**Performance**

**Report**

**1800 951 822**

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| Name of service: | Bankstown City Council Food Service |
| Service address: | Civic Tower 66-72 Rickard Road BANKSTOWN NSW 2200 |
| Commission ID: | 200632 |
| Home Service Provider: | Canterbury-Bankstown Council |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 5 October 2022 |
| Performance report date: | 25 October 2022 |

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 Bankstown City Council Food Service (**the service**) has been prepared by S Bickerton, 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

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

* Meals, 4-7XVCEJR, Civic Tower 66-72 Rickard Road, BANKSTOWN NSW 2200

# 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

# Assessment summary for CHSP

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| --- | --- |
| Standard 1 Consumer dignity and choice | Not applicable as not all requirements have been assessed |
| **Standard 2** Ongoing assessment and planning with consumers | **Not applicable as not all requirements have been assessed** |
| **Standard 3** Personal care and clinical care | **Not applicable as not all requirements have been assessed** |
| **Standard 4** Services and supports for daily living | **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 6** Feedback and complaints | **Not applicable as not all requirements have been assessed** |
| **Standard 7** Human resources | **Not applicable as not all requirements have been assessed** |
| **Standard 8** Organisational governance | **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.

# Other relevant matters:

Non-compliance of requirement 2(3)(e) was identified during a quality audit conducted on 14 January 2022.

# Standard 2

|  |  |  |
| --- | --- | --- |
| Ongoing assessment and planning with consumers | | CHSP |
| Requirement 2(3)(e) | 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. | Compliant |

Findings

At the time of performance report decision, the service was:

* Evidencing the regular review of consumer services
* Evidencing the review of consumer services as required

The service demonstrated that embedded systems have undergone recent review and at the time of desk assessment, evidenced process had been implemented to ensure consumer care and services are reviewed regularly for effectiveness. For example:

* The service demonstrated its workforce resources are dedicated to the timely review of consumer care and services. Service management evidenced resource planning staff allocations ensure consumer re-assessments are conducted, including the use of its volunteer workforce. The service demonstrated consumers are involved and engaged in the assessment process.
* Service management evidenced a transition from paper-based information management to electronic systems to enhance consumer information governance. The electronic system was evidenced to prompt and alert service staff when consumer re-assessments are due.
* Service management evidenced updated consumer handbooks outline re-assessment timelines. These resources have been disseminated to consumers for reference.
* Service management demonstrated embedded planning and oversight processes have been implemented to ensure consumer reviews are prioritised. Service work plans evidenced resources are dedicated to consumer reassessment processes.

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)