Morlancourt

Performance Report

18 Trafford Street
ANGLE PARK SA 5010
Phone number: 08 8268 7277

**Commission ID:** 6163

**Provider name:** RSL Care South Australia Incorporated

**Site Audit date:** 17 November 2021 to 19 November 2021

**Date of Performance Report:** 14 January 2022

# Performance report prepared by

James Howard, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others

# STANDARD 1 COMPLIANT Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers, asked them or their representatives about the requirements, reviewed their care planning documentation and tested staff understanding and application of the requirements under this Standard. The Assessment Team also examined relevant documentation and drew relevant information from other consumer/representative interviews and the assessment of other Standards.

Overall, consumers and representatives interviewed considered consumers were treated with dignity and respect, were able to maintain their cultural identity, make informed choices about their care and services, maintain relationships important to them and live the life they chose.

For example:

* Consumers said they were treated with dignity and respect and described how staff made them feel valued
* Consumers advised staff understood their culture and diversity and respected and encouraged them to maintain connections with those close to them
* Consumers and representatives advised staff supported and encouraged them to maintain relationships, including intimate relationships
* Consumers and representatives said information was provided in a manner that was understandable and enabled informed decision making

Staff could advise what was important to consumers and ways they supported consumers to make choices and decisions, including when risk was involved

Staff were observed engaging respectfully with consumers and representatives and respecting consumer privacy

Reviewed care planning material and other documentation identified the service understood and supported consumer choice and decision making, care and services provided were culturally safe, and consumer diversity and dignity of risk was considered and supported.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 2

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewed care planning documents, interviewed consumers/representatives about how they were involved in care planning and assessment, and interviewed staff about how care planning documents informed the care and services provided and when reviews of care planning documentation were completed.

Overall sampled consumers and representatives indicated that they felt like partners in the ongoing assessment and planning of consumers’ care and services. For example:

* Consumers and representatives advised they were included in the assessment, planning and review of care and services provided
* Consumers and representatives said they were offered copies of care plans and were consulted when changes were required or if incidents occurred.
* Consumers and representatives advised the service sought information from other providers of care, for example Medical Officers (MO) and allied health professionals involved in the care and services provided.

Staff demonstrated knowledge and understanding of assessment and planning and how this informed consumer care and services.

Staff advised consumer’s wishes for advance care planning and end of life care were discussed to ensure wishes and preferences were implemented when required.

Review of care planning and assessment documentation demonstrated assessment and planning was completed in consultation with consumers or representatives of the consumers choosing. Individual needs and preferences, goals and consideration of risk were documented, advance care planning and end of life wishes were recorded, and care planning documents were regularly reviewed for effectiveness and updated when needs or circumstances changed.

Clinical documentation demonstrated consumers with complex care needs were assessed for care and services in consultation with MOs, allied health professionals and external health providers.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

### Requirement 2(3)(d) Compliant

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

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 COMPLIANT Personal care and clinical care

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 3

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewed their care plans and assessments, and asked staff about how they ensured the delivery of safe and effective care for consumers. The Assessment Team also examined relevant documents.

Overall, sampled consumers and representatives considered consumers received personal care and clinical care that was safe and right for them. For example:

* Consumers and representatives said staff identified deterioration or changes in consumer’s conditions in a timely manner and took appropriate action.
* Consumers said they received the care they needed and provided positive feedback about the way staff provided care
* Representatives for a consumer who was receiving end of life care said the care provided was ‘exemplary’ and in line with preferences and wishes
* Consumers and representatives described their satisfaction with the actions the service took to minimise infection, including COVID-19.

Consumers requiring restrictive practices were observed to receive care and monitoring of the restrictive practice as per care planning documentation. Reviews of restrictive practices occurred in accordance with the service’s policies and procedures.

Staff interviews, and documentation identified individualised care that was safe, effective and tailored to the specific needs and preferences of the consumer. This included best practice management of skin integrity, pain, restraint and behaviours to optimise health and well-being.

Staff demonstrated an understanding of restrictive practices, high impact high prevalence risks and infection control.

The service had a clinical governance framework in place that included clinical care management plans, quality frameworks and a risk management approach. High prevalence and/or high impact risks were identified, monitored, reported at local and organisational level and action was taken to minimise risk as appropriate.

Organisational policies, procedures and guidelines based on best practice evidence supported staff to provide personal care and clinical care.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

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

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

### Requirement 3(3)(e) Compliant

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# STANDARD 4 COMPLIANT Services and supports for daily living

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – it observed life at the service, asked consumers about the things they liked to do and how these things were enabled or supported by the service, and asked staff about their understanding and application of the requirements. The Assessment Team also examined relevant documents.

Overall, sampled consumers considered they received services and supports for daily living that were important for their health and well-being and that enabled them to do the things they wanted to do. For example:

* Consumers and representatives stated they were supported by the service to do the things they liked to do
* Consumers and representatives advised they were supported to keep in touch using various means of communication, particularly during COVID-19 restrictions
* Consumers said they were satisfied with the quality and quantity of the meals provided and they had input into the menu.

Activities observed during the site audit supported consumer’s emotional, spiritual and psychological well-being, including visitors from the community.

Review of consumer care documentation demonstrated that assessments and planning obtained relevant information so the service met the consumer’s needs, goals and preferences and optimised their independence, health, well-being and quality of life.

Staff demonstrated how consumers participated in various activities, both within and outside the service, and how programs supported their social and personal relationships.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 5

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The Assessment Team also examined relevant documents.

Overall consumers and representatives considered consumers felt at home and were safe and comfortable in the service environment. For example:

* Consumers and representatives stated the service environment was welcoming and easy to understand. Feedback included consumers felt safe and comfortable, the service had a homelike feeling to it and consumers were able to decorate their rooms as they wished
* Interviewed consumers and representatives were satisfied with service cleaning and maintenance.

The service consisted of seven villas with outdoor areas furnished with outdoor furniture and covered walkways allowing for free movement inside and outside of the service. Pathways and gardens were clutter free and well maintained.

Consumers were observed moving around the outdoor areas with the assistance of mobility devices and staff.

Throughout the site audit, consumers were observed participating in a variety of activities in the service’s communal activities areas.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

### Requirement 5(3)(b) Compliant

*The service environment:*

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

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANTFeedback and complaints

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 6

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – asked how they raised complaints and how the organisation responded. The Assessment Team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

Overall sampled consumers considered that they were encouraged and supported to give feedback and make complaints, and that appropriate action was taken. For example:

* Consumers and representatives described the various ways they could provide feedback or make a complaint
* Consumers and representatives said that matters raised were addressed in a timely manner
* Consumers described improvements that were made as a result of feedback concerning meal options and activities on offer, including follow-up provided to them by management.

Consumers and representatives were encouraged to provide feedback via consumer meetings, feedback forms available throughout the service and annual surveys.

Information regarding internal and external complaints mechanisms were discussed with the consumers and representatives on entry to the service.

Management provided examples of where consumer feedback resulted in improvements to care and services. The service demonstrated there were established processes to receive, record and respond to complaints.

Staff explained how they supported consumers to provide feedback. Management demonstrated that appropriate action was taken in response to complaints and when things went wrong. The organisation had a complaints and continuous improvement policy and staff received training in open disclosure.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANT Human resources

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 7

To understand the consumer’s experience and how the organisation understood and applied the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience with staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Overall consumers and representatives considered that they received quality care and services when required, from staff who were knowledgeable, capable and caring.

For example:

* Consumers and representatives interviewed stated the staff are kind, caring and treat them well
* Consumers and representative advised staff responded in a timely manner when the call bell was activated for assistance
* One representative stated there could be more staff available; however, there was no negative impact on the care or services provided by staff.

All position descriptions outlined the qualifications, registrations, knowledge, skills and abilities required for each staff member's role and responsibilities.

New staff completed orientation, induction and educational programs appropriate for the role they performed.

Education records reviewed showed staff participated in mandatory training and other training identified as being required.

Management monitored service delivery by staff through ongoing supervision, training and review of incidents.

Annual performance assessments occurred, and staff feedback was encouraged through a range of established communication channels.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANT Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

To understand how the organisation understood and applied the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

Overall sampled consumers/representatives considered that the organisation was well run and that they were able to partner in improving the delivery of care and services. For example:

* Consumers and representatives provided examples of how they were involved in planning care and services, through raising suggestions at meetings or regular communication with management.
* Consumers and representatives said they were advised about, and had access to, information about a range of care, lifestyle and service options.
* Consumers and representatives were satisfied discussions occurred in an open and transparent manner.

The service’s governing body met on a regular basis, set clear expectations for the service and consistently reviewed risks from an organisational and consumer perspective. Organisation-wide governance systems supported effective information management, the service’s workforce, compliance with regulation, and clinical care.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.