**Performance**

**Report**

**1800 951 822**

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| Name of service: | Maltese Meals and Community Service - CHELTENHAM |
| Service address: | Cheltenham Community Centre, 62 Stroud Street North CHELTENHAM SA 5014 |
| Commission ID: | 600176 |
| Home Service Provider: | Maltese Aged Care Association (SA) Incorporated |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 5 December 2022 |
| Performance report date: | 06 January 2023 |

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 Maltese Meals and Community Service - CHELTENHAM (**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:**

* Care Relationships and Carer Support, 24850, Cheltenham Community Centre, 62 Stroud Street North, CHELTENHAM SA 5014
* Community and Home Support, 24849, Cheltenham Community Centre, 62 Stroud Street North, CHELTENHAM SA 5014

# 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

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 2

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| Ongoing assessment and planning with consumers | | CHSP |
| 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

* Evidencing care and services are generally reviewed when a change or incident occurs.

When consumer circumstances change or incidents impact on the needs, goals or preferences of consumers these are recorded in the consumer’s electronic file. The system can send an alert to management for review.

While the service has 36 outstanding reviews due, management have a plan to complete these by January 2023 and consumers have been contacted to arrange assessment dates. The service could evidence timely actions following incidents

# Standard 8

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| Organisational governance | | CHSP |
| 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 |

Findings

* Evidencing improvements in information management and regulatory compliance in relation to brokerage service.

In relation to information management:

* The service has consolidated consumers’ care and service information with the introduction of an electronic software program. The program, ‘Maisy’ can be accessed by relevant staff. Kitchen and meal delivery volunteers can view basic consumer information.
* The service is maintaining communication with consumers, including those due for review and following consumers’ changes/incidents that may occur.

In relation to regulatory compliance:

* Management provided 2 annual brokerage agreements with 2 services providing taxi/transport and domestic care (cleaning services).
* The agreements outline service expectations and responsibilities which include brokered staff are to be ‘appropriately qualified and trained…’ screened for police clearance every 3 years, fully vaccinated and insured.
* Information evidenced provision of annual certificates of currency for service registrations, public liability and professional indemnity. The transport company evidenced current vehicle registrations.

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)