Kenmore Meals on Wheels

Performance Report

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KENMORE QLD 4069  
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**Commission ID:** 700580

**Provider name:** Kenmore Meals on Wheels Incorporated

**Quality Audit date:** 21 February 2022 to 23 February 2022

**Date of Performance Report:** 25 March 2022

# Performance report prepared by

S Bickerton, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2038.

# Services included in this assessment

**Commonwealth Home Support Programme (CHSP):**

* CHSP - Meals, 4-7ZFBVWF, 1036 Moggill Road, KENMORE QLD 4069

# Overall assessment of Service/s

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Standard 1 Consumer dignity and choice | | | CHSP | Compliant | | |
| Requirement 1(3)(a) | | CHSP | | | Compliant |
| Requirement 1(3)(b) | | CHSP | | | Compliant |
| Requirement 1(3)(c) | | CHSP | | | Compliant |
| Requirement 1(3)(d) | | CHSP | | | Compliant |
| Requirement 1(3)(e) | | CHSP | | | Compliant |
| Requirement 1(3)(f) | | CHSP | | | Compliant |
| Standard 2 Ongoing assessment and planning with consumers | | | | | | |
|  | | | CHSP | Compliant | | |
| Requirement 2(3)(a) | CHSP | | Compliant | |
| Requirement 2(3)(b) | CHSP | | Compliant | |
| Requirement 2(3)(c) | CHSP | | Compliant | |
| Requirement 2(3)(d) | CHSP | | Compliant | |
| Requirement 2(3)(e) | CHSP | | Compliant | |
| Standard 3 Personal care and clinical care | | | CHSP | Not Assessed | | |
| Standard 4 Services and supports for daily living | | | | | | |
|  | | | CHSP | Compliant | | |
| Requirement 4(3)(a) | CHSP | | Compliant | |
| Requirement 4(3)(b) | CHSP | | Compliant | |
| Requirement 4(3)(c) | CHSP | | Compliant | |
| Requirement 4(3)(d) | CHSP | | Compliant | |
| Requirement 4(3)(e) | CHSP | | Compliant | |
| Requirement 4(3)(f) | CHSP | | Compliant | |
| Requirement 4(3)(g) | CHSP | | Not Assessed | |
| Standard 5 Organisation’s service environment | | | | | | |
|  | | | CHSP | Not Assessed | | |
| Standard 6 Feedback and complaints | | | CHSP | Compliant | | |
| Requirement 6(3)(a) | CHSP | | Compliant | |
| Requirement 6(3)(b) | CHSP | | Compliant | |
| Requirement 6(3)(c) | CHSP | | Compliant | |
| Requirement 6(3)(d) | CHSP | | Compliant | |
| Standard 7 Human resources | | | CHSP | Not Compliant | | |
| Requirement 7(3)(a) | CHSP | | Compliant | |
| Requirement 7(3)(b) | CHSP | | Compliant | |
| Requirement 7(3)(c) | CHSP | | Compliant | |
| Requirement 7(3)(d) | CHSP | | Not Compliant | |
| Requirement 7(3)(e) | CHSP | | Compliant | |
| Standard 8 Organisational governance | | | CHSP | Compliant | | |
| Requirement 8(3)(a) | CHSP | | Compliant | |
| Requirement 8(3)(b) | CHSP | | Compliant | |
| Requirement 8(3)(c) | CHSP | | Compliant | |
| Requirement 8(3)(d) | CHSP | | Compliant | |
| Requirement 8(3)(e) | CHSP | | Not Assessed | |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, against the Aged Care Quality Standards (Quality Standards). The quality standard and requirements are assessed as either compliant or non-compliant at the standard and requirement level where applicable.

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

The following information has been considered in developing this 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.

# STANDARD 1 Consumer dignity and choice

# CHSP Compliant

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

To understand the consumer’s experience and how the service understands and applies the requirements within this standard, the assessment team sampled the experience of consumers, asked service staff how they ensure consumers are treated with dignity and respect, and reviewed relevant service documentation.

The assessment team interviewed numerous consumers and their representatives, who explained in different ways they considered to be treated with dignity and respect, they can maintain their identity, make informed choices about the services they receive and live the life they choose.

Through reviewing service documentation and interviewing service staff, the assessment team evidenced the service applies a consumer-centric approach to service delivery. Service staff demonstrated an understanding of individual consumers and the service demonstrated consumers are provided enough information to make informed choices.

Service management explained that consumer information is stored in secure filing cabinets and on an electronic database. Access to electronic information is limited by role and is password protected. The assessment team corroborated this and observed consumers are held securely by the service.

This quality standard for CHSP is assessed as compliant as all the individual requirements of the standard have been assessed as compliant.

**Assessment of Standard 1 Requirements**

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| Requirement 1(3)(a) | CHSP | Compliant |

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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| Requirement 1(3)(b) | CHSP | Compliant |

### *Care and services are culturally safe.*

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| Requirement 1(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 1(3)(d) | CHSP | Compliant |

### *Each consumer is supported to take risks to enable them to live the best life they can.*

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| Requirement 1(3)(e) | CHSP | Compliant |

*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.*

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| --- | --- | --- |
| Requirement 1(3)(f) | CHSP | Compliant |

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers

# CHSP Compliant

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

To understand the consumer’s experience and how the organisation understands and applies the requirements within this standard, the assessment team sampled the experience of consumers, asked the workforce how assessment and planning are undertaken in partnership with the consumer and reviewed relevant documents.

The assessment team interviewed numerous consumers and their representatives, who explained in different ways that they are satisfied with the service they receive and are involved in the planning and delivery of services. Consumers indicated the service meets their current needs, goals and preferences.

The assessment team reviewed service documentation and conducted interviews with service staff, and evidenced processes in place to deliver safe and effective services addressing individual consumer needs. Service documentation demonstrated consumer goals and preferences are regularly reviewed.

This quality standard for CHSP is assessed as compliant as all the individual requirements of the standard have been assessed as compliant.

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(b) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(d) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(e) | CHSP | Compliant |

*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.*

# STANDARD 3 Personal care and clinical care

# CHSP Not Assessed

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

This quality standard for CHSP was not assessed. The service does not provide personal care or clinical care to consumers.

# STANDARD 4 Services and supports for daily living

# CHSP Compliant

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understands and applies the requirements within this standard, the assessment team sampled the experience of consumers, asked the workforce how they ensure consumers are provided with the services and supports that are important to their wellbeing and reviewed relevant documents.

The assessment team interviewed numerous consumers and their representatives, who explained in different ways that they get the services and supports for daily living that are important for their health and well-being and that enable them to live as independently as possible and enjoy life. For this service, this means consumers are delivered meals according to their needs, goals and preferences.

* The assessment team evidenced that while consumers and their representatives had not been referred to other organisations, they were aware they could access additional home supports as required from other organisations.

Through conducting interviews with service staff, it was demonstrated there are processes embedded at the service that support staff in delivering services according to the consumer’s preferences in a way that ensures consumers feel socially connected and can have control over their lives. The assessment team reviewed service documentation and corroborated this by evidencing compliant policies and procedures relevant to this standard.

This quality standard for CHSP is assessed as compliant as all the individual requirements of the standard have been assessed as compliant.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 4(3)(b) | CHSP | Compliant |

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

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| Requirement 4(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 4(3)(d) | CHSP | Compliant |

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

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| Requirement 4(3)(e) | CHSP | Compliant |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| Requirement 4(3)(f) | CHSP | Compliant |

*Where meals are provided, they are varied and of suitable quality and quantity.*

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| --- | --- | --- |
| Requirement 4(3)(g) | CHSP | Not Assessed |

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 Organisation’s service environment

# CHSP Not Assessed

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

This quality standard CHSP was not assessed. The service does not provide a service environment that consumers attend.

# STANDARD 6 Feedback and complaints

# CHSP Compliant

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

The service demonstrated effective mechanisms are embedded for consumers, their family, friends, carers and others to provide feedback and make complaints. Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

When interviewed by the assessment team, consumers and their representatives described how they can provide feedback or make a complaint to the service, and explained they feel comfortable and safe to do so. Consumers and their representatives discussed actions taken by the service and described the use of an open disclosure approach by the service when they have raised a complaint, and recognised improvements made by the service as a result.

During interview with the assessment team, service staff described ways they support consumers/representatives in providing feedback, and explained they resolve issues identified as soon as possible and report it through the services feedback processes. Management described the service’s processes for managing complaints and how the service records, acts and analyses complaints to inform continuous improvement.

This quality standard for CHSP is assessed as compliant as all the individual Requirements of the standard have been assessed as compliant.

## Assessment of Standard 6 Requirements

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| Requirement 6(3)(a) | CHSP | Compliant |

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

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| Requirement 6(3)(b) | CHSP | Compliant |

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

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| Requirement 6(3)(c) | CHSP | Compliant |

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

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| Requirement 6(3)(d) | CHSP | Compliant |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resources

# CHSP Not Compliant

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

The service did not adequately demonstrate and evidence to the assessment team that training and development programs are in place for service staff, relevant to this quality standard. Training is not provided to service staff, including training in the quality standards or in areas relevant to the delivery of services to aged care consumers.

The service demonstrated the workforce is planned to enable through processes and service staff numbers, the delivery and management of safe and quality services. Service staff (volunteers) are utilised in delivering meals to consumers and feedback from consumers and their representatives evidenced that the service workforce is sufficient to ensure consumers receive their meal delivery in accordance with their individual needs and preferences. Service staff interactions were described as kind, caring and respectful of the consumer’s identity, culture and diversity.

Service staff demonstrated knowledge of skills and qualifications required to perform their roles. Regular assessment, monitoring and review of staff performance was evidenced to occur when the assessment team reviewed service documentation. Service management demonstrated that staff performance (volunteers) is regularly monitored to ensure the safety and quality of services.

The Quality Standard for CHSP is assessed as not compliant as one of the five specific requirements have been assessed as not compliant.

## Assessment of Standard 7 Requirements

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| Requirement 7(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 7(3)(b) | CHSP | Compliant |

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

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| --- | --- | --- |
| Requirement 7(3)(c) | CHSP | Compliant |

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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| Requirement 7(3)(d) | CHSP | Not Compliant |

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

While the service demonstrated staff recruitment and orientation processes are in place, the assessment team found training and development programs are not in place for all members of the workforce, relevant to the quality standards and delivering services to aged care consumers.

Despite this, consumers and representatives explained in different ways they felt service management and service volunteers know what they are doing and have confidence in their ability.

The assessment team found:

* The service has no training schedule imbedded and does not govern training for service staff.
* First aid training for staff delivering services was not evidenced to be considered or provided by the service. Interviews with service management confirmed first aid training is not provided, and staff do not hold this qualification.
* The assessment team identified some information available for new service volunteers regarding safe food handling, however there was no evidence to demonstrate ongoing training provisions or refreshers are delivered.
* The service’s COVID-19 plan documents that all staff are recommended to complete the government’s online learning modules in relation to infection prevention and control, including COVID-19. Service management advised this had not been completed by all service staff, at the time of assessment.
* There was no evidence service staff received training relevant to the quality standards, including but not limited to: Complaints management and open disclosure, cultural safety, identifying consumer abuse and neglect, management and prevention of incidents, and identifying and reporting signs and symptoms of dementia.
* Service staff and service management advised they have not received training at the service, explained they rely on their own knowledge and skills when supporting consumers and delivering services.

In their response to the assessment teams findings, the service acknowledged non-compliance under this requirement. The service response included a detailed plan for improvement, including: Developing a detailed training schedule for staff (including volunteers), implementing a training register to record all staff training (formal and informal), enhancing training delivery to include online content to all staff, and issuing all staff training in the quality standards relevant to their roles and responsibilities.

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| Requirement 7(3)(e) | CHSP | Compliant |

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.***STANDARD 8 Organisational governance**

# CHSP Compliant

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

The assessment team interviewed several consumers, who overall considered the service to be well run and managed and felt that they can partner with the service in improving the delivery of care and services. Consumers expressed satisfaction in receiving safe, quality care and services.

The service’s governing body demonstrated accountability for the delivery of safe and quality care and services. The assessment team evidenced the governing body drives and monitors improvements to ensure the provision of services in the best interests of consumers.

The assessment team identified the services governance system regularly reports key information to the governing body and systems are in place to review information and provide directives to service staff. The service demonstrated effective service wide governance systems relating to information management, continuous improvement, financial governance, feedback and complaints, regulatory compliance and workforce governance, including the assignment of clear responsibilities and accountabilities.

This Quality Standard for CHSP is assessed as compliant as all the individual Requirements of the Standard have been assessed as compliant.

## Assessment of Standard 8 Requirements

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| Requirement 8(3)(a) | CHSP | Compliant |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

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| Requirement 8(3)(b) | CHSP | Compliant |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

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| --- | --- | --- |
| Requirement 8(3)(c) | CHSP | Compliant |

*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.*

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| --- | --- | --- |
| Requirement 8(3)(d) | CHSP | Compliant |

*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.*

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| Requirement 8(3)(e) | CHSP | Not Assessed |

*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.*

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

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| Requirement 7(3)(d) | CHSP | Not Compliant |

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*