Notes re. Inspection
CTPI
Allegations
Medication
Medication/Cigarettes/Pocket Money/Food are all issued at the same time, which creates room for
error and goes against their own policies and medication training.
refuses some residents their medication CTPI CTPI
CIFI
CTPI did not get their Medication training via appropriate study CTPI
CTPI
Abuse and Neglect
allege that staff and residents are screamed at and humiliated by CTPI
CTPI
Food
CTPI old and overcooked food CTPI chop it up finely and cover with
gravy. CTPI
 Carrots kept in cold room for 6 weeks, all floppy and discoloured. CTPI rehydrated them in a bucket of water, they were slimy and still served them, some residents became sick with diarrhoea and stomach pains. Complainant has witnessed CTPI take donated bakery goods such as sausage roll, donuts, pies, pizza rolls etc. which are meant for the residents CTPI
 water, they were slimy and still served them, some residents became sick with diarrhoea and stomach pains. Complainant has witnessed CTPI take donated bakery goods such as sausage roll, donuts, pies, pizza rolls etc. which are meant for the residents CTPI Bread is usually kept in the cold room for up to a week until the next week's bakery delivery.
water, they were slimy and still served them, some residents became sick with diarrhoea and stomach pains. - Complainant has witnessed CTPI take donated bakery goods such as sausage roll, donuts, pies, pizza rolls etc. which are meant for the residents CTPI

alleges residents do not get enough food, I sausage or 1 slice of meat. CTPI alleges residents are going hungry because there isn't enough to eat Other matters CTPI bathroom for ladies recently built outside staff quarters has no ventilation or windows. CTPI there are no paper towels in bathrooms for residents to wash their hands. AllegationsCTPI keep money for the soft drinks which are sold. Action Check bright blue folder on the freezer – Medication records Watch the process – is there any confusion when dispensing meds/smokes/pocket money? CTPI Check staff qualifications CTPI does everyone have first aid/CPR training? Check Day Diary and Incident book CTPI CTPI Complete Level 2 inspection including freezers out the back and van where Food Bank food is transported is it refrigerated? Check all bathrooms for ventilation and pager towels/soap etc **Evidence** Service procedures on Medication state they must not take on any other task when administering medication. 2 complainants allege abuse and neglect of residents and bullying of staff. CTPI

Residents are only allowed 2 teaspoons of sugar at breakfast, 1 for cereal and 1 for coffee/tea.

Residents are given ½ banana with their breakfast

Checklist for ISSUING OF WARNING NOTICES

Registered Address (if it's a		
Corporation):		
Address of the service/park/village:		
Alleged Offender:		
Type:	☐ Residential Service ☐ Retirement Village Scheme ☐ Residential Park	
	FILE ALLOCATION	
	DATE COMMENT	S
☐ Investigation created	in REGGIE 27/12/19	
	ALLEGED OFFENCE DETAILS	
Name of Alleged Offender		()
Company Name (if applicable)	CTPI	
ACN (if applicable)		
ABN (if applicable)		
Date of Offence	31.12.2018-27.02.2019	
Location		
Offence Code		Details from Breach Category Schedule
Legislation	o Residential Services (Accreditation) Act 2002	
Section	68 (1) (B) (B)	
Description of offence	FAILURE TO NOTIFY CHIEF EXECUTIVE OF CHANGE OF ASSOCIATE	Details from Breach Category Schedule
	OF AGGGGMTE	
Penalty Units	100	Details from Breach

INVESTIGATION DETAILS

Checklist for ISSUING OF WARNING NOTICES

Ref	No.	

		DATE	COMMENTS
DE	TAILS OF OFFENCE		
	Provide details of how the alleged offence was identified. Attach copy if insufficient space available here.		Form 6
	Provide details of the investigation undertaken to confirm the alleged offence.		Evidence on Form 6 shows date started 01.12.2018
	Is supporting evidence available?		Form 6 signed by CTPI
	 Yes - provide details in comments and attach copies 		
	 No – warning notice will not be issued unless evidence is provided 		
	Has the issue been discussed with the alleged offender?		
	 Yes – provide details (including date, summary of comments/discussion) 		
	o No		(VO)
	Detail the reason/s a Warning Notice is recommended		SP has not provided from in timeframes
RE	COMMENDATION AND APP	PROVAL	
		_	Approved: Delegation – Senior / Manager
	Sufficient evidence is attached elements of the alleged offer Alleged offender has been as Warning Notice may be issuing of Warning Notice re-	dvised that a	Sufficient evidence exists to prove all elements of the alleged offence Issuing of Warning Notice approved Issuing of Warning Notice not approved (refer below to detail reasons and further action required)

Version - 11012018

Checklist for ISSUING OF WARNING NOTICES

Ref No.

	DATE		COMMENTS	
CTPI Signature: Name:ADRIAN MACCAF Position:RA Date: 28.02.2019	RONE	Signature: _	SISOFTA ACTL 1, 3,19	
IOOUING OF V		OTICE N	AT ADDRAV	En
ISSUING OF V	VARNING N		MMENTS	בט
☐ Detail reason/s why issuing Warning Notice is not approved				
☐ Detail any further action to be taken				7/)
ISSUING O	F WARNING	NOTICE	APPROVED	
Warning Notice issued (from the templates in the RSU practice and procedures manual)	DATÉ SENT		COMMENTS	
	OF ISSUE OF IING NOTICE	28 DA ISSUE C	YS FROM DATE OF WARNING NO	OF TICE
RECORDING KEEPING	DATE		COMMENTS	
REGGIE Updated	12/3/19			
REGGIE Follow-Ups created (if required)	N/A			
All activity notes are recorded on REGGIE				
Copy of printed activity				

Page 3 of 4

Version -- 11012018

Checklist for **ISSUING OF WARNING NOTICES**

Ref	No.	

CHECKLIST PREPARED BY:	CHECKED BY:
	o Issue of Warning Notice Approvedo Warning Notice sento REGGIE updated
Signature:	Signature:
Name:	Name:
Position:	Position:
Date: / /	Date: / /
•	OSURE OF INVESTIGATIONS E WARNING NOTICE HAS BEEN

COMPLIED WITH

Release

Residential Services

Form 6



Application for a change of an associate

Residential Services (Accreditation) Act 2002 This form is effective from 3 September 2018

ABN: 86 504 771 740

OFFICE USE ONLY

Date received

Application number

Lodgement details

Lodgement unit number

Amount allocated

CHC amount

Total amount

Instructions

This form needs to be completed to notify the department of a change of an associate of the service provider for a registered residential service, as required under Section 68 of the Residential Services (Accreditation) Act 2002 (the Act).

Please note:

- The Notes accompanying this form should be read before completing this form
- Use BLOCK letters when you fill out this form
- Attach extra pages if necessary
- All dates should be DD/MM/YYYY
- If you require further information regarding this form, please contact Regulatory Services on o7 3008 3450 or Department of Housing and Public Works on 13 QGOV (13 74 68) for after hours enquiries.

Privacy Statement—Please Read

The Department of Housing and Public Works is collecting your personal information in accordance with the Residential Services (Actreditation) Act 2002 in order to process your application. Your personal information will be disclosed to the Queensland Police Service, who will then pass on your personal information to other law enforcement agencies in Australia (including federal, states and territories) in order to verify details of your criminal history. Your personal information will also be provided to the public upon request through the Register of Residential Services or may be disclosed to the Residential Tenancies Authority, the Office of the Public Guardian, the Department of Justice and Attorney General or to other Federal, State and Local government agencies in the performance of a function of, the Residential Services (Accreditation) Act 2002 or as required or permitted by law. Your personal information will be handled in accordance with the information Privacy Act 2009.

CTPI

No application fee is applicable.

Part 1-Details of service provider (to be completed by the service provider)

Name of service provider

Please include the company number and ABN if a corporate service provider or the names of all individuals carrying on the registered service

Address of residential service

Postal Address

Commencement of associate

Has the associate commenced performing the role?

Yes () No

If yes, date commenced 01/12/2018

DD / MM / YYYY

Part 2—Details of assoc	iate (to be completed by the associate on commencement)
Contact name and details	СТРІ
,	
Residential address	
Postal address of associate Enter 'as above' if the same as	
the residential address	
Birth details of associate	
Contact details of	
associate	
Suitability requirements	
Disclosure of previous convictions does not automatically disqualify you from	
being involved in the operation of a residential service.	
However, a fallure to disclose convictions may result in service accreditation being cancelled.	
A criminal history check will be conducted in accordance with	
the Act.	
;	

Part 3—Criminal history of to be completed by the a	check and declaration associate on commencement)
Criminal history check and fee	A criminal history check will need to be conducted for a person acting as an associate to determine whether or not the person is a suitable person to be an associate. The fee to conduct the check is \$39.60 (inclusive of \$1.16 GST).
	A criminal history check will be conducted in accordance with the legislation as outlined in the Residential Services (Accreditation) Act 2002.
	As the person acting as an associate you are required to sign this section. In doing so, you understand that you are:
Transport	 giving consent to a national criminal history check being conducted by the Queensland Police Service (QPS) and for the QPS and other Australian police services to disclose your criminal history information and any impending charges to Regulatory Services; indicating your understanding that any disclosure will be subject to applicable Commonwealth, State or Territory legislation and/or police policy.
	I have checked the answers I have given and state that they are true and correct in every detail. CTPI
Declaration	Signature of associate CTPI Name of signatory
Sign here	Date 27/02/2019 DD / MM / YYYY
Part 4—Cessation of asso	ociate (to be completed by the service provider)
Cessation of associate	Has the associate stopped performing the role?
	If yes, date stopped DD / MM / YYYY Name of associate
Notice Each service provider is required	certify that the associate is no longer involved in the operation of the residential service as indicated above.
to sign to certify the information (For a corporation 1x director and	Signature of service provider or corporation representative (director)
1x director or secretary unless you are the sole director (see section 127 of the Corporations	Signature of associate Name of signatory
Act 2001 (Cth))	Date DD / MM / YYY
Sign here	Signature of associate
	Name of signatory
	Date DD / MM / YYYY

Checklist	Have you included with your application:
•	a certified copy of a birth certificate, birth extract, passport or drivers licence;
	Documents can be certified by a Justice of the Peace, Commissioner for Declarations, solicitor or notary public.
	the criminal history check fee of \$39.60
Notice Each service provider is required to sign to certify the information	I certify the information provided by me about the associate is true to the best of my knowledge and hereby seek consideration of their suitability as an associate.
(For a corporation—1x director and 1x director or secretary unless you are the sole director (see section 127 of the	Signatures of service provider or corporation representatives (director) CTPI
Corporations Act 2001 (Cth))	Date 27/00)2019
Sign here	humanintanataisaan kanatana k
	Name of signatory
. !	Date DD / MM / YYYY
Part 6—Lodgement and p	ayment details
Lodgement	Please post the completed application, any supporting documentation and fees to the address below:
	Regulatory Services Department of Housing and Public Works GPO Box 690 Brisbane QLD 4001,
	if you would like more information or assistance with completing your application, contact Regulatory Services on 07 3008 3450, email regulatoryservices@hpw.qld.gov.au, or visit our website at www.hpw.qld.gov.au.
	After hours enquiries can be made to the Department of Housing and Public Works on 13 QGOV (13 74 68).

Residential Services Form 6—Notes



Application for a change of an associate

Residential Services (Accreditation) Act 2002
This form is effective from 3 September 2018

Instructions

Use the Residential Services Form 6 to notify of a change of an associate (use a separate form for each associate)

Associate

A person is an 'associate' of a service provider for a residential service if the person makes decisions, in the course of the service, that influence the operation of the service, or the health, safety or other interests of residents in the service.

Examples of an associate are:

- 1. persons employed by the service provider to:
 - a) negotiate and enter into agreements with residents on the service providers behalf
 - b) make house rules for a registered premises
 - c) manage a personal care service provided to residents in the service
 - d) manage the medication of residents in the service
 - e) manage the finances, or financial transactions of residents in the service.
- for a service provider that is a corporation—an executive officer of the corporation who takes part in the management of the service (i.e. a director or other executive).

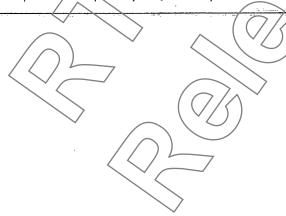
A person is not an associate merely because they do one or both of the following:

- collect rent from residents in the service;
- cleans or maintains the registered premises or facilities.

A service provider of a registered residential service is required to give notice within 30 days after a person becomes an associate of the service provider for a registered service, under Section 68 of the Residential Services (Accreditation) Act 2002.

Note: to supply incorrect or misleading information may subsequently result in the refusal or cancellation of registration. Conducting an unregistered residential service or acting as a service provider without registration or conducting a residential service in unregistered premises may attract a maximum penalty of 200 penalty units (maximum penalty \$26,110). The penalty for a corporation may be up to 1000 penalty units (maximum penalty \$130,550).

Note: The fees and penalty amounts referred to in this form may be altered at any time.



Release

Regulatory Services

Officer

Adrian Maccaorne

Telephone

Our Ref

(07) 3008 3444

4 March 2019



Department of **Housing and Public Works**

CTPI			

OFFICIAL WARNING

Dear Directors

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)	31 December 2018 – 27 February 2019
Location of offence	
Description / nature of offence	Failing to notify Chief Executive (within 30 days) of change of associate.
Act Reference	Residential Services (Accreditation) Act 2002 68 (1) (B)
Maximum Penalty	20 penalty units (\$2,611.00)
Corrective Action Required	Please ensure that you inform Regulatory Services within 30 days of any changes of associates.

While this is a formal warning, the department leserves 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 regulatoryservices@hpw.gld.gov.au.

Yours sincerely

Sandrá Softa

Regulatory Team Leader

Regulatory Services

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

NOTE: CORPORATION FINES

Under Section 181C of the Ponallies and Sentences Act 1992, the maximum fine is an amount equal to 5 times the maximum fine for an individual

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

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:	18/06/2007
Address for the service of notices:	
Level/s of accreditation:	Level 1
Expiry date of accreditation:	18/06/2019
	Delegate of the Chief Executive
	Department of Housing and Public Works

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.

Date: / /



Certificate

Accreditation as a Residential Service

Residential Services (Accreditation) Act 2002 (section 48)

	CTDI
Accreditation number:	CTPI
Service Provider:	
Address of residential service:	
Date of accreditation:	30 August 2006
Renewal of accreditation:	7 June 2016
	1.B.1 – Living Environment
·	Cleanliness and Good Repair
Condition/s:	Service provider to replace or repair all damaged or missing windows throughout the premise including the bathrooms. Service Provider to remove all rubbish, building debris and old furniture surrounding the entire property including the bathroom downstairs. Service provider to repair the floor downstairs to ensure the structure is stable and safe for the residents to walk on.
	Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 9 November 2018.
	1.B.2 - Security and Emergencies Service provider is to repair or replace the emergency telephone at the premise.



Service provider is to provide the department evidence of a complete working order by 9 November 2018. 1.C.1 - Business Management Service provider to ensure the Registration Certificate is displayed at the service where it is likely to be seen by residents. Service provider is to provide photographic evidence to the department to confirm this requirement by 9 November 2018. CTPI Address for the service of notices: Level/s of accreditation: Level ? Expiry date of accreditation: 10 June 2019 **Delegate of the Chief Executive** Department of Housing and Public Works Date:

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.

Checklist for URGENT AMENDMENT OF ACCREDITATION Section 55

	CTPI
Address:	
Service	
Provider:	

ACCREDITATION DETAILS

	DATE	LENGTH OF ACCREDITATION	DETAIL ANY CONDITIONS
✓ Initial Accreditation	30/08/2006	3 years	
Most Recent Renewal of Accreditation	07/06/2016	3 years	

URGENT AMENDMENT OF ACCREDITATION DETAILS

	DATE	COMMENTS
DETAILS OF AMENDMENT		
Issue with current accreditation and reason for urgent amendment:		Unable to complete an Accreditation Standards
Accreditation Standards Risk and Timeframe Report completed		Risk and Timeframe Report does not correctly reflect current updated standards.
☐ Copy printed and attached to file		
☐ Detail urgent amendment proposed☐ Notice of Urgent Amendment of	>	1.B.1 - Cleanliness and Good Repair: Damaged and missing windows to be repaired or replaced, hole in fibro wall
Accreditation (including conditions)		repaired, excess rubbish surrounding property to be removed. Floor downstairs
Certificate of Accreditation (including conditions)		to be repaired.
☐ Statement of Reasons		1.B.2 - Security and Other Emergencies: Emergency phone to be repaired
☐ Wording of conditions endorsed by Senior Residential Services Officer/Manager		1.C.1 - Business Management: Registration certificate to be displayed at all times.

RS No.

Checklist for URGENT AMENDMENT OF ACCREDITATION

RECOMMENDATION AND APPRACCREDITATION	ROVAL – PROPOSED URGENT AI	MENDMENT OF	
Proposed urgent amendment to Accreditation of Residential Service <u>recommended</u> :	Proposed urgent amendment to Accreditation of Residential Service endorsed:	Proposed urgent amendment to Accreditation of Residential Service <u>approved</u> :	
Attachments:	Attachments reviewed:	Attachments approved:	
✓ Statement of Reasons	 Statement of Reasons 	○ Statement of Reasons	
✓ Notice of Urgent Amendment	Notice of Urgent Amendment	Notice of Urgent Amendment	
✓ Certificate of Accreditation	Certificate of Accreditation	 Certificate of Accreditation 	
		5	
Signature:	Signature:	Signature:	
Name: Sheree Gibson	Name:	Name:	
Position: RA Date: / /	Position: Senior Residential Services Officer Date: / /	Position: Manager, Residential Services Unit Date: / /	
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	

PROPOSED URGENT AMENDMENT OF ACCREDITATION APPROVED

	DATE SENT	$(\mathcal{O} / \mathcal{E})$	COMMENTS	
☐ Urgent Notice of Amendment of Accreditation sent to service provider				
☐ Certificate of Accreditation		· ·		
☐ Statement of Reasons				
☐ Form 5 – Review of Decision				

Version - 21/12/2017

RS No.

Checklist for URGENT AMENDMENT OF ACCREDITATION

RECORDING KEEPING	DATE	COI	IMENTS	
☐ REGGIE Updated O Add conditions in the conditions tab				
☐ REGGIE Follow-Ups created○ Monitor any conditions○ Accreditation renewal				
☐ All activity notes are recorded on REGGIE		\sim		
☐ Copy of printed file notes placed on fie				
QUA	LITY ASSU	RANCE CHECK		
CHECKLIST PREPARE	D BY:	CHECKED BY:		l

CHECKLIST PREPARED BY: OURGENT Amendment of Accreditation approved Letter/s and other documentation sent REGGIE updated Signature: Name: Sheree Gibson Position: RA Date: / / Date: / /

Checklist for URGENT AMENDMENT – REMOVAL OF CONDITIONS

	CTPI		
Address:			
Service			
Provider:			

FILE ALLOCATION

	DATE	COMMENTS
✓ REGGIE updated	19/11/2018	

CONDITIONS

CONDITIONS			
	DATE	COMMENTS	
DETAILS OF CONDITIONS			
☐ Details of condition/s and any timeframes imposed Attach copy if insufficient space available here		1.B.1 - Cleanliness and Good Repair - Windows, hole in fibro wall, rubbish removed. 1.B.2 - Security and Other Emergencies - Emergency phone repaired 1.C.1 - Business Management — Registration/Accreditation certificates to be displayed	
Detail spot checks conducted (if applicable). Does the information / evidence obtained satisfy the requirement of all conditions?		Site visit conducted on 19/11/2018 officer noted and photographed the following; Front of property and interior fully painted All windows/louvers repaired or replaced New deck at front of house upgraded to meet fire safety requirements All/rubbish and debris cleared or cleaned up Floor downstairs repaired and lino trip hazard removed Emergency phone replaced and working Certificates displayed. All evidence has satisfied requirements of all conditions. The SP said the council advised that they had no record or copy of the BCN inspection confirming the max allowable no. of residents. Will forward a copy to the SP for their records.	

RS No.

Checklist for URGENT AMENDMENT – REMOVAL OF CONDITIONS

annote the transfer of the control o	DATE	COMMENTS
RESPONSE FROM SERVICE PROV	IDER	
☐ Information / evidence regarding the condition/s received from the Service Provider		Photographs taken during spot check. SP advised they have employed a new caretaker to ensure property is kept clean and maintained.
☐ Information / evidence provided satisfies requirements of all conditions ✓ If yes – use checklist		
 If no – memo to Senior Residential Services Officer for removal of specific conditions 		
☐ Original Certificate of Accreditation returned		
 Yes – cross and mark as returned or cancelled 		
✓ No – create follow-up in REGGIE		
RECOMMENDATION AND APPROV	AL-REMOVAL OF	ALL CONDITIONS
Removal of all conditions recomme	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ed sion – Senior / Manager
Signature:	Signatu	re
Name: Sheree Gibson	Name.	(5)
Position: RA	Position	
Date: 27/11/2018	Date:	/ /

REMOVAL OF CONDITIONS APPROVED

	DATE SENT	COMMENTS
Advice sent to service provider, including:		
✓Letter		
Amended Certificate of Accreditation		
	27/11/2018	

RS No. TPI

Checklist for URGENT AMENDMENT – REMOVAL OF CONDITIONS

	RECORDING KEEPING	DATE	COMMENTS
	REGGIE Updated		
	Including end dating Conditions tab		
Ш	REGGIE follow-ups created for return of		
	Certificate (if applicable)		
	All activity notes are		
	recorded on REGGIE		
	Original Certificate of		$\triangleright \gamma$
	Accreditation has been returned, crossed as		
	cancelled or returned and		
	placed on file		
	Copy of printed file notes	│	
	placed on file		
			$\langle \langle \langle \langle \langle \rangle \rangle \rangle \rangle$
			$\langle O \rangle \rangle$
			JRANCE CHECK
	CHECKLIST PREPARE	D BY:	CHECKED BY:
			Removal of conditions approved
			Letter/s and other documentation sent
		~ ~	REGGIE updated
		\rightarrow	Original Certificate of Accreditation has been returned
) Soy Hotelmon
	Signature:		Signature:
	Name: Sheree Gibson		Name: Sandra Softa
	Position: <u>RA</u>		Position: ASRTL
	Date: / /		Date: / /

Regulatory Services

Officer

Sheree Gibson

Telephone

(07) 30083423

Our Ref

Queensland Government

Department of

Housing and Public Works

27 November 2018

СТРІ

Residential Service Address:

Thank you for providing information about the previously imposed conditions on the accreditation for the residential service located at the above address.

The information you provided has been assessed and it has been determined that all conditions have now been met. The service is now accredited unconditionally until 18 June 2019.

Please find enclosed your amended Certificate of Accreditation, which must be displayed at the premises in a place where it is likely to be seen by the residents.

This certificate replaces your original Certificate of Accreditation which you are required to return to the department by 14 December 2018.

If you require any further information please contact the department on 30083450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

REMINDER

Your Application for Renewal of Accreditation is due by 18/6/2019

Sheree Gibson Regulatory Analyst **Regulatory Services**

Encl. Version – 140218

Regulatory Services

Officer

Sheree Gibson

Telephone

(07) 30083423

Our Ref

Queensland Government

Department of **Housing and Public Works**

09/10/2018

URGENT AMENDMENT OF ACCREDITATION

Residential Services (Accreditation) Act 2002
Section 55

CTPI

Residential Service Address:

The public register of residential services indicates that you are the service provider for the abovementioned registered residential service.

Section 55 of the Residential Services (Accreditation) Act 2002 (the Act) provides for the urgent amendment of accreditation if the chief executive is reasonably satisfied that it is in the interests of the wellbeing and safety of residents.

The department is in possession of information, which indicates breaches against the following:

Section 42(b) and Section 83 of the Residential Services (Accreditation) Act 2002.

Section 6(3) of the Residential Services (Accreditation) Regulation 2018.

Your accreditation is immediately amended with the following conditions:

• 1.B.1 – Living Environment

Cleanliness and Good Repair

Service provider to replace or repair all damaged or missing windows throughout the premise including the bathrooms.

Service Provider to remove all rubbish, building debris and old furniture surrounding the entire property including the bathroom downstairs.

Service provider to repair floor downstairs to ensure the structure is stable and safe for the residents to walk on.

Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 9 November 2018.

1.B.2 - Security and Emergencies

Service provider is to repair or replace the emergency telephone at the premise.

Service provider is to provide the department evidence of a complete working order by 9 November 2018.

• 1.C.1 - Business Management

Service provider to ensure the Registration Certificate is displayed at the service where it is likely to be seen by residents.

Service provider is to provide photographic evidence to the department to confirm this requirement by 9 November 2018.

The amendment to the accreditation will continue until 21 December 2018.

Our Review Rights

Within 28 days after receiving the Statement of Reasons for Decision, you may apply to the chief executive for a review of this decision.

An application for Review of Decision (Form 5) is attached for you to detail your reasons for seeking a review and provide your supporting evidence.

Your application for a review should be addressed to

The Chief Executive Regulatory Services GPO Box 690

Brisbane QLD 4001

In the event that such an application for review does not resolve the matter, you may appeal against the decision on review to the Queensland Civil and Administrative Tribunal (QCAT).

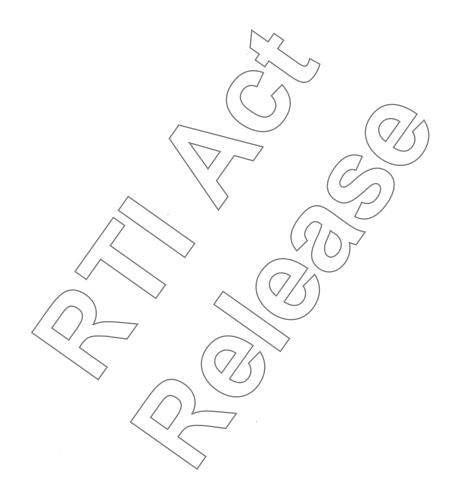
Important Note

Please note that under Section 157 of the Act an application for internal review of the decision does not automatically stay the effect of the original decision. If you wish to seek a stay of the original decision pending the outcome of an application for review you will need to apply to the chief executive seeking a stay of the decision. You may also apply to QCAT for a stay.

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

Terry Green Manager Regulatory Services



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 decision made on 21 September 2018 to

and follows the

amend the accreditation of the service other than in a way the service provider has applied for – Sections 54(3) or 55(2)

Background	The property was registered as a Level 1 Residential Service for 22 residents on 3 July 2003. The property was accredited on 30 August 2006. The last renewal of accreditation date was 7 June 2016. Service Providers are CTPI
Key Issues	Two separate complaints were received by the department relating to allegations surrounding the following matters: • Cleanliness and disrepair of the property • The health and wellbeing of the residents – domestic violence and too fearful to call police or lodge complaints. • Residents drug use and supply. • Repair work causing asbestos dust in the air Resident's abuse towards neightbour • Safety of building structure • Fire safety requirements • Lack of consultation with neighbours about increase in resident numbers
Reasons for the Decision	An unannounced spotcheck was conducted at the premise by Authorised Inspectors Sheree Gibson and Tatjana Cindric that revealed the following: Property was reasonably clean on the inside although there was excess rubbish at rear and side including glass and building materials and bins were full and spilling over. Downstairs bathroom was full of old furniture and rubbish and there was a hole in the fibro wall at the bottom of the stairs. The floor downstairs at the rear of the building was patched and was unstable when walking on it.

The lawns were not maintained and there were several broken or missing louvers and windows throughout the property including the bathroom downstairs.

CTPI

Officers viewed fire equipment and noted exit lighting was working effectively, new smoke alarms had recently been installed.

A Building Compliance Notice was deemed compliant with the prescribed building requirements of the Queensland Development Code for a maximum number of 22 residents issued by Brisbane City Council (BCC) on 7 July 2016.

All residents advised they had no problems with the service or each other and knew how to make a complaint if they had any issues and woud not hesitate to ring police frequired.

No evidence to substantiate claims of abuse between residents or drug use and supply.

Officers noted the registration certificate was not displayed and the emergency telephone was not working.

Unable to determine issues with building structure or asbestos allegations, will refer matter to BCC.

This inspection detected breaches under Section 42(b) and Section 83 of the Residential Services (Accreditation) Act 2002.

This inspection also detected breaches under Section 6(3) of the Residential Services (Accreditation) Regulation 2018.

21 September 2018

Telephone call to who advised CTPI service providers were aware of recent troubles at the service as they had received direct text messages from the complainant. CTPI

CTPI CTPI

After being advised there

would be conditions placed on their accreditation, CTPI said would be happy to comply with any of the department's requirements.

Recommendation

Conditions to be placed on accreditation for the following standards:

• 1.B.1 – Living Environment

Cleanliness and Good Repair

Service provider to replace or repair all damaged or missing windows throughout the premise including the bathrooms.

Service Provider to remove all rubbish, building debris and old furniture surrounding the entire property including the bathroom downstairs.

Service provider to repair floor downstairs to ensure the structure is stable and safe for the residents to walk on.

Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 9 November 2018.

1.B.2 - Security and Emergencies

Service provider is to repair or replace the emergency telephone at the premise.

Service provider is to provide the department evidence of a complete working order by 9 November 2018.

1.C.1 - Business Management

Service provider to ensure the Registration Certificate is displayed at the service where it is likely to be seen by residents

Service provider is to provide photographic evidence to the department to confirm this requirement by 9 November 2018.

Evidence or Other Material on which the findings were based

Observations from site inspection - photographs attached.

Legislative Basis for the Decision

The decision was based on Section 42(b) and Section 83 of the Residential Services (Accreditation) Act 2002.

You can download a copy of the Residential Services (Accreditation) Act 2002 from www.legislation.qld.gov.au.

Your Appeal Rights

Internal Review

Within 28 days, you may apply to the chief executive for a review of this decision.

An application for a review must be in writing and be supported by sufficient information to enable the application to be determined.

You should use the attached *Form 5 Application for Review of Decision* to detail your reasons for seeking a review and provide your supporting evidence.

Release

Your application for a review should be addressed to:

The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001

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, Regulatory Services
Delegate of Chief Executive
Department of Housing and Public Works

Release

/

Certificate

Accreditation as a Residential Service

Residential Services (Accreditation) Act 2002 (section 48)

Accreditation number:	СТРІ
Service Provider:	
Address of residential service:	
Date of accreditation:	31/05/2016
Condition/s:	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 funch and take away dinner meals. This menu must incorporate the five food groups and must consider resident's dietary requirements, as per the requirements in the Best Practice Quide for Healthy Eating in Supported Accommodation 2. The service provider is to collect dietary requirements from the residents and a record of this is to be displayed in the kitchen for staff and a copy placed on the resident's file. 3. The service provider and all kitchen staff are to enrol in the free online nutrition training modules available in the Toolkit for Healthy Eating in Supported Accommodation: A best practice guide. The service provider is to provide evidence of the updated menu plan, a record of resident's dietary requirements, a copy of the complaint's register and a certificate confirming the service provider and all kitchen staff have successfully completed the online training must to be provided to the Chief Executive by 8 May 2019.

Standard 2.3 – Food Delivery and Storage:

- 1. The service provider is to label each resident's take away dinner meals with the preparation date and contents clearly identified on each pack.
- The service provider is to correctly label all frozen food stored in the freezer with the contents and used by date clearly identified on each item and stored in airtight containers to ensure the prevention of freezer burn.
- 3. The service provider is to ensure all kitchen staff are wearing gloves at all times during meal preparations.
- 4. The service provider is to ensure all temperature logs are recorded daily.
- 5. The service provider is to ensure all expired food in the freezer or pantry is disposed of immediately.

The service provider is to provide photographic evidence of all resident's take away meals displaying the date packed and contents clearly identified, a copy of the updated temperature log book confirming all temperatures are recorded and photographic evidence confirming all other freezer items are labelled with the correct contents and used by date and stored in air tight containers must be provided to the Chief Executive by 8 May 2019.

1.A.3 Prevention of Abuse and Neglect

1. The service provider is to create a policy and procedure that demonstrates a commitment by the service and their staff on the prevention of neglect and abuse of residents. This policy must also incorporate how the service will respect the rights and dignity of residents and incorporate anti-discrimination legislation requirements. This policy must be displayed CTPI

The service provider is to provide a copy of the updated policy and procedure on the prevention of abuse and neglect to the Chief Executive by 8 May.

1.A.4 Grievance Mechanism

- 1. The service provider is to create a policy and procedure demonstrating how residents or external providers/advocates can make a complaint to the service provider. This policy must include information on the Regulatory Services dispute resolution procedures and contact information. This policy must be displayed
 - 2. The service provider is to create a complaint's register to record all food complaints and any other complaints including what action was taken by the service provider to investigate and resolve the complaint.

The service provider is to provide a copy of the updated policy and procedure on Grievance Mechanism and a copy of the complaint's register to the Chief Executive by 8 May 2019.

Address for the service of notices:

Level/s of accreditation:

Level 1

Level 2

Expiry date of accreditation:

3//05/2019

CTPI

Delegate of the Chief Executive

Department of Housing and Public Works

Date: (7 / 3 / 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.

Checklist for URGENT AMENDMENT OF ACCREDITATION Section 55

Address:	СТРІ		
Service Provider:			

ACCREDITATION DETAILS

	DATE	LENGTH OF ACCREDITATION	DETAIL ANY CONDITIONS
☐ Initial Accreditation	06/05/2013		
☐ Most Recent Renewal of Accreditation	31/05/2016	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\nearrow

URGENT AMENDMENT OF ACCREDITATION DETAILS

	DATE	COMMENTS
DETAILS OF AMENDMENT		
Issue with current accreditation and reason for urgent amendment: Accreditation Standards Risk and Timeframe Report completed Copy printed and attached to file		Level 2 Food Compliance audit revealed breaches to the following standards: 2.1 Food and Nutrition - Frozen takeaway food is not nutritious, healthy with limited variety. Very small portions of vegetables, no fresh fruit available to residents. Kitchen staff do not have Food Safety Certificates or qualifications. There are no dietary requirements noted for residents. 2.3 Food Handling and Storage - Cooks were not wearing gloves when preparing meals. Frozen food was not labelled or dated. Frozen chicken was packed in bread bags without correct labels or dates. Temperature logs were not current. Some food was expired and had freezer burn. 1.A.3 Prevention of Abuse and Neglect - Allegations the SP has abused residents, screamed at them and used profanities towards them. 1.A.4 Grievance Mechanism - Allegations residents are afraid to make a complaint for fear of retribution or eviction from the SP.

RS No. CTPI

Checklist for URGENT AMENDMENT OF ACCREDITATION

☐ Detail urgent amendment		Standard 2.1 – Food and Nutrition:
proposed		1. The service provider is to consult with a Health
☐ Notice of Urgent Amendment of Accreditation (including conditions)	f	Nutritionist to assist in the development of a new two-week cyclical menu for all lunch and take away dinner meals. This menu must incorporate
☐ Certificate of Accreditation (including conditions)		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.
☐ Statement of Reasons		Supported Accommodation.
☐ Wording of conditions endorsed by Team Leader/Manager	ŀ	2. The service provider is to collect the dietary requirements from the residents and a record of this is to be displayed in the kitchen for staff and a copy placed on the resident's file.
		3. The service provider and all kitchen staff are to enrol in the free online nutrition training modules available in the Toolkit for Healthy Eating in Supported Accommodation. A best practice guide.
		Evidence of the updated menu plan and a record of resident's dietary requirements must be provided to the chief executive by 8 May 2019.
		A certificate confirming the service provider and all kitchen staff have successfully completed the online training must to be provided to the Chief Executive by 8 May 2019.
		Standard 2.3 – Food Delivery and Storage:
		1. The service provider is to label each resident's take away dinner meals with the preparation date and contents clearly identified on each pack.
		2. The service provider is to correctly label all frozen food stored in the freezer with the contents and used by date clearly identified on each item.
		3. The service provider is to ensure all food in the freezer is stored in air-tight containers to ensure the prevention of freezer burn.

RS No. CTPI

Checklist for URGENT AMENDMENT OF ACCREDITATION

☐ Detail urgent amendment proposed	4. The service provider is to ensure all kitchen staff are wearing gloves at all times during meal
☐ Notice of Urgent Amendment of Accreditation (including	preparations. 5. The service provider is to ensure all temperature
conditions)	logs are recorded daily.
Certificate of Accreditation (including conditions)	6. The service provider is to ensure all expired food in the freezer or pantry is disposed of
☐ Statement of Reasons	immediately.
☐ Wording of conditions endorsed by Team Leader/Manager	The service provider is to provide photographic evidence of all resident's take away meals with the date packed and contents clearly identified, to the department by 8 May 2019.
	The service provider is to provide photographic evidence confirming all other freezer items are labelled with the correct contents and used by date and stored in air tight containers, to the department by 8 May 2019.
	The service provider is to provide a copy of the updated temperature log book confirming all temperatures are recorded daily.
	1.A.3 Prevention of Abuse and Neglect
	The service provider is to create a policy and procedure that demonstrates a commitment by
	the service and their staff on the prevention of neglect and abuse of residents. This policy must also incorporate how the service will respect the
	rights and dignity of residents and incorporate anti-discrimination legislation requirements. This policy must be displayed
	policy must be displayed
	The service provider is to provide a copy of the updated policy and procedure on the prevention of abuse and neglect to the <i>Chief Executive</i> by 29 March 2019.

RS No.

Checklist for URGENT AMENDMENT OF ACCREDITATION

☐ Detail urgent amendment	1.A.4 Grievance Mechanism
proposed	
□ Notice of Urgent Amendment of	1. The service provider is to create a policy and
Accreditation (including	procedure demonstrating how residents or
conditions)	external providers/advocates can make a
☐ Certificate of Accreditation	complaint to the service provider. and are aware
(including conditions)	of the appeals process. This policy must include
	information on the Residential Tenancies
│ │	Authority and the Regulatory Services dispute
Otatement of Neasons	resolution procedures and their contact
	information. This policy must be displayed
☐ Wording of conditions endorsed	
by Team Leader/Manager	The service provider is to provide a copy of the
	updated policy and procedure on the prevention of
	abuse and neglect to the Chief Executive by 8 May
	2019.
	2. The service provider is to create a complaint's
	register to record all food complaints and any
	other complaints including what action was taken
	by the service provider to investigate and resolve
	the complaint.
	The service provider is to provide a copy of the
	complaint's register to the Chief Executive by 8 May
_	2019.
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RS No.

Checklist for URGENT AMENDMENT OF ACCREDITATION

RECOMMENDATION AND APPROVAL – PROPOSED URGENT AMENDMENT OF ACCREDITATION				
Proposed urgent amendment to Accreditation of Residential Service <u>recommended</u> :	Proposed urgent amendment to Accreditation of Residential Service <u>endorsed</u> :	Proposed urgent amendment to Accreditation of Residential Service approved:		
Attachments:	Attachments reviewed:	Attachments approved:		
 Statement of Reasons 	 Statement of Reasons 	 Statement of Reasons 		
Notice of Urgent Amendment	 Notice of Urgent Amendment 	Notice of Urgent Amendment		
Certificate of Accreditation	Certificate of Accreditation	Certificate of Accreditation		
Signature:	Signature:	Signature:		
Name: Sheree Gibson	Name: Sandra Softa	Name: Terry Green		
Position: Regulatory Analyst	Position: Team Leader	Position/Manager		
Date: / /	Date: / /	Date: /		
		907		

PROPOSED URGENT AMENDMENT OF ACCREDITATION
APPROVED

		110/=5/		
(DATE SENT		COMMENTS	ente de la companya
Urgent Notice of Amendment of Accreditation sent to service provider				
Certificate of Accreditation		\searrow		
Statement of Reasons				
Form 5 – Review of Decision				

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RS No.

Checklist for URGENT AMENDMENT OF ACCREDITATION

RECORDING KEEPING	DATE	COMMENTS	
☐ REGGIE Updated O Add conditions in the conditions tab			
☐ REGGIE Follow-Ups created ○ Monitor any conditions ○ Accreditation renewal			
☐ All activity notes are recorded on REGGIE			
☐ Copy of printed file notes placed on fie		<u> </u>	
QUA CHECKLIST PREPARE		RANCE CHECK CHECKED BY:	
		Lirgent Amendment of Ac	creditation

CHECKLIST PREPARED BY:	CHECKED BY:
\	Urgent Amendment of Accreditation
\	/ approved
, ·	Urgent Amendment Notice
	Statement of Reasons
	Letter/s and other documentation sent
	REGGIE updated
Signature:	Signature:
Name:	Name:
Position:	Position:
Date: / /	Date: / /

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Checklist for RENEWAL OF ACCREDITATION APPROVED – REMOVAL OF CONDITIONS

	СТРІ		
Address:			
Service Provider:			
Provider:			

FILE ALLOCATION

	DATE	. COMMENTS
✓ REGGIE updated		

CONDITIONS

CONDITIONS(*)			
	DATE	COMMENTS	
DETAILS OF CONDITIONS			
☐ Details of condition/s and any timeframes imposed Attach copy if insufficient space available here		Standard 2.1 - The service provider is to provide evidence of the updated menu plan, a record of resident's dietary requirements, a copy of the complaint's register and a certificate confirming the service provider and all kitchen staff have successfully completed the polline training must to be provided to the Chief Executive by 8 May 2019.	
		Standard 2.3. The service provider is to provide photographic evidence of all resident's take away meals displaying the date packed and contents clearly identified, a copy of the updated temperature log book confirming all temperatures are recorded and photographic evidence confirming all other freezer items are labelled with the correct contents and used by date and stored in air tight containers must be provided to the Chief Executive by 8 May 2019.	
		Standard 1.A.3 - The service provider is to provide a copy of the updated policy and procedure on the prevention of abuse and neglect to the Chief Executive by 8 May.	
		Standard 1.A.4 - The service provider is to provide a copy of the updated policy and procedure on Grievance Mechanism and a copy of the complaint's register to the Chief Executive by 8 May 2019.	
☐ Detail spot checks conducted (if applicable). Does the information / evidence obtained satisfy the requirement of all conditions?		Renewal of accreditation audit on 19/6/2019. Thorough audit and inspection conducted confirmed all conditions had been met.	

Page 1 of 4

RS No. CTPI

Checklist for RENEWAL OF ACCREDITATION APPROVED – REMOVAL OF CONDITIONS

2 7 1	DAT	=	CO	MMENTS
RESPONSE FROM SERVICE PROV	'IDER			
Information / evidence regarding the condition/s received from the Service Provider				
Information / evidence provided satisfies requirements of all conditions				
○ If yes – use checklist				
 If no – provide detailed recommendation for removal of specific conditions 				
☐ Original Certificate of Accreditation returned				(7/1)
 Yes – cross and mark as returned or cancelled 				
✓No – create follow-up in REGGIE				9)
RECOMMENDATION AND APPROV	AL - REMO	AL OF AL	L CONDITIONS	
Removal of all conditions recomme	ended	Approved	(\bigcirc/\bigcirc)	
		Delegation	n - Team/Leader	r / Manager
Signature:		Signature:		
Name: Sheree Gibson	✓	Name: Se	indra Softa	
Position: RA		Position:	<u>ARTL</u>	
Date: 24/6/2019		Date:	/ /	

REMOVAL OF CONDITIONS APPROVED

	DATE SENT	COMMENTS
Advice sent to service provider, including: Letter		
☐ Amended Certificate of Accreditation		

RS No. CTPI

Checklist for RENEWAL OF ACCREDITATION APPROVED - REMOVAL OF **CONDITIONS**

RECORDING KEEPING	DATE	COMMENTS
REGGIE Updated Including end dating Conditions tab		
REGGIE follow-ups created for return of Certificate (if applicable)		
☐ All activity notes are recorded on REGGIE		
Original Certificate of Accreditation has been returned, crossed as cancelled or returned and placed on file		
Copy of printed file notes placed on file	<	
RENEWAL	OF ACCRE	DITATION FOLLOW-UPS

Check if Renewal of Accreditation follow-ups have been created in REGGIE: Yes – proceed with Quality Assurance Check No – create follow-ups		DATE	COMMENTS
	Accreditation follow-ups have been created in REGGIE: Yes – proceed with Quality Assurance Check		

	DATE
Accreditation Approved	, ,
Re-Accreditation Due	31/05/2021
1st reminder (generally 45 days)	31/03/2021
2 nd reminder (generally 30 days)	31/04/2021
3 rd reminder (generally 7 days)	20/4/2021

RS No. CTPI

Checklist for RENEWAL OF ACCREDITATION APPROVED – REMOVAL OF CONDITIONS

QUALITY ASSURANCE CHECK

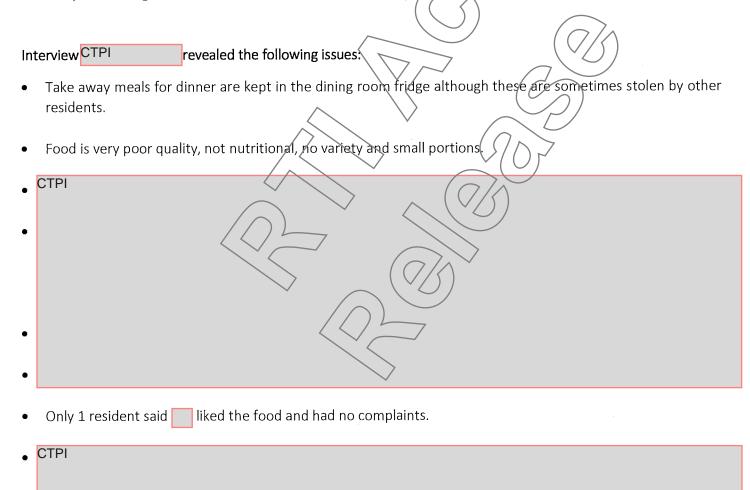
CHECKLIST PREPARED BY:	CHECKED BY:
	 Removal of conditions approved Letter/s and other documentation sent REGGIE updated Original Certificate of Accreditation has been returned
	N ~
Signature:	Signature:
Name: Sheree Gibson	Name: Sandra Softa
Position: RA	Position: ARTL
Date: / /	Date: / / (//)

Level 2 Food Compliance Audit in collaboration with Level 2 Food Complaint

Visit conducted by Regulatory Analysts SG and CC on 20/02/2019.

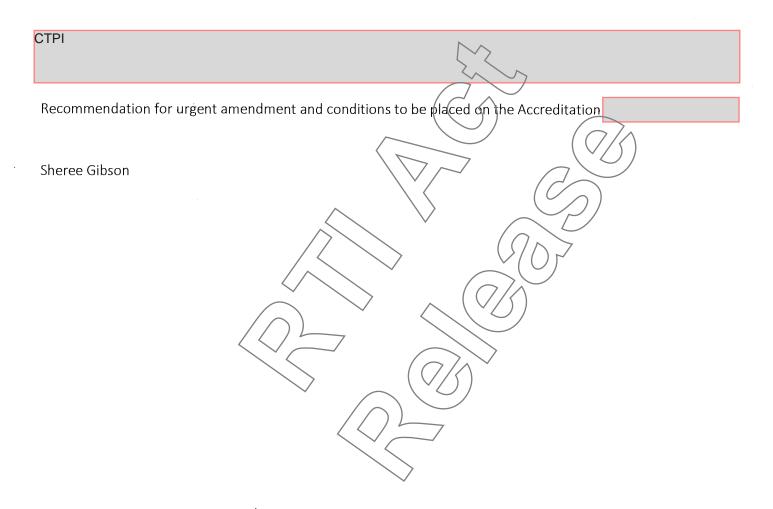
The following issues were viewed by officers during the inspection:

- All resident's frozen meals are not labelled, or date stamped.
- There is expired frozen chicken in the freezer.
- Chicken pieces are frozen and stored in the freezer in bread bags with no label or date stamp.
- Other frozen food ie. Mince, Rice, Dim Sims, Steamed Buns, beef and chicken is not labelled, or date stamped.
- Beef, mince and chicken have freezer burn as they have not been securely wrapped in airtight packaging.
- Take away frozen meals for residents did not appear healthy or nutritious. These meals included lasagne with no or very limited vegetables (1 teaspoon of peas), cheerios and a very small amount of vegetables, rice and chicken, steak and vegies. Vegetables were of a very small portion.
- There is ham, salad and eggs for residents to take away for meals also.
- Both cooks in the kitchen at the time of the audit advised neither of them had a Food Safety Certificate.
- Neither cooks were wearing gloves when preparing the lunch meals.
- Temperature log book was not current, had not been completed for past 2-3 weeks.



Audit revealed the breaches to the following standards:

- **2.1 Food and Nutrition** Frozen takeaway food is not nutritious, healthy with limited variety. Very small portions of vegetables, no fresh fruit available to residents.
- **2.2 Kitchens** There have been several complaints made about the food service. The cooks do not have Food Safety Certificates.
- **2.3 Food Handling and Storage** Cooks were not wearing gloves when preparing meals. Frozen food was not labelled or dated. Frozen chicken was packed in bread bags without correct labels or dates. Temperature logs were not current. Some food was expired and had freezer burn.
- **1.A.3 Prevention of Abuse and Neglect** Allegation the SP has abused residents, screamed at them and used profanities towards them.
- **1.A.4 Grievance Mechanism** Allegations residents are afraid to make a complaint for fear of retribution or eviction from the SP.



Regulatory Services
Officer: Sheree Gibson
Telephone: 30083423
Our Ref:

25 June 2019

CTPI



Department of **Housing and Public Works**

Residential Service Address:

Thank you for providing information about the previously imposed conditions on the accreditation for the residential service located at the above address.

The information you provided has been assessed and it has been determined that all conditions have now been met. The service is now accredited unconditionally until 31 May 2021.

Please find enclosed your amended Certificate of Accreditation, which must be displayed at the premises in a place where it is likely to be seen by the residents.

This certificate replaces your original Certificate of Accreditation which you are required to return to the department by 25 July 2019.

If you require any further information please contact the department on 30083450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Sheree Gibson
Regulatory Analyst
Regulatory Services

Encl. Version – 140218 REVINDER

Your Application for Renewal of Accreditation is due by 31/5/2021

Regulatory Services Officer: Sheree Gibson Telephone: 30083423 Our Ref:



Department of Housing and Public Works

12 March 2019

URGENT AMENDMENT OF ACCREDITATION

Residential Services (Accreditation) Act 2002
Section 55

O-TD1	
CTPI	

Residential Service Address:

The public register of residential services indicates that provider for the abovementioned registered residential service.

is the service

Section 55 of the Residential Services (Accreditation) Act 2002/(the Act) provides for the immediate amendment of accreditation if the chief executive is reasonably satisfied that it is in the interests of the wellbeing and safety of residents.

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

- The service provider does not provide nutritious take away dinner meals to residents that incorporate a wide variety of nutritious foods from the five food groups and they do not consider resident's dietary requirements, as per the requirements in the Best Practice Guide for Healthy Eating in Supported Accommodation.
- The service provider does not label, or date resident's take away dinner meal packs and does not correctly label frozen food items stored in the freezer or indicate a used by date. The service provider keeps expired food items (mainly chicken) in the freezer.
- The service provider does not store all frozen items in air-tight containers to ensure the prevention of freezer burn and the service provider does not ensure all kitchen staff wear gloves when preparing meals or keep current records of temperature logs.
- The service provider does not treat all residents with respect and dignity and does not allow them the freedom to make a complaint without fear of retaliation.

Your accreditation is immediately amended with the following conditions:

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 lunch and take away dinner 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 dietary requirements from the residents and a record of this is to be displayed in the kitchen for staff and a copy placed on the resident's file.
- 3. The service provider and all kitchen staff are to enrol in the free online nutrition training modules available in the Toolkit for Healthy Eating in Supported Accommodation: A best practice guide.

The service provider is to provide evidence of the updated menu plan, a record of resident's dietary requirements, a copy of the complaint's register and a certificate confirming the service provider and all kitchen staff have successfully completed the online training must to be provided to the Chief Executive by 8 May 2019.

Standard 2.3 – Food Delivery and Storage:

- 1. The service provider is to label each resident's take away dinner meals with the preparation date and contents clearly identified on each pack.
- 2. The service provider is to correctly label all frozen food stored in the freezer with the contents and used by date clearly identified on each item and stored in air-tight containers to ensure the prevention of freezer burn.
- 3. The service provider is to ensure all kitchen staff are wearing gloves at all times during meal preparations.
- 4. The service provider is to ensure all temperature logs are recorded daily.
- 5. The service provider is to ensure all expired food in the freezer or pantry is disposed of immediately.

The service provider is to provide photographic evidence of all resident's take away meals displaying the date packed and contents clearly identified, a copy of the updated temperature log book confirming all temperatures are recorded and photographic evidence confirming all other freezer items are labelled with the correct contents and used by date and stored in air tight containers must be provided to the Chief Executive by 8 May 2019.

1.A.3 Prevention of Abuse and Neglect

1. The service provider is to create a policy and procedure that demonstrates a commitment by the service and their staff on the prevention of neglect and abuse of

Release

residents. This policy must also incorporate how the service will respect the rights and dignity of residents and incorporate anti-discrimination legislation requirements. This policy must be displayed

The service provider is to provide a copy of the updated policy and procedure on the prevention of abuse and neglect to the Chief Executive by 8 May.

1.A.4 Grievance Mechanism

- 1. The service provider is to create a policy and procedure demonstrating how residents or external providers/advocates can make a complaint to the service provider. This policy must include information on the Regulatory Services dispute resolution procedures and contact information. This policy must be displayed in both dining areas
- 2. The service provider is to create a complaint's register to record all food complaints and any other complaints including what action was taken by the service provider to investigate and resolve the complaint.

The service provider is to provide a copy of the updated policy and procedure on Grievance Mechanism and a copy of the complaint's register to the Chief Executive by 8 May 2019.

The amendment to the accreditation will continue until 8 May 2019.

Our Review Rights

Within 28 days after receiving the Statement of Reasons for Decision, you may apply to the chief executive for a review of this decision.

An application for Review of Decision (Form 5) is attached for you to detail your reasons for seeking a review and provide your supporting evidence.

Your application for a review should be addressed to

The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001

In the event that such an application for review does not resolve the matter, you may appeal against the decision on review to the Queensland Civil and Administrative Tribunal (QCAT).

Important Note

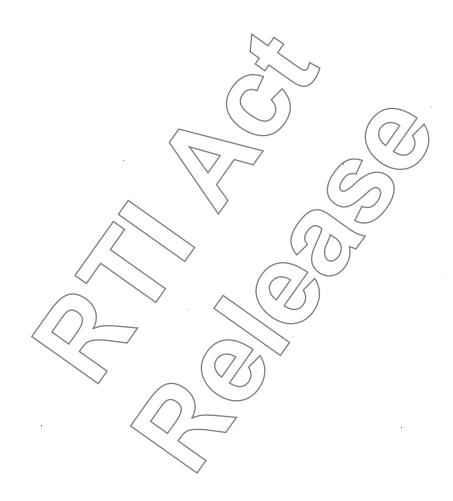
Please note that under Section 157 of the Act an application for internal review of the decision does not automatically stay the effect of the original decision. If you wish to seek a stay of the original decision pending the outcome of an application for review you will need to apply to the chief executive seeking a stay of the decision. You may also apply to QCAT for a stay.

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 CTPI

Terry Green Manager

Regulatory Services



QCAT INFORMATION NOTICE

About this Notice

This QCAT Information Notice is prepared under Section 158(4) of the *Residential Services Act* 2002.

The Decision	On 12 March 2019 a decision was made to amend the accreditation of the residential service located at		
Reasons for the Decision	The decision to amend the accreditation of the residential service was made for the following reasons: During a compliance visit to the service on 20 February 2019 it was revealed the service provider did not meet the following standards: 2.1 Food and Nutrition 2.3 Food Handling and Storage 1.A.3 Prevention of Abuse and Neglect 1.A.4 Grievance Mechanism		
Your review rights	You may apply to the Queensland Civil and Administrative Tribunal (QCAT) for a review of this decision. You have 28 days from the date of this notice to lodge an application for a review with QCAT. To obtain an "Application to review a decision" form or for more information contact QCAT on 1300 753 228 or visit www.qcai.qld.gov.au.		

CTPI

Sheree Gibson
Regulatory Analyst
Delegate of Chief Executive
Department of Housing and Public Works

QCAT INFORMATION NOTICE

About this Notice

This QCAT Information Notice is prepared under Section 158(4) of the *Residential Services Act* 2002.

The Decision	On 7 March a decision was made to amend the accreditation of the residential service located at CTPI	
Reasons for the Decision	The decision to amend the accreditation of the residential service was made for the following reasons: During a compliance visit to the service on 20 February 2019 it was revealed the service provider did not meet the following standards: 2.1 Food and Nutrition 2.3 Food Handling and Storage 1.A.3 Prevention of Abuse and Neglect 1.A.4 Grievance Mechanism	
Your review rights	You may apply to the Queensland Civil and Administrative Tribunal (QCAT) for a review of this decision. You have 28 days from the date of this notice to lodge an application for a review with QCAT. To obtain an "Application to review a decision" form or for more information contact QCAT on 1300 753 228 or visit www.qcat.qld.gov.au.	

Sheree Gibson
Regulatory Analyst
Delegate of Chief Executive
Department of Housing and Public Works
/ /

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 re	It relates to the the residential service located at			
QLE	QLD and follows the decision made on 7 March 2019 to			
	refuse to register the residential service - Section 10(4)			
	cancel the registration	of the service – Section 15(3)		
	refuse to accredit the s	ervice - Section 47(4)		
	accredit the service on	a condition - Section 47(5)		
	refuse to renew the acc	creditation of the service – Section 50(5)		
	refuse to extend the pe	eriod of accreditation - Section 51(3)		
	refuse to amend the ac Section 53(3)	ccreditation of the service in a way the service provider has applied for -		
\boxtimes	amend the accreditatio – Sections 54(3) or 55(on of the service other than in a way the service provider has applied for (2)		
	cancel the accreditation	n of the service – Section 57(3)		
	refuse an application for	or a replacement accreditation certificate - Section 60(3)		
	refuse to register the a	pplicant as the service provider for the service - Section 61(4)		
		e an application to amend the registration of the service to show new ered premises – Section 64(4)		
	refuse to extend the tra	ansitional registration period - Section 70(5)		
	register the service on a condition - Section 190(2)			
Bac	kground	is a registered Level 1 and Level 2 residential		
		service operated by		
		This service was registered on 21 September 2012 and		
	became the service providers on 20 March 2017. The renewal of accreditation is due on 31 May 2019.			
Key	A Level 2 Food Compliance Audit and a response to a complaint received by the department resulted in an unannounced visit to the service on 20 February 2019. An inspection of the service and interviews with residents revealed the following:			
	The service provider does not provide nutritious take away dinner meals to residents that incorporate a wide variety of nutritious foods from the five food groups and they do not consider resident's dietary requirements, as per the requirements in the Best Practice Guide for Healthy Eating in Supported Accommodation.			

A TO CONTRACT OF THE PARTY OF T	7-
	 The service provider does not label, or date resident's take away dinner meal packs and does not correctly label frozen food items stored in the freezer or indicate a used by date. The service provider keeps expired food items (mainly chicken) in the freezer. The service provider does not store all frozen items in air-tight containers to ensure the prevention of freezer burn and the service provider does not ensure all kitchen staff wear gloves when preparing meals or keep current records of temperature logs. The service provider does not treat all residents with respect and dignity and does not allow them the freedom to make a complaint without fear of retaliation.
Reasons for the	The decision to
Decision The Decision	refuse to register the residential service
Decision	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 the service to show new premises as the registered premises
	refuse to extend the transitional registration period
	register the service on a condition
	was made for the following reasons:
	The proposed amendment of accreditation relates to accreditation standards not meeting compliance in accordance with the Residential Services (Accreditation) Regulation 2018:
	0. 1 10.4 5 1 122.422
	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 lunch and take away dinner 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 dietary requirements from the residents and a record of this is to be displayed in the kitchen for staff and a copy placed on the resident's file.
- 3. The service provider and all kitchen staff are to enrol in the free online nutrition training modules available in the Toolkit for Healthy Eating in Supported Accommodation: A best practice guide.

The service provider is to provide evidence of the updated menu plan, a record of resident's dietary requirements, a copy of the complaint's register and a certificate confirming the service provider and all kitchen staff have successfully completed the online training must to be provided to the Chief Executive by 8 May 2019.

Standard 2.3 - Food Delivery and Storage:

- 1. The service provider is to label each resident's take away dinner meals with the preparation date and contents clearly identified on each pack.
- 2. The service provider is to correctly label all frozen food stored in the freezer with the contents and used by date clearly identified on each item and stored in air-tight containers to ensure the prevention of freezer burn.
- 3. The service provider is to ensure all kitchen staff are wearing gloves at all times during meal preparations.
- 4. The service provider is to ensure all temperature logs are recorded daily.
- 5. The service provider is to ensure all expired food in the freezer or pantry is disposed of imprediately.

The service provider is to provide photographic evidence of all resident's take away meals displaying the date packed and contents clearly identified, a copy of the updated temperature log book confirming all temperatures are recorded and photographic evidence confirming all other freezer items are labelled with the correct contents and used by date and stored in air tight containers must be provided to the Chief Executive by 8 May 2019.

1.A.3 Prevention of Abuse and Neglect

1. The service provider is to create a policy and procedure that demonstrates a commitment by the service and their staff on the prevention of neglect and abuse of residents. This policy must also

incorporate how the service will respect the rights and dignity of residents incorporate anti-discrimination legislation requirements. This policy must be displayed

The service provider is to provide a copy of the updated policy and procedure on the prevention of abuse and neglect to the Chief Executive by 8 May.

1.A.4 Grievance Mechanism

- 1. The service provider is to create a policy and procedure demonstrating how residents or external providers/advocates can make a complaint to the service provider. This policy must include information on the Regulatory Services dispute resolution procedures and contact information. This policy must be displayed
- 2. The service provider is to create a complaint's register to record all food complaints and any other complaints including what action was taken by the service provider to investigate and resolve the complaint.

The service provider is to provide a copy of the updated policy and procedure on Grievance Mechanism and a copy of the complaint's register to the Chief Executive by 8 May 2019.

Evidence or Other Material on which the findings were based

The evidence considered when making the decision includes:

- Photographic evidence of unhealthy frozen meals for residents stored in the freezer which are not labelled or date stamped.
- Photographic evidence of food items stored in the freezer without appropriate labels and use by dates. Photographs taken of expired food items stored in the freezer (mainly chicken)
- Photographic evidence of frozen items stored in the freezer in containers that are not air tight.
- Observations of kitchen staff preparing residents meals without practicing correct hygiene requirements ie. not using gloves.
- Interviews with residents and advocates at the residential service.

Legislative Basis for the Decision

The decision was based on Section 54 of the Residential Services (Accreditation) Act 2002.

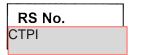
You can download a copy of the Residential Services (Accreditation)

Act 2002 from www.legislation.qld.gov.au. Internal Review **Your Appeal Rights** Within 28 days, you may apply to the chief executive for a review of this decision. An application for a review must be in writing and be supported by sufficient information to enable the application to be determined. You should use the attached Form 5 Application for Review of Decision to detail your reasons for seeking a review and provide your supporting evidence. Your application for a review should be addressed to: The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001 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.gld.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.

CTPI

Terry Green Manager Delegate of Chief Executive Department of Housing and Public Works 12 / 03 / 2019

Address:	CTPI			
Address.				
Name:			,	
Level Two residential service	Compliance Progra Residential Service (Regulation) 2018 Accreditation Stand 2.1 Food and Nut 2.2 Kitchens 2.3 Food Handling	e Accreditation dards crition	RS No:	
	FIL	E ALLOCAT	ON	
	in REGGIE under the appliance, compliance	DATE	COMM	ENTS
	SPOT	CHECK DET	AILS	
Date Spot Check	c conducted		COMMENT	S
Did the accredita standards meet of in accordance with Residential Serv Accreditation (Re 2018	compliance ith the ices			
Level two accred standards: □ Food and Nu Yes/No				
☐ Kitchens Yes/No				
□ Food Handli Storage Yes/No	ng and			



	DATE	COMMENTS
If standards were not met, are conditions recommended on the accreditation?		
☐ Yes (provide/attach details of the conditions to be imposed)		
□ No		
Are you recommending a Quality Improvement Plan on the food service?		
☐ Yes (provide/attach details of the recommendations)		
│ No		
Have you recorded feedback from the residents in your Audit Toolkit?		
☐ Yes (provide details of any issues)	,	
□ No		

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RS N	lo.]
CTPI		

DATE	COMMENTS
RECOMMENDATION AND APPROVAL	
☐ Food and Nutrition standard was met/not met	☐ Food and Nutrition standard was met/not met
☐ Kitchens accreditation standard was met/not met	☐ Kitchens accreditation standard was met/not met
☐ Food Handling and Storage standard was met/not met	☐ Food Handling and Storage standard was met/not met
☐ Conditions imposed on the accreditation recommended	☐ Conditions imposed on the accreditation approved
☐ Quality Improvement Plan recommended	☐ Quality Improvement Plan approved
☐ Closure of Spot Check recommended	☐ Closure of Spot Check approved
	Delegation Senior / Manager
Signature:	Signature:
Name: Sheree Gibson	Name: Sandra Softa
Position: RA	Position: ASRTL
Date: / /	Date: /
CONDITIONS IMPOSED ON	THE ACCREDITATION
	ICABLE)
Į Di	ATE DUE
DATE	COMMENTS
Refer to the Amendment of Accreditation checklist to continue imposing conditions on the accreditation.	

RS No.

Page 4 of 4

QUALITY IMPROVEMENT PLAN IMPOSED ON THE ACCREDITATION (IF APPLICABLE)

	DATE DUE
FILE	

	DATE	COMMENTS
☐ Refer to the Quality Improvement Plan process under 'Accreditation' in the G:drive.		
RECORD KEEPING	DATE	COMMENTS
☐ Spot Check task completed in REGGIE	7	
☐ All activity notes are recorded in REGGIE		
Photographs uploaded onto the G:drive under the RS number in the compliance folder as 'Level Two Compliance Program 2019'		
QŲA	LITY ASSURA	ANCE CHECK
CHECKLIST PREPARE	/	CHECKED BY:
O Completed file submit Leader O REGGIE task completed O Quality Improvement O Conditions imposed of O Spotcheck closed with	eted for spotcheck Plan imposed on the accreditation	Completed file submitted to the Team Leader REGGIE task completed for spotcheck Team Leader to unassign completed task Quality Improvement Plan approved Conditions imposed on the accreditation approved Spotcheck closed with no further action
Signature:	and the second s	Signature:
Name: Sheree Gibson		Name: <u>Sandra Softa</u>
Position: <u>RA</u>		Position: <u>ASRTL</u>
Date: / /		Date: / /

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Certificate

Accreditation as a Residential Service

Residential Services (Accreditation) Act 2002 (section 48)

Accreditation number:	
Service Provider:	
Address of residential service:	
Date of accreditation:	22 JANUARY 2007
Condition/s:	1.B.1 Living Environment – Cleanliness and Good Repair Service Provider to replace or repair all damaged or missing windows throughout the premise. Service Provider to repair kitchen splash back and remove mould and repair replace doors where necessary. Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 20th January 2019.
Address for the service of notices:	
Level/s of accreditation:	Level One
Expiry date of accreditation:	22 JANUARY 2019

Delegate of the Chief Executive

Department of Housing and Public Works

Date:

1

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.



Certificate

Accreditation as a Residential Service

Residential Services (Accreditation) Act 2002 (section 48)

Accreditation number:	СТРІ
Service Provider:	
Address of residential service:	
Date of accreditation:	22/01/2007
Date of renewal of accreditation:	21/01/2016
Condition/s:	1.B.1 Living Environment – Cleanliness and Good Repair Service Provider to replace or repair all damaged or missing windows throughout the building. Service Provider to repair splash back and remove mould and repair/replace/doors where necessary in the kitchen. Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 20th January 2019.
Address for the service of notices:	
Level/s of accreditation.	Level 1
Expiry date of accreditation:	22/01/2019

Delegate of the Chief Executive

Department of Housing and Public Works

Date:

.

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.



Checklist for CLOSURE OF COMPLAINT - RESIDENTIAL SERVICES

FILE ALLOCATION

	DATE	CON	MENTS	
Complaint entered in REGGIE	3/12/18	Reference Number		

COMPLAINT DETAILS

	COIN	LAIN BEIAILS
Complainant:	СТРІ	
Residential Service address which the complaint relates		
Service Provider:		
	DATE	COMMENTS
Complaint received:	3/12/118	\sim
Issue / Allegation: Attach copy if insufficient space available here. Note – if there are multiple issues or allegations, considering number each individual item for referencing throughout the checklist.		Abuse, harassment, bullying and intimidation. No grievance mechanism in place Accreditation certificate not displayed No written house rules (Full submission attached.)
Supporting evidence provided: ☐ Yes (provide details) ☐ No		Witnessed and signed affidavit
Complainant contacted:	3/12/18	Complainant lodged complaint personally with ARTL Sandra Softa and discussed
	\vee	

COMPLAINT ASSESSMENT

	DATE		COMMENTS	
Does the complaint fall within the jurisdiction of the department? ☑ Yes ☐ No				
If evidence has been provided, does it support the issue / allegation? ☐ Yes ☐ No ☐ Nil evidence provided		Evidence is here sa warranted.	y and further investigation was	2

Version - 10012018

Checklist for CLOSURE OF COMPLAINT - RESIDENTIAL SERVICES

Have there been any previous complaints of a similar nature? ☑ Yes ☐ No	19/9/2006	Spot check revealed that the registration certificate was not displayed
	COMPLA	AINT INVESTIGATION
Have any breaches been identified? Xightarrow Yes (proceed with an		Please see attached notes for details of spot check.
Investigation)		
☐ No (detail enquiries made)		
Is a referral to another agency appropriate? ☐ Yes (provide details) ☐ No		
Can other information be provided to the Complainant – e.g. Fact Sheets? ☐ Yes (provide details) ☑ No		
Is a Spot Check required for further follow-up? ☑ Yes (<i>provide details</i>) ☐ No	<i>></i>	
RECOMMENDATION AND APP	ROVAL	V(0)
No further action is to be taken complaint is recommended.	n and closur	V (V)
	mended for	Further Spot Check approved for
		Delegation – Senior / Manager
Signature:		Signature:
Name: Miriam Bariesheff		Name:
Position: Regulatory Analyst		Position:
Date: 06 / 12 / 2018		Date: / /

Release

Checklist for CLOSURE OF COMPLAINT - RESIDENTIAL SERVICES

CLOSURE OF COMPLAINT APPROVED

Complainant contacted regarding closure of complaint: Letter (attach copy) Phone call Service Provider contacted regarding closure of complaint: Letter (attach copy) Phone call Service Provider contacted regarding closure of complaint: Letter (attach copy) Phone call Not applicable RECORD KEEPING DATE Comments C	3_30		COMMENTO
regarding closure of complaint: Letter (attach copy) Phone call Service Provider contacted regarding closure of complaint: Letter (attach copy) Phone call Service Provider contacted regarding closure of complaint: Letter (attach copy) Phone call Not applicable RECORD KEEPING Complaint completed in REGGIE All activity notes are recorded in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PR		DATE SENT	COMMENTS
□ Letter (attach copy) □ Email (attach copy) □ Phone call □ Service Provider contacted regarding closure of complaint: □ Letter (attach copy) □ Email (attach copy) □ Phone call □ Not applicable RECORD KEEPING Complaint completed in REGGIE and printed for the file Follow-up created in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically			
Email (attach copy)	,		
Phone call Service Provider contacted regarding closure of complaint: Letter (attach copy) Email (attach copy) Phone call Not applicable RECORD KEEPING Complaint completed in REGGIE and printed for the file Follow-up created in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically Checklist and service Provider contacted regarding closure of complaint and Service Provider contacted regarding closure of complaint REGGIE updated Signature: Name: Position: Position: Date: / /	☐ Letter (attach copy)		
Service Provider contacted regarding closure of complaint: Letter (attach copy) Phone call Not applicable RECORD KEEPING Complaint completed in REGGIE and printed for the file Follow-up created in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PREPARED B			
regarding closure of complaint: Letter (attach copy) Email (attach copy) Phone call Not applicable RECORD KEEPING Complaint completed in REGGIE All activity notes are recorded in REGGIE and printed for the file Follow-up created in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically CHECKLIST PREPARED BY: Checklist and service Provider contacted regarding closure of complaint	☐ Phone call		
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Email (attach copy)	_ ,		
Phone call Not applicable RECORD KEEPING Complaint completed in REGGIE All activity notes are recorded in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PREPAR			
RECORD KEEPING Complaint completed in REGGIE All activity notes are recorded in REGGIE and printed for the file Follow-up created in REGGIE for further spot check (if applicable) Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PREPARED BY: Closure of complaint approved Complainant and Service Provider contacted regarding closure of complaint REGGIE updated Signature: Name: Name: Position: Date: / /	•		
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for further spot check (if applicable) Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PREPARED BY: Closure of complaint approved Complaint and Service Provider contacted regarding closure of complaint REGGIE updated Signature: Name: Name: Position: Date: / /			· (C)
Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PREPARED BY: Closure of complaint approved Complainant and Service Provider contacted regarding closure of complaint REGGIE updated Signature: Name: Name: Position: Date: / /			
Checklist and correspondence saved electronically CHECKLIST PREPARED BY: CHECKLIST PREPARED BY: Closure of complaint approved Complainant and Service Provider contacted regarding closure of complaint REGGIE updated Signature: Name: Position: Date: / /	• •		
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Signature: Name: Position: Date: Closure of complaint approved Complainant and Service Provider Contacted regarding closure of complaint	The second secon		
Complainant and Service Provider contacted regarding closure of complaint REGGIE updated Signature: Name: Position: Date: / /	CHECKLIST PREPARE	B BX:	
contacted regarding closure of complaint			
complaint			
o REGGIE updated Signature:			
Signature:			1
Signature:			√ ○ REGGIE updated
Name:			Signature:
Name:	Signature:		Name:
Position: Date: / /	Name:		
	Position:		
	Date: / /		
Bate. 1	, , ,		

Release

Checklist for URGENT AMENDMENT OF ACCREDITATION Section 55

CTPI		
Address:		
Service		
Provider:		
N. C.		

ACCREDITATION DETAILS

	DATE	LENGTH OF ACCREDITATION	DETAIL ANY CONDITIONS
☐ Initial Accreditation	22/01/2007	3 years	
☐ Most Recent Renewal of Accreditation	21/01/2016	3 years	

URGENT AMENDMENT OF ACCREDITATION DETAILS

URGENT AMENDMENT OF ACCREDITATION DELAILS			
	DATE	COMMENTS)	
DETAILS OF AMENDMENT			
Issue with current accreditation and reason for urgent amendment:			
Accreditation Standards Risk and Timeframe Report completed			
Copy printed and attached to file		$\sim (\vee \circlearrowleft)$	
 □ Detail urgent amendment proposed □ Notice of Urgent Amendment of Accreditation (including conditions) □ Certificate of Accreditation (including conditions) □ Statement of Reasons □ Wording of conditions endorsed by Team Leader/Manager 		 1.B.1 Cleanliness and Good Repair: Damaged and missing windows to be repaired or replaced Splash back behind kitchen sink to be repaired/replaced and mould eliminated. 1.C.1 - Business Management: Registration and Accreditation certificate to be displayed at all times. 	

RECOMMENDATION AND APPROVAL – PROPOSED URGENT AMENDMENT OF

RS No.

Checklist for URGENT AMENDMENT OF ACCREDITATION

ACCREDITATION		
Proposed urgent amendment to Accreditation of Residential Service <u>recommended</u> :	Proposed urgent amendment to Accreditation of Residential Service endorsed:	Proposed urgent amendment to Accreditation of Residential Service approved:
Attachments:	Attachments reviewed:	Attachments approved:
✓ Statement of Reasons	 Statement of Reasons 	 Statement of Reasons
✓ Notice of Urgent Amendment	Notice of Urgent Amendment	Notice of Urgent Amendment
✓ Certificate of Accreditation	Certificate of Accreditation	Certificate of Accreditation
Signature: Name: Miriam Bariesheff Position: Regulatory Analyst Date: / /	Signature: Name: Position: Team Leader Date: /	Signature: Name: Position: Manager Date: /
PROPOSED URGE	NT AMENDMENT OF A APPROVED	
Urgent Notice of Amendment of Accreditation sent to service provider	DATE SENT	COMMENTS
☐ Certificate of Accreditation		
☐ Statement of Reasons		
☐ Form 5 – Review of Decision		

CTPI

Version -- 21/09/18

Page 2 of 3

RS	No.	

Checklist for URGENT AMENDMENT OF ACCREDITATION

RECORDING KEEPING	DATE	COMMENTS
☐ REGGIE Updated O Add conditions in the conditions tab		·
☐ REGGIE Follow-Ups created		
Monitor any conditionsAccreditation renewal		
☐ All activity notes are recorded on REGGIE		
☐ Copy of printed file notes placed on fie		N A

QUALITY ASSURANCE CHECK

QUALITI AGGUNAI	NOE-CIREON
CHECKLIST PREPARED BY:	CHECKED BY:
	Urgent Amendment of Accreditation
	approved
	o / Urgent Amendment Notice
	Statement of Reasons
	Letter/s and other documentation sent
	o REGGIE updated
	$\sim (Q/f)$
Signature:	Signature:
Name:	Name)
Position:	Position:
Date: / /	Date: / /

CTPI

Version – 21/09/18 rage s or s

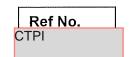
Registered Address (if it's a			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Corporation):					
Address of the service/park/village:					
Alleged Offender:					
Type:		nt Village Scheme		Ref No:	СТРІ
The state of the s	☐ Resident	ial Park			
	FIL	E ALLOCATI	ON		
		DATE		COMME	ENTS
✓Investigation created ir	REGGIE		\		
				7	
	ALLEGE	D OFFENCE	DETAILS	3	
Name of Alleged Offender					7/0
Company Name (<i>if</i> applicable)					
ACN (if applicable)		\wedge)
ABN (if applicable)					
Date of Offence	5/12/2018/		\\ \/	0	
Location					
Offence Code	RSA12)	Details from Breach Category Schedule
Legislation	@ Manufa	ctured Homes (Resid	dential Rarks)	Act 2003	
	Residential Services (Accreditation) Act 2002				
	Retirement Villages Act 1999				
Section	83				
Description of offence	Service pro and accredi section	vider must display th itation certificate in a	e registration ccordance wi	n certificate ith this	Details from Breach Category Schedule
Penalty Units	25				Details from Breach Category Schedule

Ref No.

INVESTIGATION DETAILS

alan salaman di dilatah salam salam salam di kanan salam	DATE	COMMENTS
DETAILS OF OFFENCE		
Provide details of how the alleged offence was identified.	3/12/18	A complaint was received CTPI wishes to remain anonymous. Allegations relate to: Bullying and abuse by manager and provider. Residents controlled by fear. No grievance mechanism in place Cleanliness and maintenance.
Attach copy if insufficient space available here.		Asbestos contamination in laundry
Provide details of the investigation undertaken to confirm the alleged offence.	5/12/18	An unannounced spot-check was conducted by Miriam Bariesheff and Adrian Maccarone. Manager, CTPI was not at the property and a phone call was placed to CTPI advising that the officers were there for a spot check and were seeking permission to look through the property and talk with the residents. CTPI gave permission for the spot check to progress. The property was reasonably clean on the inside and outside the lawns were maintained. While conducting the spot-check it was noted that the registration and accreditation certificates were not on display
Is supporting evidence available? O Yes - provide details in comments and attach copies O No – warning notice will not be issued unless evidence is provided		Accompanying officer verified that the certificates were not on display and could not be sighted after checking throughout house.
Has the issue been discussed with the alleged offender? O Yes – provide details (including date,	5/12/18	Phone call to Manager CTPI stating that the certificates must be on display.
summary of comments/discussion) O No		
Detail the reason/s a Warning Notice is recommended		Failure to display registration and accreditation certificates

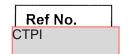
Version - 11012018



DATE	COMMENTS
RECOMMENDATION AND APPROVAL	
	Approved: Delegation – Senior / Manager
☐ Sufficient evidence is attached to prove all elements of the alleged offence	☐ Sufficient evidence exists to prove all elements of the alleged offence
☐ Alleged offender has been advised that a Warning Notice may be issued	☐ Issuing of Warning Notice approved
☐ Issuing of Warning Notice recommended	☐ Issuing of Warning Notice not approved (refer below to detail reasons and further action required)
Signature:	Signature:
Name:	Name:
Position:	Position:
Date: / /	Date: /
ISSUING OF WARNING N	
	COMMENTS
Detail reason/s why issuing Warning Notice is not approved	
Detail any further action to be taken	
ISSUING OF WARMING	
DATE SENT	COMMENTS
☐ Warning Notice issued (from the templates in the RSU practice and procedures manual)	
DATE OF ISSUE OF	28 DAYS FROM DATE OF
WARNING NOTICE	ISSUE OF WARNING NOTICE

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RECORDING KEEPING	DATE	COMMENTS
☐ REGGIE Updated		
REGGIE Follow-Ups created (if required)		
☐ All activity notes are recorded on REGGIE		
☐ Copy of printed activity notes placed on file		

QUALITY ASSURANCE CHECK

CHECKLIST PREPARED BY:	CHECKED BY:
	o Issue∕of Warning Notice Approved
	Warning Notice sent
	REGGIE updated
Signature:	Signature:
Name:	Name:
Position:	Position:
Date: / /	Date:
COMPLETE THE CLOSU	RE OF INVESTIGATIONS
CHECKLIST ONCE THE WA	RNING NOTICE HAS BEEN
///COMPLI	ED MITH

Checklist for ISSUING OF WARNING NOTICES

Registered Address (if it's a	CTPI	
Corporation):		
Address of the service/park/village:		
Alleged Offender:		
Type:	✓ Residential Service ☐ Retirement Village Scheme ☐ Residential Park Ref No:	
	FILE ALLOCATION	
	DATE COMMENT	'S
✓Investigation created in	REGGIE	·
	ALLEGED OFFENCE DETAILS	
Name of Alleged Offender		
Company Name (if applicable)		
ACN (if applicable)		
ABN (if applicable)		
Date of Offence	5/12/2018/	
Location		
Offence Code	RSA9	Details from Breach Category Schedule
Legislation	Manufactured Homes (Residential Parks) Act 2003	
	Residential Services (Accreditation) Act 2002	
	Retirement Villages Act 1999	
Section	77	
Description of offence	Service provider for a registered service must make, and keep for at least the time prescribed under a regulation, the records prescribed	Details from Breach Category Schedule
Penalty Units	50	Details from Breach Category Schedule

Ref No.

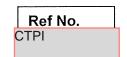
Checklist for ISSUING OF WARNING NOTICES

INVESTIGATION DETAILS

and the state of t	DATE	COMMENTS
DETAILS OF OFFENCE		
Provide details of how the alleged offence was identified. Attach copy if insufficient space available here.	3/12/18	 A complaint was received CTPI wishes to remain anonymous. Allegations relate to: Bullying and abuse by manager and provider. Residents controlled by fear. No grievance mechanism in place Cleanliness and maintenance. Asbestos contamination in laundry
Provide details of the investigation undertaken to confirm the alleged offence.	5/12/18	An unannounced spot-check was conducted by Miriam Bariesheff and Adrian Maccarone. Manager CTPI was not at the property and a phone call was placed to CTPI advising that the officers were there for a spot check and were seeking permission to look through the property and talk with the residents gave permission for the spot check to progress. A method for teriants to report complaints or maintenance issues was not sighted. (Later that day a conversation was conducted with the manager in which she stated she did not have a complaint/maintenance register.)
Is supporting evidence available? O Yes - provide details in comments and attach copies O No – warning notice will not be issued unless evidence is provided		Accompanying officer verified that a method to report complaints/maintenance issues was not sighted and verbal confirmation was received from the Manager later that day.
Has the issue been discussed with the alleged offender? O Yes – provide details (including date, summary of comments/discussion) O No	5/12/18	Phone call to Manager CTPI stating that a system to record complaints, incidents and maintenance must be put in place.
✓Detail the reason/s a Warning Notice is recommended		Failure of service provider to keep records as prescribed under Section 11 (c) and (d) of the Residential Services (Accreditation) regulation 2018.

Version - 11012018

Checklist for ISSUING OF WARNING NOTICES



Page 3 of 4

DATE	COMMENTS
RECOMMENDATION AND APPROVAL	
	Approved: Delegation – Senior / Manager
☐ Sufficient evidence is attached to prove all elements of the alleged offence	☐ Sufficient evidence exists to prove all elements of the alleged offence
☐ Alleged offender has been advised that a	☐ Issuing of Warning Notice approved
Warning Notice may be issued ☐ Issuing of Warning Notice recommended	☐ Issuing of Warning Notice not approved (refer below to detail reasons and further action required)
Signature:	Signature:
Name:	Name:
Position:	Position:
Date: / /	Date: /
ISSUING OF WARNING N	COMMENTS
☐ Detail reason/s why issuing Warning Notice is not approved	
Detail any further action to be taken	
ISSUING OF WARNING	
DATE SENT	COMMENTS
☐ Warning Notice issued (from the templates in the RSU practice and procedures manual)	
DATE OF ISSUE OF WARNING NOTICE	28 DAYS FROM DATE OF ISSUE OF WARNING NOTICE

Version – 11012018

Checklist for ISSUING OF WARNING NOTICES

Ref No.	
CTPI	
	١

RECORDING KEEPING	DATE	COMMENTS
☐ REGGIE Updated		
☐ REGGIE Follow-Ups created (if required)		
☐ All activity notes are recorded on REGGIE		
☐ Copy of printed activity notes placed on file		

QUALITY ASSURANCE CHECK

CHECKLIST PREPARED BY:	CHECKED BY:	
	o Issue∕of Warning Notice Approved	
	Warning Notice sent	
	REGGIÈ updated	
Signature:	Signature:	
Name:	Name:	
Position:	Position:	
Date: / /	Date:	
	(5/07	
COMPLETE THE CLOSU	RE OF INVESTIGATIONS	
CHECKLIST ONCE THE WA	ARNING NOTICE HAS BEEN	
	ED WITH	
	$(\langle // \langle \rangle)$	

Regulatory Services

Officer

Miriam Bariesheff

Telephone

3008 3452

Our Ref



Department of Housing and Public Works

URGENT AMENDMENT OF ACCREDITATION

Residential Services (Accreditation) Act 2002

		Section 33	
СТРІ			
Residen	tial Service Address	S	
•	-	tial services indicates that ned registered residential servi	is the service
	/	Services (Accreditation) Act 2	
	/ /		is reasonably satisfied that it is
		g and safety of residents.	5)
The depa	artment is in possess	ion of information, which indicate	ates that:
On 3 De	cember 2018, a com	plaint was received from CTPI	wishes to

Cleanliness and maintenance at the residential service.

On 5 December 2018, an unannounced spot-check was conducted by Miriam Bariesheff and Adrian Maccarone.

The following was noted at the premises:

remain anonymous. Allegations relate to:

- The premises' is run down in many areas; notably 3 window panes are missing or damaged at the residential service.
- Kitchen cupboards requiring replacing/repairing and the splash back of the sink is mouldy and broken.

Level 19, Mineral House, 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 The inspection detected breaches under Section 42 of the *Residential Services* (Accreditation) Act 2002 and under Section 6(3) of the *Residential Services* (Accreditation) Regulation 2018.

Your accreditation is immediately amended with the following conditions:

• 1.B.1 – Living Environment

Cleanliness and Good Repair

Service provider to replace or repair all damaged or missing windows throughout the building.

Service provider to repair the splash back, remove mould and repair/replace doors where necessary in the kitchen.

Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 20th January 2019,

The amendment to the accreditation will continue until 20th January 2019

Our Review Rights

Within 28 days after receiving the Statement of Reasons for Decision, you may apply to the chief executive for a review of this decision.

An application for Review of Decision (Form 5) is attached for you to detail your reasons for seeking a review and provide your supporting evidence.

Your application for a review should be addressed to:

The Chief Executive

Regulatory Services

GPO Box 690

Brisbane QLD 4001

In the event that such an application for review does not resolve the matter, you may appeal against the decision on review to the Queensland Civil and Administrative Tribunal (QCAT).

Important Note

Please note that under Section 157 of the Act an application for internal review of the decision does not automatically stay the effect of the original decision. If you wish to seek a stay of the original decision pending the outcome of an application for review you will need to apply to the chief executive seeking a stay of the decision. You may also apply to QCAT for a stay.

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



Regulatory Services

Officer

Miriam Bariesheff

Telephone

Our Ref

(07) 3008 3452

19/12/2018



Department of **Housing and Public Works**

OFFICIAL WARNING

CTPI

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

Date (or date from)	5/12/2018
Location of offence	
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	Residential Services (Accreditation) Act 2002
Maximum Penalty	50 penalty units (\$2611.00)
Corrective Action Required	Service provider must make and keep the following records: a complaints register stating: (i) The nature of the complaint; and (ii) The name of the person who made the complaint; and (iii) The date the complaint was made; and (iv) The action the service provider took to investigate and resolve the complaint; and (v) The date the service provider took the action mentioned in subparagraph (iv); (d) for each serious incident at the service: (i) The nature of the incident; and (ii) The date of the incident; and (iii) The name of each resident affected by the incident; and (iv) The name of staff of the residential service, if any, who witnessed the incident; and (v) The name of staff of the residential service, if any, to who the incident was reported; and (vi) The action the service provider took in relation

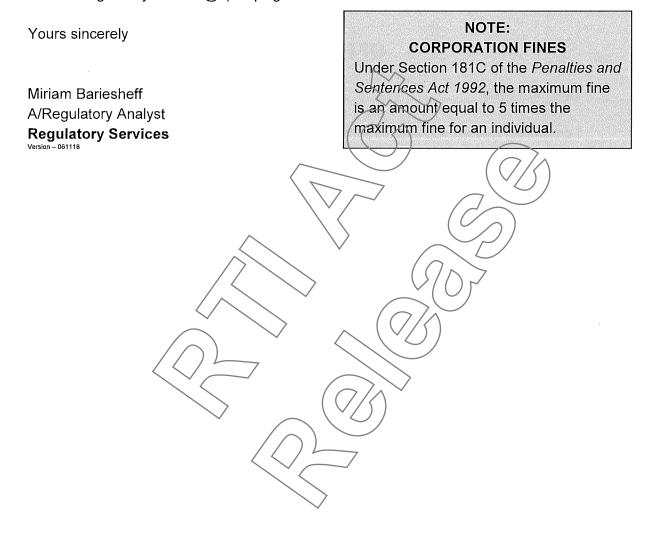
Level 19, 41 George Street **Brisbane Queensland** GPO Box 690 Brisbane Queensland 4001 Australia

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

to the incident; and (vii)The date the service provider took the action mentioned in subparagraph (vi)
Corrective action is required by 20 January 2019

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 regulatoryservices@hpw.qld.gov.au.



Regulatory Services

Officer

Miriam Bariesheff

Telephone

Our Ref

(07) 3008 3452

Queensland Government

Department of Housing and Public Works

19/12/2018

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)	5/12/2018
Location of offence	
Description / nature of offence	Service provider must display the registration certificate and accreditation certificate in accordance with this section.
Act Reference	Residential Services (Accreditation) Act 2002 83
Maximum Penalty	25 penalty units (\$3263.75)
Corrective Action Required	Service provider for a registered service must display, at a place at the registered premises where they are likely to be seen by residents, the registration certificate and any accreditation certificate that is in force for the service. Corrective action is required by 20 January, 2019

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.

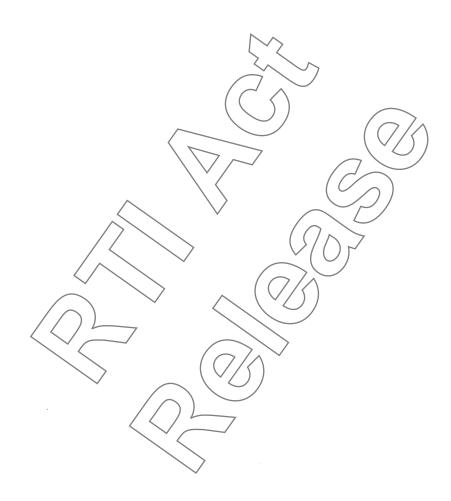
Level 19, 41 George Street Brisbane Queensland GPO Box 690 Brisbane Queensland 4001 Australia Telephone +617 3008 3450 Facsimile +617 3008 5960 Website www.hpw.qld.gov.au If you require any further information, please contact the department on 07 3008 3450 or by email to regulatoryservices@hpw.qld.gov.au.

Yours sincerely

Miriam Bariesheff A/Regulatory Analyst **Regulatory Services**

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.



5/12/18 -	SPOT CHECK

Conducted a spot check with Reg Analyst Adrian Maccarone. Manager, CTPI was not at the property so a phone call was made to CTPI advising that we were there for a spot check and were seeking permission to look through the property and talk with the residents. CTPI advised that she would not be back until later in the afternoon but said that if was fine for us to enter the premises and conduct a spot check.

The following was noted at the premises:

- The premises' is run down in many areas; notably 3 window panes missing, broken and decaying stair balustrading, major cracks running up walls. Kitchen cupboards are swollen in places and the splash back of sink is mouldy and broken. Need of repaint inside and out.
- Registration and accreditation certificates were not on display.
- A method to record complaints for maintenance issues was not sighted. (A conversation with the manager after the spot check re: not displaying certificates and lack of a complaints register, was conducted. She stated that she would rectify the display of certificates and also stated that she did not have a complaint register and would organise to put one in place. CTPI was advised that by not having these things in place it was a breach of the legislation.
- Overall the areas that were viewed were clean but worn and run down.

 Most of the residents were not at home or did not want to talk with us.

 CTPI

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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 decision made on 5 December 2018 to:

amend the accreditation of the service other than in a way the service provider has applied for – Sections 55(2)

Background	The property was registered as a Level 1 Residential Service for 22 residents on 26 May 2005. The property was accredited on 22 January, 2007. The last renewal of accreditation date was 16 January, 2016. Service Provider is the Director is
Key Issues	On 3 December, 2018 a complaint was received from CTPI wishes to remain anonymous. Atlegations relate to: • Clearliness and maintenance of the residential service.
Reasons for the Decision	On 5 December, 2018 an unannounced spotcheck was conducted by Miriam Bariesheff and Adrian Maccarone. The following was noted at the premises: • The premises is run down in many areas; notably 3 window panes are missing or damaged throughout the building. • Kitchen cupboards requiring replacement/repairing and the splash back of the sink is mouldy and broken. This inspection detected breaches under Section 42 of the Residential Services (Accreditation) Act 2002 and breaches under Section 6(3) of the Residential Services (Accreditation) Regulation 2018. Recommendation Conditions to be placed on accreditation for the following standard: • 1.B.1 – Living Environment Cleanliness and Good Repair Service provider to replace or repair all damaged or missing windows throughout the building.

	Service provider to repair the splash back and remove mould and repair/replace doors where necessary in the kitchen.
	Service provider to provide photographic evidence to the department to confirm all repairs have been completed by 20 th January 2019.
Evidence or Other Material on which the findings were based	Observations from site inspection – photographs attached.
Legislative Basis for the Decision	The decision was based on Section 42 of the Residential Services (Accreditation) Act 2002 and Section 6(3) of the Residential Services (Accreditation) Regulation 2018. You can download a copy of the Residential Services (Accreditation) Act 2002 from www.legislation.qtd.gov.au.
Your Appeal Rights	Internal Review Within 28 days, you may apply to the chief executive for a review of this decision. An application for a review must be in writing and be supported by sufficient information to enable the application to be determined. You should use the attached Form 5 Application for Review of Decision to detail your reasons for seeking a review and provide your supporting evidence. Your application for a review should be addressed to: The Chief Executive Regulatory Services GPO Box 690 Brisbane QLD 4001 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, Regulatory Services
Delegate of Chief Executive
Department of Housing and Public Works
/ / /

Regulatory Services
Officer: Sheree Gibson
Telephone: 30083423

Our Ref:



Department of **Housing and Public Works**

CTPI

Residential Service Address:

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: 18/11/2020

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 4/05/2019. You are required to review and sign the Quality Improvement Plan and return a copy to the department by 08/02/2019

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

Yours sincerely

You are required to return a signed copy of the Quality Improvement Plan to the department by 8

February 2019

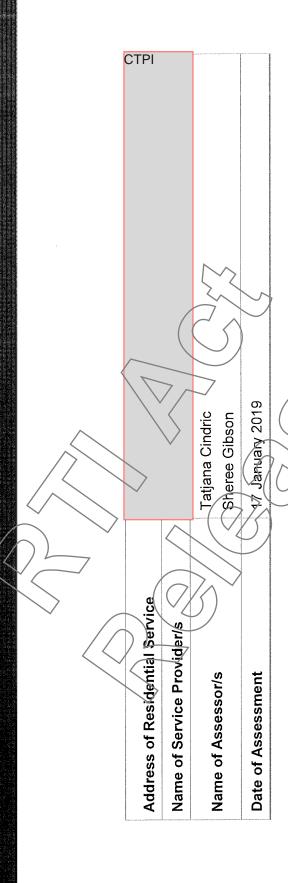
Retain the original document for your records.

Sheree Gibson
Regulatory Analyst
Regulatory Services

Encl. Version - 120218

Quality Improvement Plan

Residential Services (Accreditation) Act 2002



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

development and involvement of staff (if applicable) in contributing to better outcome ongoing use of data and information that allows auality of service to be measured

quality improvement and self-assessment as part of a gulture-

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 8 February 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.

Quality Improvement Plan

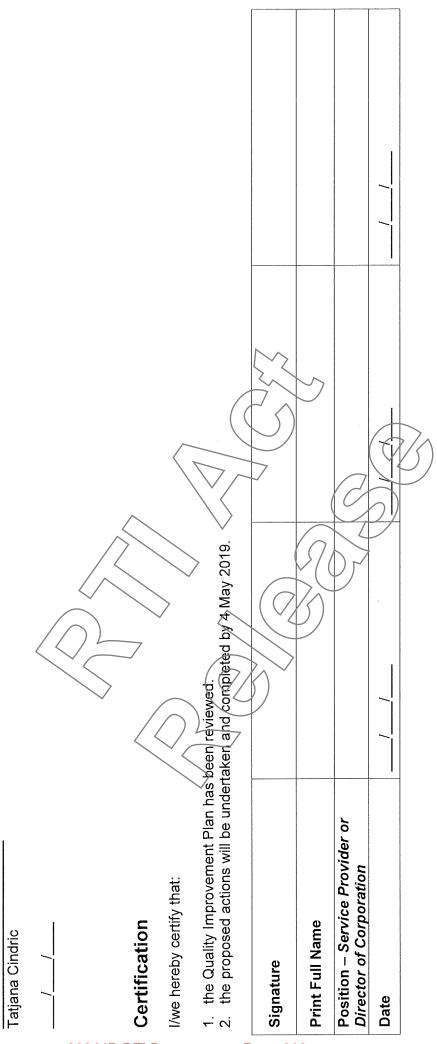
СТРІ

STANDARD - FOOD SERVICES

COMMENTS	Comments during the resident's interviews included dissatisfaction takeaway meals which mainly consisted of the following meals: - Salads which consisted of lettuce, a slice of tomato and ham. - Cheerios and salad - 2 slices of pizza
DUE DATE	14 days
WHO IS RESPONSIBLE	Service Provider Village Management including relief staff)
PROPOSED ACTION	Service provider to review current policies and procedures with relation to takeaway meals. Service provider to revise a current meny plan or provide a new menu plan which mcorporates the principles outlined in the Healthy Eating Tool Guide. The principles need to address the issues of nutrition and variety. Service provider to supply a 4-week menu.
ISSUE IDENTIFIED	Food Compliance Program: Residents interviewed provided overwhelming feedback about the food services. Negative feedback relates to takeaway dinner meals and takeaway meals on Sundays. Issues reported: No variety with takeaway meals includes dinner meals and all Sunday meals. Non-nutritional and not healthy meals provided for takeaway meals includes dinner meals and all Sunday meals.
STANDARD NUMBER	Documents - Page 209

Quality Improvement Plan

This Quality Improvement Plan was prepared by:



20044R RTI Documents - Page 210

СТРІ

IMPORTANT REMINDER

D Provide a copy of the signed Quality Improvement Plan to:

Nail: Regulatory Services Department of Housing and Public Works GPO Box 690

BRISBANE OLD 4001

Fax: 07 3008 5950

Email: Regulatory Services @hpw.qld.gov.au

C Retain the original Quality Improvement Plan for your records.

Quality Improvement Plan

	CTPI	
Address:		
Name:		
Level Two residential service	☐ Compliance Program 2019 ☐ Residential Service Accreditation (Regulation) 2018 ☐ Accreditation Standards 2.1 Food and Nutrition 2.2 Kitchens 2.3 Food Handling and Storage	
	FILE ALLOCATION	
	DATE COMMENTS	
	in REGGIE under the appliance, compliance	- September
	SPOT CHECK DETAILS	
	DATE COMMENTS	***************************************
Date Spot Check		
Did the accredita standards meet of in accordance with Residential Serving Accreditation (Res 2018	compliance ith the vices	
Level two accred standards: ☐ Food and Nu Yes/No		
☐ Kitchens Yes/No		
□ Food Handlin Storage Yes/No	ng and	

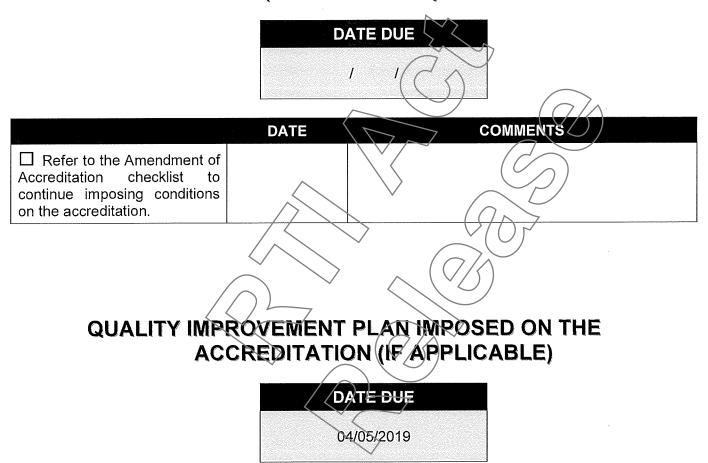
	RS	No.	
C٦	ГРІ		

,		
If standards were not met, are conditions recommended on the accreditation?		
☐ Yes (provide/attach details of the conditions to be imposed)		
□ No		
Are you recommending a Quality Improvement Plan on the food service? ✓ Yes (provide/attach details of the recommendations)		Service provider to review current policies and procedures with relation to takeaway meals. Service provider to revise a current menu plan or provide a new menu plan which incorporates the principles outlined in the Healthy Eating Tool Guide. The principles need to address the issues of nutrition and variety.
□ No	·	Service previder to supply a 4-week menu.
Have you recorded feedback from the residents in your Audit Toolkit? ✓ Yes □ No		Residents interviewed provided overwhelming feedback about the food services. Negative feedback relates to takeaway dinner meals and takeaway meals on Sundays. Issues reported: No variety with takeaway meals includes dinner meals and all Sunday meals. Non-nutritional and not healthy meals provided for takeaway meals includes dinner meals and all Sunday meals.
RECOMMENDATION AND A	PPROVAL	
☐ Food and Nutrition stand met	ard was met/not	Food and Nutrition standard was met/not met
☐ Kitchens accreditation st met/not met	andard was	Kitchens accreditation standard was met/not met
☐ Food Handling and Stora met/not met	ge standard was	☐ Food Handling and Storage standard was met/not met
☐ Conditions imposed on to recommended	he accreditation	☐ Conditions imposed on the accreditation approved
☐ Quality Improvement Pla	n recommended	☐ Quality Improvement Plan approved
\square Closure of Spot Check re	commended	☐ Closure of Spot Check approved
		Delegation – Senior / Manager

RS No	Э.	
PI		
	RS No	RS No.

Signature:	Signature:
Name: <u>Tatjana Cindric</u>	Name: <u>Sheree Gibson</u>
Position: RA	Position: <u>A/RTL</u>
Date: 29/01/2019	Date: 29/01/2019

CONDITIONS IMPOSED ON THE ACCREDITATION (IF APPLICABLE)



	DATE	COMMENTS
Refer to the Quality Improvement Plan process under 'Accreditation' in the G:drive.		

RECORD KEEPING	DATE	COMMENTS
Spot Check task completed		

RS No.	
CTPI	

RECORD KEEPING	DATE	COMMENTS
in REGGIE		
✓All activity notes are recorded in REGGIE		
Photographs uploaded onto the G:drive under the RS number in the compliance folder as 'Level Two Compliance Program 2019'		·

QUALITY ASSURANCE CHECK

CHECKLIST PREPARED BY:	CHECKED BY:
O Completed file submitted to the Team	o Completed file submitted to the Team
Leader	Leader
O REGGIE task completed for spotcheck	REGGIE task completed for spotcheck
O Quality Improvement Plan imposed	Team)Leader to unassign completed task
O Conditions imposed on the accreditation	Quality Improvement Plan approved
O Spotcheck closed with no further action	Conditions imposed on the accreditation approved
	Spotcheck closed with no further action
Signature:	Signature:
Name: <u>Tatjana Cindric</u>	Name: Sheree Gibson
Position: RA	Position: A/RTL
Date: 29/01/2019	Date: 29/01/2019

СТРІ

Checklist for SPOT CHECKS

(not resulting from or during a Complaint or Investigation)

Address:								
Name:								
Type:	☐ Retirem	ntial Serv ent Villaç ntial Park	ge Schem	e		Ref No:		
		FIL	E ALL	OCATI	ION			
	95 39		DAT			COM	MENTS	
☐ Spot Check c	reated in RE0	GGIE	06/12/201	8				
		576-575	Γ CHEC	K DE				
		DAT	To the Marketter of the o	CTPI		COMMEN	ITS	
Reason for Spot	t Check	06/12//2	018			7		
Date Spot Check Conducted	k	06/12/20)18	Unanno	uriced spot	t check on	food service.	
Outcome from S	Spot Check	k 06/12//2018		Nil issues identified.				
Is a further Spot				Complia Februar		to be cond	usted in month of	
Yes (deta and timeformNo		/						
RECOMMENDA	TION AND A	PPROVA	L\\					
☐ Closure of S	pot Check re	commer	ided	☐ Cles	sure of Spe	ot Check	approved	
☐ Further Spot	Check reco	nnende	d for	☐ Furt	ther Spot C roved tion - Seni	Check on	/ /	
Signature:				Signatu	7e:			
Name:	·······································			Name:	*sofshirin		AND B. ALI C. A. C. A.	
Position:								
Date: /	1			Date:	1	/		

Checklist for SPOT CHECKS

Ref No.

(not resulting from or during a Complaint or Investigation)

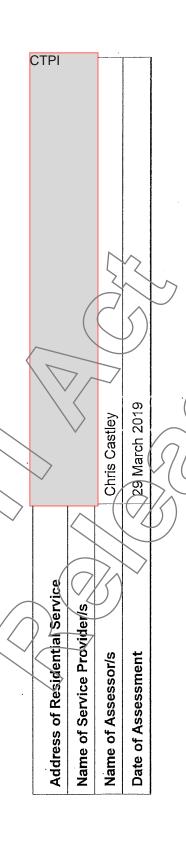
FURTHER SPOT CHECK/S REQUIRED

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	DA	ΠE	DUE	
(C)				
	Ber			
	- 1		1	

	DATE	COMMENTS
☐ Follow-Up created		
RECORDING KEEPING	DATE	COMMENTS
☐ Spot Check completed in REGGIE		
☐ All activity notes are recorded in REGGIE		
☐ Copy of printed activity notes placed on file		
QU	ALITY ASSUI	RANCE CHECK
CHECKLIST PREPAR	ED BY:	CHECKED BY:
		o REGGIE updated
Signature:		Signature:
Name:		Name
Position:		Pesition:
Date: / /		Date: / /

Quality Improvement Plan

Residential Services (Accreditation) Act 2002



Background

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- 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 (㎡applicable) /n confributing to better outcom∉s
- quality improvement and self-assessment as part of a culture

Steps towards Quality Improvement

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

Your Next Steps

You are required to

☐ Review the Quality Improvement Plan, including the proposed actions

3 Sign the Quality Improvement Plan (where indicated)

Send a copy of the signed document to the department by 10 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.

STANDARD - FOOD SERVICES

I nutritional value to meet each person's daily food			
Residents are provided with food that is adequate in quality, quantity, variety and nutritional value to meet each person's daily food	S	Procedures are in place to ensure the safe delivery and storage of food.	
2.1 Food and Nutrition Residents a	requirements.	od Delivery and	Storage

KEY IMPROVEMENT AREAS

No Fruit offered to residents to take away in the morning Complaints Register to be filled out for all food complaints verbal and written by residents Cereal containers not labelled and no expiry dates provided	offered to residents to take the morning and must Register to be filled out ood complaints verbal and by residents containers not labelled and y dates provided	Have a bowl of fruit available for residents at breakfast and to be monitored for 6 months with unannounced spot checks To provide evidence of Complaint Register and document any Food Complaints to be monitored for 6 months with unannounced spot checks to inspect Food Complaints Register To label all cereal containers and place explix dates on them and monitor for 6 months with unannounced spot checks to	Service Provider Service Provider Service Provider	(RENEWAL OF ACCREDITATION) 9 July 2020 9 July 2020	Fruit being offered to residents is in line with Healthy Eating Toolkit Guide Complaints Register to be provided with any food complaints lodged spot checks
		inspect Food Labelling and	(c		
The state of the s		expiratory dates			

Mail: Regulatory Services Department of Housing and Public Works GPO Box 690 BRISBANE GLD 4001 Fax: The original Quality Improvement Plan for your records.	
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Quality Improvement Plan

Residential Services (Accreditation) Act 2002

CTPI Inspectors Chris Castley and Addam Maccarone 22January 2019 Address of Residential Service Name of Service Provider/s Name of Assessor/s Date of Assessment

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 registured

development and involvement of staff (if applicable)/in/contributing to better outdornes

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

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☐ 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 February 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.

STANDARD - FOOD SERVICE

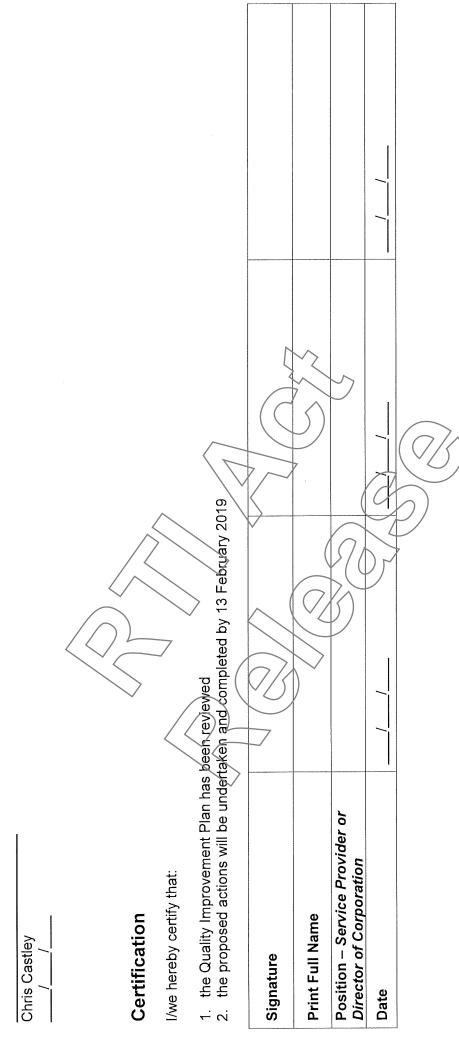
Residents are provided with food that is adequate in quality, requirements. 2.A.1 Food and Nutrition

quantity dariety and nutritional value to meet each person's daily food

KEY IMPROVEMENT AREAS

				ACCREDITATION)	
Resident with two per day.	s not being provided (2) pieces of fresh fruit	To purchase fresh fruit and supply servicesidents with two (2) pieces of fresh fruit at each lunch time meal.	Vice Provider	13/07/2021	
***************************************		Unannounced inspections at meal times to verify fresh fruit being provided to residents for the next six)		
		(6) months.			

This Quality Improvement Plan was prepared by:



IMPORTANT REMINDER D 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		Email: RegulatoryServices@hpw.qld.gov.au	C Retain the <i>original</i> Quality Improvement Plan for your records	
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