**Performance**

**Report**

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| Name: | Jandowae Meals on Wheels |
| Commission ID: | 700527 |
| Address: | 93 High Street, JANDOWAE, Queensland, 4410 |
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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: 8325 Jandowae Meals on Wheels Association Incorporated  
Service: 23866 Jandowae Meals on Wheels Association Incorporated - Community and Home Support

**This performance report**

This performance report for Jandowae Meals on Wheels (**the service**) has been prepared by Jodie Earnshaw, 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.
* other information known to 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.

# 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 and representatives advised consumers are treated with dignity and respect. The workforce spoke respectfully of consumers and of how this is applied in their role on a day-to-day basis.

The workforce described the individual identity, needs and preferences of consumers.

The service has provided education to the workforce, including on topics such as code of conduct and has policies and processes supporting and guiding diversity and inclusion.

Consumers and representatives reported the workforce understands consumers’ needs and preferences and advised meals are delivered in a way that makes consumers feel safe, and delivery alternatives can be provided to meet consumers’ wishes.

The workforce described how services are delivered to meet individual consumer needs and preferences to ensure the provision of inclusive services.

Documentation demonstrated the recording of individual consumer needs and preferences. Consumers and representatives said consumers are supported to make informed choices about the meal services they receive and on when and how others are involved.

The service demonstrated consumers are supported in taking risks and making choices about the meals and delivery service. The workforce was able to describe how consumers are supported to take informed risks and how services are provided in line with consumer preference.

Consumers and representatives said information is provided in a way that is easy to understand, current and supports the making of informed choices. Consumers and representatives said the service has informed them on how personal information is collected and used and expressed confidence in the organisation protecting their privacy and confidentiality.

# 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 and representatives expressed satisfaction in consumers receiving meal services that meet the consumers' needs, and they are involved in assessment and planning processes.

Documentation showed consumers participate in assessment and planning processes, including the involvement of others as required.

Consumer service plan documentation demonstrated that consumer information informs a safe and effective meal delivery service.

Staff and volunteers demonstrated an understanding of assessment and planning processes and provided examples of how they monitor changes in consumer health and well-being and the emergency or no response processes available to them for consumers.

The service demonstrated, and consumers reported others are involved in the assessment and planning of consumer meal services as the consumer may choose.

The workforce advised they have access to and are guided by a delivery sheet which provides the information required to deliver the appropriate service, according to the consumer’s preference and meal requirements.

The service demonstrated processes are in place to ensure consumer service plans are regularly reviewed and meet the consumer’s current needs including when changes in the consumer’s health condition or personal preference occur.

# 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 |
| Requirement 4(3)(g) | Where equipment is provided, it is safe, suitable, clean and well maintained. | Compliant |

Findings

Consumers and representatives said the service is flexible and accommodating of consumer preferences and needs.

The workforce described how consumers are supported to maintain their independence and how the meal delivery service is tailored to support the individual consumers' needs and preferences.

Consumer service plan documentation includes information relating to meal service which is informed by assessment of consumers’ needs and preferences.

Consumers and representatives advised consumers are provided services that support consumers’ emotional and psychological well-being. The workforce demonstrated an understanding of what is important to individual consumers and provided examples of how the well-being of consumers is supported and monitored.

Consumers provided positive feedback about the workforce and the meal services delivered to meet their needs, goals and preferences.

Consumer service plan documentation evidenced consumers’ preferences in relation to meal service delivery and is incorporated into their service and delivery documentation.

Individual consumer needs and preferences are documented to guide the workforce in supporting consumers to maintain their interests and social relationships by having flexibility in meal delivery services. The service shares information with consumers on local community groups and events, such as the local men’s shed group.

The service has processes in place to ensure information about the consumer’s needs and preferences are communicated with others as appropriate. Staff and volunteers advised, and documentation showed that detailed, up-to-date consumer information is available via the electronic care system, kitchen labelling systems and delivery documentation.

Whilst the service does not routinely undertake referrals to other organisations, the service supports consumer access to additional services to supplement supports and services for daily living. The consumer’s handbook provided to consumers upon commencement with the service provides information about organisations and local contacts for the community, hospital, community nursing, medical officers, and information for My Aged Care.

Consumers and representatives provided positive feedback and advised they are satisfied with the quality, quantity and variety of meals provided by the service. Consumer documentation included special dietary requirements, and meal options as offered from a set menu of hot and cold options, soups, desserts, and beverage choices.

The service advised consumers are provided meals from a limited menu, however, the kitchen where meals are sourced, as part of continuous improvement is developing an expanded menu with additional alternative meal choices and options.

# 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 and representatives described avenues available to them to raise a complaint or to provide feedback and said they feel comfortable and encouraged, by the service to do so.

The service demonstrated there are various opportunities for consumers to provide feedback and raise a complaint. On the commencement of services, the service provides an information pack to consumers which includes information about how to provide feedback, raise complaints and how to access external agencies to support them with language services, and advocacy services.

The service has a feedback and complaints policy that guides the workforce on how to encourage and support consumers and representatives to provide feedback.

The service maintains feedback and complaints registers and demonstrated appropriate action is taken in response to feedback. Consumers and representatives expressed satisfaction with actions taken by the service in response to feedback.

The service demonstrated feedback and complaints are reviewed and used to improve the quality of services provided to consumers. Consumers described how services have improved after the provision of feedback.

# 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

Consumers and representatives stated consumers receive quality services, from a workforce who are respectful, kind, reliable and knowledgeable. Staff and volunteers said they have sufficient time to deliver quality services to consumers.

The service has processes and systems in place to ensure that staff and volunteers, including the commercial kitchen staff are competent and have the qualifications and knowledge to effectively prepare and deliver meals. The service has workforce management processes, including workforce/volunteer onboarding, to ensure there is a sufficient and competent workforce to deliver safe and quality services to consumers.

The service ensures the workforce is appropriately qualified and staff and volunteers are supported through ongoing training. The workforce is competent and were able to demonstrate the knowledge to effectively perform their roles and consumers expressed confidence in staff competency.

Whilst formal systems are not in place to regularly assess, monitor and review staff performance and role requirements; the workforce advised ongoing assessment of their duties, responsibilities and performance is monitored by the service.

Feedback from consumers, representatives and staff inform performance management requirements where there is an identified need for improvement.

# 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

The service demonstrated how consumer feedback is sought, and how this feedback informs the design and delivery of services. Consumers said they have the opportunity to provide feedback on services and expressed satisfaction with the quality of the services provided.

The organisation demonstrated consumers are engaged in the development, delivery and evaluation of services.

The service has an organisation-wide governance system and processes that serve as the foundation for the management committee’s responsibility and commitment to a culture of safe, inclusive and quality meal services and delivery.

The management team and committee meet regularly to review the service’s performance and the safety and quality of meals and delivery service. The service has organisational policies available to staff and volunteers to inform and guide service provision.

The service has effective organisation-wide governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance, feedback, and complaints.

Continuous improvements are identified through various mechanisms including feedback and complaints received.

Financial audits are conducted annually by a qualified practitioner. Committee members and volunteers have clear job descriptions and demonstrated an understanding of their roles, responsibilities, and accountabilities. The organisation ensures compliance through subscriptions and regulatory updates through the Queensland Meals on Wheels office.

The organisation has a risk management framework and policies and procedures to guide volunteers and management practices in identifying and responding to risk and incidents. Consumer and volunteer feedback, suggestions and incidents are discussed at a range of levels to inform improvement initiatives.

Management and the workforce were able to describe, and the incident management system demonstrated, how incidents are managed and documented and how the service identifies, responds to and reports incidents.

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)