

## Statement of Tiffany Wiles to Royal Commission into Aged Care Quality and Safety

**Name:** Tiffany Clara Wiles

**Address:** [REDACTED]

**Occupation:** Director, Key2Care Pty Ltd

**Date:** 8 October 2019

1. This statement made by me accurately sets out information provided by me in response to the Notice to Give Information or a Statement in Writing (No. NTG-0499) issued to me and dated 4 October 2019.

### Relevant past occupations and qualifications (paragraph 3 (d) and (e) of the Schedule)

2. My relevant past occupations are as follows [3(d)]:

- (a) Nurse Advisor
- (b) Residential Facility Manager
- (c) Consultant – ACFI
- (d) Clinical Support Officer
- (e) Registered Nurse – Gerontology
- (f) Director of Nursing
- (g) Assistant Director of Nursing

3. My qualifications are as follows [3(e)]:

- (a) Registered Nurse
- (b) Diploma of Applied Science – Nursing
- (c) Post Graduate of Gerontology

### Experience working in aged care and the aged care system (paragraph 3 (f) & (g) of the Schedule)

4. I have specific industry engagement and experience in the aged care sector is as follows [3(f) & (g)]:

- |      |   |
|------|---|
| 2007 | Assistant Director of Care Warrina Innisfail. (Clinical and care Governance across three sites, 190 beds)   |
| 2008 | Service Manager Warrina Innisfail. Responsible for all services including clinical Governance and care services, Quality & Compliance, HRM, Risk Management, Hospitality and Hotel Services, Education across three RAC IDs 190 beds. |
| 2010 | Regional Clinical/Service Support Officer Congress Community Development and Education Unit. Clinical governance, management, funding and Quality support across indigenous aged care services from Townsville to Thursday Island.    |

- 2012 Regional clinical/ Service Support Officer Bluecare Indigenous Services FNQ. Clinical governance, Management, funding and Quality support across indigenous aged care services from Townsville to Thursday Island.
- 2014 Director Key2Care Pty Ltd. Key2Care was established in 2013 to provide support and management services to the aged care industry. In my capacity as director I have directed the management and day-to-day operation of Key2Care, which has provided the following services:
- ACFI Funding Specialist – Services provided to Multiple sites across multiple organisations, throughout Brisbane Metro, Dalby, Jandowae, Caloundra, Oakey, Gordonvale, Cairns and Townsville.
  - Full clinical case conferencing and care plan development
  - Nurse Advisor through sanction recovery for:
    - Jimbelunga Nursing Centre
    - Bupa South Hobart

**Experience as an adviser appointed by approved providers pursuant to sanctions imposed by the Department of Health (paragraph 4 of the Schedule)**

5. My experience has been solely as a director of Key2Care.

Key2Care provided advisory services to Jimbelunga from 2<sup>nd</sup> July 2018 until late November 2018. I worked through a Sanction Recovery with this provider until they had their sanction removed.

In addition to the above, Key2Care provided advisory services to Bupa South Hobart as set out below.

**Experience being retained by approved providers outside of the sanctions process, including for the purposes of preparing for announced accreditation visits or audits (paragraph 5 (a) and (b) of the Schedule)**

6. [5(a)] Whilst engaged in the roles of Director of Nursing; Assistant Director of Nursing & Clinical & Funding Consultancy, I have been involved in reviewing quality systems and clinical outcomes for the past 12 years.

Key2Care has been working in the preparation of our clients for full review audits and spot audits [announced and unannounced visits] for more than 6 years.

7. [5(b)] The services I have provided to approved providers for the purposes of preparing for accreditation visits or audits are as follows:
- Review of and advice on client audit documentation and materials including resident files and data collection
  - Individual Client system review and advice
  - Review of and advice on the collation of client documentation for residents
  - Recommendations to the client on process management; documentation; collation of information; presentation of required data/evidence
  - Residential Case Conferencing with client clinical teams on premise
  - Training and development of team process; practices and procedures
  - ACFI Funding process development and onsite performance support
  - Advise on Governance

- Team mapping; process maps; contingency planning; workforce development and building culture for client teams

**Effectiveness of cyclical accreditation visits in which approved providers are assessed against standards in the aged care sector (paragraph 6 of the Schedule)**

8. Having worked in the Quality Care environment with approved providers for many years, I believe that scheduled (announced) cyclical accreditation visits may have a tendency to have approved providers focusing on achieving compliance against standards leading up to announced visits, rather than maintaining consistent service standards at all times. To the extent that this occurs, cyclical accreditation visits may be ineffective.

Having worked in the Quality Care environment with approved providers for many years, I believe that the overall outcomes for unannounced cyclical visits will provide a more realistic view of the quality care that homes are providing.

That is, I believe that approved providers should be providing quality care at all times, not just in the preparation and around the presentation of the scheduled announced visit.

***Bupa South Hobart***

**Nature of services provided to Bupa South Hobart before October 2018 (paragraph 7 of the Schedule)**

9. Key2Care had no association with Bupa South Hobart prior to October 2018.

**Nature of services provided to Bupa South Hobart from October 2018 (paragraph 8 of the Schedule)**

10. Key2Care was initially engaged by Bupa South Hobart to provide Nurse Advisor services from 01.11.2018 following their non-compliance and subsequent sanction.

As part of the Nurse Advisor support services, Key2Care also provided some sessional [3 x 4-hour blocks] training and development to key staff around Customer Service whilst engaged with Bupa South Hobart. This training was contextualised to the needs of the onsite team and the outcomes of non-compliance.

In my view, the training was not effectively embedded at the site due to Key2Care being unable to capture all of the approved provider's staff - for reasons beyond Key2Care's control. The Operations Manager at the site from Head Office did not embrace the training and so the staff engagement and required attendance at the sessions was not enforced in terms of staff attending.

In addition to the Nursing Advisor services, Key2Care, was asked to provide services in the specialist area of Wound Care. Key2Care engaged the services of 2 Wound Care Nurses who provided additional advisory services, in January 2019, to the Registered Nurse team and Clinical Care Managers at Bupa South Hobart over 5 days.

Key2Care also engaged the services of an additional Nurse Advisor in January 2019 for 13 days so that the site had 2 Nurse Advisors on the ground.

**The role of an adviser appointed by approved providers pursuant to the *Aged Care Act 1997 (Cth)* (paragraph 9 (a) and (b) of the Schedule)**

11. [9(a)] As the director of Key2Care, I believe that the role of the Nurse Advisor is to determine and guide interventions in relation to provision of care and services to residents and their nominated family members. I believe our duty as an Advisor is to the residents first, whilst providing support needs to their families and loved ones.

The duty thereafter is to support and enable the approved provider to achieve and sustain compliance with its responsibilities under Part 4 of the Act. The Nurse Advisor role, as I understand it, is to work with approved providers to effectively achieve sustained compliance with the approved provider's responsibilities under the Aged Care Act 1997 and the associated Principles.

Key2Care, as a Nurse Advisor, uses evidence-based clinical management and leadership practices to work with the approved provider's relevant personnel to initially address the risk to care recipients, and then to improve the management and quality of care at the service.

12. [9(b)] The terms of engagement with Bupa South Hobart did not specify reporting any specified reporting obligations outside of attending daily meetings and providing details of observations on clinical care.

However, Key2Care were involved in daily meetings with the key management team of Bupa South Hobart and the Operations team at the site, including the General Manager; the nominated Administrator for the Sanction Recovery and key care staff [RN's] at the site.

Key2Care provided daily updates at these meetings on all clinical observations; interactions with key staff; actions undertaken and addressed any areas of risk or concern which required intervention to effectively achieve sustainable compliance.

Key2Care was involved in resident and family meetings and reported the feedback to the Bupa key Management team and Operational team of the organisation.

In addition, Key2Care participated in weekly meetings with the DoHA providing updates on clinical observations along with providing directives on the required improvements in the management of recipient care.

**Summary of services I provided as an adviser to Bupa South Hobart from approximately October 2018 to March 2019 (paragraph 10 (a) to (g) of the Schedule)**

13. [10(a)] The period of time I (Key2Care) was appointed as an advisor for Bupa South Hobart is as follows:
- Nurse Advisor Services provided to BUPA South Hobart from 01.11.2018 to 11.02.2019;
  - Wound Care Specialist Services [2 personnel] – 5 days in January 2019;
  - Training & Development in Customer Service – 3 days in December 2018;
  - Administration support in specialist areas; and
  - This included data entry into their dietary management system; attending and minuting a Family Resident Meeting; collating and compiling fire evacuation plan and scheduling performance management meetings with the onsite team.

The initial agreement for engagement was for Nurse Advisor services from 01.11.2018 – 31.07.2019.

However, the actual engagement period was from 01.11.2018 - 11.02.2019 (as Bupa South Hobart terminated the engagement early as referred to below).

No further provision of Nurse Advisor services were provided to Bupa South Hobart after 11.02.2019.

14. [10(b)] Key2Care was provided with, and reviewed, a copy of the Notice of Non-Compliance and Sanctions concerning Bupa South Hobart [25.10.2018], prior to the commencement of our engagement.

Key2Care also requested a copy of any information relating to the roles and responsibilities of the Nurse Advisor from the DoHA in the following weeks, but were advised that this information was unavailable.

15. [10(c)] The barriers I encountered while acting as an adviser for Bupa South Hobart were as follows:

- Disengaged local Bupa General Manager. When Key2Care arrived at site, I was advised by the Operations Manager for the region that the General Manager had resigned from the position providing several months' notice. I was informed that the General Manager was disengaged from his role but Bupa's operations management had not been able to successfully replace him for the role. After a short amount of time working with the General Manager, Key2Care advised the onsite Bupa Operations Manager that his continued employment did not meet the cultural needs of the site and Key2Care suggested that Bupa release him from the role. However, I was told that Bupa considered it preferable to have 'someone in the role and therefore the General Manager would work out his notice. Despite our ongoing voicing of concern regarding the unsatisfactory situation with the General Manager, he was not released from his role until he had worked his required notice period. In my view this was detrimental to the management of the on-site team and cultural environment at the site at such a critical time.
- Non-adherence to Bupa's Policies and Procedures by onsite staff. Upon review of the policies and procedures for Bupa by Key2Care, and observing the day-to-day operations, we became aware that the clinical care team was not adhering to or implementing the organisation's Policies and Procedures. This included:
  - Medication management was poorly managed at the site and was not in line with organisational policy or procedure. Key2Care staff tried to implement adherence to the organisation's policy and procedures, but were met with resistance on the part of the on-site Operations Manager - who generally sought to continue with the current practices and procedures. The clinical practices around Wound Management appeared to be ineffective and not supportive of better outcomes for residents. When this was raised by Key2Care we were advised that Bupa had insufficient resources to provide additional staff support and training in respect of this area. Key2Care was asked to provide additional resources to provide training around this area of resident care. Key2Care engaged

the services of 2 external practitioners in early January 2019 who attended the site for 5 days.

- Pain Management was another area of concern. Once Key2Care began to work closely with Clinical Care staff it appeared that residents were not being provided with their required pain management in line with the organisational policies and procedures. Some of our areas of concern around this was in relation to the timeliness of provision, as well as the security and storage of the medication.
- Skin Care was another area of concern which onsite staff were not managing appropriately in accordance with Bupa's policies and procedures. A number of residents' at the site required specific equipment to maintain skin care. Key2Care worked with Bupa to facilitate the purchase of 13 specific air mattresses to nominated residents who required additional resources for skin care.
- There was a lack of proper onsite management and leadership at Bupa South Hobart. As highlighted previously, Key2Care raised ongoing concerns regarding the ongoing engagement of the General Manager who had resigned. There was also dissention between this manager and senior staff at the facility. Key2Care raised these concerns with Bupa's operations management (including regarding issues concerning the ongoing development of the local team and appropriate performance management).
- Bupa South Hobart had 3 appointed Clinical Care Managers (CCMs) for the site. This was due to the multiple buildings and floor requirements. During our period of engagement, Key2Care raised concerns over the appointments of staff in these roles. Our concerns centred around resignations of a CCM; another being on Overseas leave during the (critical) period and the third CCM being inappropriately qualified for the role. I considered that the nominated CCM's were not effective in supporting the overall requirements of their position or that of the residents and families.
- The frequency of family concerns raised with Key2Care, with little to no remedial action being taken regarding the feedback to the operations management team at Bupa South Hobart. Despite the completion of the appropriate forms in the process of collecting resident family feedback, it appeared that only limited actions were resolved. Key2Care raised concerns that forms were provided to the General Manager [as per the procedure manual] but these forms appeared to go 'missing'. Therefore, the vast majority of the feedback provided to Bupa South Hobart by Key2Care was not entered into the Bupa System in the appropriate manner or otherwise acted on.
- Staff changes and inadequately qualified staff. As previously detailed, Key2Care raised concerns regularly with the on-site operations management regarding the ongoing staff changes to the facility. Key2Care was advised that there was a personnel shortage in the area and Bupa was engaging staff to the extent it could. Key2Care also raised concerns regarding the need to have appropriately qualified staff in nominated senior roles. This was most applicable to the CCMs as referred to above.
- Staff burnout on site i.e. Resignations of key staff; increased sick leave; increased complacency; loss of motivation and leadership within the staffing.

- Disparity between Head Office Policy & Procedures and on-site practices (as referred to above).
16. [10(d)] The extent to which I consulted with care recipients (including relatives of care recipients) and direct care staff is as follows:
- The Nurse Advisor on site at the facility also met with Care Recipients and family members regularly [weekly onsite] to discuss any areas of concern regarding the quality of care and clinical delivery requirements.
  - After the initial appointment to the role of Nurse Advisor, Key2Care provided a one on one forum for all families to meet with a member of the Key2Care team and table any concerns and issues they had in relation to the clinical care of their loved one. This was provided over the period of 2 weeks after initial engagement of our services.
  - Following the family meeting/s, all notes were provided to the on-site General Manager for entry into RISKMAN (requiring follow-up action by the appropriate person at the Bupa facility). However, it appeared that during our engagement it was not uncommon for information to go missing whilst in process. All information and notes was also provided to the Administrator for the Sanction.
  - Feedback from these meetings and conversations was used to support care planning and meet patient needs.
17. [10(e)] The reviews I conducted in relation to staffing at Bupa South Hobart, including any advice I provided to Bupa in relation to staffing issues are as follows:
- A review of staffing was conducted upon our initial arrival at Bupa South Hobart. The Key2Care Nurse Advisor reviewed the Care Managers and Registered Nurses team to ensure that all residents were identified in the serious risk report and had undergone a comprehensive assessment.
  - Key2Care worked with the Administrator and Management team to identify Bupa systems and processes that required review and strengthening in order to bring about organisational level improvement.
  - Daily audits were conducted on clinical care needs of residents and reporting during team meetings. CCMs were asked to escalate everything to the Nurse Advisor and Operations support – this was done daily. Key2Care suggested that this be monitored closely by the Administrator and Nurse Advisor team.
  - Following the reviews, all complaints and resident communication were collated by Key2Care and provided to the Bupa management team to ensure that it was kept well informed on compliance rectification. Key2Care provided 1-hour meetings with any families that wished to voice concerns on matters pertaining to the residents' care. All complaints were passed on to the management Team at Bupa for registration and actioning via RISKMAN.
18. [10(f)] The following dates were attended by Key2Care team at Bupa South Hobart site:

In late December 2018, Bupa Operations team advised that it did not have internal resources to support additional specialist personnel - this included Wound Care Nurses and an additional Nurse Advisor. At this time, Key2Care engaged the services of 2 Wound Care Nurses for a period of 5 days.

Key2Care also advised Bupa that it could provide the services of a short-term additional Nurse Advisor to expedite achieving compliance outcomes. This was agreed to by BUPA and Key2Care engaged the services of an additional Nurse Advisor for a further 13 days until termination of the engagement in February.

The following table sets out details of the on-site engagement staff provided by Key2Care on a daily basis:

<b>Date</b>	<b>Hours</b>	<b>Service Provisions</b>
19.11.2018	8.5	Nurse Advisor
20.11.2018	8.5	Nurse Advisor
21.11.2018	8.5	Nurse Advisor
22.11.2018	8.5	Nurse Advisor
23.11.2018	8.5	Nurse Advisor
27.11.2018	8.5	Nurse Advisor
28.11.2018	8.5	Nurse Advisor
29.11.2018	8.5	Nurse Advisor
30.11.2018	8.5	Nurse Advisor
03.12.2018	9.0	Nurse Advisor
04.12.2018	9.0	Nurse Advisor
05.12.2018	9.0	Nurse Advisor
06.12.2018	9.0	Nurse Advisor
07.12.2018	9.5	Nurse Advisor
10.12.2018	9.0	Nurse Advisor
11.12.2018	9.5	Nurse Advisor
12.12.2018	8.0	Nurse Advisor
13.12.2018	8.0	Nurse Advisor
14.12.2018	3.0	Nurse Advisor
04.01.2019	6.0	Nurse Advisor
05.01.2019	10.0	Nurse Advisor
06.01.2019	18.5	3 x Nurse Advisors
07.01.2019	21	3 x Nurse Advisors
08.01.2019	22	3 x Nurse Advisors
09.01.2019	19.5	3 x Nurse Advisors
10.01.2019	18.5	3 x Nurse Advisors
11.01.2019	14.0	2 x Nurse Advisors
15.01.2019	16.0	2 x Nurse Advisors
16.01.2019	17.0	2 x Nurse Advisors
17.01.2019	16.0	2 x Nurse Advisors
18.01.2019	16.5	2 x Nurse Advisors
19.01.2019	16.0	2 x Nurse Advisors
20.01.2019	16.0	2 x Nurse Advisors
21.01.2019	16.0	2 x Nurse Advisors
25.01.2019	8.5	Nurse Advisor



26.01.2019	8.5	Nurse Advisor
27.01.2019	8.5	Nurse Advisor
28.01.2019	7.0	Nurse Advisor
29.01.2019	8.5	Nurse Advisor
30.01.2019	8.5	Nurse Advisor
31.01.2019	9.0	Nurse Advisor
01.02.2019	6.5	Nurse Advisor
04.02.2019	17	2 x Nurse Advisors
05.02.2019	17	2 x Nurse Advisors
06.02.2019	17	2 x Nurse Advisors
07.02.2019	17	2 x Nurse Advisors
08.02.2019	16	2 x Nurse Advisors

19. [10(g)] On 11.02.2019, I was contacted by Davida Webb of Bupa management and informed that the Nurse Advisory Services provided by Key2Care were no longer required. I was advised that Bupa management had decided to engage a member of its internal team to provide the Nurse Advisor Services to the Hobart site, and that this was considered to be the best approach to move the care home's planned for improvement forward at pace. I was also told that Bupa needed strong leadership and a more hands-on approach. No complaints or issues were raised about the services provided by Key2Care.

I was told that the provision of services by Key2Care were to cease immediately, with no further staff required from Key2Care onsite on the following day.

Key2Care then contacted the Sanction Administrator [Anchor Excellence] along with the DoHA representative for the Sanction Recovery at the time, regarding Bupa's directive to immediately cease all further Nurse Advisory services from Key2Care.

Both the Administrator and DoHA representative appeared to be unaware of the intent by Bupa to terminate the Key2Care engagement. Both parties acknowledged that there would be no further delivery of services by Key2Care to the site.

#### **The key safety and quality issues at Bupa South Hobart (paragraph 11 (a) of the Schedule)**

20. [11(a)] Generally, please refer to the above.

I believe that the key safety issues in Bupa South Hobart related directly to ineffective Human Resource management. When I and Key2Care staff initially attended the site, we met with the key management staff including the facility General Manager for the facility. It was evident to me that lack of effective Management of the facility heavily impacted on the Bupa South Hobart staff concerning their ability to properly perform the duties.

There was a significant lack of training and development or rostering of appropriate care staff to meet the needs of the residents - which was raised with the Operational Management team at site. I believe that this had contributed significantly to the issues leading to the sanction.

In addition, as referred to above, CCMs and Care staff were not following the Bupa quality practices or processes in the care management of residents at the facility (as referred to above). I believe that this certainly had contributed to ongoing care issues for residents and their families, contributing to an overall consistent systemic failure at the site.

**The key contributing factors to these issues (paragraph 11 (b) of the Schedule)**

21. [11(b)] I consider the following to be/have been the key contributing factors to these issues:

- Ineffective management team – dissention between Management and Care staff;
- Ineffective Clinical Care Management;
- Training and development not management appropriately – no monitoring practices in place for the site staff;
- Lack of performance management – this was not completed within set timelines by the management team;
- Difficult site [multiple buildings & multiple floors within the buildings]; and
- “Profits before people”.

**The efficacy and sustainability of changes made at Bupa South Hobart following the sanctions, and any ongoing risks to the quality and safety of aged care services delivered by Bupa South Hobart (paragraph 11 (c) of the Schedule)**

22. [11(c)] Whilst Key2Care attended the site, it appeared that Bupa management operated in a reactive status, with little planning and a lack of pro-activity. It appeared that, following the sanctions, the Bupa management was more focused on the quickest fix to achieve compliance, rather than implementing sustainable practices and procedures to deliver quality aged care services. The relatively early termination of Key2Care’s engagement means that a more detailed response in relation to this question is not able to be usefully provided.

Dated: 8 October 2019

Signed:

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Tiffany Wiles