**Performance**

**Report**

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| Name: | Mackay Meals on Wheels |
| Commission ID: | 700355 |
| Address: | 428 Shakespeare Street, MACKAY, Queensland, 4740 |
| Activity type: | Quality Audit |
| Activity date: | on 10 July 2024 |
| Performance report date: | 29 July 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: 8537 Mackay Meals on Wheels Association Incorporated  
Service: 25345 Mackay Meals on Wheels Association Incorporated - Community and Home Support

**This performance report**

This performance report for Mackay Meals on Wheels (**the service**) has been prepared by S Turner, 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.

# 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.

# Other relevant matters:

Mackay Meals on Wheels provides a meal delivery service funded under the Commonwealth Home Support programme (CHSP). The workforce consists of paid staff and approximately 90 volunteers.

The Quality Audit conducted 10 July 2024 assessed the quality of services provided against the

Aged Care Quality Standards. Standard 3 and Standard 5 were not included in the assessment.

as they do not apply to CHSP services that deliver meals at home.

# 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 said staff and volunteers are kind, respectful and always treat them with dignity. Consumers said their cultural preferences were considered and staff knew what was important to them for their meal choices. Staff spoke respectfully about the consumers and knew how important it was that consumers’ choices were respected.

Management provided evidence of the intake process and how consumer rights and dignity are respected when gathering information about the consumer. Consumer information was held in an electronic care management system and staff reported being able to access this information. Care documentation included the consumers’ cultural background and relevant food requirements. Individual dietary preferences, including those relating to a consumer’s religious practices were reflected accurately in in the electronic care management system and on the individual meal preparation labels.

Consumers were supported to make choices and maintain independence and said they have a choice about the meals delivered to them. Requests for changes were acted on promptly. Volunteers were able to explain the process they follow to ensure the consumers’ requests were recorded and implemented using the daily run sheet and through communication with office staff. Documentation reflected consumer choices and preferences relating to food preferences and delivery instructions.

The service provided consumers with details on how to reheat meals and acknowledged it is the consumer’s choice how and when they eat their meals. Volunteers said they encourage consumers to eat the hot meal as soon as possible and offer to refrigerate fresh and frozen meals. Consumers said they feel comfortable taking risks and that the meal delivery enables them to live the life they want and live in their own home. Consumers reported eating their meals when it was convenient for them with some choosing to eat the main meal in the evening.

Consumers and representatives said information provided is easy to understand and is delivered in a timely manner. The monthly menu provides up to date information on meal choices and other relevant information about the service such as upcoming public holidays. Management said information in the form of a guide is provided to consumers when they join the service and it was found to include information relation to the meal delivery process, care planning, complaints and advocacy, advance health directives and the Charter of Aged Care Rights.

Consumers said their privacy and confidentiality were maintained and respected by staff. Information about how consumers’ personal information is collected and used is included in the guide. Staff had been trained in privacy and confidentiality and were able to describe how personal and sensitive information was managed by the service. Management said toolbox meetings were used to remind staff of their responsibilities in relation to privacy and confidentiality.

For the reasons detailed, I am satisfied Standard 1 is 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 were satisfied with the quality of the service they received and confirmed the service was aware of their dietary needs and preferences. Consumers said they were involved in their meal planning and could involve others; an example was brought forward of how a consumer’s meal plan was adjusted in accordance with a dietitian’s recommendations.

Management said the involvement of consumers and other relevant individuals in the planning and delivery of care and services is a priority for the service. Care documentation reviewed demonstrates the planning process is tailored to consumers’ current needs, goals, and preferences.

The service takes the initiative to discuss consumer preferences such as menu choices or delivery days with the consumer during the initial assessment, on an on-going basis, and when there is a significant change in their condition. Consumer records confirmed the information provided to consumers in their information pack is signed, returned, and kept on file. This includes information about their current dietary requirements, likes and dislikes, allergies, modified meals, diagnosis of medical conditions (if disclosed by the consumer), and preferred delivery days.

The workforce stays up to date with the consumer's needs and preferences through various communication channels, such as telephone, a hard copy communication book, a client feedback form and email. Any changes are documented in the electronic care management system. Staff are encouraged to inform management in case of any concerns with service delivery or changes in the consumer's condition.

Management said delivery staff have been trained to build positive relationships with the consumers and to raise any concerns or incidents with the client coordinator or the service manager to follow up. Documentation demonstrated changes to consumer needs and preferences are identified and actioned in a timely manner.

For the reasons detailed, I am satisfied Standard 2 is 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

Consumers were satisfied with the quality and quantity of the meals provided and said the menu choices changed every month and there is a wide selection to choose from. Consumers and representatives said the meals are delivered as per their personal instructions. They said staff were helpful and respectful when assisting them to open lids and access their meal when requested. Staff described how they use the delivery run sheet to get the information about individual consumer delivery instructions and if any assistance is required to support the consumer’s independence. Management said they understood how the provision of meals supports consumers to remain independent in their own homes.

Consumers and representatives said they look forward to the social interaction with the volunteers and they are friendly and easy to communicate with. Staff said they can recognise when a consumer is not feeling themselves and will chat with them to make them feel better and see if there is anything else they need. All volunteers said they record this on the run sheet and escalate this information as required.

Management said volunteers provide information about consumers through the daily run sheets or via a telephone call; and this is followed up with other services as needed. Consumers and representatives said the service had assisted them to gain information about other services such as cleaning and personal care and provided examples of how this had occurred.

The service provides consumers with flexibility if they are requiring changes due to their social or family commitments. Management confirmed consumers have the ability to make changes to their meal delivery and can choose to get frozen meals or alternative temporary delivery arrangements if they will not be home. Consumers said the service provides flexibility with the meal delivery and works with the consumer to ensure meals are delivered in the way they prefer. One consumer provided examples of how they had requested temporary meal deliveries to an alternative address and said this was accommodated.

Volunteers said they have sufficient information about consumers to deliver the meals which have been chosen by them. The volunteers described the process of checking the meals against the daily run sheet to ensure they have the right meal and delivery instructions.

For the reasons detailed, I am satisfied Standard 4 is 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

The service provided consumers with written information on entry to the service that included the Charter of Aged Care Rights, complaints and feedback processes, advocacy services and contact details for Carers Queensland, and other support organisations.

The service encouraged and supported consumers to provide feedback about the services provided. Consumers can provide feedback through various methods including by telephoning the service, emailing, giving feedback directly to the delivery staff who record the feedback on the run sheet and when necessary, escalate by telephoning the office. Delivery staff have access to meal satisfaction survey forms, so that consumers can write down their concerns and provide feedback to the service in that format. Consumers said they feel comfortable raising feedback with the service.

Management explained the procedure for receiving and responding to complaints and this included an open disclosure process. They said when a complaint is received a staff member contacts the complainant and seeks to resolve the situation promptly. Meeting minutes demonstrated committee members discuss feedback from consumers and that follow up directly occurs with the consumer. Management said additional staff training relating to consumer feedback was included as an initiative in the plan for continuous improvement and this was confirmed. A consumer and a representative brought forward examples of a complaint they had made, and both said the service had resolved their concerns and they were satisfied with the outcome.

For the reasons detailed, I am satisfied Standard 6 is 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

Consumers said staff and volunteers are kind, caring and respectful and expressed satisfaction with the service’s ability to meets their requests and preferences relating to service delivery. Volunteers spoke of consumers in a kind, caring and respectful way and demonstrated a sound knowledge of consumers’ individual needs and preferences. Consumers said volunteers always arrive when expected and are familiar with their needs; volunteers said they are able to complete their deliveries in the allotted time frame.

Staff said volunteers advise their availability on induction or when circumstances change, and a set roster is in place. Volunteers said they advise the service in advance if they are unable to attend on their rostered day. Staff explained how they will fill a gap in the roster with another volunteer or paid staff; they advised committee members can also backfill if necessary.

The service is managed by paid staff who also deliver meals to consumers when required. Management said all volunteers are required to complete an induction program and several buddy shifts with experienced volunteers who provide practical training for the role. The committee and volunteers confirmed they have completed induction training that provided them with the general knowledge required to perform their roles. Volunteers said they had been provided access to the online training modules provided by the industry peak body and documentation confirmed training was up to date.

Management said and documentation confirmed staff and volunteer records consist of national police checks, driver’s licence records, car insurance details and vaccination status. Volunteers sign an attendance sheet each day with the notation that they have a current driver’s licence and the vehicle they are driving is registered.

The organisation had effective systems to monitor and review performance and capabilities of the paid employees and volunteers. Including access to the industry peak body’s human resource department. Management said staff performance is monitored through observations, peer reports and consumer and representative feedback. Any issues in performance are addressed immediately by management and trigger a performance review. Where issues are identified with the performance of volunteers, management engage with the committee to decide on a suitable outcome. Management said and documentation evidenced, volunteers’ performance is reviewed regularly however a formal appraisal is not conducted or recorded unless there are performance concerns.

For the reasons detailed, I am satisfied Standard 7 is 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 were engaged in the development, delivery and evaluation of services and were supported to provide feedback to management and committee members via compliments, concerns and suggestions. Consumers said they were comfortable contacting the service to provide feedback or to raise concerns with volunteers verbally when they visited. Volunteers stated the service is responsive to consumer feedback in relation to meals and described how delivery schedules are managed to ensure consumers’ needs and preferences are met.

The service is a member of an industry peak body and follows the policies and procedures of that organisation with reporting responsibilities to them.

Access to policies and procedures is available to staff, committee members and volunteers. The committee meets regularly to discuss service planning and any feedback, complaints or incidents that may have occurred. Management and committee members said they provide reports and documents to the industry peak body, and this includes the CHSP financial declaration, audits and Council inspections.

Effective organisational governance systems are in place in relation to information management, continuous improvement, financial governance, workforce management, regulatory compliance and feedback and complaints. For example:

* Staff and volunteers were satisfied with the information they had to support them to undertake their roles safely and effectively and information provided to consumers was relevant, accurate and timely.
* The committee members have oversight of the service’s income and expenditure, and this is reviewed regularly and discussed at committee meetings and the organisation has processes established to ensure it complies with its obligations as a provider of CHSP services.
* Committee members receive legislative updates from the industry peak body and the Commission, and the organisation has established processes to ensure it complies with its responsibilities for example guidelines relating to police certificates.

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. An incident management process is in place and incident forms are available for consumers, representatives, or volunteers to complete should an incident occur during a delivery service. Staff and volunteers demonstrated an understanding of their responsibilities in relation to incident management.

For the reasons detailed, I am satisfied Standard 8 is 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)