Performance

Report

**1800 951 822**

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| Name of service: | St Vincent's Care Services Mitchelton |
| Service address: | 46 Church Road MITCHELTON QLD 4053 |
| Commission ID: | 5951 |
| Approved provider: | St Vincent's Care Services Ltd. |
| Activity type: | Assessment Contact - Site |
| Activity date: | 26 May 2023 |
| Performance report date: | 06 June 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 St Vincent's Care Services Mitchelton (**the service**) has been prepared by E Blance, 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.
* the provider’s response to the assessment team’s report received 06 June 2023.
* other information known to the Commission.

# Assessment summary

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| Standard 3 Personal care and clinical care | Not applicable as not all requirements have been assessed |
| **Standard 5** Organisation’s service environment | **Not applicable as not all requirements have been assessed** |
| **Standard 7** Human resources | **Not applicable as not all requirements have been assessed** |

A detailed assessment is not provided within this report for the Standards as not all Requirements have been assessed within the 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 3

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| Personal care and clinical care | |  |
| 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 |

Findings

Consumers and representatives say consumer care is safe and considers the individual consumer’s needs, goals and preferences. Staff demonstrated awareness of consumers’ clinical care needs and how these are managed in line with consumers’ care plans. Care needs and preferences are documented to inform the delivery of consumers’ care needs. For consumers subject to restrictive practices, documentation is in line with legislative requirements including for authorisation and consent and behaviour support plans are tailored to the consumer.

I find this Requirement compliant. I have placed weight on the consumers’ experience and evidence available within the assessment contact report in coming to a decision of compliance.

# Standard 5

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| --- | --- | --- |
| Organisation’s service environment | |  |
| 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. | Compliant |

Findings

Consumers say the service environment is clean and they can move freely into outdoor areas. There is a maintenance system to manage reactive and preventative maintenance and appropriate staff and external contractors are delegated to maintenance tasks as required. The service environment was observed to be clean and consumers were observed moving freely, both indoors and outdoors.

I find this Requirement compliant. I have placed weight on the consumers’ experience and evidence available within the assessment contact report in coming to a decision of compliance.

# 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)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant |

Findings

Requirement 7(3)(a)

Consumers and representatives say there are enough staff at the service to meet consumers’ care needs. Consumers say calls for assistance are answered in a timely manner. The service has systems and processes in place to ensure the number and mix of staff is adequate to meet the changing consumer needs and preferences including for planned and unplanned leave. Staff say they are able to deliver the care needs of consumers and were observed attending to calls for assistance in a timely manner.

I find this Requirement compliant. I have placed weight on the consumers’ experience and evidence available within the assessment contact report in coming to a decision of compliance.

Requirement 7(3)(d)

Consumers say they are satisfied the staff are trained to provide their care. Consumers expressed they feel safe when staff delivery cares. There are systems and processes for monitoring and overseeing training and development of the workforce. Staff are trained, supported, and equipped to perform their roles. Orientation and onboarding processes include mandatory training, competency assessments, and training on the Quality Standards.

I find this Requirement compliant. I have placed weight on the consumers’ experience and evidence available within the assessment contact report in coming to a decision of compliance.

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