Royal Freemasons Bacchus Marsh

Performance Report

58 Grey Street
DARLEY VIC 3340
Phone number: 03 5366 6600

**Commission ID:** 4575

**Provider name:** Royal Freemasons Ltd

**Assessment Contact - Desk date:** 13 July 2021

**Date of Performance Report:** 29 July 2021

# 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 7 Human resources** |  |
| Requirement 7(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 Assessment Contact - Desk; the Assessment Contact - Desk report was informed by review of documents and interview with management.

# STANDARD 7 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 Assessment Team assessed one of the five specific requirements and found it Compliant.

An overall rating for the Quality Standard is not provided as not all the requirements were assessed.

## Assessment of Standard 7 Requirement

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

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

The Assessment Team found that deficits identified at the last visit have been addressed.

The service demonstrated a performance appraisal process has now been implemented to assess, monitor and review the performance of each member of the workforce. The service provided evidence that performance appraisals are underway and advised since their implementation, staff have been open and are enjoying being part of the process. The service confirmed consumer feedback is consider in performance appraisal discussions.

Documentation provided as part of this Assessment Contact included a performance management policy, a calendar of appraisals scheduled, a template of what items are discussed during the appraisal process and a disciplinary procedure.

I have reviewed the available information provided and find this requirement is Compliant.

# 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.