**Performance**

**Report**

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| Name of service: | Mercy Health - Melb Metro East |
| Service address: | 45-47 Warrigal Road HUGHESDALE VIC 3166 |
| Commission ID: | 300029 |
| Home Service Provider: | Mercy Aged and Community Care Ltd |
| Activity type: | Quality Audit |
| Activity date: | 14 April 2023 to 18 April 2023 |
| Performance report date: | 18 May 2023 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

**This performance report**

This performance report for Mercy Health - Melb Metro East (**the service**) has been prepared by Joanne Zhou, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

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 Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

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

# Services included in this assessment

**Home Care:**

* Mercy Health Home Care Services - Your care, your home, your choice, 27069, 45-47 Warrigal Road, HUGHESDALE VIC 3166
* Mercy Health Home Care Services - Your care, your home, your choice, 27073, 45-47 Warrigal Road, HUGHESDALE VIC 3166
* Mercy Health Home Care Services - Your care, your home, your choice, 27067, 45-47 Warrigal Road, HUGHESDALE VIC 3166

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Quality Audit; the Quality 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 assessment team’s report received 4 May 2023.

# Assessment summary for Home Care Packages (HCP)

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| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 3** Personal care and clinical care | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

A detailed assessment is provided later in this report for each assessed Standard.

# 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 required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 1

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| Consumer dignity and choice | | HCP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant |
| Requirement 1(3)(c) | 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. | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant |
| Requirement 1(3)(e) | 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. | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* ensuring consumers are treated with dignity and respect, with their identity, culture and diversity valued.
* providing care and services that are culturally safe.
* ensuring each consumer is supported to exercise choice and independence and who to involve making decisions about their care and services.
* ensuring each consumer is supported to take risks to enable them to live the best life they can.
* ensuring each consumer is provided with information that is current, accurate and timely and communicated in a way that is clear, easy to understand and enable them to exercise choice.
* ensuring each consumer’s privacy is respected and their personal information is kept confidential.

In the service’s response to the Assessment Team’s report, it mentioned a plan to work with a HCP level 3 consumer or their representative regarding their understanding of their monthly statement. I am satisfied this goes to the service’s compliance against 1(3)(e) of this Standard.

# Standard 2

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| Ongoing assessment and planning with consumers | | HCP |
| Requirement 2(3)(a) | 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. | Compliant |
| Requirement 2(3)(b) | 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. | Compliant |
| Requirement 2(3)(c) | 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. | Compliant |
| Requirement 2(3)(d) | 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. | Compliant |
| Requirement 2(3)(e) | 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. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* demonstrating that 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
* ensuring 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.
* ensuring assessment and planning is based on ongoing partnership with the consumer and others the consumer wishes to involve in assessment, planning and review of the consumer’s care and services.
* engaging in 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.
* ensuring 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.

In the service’s response to the Assessment Team’s report, it indicated that a routine audit of its internal files revealed a performance issue with one of its care advisors not performing to the standard required. I note the service is now aware of the root cause of this issue and has taken rectification action. I am satisfied the service is complaint with this Quality Standard.

# Standard 3

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| Personal care and clinical care | | HCP |
| Requirement 3(3)(a) | 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. | Compliant |
| Requirement 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Compliant |
| Requirement 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | Compliant |
| Requirement 3(3)(d) | 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. | Compliant |
| Requirement 3(3)(e) | 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. | Compliant |
| Requirement 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| Requirement 3(3)(g) | 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. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* + ensuring consumers are receiving safe and effective personal and clinical care to optimise their health and wellbeing
  + managing high impact or high prevalence risks associated with each consumer.
  + making appropriate referrals and sharing consumer information with others who share responsibility for care and recognising and responding to deterioration.
  + recognising and addressing the needs of consumers nearing the end of life.
  + minimising infection related risks are minimised through a range of processes and promoting antibiotic stewardship.

# Standard 4

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| Services and supports for daily living | | HCP |
| Requirement 4(3)(a) | 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. | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| Requirement 4(3)(c) | 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. | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* ensuring consumers get safe and effective services and supports for daily living that meets the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.
* providing services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.
* ensuring services and supports for daily living assist each consumer to participate in their community within and outside the organisation’s service environment and have social and personal relationships and do the things of interest to them.
* ensuring information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.
* providing timely and appropriate referrals to individuals, other organisations and providers of other care and services. that optimise consumers’ independence, health, wellbeing and quality of life.
* ensuring meals are provided, they are varied and of suitable quality and quantity.
* Ensuring where equipment is provided, it is safe, suitable, clean and well maintained.

I have also reviewed the service’s submissions which provided further context or clarification of facts to the Assessment Team’s report. There was nothing the submissions to indicate I should not find the service complaint against this Quality Standard, and I am satisfied it is complaint.

# Standard 5

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| Organisation’s service environment | | HCP |
| Requirement 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Not applicable |
| Requirement 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Not applicable |
| Requirement 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable |

Findings

This Standard was not applicable to the quality review, as consumers are not visiting the provider in their service environment.

# Standard 6

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| Feedback and complaints | | HCP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Compliant |
| Requirement 6(3)(b) | Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. | Compliant |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* informing consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.
* ensuring consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.
* ensuring appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.
* reviewing feedback and complaints and using this information to make improvements to the quality of care and services.

# Standard 7

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| Human resources | | HCP |
| Requirement 7(3)(a) | 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. | Compliant |
| Requirement 7(3)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | Compliant |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* ensuring the workforce in planned and workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.
* providing a workforce that is competent and members of the workforce have the qualifications and knowledge to effectively perform their roles.
* ensuring the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.
* undertaking regular assessment, monitoring and review of the performance of each member of the workforce.

The service provided further clarifying information regarding one of its HCP level 2 consumers which evidenced compliance against requirement 7(3)(c). I have no reason to deviate from my view that the service is complaint with this Quality Standard.

# Standard 8

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| Organisational governance | | HCP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Compliant |
| Requirement 8(3)(c) | 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. | Compliant |
| Requirement 8(3)(d) | 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. | Compliant |
| Requirement 8(3)(e) | 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. | Compliant |

Findings

I agree with the Assessment Team’s recommendations detailed in their report that the provider is complaint with the Requirements of this Standard. In summary, the service demonstrated that it is:

* involving consumers in the development, delivery and evaluation of services and are supported in that engagement.
* demonstrating the governing body promotes a culture of safe, inclusive and quality services and is accountable for their delivery.
* using effective organisation wide governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance, feedback and complaints.
* ensuring effective risk management systems and practices including managing high-impact or high-prevalence risks associated with consumers, identifying and responding to abuse and neglect, supporting consumers to live the best life they can and managing and preventing incidents, including the use of an incident management system.

1. The preparation of the performance report is in accordance with section 57 of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)