Ritcher Lodge

Performance Report

480-482 Guildford Road BAYSWATER WA 6053

Phone number: 08 9381 0111

**Commission ID:** 7116

**Provider name:** Alinea Inc.

**Site Audit date:** 10 December 2019 to 12 December 2019

# 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 Commission’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
* the provider’s response to the site audit report received 18 January 2020.

# 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

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

The Assessment Team found all consumers and representatives interviewed feel consumers are treated with dignity and respect and are supported to do as much as possible for themselves. The following examples were provided by consumers and their representatives during interviews:

* Staff are aware of individual consumer’s preferences and respect and support consumer choice.
* Consumers and their representatives are involved in making decisions about care.
* Staff ensure consumers privacy is respected and supported.

The organisation demonstrated consumers are treated with dignity and respect and staff were observed interacting with consumers in a respectful manner. Staff interviewed were able to demonstrate an understanding and application of supporting consumers choices and preferences. Staff demonstrated how consumers’ are supported to maintain relationships and take risks.

## 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

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

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

The Assessment Team found all consumers and representatives interviewed confirmed consumers are partnered in ongoing assessment and planning of consumers’ care and services and have a say in their daily activities. The following examples were provided by consumers and their representatives during interviews:

* All consumers and representatives interviewed stated consumers always have a say in their daily activities.
* All consumers and representatives interviewed stated staff respect consumers’ care and lifestyle preferences.
* All consumers confirmed they are consulted on a daily basis regarding their care preferences and the service supports family being involved in decisions about care.

The organisation demonstrated initial and ongoing assessment and planning was completed in consultation with consumers and were reflective of consumers’ needs and preferences including end of life care. Staff interviewed were aware of assessment processes and informed of the outcomes of assessments, including consumers’ current needs and preferences regarding care and services.

The Assessment Team found, and the service acknowledged documented care plans did not consistently identify consumers’ goals regarding care and services. The service addressed the deficiency in consultation with consumers and goals of care are now documented.

## 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.

The Assessment Team recommended the service did not meet this requirement. The Assessment Team found the service had not completed current self-medication competency assessments in consultation with the Medical officer for two consumers who manage own medications and care plans were not reflective of the consumer’s preference. However, both consumers’ medication directives and administration records clearly indicated medications being self-administered and staff and Medical officers were aware of the consumers self-administering medications.

The approved provider acknowledged the deficit and completed the assessments and updated the care plans accordingly.

Based on the Assessment Team’s report and the approved provider’s response I find the service compliant with the requirement. While the assessment was not completed, the medication directives were reflective, and the staff and Medical officer were aware of the consumers’ preferences to self-manage medications. The health and well-being of the consumers was not impacted by the deficit and the service appropriately responded and addressed the deficit in a timely manner.

### 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.

The Assessment Team recommended the service did not meet this requirement. The Assessment Team found the service had not identified and documented consumers goals regarding care and services.

The approved provider’s response acknowledged the deficit and the service has taken appropriate action to address the deficit including consultation with consumers to identify and document consumer’s goals regarding care and services.

Based on the Assessment Team’s report and the approved provider’s response I find the service compliant with this requirement. The service responded to the deficit in a timely and appropriate manner and information shows all consumers and representatives interviewed are satisfied they are consulted during assessment and planning regarding consumers’ needs and preferences.

### 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

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

The Assessment Team found all consumers and representatives interviewed confirmed consumers receive personal care and clinical care in line with their needs and preferences and care delivered optimises their health and well-being. The following examples were provided by consumers and their representatives during interviews:

* Consumers confirmed their health and well-being is supported and managed through access to a variety of health professionals, including Medical officers and Physiotherapists.
* Consumers and representatives confirmed consumers clinical needs are managed safely and effectively, including specialised nursing care needs and when consumers are unwell or deteriorate.

The organisation demonstrated systems to support the safe and effective delivery of clinical care and personal care. Initial and ongoing assessment and review processes are effective in identifying consumers’ care needs and ensuring delivery of care is safe and effective in line with consumers’ needs and optimises consumers’ health and well-being. Staff interviewed demonstrated how they support and meet consumers’ personal care and clinical care needs in line with consumers’ preferences.

### 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 support 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

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

The Assessment Team found all consumers and representatives interviewed confirmed consumers receive the services and supports important for their health and well-being and able to do the things they want to do. The following examples were provided by consumers and their representatives during interviews:

* All consumers interviewed confirmed they are encouraged to remain independent and do as much as possible for themselves and there are always staff available to assist them when they require help.
* Representatives interviewed stated staff provide emotional and physical support to optimise the consumers’ well-being, including one representative who stated the support provided by staff following a recent illness assisted the consumer in regaining independence and quality of life.
* Consumers stated they have social opportunities and people to talk to if they require emotional support and cultural and religious beliefs are supported by the service.

The Assessment Team found the organisation has policies and procedures to ensure consumers receive safe and effective supports for daily living, including having cultural and spiritual needs identified and supported through the development of individual and service activity plans.

The Assessment Team found the service delivers meals and drinks to consumers in line with their dietary preferences and needs and feedback from consumers regarding meals and dining service is actively gathered to identify areas for improvement.

## 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 services 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

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

The Assessment Team found all consumers and representatives interviewed confirmed the service environment was safe and comfortable. The following examples were provided by consumers and their representatives during interviews:

* All consumers reported their rooms are cleaned regularly and they are satisfied with the cleanliness of the service environment.
* Consumers reported maintenance was attended in a timely manner and are satisfied with equipment provided.

The Assessment Team observed the service to be clean, welcoming and well-maintained. The layout of the service enabled consumers to move around freely with appropriate signage, furniture and fittings to ensure comfort and independence. The service has systems to ensure effective and appropriate purchase, servicing and maintenance of furnishings and equipment.

## 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 COMPLIANT Feedback 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

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

The Assessment Team found consumers and representatives interviewed stated the service encourages and supports them in raising feedback and complaints and confirmed when complaints are raised appropriate action is taken to address the issue. The following examples were provided by consumers and their representatives during interviews:

* Consumers interviewed said they felt comfortable to speak to staff if they were unhappy or had issues and family are involved in providing feedback.
* Consumers said they trusted staff to do the right thing when they raised concerns.
* One consumer confirmed they were satisfied with the actions implemented to rectify an issue after they raised a complaint.

The Assessment Team found the organisation demonstrated feedback systems are effective, including providing consumers opportunities to raise feedback and monitoring systems to ensure feedback, including complaints are actioned and communicated effectively. The organisation has an open disclosure policy and process and staff interviewed demonstrated an understanding of open disclosure.

## 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

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

The Assessment Team found all consumers and representatives interviewed were satisfied the service has sufficient and skilled staff to provide safe care and services which is respectful and meets consumers’ needs. The following examples were provided by consumers and their representatives during interviews:

* All consumers and representatives confirmed staff are kind, caring and respectful and were complimentary of the staff.
* All consumers and representatives confirmed staff know what they are doing, and staff are consistently allocated to areas and have a good knowledge of what individual consumers’ needs and preferences are.
* Consumers confirmed sufficient number of staff were available to meet their needs.

The organisation demonstrated the service has a system to ensure sufficient number of suitably skilled and qualified staff are available and have processes to review and adjust staffing hours based on the needs of consumers. Processes to support and monitor staff performance are in place, including staff training and performance reviews. The Assessment Team observed staff to interact with consumers in a kind and respectful manner.

## 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

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

The Assessment Team found all consumers interviewed were satisfied the organisation is well run, they are provided with opportunities to be involved in decisions about care and service delivery and how to provide feedback.

The Assessment Team found the organisation has a Board and organisational structure which supports the effective management of delivery of care and services and delegates clear roles and responsibilities. The organisation demonstrated the governing body is committed to supporting quality of life and promotes a culture of safe, inclusive and quality care and are accountable for their delivery. Communication systems are effective at ensuring information, including feedback, regulatory compliance and continuous improvement are monitored and communicated throughout the organisation.

## 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.

### 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.