**Performance**

**Report**

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| Name: | Bowen Meals on Wheels |
| Commission ID: | 700452 |
| Address: | 17 Williams Street, BOWEN, Queensland, 4805 |
| Activity type: | Quality Audit |
| Activity date: | 2 May 2024 |
| Performance report date: | 31 May 2024 |

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.

# Service included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 8323 Bowen Meals on Wheels Incorporated  
Service: 24286 Bowen Meals on Wheels Incorporated - Community and Home Support

**This performance report**

This performance report for Bowen Meals on Wheels (**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 Quality Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.
* other information known by the Commission.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 1 Consumer dignity and choice | Compliant |
| **Standard 2** Ongoing assessment and planning with consumers | **Compliant** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 6** Feedback and complaints | **Compliant** |
| **Standard 7** Human resources | **Compliant** |
| **Standard 8** Organisational governance | **Compliant** |

A detailed assessment is provided later in this report for each assessed Standard.

An assessment is not provided for Standards and Requirements with are not within the scope of the service:

* Standard 3
* Standard 5
* Requirement 4(3)(g)
* Requirement 8(3)(e)

# 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 1

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| Consumer dignity and choice | | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant |
| Requirement 1(3)(c) | 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. | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant |
| Requirement 1(3)(e) | 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. | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant |

Findings

The service has a consumer-centred approach to delivering services. Staff spoke respectfully of consumers and knew about consumers’ culture and background, and how this shapes their identity. All consumers and representatives said consumers are treated with dignity and respect.

Consumers said staff understand their culture and how it can impact their service. Volunteers receive training to assist them to understand the culture of those receiving meals and the service understands the diverse needs of their consumers and can deliver care in a culturally safe way, for example for cultural food preferences.

Consumers said they are informed of the meals available and can make their own decisions about the meals they receive, as well as make requests or changes to their meals. Consumers are supported by management to make informed decisions. Management had an awareness and understanding of individual consumer’s communication needs, choices, and preferences. Consumers can have meals delivered to their home or can pick up the meals direct from the kitchen, based on their preference.

Consumers said they feel supported to continue to live their life how they choose by having their meals delivered. Risks to all consumers are considered in planning and services are adjusted as required to reduce risk, for example working with the consumer about textured modified dietary requirements to minimise choking risks.

Consumers and representatives said they receive information in a way they can understand, in a format appropriate to their needs, and which enables them to make informed choices. Staff assist those consumers with communication difficulties. Information is provided upon commencement with the service and includes a copy of the consumer’s care plan, complaint procedures, advocacy contacts, and the Charter of Aged Care Rights. All consumers receive a monthly invoice.

Consumers said they are informed on how their personal information will be used and consent is obtained when they commence with the service. Consumer information is stored securely.

Based on the information summarised above I find this Standard compliant.

# Standard 2

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| Ongoing assessment and planning with consumers | | CHSP |
| Requirement 2(3)(a) | 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. | Compliant |
| Requirement 2(3)(b) | 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. | Compliant |
| Requirement 2(3)(c) | 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. | Compliant |
| Requirement 2(3)(d) | 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. | Compliant |
| 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

Consumers and representatives are satisfied the services provided meet consumers’ needs and preferences and considers consumers’ well-being and risks. Consumers’ My Aged Care assessment is used to gather information, as well as initial assessment planning information. An assessment is conducted by telephone and within consumers’ homes to determine risks and ensure the service can meet consumers’ needs, goals and preferences.

Consumers and representatives said consumers are receiving meals in the way they prefer, including modified textures as needed. Care plan documents include emergency contacts and what to do if consumers are not home, or an emergency occurs. Management work with consumers to organise delivery times and preferences as well as any modified textures as needs change, or deterioration occurs.

Consumers and representatives said the service includes the consumer and other relevant individuals in the planning and delivery of appropriate meals including local health services and their assessments as required.

Consumers and representatives said consumers’ needs and preferences are discussed and documented. Care plans demonstrated needs and preferences are documented and available to the consumer. Staff have the required access to information systems to ensure meals are made in accordance with individual care needs and preferences.

Consumers and representatives said the service actively communicates when circumstances or preferences change, and this is reflected in documentation. While a formal review plan is not in place, the service demonstrated changes are discussed with consumers as required.

Based on the information summarised above I find this Standard compliant.

# Standard 4

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| Services and supports for daily living | | CHSP |
| Requirement 4(3)(a) | 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. | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| Requirement 4(3)(c) | 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. | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

Consumers and representatives said volunteer drivers bring meals inside the home which supports consumers to remain independent in their homes.

Consumers and representatives said those involved with the service are friendly, approachable and easy to communicate with, which enhances the consumers emotional and psychological well-being, as the volunteers provide conversation and not just meals. They said volunteers can recognise when they are not feeling themselves and will stay and have a chat with them until they are feeling better.

Consumers and representatives said the service provides flexibility with the meal delivery service times and will work with the consumers to ensure meals are delivered in a way they prefer. The volunteer coordinator communicates with consumers about weekly church services which assists consumers to connect with their community.

Consumers and representatives said volunteers have a good understanding of consumers’ needs and preferences. Daily run sheets inform volunteers of information relevant to delivery of meals including what to do if the consumer is not home. Volunteers said they have the information needed to make sure they right meals get to the right consumer. Staff communicate with the chef about consumer needs and preferences, including allergies.

Consumers and representatives said the service has assisted them to understand the My Aged Care system and at times to access further services. Management said the volunteers will inform them of any changes or need for further assistance for the consumers’ and this information is followed up with the consumers’ representatives and with other services providers as needed.

Consumers expressed their satisfaction with the quality and quantity of the meals provided. The menu is reviewed and changed monthly and seasonal produce is used to ensure variety. The chef is available to discuss meals with consumers to ensure quality and quantity of meals is sufficient and to help create the monthly menu.

An assessment of performance is not provided for Requirement 4(3)(g) as it is not within scope for this service.

Based on the information summarised above I find this Standard compliant.

# Standard 6

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| Feedback and complaints | | CHSP |
| Requirement 6(3)(a) | Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints. | Compliant |
| Requirement 6(3)(b) | Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. | Compliant |
| Requirement 6(3)(c) | Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. | Compliant |
| Requirement 6(3)(d) | Feedback and complaints are reviewed and used to improve the quality of care and services. | Compliant |

Findings

Consumers feel comfortable raising any concerns using a feedback form, or by raising concerns directly with staff or volunteers who will relay information to the relevant office for actioning. Welcome packs include avenues for internal complaints including the service contact details. Management support consumers and representatives to provide feedback.

Consumers and representatives are made aware of other methods for raising and resolving complaints including how to access advocacy services, the Commission and how to access language services for assistance with interpreting or translation if required. Consumers discussed how they have been provided with this information on commencement with the service.

Consumers expressed confidence that management would address complaints and attempt to resolve any concerns promptly. Management and staff demonstrated a shared understanding of processes to follow when a complaint is received. Staff advised they refer all feedback and complaints to the treasurer for review and action.

Management demonstrated a process to review, analyse and trend feedback and complaints data. Feedback and complaints are tracked in electronic systems and improvement strategies are established when required. These are reflected in the services plan for continuous improvement and discussed at organisational meetings.

Based on the information summarised above I find this Standard compliant.

# Standard 7

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| Human resources | | CHSP |
| 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)(b) | Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. | Compliant |
| Requirement 7(3)(c) | The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles. | Compliant |
| Requirement 7(3)(d) | The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. | Compliant |
| Requirement 7(3)(e) | Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken. | Compliant |

Findings

The number and skill mix of workforce members is planned to meet the service needs of consumers. Consumers are satisfied with the meals received and when and how they are delivered. Consumers said they are satisfied with the workforce, and provided positive feedback about all volunteers who deliver the meals, and management.

Consumers said staff are kind, caring and respectful. Management and staff spoke about consumers in a kind and caring way and knew each consumer’s background and their individual preferences.

The organisation has human resources (HR) policies, procedures and guidelines including training processes to ensure the volunteer workforce are competent and have the knowledge and compliance criteria to effectively perform their roles. Volunteers undertaken an induction program. Vetting processes are conducted. Consumers said volunteer delivery staff are competent and know what they are doing when delivering meals. Police checks, copies of driver’s licences and car registration are obtained from volunteers on commencement, monitored for currency, and updated prior to expiry.

The service has processes for the recruitment, induction, and onboarding of the workforce, as well as ongoing mandatory training. Training topics are completed by relevant staff including basic knife skills, hand hygiene and infection prevention and control. Position descriptions for roles are provided and workforce recruitment and training is reviewed and considered by management and the organisation.

Systems are in place to monitor and review workforce performance.

Based on the information summarised above I find the Standard compliant.

# Standard 8

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| Organisational governance | | CHSP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Compliant |
| Requirement 8(3)(c) | 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. | Compliant |
| Requirement 8(3)(d) | 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. | Compliant |

Findings

Consumers said they have the opportunity to provide feedback on services and can be involved in the evaluation of services. Consumers said the organisation is well run, and they can have a say on how things are done.

The service’s governing body monitor compliance with the Quality Standards, and how the governing body ensures it is accountable for the delivery of quality care and services across the organisation. Board members meet regularly to discuss all aspects of business including financial, quality, workforce, feedback and complaints, incidents and quality improvement.

The service has effective governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and complaints. A range of committee’s support governance, including finance and regulatory compliance.

The service has frameworks and policies to manage risk and respond to incidents. The service was able to demonstrate the effective management of high impact or high prevalence risks, the identification of abuse and neglect of consumers and what constitutes a reportable incident under the Serious Incident Response Scheme. All volunteers contact the treasurer as protocol to report or discuss any items pertaining to risk management. Incidents are recorded on the incident register, actioned before a governance meeting, and if warranted, will have a corresponding entry in the service’s plan for continuous improvement.

An assessment of performance is not provided for Requirement 8(3)(e) as it is not within scope for this service.

Based on the information summarised above I find this Standard compliant.

1. The preparation of the performance report is in accordance with section 57 of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)