**Performance**

**Report**

**1800 951 822**

Agedcarequality.gov.au

|  |  |
| --- | --- |
| Name of service: | Mt Gravatt Meals on Wheels Service |
| Service address: | 469 Broadwater Road MANSFIELD QLD 4122 |
| Commission ID: | 700514 |
| Home Service Provider: | Mt Gravatt Meals on Wheels Service Incorporated |
| Activity type: | Assessment Contact - Desk |
| Activity date: | 29 June 2023 |
| Performance report date: | 9 August 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 Mt Gravatt Meals on Wheels Service (**the service**) has been prepared by G. McNamara, 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:

• Meals, 4-7ZNLK44, 469 Broadwater Road, MANSFIELD QLD 4122

# 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 other information, and interviews with management and the service coordinator.

# Assessment summary for Commonwealth Home Support Programme (CHSP)

|  |  |
| --- | --- |
| Standard 6 Feedback and complaints | 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 6

|  |  |  |
| --- | --- | --- |
| Feedback and complaints | | CHSP |
| 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 |

Findings

Based on the information summarised below, I am satisfied that the service could demonstrate that all consumers have access to advocates, language services and other methods for raising and resolving complaints.

Management said since the Assessment Contact undertaken on 19 December 2022, the service developed an A4 coloured fact sheet that included important information for consumers. Management said the fact sheet was distributed in person to all consumers during January 2023 by volunteers delivering meals.

The fact sheet was reviewed, and was seen to include the following information:

* Contact phone numbers for the following advocacy services: Aged and Disability Advocacy Inc, National Aged Care Advocacy Program, the Aged Care Quality and Safety Commission, Queensland Advocacy Inc and the NDIS Quality and Safeguards Commission.
* Contact phone numbers for the Translating and Interpreting Service, Auslan Connection, National Relay Service and My Aged Care (for large print and braille documents). The fact sheet also provided examples of when consumers might need a translation service.
* Regarding Privacy, Complaints and Feedback, the contact phone number and address for the Aged Care Quality and Safety Commission was included. The fact sheet encouraged consumers and their representatives to contact the service if they had any complaints or feedback and gave the option for an external complaints mechanism.

The Service Coordinator confirmed the fact sheets were distributed to each consumer through their meal deliveries over several delivery days in January 2023. The Service Coordinator provided evidence of an email dated 6 January 2023 from the Compliance Officer requesting her to do this. The email specifically requested the Service Coordinator to provide the fact sheet to existing consumers.

# Standard 8

|  |  |  |
| --- | --- | --- |
| 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

Based on the information summarised below, I am satisfied that the service could demonstrate it has implemented an effective risk management system incorporating serious incident reporting.

The service has implemented the Serious Incident Reporting Scheme (SIRS) into their existing incident management system and have trained staff and volunteers on the SIRS. Additionally, an information fact sheet was provided to all consumers earlier this year.

Management said emails have been sent to all staff providing details of the new reporting requirements. The information sheets were reviewed and were seen to be detailed and clear and easy to understand. For example:

* On 21 October 2022 an introductory email was sent to all staff providing clarification on how the SIRS will apply to the Meals on Wheels service. The email included forward notice that a policy update and process documents regarding the SIRS would be developed and distributed when the SIRS commences. The email provided examples of what is and what is not a reportable incident, and also provided a link to fact sheets on the ACQSC website for further reading.
* In December 2022 the revised Incident Management Policy was approved by the Board. The policy outlined the roles and responsibilities of all staff including volunteers regarding incident handling. It included a procedure on assessing, acting upon and reporting incidents including serious incidents.
* On 20 March 2023 an email was sent to all staff. The email was reviewed and included the updated Incident Management Policy, several fact sheets for staff outlining the procedures for responding to incidents and how to report serious incidents, an information sheet for consumers and an information sheet for volunteers. The email instructed staff to familiarise themselves with the updated policy and procedures and to print off the relevant fact sheets and provide them to consumers and volunteers. The email also reinforced the importance of recording incidents in the Incident Management System (IMS) so they can identify trends and look for improvements.

The service’s IMS was reviewed and was seen to have SIRS incorporated into its spreadsheet.

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