sense of feeling safe and secure within their residential care home environment. Testimony from older people confirms they are enabled to pursue activities of personal significance and maintain community connections and relationships. Older people are confident in the continuity of their care, expressing satisfaction with additional supports provided during transitions to and from the service.