Gayndah Meals on Wheels

Performance Report

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| **Address:** | 46 Capper StreetGAYNDAH QLD 4625 |
| **Phone:** | 07 4161 3699 |
| **Commission ID:** | 700662 |
| **Provider name:** | The Central & Upper Burnett District Home for the Aged |
| **Activity type:** | Quality Audit |
| **Activity date:** | 3 June 2022 to 7 June 2022 |
| **Performance report date:** | 22 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:**

* CHSP - Meals, 4-7Z52U5O, 46 Capper Street, GAYNDAH QLD 4625

# Overall assessment of Service/s

|  |  |  |
| --- | --- | --- |
| 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  | Not 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 |
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| Standard 5 Organisation’s service environment | CHSP  | Not Applicable |
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| 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 |
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| 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 |
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| 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 and 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 reported to the Assessment Team during interviews that consumers are treated respectfully and with dignity at all times. Consumers and representatives stated during interviews with the Assessment Team the staff are caring and polite. Staff and volunteers interviewed spoke respectfully about consumers and were able to outline for individual consumers how they treated them with dignity and respect and showed an awareness of the consumer’s individual identity. Documentation evidenced the organisation has a consumer-centred approach to delivering meals.

Consumers and representatives confirmed to the Assessment Team that the workforce understands consumers’ needs and preferences and that their service is delivered in a way makes them feel comfortable and safe. During the Quality Audit the workforce provided examples of how services are delivered to meet the needs and preferences of individuals. Evidence analysed by the Assessment Team showed the workforce has an understanding of the consumer’s life journey and personal circumstances and described how it influenced the day-to-day delivery of their care and services.

Consumers and representatives advised the Assessment Team during interviews while they do not receive a menu from which to choose their preferred meals, the service supports consumers to make their preferences known. When consumers commence with the service, they are asked what and how they would like the service provided to them. Evidence analysed showed MOW Coordinator (MOWC) has recently begun providing copies of the monthly menus to consumers as per the service’s Plan for Continuous Improvement (PCI). Documentation reviewed including consumer files and delivery run sheets evidence consumer involvement in decisions about the meal service provided.

Evidence analysed by the Assessment Team showed the service demonstrated each consumer’s meal preferences are detailed, with documentation including consumer files and run sheets containing information on their likes and dislikes, along with dietary requirements and allergies. Staff and volunteers stated to the Assessment Team they report to Management any risks observed in consumers’ homes, including uneaten meals. Evidence analysed by the Assessment Team included evidence of consumers involvement in decisions about the service provided.

Consumers and representatives stated during interviews with the Assessment Team that they receive written information in a way they can understand, that enables them to make informed choices. This includes invoices, surveys and newsletters. Consumers stated during interviews they contact the service by telephone or will provide information to volunteers if they need to amend their plan. Consumer files evidence communication with consumers and representatives and that all communication is recorded. Staff interviewed by the Assessment Team were able to describe the numerous ways that they provide information to consumers regarding their services which enables them to exercise choice.

Evidence analysed by the Assessment Team showed the service was able to demonstrate each consumer’s privacy is respected and personal information is kept confidential. Management advised the Assessment Team during interviews that consumer information is stored in secure filing cabinets and an electronic database. Evidence analysed showed access to electronic information is limited by role and is password protected. Volunteers described to the Assessment Team how they respect the privacy of consumers, saying they knock on doors or call out before entering homes. Volunteers also stated they also respect the consumers’ right to refuse entry to their home.

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**

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

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

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

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

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| 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.*

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

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

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| 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.*

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| 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 completes an assessment form on commencement that includes information provided by the consumer and representative including dietary needs, preferences, frequency of deliveries and any special delivery instructions. Evidence analysed showed risks identified on sampled assessment forms included vision and hearing impairments and mobility limitations. Evidence analysed by the Assessment Team showed information from the initial assessment is transferred to the delivery run sheet which informs the volunteer workforce and is updated as required. Consumers and representatives confirmed to the Assessment Team they have been involved in these initial meal planning discussions with staff.

Consumers and representatives reported to the Assessment Team their current meal service delivery meets their needs, goals and preferences. Consumers and representatives stated to the Assessment Team changes to the service can be made easily and they feel comfortable communicating with Management and staff. Management described to the Assessment Team during interviews how the meal delivery service is tailored to individual consumer’s needs, goals and preferences. All 16 consumer files analysed by the Assessment Team set out strategies to guide volunteers in how to provide services tailored to the individual needs of consumers and support their functional abilities. The Assessment Team found volunteers understood the processes to follow if consumers do not respond to a scheduled visit.

Consumers and representatives interviewed by the Assessment Team confirmed they participate 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 and staff demonstrated how they work with the consumers and representatives to meet the needs of the consumer. Documentation evidenced consumer and representative involvement in the planning of services.

Evidence analysed by the Assessment Team showed the service plan for each consumer is the assessment form which identifies the consumer, the delivery address and any special instructions in relation to the meal or delivery. Evidence analysed showed all forms are updated as changes are made. Volunteers interviewed by the Assessment Team reported the delivery run sheet provides all the information they require to deliver the appropriate service, according to the consumer’s preference. Evidence analysed by the Assessment Team showed the service also maintains an electronic information management system that records meal service preferences for each consumer.

Evidence analysed by the Assessment Team showed while services are reviewed on an ongoing basis according to consumer needs and preferences, the MOWC undertakes a formal review on an annual basis. Evidence analysed by the Assessment Team showed on an ongoing basis, delivery run sheets are updated when the organisation is informed of any necessary changes, such as cancellation of service or changes to delivery instructions. Documentation analysed by the Assessment Team confirmed regular contact with consumers and representatives and the updating of consumer’s information.

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**

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| 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.*

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| 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.*

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| 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.*

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| 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.*

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| 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 careCHSP 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 the specific requirements have been assessed as Not Applicable.

# STANDARD 4 Services and supports for daily livingCHSP 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 stated the services they receive support their lifestyle needs and staff and volunteers assist them to be as independent as possible, to do the things that are important to them. For the consumers sampled volunteers could explain to the Assessment Team what was important to them and what they liked to do. Evidence analysed by the Assessment Team showed dietary information recorded in consumer files includes consumer’s preferences, allergies and dietary needs. The Assessment Team noted post interviews volunteers were aware of risks associated with the provision of meals and nutritional requirements for consumers.

Consumers and representatives interviewed by the Assessment Team provided examples of how staff and volunteers take the time to talk to them when they are feeling sad or low. Staff and volunteers demonstrated an understanding to the Assessment Team of what is important to the consumer and gave examples of how they have supported the wellbeing of consumers when the consumer has been feeling low.

Consumers and representatives described to the Assessment Team during interviews how the service provides opportunities to do things that are meaningful to them and how they are supported to connect with their community. The Assessment Team noted staff and volunteers demonstrated knowledge of consumers social interests and personal relationships and described how they assist the consumer to maintain these. The Assessment Team noted this information aligned with feedback from consumers and representatives. During interviews with the Assessment Team staff and volunteers provided examples where they modified delivery details for consumers who attend social outings.

Consumers and representatives interviewed by the Assessment Team stated they are satisfied that information about their care and services is shared within the service and with others involved in their care. Management and staff interviewed by the Assessment Team stated they receive information about the consumer and updates on the consumer’s requirements through the run sheet and through delivery volunteers. The Assessment Team observed volunteer drivers providing feedback to kitchen staff following deliveries.

The Assessment Team found while consumers and representatives sampled had not been referred to other organisations, they are aware they can access additional home supports from other organisations. Evidence analysed by the Assessment Team showed Management maintains contact details for organisations that may be useful for consumers. Evidence analysed showed details of these services are in the consumer handbook which is provided to consumers and representatives on entry to the service.

Consumers and representatives interviewed by the Assessment Team stated they are satisfied with the meals provided and that they meet their nutrition needs and preferences. Evidence analysed by the Assessment Team showed meals can be provided either fresh or frozen, or a combination of both, to meet consumer’s needs and preferences and delivered in the quantity the consumer wishes. During interviews with the Assessment Team staff described their process for assessing the dietary needs, allergies and preferences for consumers and how this is communicated to the kitchen staff. Documentation evidenced the service provides an individual and flexible approach to meal delivery. Evidence analysed by the Assessment Team showed this information is available in the run sheets for volunteers and kitchen staff to access.

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 therefore not assessed.

**Assessment of Standard 4 Requirements**

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| 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.*

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

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

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| 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.*

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| 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.*

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

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

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

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

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

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

# STANDARD 5 Organisation’s service environmentCHSP 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 the specific requirements have been assessed as Not Applicable.

# STANDARD 6 Feedback and complaintsCHSP 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

Evidence analysed by the Assessment Team showed consumers and representatives are encouraged and supported to provide feedback and make complaints. The Assessment Team noted while the majority of consumers and representatives sampled expressed satisfaction with the service and had not needed to raise a complaint, all consumers and representatives stated they feel comfortable and safe providing feedback or making a complaint.

Evidence analysed by the Assessment Team showed the service demonstrated that consumers and representatives are made aware of, and have access to, advocates, language services and other methods for raising and resolving complaints. The Assessment Team noted that consumers and representatives sampled either advocate for themselves or have family who advocate on their behalf.

Evidence analysed by the Assessment Team showed the service demonstrated appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. Consumers and representatives interviewed by the Assessment Team who stated they had raised concerns with the service confirmed that management had contacted them to apologise if required and discuss solutions to improve the delivery of their care and services. Evidence analysed by the Assessment Team showed the service demonstrated that feedback and complaints are reviewed and used to improve the quality of care and services.

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

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

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

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| 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.*

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| 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.*

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| Requirement 6(3)(d) | CHSP  | Compliant |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resourcesCHSP 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

The Assessment Team analysed evidence which showed the service demonstrated that the number of, mix of, members of the workforce are enabled to deliver safe and quality care and services. Evidence analysed showed Gayndah MOW has a funded a Coordinator position that overseas day to day operational delivery of meals and deals with consumer queries and concerns.

Consumers and representatives interviewed by the Assessment Team provided feedback that their interactions with staff, are kind, caring and respectful of them as an individual. Volunteer delivery staff interviewed by the Assessment Team were able to provide examples to demonstrate how they treat each consumer respectfully and are aware of their individual preferences and cultural food requirements.

Evidence analysed by the Assessment Team showed 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.

Evidence analysed by the Assessment Team showed the service ensures the workforce is recruited, trained, equipped and supported to deliver the outcomes required by the Standards. Consumers and representatives interviewed by the Assessment Team provided feedback that delivery volunteer and staff knew what they were doing in the organising and delivery of their meals. The Assessment Team interviewed volunteer delivery staff who stated that they access regular face to face training from the service and confirmed that they have received training specific to the roles they are undertaking in the service.

The Assessment Team analysed evidence which showed the service demonstrated that regular assessment, monitoring and review of the performance of each member of the workforce in undertaken. Consumers and representatives interviewed by the Assessment Team provided feedback that they are regularly asked to provide feedback on volunteer delivery staff performance in the delivery of meals and communication with the service.

The Assessment Team interviewed staff and volunteers who stated they are asked to self-reflect on their performance during the year and suggest any improvements or request any additional training they may need. Evidence analysed by the Assessment Team showed the organisation has HR policies and procedures for the assessment, monitoring of workforce performance including a performance management framework to guide management staff.

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

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| 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.*

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

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

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| 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.*

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

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

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| 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

The Assessment Team analysed evidence which showed the service demonstrated that consumers and representatives are engaged in the development, delivery and evaluation of the meal service and are supported in that engagement. During interviews with the Assessment Team consumers and representatives’ statements confirmed the ways that the service seeks their information and input into the care and services consumers receive.

The Assessment Team analysed evidence which showed the organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. Evidence analysed showed the service provides results of audits, quality indicator information, complaints, individual consumer surveys and feedback information to the organisation. The organisation uses this information to oversee the delivery of safe, inclusive and quality care.

#### Information management

Evidence analysed by the Assessment Team showed information about consumers is provided to the workforce on a ‘need to know’ basis to ensure consumer privacy and confidentiality is maintained. The Assessment Team noted the run sheets used for meal delivery includes sufficient detail to enable the workforce to undertake their role safely and effectively. Evidence analysed by the Assessment Team showed consumers and representatives are provided with an information booklet that outlines the meal service and payment options.

#### Continuous improvement

Evidence analysed by the Assessment Team showed while the majority of feedback from consumers and representatives is verbal, the service was able to demonstrate how it documents complaints in a complaint register that shows actions taken to resolve complaints and where appropriate, how these actions inform their PCI.

Financial governance

Evidence analysed by the Assessment Team showed the service has financial governance systems and processes to manage the finances and resources required to deliver a safe and quality meal delivery service. Evidence analysed showed the service’s Administration Officer emails accounts to consumers and representatives on a monthly basis and payments are made in advance. Evidence analysed showed consumers and representatives have the option of paying by bank transfer, cheque, cash or in person. During interviews with the Assessment Team the workforce demonstrated a shared understanding of the service’s cash handling procedures.

Workforce governance, including the assignment of clear responsibilities and accountabilities

Evidence analysed by the Assessment Team showed the workforce is provided with a job description and delivery guidelines on commencement with the service. Evidence analysed showed a job description and role responsibilities are emailed to potential volunteers. Evidence analysed showed delivery guidelines clearly outline the organisation’s expectations of volunteers, including the importance of observing food safety rules.

Regulatory compliance

Evidence analysed by the Assessment Team showed the FM and MOWC receives legislative updates relevant regulatory bodies, monitor changes to aged care legislation, MAC, MOW QLD, the Commission, and the Department of Health, this information is disseminated to the Committee and relevant workforce via face to face, at meetings, emails, newsletters, texts and informal education sessions.

Feedback and complaints

Evidence analysed by the Assessment Team showed while the majority of feedback received from Consumers and representatives is verbal, the service has systems and processes to document this feedback and use it to improve outcomes for consumers.

Evidence analysed by the Assessment Team showed the organisation has a risk management framework, policies and procedures, and an Incident management system (IMS) for identifying high risk consumers who are receiving meal delivery service. During interviews with the Assessment Team the workforce proved it had a shared understanding of the systems and processes for delivering a safe and reliable meal service.

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 therefore was not assessed.

## Assessment of Standard 8 Requirements

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| 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.*

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| 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.*

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| 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.*

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| 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.*

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| 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.