**Performance**

**Report**

**1800 951 822**

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| Name of service: | Ipswich Meals on Wheels Inc |
| Service address: | 9 South Street IPSWICH QLD 4305 |
| Commission ID: | 700495 |
| Home Service Provider: | Ipswich Meals on Wheels Incorporated |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 18 November 2022 |
| Performance report date: | 21 December 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 Ipswich Meals on Wheels Inc (**the service**) has been prepared by M Balukovska, 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.

# Services included in this assessment

**CHSP:**

* CHSP - Social Support - Group, 4-7Z6S2JD, 9 South Street, IPSWICH QLD 4305
* CHSP - Meals, 4-7Z6S2N1, 9 South Street, IPSWICH QLD 4305

# Material relied on

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

* the assessment team’s report for the Assessment Contact - Desk; the Assessment Contact - Desk report was informed by review of documents and interviews with staff, consumers/representatives and others

# 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 have been assessed |
| **Standard 8** Organisational governance | Not applicable as not all requirements have been assessed |

A detailed assessment is provided later in this report for each assessed Standard.

**Areas for improvement**

The provider is required to actively pursue continuous improvement to remain compliant with the Quality Standards.

# 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)(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

* Demonstrating that assessment and care planning considers consumer risks and informs safe and effective service delivery
* Evidencing assessment and planning processes identify consumers needs, goals and preferences, including advance care planning
* Demonstrating assessment and planning is undertaken in partnership with consumers
* Demonstrating embedded care plan development and review processes

The service undertakes assessment in the form of completing a client assessment form and this is done in conjunction with the consumer’s My Aged Care (MAC) assessment where appropriate. The initial assessment is completed by the Client Services Manager or Branch Managers in consultation with the consumer and their representative where possible. Information gathered includes consumer health and dietary needs, meal preferences, frequency of deliveries and any special delivery instructions to access the property. Where risks have been identified, strategies are documented to guide staff and volunteers in providing service to the consumers.

Consumers/representatives said they participate in the planning and review of the meal delivery service they receive and they can choose what meals they have and how frequently they are delivered. Staff described how they work in partnership with consumers/representatives and other organisations providing care and communicate regularly regarding the changing needs of consumers. Documentation reviewed evidenced consumer/representative involvement in the planning of services.

Consumers report the services they receive, and the frequency of service are explained to them on commencement and when changes occur. The Client Services Manager advised that after a consumer initially starts receiving meals from the service, they are provided with a summary of their meal plan, including the price, quantity, and frequency of meals. Volunteers report the delivery run sheet provides all the information they require to deliver the appropriate service, according to the consumer’s preference. The service also maintains electronic records for each consumer and updates to the delivery run sheet are generated from updates to these electronic records.

Consumers/representatives said they feel comfortable requesting changes to the meal delivery service. Staff advised reviews are undertaken on an ongoing basis and at least every 2 weeks when consumers complete a menu for meal choices and days of delivery. Volunteers said they notify the service verbally and write information on the delivery run sheets, if they notice any changes in the consumers condition, non-response to a meal delivery, or receive feedback from the consumer about changes to their meal delivery service. Delivery run sheets are updated when staff are informed of any necessary changes, such as suspension of service, changes to dietary requirements or changes to delivery instructions. Review of sampled consumer documentation identified that the service puts in notes identifying why meal delivery services have been suspended or cancelled including hospitalisation or if the consumer has gone away for holidays.

# Standard 8

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| Organisational governance | | CHSP |
| 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

* Evidencing organisation wide governance systems are embedded
* 3Evidencing that monitoring and trending of risk-based consumer data is undertaken, including incidents for CHSP consumers.

The service has effective risk management systems and practices to identify, assess and manage risks to the health, safety and well-being of consumers receiving meal delivery services. Incidents are responded to, reported and investigated by the service through the Incident Management System (IMS). Management confirmed they will collate all incidents to allow for the data to be analysed to further inform continuous improvement practices and prevent reoccurrence. Staff and volunteers described the process of reporting incidents involving consumers and understood incident management procedures and practices.

Consumers/representatives said they feel the service supports them to live the best life they can and where potential risks to a consumer’s well-being has been identified, including where a consumer has food allergies/intolerances, this is discussed with the service and strategies are put in place to manage the risks. Consumer specific information is available to kitchen staff and volunteers to ensure the right meal is provided to the right consumer, according to their needs.

Management described the high impact or high prevalence risks associated with the consumers receiving the meal service. Vulnerable consumers are identified including consumers who are socially isolated, have vision and hearing impairments, mobility limitations and cognitive impairment. Changes in consumer wellbeing or identified deterioration is recorded with prompt communication with the consumer representative. Volunteers understand the processes to follow if consumers do not respond to a scheduled visit.

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