**Performance**

**Report**

**1800 951 822**

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| Name of service: | Southern Midlands Respite Care Service |
| Service address: | 13 Church Street OATLANDS TAS 7120 |
| Commission ID: | 300483 |
| Home Service Provider: | Tasmanian Health Service |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 6 July 2023 |
| Performance report date: | 22 August 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 Southern Midlands Respite Care Service (**the service**) has been prepared by M Cooper, 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:**

* HealthWest (Westcare), 17167, 13 Church Street, OATLANDS TAS 7120

# 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, consumers/representatives and others
* the Performance Report dated 19 January 2023 for the Assessment Contact- desk undertaken on 15 December 2022

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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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

|  |  |  |
| --- | --- | --- |
| Human resources | | CHSP |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant |

Findings

Requirements 7(3)(e) was found to be non-compliant following an Assessment Contact – desk undertaken on 15 December 2022. The Assessment Team found that the: Provider had taken action to ensure compliance with other previously identified non-compliant requirements but at the time of the Assessment Contact – desk Requirement 7(3)(e) was not assessed and therefore remained non-compliant.

When interviewed during the Assessment Contact conducted on 6 July 2023, a consumer said they were happy with the current services provided by staff at the day centre. The Provider demonstrated its compliance with this Requirement in the following ways;

* New staff stated that they underwent probationary supervision,
* Long term staff said that they had participated in developing annual performance plans.
* Management said that performance development planning process across the organisation was 100% complete and signed off.
* Procedures are in place to deal with any staff member who is under performing.
* The performance policy was updated on 2 February 2023.

Based on the information summarised above, I find the Provider, in relation to the Service, compliant with Requirement 7(3)(e).

1. The preparation of the performance report is in accordance with section s68A – assessment contact of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)