Performance

Report

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| Name of service: | Mercy Place Boronia |
| Service address: | 72 Kerr Crescent MONTROSE VIC 3765 |
| Commission ID: | 3051 |
| Approved provider: | Mercy Aged and Community Care Ltd |
| Activity type: | Assessment Contact - Site |
| Activity date: | 23 January 2023 |
| Performance report date: | 28 February 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 Place Boronia (**the service**) has been prepared by C Spiller, 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.

# Material relied on

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

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

# Assessment summary

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| Standard 7 Human resources | Not applicable as not all requirements have been assessed |

The Assessment Team conducted an Assessment Contact at the service on 23 January 2023.

The service is generally providing an effective workforce which is recruited and supported to ensure the provision of safe and person-centred care and ensuring staff are competent.

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 7

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| --- | --- | --- |
| Human resources | |  |
| 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)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |

Findings

I have assessed Requirements 7(3)(a) and 7(3)(c) as both compliant.

The service provided evidence of how it plans the number and mix of staff based on the organisation’s roster model that was introduced in January 2022 to include a registered nurse (RN) and an enrolled nurse (EN) on all shifts. Management said while they are not always able to ensure the skill mix when there is unplanned leave, they ensure there are the staffing numbers from other designations who are expected to provide additional coverage within their scope of competency, to ensure consumers’ needs are adequately met. Clinical and care staff said they do experience reduced staffing levels on shifts when leave occurs, especially unplanned leave. However, this is now occurring less frequently. Some consumers said that they experience some delays in call bell responses and food delivery, but that overall, they receive care from enough appropriately skilled staff.

Management stated that the service has undertaken a current recruitment process across all staff designations to ensure that staffing levels are consistently maintained throughout the service. The Assessment Team observed staff assisting consumers in a professional and respectful manner and noted that care staff and lifestyle staff members were assisting service staff to ensure care and services were delivered to consumers.

Consumers said that staff have adequate knowledge and skills to meet their clinical and care needs, including other service domains such as catering, cleaning and laundry roles. Management stated that staff undergo a recruitment screening process to ensure they are appropriately qualified to perform their role, and nursing registrations are monitored annually. A review of the service’s training records confirmed that staff are up to date with their annual mandatory training requirements, and management confirmed that it monitors all staff training completion rates. However, management indicated that non-mandatory training is sometimes suspended due to operational needs. The service is generally providing an effective workforce which is recruited and supported to ensure the provision of safe and person-centred care and ensuring staff are competent.

In light of the above evidence, I have assessed that on balance, the service is compliant with these two Requirements.

1. The preparation of the performance report is in accordance with section 68A of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)