Performance

Report

**1800 951 822**

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| Name of service: | Mercy Place Shepparton |
| Service address: | 351-359 Archer Street SHEPPARTON VIC 3630 |
| Commission ID: | 4287 |
| Approved provider: | Mercy Aged and Community Care Ltd |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 26 June 2023 |
| Performance report date: | 24 July 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 Shepparton (**the service**) has been prepared by D Utting, 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 - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff, and consumers/representatives.

# Assessment summary

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

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 |

Findings

The service was found Non-compliant in Standard 7 in relation to Requirement 7(3)(a) following a site audit held 1 March 2023 to 3 March 2023 where it was unable to demonstrate there was:

* a planned workforce with adequate numbers to enable prompt and effective delivery of personal care.

At the June 2023 assessment contact, the Assessment Team found the service had implemented improvements to address the deficits identified at the previous site audit.

Consumers interviewed were satisfied with personal care provision and said they do not miss out on receiving the care they need. Management described incremental rostering based on a planned admission process which considers consumer numbers and care needs. Management explained the process of communication now in place to facilitate filling planned and unplanned vacancies. Staff said that the notifications of vacant shifts though the service’s rostering application and text messages had resulted in less unfilled shifts. They said the service’s permanent staff are filling extra shifts, reducing the need for agency staff. The call bell system will be upgraded in the next month which will improve reporting to management on call bell response times.

Based on the available evidence, I find Requirement 7(3)(a) is Compliant.

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)