**Performance**

**Report**

**1800 951 822**

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| Name: | Hawkesbury Colo Meals on Wheels Inc |
| Commission ID: | 200588 |
| Address: | 3/36 Riverview Street, NORTH RICHMOND, New South Wales, 2754 |
| Activity type: | Assessment contact (performance assessment) – site |
| Activity date: | on 19 September 2024 |
| Performance report date: | 21 October 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.

# Services included in this assessment

Commonwealth Home Support Programme (**CHSP**) included:  
Provider: 7977 Hawkesbury Colo Meals on Wheels Inc  
Service: 23960 Hawkesbury Colo Meals on Wheels Inc - Community and Home Support

**This performance report**

This performance report has been prepared by G Cherry, 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 services it operates, 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 Assessment contact (performance assessment) – site report was informed by a site assessment, observations at service outlets, review of documents and interviews with staff, consumers/representatives, and others
* Performance Report dated 28 February 2024.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

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| Standard 2 Ongoing assessment and planning with consumers | Not applicable as not all requirements assessed |
| **Standard 7** Human resources | **Not applicable as not all requirements assessed** |

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.

# Other relevant matters:

The service is a small stand-alone provider delivering frozen meals to consumers funded through the Commonwealth Home Support Program. It operates in the Hawkesbury local government area. The service manager is supported by a committee, 3 part-time staff and approximately 60 volunteers.

# 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)(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 |

Findings

Requirement 2(3)(a) - a decision of non-compliance made on 28 February 2024 followed an assessment contact on 9 January 2024 to 10 January 2024. At an assessment contact on 19 September 2024 the provider demonstrated the following improvement actions had been implemented. Consumer files reviewed by the assessment team includes a documented assessment and individual support plan. Assessments were current and detail key risks including mobility/sensory issues, falls risks, allergies, and specific dietary requirements. In addition, each file includes documented environmental risks such as evidence of hording, cleanliness of the environment and geographical risks including flood prone locations. Interviewed staff and volunteers demonstrate a thorough understanding of risks associated with consumers they support, consistent with recorded information in assessment and care planning documents. A sampled consumer expressed satisfaction with volunteers following directives as per their requests.

Requirement 2(3)(b) - a decision of non-compliance made on 28 February 2024 followed an assessment contact on 9 January 2024 to 10 January 2024. At an assessment contact on 19 September 2024 the provider demonstrated the following improvement actions had been implemented. Consumer files reviewed include a current support plan clearly documenting individual needs, goals, and preferences. Management advised development of an individualised support plan as standard procedure for new consumers entering the service. All support plans detail date of required review or earlier as consumer’s needs change, guided by policy documents. Sampled consumers and representatives consider provision of services align with consumer’s needs/preferences. A sampled consumer expressed satisfaction dietary preferences are met, and volunteers adhere to their requests (as noted in documentation).

Requirement 2(3)(d) - a decision of non-compliance made on 28 February 2024 followed an assessment contact on 9 January 2024 to 10 January 2024. At an assessment contact on 19 September 2024 the provider demonstrated the following improvement actions had been implemented. Reviewed files include a current assessment and individualised support plan aligned with information received via consumer/representative interviews. Care planning documents demonstrate consumer or representative review/acceptance, and they acknowledge a copy is available if requested.

# Standard 7

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| Human resources | | CHSP |
| 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

Requirement 7(3)(d) - a decision of non-compliance made on 28 February 2024 followed an assessment contact on 9 January 2024 to 10 January 2024. At an assessment contact on 19 September 2024 the provider demonstrated the following improvement actions had been implemented.

* Manager registration with the Commission’s aged care learning/information platform to access training relating to the Quality Standards and the Serious Incident Response Scheme. They advised training modules to be accessible to staff.
* Provision of information to all volunteers relating to the Quality Standards.
* Enabled access to online training modules (Meals on Wheels NSW) for new staff/volunteer induction processes.
* Management and the governing committee regularly meet with other Meals on Wheels providers to enable networking and learning opportunities regarding the Quality Standards and provider obligations.

Management explained processes to ensure volunteers are trained by accompanying experienced others prior to commencing in the role, plus a process of assessment/competency to ensure awareness of their responsibilities pertaining to the Quality Standards and mandatory reporting. Interviewed staff and volunteers acknowledged this process and demonstrate awareness of procedures to follow in the event of an incident and/or a change to a consumer’s condition/circumstances.

Requirement 7(3)(e) - a decision of non-compliance made on 28 February 2024 followed an assessment contact on 9 January 2024 to 10 January 2024. At an assessment contact on 19 September 2024 the provider demonstrated introduction of a formal annual staff performance/development review. Documents detail all reviews completed in May 2024. Volunteer performance is monitored through consumer feedback and via discussions with Management. The service demonstrates implementation of effective actions to monitor/review workforce performance.

1. The preparation of the performance report is in accordance with section 68Aof the Aged Care Quality and Safety Commission Rules 2018. [↑](#footnote-ref-1)