**Performance**

**Report**

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| Name: | Gin Gin Meals on Wheels |
| Commission ID: | 700432 |
| Address: | Gin Gin Hospital, 5 King Street, GIN GIN, Queensland, 4671 |
| Activity type: | Quality Audit |
| Activity date: | on 29 May 2024 |
| Performance report date: | 12 June 2024 |

This performance report **is published** on the Aged Care Quality and Safety Commission’s (the **Commission**) website under the Aged Care Quality and Safety Commission Rules 2018.

# Service included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 8070 Gin Gin Meals on Wheels Association Incorporated  
Service: 24704 Gin Gin Meals on Wheels Association Incorporated - Community and Home Support

**This performance report**

This performance report for Gin Gin Meals on Wheels (**the service**) has been prepared by E Blance, delegate of the Aged Care Quality and Safety Commissioner (Commissioner)[[1]](#footnote-1).

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standards and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies any areas in which improvements must be made to ensure the Quality Standards are complied with.

# Material relied on

The following information has been considered in preparing the performance report:

* the assessment team’s report for the Quality Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the provider’s response to the assessment team’s report received 11 June 2024
* other information known by the Commission

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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

A detailed assessment is provided later in this report for each assessed Standard. An assessment of performance is not provided for Standard 3, Standard 5, Requirement 4(3)(g) and Requirement 8(3)(e) as they are not within scope for this service.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.

# Standard 1

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| Consumer dignity and choice | | CHSP |
| Requirement 1(3)(a) | Each consumer is treated with dignity and respect, with their identity, culture and diversity valued. | Compliant |
| Requirement 1(3)(b) | Care and services are culturally safe | Compliant |
| Requirement 1(3)(c) | Each consumer is supported to exercise choice and independence, including to:   1. make decisions about their own care and the way care and services are delivered; and 2. make decisions about when family, friends, carers or others should be involved in their care; and 3. communicate their decisions; and 4. make connections with others and maintain relationships of choice, including intimate relationships. | Compliant |
| Requirement 1(3)(d) | Each consumer is supported to take risks to enable them to live the best life they can. | Compliant |
| Requirement 1(3)(e) | Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice. | Compliant |
| Requirement 1(3)(f) | Each consumer’s privacy is respected and personal information is kept confidential. | Compliant |

Findings

Consumers are treated with dignity and respect. Documentation included details of the consumer’s identity and preferences, and this is considered by volunteers when delivering meals.

Consumers said the volunteers know what is important to them and accommodated their preferences and needs. Staff receive training in providing customer service. Cultural events such as Easter, Christmas and consumer’s birthdays are celebrated. Documentation included the consumer’s option to share their cultural background, relevant food requirements and information specific to delivery of their meals.

Consumers can make decisions about the meals they receive. The service actively responds to dietary requirements and meal preference changes. Consumers said the delivery of meals enabled them to remain living independently in their home and having social contact with volunteers each day.

Risks are discussed with consumers in relation to types of foods and any relevant health conditions. Documentation included information regarding allergies, modified textures and provision for risk information in line with the consumers’ preferences.

Consumers receive information about the service and regular updates from management. All consumers receive a commencement pack and newsletters. Information is in a large font and easy to read and understand.

Consumers said the service respects their privacy and confidentiality. The service has systems and processes to collect and store consumer information to ensure privacy is maintained. Staff are reminded about the importance to maintain consumers’ confidentiality. Induction training includes sessions on privacy and confidentiality.

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

# Standard 2

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| Ongoing assessment and planning with consumers | | CHSP |
| Requirement 2(3)(a) | Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services. | Compliant |
| Requirement 2(3)(b) | Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes. | Compliant |
| Requirement 2(3)(c) | The organisation demonstrates that assessment and planning:   1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and 2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer. | Compliant |
| Requirement 2(3)(d) | The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided. | Compliant |
| Requirement 2(3)(e) | Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer. | Compliant |

Findings

Consumers said the service meets their needs and preferences and considers their well-being. Documentation demonstrated the My Aged Care assessment is used to gather information, with additional information obtained in initial and ongoing planning. Documentation included the consumer’s preferences, allergies and other relevant information.

Consumers are receiving meals in the way they prefer, including modified textures when needed. Documentation includes emergency contacts and what to do if consumers are not home, or in the event of an emergency. Management consult with consumers to organise delivery times and preferences and all consumers receive an advanced care planning pack when they commence with the service or at their annual review.

The service ensures consumers and other relevant individuals including local health services are involved in the planning and delivery of appropriate meals. Documentation demonstrated this information is detailed on care plans to ensure access to contemporary information.

Management discuss consumer’s needs and preferences, which are documented, with others involved in provision of services and consumers have access to their documentation if requested. Management and the kitchen staff have access to information on the consumer’s daily meal delivery sheets, which is used to ensure meals are made in accordance with individual needs and preferences. Consumers have access to their care plan and can change their needs and preferences as needed.

Consumers communicate with the service when their circumstances or preferences change, and this is reflected in an updated care plan. The service has a formal annual review process. The service will update care planning documentation between these reviews as required when there has been a change of circumstances.

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

# Standard 4

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| Services and supports for daily living | | CHSP |
| Requirement 4(3)(a) | Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life. | Compliant |
| Requirement 4(3)(b) | Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being. | Compliant |
| Requirement 4(3)(c) | Services and supports for daily living assist each consumer to:   1. participate in their community within and outside the organisation’s service environment; and 2. have social and personal relationships; and 3. do the things of interest to them. | Compliant |
| Requirement 4(3)(d) | Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared. | Compliant |
| Requirement 4(3)(e) | Timely and appropriate referrals to individuals, other organisations and providers of other care and services. | Compliant |
| Requirement 4(3)(f) | Where meals are provided, they are varied and of suitable quality and quantity. | Compliant |

Findings

Volunteers assist consumers by delivering meals into the home, opening lids on meals or other assistance as needed. Management said they understand, by providing meals to consumers it supports them to remain independent. Management described that healthy and nutritious meals are important to the consumers health, well-being and quality of life as is the consumer’s opportunity to interact with the volunteers. Consumers said the volunteers know them well and can chat with them when they feel down or have good news to share.

Consumers said the service enhances their emotional and psychological well-being. Consumers said volunteers can recognise when they are not feeling themselves and will stay and have a chat with them. Management said the volunteers know many of the consumers and their families as they are local to the community which helps to make consumers feel comfortable and promotes each consumer to live their best life.

Consumers said the service provides flexibility with their meal delivery and will work with the consumers to ensure meals are delivered in a way they prefer, with some consumers picking up frozen meals from the service due to distance from the town or as a preference for frozen meals. Management confirmed that consumers can change the time of delivery, have meals delivered frozen or pick up frozen meals to accommodate consumers’ social well-being.

Consumers said volunteers have a good understanding of their needs and preferences. The service has systems and processes for information relevant to the delivery of meals. Volunteers have the information needed to make sure the right meals get to the right consumer. The Assessment Team observed communications informing the kitchen of consumers’ needs and preferences, including allergies.

Consumers have been assisted to navigate and understand the My Aged Care system and to access further services. Volunteers inform management of any changes or need for further assistance identified for the consumers and this information is followed up with the consumers and their representatives as needed.

Consumers are satisfied with the quality and quantity of the meals provided. The menu is reviewed by dietitians and nutritionists to ensure meals are appropriate for all consumers’ needs. Documentation included information about consumers’ dietary requirements and food preferences. Consumers said the food is tasty, there is a good variety and the menu is changed each fortnight.

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

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

# Standard 6

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

Findings

Consumers feel comfortable raising concerns with management. Feedback forms are available for use or consumers can raise feedback directly with management or volunteers. Commencement packs include a feedback and complaints form, the service contact details and information regarding the complaints process. Management regularly communicate with consumers by phone and in person and encourage feedback.

The service informs consumers of methods for raising and resolving complaints. Consumers are provided with complaint information on commencement with the service including how to access advocacy services and the consumer’s right to contact the Commission to make a complaint if required. Volunteer information packs includes information regarding internal and external complaint avenues available to consumers.

Consumers expressed confidence in management to address complaints and attempt to resolve any concerns promptly. Management and volunteers demonstrated a shared understanding of processes to follow when a complaint is received. Volunteers provide any feedback to management for consideration and further action.

The service demonstrated a process to review, analyse and trend feedback and complaints data. Feedback, complaints and preferences are documented in the service’s feedback register and improvement strategies are established when required and are reflected in the service’s plan for continuous improvement which is discussed at monthly committee meetings.

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

# Standard 7

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

Findings

The number and skill mix of the workforce including volunteers is planned to meet the service needs of consumers. Consumers are satisfied with the meals received and when and how they are delivered. On-call arrangements are available in the event of unplanned unavailability of the workforce.

Consumers provided positive feedback in relation to workforce interactions and confirmed volunteers and staff are kind, caring and treat consumers well. The service monitors volunteer interactions with consumers to ensure services are delivered in a kind and caring way.

The organisation has policies, procedures and guidelines to ensure the volunteer workforce are competent and have the knowledge and compliance criteria to effectively perform their roles. Position descriptions guide staff and all volunteers are required to complete an induction program and are provided with practical training for their role. Appropriate vetting for employment requirements are conducted. I note the service have actioned improvements in relation to the recording of expiry dates to driver licences.

The service has processes for the recruitment, induction, and onboarding of the workforce, as well as ongoing mandatory training. Mandatory training topics are completed by relevant persons in the workforce.

The service demonstrated systems are in place to monitor and review workforce performance. Performance concerns are managed with the workforce to ensure performance meets the organisation’s expectations.

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

# Standard 8

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| Organisational governance | | CHSP |
| Requirement 8(3)(a) | Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement. | Compliant |
| Requirement 8(3)(b) | The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. | Compliant |
| Requirement 8(3)(c) | Effective organisation wide governance systems relating to the following:   1. information management; 2. continuous improvement; 3. financial governance; 4. workforce governance, including the assignment of clear responsibilities and accountabilities; 5. regulatory compliance; 6. feedback and complaints. | Compliant |
| Requirement 8(3)(d) | Effective risk management systems and practices, including but not limited to the following:   1. managing high impact or high prevalence risks associated with the care of consumers; 2. identifying and responding to abuse and neglect of consumers; 3. supporting consumers to live the best life they can 4. managing and preventing incidents, including the use of an incident management system. | Compliant |

Findings

Consumers said they can provide feedback on service delivery and the service demonstrated the various avenues for consumers to be involved in the evaluation of services.

The governing body monitors the service is compliant with the Quality Standards and ensures it is accountable for the delivery of quality services across the organisation. The Board discuss all aspects of business including financial, quality, workforce, feedback and complaints, incidents and quality improvement.

The organisation has effective governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance and feedback and complaints. I note the service have actioned improvements to maintain effective financial practices.

The organisation has a framework to manage risk and respond to incidents at the service. The service demonstrated the effective management of high impact or high prevalence risks and the identification of abuse and neglect of consumers. Management and volunteers were able to provide examples of these risks and how they are managed within the service. Volunteer induction programs include identification and reporting of abuse and neglect, and examples of what constitutes a reportable incident under the Serious Incident Response Scheme (SIRS). Incidents are recorded in the incident register, actioned and reviewed at Board meetings with a corresponding entry in the service’s plan for continuous improvement where required.

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

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

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