Windsor Aged Care Services

Performance Report

26 Palmer Street   
WINDSOR QLD 4030  
Phone number: 07 3357 9099

**Commission ID:** 5207

**Provider name:** Alzheimer's Association of Queensland Inc

**Assessment Contact - Site date:** 15 July 2021

**Date of Performance Report:** 13 August 2021

# 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 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 4 Services and supports for daily living** |  |
| Requirement 4(3)(f) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, 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 taken into account in developing this 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 Assessment Team’s report for the Assessment Contact – Site conducted 18 December 2020
* the Performance report completed 29 January 2021
* other intelligence and information held by the Commission in relation to the service.

# STANDARD 4 Services and support for daily living

### 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

The Assessment Team did not assess all requirements of this Standard and therefore an overall compliance rating or summary for the Quality Standard is not provided.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(f) Compliant

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

The service was able to demonstrate that improvements had been made to the meals provided for consumers, and that they are varied and of suitable quality and quantity. Consumers and representatives described how meals provided for consumers were of suitable quality, quantity and that they receive choice. Four named consumers provided individual feedback including being offered choices of meals, improvement of meals and the high quality and quantity of meals provided.

Care planning documentation reflected any dietary needs or preferences, nutrition and hydration goals, for consumers which aligned with representative and staff feedback.

The Chef confirmed the service had a seasonal, four-weekly rotating menu developed through consultation with a dietitian and speech pathologist. The Chef stated feedback was sought from consumers and representatives to identify meal preferences, likes and dislikes of consumers. Upon entry to the service, consumers were asked what meals consumers liked to consume. Consumers, representatives and staff were encouraged to provide feedback about meals on the service’s feedback forms. Kitchen staff demonstrated an understanding of consumer’s dietary needs and preferences. Changes to consumers’ dietary needs were communicated to the kitchen through updated dietary assessments. Kitchen staff reported that there was additional food for consumers in the serveries if they were hungry after meal times, including sandwiches, tinned foods, porridge and custard. Staff advised lifestyle staff were also available to assist with meal services and provide one-to-one assistance for consumers.

The service had implemented the following improvements since the Assessment Contact in December 2020, in relation to this Requirement

The service sought additional feedback from consumers and representatives around meals by reinforcing existing feedback and complaints mechanisms including feedback forms, information displayed on posters and in newsletters.

The service conducted food surveys to determine the consumers’ food preferences to identify which meals they would like on the menu. A new menu had been implemented since April 2021, developed in consultation with the dietitian and speech pathologist. The new menu was presented to consumers and representatives and feedback was sought. There was also an opportunity for representatives to see and taste the food at the service.

The service reviewed equipment and décor used in meal services and ordered new crockery and cutlery for consumer use. Kitchen staff received additional training on food presentation, customer service and the dining experience.

Observations of meal service delivery identified meal services were calm and music was playing. A daily menu was displayed. Dining areas were clean, and tables were decorated with homely table cloths and flowers. Some consumers were consuming the hot meal for lunch, while others had sandwiches as an alternative. Consumers appeared to be enjoying their meals.

The service displayed a food safety licence which is effective until 10 December 2021. The service’s food safety plan was last updated in April 2021. The service’s newsletters provided information to consumers/representatives about feedback avenues regarding meals, and other information.

The January 2021 newsletter referenced feedback forms, and that feedback regarding meals was reviewed by the Chef to inform the menu. The March 2021 newsletter provided information about a consumer/representative meeting where the Chef, speech pathologist and dietitian were in attendance. It also advises that the food and dining experience was being reviewed.

Kitchen staff were observed to be adhering to general food safety and work health and safety protocols. Kitchen monitoring records were observed to include food and equipment temperatures.

Based on the information recorded above it is my decision this Requirement is now Compliant.

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.