St Louis Community Care - MARRYATVILLE

Performance Report

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**Commission ID:** 600070

**Provider name:** St Louis Community Care Packages Pty Ltd

**Assessment Contact - Site date:** 1 October 2020

**Date of Performance Report:** 12 November 2020

# Publication of report

This Performance Report **may 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 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| **Standard 8 Organisational governance** | **Non-compliant** |
| Requirement 8(3)(c) | Non-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 Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, review of documents and interviews with staff, consumers/representatives and others.
* the provider’s response to the Assessment Contact - Site report received on 26 October 2020.

# STANDARD 3 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 Assessment Team assessed Requirement (3)(a) in Standard 3 and recommended the Requirement as met. All other Requirements in this Standard were not assessed and therefore an overall rating for the Quality Standard is not provided

Overall consumers and representatives sampled said they are satisfied with the care and services provided through St Louis Community Care, including personal and clinical care, as well as services provided by staff from contracted service providers. For example:

* One representative said their family member has dementia and the service has contracted a male carer to work with him.
* One consumer said the personal care provided is excellent.
* One representative said their family member receives wound care from a contracted external organisation, and they are happy with the care. The representative said they communicate regularly with the Co-ordinator and Registered Nurses from St Louis Community Care.

Management described how the organisation sources best practice guidelines and clinical staff described how they provide care in line with the service’s policies and procedures.

Staff provided examples of how services are tailored to meet consumers’ needs, including Greek speaking care workers being sourced to provide services to Greek consumers. Staff said a specialist wound nurse has been sourced to provide care to a consumer with wounds.

Documentation viewed by the Assessment Team showed the service has processes to monitor consumers’ personal and clinical care, including falls, infections and wound care. Incidents are reported and responded to in a timely manner.

Based on the information detailed above, I find the approved provider, in relation to St Louis Community Care - Marryatville, is Compliant with Requirement (3)(a) of Standard 3.

### 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.*

# STANDARD 8 NON-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 Assessment Team assessed Requirement (3)(c) in Standard 8 and recommended the Requirement as not met. All other Requirements in this Standard were not assessed.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

The Assessment Team found the service could not demonstrate effective organisation wide governance systems relating to information management, workforce governance and regulatory compliance in relation to the management of brokerage services.

The organisation could not demonstrate the service has a monitoring process to ensure brokered service providers are providing services in accordance with the Aged Care Quality Standards.

I have considered the Assessment Team’s report and the approved provider’s response to come to a view that the service is Non-compliant with this Requirement. I have provided the reasons for my decision below.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(c) Non-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.*

The Assessment Team was not satisfied that the service could demonstrate effective organisation wide governance systems relating to information management, workforce governance and regulatory compliance in relation to the management of brokered services. The Assessment Team was satisfied the service demonstrated effective systems to manage continuous improvement, financial governance and feedback and complaints.

The Assessment Team viewed documentation which identified the brokered service providers used by St Louis Community Care to provide services to Home Care Package consumers. A range of services are provided by the brokered service providers, including personal and clinical care, and domestic assistance.

The service was unable to demonstrate there were monitoring processes to ensure brokered service providers are providing care and services in accordance with the Aged Care Quality Standards. In particular:

* In relation to information management, the service does not maintain records, audits or other information from brokered service providers.
* In relation to workforce governance, the service could not demonstrate monitoring systems to ensure staff are competent and appropriately trained and qualified to undertake their roles.
* In relation to regulatory compliance, the service could not demonstrate compliance checks, such as police certificates, professional registrations, statutory declarations, vehicle registrations and vehicle safety checks are being undertaken by the brokered service provider. The approved provider does not have a formal process for evaluating the performance of brokered service providers.

The organisation had identified improvements and actions required in relation to brokered service agreements and engaged an external organisation to review the Agreement used and develop a monitoring and performance appraisal process. The actions were recorded on the Plan for Continuous Improvement. The Assessment Team viewed the draft Brokerage Agreement which management said they planned to implement in the near future.

The approved provider submitted a response to the Assessment Team’s report and provided information on the following actions taken or proposed to be undertaken by the service and the organisation:

* Prior to the Assessment Contact visit:
  + the organisation undertook a risk assessment of brokered service providers and identified the percentage of agency staff used by the service. The approved provider undertook steps to reduce the number of brokered services and agency staff being used and said they will continue to work towards further reducing the use of these services and staff.
  + the approved provider engaged a legal firm to review their current agreement and a new draft Brokerage Agreement has been developed. Included in the draft agreement are clauses that contractors have their personnel suitably qualified and that St Louis can request a list of the names and qualifications of each staff member. This will provide the organisation with the capacity to audit brokered services to ensure they are complying with regulatory requirements.
* The approved provider advised that following the Assessment Contact visit the following improvements have been commenced or are planned:
* To reflect changes to brokered services, the organisation have updated their Policy and Procedure manual – Brokerage Agreement.
* The organisation now has a system for managing staff from brokered service providers in relation to their competencies and that they have the appropriate level of training. This auditing process will occur through a Brokered Roster Engagement form. A request for service and appropriate documentation is to be asked for and received prior to engagement of any services.
* A blank incident report form has been added to the draft Brokerage Agreement to enable providers to promptly report any incidents for St Louis to follow up.
* The approved provider stated a yearly Community Home Care audit on contractors is undertaken; however, evidence of the 2019 audit had not been sighted at the time of the Assessment Contact.
* Changes have been made to the draft Brokerage Agreement to include information on feedback and complaints management, as well as a complaints and service user feedback flowchart. This will inform brokered service providers of St Louis’ feedback mechanisms.
* A privacy and confidentiality policy has been added to the draft Brokerage Agreement.
* The organisation has updated their six-monthly review forms to capture feedback from consumers on brokered services.

I acknowledge that the organisation and the service have been responsive to the deficiencies identified by the Assessment Team and have initiated actions to demonstrate effective organisation wide governance systems relating to information management, workforce governance and regulatory compliance in relation to the management of brokered services. I also acknowledge that the approved provider had recognised deficiencies in their Brokerage Agreement prior to the Assessment Contact and had prepared a Plan for Continuous Improvement to address the identified actions.

However, at the time of the Assessment Contact visit, the service could not demonstrate that there were effective management and monitoring systems in place for brokered services in relation to information management, workforce governance and regulatory compliance. In addition, the organisation and service had not implemented the planned improvements identified on the Plan for Continuous Improvement to address the deficiencies.

For the reasons detailed above, I find the approved provider, in relation to St Louis Community Care - Marryatville, is Non-compliant with Requirement (3)(c) of Standard 8.

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

**Standard 8 Requirement (3)(c)**

* Ensure the new draft Brokerage Agreement is implemented, and that there are processes for monitoring the performance of the brokered service providers.
* Ensure the organisation continues to monitor the use of brokered services and agency staff to further reduce their usage.
* Ensure the organisation introduces a system for monitoring staff from brokered services to ensure they have appropriate training and qualifications. This auditing process to occur through a Brokered Roster Engagement form and that this for is asked for and received prior to the engagement of any services.
* Ensure a blank incident report form is added to the draft Brokerage Agreement to enable providers to promptly report any incidents for St Louis to follow up.
* Ensure the draft Brokerage Agreement includes information on feedback and complaints management, as well as a complaints and service user feedback flowchart.
* Ensure a privacy and confidentiality policy is added to the draft Brokerage Agreement.
* Ensure a blank incident report form is added to the draft Brokerage Agreement to enable providers to promptly report any incidents for St Louis to follow up.
* Ensure the draft Brokerage Agreement includes information on feedback and complaints management, as well as a complaints and service user feedback flowchart.
* Ensure a privacy and confidentiality policy is added to the draft Brokerage Agreement.
* Ensure the organisation updates their six-monthly review forms to capture feedback from consumers on brokered services.