**Performance**

**Report**

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| Name: | Meals on Wheels Brisbane South Incorporated |
| Commission ID: | 701103 |
| Address: | 66 Queen Street, CLEVELAND, Queensland, 4163 |
| Activity type: | Quality Audit |
| Activity date: | 28 May 2024 to 29 May 2024 |
| Performance report date: | 20 June 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: 10220 Meals on Wheels Brisbane South Incorporated  
Service: 28144 Meals on Wheels Brisbane South Incorporated - Community and Home Support

**This performance report**

This performance report for Meals on Wheels Brisbane South Incorporated (**the service**) has been prepared by E Blance, 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 outlets, review of documents and interviews with staff, consumers/representatives and others
* other information known by 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. An assessment is not provided for, Standard 3, Requirement 4(3)(g), Standard 5 and Requirement 8(3)(e) as they are not within scope for this service.

# 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 felt respected and valued by the service’s workforce. The service ensures recognition of significant cultural events throughout the year for consumers including birthdays. The workforce described how they take the time to get to know consumers to support respectful relationships.

Consumers said services were delivered in a way that made them feel safe and respected. Services were delivered to meet the preferences of consumers, and to ensure that the service operated in an inclusive manner. The workforce provided the Assessment team with examples of delivering services that were safe including for consumers with physical and cognitive impairment. Information in relation to consumers’ backgrounds and cultural preferences was accessible by the workforce including for consumers with preferences for the gender of the workforce delivering meals.

Consumers felt supported to make decisions about the meal delivery service they receive and that the workforce were flexible regarding delivery time and changes. The workforce evidenced knowledge, awareness and understanding of consumers’ choices and preferences and could describe how each consumer was supported to make informed decisions including for consumers with physical and cognitive impairments. The workforce had access to consumer’s decisions for communication to be directed to their next of kin.

The Assessment team reported there were currently no consumers actively taking risks, however the service has systems and procedures for managing dignity of risk including that all consumers sign a duty of care policy and procedure when they commence receiving services. Where concerns about a consumer’s ability to make informed decisions about their meal choices, the service may seek confirmation from a family member or representative, or when necessary, request advice from a qualified health professional.

Consumers receive information from the service in a timely manner which is easy to understand. Consumers’ invoices and menus are delivered by the volunteers, unless otherwise arranged. Invoices use larger print and clear itemisation that is easy to understand. Volunteers were able to explain the different methods used to communicate with consumers that have physical or cognitive impairment.

The workforce were able to demonstrate the importance of respecting consumers privacy. Consumer information was protected and kept confidential during meal delivery. Information about consumer privacy is provided in a volunteer handbook to inform the workforce. Information about consumers is returned to the service following volunteer deliveries.

Based on the information summarised above, I find this Standard 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 the service delivers safe and nutritious meals with consideration to consumers individual risks, needs and preferences. The service’s intake and assessment process identifies consumer’s risks, health conditions and preferences for the information of the workforce. Meal delivery sheets include information on individual consumers’ requirements such as delivery before a specific time or to check the freezer to ensure meals have been consumed.

Consumers and representatives were satisfied the service meets the current needs and preferences of consumers. Documentation evidenced how the service has supported consumers current needs including for example for weight loss and other specific dietary requirements.

Consumers were involved in the planning of their meal services and said they can choose to have their representative participate in planning when they choose. Planning includes what meals and food items they prefer, when and where meals will be delivered and preferred payment methods. Documentation identified contact details for representatives and instructions on when to contact representatives regarding orders or if the service has concerns regarding a consumer’s condition.

Individual requirements for each consumer was identified on the initial intake form including the dietary needs, delivery address, and any special instructions in relation to the meal or delivery. Information including dietary requirements, meal delivery sheets and address labels are used to ensure the correct meals are packaged and delivered to meet the consumer’s requirements. Consumers and representatives said they do not have or require a copy of their care documentation however have access to menus and order forms to complete weekly orders. Copies of consumer’s meal orders are provided on request and delivered to the consumer by volunteers.

An annual review of consumer needs, preferences and contact information is completed. Each service outlet is responsible for completing reviews including a customer satisfaction survey, updating the electronic system and adding data to a monitoring document. Consumers and representatives said the workforce frequently contact consumers to ensure their changing needs are met especially after discharge from hospital. The service provided the Assessment team with continuous improvement strategies in relation to the identification of allergies for a consumer which was not documented. No impact was reported to the consumer.

Based on the information summarised above, I find this Standard 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 feel the meal service received, supported their quality of life and enabled them to remain independent at home. The workforce demonstrated how dietary preferences, needs and meal delivery preferences are known and respected. Documentation including meal plans, menus, packing sheets, and meal delivery sheets, identified consumers’ individual needs and preferences.

Consumers and representatives said the workforce brighten the consumer’s day and provide reassurance when they may be feeling low. The workforce detailed interactions with consumers during phone calls and meal delivery, identifying signs of low mood and reporting any well-being concerns to service co-ordinators. Escalation processes in relation to consumer’s emotional well-being is available to the workforce.

Consumers and representatives said the service is supportive and flexible when they need to adjust delivery times or days to enable consumers to attend appointments, have visitors, pursue interests and maintain other social connections of meaning to them. The service has a flexible service delivery model to enable consumers to continue activities, interests and social connections in the broader community. The service shares information about services and supports for daily living with consumers through newsletters, social media, notices, and telephone calls.

Consumers and representatives were satisfied that the workforce knew consumers’ needs and preferences, are aware when changes are requested, and that consumers receive the meals and drinks they ordered. Information gathered is shared with consumer consent as appropriate internally, and with others responsible for meal provision and delivery.

Documentation including meal delivery sheets demonstrated current health issues that impact on meal services, dietary information and needs, allergies, sensitivities, and delivery information for each consumer. Administration officers receive the information required to update packing sheets and meal delivery sheets.

Consumers were assisted to access alternative services through information and referrals through My Aged Care. Any concerns or changes in a consumer's health and well- being observed or reported is discussed with the consumer and assistance is provided with access to My Aged Care and the consumer’s representative may be contacted.

Consumers and representatives expressed their satisfaction with the quality, variety and quantity of meals provided for consumers. The service provides consumers with a variety of choices for main meal, including vegetarian, salad, sandwiches, gluten free options and lactose free options. Delivery procedures in place ensure meals reach consumers in a timely manner and remain fresh upon arrival.

Requirement 4(3)(g) was not assessed by the Assessment team.

Based on the information summarised above, I find this Standard 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

Consumers were encouraged and supported to provide feedback and make complaints. Volunteers supported consumers and representatives to provide feedback and complaints, consistent with policies and procedures. Consumers’ preferred method of providing feedback to the service is over the telephone or direct to volunteers. Consumers complete an annual survey as part of the review process to identify their level of satisfaction with the service.

Consumers were provided with information on commencement with the service regarding external supports available for making complaints and advocacy services. The Client and Carers Guide includes information on external translation and advocacy services and contact information for the Commission. Consumer documentation included a copy of the Charter of Aged Care Rights signed by consumers.

Consumers and representatives said improvements occur as a result of their feedback and complaints. The service maintains a record of feedback and complaints for each outlet. Management analyse survey data from each outlet to identify areas for improvement. Areas for improvement are reported to the Board and added to the business improvement plan.

Based on the information summarised above, I find this Standard 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

The workforce is planned to enable the delivery of meals to consumers. Contingency plans were in place to replace the workforce when required with rostering being reviewed regularly to ensure the workforce allocations support the provision of meal preparation and delivery. Consumers said their meals are delivered on time each day and that if there is a change in schedule then the service will contact them by phone.

All consumers said that the workforce are kind, caring and respectful of each consumer’s identity, diversity, preferences and needs. The workforce demonstrated respect for consumers, whilst acknowledging each consumers individual needs and preferences.

The workforce was competent, and members of the workforce had qualifications to perform their role effectively. The workforce had the necessary skills and knowledge to perform their roles with support from management. All consumers said the workforce have the knowledge and skills to perform their roles effectively to meet their needs. Appropriate vetting processes for qualifications and police clearances are undertaken. Position descriptions establish the roles, responsibilities, and competencies required of various workforce members.

The service has processes for the recruitment, induction, and onboarding of the workforce. The service provides education for the workforce, including education about key elements of the Quality Standards, and the Serious Incident Response Scheme (SIRS). The workforce felt confident that the service prepares them well for their roles and provides all the ongoing support they require to provide a good service for consumers. Mandatory training is completed by the workforce with additional training as identified through feedback and annual review processes.

The service has systems in place to regularly assess, monitor, and review the workforce’s performance. The workforce confirmed how they are regularly engaged in their professional development including opportunities to request specific training relevant to their role.

Based on the information summarised above, I find this Standard 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 and representatives said they are confident in the way the service is run and feel engaged in the development, delivery, and evaluation of meal services. Consumers are supported to be engaged in the service through consumer feedback, surveys, and daily contact with the workforce.

The governing body promotes a culture of safe, inclusive, and quality services. The governing body monitors compliance with the Quality Standards, and ensures it is accountable for the delivery of services across the organisation. A leadership structure for the accountability for quality meals and service delivery reports monthly to the Board on all aspects of the service. The management team supports the governing body to ensure the service’s compliance with the Quality Standards through ongoing monitoring of risks, feedback, and service delivery outputs.

The organisation has an appropriate and effective governance system in place relating to information management, continuous improvement, financial governance, workforce governance, feedback and complaints, and regulatory compliance.

The organisation has a risk management system supporting the workforce and management in identifying and responding to risk. The organisation has policy and procedures as outlined in their incident investigation guide and workplace health and safety policy. Incidents are recorded in an incident register, investigated and seek outcomes to identify any improvement actions. The service has policies and procedures in relation to incident reporting which capture types of incidents to report under the SIRS as well as for high impact and high prevalence risks associated with consumers who have been identified as being at risk.

Requirement 8(3)(e) was not assessed by the Assessment team.

Based on the information summarised above, I find this Standard 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)