

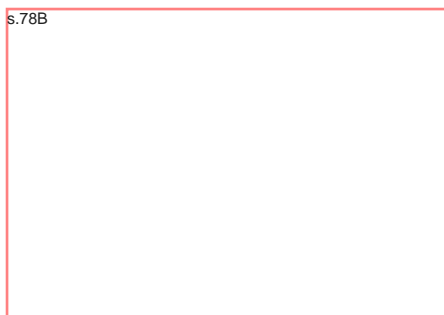
Regulatory Services

Officer Chris Castley
Telephone (07) 30083443
Our Ref s.78B



Department of
Housing and Public Works

14 January 2019



I am writing to advise you of the recent changes to accreditation standards in the *Residential Services (Accreditation) Regulation 2018* (the Regulation) which commenced 1 September 2018.

Regulatory Services is currently conducting a compliance programme of all Level Two residential services throughout Queensland. All Level Two residential services will be visited at any time within the next 3 months with minimal notice. The accreditation standards that will be assessed are:-

- 2.1 Food and Nutrition
- 2.2 Kitchens
- 2.3 Food Handling and Storage

If you require any further information, please contact Regulatory Services on (07) 3008 3450 or email regulatoryservices@hpw.qld.gov.au.

Yours sincerely,

Chris Castley
Regulatory Analyst
Regulatory Services

Release

Regulatory Services

Officer Sheree Gibson
Telephone (07) 30083423
Our Ref s.78B



Department of
Housing and Public Works

22 January 2019

s.78B

I am writing to advise you of the recent changes to accreditation standards in the *Residential Services (Accreditation) Regulation 2018* (the Regulation) which commenced 1 September 2018.

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Yours sincerely,

Sheree Gibson
Regulatory Analyst
Regulatory Services

Regulatory Services

Officer Miriam Barlesheff
Telephone (07) 3008 3452
Our Ref s.78B



Department of
Housing and Public Works

23 January 2019

s.78B

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Yours sincerely,
CTPI

Miriam Barlesheff
Regulatory Analyst
Regulatory Services

Regulatory Services

Officer Sheree Gibson

Telephone (07) 30083423

Our Ref

s.78B



Department of
Housing and Public Works

23 January 2019

s.78B

FILE COPY

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Yours sincerely,

CTPI

Sheree Gibson
Regulatory Analyst
Regulatory Services

s.78B

Regulatory Services

Officer Sheree Gibson
Telephone (07) 30083423
Our Ref s.78B



Department of
Housing and Public Works

23 January 2019

s.78B

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Sheree Gibson
Regulatory Analyst
Regulatory Services

Regulatory Services

Officer Miriam Bariesheff
Telephone (07) 3008 3452
Our Ref s.78B



Department of
Housing and Public Works

23 January 2019

s.78B

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Yours sincerely,
CTPI

Miriam Bariesheff
Regulatory Analyst
Regulatory Services

Regulatory Services

Officer Sheree Gibson

Telephone (07) 30083423

Our Ref s.78B



**Queensland
Government**

Department of
Housing and Public Works

4 February 2019

s.78B

I am writing to advise you of the recent changes to accreditation standards in the *Residential Services (Accreditation) Regulation 2018* (the Regulation) which commenced 1 September 2018.

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Yours sincerely,

Sheree Gibson
Regulatory Analyst
Regulatory Services

Release

Regulatory Services

Officer Chris Castley
Telephone (07) 30083443
Our Ref s.78B



Department of
Housing and Public Works

14 January 2019



I am writing to advise you of the recent changes to accreditation standards in the *Residential Services (Accreditation) Regulation 2018* (the Regulation) which commenced 1 September 2018.

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Regulatory Analyst
Regulatory Services

Release

s.78B



Department of
Housing and Public Works

Regulatory Services

Officer Chris Castley
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Our Ref s.78B

14 January 2019

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Regulatory Analyst
Regulatory Services

Regulatory Services

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Department of
Housing and Public Works

14 January 2019



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If you require any further information, please contact Regulatory Services on (07) 3008 3450 or email regulatoryservices@hpw.qld.gov.au.

Yours sincerely,

Chris Castley
Regulatory Analyst
Regulatory Services

Release

JONES Donna

From: Housing and Public Works HIB
Sent: Friday, 30 August 2019 2:32 PM
To: Housing and Public Works DLO; DG Administration; HPW Media; CARROLL Liza; BEGANOVIC Irma; WHITE David; MCKENNA Shane; TANSKY Katherine
Subject: FW: HIB [REDACTED] boarding house closure August 2019
Attachments: HIB [REDACTED] boarding house closure August 2019.docx

From: SAFFIOTI Katherine
Sent: Friday, 30 August 2019 2:31:22 PM (UTC+10:00) Brisbane
To: HHS Service Delivery OGM Executive Requests; HHS ODDG Information Requests; Housing and Public Works HIB; RAINE Chantal; WOOLLEY Trish
Cc: HHS BR ORD; BROAD Alan
Subject: FW: HIB [REDACTED] boarding house closure August 2019

Good afternoon Everyone

Please find attached HIB relating to closure of a private boarding house at [REDACTED]

Regards

Katherine

Katherine Saffioti

Regional Director | Brisbane Region
Housing Homelessness and Sport | Department of Housing and Public Works | Level 1/831 Gympie Road | Chermide
PO Box 2361 | Chermide Centre Qld 4032
phone 07 3007 4375 | mobile CTPI [REDACTED] fax 07 3896 9982 | email katherine.saffioti@hpw.qld.gov.au
www.hpw.qld.gov.au | www.qld.gov.au/housing

Customers first | Ideas into action | Unleash potential | Be courageous | Empower people | Healthy and safe workforce

From: HHS BR ORD
Sent: Friday, 30 August 2019 2:21 PM
To: SAFFIOTI Katherine <Katherine.SAFFIOTI@hpw.qld.gov.au>
Cc: MCLAUGHLIN Christina <Christina.MCLAUGHLIN@hpw.qld.gov.au>
Subject: FW: HIB [REDACTED] boarding house closure August 2019

Hi Katherine,

Please see the attached HIB for your review and progression.

Thanks,

Freya

Freya Matanovic

Part time – Mon, Thurs, Fri

A/Regional Services Officer | Office of the Regional Director, Brisbane Region | Service Delivery
Housing, Homelessness and Sport | Department of Housing and Public Works
Level 1 | 831 Gympie Road | Chermide
ph 07 3007 4369 | email freya.matanovic@hpw.qld.gov.au
www.hpw.qld.gov.au

I acknowledge the traditional custodians past and present on whose land I walk, I work, I live and respect.

From: BROAD Alan
Sent: Friday, 30 August 2019 1:52 PM
To: HHS BR ORD <HHSBRORD@hpw.qld.gov.au>
Subject: HIB [REDACTED] boarding house closure August 2019

Hi

Please find attached HIB re the closure of a boarding house [REDACTED] Please progress as appropriate.

Kind regards
Alan

Alan Broad

Area Manager | Fortitude Valley HSC

Housing, Homelessness Services & Sport | Department of Housing and Public Works

Level 7 | 515 St Pauls Terrace | Fortitude Valley

ph 07 3034 6501 | mb [REDACTED] CTPI fax 07 3034 6598 | email alan.broad@hpw.qld.gov.au

www.hpw.qld.gov.au

RTI ACT
Release

Hot Issues Brief: Closure of private boarding house [REDACTED]

Department of Housing and Public Works

Personal information contained in this brief is intended for ministerial briefing purposes and is to be handled in accordance with the information privacy principles under the Information Privacy Act 2009 (QLD).

GENERAL INFORMATION

| | | | |
|------------------|---|------------|------------------|
| Incident / issue | Regulatory Services have notified of the impending closure of a boarding house [REDACTED] | | |
| Date of incident | 30 August 2019 | Location | [REDACTED] |
| DHPW division | Housing, Homelessness and Sport | Electorate | Brisbane Central |

DESCRIPTION

Summary of incident/issue

- [REDACTED] is a private boarding house. Information available to Regulatory Services indicates it can accommodate up to 28 people but is understood to have approximately seven occupants.
- On 23 August 2019, Regulatory Services advised the Fortitude Valley Housing Service Centre (HSC) that the service provider, [REDACTED] had not submitted [REDACTED] renewal of accreditation application by the due date and as a consequence, a Notice of Cancellation had been issued.

DHPW action in response to the incident and any further actions to be taken

- On 27 August 2019, officers from the Fortitude Valley HSC visited the property, left information and contact details for tenants and the manager. [CTPI] [REDACTED]

Any additional background information if relevant (if applicable)

- Regulatory services have advised that the Notice of Cancellation was issued on 6 August 2019 and received on 13 August 2019. The provider should give the residents an RTA 30 days' Notice to Leave.

STAKEHOLDER INVOLVEMENT

| | |
|------------|-----------------------------|
| DHPW areas | HHS and Regulatory Services |
| External | Nil |
| Media | No |

DHPW HIB CONTACT

| | | | |
|--------------------------|--|---------------|----------------|
| Officer, Position | Alan Broad, Area Manager, Fortitude Valley HSC | Phone | 3034 6501 |
| Approved by [DDG/ADG/RD] | Katherine Saffioti, Regional Director, Brisbane Region | Date approved | 30 August 2019 |

Note: This form is not to exceed one page, except if attachments are provided where necessary. Completed form needs to be emailed to HIB@hpw.qld.gov.au and relevant divisional stakeholders.

Ministerial Correspondence Action Sheet

Cam

RG 10/9

| | | |
|---|--------------------------|--|
| Subject: Complaint about retirement village accreditation for [redacted] | Timeframe for action | |
| | MP: 3 days | |
| | Urgent: 5 days | |
| | General 10 days | |
| Author: CTPI [redacted] | Reply due by: 28/09/2018 | |

| Service Area | | | Action | | |
|--------------|-------------------------------------|------------|--|-------------------------------------|--|
| HHS | <input checked="" type="checkbox"/> | QBCC | Minister Reply | | Dot Point Brief |
| PWAM | | RTA | Chief of Staff Reply | | Detailed Briefing Note |
| BIP | | SPORT | Policy Advisor Reply | | Meeting Briefing Note |
| QGP | | Stadiums Q | COS Acknowledgment - Referred to Dept. | | Phone contact required <input checked="" type="checkbox"/> |
| CS | | DT | MP Acknowledgement | | For Information Only |
| ODG | | DLO Action | Referral to _____ | | Department to Meet |
| ESU | | | CEO/DG Reply | | |
| CLLO | | | Service Area Reply | <input checked="" type="checkbox"/> | |

Minister's Office comments:

VIP - Copy to Min/Cos
 Electorate related

Signature: [redacted] Date: 10 Sept 18

DLO comment: [redacted]

RECEIVED
 12 SEP 2018
 BY: KM

Received by DLO: 11/09/2018

Department note:

Mincor Reference:

Due to DDG / ADG:

Due to ESU:

| OPTION | DESCRIPTION |
|--------------------------------|---|
| Minister Reply | A letter is prepared for the Minister's signature. |
| Chief of Staff Reply | A letter is prepared for the Chief of Staff's signature. |
| Policy Advisor Reply | A letter is prepared for the Senior Policy Advisor's signature. |
| COS Reply Referred to Dept. | Templated COS response advising matter has been referred to department for management Letter to be sent with electronic signature. Dot Point Briefing Note emailed to DLO mailbox. |
| MP Acknowledgement | Min response to a MP letter presenting a constituent enquiry Govt MP's receive a CC of the constituent response. Non-Govt MP advised of a direct response. |
| Referral To | A letter is prepared for the signature of the Chief of Staff which refers matters on to another Ministerial portfolio. NOTE – Minister's Office comments will provide further instruction. |
| CEO/DC Reply | A letter is prepared for the Chief Executive Officer's (NG Commissioner) signature. |
| Service Area Reply | The appropriate Service Area replies direct to the author. The correspondence is filed by the Service Area. |
| Dot Point Brief | A one-page Briefing Note is prepared in response to the matters addressed as a result of the correspondence. |
| Detailed Briefing Note | A comprehensive Briefing Note is prepared. |
| Meeting Briefing Note | A meeting Briefing Note to be prepared. |
| For Information/For Filing | The correspondence is forwarded to the Service Area for information and appropriate action. |
| Phone contact required | The correspondent should be contacted within 48 hours of the original correspondence to discuss matters raised. |
| Department to meet | An appropriate officer of the department is to make a meeting to discuss the matters raised with the Correspondence. |

General Rules

Where an email address has been provided, the signed letter is to be emailed to the writer.

Dates are set by the Ministers Office 5 business days after the Department receives the correspondence for Priority items and 10 business days for other items.

Where timeframes are not able to be achieved due to reasons outside the control of the Department an extension of time should be negotiated with the Department Liaison Officers. If more than 5 days extension is being requested an interim briefing note and response should be prepared for the Policy Advisors signature advising of the reason for the delayed. This should be prepared prior to the extension being granted.

Release

HONCHIN Courtney

From: HHS ODDG Information Requests
Sent: Monday, 3 September 2018 4:45 PM
To: HHS BSS ESU E-mail
Cc: HHS Strategy Policy and Programs Executive Requests; HHS ODDG Information Requests
Subject: FW: Ministerial Request Referral Request: CTPI [redacted] regarding [redacted]
[redacted]

Categories: To be registered

Good afternoon,

Could you please track this email in Mincor and action to Regulatory Services.

Thank you,

Emma

Emma Kursius

A/Senior Business Services Officer | Office of the Deputy Director-General
Housing, Homelessness and Sport | Department of Housing and Public Works
Level 19 | 41 George Street | Brisbane
ph 07 3007 4403 | email emma.kursius@hpw.qld.gov.au
www.hpw.qld.gov.au

Customers first | Ideas into action | Unleash potential | Be courageous | Empower people | Healthy and safe workforce

From: Housing and Public Works DLO
Sent: Monday, 3 September 2018 4:39 PM
To: HHS ODDG Information Requests
Subject: Ministerial Request Referral Request: [redacted] regarding [redacted]

Good afternoon

The MOs have received a referral from the Department of Communities from [redacted]

Can you please register in MINCOR and provide a COS Reply referred to the Department.

Regards
Kate

From: Josephine Excell (DSQ) <Josephine.Excell@Communities.qld.gov.au> **On Behalf Of** CDSS DLO
Sent: Monday, 3 September 2018 3:07 PM
To: Housing and Public Works DLO <DLO@hpw.qld.gov.au>
Cc: CDSS DLO <CDSS.DLO@communities.qld.gov.au>
Subject: Referral Request: [redacted] regarding [redacted]

Good afternoon

Minister O'Rourke's office has received the below email regarding serious concerns with [redacted]
[redacted]

I understand retirement villages may fall within the DHPW portfolio. AS such, wondering whether you might please confirm acceptance of this matter for direct response to [redacted]

If the letter of response could please acknowledge that the author initially wrote to Minister O'Rourke, that would be greatly appreciated.

Many thanks

Josephine Excell | A/Departmental Liaison Officer
Ministerial Liaison | Office of the Director-General | Department of Communities, Disability Services and Seniors
former Department of Communities, Child Safety and Disability Services
T: 07 3086 3566

CTPI

RTI Act
Release

CTPI

This email, together with any attachments, is intended for the named recipient(s) only; and may contain privileged and confidential information. If received in error, you are asked to inform the sender as quickly as possible and delete this email and any copies of this from your computer system network.

If not an intended recipient of this email, you must not copy, distribute or take any action(s) that relies on it; any form of disclosure, modification, distribution and /or publication of this email is also prohibited.

Unless stated otherwise, this email represents only the views of the sender and not the views of the Queensland Government.

Please consider the environment before printing this email.

DISCLAIMER: The information contained in the above e-mail message or messages (which includes any attachments) is confidential and may be legally privileged. It is intended only for the use of the person or entity to which it is addressed. If you are not the addressee any form of disclosure, copying, modification, distribution or any action taken or omitted in reliance on the information is unauthorised. Opinions contained in the message(s) do not necessarily reflect the opinions of the Queensland Government and its authorities. If you received this communication in error, please notify the sender immediately and delete it from your computer system network.

RTI
Released

DEPUTY DIRECTOR-GENERAL CORRESPONDENCE BRIEFING NOTE

Subject: Correspondence from CTPI [redacted] to the Honourable Coralee O'Rourke MP, Minister for Communities and Minister for Disability Services and Seniors regarding [redacted]

Decision/Action by: General - Letter
Reasons for Urgency: N/A
Briefing type: Correspondence - Requested
Responsible Area: Regulatory Services
Electorate: [redacted]
Contact Officer: Terry Green (07) 3008 3435

PURPOSE

To provide the Deputy Director-General with additional background information and context to support the information contained in the proposed response.

RECOMMENDATION

It is recommended that the letter to [redacted] be signed.

| Noted | Approved | Not approved |
|-------|----------|--------------|
| | ✓ | |

| | |
|--|------------------------|
| <p>DIVISIONAL HEAD APPROVAL</p> <p>Signature: [redacted]</p> <p>Mark Wall Acting General Manager Housing, Homelessness Services and Sport Date: [redacted]</p> | <p>COMMENTS</p> |
| <p>DEPUTY DIRECTOR-GENERAL COMMENTS</p> <p>[redacted]</p> | |

BACKGROUND

- [Redacted]
- [Redacted]
- [Redacted] is a registered level two residential service under the *Residential Services (Accreditation) Act 2002* (the Act) and was registered on 28 February 2012.
- The service consists of 76 independent living units with a food service provided in the community dining building.
- Regulatory Services is responsible for the regulation of residential services under the Act.
- Regulatory Services investigates complaints to determine if any compliance or enforcement action is required.

CONSULTATION

Internal Consultation

- Not applicable.

External Consultation


- Not applicable.

ATTACHMENT/S

- Attachment 1 – Letter to [Redacted] CTPI

FURTHER INFORMATION

- [Redacted]
- [Redacted] wants a full enquiry conducted on privately owned retirement living and supported accommodation.
- On 4 September 2018, Regulatory Services contacted [Redacted] to discuss [Redacted] concerns raised in [Redacted] correspondence.
- [Redacted]
- [Redacted]
- [Redacted]
- On 17 September 2018, Regulatory Services conducted an accreditation assessment at [Redacted] which included a site visit and interviews [Redacted]
- Regulatory Services spoke to [Redacted] about various allegations made about the service. [Redacted]
- [Redacted] No breach was identified.
- Regulatory Services spoke to a group of female residents who stated they were happy with the food and had no issues with the service. Another two male residents stated they were happy with the service and one was happy taking out the bins and helping tidy up the gardens.
- [Redacted] concerns could not be substantiated.
- On 18 September 2018, Regulatory Services contacted [Redacted] to advise [Redacted] of the outcome of the accreditation audit and discussed with [Redacted] in detail:
 - the process for conducting an accreditation site audit;
 - how accreditation standards are assessed;
 - how [Redacted] can contact the Residential Tenancies Authority about tenancy agreement disputes;
 - how to make a complaint to the department;
 - the online public register of residential services;

- the differences between a residential service, a retirement village and a manufactured home park; and
- the legislative requirements for operators of residential services.
- CTPI
- 
- No further action on this matter is required.

RTI Act
Release



Regulatory Operations

Officer Tatjana Cindric

Telephone (07) 3008 3450

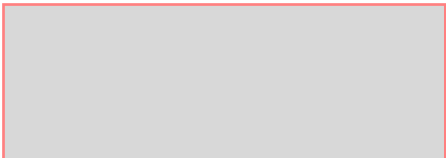
Our Ref



**Queensland
Government**

Department of
Housing and Public Works

3 October 2018



OFFICIAL WARNING

CTPI

I am writing to warn you that an authorised officer of the Department of Housing and Public Works has detected an offence committed by you. Details of the offence are:

| | |
|--|---|
| Date (or date from) | 17 September 2018 |
| Location of offence | [Redacted] |
| Description / nature of offence | Service provider for a registered service must make and keep for at least the time prescribed under a regulation, the records prescribed. |
| Act Reference | <i>Residential Services (Accreditation) Act 2002</i> Section 77 |
| Maximum Penalty | 10 penalty units (\$1,305.50) |
| Corrective Action Required | Service provider to keep records of complaints. |

While this is a formal warning, the department reserves the right to take other enforcement action if it considers it appropriate to do so. Should an authorised officer of the department find evidence at any future date of an offence of a similar nature, appropriate enforcement action may be instituted without any further warning.

If you require any further information, please contact the department on 07 3008 3450 or by email to ResidentialServices@hpw.qld.gov.au.

Yours sincerely



Tatjana Cindric
Regulatory Analyst
Regulatory Operations

Version - 310118

NOTE:
CORPORATION FINES
Under Section 181C of the *Penalties and Sentences Act 1992*, the maximum fine is an amount equal to 5 times the maximum fine for an individual.

Level 19, 41 George Street
Brisbane Queensland
GPO Box 690 Brisbane
Queensland 4001 Australia

Telephone +617 3008 3450
Facsimile +617 3008 5960
Website www.hpw.qld.gov.au

Compliance

Reference number Registration name

[Redacted]

Registration type Residential Service

Address

[Redacted]

Start date End date Assigned to
04/09/2018 DPWServices\tatjana.cindric

Compliance Details

Compliance type Subject
Complaint Various Compliant

Details

04.09.18 Received: Ministerial Request Referral Request:CTPI [Redacted] regarding [Redacted]

A lengthy list of issues written in an email from the complainant [Redacted] to Minister about the issues at the village (refer to electronic file; emails and complaint notes)

Contact Name and Details

[Redacted]

Activities

| Activity type | Start Date | Created date |
|---------------|------------|--------------|
| Phone OUT | 04/09/2018 | 08/10/2018 |

4.10.18 Phone call made to CTPI [redacted] The complainant wants to stay anonymous. Explained RS regulations, accreditation and registration requirements. Explained the compliance investigations.



Site Visit 17/09/2018 08/10/2018

17.09.18 Met with [redacted] for the level 2 accreditation renewal, prior to audit spent an hour discussing complaint recently received. No names were mentioned and in general terms discussed issues raised [redacted] No breaches were identified however the SP was advised that mandatory records were not kept (incident and complaints register and records).
Extensive notes are available electronically of the issues discussed.

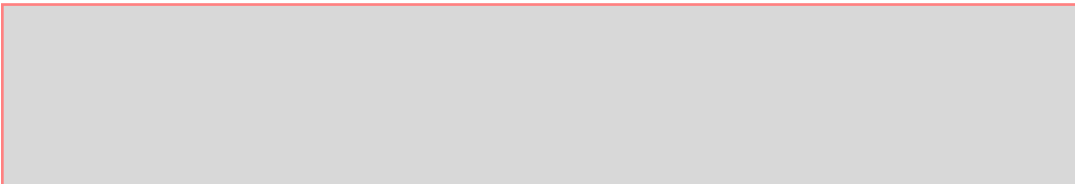


Warning Notice 03/10/2018 08/10/2018

Warning Notice - generated pending TL approval.

Other 08/10/2018 08/10/2018

Closure of complaint completed as no further action is required. Pending TL approval.
Compliance 227.



MINISTERIAL CORRESPONDENCE BRIEFING NOTE

Subject: The Honourable Grace Grace MP, Minister for Education and Minister for Industrial Relations regarding Electrical Safety Office inspections of residential services

Decision/Action by: General - Letter

Reasons for Urgency: N/A

Briefing type: Correspondence - Requested

Responsible Area: Regulatory Services

Electorate: Statewide

Contact Officer: Terry Green, Manager (07) 3008 3435

PURPOSE

To provide the Minister's office with additional background information and context to support the information contained in the proposed response.

RECOMMENDATION

It is recommended that the letter to the Honourable Grace Grace MP be signed.

| Noted | Approved | Not approved |
|-------|----------|--------------|
| | | |

Routine (Straight to MO) **Non-routine** (DG to endorse)

| | |
|---|------------------------|
| <p>GENERAL MANAGER ENDORSEMENT</p> <p>Endorsed</p> | <p>COMMENTS</p> |
| <p>Mark Wall Acting General Manager, Strategy, Policy and Programs Housing and Homelessness Services Endorsed MW 01/03/2018</p> <p>Date: 11/03/2019</p> | |
| <p>DIVISIONAL HEAD ENDORSEMENT</p> <p>CTPI</p> | <p>COMMENTS</p> |
| <p>Trish Woolley Deputy Director-General Housing, Homelessness and Sport</p> <p>Date: 12/3/19</p> | |
| <p>DIRECTOR-GENERAL ENDORSEMENT</p> <p><i>Liza Carroll</i></p> | <p>COMMENTS</p> |
| <p>Liza Carroll Director-General Department of Housing and Public Works</p> <p>Date: 13/3/19</p> | |
| <p>MINISTER'S OFFICE APPROVAL</p> <p><i>[Signature]</i></p> <p>23/3</p> | <p>COMMENTS</p> |
| <p>Name:</p> <p>Date: 2/4/19.</p> | |

BACKGROUND

- It is understood that due to a change in leadership in 2017, the Electrical Safety Office (ESO), Department of Industrial Relations, commenced an audit inspection program of residential services to meet their legislative requirements.
- Residential service operators meet the definition of “a person conducting a business” under the *Electrical Safety Act 2002* and are required to comply with the duties and obligations within the *Electrical Safety Regulation 2013* (administered by the ESO).
- The Department of Housing and Public Works provided the ESO with address details of registered residential services for the purposes of planning the audit schedule. Audits were conducted progressively on at least a 10 per cent sample of residential services between 11 May 2018 and 17 January 2019 (275 residential services currently registered).
- On 17 January 2019, the Minister’s office received informal advice of an impending letter from Minister Grace which included a proposal that the *Residential Services (Accreditation) Act 2002* and *Residential Services (Accreditation) Regulation 2018* be amended to support regulatory analysts’ ability to detect and request rectification of electrical safety matters in residential services.
- On 25 January 2019, the department sought an urgent meeting with the ESO and received a copy of the ESO’s audit findings as at 17 January 2019 (refer to **Attachment 1**). The report advised that the ESO had conducted audits of 31 residential services since 2017 and identified issues at 13 of these residential services that included:
 - wiring rules defects
 - safety switches not installed, not functioning or not tested
 - specified electrical equipment not tested
 - defects in a switchboard
 - an exposed, live single-insulated wire in a light sensor.
- In response to the audit, the ESO has issued 18 Improvement Notices and two Notices to Person in Control of Equipment.
- The letter from Minister Grace dated 16 February 2019 provides updated data and states that 31 residential services have been audited and 22 Notices were issued by the ESO. These statistics are slightly higher than the audit report provided to the department.
- The department has contacted the ESO and requested an updated audit report be released for review.

CONSULTATION

Internal Consultation

- Not applicable.

External Consultation

- CTPI Electrical Safety Office, Office of Industrial Relations.

ATTACHMENT

- Attachment 1 – Copy of the audit findings provided by the ESO, dated 17 January 2019.

FURTHER INFORMATION

- The agreed approach outlined in Minister Grace’s letter is supported and the next steps involve:
 - the ESO continuing to conduct audits of residential services
 - the joint development of information materials targeted to residential services
 - Regulatory Services undertaking accreditation of residential services while carrying out an assessment of compliance (based on the jointly agreed information materials) through certification undertaken by the provider.
- When a residential service is applying for registration, the service operator is required to obtain a certificate from their local council confirming compliance with Building Code MP5.7 – Residential Services Building Standard. The purpose of the MP5.7 is to ensure that residential services accommodation provide suitable standards of health, safety and amenity for residents, however the MP5.7 does not deal with electrical safety matters.

- Regulatory Services has assessed the findings of the ESO report dated 17 January 2019 and will seek further advice from the ESO regarding service provider compliance with the Notices issued by the ESO and, where appropriate, take regulatory action against service providers not complying with Notices issued by the ESO.
- Regulatory Services have previously placed conditions on the accreditation of service providers due to concerns with electrical safety. Amendments to the *Residential Services (Accreditation) Act 2002* and Residential Services (Accreditation) Regulation 2018 are not required to facilitate compliance action by the department against service providers who are not providing a safe environment for their residents.
- As departmental staff are not qualified licenced electricians, it would be inappropriate to require departmental staff to conduct technical inspections of electrical services as an alternative to audits conducted by the ESO.

RTI Act
Release

Release

Supported and Temporary Accommodation audit findings

Data received confirming 31 site audits as at 17/01/2019. The following enforcement action has been undertaken to date.

Improvement notices – 18 notices issued to 11 sites (providers)

| Site location | Identified non-compliance |
|---|--|
| CTPI | <p>Wiring rules defects</p> <ul style="list-style-type: none"> ○ Insufficient switchboard marking to identify all circuits, ○ Exposed single insulated cable at stove ○ Insufficient support of TPS cables on back veranda |
| | <p>Wiring rules defects</p> <ul style="list-style-type: none"> ○ Insufficient switchboard marking to identify all circuits and ○ Insecure mounting of safety switch |
| | <p>No approved safety switch on the general purpose socket outlets for (leased residential portion of the property)</p> |
| | <p>No approved safety switch on the general purpose socket outlets</p> |
| | <p>Safety switches failed to operate in 6 units when tested (push button test)</p> |
| | <p>Specified electrical equipment not tested by a competent person or connected to a safety switch</p> |
| | <p>Fault with double socket outlet in common area - cracked switch mechanism</p> |
| | <p>No evidence of a system to enable routine testing of safety switches by a competent person</p> |
| | <p>Defects at switchboard identified –</p> <ul style="list-style-type: none"> ○ Earthing electrode covered and painted and not visible to enable testing or verification ○ Switchboard has a large opening behind switchboard panel that does not enable adequate protection against the spread of fire |
| | <p>No evidence of a system to enable routine testing of safety switches by a competent person</p> |
| <p>Defects identified –</p> <ul style="list-style-type: none"> ○ Earthing electrode covered and painted and not visible to enable testing or verification ○ Light fittings with exposed energised parts ○ Electrical switchboard has missing pole fillers ○ Circuit protection devices and main switch not marked ○ Possible faulty power outlet covered with tape rather than fixed or disconnected ○ Flexible cord (in laundry) has single insulated cables exposed at the point of connection to the plug | |

CTPI

Failure to ensure electrical equipment is electrically safe.

Electrical equipment not installed in accordance with standards

- o Disconnected, redundant or unused conductors in vicinity of electrical switchboard
 - not terminated and protected at both ends as required for live conductors
 - not suitably fixed in position to protect from mechanical damage

Failure to ensure electrical equipment is electrically safe.

Electrical equipment not installed in accordance with standards

- o Wiring associated with the electrical switchboard not installed in such a manner that, in the event of a fire at the switchboard, the spread of fire will be kept to a minimum
- o Location of electrical switchboard is obstructed by the building structure causing inadequate space to allow electrical equipment to be safely and effectively operated and adjusted or sufficient unimpeded space to enable a person to leave the vicinity of the switchboard under emergency conditions

Failure to ensure electrical equipment is electrically safe.

Electrical equipment not installed in accordance with standards

- o Internal wiring of a fluorescent light in the main garage area is exposed due to damaged lamp holder
- o Lamp holder not adequately secured and is missing the terminal cover

Failure to ensure electrical equipment is electrically safe. No evidence that electrical equipment and/or safety switches have been inspected and tested at intervals required by relevant standards.

No approved safety switch on the general purpose socket outlets

No evidence of a system to enable testing of safety switches as per relevant standards

No evidence of a system to enable testing of safety switches as per relevant standards (*second notice issued*)

No evidence of a system to enable testing of safety switches as per relevant standards

Safety switch at the main switchboard was overloaded

Electrical Safety Notice to Person in Control of Equipment – 2 notices issued at two sites

Exposed, live single-insulated wires at light sensor in laundry

Faulty safety switch identified and no schedule of safety switch testing

Findings

Initial findings from this pilot program (round 1) indicate a low level of knowledge of duty holders under electrical safety legislation in regard to ensuring electrical equipment is electrically safe through testing and maintenance.

Indications from the subsequent round of audits indicates similar findings to round 1.

RTI Act
Release

Release



Minister for Housing and Public Works
Minister for Digital Technology
Minister for Sport

Our Ref: HS 00403-2019
Your Ref: 19/4683; FILE19701; REC20385

3 APR 2019

The Honourable Grace Grace MP
Minister for Education and Minister for Industrial Relations
industrialrelations@ministerial.qld.gov.au

1 William Street
Brisbane Queensland
GPO Box 2457 Brisbane
Queensland 4001 Australia
Telephone +617 3719 7270
Facsimile +617 3012 9017
E: hpwds@ministerial.qld.gov.au

Dear Minister *Grace*

Thank you for your letter of 16 February 2019 regarding recent safety audits of residential services conducted by the Electrical Safety Office.

The *Residential Services (Accreditation) Act 2002* provides a regulatory framework where conditions can be placed on service providers when staff from the Department of Housing and Public Works identify electrical safety issues. However, departmental inspections of electrical safety matters are unlikely to be a satisfactory alternative to the auditing undertaken by the Electrical Safety Office.

When a residential service is applying for registration, the service operator is required to obtain a certificate from their local council confirming compliance with Building Code MP5.7 – Residential Services Building Standard. The purpose of the MP5.7 is to ensure that residential services accommodation provides suitable standards of health, safety and amenity for residents, however the MP5.7 does not deal with electrical safety matters.

Residential service operators would meet the definition of "a person conducting a business" under the *Electrical Safety Act 2002* and are required to comply with the duties and obligations within the *Electrical Safety Regulation 2013*. Staff from my department are not authorised to issue Notices under the Act or Regulation when electrical safety issues are identified.

I am pleased to provide my support for the collaborative approach you have proposed to raise electrical safety standards in accredited residential services to protect the health and safety of all residents. I am advised that the department has requested a copy of the most recent report and is working closely with the Electrical Safety Office to address issues raised in the audit. Departmental staff will assess the findings of the latest audit report and continue to work closely with the Electrical Safety Office regarding service provider compliance.

I hope this information answers your enquiry. If I can help with other matters within my portfolio, please contact my office on (07) 3719 7270.

Yours sincerely

Mick de Brenni MP
Minister for Housing and Public Works
Minister for Digital Technology
Minister for Sport

Release

Certificate

Accreditation as a Residential Service

Residential Services (Accreditation) Act 2002 (section 48)

| | |
|-----------------------------------|--|
| Accreditation number: | CTPI |
| Service Provider: | |
| Address of residential service: | |
| Date of accreditation: | 12 March 2015 |
| Date of renewal of accreditation: | 3 March 2018 |
| Condition/s: | <p>Standard 2.1 – Food and Nutrition:</p> <ol style="list-style-type: none">1. The service provider is to consult with a Health Nutritionist to assist in the development of a new <u>two-week cyclical menu</u> for all breakfast and lunch meals. This menu must incorporate the five food groups and must consider resident's dietary requirements, as per the requirements in the Best Practice Guide for <i>Healthy Eating in Supported Accommodation</i>.2. The service provider is to collect the <u>dietary requirements</u> from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file.3. The service provider is to record all food complaints and any other complaints in the <u>complaints register</u> including what action was taken by the service provider. <p>Evidence of the updated menu plan, record of residents dietary requirements and complaints register must be provided to the chief executive by 11 March 2019.</p> |



| | |
|-------------------------------------|-------------------|
| Address for the service of notices: | |
| Level/s of accreditation: | Level One and Two |
| Expiry date of accreditation: | 12 March 2021 |

CTPI

Delegate of the Chief Executive

Department of Housing and Public Works

Date: 21 / 2 / 2019

Section 83 of the Residential Services (Accreditation) Act 2002 states that the service provider of a registered service must display this certificate at a place at the registered premises where it is likely to be seen by residents.

Residential Services (Accreditation) Act 2002

**Checklist for
AMENDMENT OF ACCREDITATION**

| | |
|--------------------------|------|
| Address: | CTPI |
| Service Provider: | |

FILE ALLOCATION

| | DATE | COMMENTS |
|--|------|----------|
| <input type="checkbox"/> REGGIE updated | | |
| <input type="checkbox"/> REGGIE – activity notes | | |

ACCREDITATION DETAILS

| | DATE | LENGTH OF ACCREDITATION | DETAIL ANY CONDITIONS OR QUALITY IMPROVEMENT PLAN |
|---|------------|-------------------------|---|
| <input type="checkbox"/> Initial Accreditation | 12/03/2015 | | |
| <input type="checkbox"/> Most Recent Renewal of Accreditation | 03/05/2018 | 3 years | |

AMENDMENT OF ACCREDITATION DETAILS

| | DATE | COMMENTS |
|--|------|---|
| DETAILS OF AMENDMENT | | |
| Issue with current accreditation and reason for amendment: <input type="checkbox"/> Accreditation Standards Risk and Timeframe Report completed <input type="checkbox"/> Copy printed and attached to file | | Food and nutrition provided to residents does not comply with the recommended requirements in the best practice guide for Healthy Eating. Dietary requirements not recorded or displayed. No record of an incident in the incidents register where a resident with a food service has complained about the quality of the food provided. |

**Checklist for
AMENDMENT OF ACCREDITATION**

| | | |
|--|--|---|
| <p>Investigation conducted and evidence collected:</p> <p><input type="checkbox"/> Accreditation Standards Risk and Timeframe Report completed</p> <p><input type="checkbox"/> Copy printed and attached to file</p> | | <p>The evidence considered when making the decision includes:</p> <p>CTPI</p> <p>Observations from the compliance audit conducted on 29 January 2019</p> <p>Discussions with residents at the residential service</p> |
| <p><input type="checkbox"/> Detail amendment proposed</p> <p><i>(Detail conditions or quality improvements to be recommended here)</i></p> | | <p>Evidence of a new two week cyclical menu that incorporates the five food groups, breakfast and lunch meals and residents dietary requirements is to be provided to the chief executive by 5 March 2019</p> <p>The service provider is to record all food complaints and any other complaints in the complaints register including what action was taken by the service provider.</p> <p>Evidence of a record of food complaints and other complaints in the complaints register is to be provided to the chief executive by 5 March 2019.</p> <p>As part of the conditions imposed on the accreditation, Regulatory Analysts will be conducting unannounced weekly visits to observe the quality of the food and nutrition served to residents at the residential service.</p> |

| RECOMMENDATION AND APPROVAL – PROPOSED AMENDMENT OF ACCREDITATION | |
|---|------------------------|
| <p>Proposed amendment of Accreditation of Residential Service detailed recommended</p> | <p>Approved</p> |

Checklist for AMENDMENT OF ACCREDITATION

| | |
|--|---|
| Signature: _____ Name: <u>Chris Castley</u> Position: <u>Regulatory Analyst</u> Date: / / | Signature: _____ Name: _____ Position: _____ Date: / / |
|--|---|

PROPOSED AMENDMENT OF ACCREDITATION APPROVED

| DATE SENT | COMMENTS |
|---|----------|
| <input type="checkbox"/> Show Cause Notice sent to service provider | |

RESPONSE TO SHOW CAUSE NOTICE

| DATE | COMMENTS |
|---|----------|
| <input type="checkbox"/> Response due / / | |
| <input type="checkbox"/> Response received from service provider <ul style="list-style-type: none"> <input type="radio"/> No <input type="radio"/> Yes – <i>provide details and attach copy</i> | |

| RECOMMENDATION AND APPROVAL – AMENDMENT OF ACCREDITATION | |
|--|---|
| Amendment of Accreditation of Residential Service detailed is recommended following: <ul style="list-style-type: none"> <input type="radio"/> No response to show cause notice <input type="radio"/> Response to show cause notice – copy attached | <ul style="list-style-type: none"> <input type="radio"/> Amendment of Accreditation Approved <input type="radio"/> Amendment of Accreditation decision overturned following review of response to show cause notice <input type="radio"/> Approved - Manager |

**Checklist for
AMENDMENT OF ACCREDITATION**

| | |
|---|---|
| Signature: _____ Name: _____ Position: _____ Date: / / | Signature: _____ Name: _____ Position: _____ Date: / / |
|---|---|

AMENDMENT OF ACCREDITATION – DECISION CONFIRMED

| DATE SENT | COMMENTS |
|---|----------|
| Advice sent to service provider, including: <input type="checkbox"/> Letter <input type="checkbox"/> Statement of Decision <input type="checkbox"/> Certificate of Accreditation <input type="checkbox"/> Application for Review of Decision (Form 5) | |

AMENDMENT OF ACCREDITATION – DECISION OVERTURNED

| DATE SENT | COMMENTS |
|--|----------|
| Advice sent to service provider, including: <input type="checkbox"/> Letter | |

| RECORDING KEEPING | DATE | COMMENTS |
|---|------|----------|
| <input type="checkbox"/> REGGIE Updated | | |
| <input type="checkbox"/> REGGIE Follow-Ups created <input type="radio"/> Monitor any conditions <input type="radio"/> Accreditation renewal | | |
| <input type="checkbox"/> All activity notes are recorded on REGGIE | | |
| <input type="checkbox"/> Copy of printed file notes placed on file | | |

QUALITY ASSURANCE CHECK

| | |
|-------------------------------|--------------------|
| CHECKLIST PREPARED BY: | CHECKED BY: |
|-------------------------------|--------------------|

CTPI

Checklist for AMENDMENT OF ACCREDITATION

| | |
|-------------------------|--|
| | <ul style="list-style-type: none"><input type="radio"/> Amendment of Accreditation approved OR<input type="radio"/> Amendment of Accreditation overturned<input type="radio"/> Letter/s and other documentation sent<input type="radio"/> REGGIE updated |
| Signature: _____ | Signature: _____ |
| Name: _____ | Name: _____ |
| Position: _____ | Position: _____ |
| Date: / / | Date: / / |

RTI Act
Release

Residential Services (Accreditation) Act 2002

**Checklist for
AMENDMENT OF ACCREDITATION**

| | |
|--------------------------|------|
| Address: | CTPI |
| Service Provider: | |

FILE ALLOCATION

| | DATE | COMMENTS |
|--|------|----------|
| <input type="checkbox"/> REGGIE updated | | |
| <input type="checkbox"/> REGGIE – activity notes | | |

ACCREDITATION DETAILS

| | DATE | LENGTH OF ACCREDITATION | DETAIL ANY CONDITIONS OR QUALITY IMPROVEMENT PLAN |
|---|------------|-------------------------|---|
| <input type="checkbox"/> Initial Accreditation | 12/03/2015 | | |
| <input type="checkbox"/> Most Recent Renewal of Accreditation | 03/05/2018 | 3 years | |

AMENDMENT OF ACCREDITATION DETAILS

| | DATE | COMMENTS |
|--|------|---|
| DETAILS OF AMENDMENT | | |
| Issue with current accreditation and reason for amendment: <input type="checkbox"/> Accreditation Standards Risk and Timeframe Report completed <input type="checkbox"/> Copy printed and attached to file | | Food and nutrition provided to residents does not comply with the recommended requirements in the best practice guide for Healthy Eating. Dietary requirements not recorded or displayed. No record of an incident in the incidents register where a resident with a food service has complained about the quality of the food provided. |

Checklist for AMENDMENT OF ACCREDITATION

| | | |
|--|--|---|
| <p>Investigation conducted and evidence collected:</p> <ul style="list-style-type: none"><input type="checkbox"/> Accreditation Standards Risk and Timeframe Report completed<input type="checkbox"/> Copy printed and attached to file | | <p>The evidence considered when making the decision includes:</p> <p>CTPI</p> <p>Observations from the compliance audit conducted on 29 January 2019</p> <p>Discussions with residents at the residential service</p> |
|--|--|---|

RTI Act
Release

Checklist for AMENDMENT OF ACCREDITATION

| | |
|--|---|
| <input type="checkbox"/> Detail amendment proposed (Detail conditions or quality improvements to be recommended here) | <p>In accordance with Standard 2.1 – Food and Nutrition; the service provider is to supply the following document to Regulatory Operations as specifically outlined below:</p> <ol style="list-style-type: none"> 1. The service provider is to consult with a Health Nutritionist to assist in the development of a new two-week cyclical menu for all breakfast and lunch meals. This menu must incorporate the five food groups and must consider resident’s dietary requirements, as per the requirements in the Best Practice Guide for <i>Healthy Eating in Supported Accommodation</i>. 2. The service provider must provide evidence of the updated menu plan to the department by 11 March 2019. <p>In accordance with Standards 2.1 – Food and Nutrition and Standard 1.A.4 Grievance Mechanism; the service provider is to supply the following records to Regulatory Operations as specifically outlined below:</p> <ol style="list-style-type: none"> 3. The service provider is to implement a Complaint’s Register to record all food and other complaints received by the service provider. 4. The service provider must provide evidence of a Complaint’s Register to the department by 11 March 2019. |
|--|---|

| RECOMMENDATION AND APPROVAL – PROPOSED AMENDMENT OF ACCREDITATION | |
|--|--|
| <p>Proposed amendment of Accreditation of Residential Service detailed recommended</p> <p>Signature: _____</p> <p>Name: <u>Chris Castley</u></p> <p>Position: <u>Regulatory Analyst</u></p> <p>Date: / /</p> | <p>Approved</p> <p>Signature: _____</p> <p>Name: <u>Terry Green</u></p> <p>Position: <u>Manager</u></p> <p>Date:</p> |

Checklist for AMENDMENT OF ACCREDITATION

PROPOSED AMENDMENT OF ACCREDITATION APPROVED

| DATE SENT | COMMENTS |
|---|----------|
| <input type="checkbox"/> Show Cause Notice sent to service provider | |

RESPONSE TO SHOW CAUSE NOTICE

| DATE | COMMENTS |
|---|----------|
| <input type="checkbox"/> Response due 27/02/2019 | |
| <input type="checkbox"/> Response received from service provider <input type="radio"/> No <input type="radio"/> Yes – provide details and attach copy | |

| RECOMMENDATION AND APPROVAL – AMENDMENT OF ACCREDITATION | |
|--|---|
| <p>Amendment of Accreditation of Residential Service detailed is recommended following:</p> <p><input type="radio"/> No response to show cause notice</p> <p><input type="radio"/> Response to show cause notice – copy attached</p> <p>Signature: _____</p> <p>Name: _____</p> <p>Position: _____</p> <p>Date: / /</p> | <p><input type="radio"/> Amendment of Accreditation Approved</p> <p><input type="radio"/> Amendment of Accreditation decision overturned following review of response to show cause notice</p> <p><input type="radio"/> Approved - Manager</p> <p>Signature: _____</p> <p>Name: _____</p> <p>Position: _____</p> <p>Date: / /</p> |

AMENDMENT OF ACCREDITATION – DECISION CONFIRMED

| DATE SENT | COMMENTS |
|--|----------|
| Advice sent to service provider, including: <input type="checkbox"/> Letter | |

Checklist for AMENDMENT OF ACCREDITATION

| DATE SENT | COMMENTS |
|---|----------|
| <input type="checkbox"/> Statement of Decision <input type="checkbox"/> Certificate of Accreditation <input type="checkbox"/> Application for Review of Decision (Form 5) | |

AMENDMENT OF ACCREDITATION – DECISION OVERTURNED

| DATE SENT | COMMENTS |
|--|----------|
| Advice sent to service provider, including: <input type="checkbox"/> Letter | |

| RECORDING KEEPING | DATE | COMMENTS |
|--|------|----------|
| <input type="checkbox"/> REGGIE Updated | | |
| <input type="checkbox"/> REGGIE Follow-Ups created <ul style="list-style-type: none"> <input type="radio"/> Monitor any conditions <input type="radio"/> Accreditation renewal | | |
| <input type="checkbox"/> All activity notes are recorded on REGGIE | | |
| <input type="checkbox"/> Copy of printed file notes placed on file | | |

QUALITY ASSURANCE CHECK

| CHECKLIST PREPARED BY: | CHECKED BY: |
|--|--|
| Signature: _____ Name: _____ Position: _____ | <input type="radio"/> Amendment of Accreditation approved OR <input type="radio"/> Amendment of Accreditation overturned <input type="radio"/> Letter/s and other documentation sent <input type="radio"/> REGGIE updated Signature: _____ Name: _____ Position: _____ |

| |
|--------|
| RS No. |
| CTPI |

**Checklist for
AMENDMENT OF ACCREDITATION**

| | |
|-------------------|-------------------|
| Date: / / | Date: / / |
|-------------------|-------------------|

RTI Act
Release

Regulatory Services

Officer Chris Castley
Telephone (07) 30083443
Our Ref [REDACTED]



Department of
Housing and Public Works

20 February 2019



**SHOW CAUSE NOTICE
AMENDMENT OF ACCREDITATION**
Residential Services (Accreditation) Act 2002

Dear CTPI [REDACTED]

Residential Service Address: [REDACTED]

The public register of residential services indicates that [REDACTED] is the service provider for the abovementioned registered residential service.

Section 54 of the *Residential Services (Accreditation) Act 2002* (the Act) provides for the amendment of accreditation of a residential service following the issue of a show cause notice if the chief executive is satisfied that:

- for another reason, having regard to the accreditation criteria, the accreditation should be amended

The department is in possession of information, which indicates that:

- The service provider does not provide nutritious meals to residents that incorporate the wide variety of nutritious foods from the five food groups including vegetables, fruit, milk, yoghurt or cheese, lean meat and poultry, fish, eggs, tofu, nuts and seeds, grain (cereal) foods.
- The service provider does not record residents dietary requirements within their menu plans or displayed in the kitchen.
- The service provider does not record any food complaints made by the residents in a Complaints Register.

The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the Residential Services (Accreditation) Regulation 2018:

Standard 2.1 – Food and Nutrition:

1. The service provider is to consult with a Health Nutritionist to assist in the development of a new two-week cyclical menu for all breakfast and lunch meals. This menu must incorporate the five food groups and must consider resident's dietary requirements, as per the requirements in the Best Practice Guide for *Healthy Eating in Supported Accommodation*.
2. The service provider is to collect the dietary requirements from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file.
3. The service provider is to record all food complaints and any other complaints in the complaints register including what action was taken by the service provider.

Evidence of the updated menu plan, record of residents dietary requirements and complaints register must be provided to the chief executive by **11 March 2019**.

Under Section 54(2) of the Act, you may provide a written response stating why the accreditation of the residential service being conducted at [REDACTED] should not be amended. Your response to this notice should be provided by 22 March 2019.

If your response is not received within this period, action may be taken to proceed with the amendment of the accreditation of this residential service.

If the decision is ultimately made to amend the accreditation, review and appeal rights apply. These rights will be explained at that time.

If you wish to discuss this matter further please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

CTPI
[REDACTED]

Terry Green

Manager

Regulatory Services

Version – 181018

Regulatory Operations

Officer Castley
Telephone (07) 30083443
Our Ref [Redacted]



Department of
Housing and Public Works

13 May 2019



Residential Service Address:

[Redacted] CTPI

Your Accreditation as a Residential Service has now been amended. You no longer have the conditions placed on your accreditation.

The enclosed Certificate of Accreditation must be displayed at the registered premises at all times in a place where it can be viewed by the residents.

If you need any assistance please contact the department on 30083443 or by email to ResidentialServices@hpw.qld.gov.au.

Yours sincerely

Chris Castley
Regulatory Analyst
Regulatory Operations
Version -- 22/02/2018

RTI
Released

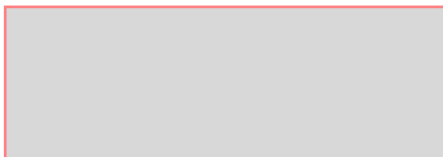
Regulatory Services

Officer Chris Castley
Telephone (07) 30083443
Our Ref [REDACTED]



Department of
Housing and Public Works

3 December 2019



**SHOW CAUSE NOTICE
AMENDMENT OF ACCREDITATION**
Residential Services (Accreditation) Act 2002

CTPI [REDACTED]

Residential Service Address: [REDACTED]

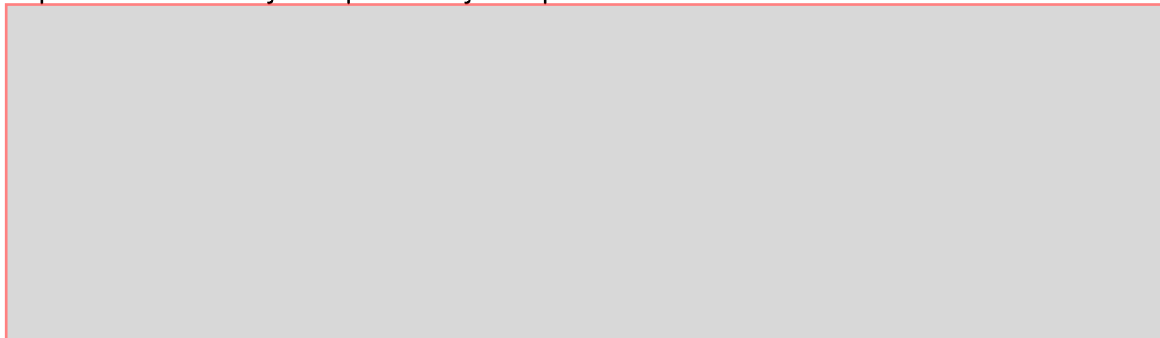
The public register of residential services indicates that [REDACTED] is the service provider for the abovementioned registered residential service.

Section 54 of the *Residential Services (Accreditation) Act 2002* (the Act) provides for the amendment of accreditation of a residential service following the issue of a show cause notice if the chief executive is satisfied that:

- for another reason, having regard to the accreditation criteria, the accreditation should be amended

The department is in possession of information, which indicates that:

- On 16 January 2019, a complaint was received [REDACTED] concerning the quality of the food being prepared and provided at lunch time meals. The complainant informed Regulatory Operations that they had previously complained to the Service Provider and the cook



[REDACTED]

CTPI [REDACTED] On Tuesday 29 January 2019, a compliance audit of the level two residential service was conducted at [REDACTED]. The department is in possession of information, which indicates that accreditation standards 2.1 Food and Nutrition does not comply with section 6(2) and 7(2) of the *Residential Services (Accreditation) Regulation 2018*:

Standard 2.1 – Food and nutrition

- The food and nutrition provided to the residents does not comply with the recommended requirements in the best practice guide for *Healthy Eating in Supported Accommodation*.
- The Service Provider provides the residents with the choice to have breakfast and or lunch time meals.

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

- A Compliance Audit was conducted on 29 January 2019 at the residential service and food preparation was observed along with an inspection of the kitchen.
- There were a number of items contained within the fridge and freezer that were not labelled and dated namely chicken, watermelon, jelly and pies.
- There was no written records of the complainant's complaints regarding the alleged poor quality food being provided [REDACTED] by the Service Provider.
- Residents were interviewed in the dining room at the lunch time meal on 29 January 2019. [REDACTED]

The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the *Residential Services (Accreditation) Regulation 2018*:

Standard 2.1 – Food and Nutrition

- The service provider is to consult with a Health Nutritionist in the development of a new two week cyclical menu that incorporates the five food groups, breakfast and lunch meals which incorporates residents dietary requirements as per the menu example in the best practice guide for *healthy eating in supported accommodation*.

Evidence of a new two week cyclical menu that incorporates the five food groups, breakfast and lunch meals and residents dietary requirements is to be provided to the chief executive by 5 March 2019.

- The service provider is to record all food complaints and any other complaints in the complaints register including what action was taken by the service provider.

Evidence of a record of food complaints and other complaints in the complaints register is to be provided to the chief executive by 5 March 2019.

As part of the conditions imposed on the accreditation, Regulatory Analysts will be conducting unannounced weekly visits to observe the quality of the food and nutrition served to residents at the residential service.

Under Section 54(2) of the Act, you may provide a written response stating why the accreditation of the residential service being conducted at CTPI should not be amended. Your response to this notice should be provided by 27 February 2019.

If your response is not received within this period, action may be taken to proceed with the amendment of the accreditation of this residential service.

If the decision is ultimately made to amend the accreditation, review and appeal rights apply. These rights will be explained at that time.

If you wish to discuss this matter further please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Sandra Softa
A/Manager
Regulatory Services
Version - 181018

RTI Act
Release

Regulatory Services

Officer Chris Castley

Telephone (07) 30083443

Our Ref [REDACTED]



Department of
Housing and Public Works

3 December 2019



**SHOW CAUSE NOTICE
AMENDMENT OF ACCREDITATION**
Residential Services (Accreditation) Act 2002

CTPI [REDACTED]

Residential Service Address: [REDACTED]

The public register of residential services indicates that [REDACTED] is the service provider for the abovementioned registered residential service.

Section 54 of the *Residential Services (Accreditation) Act 2002* (the Act) provides for the amendment of accreditation of a residential service following the issue of a show cause notice if the chief executive is satisfied that:

- for another reason, having regard to the accreditation criteria, the accreditation should be amended

The department is in possession of information, which indicates that:

- The service provider does not provide nutritious meals to residents that incorporate the wide variety of nutritious foods from the five food groups including vegetables, fruit, milk, yoghurt or cheese, lean meat and poultry, fish, eggs, tofu, nuts and seeds, grain (cereal) foods.
- The service provider does not record residents dietary requirements within their menu plans or displayed in the kitchen.
- The service provider does not record any food complaints made by the residents in a Complaints Register.

The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the Residential Services (Accreditation) Regulation 2018:

Standard 2.1 – Food and Nutrition:

1. The service provider is to consult with a Health Nutritionist to assist in the development of a new two-week cyclical menu for all breakfast and lunch meals. This menu must incorporate the five food groups and must consider resident's dietary requirements, as per the requirements in the Best Practice Guide for *Healthy Eating in Supported Accommodation*.
2. The service provider is to collect the dietary requirements from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file.
3. The service provider is to record all food complaints and any other complaints in the complaints register including what action was taken by the service provider.

Evidence of the updated menu plan, record of residents dietary requirements and complaints register must be provided to the chief executive by **11 March 2019**.

Under Section 54(2) of the Act, you may provide a written response stating why the accreditation of the residential service being conducted at CTPI should not be amended. Your response to this notice should be provided by 22 March 2019.

If your response is not received within this period, action may be taken to proceed with the amendment of the accreditation of this residential service.

If the decision is ultimately made to amend the accreditation, review and appeal rights apply. These rights will be explained at that time.

If you wish to discuss this matter further please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Terry Green
Manager
Regulatory Services
Version – 181018

STATEMENT OF REASONS FOR DECISION

About this Statement of Reasons for Decision

This Statement of Reasons is prepared under Section 155 of the *Residential Services (Accreditation) Act 2002*.

It relates to the the residential service located at CTPI [REDACTED] and follows the decision made on 30 January 2019 to:

- refuse to register the residential service - Section 10(4)
- cancel the registration of the service – Section 15(3)
- refuse to accredit the service - Section 47(4)
- accredit the service on a condition - Section 47(5)
- refuse to renew the accreditation of the service – Section 50(5)
- refuse to extend the period of accreditation - Section 51(3)
- refuse to amend the accreditation of the service in a way the service provider has applied for - Section 53(3)
- amend the accreditation of the service other than in a way the service provider has applied for – Sections 54(3) or 55(2)
- cancel the accreditation of the service – Section 57(3)
- refuse an application for a replacement accreditation certificate - Section 60(3)
- refuse to register the applicant as the service provider for the service - Section 61(4)
- refuse to extend refuse an application to amend the registration of the service to show new premises as the registered premises – Section 64(4)
- refuse to extend the transitional registration period - Section 70(5)
- register the service on a condition - Section 190(2)

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| Background | <p>[REDACTED] is a registered level two residential service operated by [REDACTED] is a purpose built independent living village constructed in about 2003. The Service Provider caters for residents over 55 years. The Service was registered on 9 February 2015. The renewal of accreditation was on 3 May 2018. The next date of accreditation is 12 March 2021.</p> |
| Key Issues | <p>On 29 January 2019, a compliance notice was conducted at [REDACTED]. The department is in possession of information, which indicates that accreditation standards 2.1 Food and Nutrition does not comply with the <i>Residential Services (Accreditation) Regulation 2018</i>.</p> <p>The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the <i>Residential Services (Accreditation) Regulation 2018</i></p> |

Standard 2.1 – Food and Nutrition

- The service provider is to consult with a Health Nutritionist in the development of a new two week cyclical menu that incorporates the five food groups, breakfast and lunch meals and including residents dietary requirements as per the menu example in the best practice guide for *healthy eating in supported accommodation*.

Evidence of a new two week cyclical menu that incorporates the five food groups, breakfast and lunch meals and residents dietary requirements is to be provided to the chief executive by 5 March 2019.

- The service provider is to record all food complaints and any other complaints in the complaints register including what action was taken by the service provider.

Evidence of a record of food complaints and other complaints in the complaints register is to be provided to the chief executive by 5 March 2019.

As part of the conditions imposed on the accreditation, Regulatory Analysts will be conducting unannounced weekly visits to observe the quality of the food and nutrition served to residents at the residential service.

Reasons for the Decision

The decision to

- refuse to register the residential service
- cancel the registration of the service
- refuse to accredit the service
- accredit the service on a condition
- refuse to renew the accreditation of the service
- refuse to extend the period of accreditation
- refuse to amend the accreditation of the service in a way the service provider has applied for
- amend the accreditation of the service other than in a way the service provider has applied for
- cancel the accreditation of the service
- refuse an application for a replacement accreditation certificate
- refuse to register the applicant as the service provider for the service
- refuse to extend refuse an application to amend the registration of

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| | <p>the service to show new premises as the registered premises</p> <p><input type="checkbox"/> refuse to extend the transitional registration period</p> <p><input type="checkbox"/> register the service on a condition</p> <p>was made for the following reasons:</p> <p><u>Standards 2.1 – Food and nutrition</u></p> <ul style="list-style-type: none"> • The food and nutrition provided to the residents does not comply with the recommended requirements in the best practice guide for <i>Healthy Eating in Supported Accommodation</i>. • The Service Provider provides the residents with the choose to have breakfast and or lunch time meals. • CTPI • [Redacted] • [Redacted] • [Redacted] • [Redacted] • A Compliance Audit was conducted on 29 January 2019 at the residential service and food preparation was observed along with an inspection of the kitchen. • There were a number of items contained within the fridge and freezer that were not labelled and dated namely chicken, watermelon, jelly and pies. • There was no written records of the complainant's complaints regarding the alleged poor quality food being provided [Redacted] by the Service Provider. • Residents were interviewed at dinning room at the lunch time meal on 29 January 2019. The four residents spoken to identified that there was no variety in food being provided and the menu was very repetitive at lunch times. For example two meals for a week included fish and two meals a week included chicken. |
| <p>Evidence or Other Material on which the findings were based</p> | <p>The evidence considered when making the decision includes:</p> <ul style="list-style-type: none"> ▪ [Redacted] ▪ Observations from the compliance audit conducted on 29 January 2019 ▪ Discussions with residents at the residential service |

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| <p>Legislative Basis for the Decision</p> | <p>The decision was based on Section 54 of the <i>Residential Services (Accreditation) Act 2002</i>.</p> <p>You can download a copy of the <i>Residential Services (Accreditation) Act 2002</i> from www.legislation.qld.gov.au.</p> |
| <p>Your Appeal Rights</p> | <p>Internal Review</p> <p>Within 28 days, you may apply to the chief executive for a review of this decision.</p> <p>An application for a review must be in writing and be supported by sufficient information to enable the application to be determined.</p> <p>You should use the attached <i>Form 5 Application for Review of Decision</i> to detail your reasons for seeking a review and provide your supporting evidence.</p> <p>Your application for a review should be addressed to:</p> <p>The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001</p> <p>Queensland Civil and Administrative Tribunal</p> <p>If the matter is not resolved through the internal review, you may appeal against the decision on review to the Queensland Civil and Administrative Tribunal (QCAT).</p> <p>For more information contact QCAT on 1300 753 228 or visit www.qcat.qld.gov.au.</p> <p>IMPORTANT INFORMATION</p> <p>An application under section 156 of the Act for a review of a decision does not stay the decision.</p> <p>You may write to the chief executive requesting that the decision be stayed pending the outcome of the review process.</p> |

Sandra Softa
A/Manager
Delegate of Chief Executive
Department of Housing and Public Works
30 / 01 / 2019

Release

STATEMENT OF REASONS FOR DECISION

About this Statement of Reasons for Decision

This Statement of Reasons is prepared under Section 155 of the *Residential Services (Accreditation) Act 2002*.

It relates to the the residential service located at CTPI [REDACTED] and follows the decision made on 29 January 2019 to:

- refuse to register the residential service - Section 10(4)
- cancel the registration of the service – Section 15(3)
- refuse to accredit the service - Section 47(4)
- accredit the service on a condition - Section 47(5)
- refuse to renew the accreditation of the service – Section 50(5)
- refuse to extend the period of accreditation - Section 51(3)
- refuse to amend the accreditation of the service in a way the service provider has applied for - Section 53(3)
- amend the accreditation of the service other than in a way the service provider has applied for – Sections 54(3) or 55(2)
- cancel the accreditation of the service – Section 57(3)
- refuse an application for a replacement accreditation certificate - Section 60(3)
- refuse to register the applicant as the service provider for the service - Section 61(4)
- refuse to extend refuse an application to amend the registration of the service to show new premises as the registered premises – Section 64(4)
- refuse to extend the transitional registration period - Section 70(5)
- register the service on a condition - Section 190(2)

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| Background | <p>[REDACTED] is a registered level two residential service operated by service provider [REDACTED]. The residential service caters for residents over 55 years. The service was registered on 9 February 2015. The renewal of accreditation was accredited on 3 May 2018. The expiry date of accreditation is 12 March 2021.</p> |
| Key Issues | <p>On 29 January 2019, a compliance audit was conducted at [REDACTED] as part of a Compliance Program at level two residential services. The department is in possession of information, which indicates that accreditation standards 2.1 Food and Nutrition does not comply with the <i>Residential Services (Accreditation) Regulation 2018</i>.</p> <ul style="list-style-type: none"> ▪ The service provider does not provide nutritious meals to residents that incorporate the wide variety of nutritious foods from the five food groups including vegetables, fruit, milk, yoghurt or cheese, |

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| | <p>lean meat and poultry, fish, eggs, tofu, nuts and seeds, grain (cereal) foods.</p> <ul style="list-style-type: none"> ▪ The service provider does not record residents dietary requirements within their menu plans or displayed in the kitchen. ▪ The service provider does not record any food complaints made by the residents in a Complaints Register. |
| <p>Reasons for the Decision</p> | <p>The decision to</p> <ul style="list-style-type: none"> <input type="checkbox"/> refuse to register the residential service <input type="checkbox"/> cancel the registration of the service <input type="checkbox"/> refuse to accredit the service <input type="checkbox"/> accredit the service on a condition <input type="checkbox"/> refuse to renew the accreditation of the service <input type="checkbox"/> refuse to extend the period of accreditation <input type="checkbox"/> refuse to amend the accreditation of the service in a way the service provider has applied for <input checked="" type="checkbox"/> amend the accreditation of the service other than in a way the service provider has applied for <input type="checkbox"/> cancel the accreditation of the service <input type="checkbox"/> refuse an application for a replacement accreditation certificate <input type="checkbox"/> refuse to register the applicant as the service provider for the service <input type="checkbox"/> refuse to extend refuse an application to amend the registration of the service to show new premises as the registered premises <input type="checkbox"/> refuse to extend the transitional registration period <input type="checkbox"/> register the service on a condition <p>was made for the following reasons:</p> <p>The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the <i>Residential Services (Accreditation) Regulation 2018</i>:</p> <p><u>Standard 2.1 – Food and Nutrition:</u></p> <ol style="list-style-type: none"> 1. The service provider is to consult with a Health Nutritionist to assist in the development of a new <u>two-week cyclical menu</u> for all breakfast and lunch meals. This menu must incorporate the five food groups and must consider resident's dietary requirements, as per the requirements in the Best Practice Guide for <i>Healthy Eating in Supported Accommodation</i>. 2. The service provider is to collect the <u>dietary requirements</u> from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file. 3. The service provider is to record all food complaints and any other complaints in the <u>complaints register</u> including what action was taken by the service provider. |

Release

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| | <p>Evidence of the updated menu plan, record of residents dietary requirements and complaints register must be provided to the chief executive by 11 March 2019.</p> |
| <p>Evidence or Other Material on which the findings were based</p> | <p>The evidence considered when making the decision includes:</p> <ul style="list-style-type: none"> ▪ Photographic evidence of meals served to residents. ▪ Photographic evidence of meals provided by the service provider to residents. ▪ Observations of food served to residents during the compliance audit on 29 January 2019. ▪ Interviews with residents at the residential service. |
| <p>Legislative Basis for the Decision</p> | <p>The decision was based on Section 54 of the <i>Residential Services (Accreditation) Act 2002</i>.</p> <p>You can download a copy of the <i>Residential Services (Accreditation) Act 2002</i> from www.legislation.qld.gov.au.</p> |
| <p>Your Appeal Rights</p> | <p>Internal Review</p> <p>Within 28 days, you may apply to the chief executive for a review of this decision.</p> <p>An application for a review must be in writing and be supported by sufficient information to enable the application to be determined.</p> <p>You should use the attached <i>Form 5 Application for Review of Decision</i> to detail your reasons for seeking a review and provide your supporting evidence.</p> <p>Your application for a review should be addressed to:</p> <p style="padding-left: 40px;">The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001</p> <p>Queensland Civil and Administrative Tribunal</p> <p>If the matter is not resolved through the internal review, you may appeal against the decision on review to the Queensland Civil and Administrative Tribunal (QCAT).</p> <p>For more information contact QCAT on 1300 753 228 or visit www.qcat.qld.gov.au.</p> |

Release

IMPORTANT INFORMATION

An application under section 156 of the Act for a review of a decision does not stay the decision.

You may write to the chief executive requesting that the decision be stayed pending the outcome of the review process.

Terry Green
Manager
Delegate of Chief Executive
Department of Housing and Public Works
20 / 02 / 2019

RTI Act
Release

Release

CTPI

Regulatory Services

Officer Sheree Gibson
Telephone 3008 3423
Our Ref [Redacted]



Department of
Housing and Public Works

19 March 2019

[Redacted]

Dear Sir/Madam

Residential Service Address: [Redacted]

Your level two residential service under the *Residential Services (Accreditation) Act 2002* for the above premises is subject to your agreement to a Quality Improvement Plan.

This accreditation renewal will remain in force until: 18 April 2020

One of the objectives of the Act is to encourage service providers to continually improve the way they conduct residential services. As indicated at the compliance site audit, a number of items are identified to assist you improve your service. The enclosed Quality Improvement Plan sets out the issues and proposed actions for you to address before 19 April 2019. You are required to review and sign the Quality Improvement Plan and return a copy to the department by 5 April 2019.

If you need any further information please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Sheree Gibson
Regulatory Analyst
Regulatory Services
Encl.
Version - 120218

REMINDER
You are required to return a signed copy of the Quality Improvement Plan to the department by **5 April 2019**
Retain the original document for your records

Quality Improvement Plan

Residential Services (Accreditation) Act 2002

| | |
|--------------------------------|---------------|
| Address of Residential Service | CTPI |
| Name of Service Provider/s | |
| Name of Assessor/s | Sheree Gibson |
| Date of Assessment | 11 March 2019 |

Background

Accreditation is a detailed assessment by the service provider of a registered residential service and the Department of Housing and Public Works of how well the service meets the accreditation standards. The accreditation program also focuses on continuous quality improvement strategies.

Continuous Quality Improvement

Continuous quality improvement means being constantly on the lookout on how to improve practices and is an important component of the accreditation process

The key principles of continuous quality improvement are:

- responsiveness to residents, their rights and needs
- organisational improvement which is management driven
- focus on processes and systems and how they can improve outcomes
- ongoing use of data and information that allows quality of service to be measured
- development and involvement of staff (if applicable) in contributing to better outcomes
- quality improvement and self-assessment as part of a culture

Steps towards Quality Improvement

The following Quality Improvement Plan details areas where issues have been identified and proposed actions to be undertaken before the next renewal of your accreditation is due.

Your Next Steps

You are required to

- Review the Quality Improvement Plan, including the proposed actions
- Sign the Quality Improvement Plan (where indicated)
- Send a copy of the signed document to the department by 5 April 2019
- Retain the original document for your records

Renewal of Accreditation

When you apply for renewal of accreditation you will be required to provide evidence that the proposed actions have been completed.

RTI Act
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Release

STANDARD - FOOD SERVICES

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| 2.1 Food and Nutrition | Residents are provided with food and nutrition complying with the best practice guide for healthy eating in supported accommodation published by the Health Department on the website of Metro South Hospital and Health Service. |
| 2.2 Kitchens | The kitchen facilities comply with the service provider's accredited food safety program, if any, or the food standards code, standard 3.2.3. |
| 2.3 Food Handling and Storage | Procedures are in place to ensure the safe delivery and storage of food. Person preparing and serving food observe personal hygiene and cleanliness practices, take reasonable action to minimise the risk of food contamination, and comply with the service provider's accredited food safety program, if any, or the food standards code, standard 3.2.2. |

KEY IMPROVEMENT AREAS

| STANDARD NUMBER | ISSUE IDENTIFIED | PROPOSED ACTION | WHO IS RESPONSIBLE | DUE DATE (RENEWAL OF ACCREDITATION) | COMMENTS |
|-----------------|--|--|-----------------------|-------------------------------------|--|
| 2.3 | The service provider stores their personal, frozen and unlabelled food amongst the resident's frozen food and meals. | The service provider is to keep their personal food stored in a separate container or freezer compartment with contents and packing date clearly identified. | The service provider. | 18/04/2020 | The department will be conducting unannounced compliance visits to the service within this accreditation period. |
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Release

This Quality Improvement Plan was prepared by:

Sheree Gibson
____/____/____

Certification

I/we hereby certify that:

1. the Quality Improvement Plan has been reviewed
2. the proposed actions will be undertaken and completed by 19 April 2019

RTI Act
Please
CTPI

| | | | |
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| Signature | | | |
| Print Full Name | CTPI | | |
| Position – Service Provider or Director of Corporation | | | |
| Date | ____/____/____ | ____/____/____ | ____/____/____ |

IMPORTANT REMINDER

Provide a copy of the signed Quality Improvement Plan to:

Mail: Regulatory Services
Department of Housing and Public Works
GPO Box 690
BRISBANE QLD 4001

Fax: 07 3008 5960

Email: RegulatoryServices@hpw.qld.gov.au

Retain the original Quality Improvement Plan for your records.

Release

Certificate

Accreditation as a Residential Service

Residential Services (Accreditation) Act 2002 (section 48)

| | |
|-----------------------------------|--|
| Accreditation number: | CTPI |
| Service Provider: | |
| Address of residential service: | |
| Date of accreditation: | 18 JANUARY 2012 |
| Date of renewal of accreditation: | 22 MARCH 2018 |
| Condition/s: | <p><u>Standard 1.B.1 – Living Environment</u></p> <p>The service provider must keep a safe, secure and comfortable living environment to the residents and that all internal and external areas and common areas are kept clean and in good repair, and free from hazards.</p> <p>Evidence of the communal dining room is to be free of clutter, personal belongings and free from hazards in a comfortable living environment for the residents by <u>1 March 2019.</u></p> <p><u>Standard 2.1 – Food and Nutrition</u></p> <p>The service provider is to consult with a Health Nutritionist in the development of a <u>two week cyclical menu</u> that incorporates the five food groups, breakfast, lunch and evening meals and including residents dietary requirements as per the menu example in the best practice guide for <i>Healthy Eating in Supported Accommodation</i>.</p> <p>The service provider is to collect the <u>dietary requirements</u> from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file.</p> <p>The service provider is to record all food complaints and any other complaints in the <u>complaints register</u> including what action was taken by the service provider.</p> <p>The service provider is to enrol and complete training with a Registered Training Organisation to demonstrate they meet the requirements of a <u>food safety supervisor</u></p> |

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| | <p>in the the following competencies:</p> <p><u>SITXFSA001A Implement food safety procedures</u> and <u>SITXOHS002A Follow workplace hygiene procedures</u></p> <p>Evidence of the two week cyclical menu, a record of residents dietary requirements, food complaints register and a copy of enrolment with a Registered Training Organisation for Implementing food safety procedures and Follow workplace hygiene procedures to be provided to the chief executive by 28 March 2019.</p> <p><u>Standard 2.3 – Food Handling and Storage</u></p> <p>The service provider is to defrost all freezers and ensure that all fridge and freezer food items are labelled, dated and sealed correctly.</p> <p>The service provider must cover all food items in the fridge correctly.</p> <p>Daily temperature of fridges and freezers is to be recorded accordingly.</p> <p>Evidence of defrosted freezers, correctly labelled, dated and stored food items and daily temperature recordings to be provided to the chief executive by 28 March 2019.</p> |
| Address for the service of notices: | CTRI |
| Level/s of accreditation: | LEVEL ONE and LEVEL TWO |
| Expiry date of accreditation: | 21 DECEMBER 2020 |

Delegate of the Chief Executive

Department of Housing and Public Works

Date: 20 / 02 / 2019

Section 83 of the Residential Services (Accreditation) Act 2002 states that the service provider of a registered service must display this certificate at a place at the registered premises where it is likely to be seen by residents.

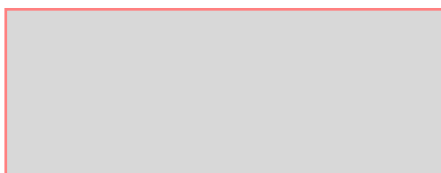
Regulatory Services

Officer Miriam Bariesheff
Telephone (07) 3008 3450
Our Ref [REDACTED]



Department of
Housing and Public Works

3 December 2019



**SHOW CAUSE NOTICE
AMENDMENT OF ACCREDITATION**
Residential Services (Accreditation) Act 2002

CTPI [REDACTED]

Residential Service Address: [REDACTED]

The public register of residential services indicates [REDACTED] is the service provider for the abovementioned registered residential service.

Section 54 of the *Residential Services (Accreditation) Act 2002* (the Act) provides for the amendment of accreditation of a residential service following the issue of a show cause notice if the chief executive is satisfied that:

- 54(1)(d) for another reason, having regard to the accreditation criteria, the accreditation should be amended

On 1 February 2019, a compliance audit of the level two residential service was conducted at [REDACTED]. The department is in possession of information, which indicates that accreditation standards 1.B.1 Living Environment (dining area), 2.1 Food and Nutrition and 2.3 Food Handling and Storage does not comply with section 6(3), 7(2) and 7(3) of the *Residential Services (Accreditation) Regulation 2018*:

Standard 1.B.1 – Living Environment

- It was observed that the communal dining area was cluttered with the service providers' personal and household belongings including a cot full of bags of nappies. Dining tables had personal belongings and folders on them. Only two tables were available for residents to have their meals.

Standard 2.1 - Food and nutrition

- The service provider has not developed and implemented a minimum 2-week menu cycle as recommended in the best practice guide for *Healthy Eating in Supported Accommodation*; and
- The food and nutrition provided to the residents does not comply with the recommended requirements in the best practice guide for *Healthy Eating in Supported Accommodation*; and
- It was indicated that residents are not regularly provided a wide variety of nutritious foods from the five food groups including vegetables, fruit, milk, yoghurt or cheese, lean meat and poultry, fish, eggs, tofu, nuts and seeds, grain (cereal) foods; and
- Residents' dietary requirements are not recorded or displayed in the kitchen. Two residents reported having dietary requirements and menus have not been considered for residents with dietary requirements or special needs; and
- It was also indicated by some residents that the food is not meeting their nutritional needs, there is no variety and they feel hungry regularly; and
- It is noted that residents are provided a poor-quality breakfast of milk, cereal and bread. Lunch on the day of the compliance visit was a jar of Chicken Tonight Tuna sauce mixed with artificial crab meat and diced frozen vegetables spooned over pasta. The one fruit serving for the day was a serving of chopped watermelon. Residents stated that dinner is regularly dim sims, kebabs or pies. It was advised that the dinner the previous evening was "kebabs and chips with leaves"; and
- Residents indicated they have made food complaints about their dietary requirements and this was ignored by staff and the service provider; and
- It was noted that the service's process for special dietary needs was not adhered to by staff and the service provider; and
- There was no record of residents' dietary requirements as per the service's policies and procedures; and
- There was no record of food complaints recorded in the complaints register.

Standard 2.3 – Food Handling and Storage

- It was observed that the current Food Licence dated 10 October 2018 CTPI [REDACTED] was not displayed in a prominent location; and
- A Food Safety Supervisor Certificate has not been issued to the provider or a staff member. It was observed that 'I'm Alert Food Safety' was completed online on 22/11/15; and
- A Food Safety Management Plan was not accessible in the kitchen but was found in the office; and
- It was noted that temperature checks on fridges and freezers had not been recorded since September 2018; and
- It was observed that loose, uncovered limp green vegetables were observed laying on a shelf in a fridge. Freezers were frosted up and in need of a defrost to ensure correct regulation of temperature.
- Freezers contained large open bags of food goods that were unlabelled in any manner.

The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the *Residential Services (Accreditation) Regulation 2018*:

Standard 1.B.1 – Living Environment

The service provider must keep a safe, secure and comfortable living environment to the residents and that all internal and external areas and common areas are kept clean and in good repair, and free from hazards.

Evidence of the communal dining room is to be free of clutter, personal belongings and free from hazards in a comfortable living environment for the residents by **1 March 2019**.

Standard 2.1 – Food and Nutrition

The service provider is to consult with a Health Nutritionist in the development of a two week cyclical menu that incorporates the five food groups, breakfast, lunch and evening meals and including residents dietary requirements as per the menu example in the best practice guide for *Healthy Eating in Supported Accommodation*.

The service provider is to collect the dietary requirements from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file.

The service provider is to record all food complaints and any other complaints in the complaints register including what action was taken by the service provider.

The service provider is to enrol and complete training with a Registered Training Organisation to demonstrate they meet the requirements of a food safety supervisor in the the following competencies:

SITXFSA001A Implement food safety procedures and
SITXOHS002A Follow workplace hygiene procedures

Evidence of the two week cyclical menu, a record of residents dietary requirements, food complaints register and a copy of enrolment with a Registered Training Organisation for Implementing food safety procedures and Follow workplace hygiene procedures to be provided to the chief executive by **28 March 2019**.

Standard 2.3 – Food Handling and Storage

The service provider is to defrost all freezers and ensure that all fridge and freezer food items are labelled, dated and sealed correctly.

The service provider must cover all food items in the fridge correctly.

Daily temperature of fridges and freezers is to be recorded accordingly.

Evidence of defrosted freezers, correctly labelled, dated and stored food items and daily temperature recordings to be provided to the chief executive by **28 March 2019**.

As part of the conditions imposed on the accreditation, Regulatory Analysts will be conducting unannounced weekly visits to observe the quality of the food and nutrition served to residents at the residential service.

Release

Under Section 54(2) of the Act, you may provide a written response stating why the accreditation of the residential service being conducted at CTPI should not be amended. Your response to this notice should be provided by 30 March 2019.

If your response is not received within this period, action may be taken to proceed with the amendment of the accreditation of this residential service.

If the decision is ultimately made to amend the accreditation, review and appeal rights apply. These rights will be explained at that time.

If you wish to discuss this matter further, please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Terry Green
Manager
Regulatory Services
Version – 181018

RTI Act
Release

STATEMENT OF REASONS FOR DECISION

About this Statement of Reasons for Decision

This Statement of Reasons is prepared under Section 155 of the *Residential Services (Accreditation) Act 2002*.

It relates to the residential service located at CTPI [REDACTED] and follows the decision made on 5 February 2019 to:

- refuse to register the residential service - Section 10(4)
- cancel the registration of the service – Section 15(3)
- refuse to accredit the service - Section 47(4)
- accredit the service on a condition - Section 47(5)
- refuse to renew the accreditation of the service – Section 50(5)
- refuse to extend the period of accreditation - Section 51(3)
- refuse to amend the accreditation of the service in a way the service provider has applied for - Section 53(3)
- amend the accreditation of the service other than in a way the service provider has applied for – Sections 54(3) or 55(2)
- cancel the accreditation of the service – Section 57(3)
- refuse an application for a replacement accreditation certificate - Section 60(3)
- refuse to register the applicant as the service provider for the service - Section 61(4)
- refuse to extend refuse an application to amend the registration of the service to show new premises as the registered premises – Section 64(4)
- refuse to extend the transitional registration period - Section 70(5)
- register the service on a condition - Section 190(2)

| | |
|-------------------|--|
| Background | <p>[REDACTED] is a registered level two residential service operated by [REDACTED] who purchased the management rights for the premises in July 2016.</p> <p>The premises are a self-contained unit complex which consists of 24 units with garden courtyards and a common dining room. The residential service was registered on 30 September 2010 and accreditation was renewed on 22 March 2018.</p> |
| Key Issues | <p><u>Standard 1.B.1 – Living Environment</u></p> <ul style="list-style-type: none"> ▪ It was observed that the communal dining area was cluttered with the service providers' personal and household belongings including a cot full of bags of nappies. Dining tables had personal belongings and folders on them. Only two tables were available for residents to have their meals. |

Standard 2.1 - Food and nutrition

- The service provider has not developed and implemented a minimum 2-week menu cycle as recommended in the best practice guide for *Healthy Eating in Supported Accommodation*; and
- The food and nutrition provided to the residents does not comply with the recommended requirements in the best practice guide for *Healthy Eating in Supported Accommodation*; and
- It was indicated that residents are not regularly provided a wide variety of nutritious foods from the five food groups including vegetables, fruit, milk, yoghurt or cheese, lean meat and poultry, fish, eggs, tofu, nuts and seeds, grain (cereal) foods; and
- Residents' dietary requirements are not recorded or displayed in the kitchen. Two residents reported having dietary requirements and menus have not been considered for residents with dietary requirements or special needs; and
- It was also indicated by some residents that the food is not meeting their nutritional needs, there is no variety and they feel hungry regularly; and
- It is noted that residents are provided a poor-quality breakfast of milk, cereal and bread. Lunch on the day of the compliance visit was a jar of Chicken Tonight Tuna sauce mixed with artificial crab meat and diced frozen vegetables spooned over pasta. The one fruit serving for the day was a serving of chopped watermelon. Residents stated that dinner is regularly dim sims, kebabs or pies. It was advised that the dinner the previous evening was "kebabs and chips with leaves"; and
- Residents indicated they have made food complaints about their dietary requirements and this was ignored by staff and the service provider; and
- It was noted that the service's process for special dietary needs was not adhered to by staff and the service provider; and
- There was no record of residents' dietary requirements as per the service's policies and procedures; and
- There was no record of food complaints recorded in the complaints register.

Standard 2.3 – Food Handling and Storage

- It was observed that the current Food Licence dated 10 October 2018 CTPI [REDACTED] was not displayed in a prominent location; and
- A Food Safety Supervisor Certificate has not been issued to the provider or a staff member. It was observed that 'I'm Alert Food Safety' was completed online on 22/11/15; and
- A Food Safety Management Plan was not accessible in the kitchen but was found in the office; and
- It was noted that temperature checks on fridges and freezers had

| | |
|--|---|
| | <p>not been recorded since September 2018; and</p> <ul style="list-style-type: none"> ▪ It was observed that loose, uncovered limp green vegetables were observed laying on a shelf in a fridge. Freezers were frosted up and in need of a defrost to ensure correct regulation of temperature. ▪ Freezers contained large open bags of food goods that were unlabelled in any manner. |
| <p>Reasons for the Decision</p> | <p>The decision to</p> <ul style="list-style-type: none"> <input type="checkbox"/> refuse to register the residential service <input type="checkbox"/> cancel the registration of the service <input type="checkbox"/> refuse to accredit the service <input type="checkbox"/> accredit the service on a condition <input type="checkbox"/> refuse to renew the accreditation of the service <input type="checkbox"/> refuse to extend the period of accreditation <input type="checkbox"/> refuse to amend the accreditation of the service in a way the service provider has applied for <input checked="" type="checkbox"/> amend the accreditation of the service other than in a way the service provider has applied for <input type="checkbox"/> cancel the accreditation of the service <input type="checkbox"/> refuse an application for a replacement accreditation certificate <input type="checkbox"/> refuse to register the applicant as the service provider for the service <input type="checkbox"/> refuse to extend refuse an application to amend the registration of the service to show new premises as the registered premises <input type="checkbox"/> refuse to extend the transitional registration period <input type="checkbox"/> register the service on a condition <p>was made for the following reasons:</p> <p>The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the <i>Residential Services (Accreditation) Regulation 2018</i>:</p> <p><u>Standard 1.B.1 – Living Environment</u></p> <p>The service provider must keep a safe, secure and comfortable living environment to the residents and that all internal and external areas and common areas are kept clean and in good repair, and free from hazards.</p> <p>Evidence of the communal dining room is to be free of clutter, personal belongings and free from hazards in a comfortable living environment for the residents by <u>1 March 2019</u>.</p> |

Release

Standard 2.1 – Food and Nutrition

The service provider is to consult with a Health Nutritionist in the development of a two week cyclical menu that incorporates the five food groups, breakfast, lunch and evening meals and including residents dietary requirements as per the menu example in the best practice guide for *Healthy Eating in Supported Accommodation*.

The service provider is to collect the dietary requirements from the residents and a record of this to be displayed in the kitchen for staff and a copy placed on the resident's file.

The service provider is to record all food complaints and any other complaints in the

complaints register including what action was taken by the service provider.

The service provider is to enrol and complete training with a Registered Training Organisation to demonstrate they meet the requirements of a food safety supervisor in the the following competencies:

SITXFSA001A Implement food safety procedures and

SITXOHS002A Follow workplace hygiene procedures

Evidence of the two week cyclical menu, a record of residents dietary requirements, food complaints register and a copy of enrolment with a Registered Training Organisation for Implementing food safety procedures and Follow workplace hygiene procedures to be provided to the chief executive by **28 March 2019**.

Standard 2.3 – Food Handling and Storage

The service provider is to defrost all freezers and ensure that all fridge and freezer food items are labelled, dated and sealed correctly.

The service provider must cover all food items in the fridge correctly.

Daily temperature of fridges and freezers is to be recorded accordingly.

Evidence of defrosted freezers, correctly labelled, dated and stored food items and daily temperature recordings to be provided to the chief executive by **28 March 2019**.

As part of the conditions imposed on the accreditation, Regulatory Analysts will be conducting unannounced weekly visits to observe the quality of the food and nutrition served to residents at the residential service.

Release

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|---|--|
| | <p><u>Further note:</u></p> <p>It is further noted that a Change Audit was conducted on 22 July 2016, following the Change of Service Provider process. A Quality Improvement Plan was put in place to address standards that required improvement at that time. The following areas in the plan that are deemed to have not been met were:</p> <ul style="list-style-type: none"> ▪ 1.A.5 Not recording complaints ▪ 1.B.8 No documented cleaning and maintenance plan in place ▪ 2.A.1 Menus and dietary requirements for residents are not recorded ▪ 2.B.5 Instructions must be given to ensure the dining room is kept clean. |
| <p>Evidence or Other Material on which the findings were based</p> | <p>The evidence considered when making the decision includes:</p> <ul style="list-style-type: none"> ▪ Observation from the compliance audit conducted on 1 February 2019 ▪ Discussions with residents at the residential service ▪ Quality Improvement Plan dated 22 July 2016 |
| <p>Legislative Basis for the Decision</p> | <p>The decision was based on Section 54 of the <i>Residential Services (Accreditation) Act 2002</i>.</p> <p>You can download a copy of the <i>Residential Services (Accreditation) Act 2002</i> from www.legislation.qld.gov.au.</p> |
| <p>Your Appeal Rights</p> | <p>Internal Review</p> <p>Within 28 days, you may apply to the chief executive for a review of this decision.</p> <p>An application for a review must be in writing and be supported by sufficient information to enable the application to be determined.</p> <p>You should use the attached <i>Form 5 Application for Review of Decision</i> to detail your reasons for seeking a review and provide your supporting evidence.</p> <p>Your application for a review should be addressed to:</p> <p>The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001</p> |

Release

Queensland Civil and Administrative Tribunal

If the matter is not resolved through the internal review, you may appeal against the decision on review to the Queensland Civil and Administrative Tribunal (QCAT).

For more information contact QCAT on 1300 753 228 or visit www.qcat.qld.gov.au.

IMPORTANT INFORMATION

An application under section 156 of the Act for a review of a decision does not stay the decision.

You may write to the chief executive requesting that the decision be stayed pending the outcome of the review process.

Terry Green
Manager
Delegate of Chief Executive
Department of Housing and Public Works
/ /

RTI Act
Release

Release

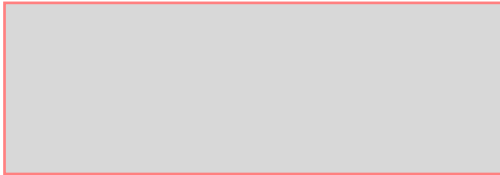
Regulatory Services

Officer Sheree Gibson
Telephone 3008 3423
Our Ref [Redacted]



Department of
Housing and Public Works

9 April 2019



Dear CTPI [Redacted]

Residential Service [Redacted]

Your level two residential service under the *Residential Services (Accreditation) Act 2002* for the above premises is subject to your agreement to a Quality Improvement Plan.

This accreditation renewal will remain in force until: 24 April 2021.

One of the objectives of the Act is to encourage service providers to continually improve the way they conduct residential services. As indicated at the compliance site audit, a number of items are identified to assist you improve your service. The enclosed Quality Improvement Plan sets out the issues and proposed actions for you to address before 7 May 2019. You are required to review and sign the Quality Improvement Plan and return a copy to the department by 30 April 2019.

If you need any further information please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Sheree Gibson
Regulatory Analyst
Regulatory Services
Encl.

Version - 120218

REMINDER
You are required to return a signed copy of the Quality Improvement Plan to the department by **30 April 2019**. Retain the original document for your records.

Quality Improvement Plan

Residential Services (Accreditation) Act 2002

| | |
|--------------------------------|---------------|
| Address of Residential Service | CTPI |
| Name of Service Provider/s | |
| Name of Assessor/s | Sheree Gibson |
| Date of Assessment | 8 April 2019 |

Background

Accreditation is a detailed assessment by the service provider of a registered residential service and the Department of Housing and Public Works of how well the service meets the accreditation standards. The accreditation program also focuses on continuous quality improvement strategies.

Continuous Quality Improvement

Continuous quality improvement means being constantly on the lookout on how to improve practices and is an important component of the accreditation process

The key principles of continuous quality improvement are:

- responsiveness to residents, their rights and needs
- organisational improvement which is management driven
- focus on processes and systems and how they can improve outcomes
- ongoing use of data and information that allows quality of service to be measured
- development and involvement of staff (if applicable) in contributing to better outcomes
- quality improvement and self-assessment as part of a culture

Steps towards Quality Improvement

The following Quality Improvement Plan details areas where issues have been identified and proposed actions to be undertaken before the next renewal of your accreditation is due.

Release

Your Next Steps

You are required to

- Review the Quality Improvement Plan, including the proposed actions
- Sign the Quality Improvement Plan (where indicated)
- Send a copy of the signed document to the department by 30 April 2019**
- Retain the original document for your records

Renewal of Accreditation

When you apply for renewal of accreditation you will be required to provide evidence that the proposed actions have been completed.

Release

STANDARD - FOOD SERVICES

| | |
|--------------------------------------|---|
| 2.1 Food and Nutrition | Residents are provided with food and nutrition complying with the best practice guide for healthy eating in supported accommodation published by the Health Department on the website of Metro South Hospital and Health Service. |
| 2.2 Kitchens | The kitchen facilities comply with the service provider's accredited food safety program, if any, or the food standards code, standard 3.2.3. |
| 2.3 Food Handling and Storage | Procedures are in place to ensure the safe delivery and storage of food. Person preparing and serving food observe personal hygiene and cleanliness practices, take reasonable action to minimise the risk of food contamination, and comply with the service provider's accredited food safety program, if any, or the food standards code, standard 3.2.2. |

KEY IMPROVEMENT AREAS

| STANDARD NUMBER | ISSUE IDENTIFIED | PROPOSED ACTION | WHO IS RESPONSIBLE | DUE DATE (RENEWAL OF ACCREDITATION) | COMMENTS |
|-----------------|---|---|-----------------------|-------------------------------------|--|
| 2.3 | The service provider does not label or date frozen food items and resident's lunch meals. | The service provider is to label all frozen food items and resident's take away lunch meals with the date packed and contents clearly identified on each package. | The service provider. | | The department will be conducting unannounced compliance visits to the service within this accreditation period. |

Release

This Quality Improvement Plan was prepared by:

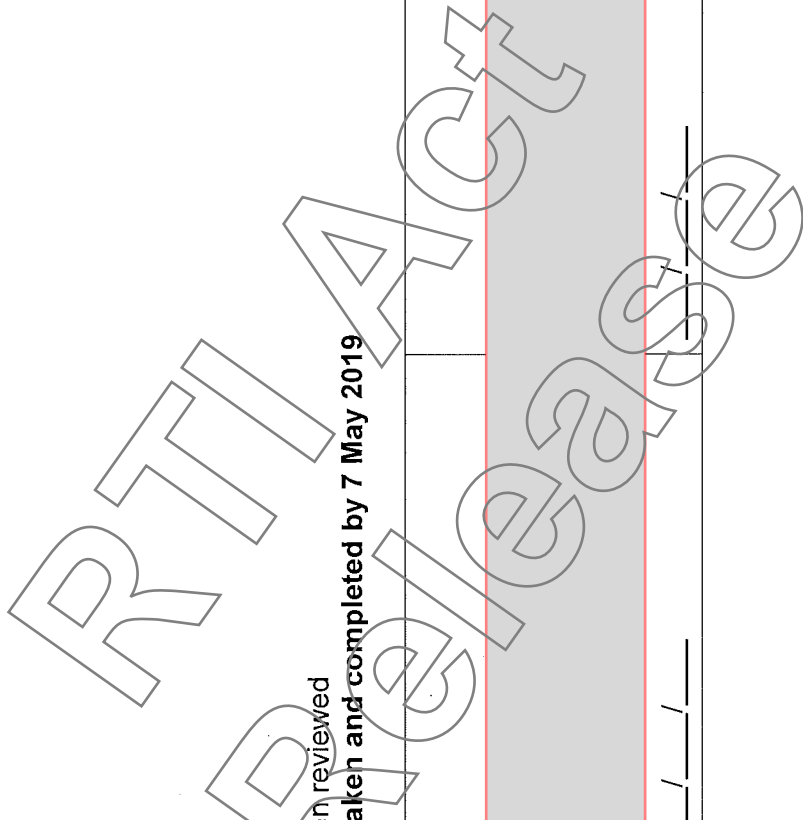
Sheree Gibson
_____/____/____

Certification

I/we hereby certify that:

1. the Quality Improvement Plan has been reviewed
2. the proposed actions will be undertaken and completed by 7 May 2019

| | | |
|--|-----------------|--|
| Signature | _____/____/____ | |
| | CTPI | |
| Print Full Name | _____/____/____ | |
| Position – Service Provider or Director of Corporation | _____/____/____ | |
| Date | _____/____/____ | |



IMPORTANT REMINDER

Provide a copy of the signed Quality Improvement Plan to

Mail: Regulatory Services
Department of Housing and Public Works
GPO Box 690
BRISBANE QLD 4001

Fax: 07 3008 5960

Email: RegulatoryServices@hpw.qld.gov.au

Retain the original Quality Improvement Plan for your records.

Release

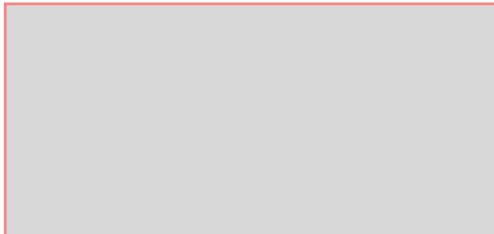
Regulatory Services

Officer Sheree Gibson
Telephone 3008 3423
Our Ref [Redacted]



Department of
Housing and Public Works

19 March 2019



CTPI [Redacted]

Residential Service [Redacted]

Your level two residential service under the *Residential Services (Accreditation) Act 2002* for the above premises is subject to your agreement to a Quality Improvement Plan.

This accreditation renewal will remain in force until: 20 December 2020.

One of the objectives of the Act is to encourage service providers to continually improve the way they conduct residential services. As indicated at the compliance site audit, a number of items are identified to assist you improve your service. The enclosed Quality Improvement Plan sets out the issues and proposed actions for you to address before 19 April 2019. You are required to review and sign the Quality Improvement Plan and return a copy to the department by 5 April 2019.

If you need any further information please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Sheree Gibson
Regulatory Analyst
Regulatory Services

Encl.
Version - 120218

REMINDER
You are required to return a signed copy of the Quality Improvement Plan to the department by **5 April 2019**. Retain the original document for your records.

Quality Improvement Plan

Residential Services (Accreditation) Act 2002

| | |
|--------------------------------|---------------|
| Address of Residential Service | CTPI |
| Name of Service Provider/s | |
| Name of Assessor/s | Sheree Gibson |
| Date of Assessment | 18 March 2019 |

Background

Accreditation is a detailed assessment by the service provider of a registered residential service and the Department of Housing and Public Works of how well the service meets the accreditation standards. The accreditation program also focuses on continuous quality improvement strategies.

Continuous Quality Improvement

Continuous quality improvement means being constantly on the lookout on how to improve practices and is an important component of the accreditation process

The key principles of continuous quality improvement are:

- responsiveness to residents, their rights and needs
- organisational improvement which is management driven
- focus on processes and systems and how they can improve outcomes
- ongoing use of data and information that allows quality of service to be measured
- development and involvement of staff (if applicable) in contributing to better outcomes
- quality improvement and self-assessment as part of a culture

Steps towards Quality Improvement

The following Quality Improvement Plan details areas where issues have been identified and proposed actions to be undertaken before the next renewal of your accreditation is due.

Release

Your Next Steps

You are required to

- Review the Quality Improvement Plan, including the proposed actions
- Sign the Quality Improvement Plan (where indicated)
- Send a copy of the signed document to the department by 5 April 2019**
- Retain the original document for your records

Renewal of Accreditation

When you apply for renewal of accreditation you will be required to provide evidence that the proposed actions have been completed.

Release

STANDARD - FOOD SERVICES

| | |
|--------------------------------------|---|
| 2.1 Food and Nutrition | Residents are provided with food and nutrition complying with the best practice guide for healthy eating in supported accommodation published by the Health Department on the website of Metro South Hospital and Health Service. |
| 2.2 Kitchens | The kitchen facilities comply with the service provider's accredited food safety program, if any, or the food standards code, standard 3.2.3. |
| 2.3 Food Handling and Storage | Procedures are in place to ensure the safe delivery and storage of food. Person preparing and serving food observe personal hygiene and cleanliness practices, take reasonable action to minimise the risk of food contamination, and comply with the service provider's accredited food safety program, if any, or the food standards code, standard 3.2.2. |

KEY IMPROVEMENT AREAS

| STANDARD NUMBER | ISSUE IDENTIFIED | PROPOSED ACTION | WHO IS RESPONSIBLE | DUE DATE (RENEWAL OF ACCREDITATION) | COMMENTS |
|-----------------|--|--|-----------------------|-------------------------------------|--|
| 2.3 | The service provider stores their personal, frozen and unlabelled food amongst the resident's frozen food and meals. | The service provider is to keep their personal food stored in a separate container or freezer compartment with contents and packing date clearly identified. | The service provider. | 20/12/2020 | The department will be conducting unannounced compliance visits to the service within this accreditation period. |
| 2.3 | The service provider does not label or date frozen food items and resident's meals. | The service provider is to label all frozen food/items and resident's take away dinner meals with the date packed and contents clearly identified on each package. | The service provider. | | |

This Quality Improvement Plan was prepared by:

Sheree Gibson
____/____/____

Certification

I/we hereby certify that:

1. the Quality Improvement Plan has been reviewed
2. the proposed actions will be undertaken and completed by 19 April 2019

RTI Act
Please

| | |
|--|----------------|
| Signature | |
| Print Full Name | CTPI |
| Position – Service Provider or Director of Corporation | |
| Date | ____/____/____ |

IMPORTANT REMINDER

Provide a copy of the signed Quality Improvement Plan to:

Mail: Regulatory Services
Department of Housing and Public Works
GPO Box 690
BRISBANE QLD 4001

Fax: 07 3008 5960

Email: RegulatoryServices@hnpw.qld.gov.au

Retain the original Quality Improvement Plan for your records

Release

Quality Improvement Plan

Residential Services (Accreditation) Act 2002

| | |
|--------------------------------|-------------------|
| Address of Residential Service | CTPI |
| Name of Service Provider/s | |
| Name of Assessor/s | Miriam Bariesheff |
| Date of Assessment | 04/03/2019 |

Background

Accreditation is a detailed assessment by the service provider of a registered residential service and the Department of Housing and Public Works of how well the service meets the accreditation standards. The accreditation program also focuses on continuous quality improvement strategies.

Continuous Quality Improvement

Continuous quality improvement means being constantly on the lookout on how to improve practices and is an important component of the accreditation process

The key principles of continuous quality improvement are:

- responsiveness to residents, their rights and needs
- organisational improvement which is management driven
- focus on processes and systems and how they can improve outcomes
- ongoing use of data and information that allows quality of service to be measured
- development and involvement of staff (if applicable) in contributing to better outcomes
- quality improvement and self-assessment as part of a culture

Steps towards Quality Improvement

The following Quality Improvement Plan details areas where issues have been identified and proposed actions to be undertaken before the next renewal of your accreditation is due.

Release

Your Next Steps

You are required to

- Review the Quality Improvement Plan, including the proposed actions
- Sign the Quality Improvement Plan (where indicated)
- Send a copy of the signed document to the department by 13 May 2019
- Retain the original document for your records

Renewal of Accreditation

When you apply for renewal of accreditation you will be required to provide evidence that the proposed actions have been completed.

Release

STANDARD - FOOD SERVICES

| | |
|--------------------------------------|---|
| 2.3 Food Handling and Storage | Procedures are in place to ensure the safe delivery and storage of food. Person preparing and serving food observe personal hygiene and cleanliness practices, take reasonable action to minimise the risk of food contamination, and comply with the service provider's accredit food safety program, if any, or the food standards code, standard 3.2.2. |
|--------------------------------------|---|

KEY IMPROVEMENT AREAS

| STANDARD NUMBER | ISSUE IDENTIFIED | PROPOSED ACTION | WHO IS RESPONSIBLE | DUE DATE (RENEWAL OF ACCREDITATION) | COMMENTS |
|-----------------|--|--|--|-------------------------------------|---|
| 2.3 | Food Safety Management Plan not being adhered to. Daily temperature checks are not being taken. There were no details of cleaning and maintenance schedules. Dairy food in cooler was past use by date. Some items in cooler were not labelled and dated | <p>Policy and procedure is to cover and/or be actioned in the following areas:</p> <ul style="list-style-type: none"> How you receive and store food appropriately – within use by date or best before date, appropriately labelled Record keeping – e.g. daily temperature checks, delivery receipts Details of the cleaning and maintenance schedules | Service Provider Food Safety Supervisor | 29/11/2019 | Evidence to be forwarded to Regulatory Services showing policy and procedures in place for daily temperature checks. Unannounced spot checks will be conducted to check compliance with all items in the "Proposed Action" column. |

Release

This Quality Improvement Plan was prepared by:

 Miriam Bariesheff
 18/04/2019

Certification

I/we hereby certify that:

1. the Quality Improvement Plan has been reviewed
2. the proposed actions will be undertaken and completed by 29/11/2019

RTI Act
 Release

| | | | |
|---|----------|----------|----------|
| Signature | | | |
| Print Full Name | | | |
| Position – Service Provider or Director of Corporation | | | |
| Date | __/__/__ | __/__/__ | __/__/__ |

Release

IMPORTANT REMINDER

Provide a copy of the signed Quality Improvement Plan to:

Mail: Regulatory Services
Department of Housing and Public Works
GPO Box 690
BRISBANE QLD 4001

Fax: 07 3008 5960

Email: RegulatoryServices@hpw.qld.gov.au

Retain the original Quality Improvement Plan for your records.

Release

Regulatory Services

Officer Miriam Bariesheff
Telephone 3008 3450
Our Ref [Redacted]



Department of
Housing and Public Works

18 April 2019



CTPI [Redacted]

Residential Service Address: [Redacted]

Your level two residential service under the *Residential Services (Accreditation) Act 2002* for the above premises is subject to your agreement to a Quality Improvement Plan.

This Quality Improvement Plan will remain in force until 29 November 2019.

One of the objectives of the Act is to encourage service providers to continually improve the way they conduct residential services. As indicated at the compliance site audit, several items were identified to assist you to improve your service. The enclosed Quality Improvement Plan sets out the issues and proposed actions for you to address by 29 November, 2019.

You are required to review and sign the Quality Improvement Plan and return a copy to the department by 13 May 2019.

If you need any further information please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Miriam Bariesheff
Regulatory Analyst
Regulatory Services
Encl.
Version - 120218

REMINDER
You are required to return a signed copy of the Quality Improvement Plan to the department by 13 May 2019.
Retain the original document for your records.

Level 19, 41 George Street
Brisbane Queensland
GPO Box 690 Brisbane
Queensland 4001 Australia

Telephone +617 3008 3450
Facsimile +617 3008 5960
Website www.hpw.qld.gov.au

Regulatory Services

Officer Sheree Gibson

Telephone 3008 3423

Our Ref [REDACTED]



Department of
Housing and Public Works

26 March 2019



CTPI [REDACTED]

Residential Service Address: [REDACTED]

As a result of a complaint received by this office regarding allegations of the mistreatment of residents and staff, the quality of food served to residents and multi-tasking issues when administering medication, your level 3 residential service under the *Residential Services (Accreditation) Act 2002* for the above premises is subject to your agreement to a Quality Improvement Plan.

This accreditation renewal will remain in force until: 12 July 2021.

One of the objectives of the Act is to encourage service providers to continually improve the way they conduct residential services. As indicated on the day of the investigation, a number of items were identified to assist you improve your service. The enclosed Quality Improvement Plan sets out the issues and proposed actions for you to address before **6 May 2019**. You are required to review and sign the Quality Improvement Plan and return a copy to the department by **29 April 2019**.

If you need any further information please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Sheree Gibson
Regulatory Analyst
Regulatory Services
Encl.

Version - 120218

REMINDER
You are required to return a signed copy of the Quality Improvement Plan to the department by **29 April 2019**. Retain the original document for your records.

Quality Improvement Plan

Residential Services (Accreditation) Act 2002

| | |
|--------------------------------|---------------|
| Address of Residential Service | CTPI |
| Name of Service Provider/s | |
| Name of Assessor/s | Sheree Gibson |
| Date of Assessment | 21 March 2019 |

Background

Accreditation is a detailed assessment by the service provider of a registered residential service and the Department of Housing and Public Works of how well the service meets the accreditation standards. The accreditation program also focuses on continuous quality improvement strategies.

Continuous Quality Improvement

Continuous quality improvement means being constantly on the lookout on how to improve practices and is an important component of the accreditation process

The key principles of continuous quality improvement are:

- responsiveness to residents, their rights and needs
- organisational improvement which is management driven
- focus on processes and systems and how they can improve outcomes
- ongoing use of data and information that allows quality of service to be measured
- development and involvement of staff (if applicable) in contributing to better outcomes
- quality improvement and self-assessment as part of a culture

Steps towards Quality Improvement

The following Quality Improvement Plan details areas where issues have been identified and proposed actions to be undertaken before the next renewal of your accreditation is due.

Release

Your Next Steps

You are required to

- Review the Quality Improvement Plan, including the proposed actions
- Sign the Quality Improvement Plan (where indicated)
- Send a copy of the signed document to the department by 29 April 2019**
- Retain the original document for your records

Renewal of Accreditation

When you apply for renewal of accreditation you will be required to provide evidence that the proposed actions have been completed.

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STANDARD - RECOGNISING AND OBSERVING RESIDENTS' RIGHTS

| | |
|--|---|
| 1.A.3 Prevention of Abuse and Neglect | <p>The service provider recognises and implements policies and procedures on the rights of residents to live in an environment free of verbal, emotional, sexual or physical abuse or neglect.</p> <p>The service provider or associate of the service provider acts to uphold the legal and human rights of residents.</p> |
|--|---|

KEY IMPROVEMENT AREAS

| STANDARD NUMBER | ISSUE IDENTIFIED | PROPOSED ACTION | WHO IS RESPONSIBLE | DUE DATE (RENEWAL OF ACCREDITATION) | COMMENTS |
|-----------------|---|---|----------------------|-------------------------------------|---|
| 1.A.3 | <p>Allegations [redacted] that a particular staff member [redacted] can be unkind and intimidating towards them at times.</p> | <p>The service provider is to create or update current policies and procedures that demonstrate a commitment by the service and their staff on the prevention of abuse and neglect. This policy must incorporate how the service will respect the rights and dignity of residents and their staff and it must include anti-discrimination and anti-bullying legislation requirements. This policy must also explain how residents or external providers/advocates can make a complaint to the service provider and must also include contact information on the Regulatory Services Unit. This policy must be displayed in all common areas at the service.</p> | The Service Provider | 12 July 2021 | A follow up unannounced visit to the service will be conducted within 6 months to ensure compliance with this standard. |

STANDARD - PERSONAL CARE SERVICES

3.3 Medication Management If residents ask for support to manage their medication, help is given in accordance with medical directions.

KEY IMPROVEMENT AREAS

| STANDARD NUMBER | ISSUE IDENTIFIED | PROPOSED ACTION | WHO IS RESPONSIBLE | DUE DATE (RENEWAL OF ACCREDITATION) | COMMENTS |
|-----------------|--|---|----------------------|-------------------------------------|---|
| 3.3 | The staff at the service do not follow their own Supervision of Medication Policies of not conducting any other tasks while dispensing medication to residents. This has contributed to past medical errors where residents were issued with the wrong medication whilst also being supplied with their cigarettes and pocket money. | The service provider and staff must refer to and utilise their own Supervision of Medication Policy and ensure staff attend fully to the supervision of medication and do not conduct any other tasks during that time. | The Service Provider | 12 July 2021 | A follow up unannounced visit to the service will be conducted within 6 months to ensure compliance with this standard. |

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This Quality Improvement Plan was prepared by:

Sheree Gibson

____/____/____

Certification

I/we hereby certify that:

- 1. the Quality Improvement Plan has been reviewed
- 2. the proposed actions will be undertaken and completed by 6 May 2019.

| | | | |
|--|----------------|----------------|----------------|
| Signature | | | |
| Print Full Name | | | |
| Position – Service Provider or Director of Corporation | | | |
| Date | ____/____/____ | ____/____/____ | ____/____/____ |

RTI Act
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IMPORTANT REMINDER

Provide a copy of the signed Quality Improvement Plan to:

Mail: Regulatory Services
Department of Housing and Public Works
GPO Box 690
BRISBANE QLD 4001

Fax: 07 3008 5960

Email: RegulatoryServices@hpw.qld.gov.au

Retain the original Quality Improvement Plan for your records

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