Broadbeach Meals on Wheels Incorporated

Performance Report

|  |  |
| --- | --- |
| **Address:** | 23 T E Peters Drive BROADBEACH QLD 4218 |
| **Phone:** | 07 5526 2300 |
| **Commission ID:** | 700363 |
| **Provider name:** | Broadbeach Meals on Wheels Incorporated |
| **Activity type:** | Quality Audit |
| **Activity date:** | 17 June 2022 to 21 June 2022 |
| **Performance report date:** | 18 July 2022 |

# Performance report prepared by

A. Grant, 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 2018.

**Services included in this assessment**

**CHSP:**

* Meals, 4-7Z4NBP8, 23 T E Peters Drive, BROADBEACH QLD 4218

# Overall assessment of Service

|  |  |  |
| --- | --- | --- |
| 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 Applicable |
|  |  |  |
| 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 Applicable |
|  |  |  |
| Standard 5 Organisation’s service environment | CHSP | Not Applicable |
| 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 | Compliant |
| Requirement 7(3)(a) | CHSP | Compliant |
| Requirement 7(3)(b) | CHSP | Compliant |
| Requirement 7(3)(c) | CHSP | Compliant |
| Requirement 7(3)(d) | CHSP | 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 Applicable |

# 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 taken into account 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
* the provider did not respond to the Quality Audit report

# 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

Consumers and representatives interviewed by the Assessment Team stated they are always treated respectfully and with dignity. Consumers interviewed stated management and volunteers are very caring and polite and management and volunteers understand their needs and preferences and that their service is delivered in a way that makes them feel safe and respected when in contact with the service.

Consumers interviewed by the Assessment Team stated they are supported to make their own decisions about the meal service they receive. Consumers and representatives gave examples to the Assessment Team of how the service makes it easy for them to be involved and stay involved with those important to them. Consumers and representatives interviewed by the Assessment Team stated they are asked about their dietary and delivery preferences when they commence and that they contact the office if they want to make any changes.

Consumers and representatives interviewed stated the staff listen to them and understand what is important to them. The Assessment Team noted supporting consumers to take risks was discussed with the staff. In the context of the meal delivery service being undertaken, the service demonstrates it respects the choices consumers have made about their meals and encourages consumers to be as independent as possible. Management and volunteers interviewed by the Assessment Team stated they report to management any risks observed in consumers’ homes. Consumers and representatives interviewed by the Assessment Team stated they receive written information in a way that they can understand that enables them to make informed choices.

Management and volunteers interviewed by the Assessment Team described how they show respect to the consumers by addressing them by their preferred name, taking time to talk to them and acknowledging their preferences. Management and volunteers understood individual consumers, providing examples in some instances of consumers’ situations, who they live with and if they have any special requirements. Management stated to the Assessment Team if the consumer was unable to communicate their decisions, they would contact their representative.

Management stated during interviews with the Assessment Team consumer information is stored in secured filing cabinets and an electronic database. Access to electronic information is limited by role and is password protected. During interviews with the Assessment Team volunteers described how they respect the privacy of consumers, saying they knock on doors or call out before entering homes. Evidence analysed by the Assessment Team showed initial information for new volunteers discusses their responsibilities in relation to privacy and confidentiality.

Evidence analysed by the Assessment Team showed the service had a consumer-centred approach to delivering the meal service. The Assessment Team observed management and volunteers interacting with consumers and representatives over the telephone in a polite and respectful manner. Evidence reviewed by the Assessment Team showed consumer involvement in decisions about the service they receive.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

**Assessment of Standard 1 Requirements**

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

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

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

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

|  |  |  |
| --- | --- | --- |
| 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.*

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

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

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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

Evidence analysed by the Assessment Team showed the service undertakes assessment in the form of collecting information about what types of meals the consumer wants and how often they would like meals delivered. Evidence analysed showed the assessment includes collecting information about dietary needs and preferences, their preferred method of payment and any special delivery instructions. Evidenced analysed showed the information from the initial assessment is transferred to the delivery run sheet and uploaded to an electronic database and then updated as required.

Consumers and representatives reported to the Assessment Team during interviews their current meal service delivery meets their needs, goals and preferences. Consumers and representatives stated they have day to day control of the service they receive and that it was developed in consultation with them. During interviews with the Assessment Team management described how the meals provided and the way the meals are delivered are tailored to individual needs and preferences. Evidence analysed by the Assessment Team showed current needs and preferences in relation to meals and delivery are recorded on delivery run sheets, available to the volunteers delivering meals.

Consumers and representatives interviewed confirmed they are involved in the planning and review of the service they receive. Consumers and representatives reported to the Assessment Team they can choose what meals they have and how frequently they are delivered. Management was able to demonstrate how they work with the consumer and other organisations providing care to meet the needs of the consumer. Evidence analysed by the Assessment Team showed consumer and representative involvement in the planning of services.

Consumers and representatives confirmed to the Assessment Team they are satisfied with the care plan in knowing their meal requests are being delivered on the days requested and to their delivery instructions. Consumers stated to the Assessment Team they are aware they can contact the service to vary their meals and delivery days to support their needs thus reviewing their care plans as they need to.

Evidence analysed by the Assessment Team showed the service maintains electronic records for each consumer, with file notes that can be used to update the delivery run sheets as required. The delivery run sheet identifies the consumer, the delivery address and any special instructions, in relation to the meal or the delivery. Volunteers reported to the Assessment Team the delivery run sheet provides all the information they require to deliver the appropriate service, according to the consumer’s preference.

Management reported to the Assessment Team during interviews reviews are undertaken on an ongoing basis. Management stated delivery run sheets are updated when the service is informed of any necessary changes, such as cancellation of service, changes to dietary requirements or changes to delivery instructions. Evidence analysed by the Assessment Team showed file notes confirm regular contact with consumers and the updating of information. Evidence analysed showed management and volunteers document in the database when the ad hoc changes are advised, and the annual reviews are conducted.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

|  |  |  |
| --- | --- | --- |
| 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*.

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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 Applicable

### 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

The Quality Standard for the Commonwealth home support programme service is assessed as Not Applicable as all specific requirements have been assessed as Not Applicable.

# 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

Consumers and representatives interviewed by the Assessment Team reported they are satisfied with the meal service delivery. Consumers and representatives stated during interviews with the Assessment Team the service provides a safe and effective service for them by providing to their needs and preferences, monitoring their well-being through contact and conversations when meals are delivered and through follow-up contact with representatives as required. During interviews with the Assessment Team management and volunteers provided examples of how the meal delivery service is tailored to support the individual consumer.

Consumers and representatives confirmed during interviews with the Assessment Team the service supports the consumer's emotional well-being through having a chat when meals are delivered, monitoring their well-being and noticing if they are unwell or feeling low. Consumers reported to the Assessment Team the service supports them to celebrate special days, providing gifts on their birthday and at Christmas. The Assessment Team noted management and volunteers demonstrated an understanding of what is important to the consumer and how the provision of a flexible service promotes the well-being of the consumer.

Consumers and representatives confirmed to the Assessment Team during interviews the service is flexible in the delivery of their service enabling them to maintain their social networks and do the things that are important to them. Some consumers stated during interviews they are freed up from the cooking to have more time available, whilst others allow them to participate more in the community.

Management provide examples to the Assessment Team of how service delivery is adjusted when situations change, to ensure goals and preferences are still being met. Evidence analysed by the Assessment Team showed file notes and delivery run sheets confirm consumers have day to day control over the service they receive.

Consumers and representatives reported to the Assessment Team they receive a consistent service, despite having different volunteers deliver their meals. Volunteers described when interviewed how the service keeps them informed of consumers’ needs and preferences and how they are informed of any changes to the consumer’s condition, as it relates to their responsibility. Management gave examples of sharing information with others involved in providing services to individual consumers. The Assessment Team noted they observed volunteer drivers providing relevant feedback to management following deliveries.

The Assessment Team noted while consumers and representatives sampled had not been referred to other organisations, they were aware they could access additional home supports from other organisations. The Assessment Team noted while referrals are not generally undertaken by the service, consumer file notes evidenced management contacting representatives if the consumer’s condition suggested illness or deterioration. Evidence analysed by the Assessment Team showed the service has information on other services in the area, including the Community Group Hub which can be accessed for information and resources on other services.

Consumers and representatives provided positive feedback about the meals. Consumers and representatives stated to the Assessment Team during interviews the meals are varied and meet their needs for likes, dislikes, dietary needs and allergies. The Assessment Team noted staff and volunteers are aware of individual consumer’s dietary needs and delivery preferences.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as six of the six applicable requirements have been assessed as Compliant. Requirement 4(3)(g) is Not Applicable and therefor was not assessed.

**Assessment of Standard 4 Requirements**

|  |  |  |
| --- | --- | --- |
| 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.*

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

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

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

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

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

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

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

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

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

# STANDARD 5 Organisation’s service environment CHSP Not Applicable

### 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

The Quality Standard for the Commonwealth home support programme service is assessed as Not Applicable as all specific requirements have been assessed as Not Applicable.

# 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

Consumers and representatives stated during interviews with the Assessment Team they are aware of how to provide feedback or make a complaint and felt supported to do so. Consumers and representatives advised during interviews they would generally provide feedback by contacting the office and that they are routinely asked for feedback by delivery volunteers. Evidence analysed by the Assessment Team showed on entry to the service, consumers and representatives are provided with an information pack and handbook which provide details on ways to make a complaint or provide feedback.

Consumers and representatives sampled by the Assessment Team either advocate for themselves or have family who advocate on their behalf. During interviews with the Assessment Team consumers and representatives demonstrated their awareness of external avenues of complaints, however advised they are comfortable communicating directly with the Managers or volunteers. Evidence analysed by the Assessment Team showed the service provides information to consumers and representatives on internal and external complaints mechanisms and advocacy services in the handbook provided on entry. Evidence analysed showed a list of useful contact details for a variety of community, health and government services is listed at the back of the handbook. Management stated during interviews with the Assessment Team the consumer cohort accessing this CHSP service speak English, but should the need for an interpreter arise they would initially speak to the consumer’s representative and if required, would contact an interpreting service.

The majority of consumers and representatives sampled interviewed said they had not needed to make a complaint but felt confident to do so if the need arose. During interviews with the Assessment Team management demonstrated, and file notes confirmed, open disclosure is practiced when consumers make a complaint, appropriate action is taken in response, and complaints are resolved to the satisfaction of consumers. Evidence analysed showed the complaints register demonstrated complaints are promptly responded to and consumers are informed of the outcomes.

The Assessment Team completed a review of documentation and noted complaints and feedback are escalated to the managers and the governing body; and are recorded in the complaints register and actions taken by the service to resolve the complaint are documented, including communication with the consumer and representative.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

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

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

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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 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

Evidence analysed by the Assessment Team showed the service demonstrated the number and mix of volunteers and staff enables the delivery and management of a safe and quality meal delivery service. The Managers stated to the Assessment Team they are always looking for additional volunteers particularly for the administration roles. An external volunteer organisation has assisted providing advertisements for volunteers.

Consumers and representatives interviewed by the Assessment Team stated they are satisfied the workforce is sufficient to ensure they receive their meal in accordance with their individual needs and preferences. Consumers reported to the Assessment Team the delivery drivers arrived when expected and always take the time to engage with them in conversation.

The Assessment Team reviewed position descriptions for various roles within the service that outline minimum requirements for the role. Evidence analysed by the Assessment Team showed documented procedures and information ensure the Managers and volunteers have the knowledge to perform their roles.

The Assessment Team noted management and volunteers have a shared understanding of their role and reporting responsibilities and could explain processes relevant to their role including the incident reporting procedure, cash handling procedure and the non-response procedure. During interviews with the Assessment Team management and volunteers described the recruitment and orientation process at the service, including buddy shifts for volunteers when they first commence.

Volunteers interviewed stated they have received ‘on the job’ training and guidance and felt supported to undertake the meal delivery service safely and efficiently.

Evidence analysed by the Assessment Team showed training includes complaint handling, food safety, fire procedures, workplace health and safety, infection control, reporting incidents and the protocol if a consumer does not respond to a scheduled visit. The Assessment Team noted volunteers complete a 2-part training module ‘Supporting Older Australians’ and a training module ‘Personal Safety’. Evidence analysed showed Management and volunteers have access to additional online training resources.

Evidence analysed by the Assessment Team showed while the service does not undertake a formal review of the volunteers, management described how they regularly monitor the performance of volunteers through observation and feedback from other volunteers, consumers and representatives. When required, management said they would discuss any performance concerns with the individual. Management stated to the Assessment Team they rarely have any negative feedback about volunteers however, did provide one example where they followed up with a volunteer who used the incorrect bathroom in a consumer’s home.

Evidence analysed by the Assessment Team showed the governing body undertakes monitoring and review of performance of the Managers through performance appraisals. The Assessment Team noted evidence of one manager having had a performance review undertaken, with the other manager only being in the role a short time.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

|  |  |  |
| --- | --- | --- |
| 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.*

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

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

|  |  |  |
| --- | --- | --- |
| 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.*

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

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

|  |  |  |
| --- | --- | --- |
| 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

Consumers and representatives interviewed by the Assessment Team provided examples of where they have provided feedback to the service, including through surveys and speaking to volunteers and management. During these interviews’ consumers expressed satisfaction with the quality of the service and said they have input as to how the service is delivered to meet their diverse needs. The Assessment Team noted management described how feedback from consumers and representatives feed into broader service improvements.

Evidence analysed by the Assessment Team showed the governing body is accountable for the delivery of a culture of safe, inclusive and quality care and services and remains informed through formal governance, leadership and reporting pathways at the service level. Evidence analysed showed the committee meets monthly and is comprised of four volunteer members and the 2 the Managers. The Assessment Team noted minutes of meetings are maintained and the managers provide a monthly report to the governing body detailing incidents, complaints and feedback, volunteer numbers, events happening, financials and regulatory compliance. Evidence analysed by the Assessment Team showed the governing body satisfies itself that the Quality Standards are being met through feedback and complaints mechanisms and consumer surveys.

The Assessment Team analysed evidence which showed the service demonstrated sufficient governance systems relating to information management, continuous improvement, financial governance, regulatory compliance, feedback and complaints and workforce governance, including the assignment of clear responsibilities and accountabilities.

The Assessment Team noted management and volunteers have a shared understanding of the systems and processes for delivering a safe and reliable meal service. The Assessment Team noted while the service does not provide personal care and clinical care, they do have an incident management system to record and monitor incidents that impact consumers. Evidence analysed by the Assessment Team showed the service has a Risk Management Plan and Emergency Procedures and Safety manual.

Consumers interviewed by the Assessment Team stated they feel the service supports them to live the best life they can. Some consumers reported being able to do the things they enjoy such as playing bridge or ‘catching up with friends’, rather than cooking, other consumers stated it saves them money and another reported it means they do not have to be dependant of their family.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as four of the four Applicable requirements have been assessed as Compliant. Requirement 8(3)(e) is not Applicable and therefor was not assessed.

## Assessment of Standard 8 Requirements

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| 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.*

|  |  |  |
| --- | --- | --- |
| Requirement 8(3)(e) | CHSP | Not Applicable |

*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

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.