Performance

Report

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| Name of service or service group: | Performance report date: |
| Fairfield Food Services Incorporated | 25 August 2022 |
| Commission ID: | Activity type: |
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| Home Service Provider: | Activity date: |
| Fairfield Food Services Incorporated | 27 June 2022 – 29 June 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 Fairfield Food Services Incorporated (**the service**) has been prepared by J Taylor, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-2).

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

# CHSP: Meals, 4-7XUI6OH, 11 Kenyon Street, FAIRFIELD NSW 2165

# Material relied on

The following information has been considered in preparing the 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.

# 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 3** Personal care and clinical care | **Not applicable** |
| **Standard 4** Services and supports for daily living | **Compliant** |
| **Standard 5** Organisation’s service environment | **Not applicable** |
| **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.

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

## Findings

Consumers interviewed described staff as kind, caring and respectful. Staff were aware of the consumer’s individual identify and cultural background and demonstrated how this is taken into account when making decisions regarding the menu, preparing and delivering meals. Consumers and representatives interviewed said the service responds to consumers cultural backgrounds and staff protect consumer privacy and reported information provided by the service is clear and easy to understand.

Volunteers and staff interviewed demonstrated their knowledge of consumers’ wishes and services are tailored to meet individual consumer preferences. Staff were able to demonstrate how consumers are engaged to exercise choice in relation to their meals services and are assisted to remain living independently at home.

The service demonstrated how engagement with consumers looks to determine the support required to meet their needs; and will identify if risks are associated with decisions made by consumers. These risks are usually in relation to dietary requirements due to medical conditions, and consumers are assisted to pick appropriate meals to suit dietary requirements. For example:

The meal plan offers meals that a low GI, low sodium and low in sugar. Consumers are encouraged to choose options that suit their needs.

Management interviewed noted an awareness of consumers coming from diverse backgrounds and confirmed the menu is developed to accommodate a variety of cultures. For example:

Consumers and representatives are asked their food preferences and any foods that may not be appropriate for religious reasons is documented and provided to the kitchen.

Review of organisational documents, including a consumer handbook and information kit, policies, procedures, and consumer documentation provided evidence consumers are involved in making decisions about the services they receive and how they ensure consumer information is kept confidential.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the Commonwealth Home Support Program (CHSP) service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

# Standard 2

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| Ongoing assessment and planning with consumers | | CHSP |
| 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 |
| 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 |
| 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 |
| 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 |
| 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 said they participate in ongoing assessment and planning of their meal services. They confirmed their individual preferences are considered, and the menu is flexible enough to ensure they can choose the combination they want. Consumers said they felt supported by the service to make decisions and knew they could choose to involve others as advocates if they wished.

Assessment and service planning processes are in place in relation to the delivery and preparation of meals. The service collects all necessary information to provide meals in line with dietary requirements and individual preferences. Information on any risks that may affect the consumer are alerted to the kitchen and volunteer staff and incorporated in planning and delivery of services. Information collected in relation to the consumer is reviewed at least annually and changes to meal services made as required if the circumstances change.

Completed service and menu support plans reviewed documented services the consumers have agreed to receive including any individual consumer goals. For example:

The service has arranged to be informed by the hospital prior to a consumer, who is regularly in-and-out of hospital, being discharged to ensure meals are provided immediately upon discharge.

The service evidenced provision of meal plans to consumers and showed written confirmation of the agreed upon services, including meals selected, frequency, day and time of delivery, and costs. This information was sighted in sampled consumer documentation. The service demonstrated consumers who are palliating are provided meals services, in accordance with their needs and dietary requirements. The service helps with advance care planning and can refer to relevant agencies

Based on the evidence sighted by the Assessment Team, the Quality Standard for the CHSP service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

# Standard 3

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| Personal care and clinical care | | CHSP |
| 3(3)(a) | Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:   1. is best practice; and 2. is tailored to their needs; and 3. optimises their health and well-being. | Not applicable |
| 3(3)(b) | Effective management of high impact or high prevalence risks associated with the care of each consumer. | Not applicable |
| 3(3)(c) | The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved. | Not applicable |
| 3(3)(d) | Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. | Not applicable |
| 3(3)(e) | Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared. | Not applicable |
| 3(3)(f) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Not applicable |
| 3(3)(g) | Minimisation of infection related risks through implementing:   1. standard and transmission based precautions to prevent and control infection; and 2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics. | Not applicable |

This Quality Standard is not applicable as the service does not deliver personal or clinical care services.

# Standard 4

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| Services and supports for daily living | | CHSP |
| 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 |
| 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| 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. | Not applicable |
| 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 |
| 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |
| 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Not applicable |

## Findings

Consumers interviewed confirmed they receive the services and supports for daily living that are important for their health and well-being. They confirmed the meals service helps them to remain independent and gave examples of how they are supported to live their life the way they choose and felt they were able to freely state their preferences. Consumers said they can choose if their meals and confirmed they are tasty, nutritious, varied, and large enough.

Staff interviewed outlined the range of supports provided in relation to meal services, delivery of meals and complimentary services to assist consumers to maintain their well-being and health and remain living independently at home. Where services are not able to be delivered by the service, staff will refer consumer to My Aged Care and other support services as relevant. Staff interviewed said if they have concerns about a consumer’s wellbeing, they advise the office who then contact the consumer or representative and will make sure the consumer is safe.

The service demonstrated communication systems in place to enable information about consumer’s condition, needs and preferences is communicated within the organisation and with those who have shared responsibility for the care of the consumer.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the CHSP service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant. Requirement 4(3) (c) and (g) is not applicable. The service is not funded as a social support service and does not provide equipment to consumers.

# Standard 5

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| Organisation’s service environment | | CHSP |
| 5(3)(a) | The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function. | Not applicable |
| 5(3)(b) | The service environment:   1. is safe, clean, well maintained and comfortable; and 2. enables consumers to move freely, both indoors and outdoors. | Not applicable |
| 5(3)(c) | Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer. | Not applicable |

This Quality Standard is not applicable as the service does provide centre based services.

**Standard 6**

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

## Findings

Consumers and representatives interviewed advised they feel comfortable providing feedback or making a complaint should they wish. Consumers said they provide feedback at any time through a range of mechanisms such as verbal, via volunteers or in writing. Their satisfaction with meals is sought by the service regularly. Consumers are aware of their right to make a complaint and can be assisted to access advocacy if required.

Staff interviewed stated they encourage consumers to provide feedback, especially where a consumer indicates dissatisfaction with any aspect of the meal service. Management and members of the Board are actively engaged in seeking individual consumers’ opinions and suggestions for improvement.

Management and staff interviewed demonstrated an awareness of open disclosure and advised they would always apologise to consumers that were not happy with anything regarding their services. Open disclosure is practiced when responding to complaints.

All feedback, positive and negative, is fed into the continuous improvement processes, both for the consumer and the organisation overall.

The service demonstrated information is provided via the consumer, staff and volunteer handbooks regarding the right of the consumer to make a complaint with the use of an advocate.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the CHSP service is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

**Standard 7**

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

## Findings

Consumers and representatives interviewed advised meals are provided on agreed days and advised times and at the frequency they have chosen. They were complimentary of the respect, care and attention shown to them by both office staff and volunteers. Consumers confirmed volunteers are not rushing when delivering services and will take the time to chat to them and ask how they are going and if they need any help with anything.

The service demonstrated new volunteers and staff are supported with an onboarding program, with roles and responsibilities of each role clearly defined. The service demonstrated staff performance is also reviewed regularly and, as required with action taken promptly if consumers raise any issues regarding staff or volunteers.

The service demonstrated the workforce is competent and the members of the workforce have the skills and knowledge to effectively perform their roles. The service described having a recruitment process for staff and onboarding process for staff and volunteers to ensure that the workforce that is hired is competent to perform their roles.

Staff and volunteers felt supported in their role via frequent communication and can be assisted to access additional training if needed or requested. The service keeps a record of qualifications and training completed by staff.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the CHSP service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

**Standard 8**

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| Organisational governance | | CHSP |
| 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant |
| 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 |
| 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 |
| 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 |
| 8(3)(e) | 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. | Not applicable |

## Findings

Consumers and representatives described how they are engaged to provide feedback, with some saying they provided feedback through past surveys. They advised they are consulted on any proposed menu changes and some consumers also indicated they would give feedback verbally to volunteers or staff.

Staff and volunteer interviews confirmed they felt the service is well run and they demonstrated an understanding of policies and procedures overseeing the delivery of safe, quality care and services. They said communication at the service is good and enables the smooth running of services. They also said they felt they have all the information they need to provide safe care to consumers and the Executive officer has an open-door policy, so they could also ask at any time.

Overall the service was able to demonstrate effective organisation 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.

The service was able to demonstrate effective risk management systems and practices, including but not limited to managing high impact or high prevalence risks associated with the care of consumers, identifying and responding to abuse and neglect of consumers, supporting consumers to live the best life they can, and managing and preventing incidents. The management committee is informed of any emerging risks and trends of incidents, complaints and continuous improvement activities, where identified. Regular planning mechanisms are in place and management committee members advised they have ready access to all information to ensure transparency and informed decision making. The service has policies and procedures that cover these requirements.

Based on the evidence sighted by the Assessment Team, the Quality Standard for the CHSP service is assessed as Compliant as four of the four specific requirements have been assessed as Compliant. Requirement 8(3)(e) has not been assessed as the provider does not provide personal or clinical care services.

1. The preparation of the performance report is in accordance with section 57of the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-2)