Sandgate Meals on Wheels

Performance Report

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| **Address:** | 149 Rainbow Street SANDGATE QLD 4017 |
| **Phone:** | 07 3269 2073 |
| **Commission ID:** | 700656 |
| **Provider name:** | Sandgate and District Meals on Wheels Incorporated |
| **Activity type:** | Quality Audit |
| **Activity date:** | 27 July 2022 to 29 July 2022 |
| **Performance report date:** | 24 August 2022 |

# Performance report prepared by

A. Grant, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

**Services included in this assessment**

**CHSP:**

* CHSP - Meals, 4-7ZMF623, 149 Rainbow Street, SANDGATE QLD 4017

# Overall assessment of Service

|  |  |  |
| --- | --- | --- |
| Standard 1 Consumer dignity and choice | CHSP | Compliant |
| Requirement 1(3)(a) | CHSP | Compliant |
| Requirement 1(3)(b) | CHSP | Compliant |
| Requirement 1(3)(c) | CHSP | Compliant |
| Requirement 1(3)(d) | CHSP | Compliant |
| Requirement 1(3)(e) | CHSP | Compliant |
| Requirement 1(3)(f) | CHSP | Compliant |
|  |  |  |
| Standard 2 Ongoing assessment and planning with consumers | CHSP | Compliant |
| Requirement 2(3)(a) | CHSP | Compliant |
| Requirement 2(3)(b) | CHSP | Compliant |
| Requirement 2(3)(c) | CHSP | Compliant |
| Requirement 2(3)(d) | CHSP | Compliant |
| Requirement 2(3)(e) | CHSP | Compliant |
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| Standard 3 Personal care and clinical care | CHSP | Not Applicable |
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| Standard 4 Services and supports for daily living | CHSP | Compliant |
| Requirement 4(3)(a) | CHSP | Compliant |
| Requirement 4(3)(b) | CHSP | Compliant |
| Requirement 4(3)(c) | CHSP | Compliant |
| Requirement 4(3)(d) | CHSP | Compliant |
| Requirement 4(3)(e) | CHSP | Compliant |
| Requirement 4(3)(f) | CHSP | Compliant |
| Requirement 4(3)(g) | CHSP | Not Applicable |
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| Standard 5 Organisation’s service environment | CHSP | Not Applicable |
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| Standard 6 Feedback and complaints | CHSP | Compliant |
| Requirement 6(3)(a) | CHSP | Compliant |
| Requirement 6(3)(b) | CHSP | Compliant |
| Requirement 6(3)(c) | CHSP | Compliant |
| Requirement 6(3)(d) | CHSP | Compliant |
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| Standard 7 Human resources | CHSP | Compliant |
| Requirement 7(3)(a) | CHSP | Compliant |
| Requirement 7(3)(b) | CHSP | Compliant |
| Requirement 7(3)(c) | CHSP | Compliant |
| Requirement 7(3)(d) | CHSP | Compliant |
| Requirement 7(3)(e) | CHSP | Compliant |
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| Standard 8 Organisational governance | CHSP | Compliant |
| Requirement 8(3)(a) | CHSP | Compliant |
| Requirement 8(3)(b) | CHSP | Compliant |
| Requirement 8(3)(c) | CHSP | Compliant |
| Requirement 8(3)(d) | CHSP | Compliant |
| Requirement 8(3)(e) | CHSP | Not Applicable |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the services, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Quality Audit; the Quality Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, Consumers and representatives and others.

# STANDARD 1 Consumer dignity and choice CHSP Compliant

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

Consumers and representatives interviewed by the Assessment Team stated consumers are treated respectfully and with dignity at all times. Staff and volunteers interviewed by the Assessment Team spoke respectfully about consumers and were able to outline for individual consumers how they treated them with dignity, respect and showed an awareness of the consumer’s individual identity. Documentation analysed by the Assessment Team evidenced the organisation has a consumer-centred approach to service delivery. The Assessment Team noted they observed office staff interacting with consumers in a polite and respectful manner.

Consumers and representatives interviewed by the Assessment Team confirmed staff understand consumers’ needs and preferences and that their service is delivered in a way that makes them feel safe and respected. While staff and volunteers interviewed by the Assessment Team were not familiar with the term ‘cultural safety’ and had not received training in the delivery of culturally safe services, they demonstrated they knew what the delivery of culturally safe services means in practice. Staff and volunteers described how they adapt the way services are offered to meet the individual needs and preferences for each consumer.

Consumers and representatives interviewed by the Assessment Team stated consumers are supported to make their own decisions about the services the consumer receives. Consumers stated during interviews with the Assessment Team that the service makes it easy for them to be involved and described how they are supported to make changes to their services if and when required. During interviews with the Assessment Team staff demonstrated knowledge and understanding of the preferences and choices of sampled consumers and could describe how they adapt the service to meet the needs of individual consumers. The Assessment Team reviewed documentation including file notes and delivery run sheets which evidenced consumer involvement in decisions about the service provided.

Consumers and representatives interviewed by the Assessment Team stated their care and services help them to live the best life they can by being supported to take certain risks. Staff and volunteers interviewed by the Assessment Team stated they report to management, any risks observed in consumers’ homes, including uneaten meals. During interviews with the Assessment Team Management were able to describe some instances where they offer alternatives to minimise risk and help the consumers live the life they choose. The Assessment Team noted documentation reviewed including consumer files and run sheets contained information on consumers likes and dislikes, along with dietary requirements and allergies.

Consumers and representatives interviewed by the Assessment Team stated they receive written information in a way they can understand, that enables them to make informed choices. The Assessment Team noted this includes invoices, menu changes and delivery days and times. Consumers stated during interviews they contact the service by telephone or will provide information to volunteers if they need to amend their plan. Management, staff and volunteers interviewed by the Assessment Team were able to describe the various ways that they provide information to consumers regarding their care and services which enables them to exercise choice. The Assessment Team noted consumer file notes evidenced communication with consumers is recorded.

Consumers and representatives interviewed by the Assessment Team stated staff respect their personal privacy. During interviews with the Assessment Team volunteers described how they respect the personal privacy of consumers by knocking on doors or calling out before entering homes. During interviews with the Assessment Team Management confirmed that consumer information is stored on an electronic database and access to this information requires user login details including password. The Assessment Team analysed evidence which showed consumers are provided with information about the collection, usage and disclosure of their personal information. Evidence analysed by the Assessment Team showed the service has policies and procedures outlining privacy and confidentiality requirements.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

**Assessment of Standard 1 Requirements**

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| Requirement 1(3)(a) | CHSP | Compliant |

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

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| Requirement 1(3)(b) | CHSP | Compliant |

### *Care and services are culturally safe.*

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| Requirement 1(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 1(3)(d) | CHSP | Compliant |

### *Each consumer is supported to take risks to enable them to live the best life they can.*

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| Requirement 1(3)(e) | CHSP | Compliant |

*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.*

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| Requirement 1(3)(f) | CHSP | Compliant |

*Each consumer’s privacy is respected, and personal information is kept confidential.*

# STANDARD 2 Ongoing assessment and planning with consumers CHSP Compliant

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

Evidence analysed by the Assessment Team showed the service completes the initial assessment of the consumer needs, goals, and preferences relevant to the types of meals the consumer requires. The Assessment Team noted the initial information also identifies special dietary needs and preferences, frequency of meal delivery and preferred payment method which in turn informs the consumer’s meal delivery service. Consumer files reviewed by the Assessment Team included sufficient detail about assessed needs and risks to the consumer to guide staff and volunteers in managing the risks for consumers.

Consumers and representatives interviewed by the Assessment Team advised their current meal service delivery meets their needs and preferences. Consumers advised the Assessment Team during interviews changes to the service can be easily amended and consumers feel comfortable communicating with Management and volunteers. During interviews with the Assessment Team Management described how the meal delivery service is tailored to consumer’s needs and preferences which is recorded on delivery run sheets and are available to volunteer staff when delivering meals.

Consumers and representatives interviewed by the Assessment Team reported that they were involved in the planning of the consumer’s meal services. This included what meals they preferred, when they were able to be delivered or collected and payment method. During interviews with the Assessment Team consumers advised they were able to organise changes to their preferences for meals through communication with the service. During interviews with the Assessment Team Management demonstrated the process they use to work with consumers and representatives to meet consumer’s needs. Documentation reviewed by the Assessment Team demonstrated evidence of consumer and representative involvement in the planning of meal services.

Evidence analysed by the Assessment Team showed the service plan for each consumer is the assessment form which identifies the consumer, the delivery address and any special instructions in relation to the meal or delivery. The Assessment Team noted all forms are updated as changes are made. Evidence analysed by the Assessment Team showed the daily run sheets provide all information required for consumers including special requirements for the meal and its delivery, special dietary concerns, delivery address, delivery instructions including access to premises and hazards at the consumer’s environment which the volunteers use for the delivery of meals.

During interviews with the Assessment Team Management reported reviews are undertaken on an ongoing basis as and when consumers and representatives contact the service in relation to circumstantial changes or when incidents impact on the needs, goals or preferences of the consumer. Evidence analysed by the Assessment Team showed delivery run sheets are updated on an ongoing basis, when volunteer staff are informed of any necessary changes, including the cancellation of service, changes to dietary requirements or changes to delivery instructions. The Assessment Team noted consumer files record details of the feedback provided to the service.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

**Assessment of Standard 2 Requirements**

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| Requirement 2(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(b) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(d) | CHSP | Compliant |

*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.*

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| Requirement 2(3)(e) | CHSP | Compliant |

*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.*

# STANDARD 3 Personal care and clinical care CHSP Not Applicable

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

The Quality Standard for the Commonwealth home support programme service is assessed as Not Applicable as seven of the seven specific requirements have been assessed as Not Applicable.

# STANDARD 4 Services and supports for daily living CHSP Compliant

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

Consumers and representatives interviewed by the Assessment Team reported the services they receive support for their lifestyle needs and staff assist them to be as independent as possible, to do the things that are important to them. During interviews with the Assessment Team Management and staff described how the service supports consumers in this matter and follows-up when there are concerns about the consumers well-being. Documentation viewed by the Assessment Team evidenced the choice of meals each consumer prefers and the delivery information which is made available to the volunteer staff.

Consumers and representatives interviewed by the Assessment Team stated volunteers were kind, caring and respectful towards them, acknowledging that they provide emotional support to them and would recognise if they were feeling low. During interviews with the Assessment Team volunteers advised that on occasion they take the time to talk to consumers when they are feeling low, they would inform Management for further follow-up support.

Consumers and representatives interviewed by the Assessment Team stated that they are supported by the service to maintain contact with the people who are important to them and engage in activities that are of interest to them. Evidence analysed by the Assessment Team showed consumer files provide information on each consumer’s background and their social activity preferences, where they have provided this information.

Consumers and representatives interviewed by the Assessment Team reported they are satisfied that the information about their meal plan, delivery instructions and preferences are shared within the service and with others involved in their care. Most consumers interviewed by the Assessment Team reported they are attended by regular volunteer staff and confirmed they have a good knowledge of the care and services they need. During interviews with the Assessment Team staff and volunteers reported information about consumers is available on the daily run sheets and personal documents which they have access to and described how they are informed of any changes to the consumer’s condition prior to a scheduled visit.

The Assessment Team noted while consumers and representatives sampled have not been referred to other organisations, consumers and representatives are aware they can access additional home supports from other organisations. Evidence analysed by the Assessment Team showed Management maintained contact details for organisations that may be useful for consumers. The Assessment Team noted details of these services are in the consumer handbook which is provided to consumers and representatives on entry to the service. The Assessment Team noted while referrals are not generally undertaken by the service, Management advised during interviews with the Assessment Team they make referrals to My Aged Care (MAC) for consumers that require a reassessment or higher level of care.

Consumers and representatives interviewed by the Assessment Team provided positive feedback about the meals, saying there is enough variety to meet their needs and preferences. The Assessment Team analysed evidence which shows meals can be provided either fresh or frozen, or a combination of both, to meet consumer’s needs and preferences and delivered in the quantity the consumer wishes. The Assessment Team noted Management and volunteer staff are aware of individual consumer’s dietary needs and delivery preferences. Evidence analysed by the Assessment Team showed there are systems in place for ordering, storing, and delivering meals to consumers. The Assessment Team noted documentation evidenced the service provides an individual and flexible approach to meal delivery.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as six of the six applicable requirements have been assessed as Compliant. Requirement 4(3)(g) is Not Applicable and therefore was not assessed.

**Assessment of Standard 4 Requirements**

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| Requirement 4(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 4(3)(b) | CHSP | Compliant |

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

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| Requirement 4(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 4(3)(d) | CHSP | Compliant |

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

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| Requirement 4(3)(e) | CHSP | Compliant |

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

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| Requirement 4(3)(f) | CHSP | Compliant |

*Where meals are provided, they are varied and of suitable quality and quantity.*

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| Requirement 4(3)(g) | CHSP | Not Applicable |

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 Organisation’s service environment CHSP Not Applicable

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

The Quality Standard for the Commonwealth home support programme service is assessed as Not Applicable as three of the three specific requirements have been assessed as Not Applicable.

# STANDARD 6 Feedback and complaints CHSP Compliant

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

Consumers and representatives interviewed by the Assessment Team stated they are aware of how to provide feedback or make a complaint and felt supported to do so. During interviews with the Assessment Team consumers and representatives advised they would generally provide feedback by speaking directly to volunteer delivery staff or contact the office directly. During interviews with the Assessment Team Management and staff described ways they support consumers and representatives to provide feedback, including through participation in client engagement surveys. The Assessment Team analysed evidence which showed on entry to the service, consumers and representatives are provided with an information pack and handbook which provide details on ways to make a complaint or provide feedback. The Assessment Team noted a review of the services feedback and complaints register demonstrates complaints are documented and outcomes are recorded.

Consumers and representatives interviewed by the Assessment Team demonstrated their awareness of external avenues of complaints, however they advised they prefer to directly communicate with the service. Evidence analysed by the Assessment Team showed the service provides information to consumers and representatives on internal and external complaints mechanisms and advocacy services. Management interviewed by the Assessment Team reported the current consumer cohort accessing this service speak English, however management were aware of how to access translation services if required.

Consumers and representatives interviewed by the Assessment Team confirmed the service responds promptly to any issues raised, provides an honest explanation and action is promptly taken. Consumers and representatives interviewed by the Assessment Team stated they are confident that they will continue to be treated with respect and dignity regardless of any issues they may raise.

The Assessment Team noted based on evidence analysed that the organisation demonstrated appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. Evidence analysed showed an established feedback and complaints handling process supports staff and management in capturing and responding to feedback and complaints. Evidence analysed by the Assessment Team showed staff and management consult with consumers where the service has not met their expectations, offer an apology and work to resolve issues promptly.

The Assessment Team analysed evidence which showed a review of the complaints data demonstrates how the service monitors, reports and uses feedback to improve their services. The complaints’ register confirms feedback is recorded in the complaints’ register and actions taken by the service to resolve the complaint are documented, including communication with the consumers and/or representatives.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

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| Requirement 6(3)(a) | CHSP | Compliant |

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

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| Requirement 6(3)(b) | CHSP | Compliant |

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

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| Requirement 6(3)(c) | CHSP | Compliant |

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

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| Requirement 6(3)(d) | CHSP | Compliant |

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 Human resources CHSP Compliant

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

## Assessment of Standard 7

Evidence analysed by the Assessment Team showed the service demonstrated that the number and mix of members of the workforce are enabled to deliver safe and quality care and services. Consumers and representatives interviewed by the Assessment Team expressed high satisfaction levels with the workforce, reporting that the number of staff is sufficient to ensure they receive their meal delivery in accordance with their individual needs and preferences. Kitchen staff and volunteers interviewed by the Assessment Team stated they have sufficient time and information to undertake the meal delivery service in a safe and efficient manner. During interviews with the Assessment Team Management confirmed there have not been any unfilled shifts in the last month and when required, staff or volunteers who are not scheduled are available to fill unexpected shift vacancies. During interviews with the Assessment Team Management explained they have identified a need to recruit an additional administration staff member to support the office staff to manage a high workload and confirmed the recruitment process is underway.

Consumers and representatives interviewed by the Assessment Team provided positive feedback in relation to their interactions with the workforce. During interviews with the Assessment Team consumers and representatives described in various ways how the staff and volunteers are kind, caring and respectful of them as an individual. Volunteer delivery staff stated during interviews they are guided by information in the delivery run sheet and briefing from the service on the individual consumer and aware of their individual needs and preferences.

Consumers and representatives interviewed by the Assessment Team expressed confidence in the competency of the workforce and felt staff have the knowledge and skills required to effectively undertake their roles, delivering tailored meal services meeting their needs and preferences. Volunteer delivery drivers interviewed by the Assessment Team explained the delivery run sheet contains all the information they need, including consumer’s preferred name, contact details, types of meals and any individualised or specific instructions. Evidence analysed by the Assessment Team showed the office manager or chef conducts informal ‘toolbox’ meetings with volunteer staff at the start of most days to inform them of any changes to service or deliveries and volunteers will speak with office staff when they return from delivery runs to discuss any issues or concerns they might have experienced that day.

Management and staff interviewed by the Assessment Team described the recruitment and orientation process at the service when commencing in their role. The Assessment Team noted an experienced kitchen or delivery staff member always supports new volunteers as long as required. Office staff interviewed by the Assessment Team stated they received ‘on the job’ training and guidance and felt supported to undertake their duties safely and efficiently. Staff and volunteers interviewed by the Assessment Team stated they were required to complete an on-line food safety training programme prior to commencing in the role. During interviews with the Assessment Team management said they identify any training needs via various methods including consumer feedback, performance reviews and observations.

Evidence analysed by the Assessment Team showed the service demonstrated that regular assessment, monitoring and review of the performance of the permanent workforce is undertaken. The Assessment Team noted while the volunteer staff do not undertake a formal performance review, management described how feedback from consumers and representatives is used to assess the performance of the delivery staff. Management interviewed by the Assessment Team stated they discuss any performance concerns with individuals when they are identified and confirmed that feedback and complaints from consumers is discussed at committee meetings. In the event a performance issue is identified, the office manager actions directly through discussion with the volunteer, and if appropriate, the volunteer is removed from the delivery run or partnered with a mentor or buddy to monitor, observe and provide additional training.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

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| Requirement 7(3)(a) | CHSP | Compliant |

*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.*

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| Requirement 7(3)(b) | CHSP | Compliant |

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

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| Requirement 7(3)(c) | CHSP | Compliant |

*The workforce is competent, and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

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| Requirement 7(3)(d) | CHSP | Compliant |

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

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| Requirement 7(3)(e) | CHSP | Compliant |

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 Organisational governance CHSP Compliant

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

Consumers and representatives interviewed by the Assessment Team expressed satisfaction with the quality of the service and gave examples of where they have provided feedback to the service or raised concerns which are always responded to. During interviews with the Assessment Team Management advised consumer and representative feedback in relation to meals is provided directly to the kitchen staff as meals are prepared on site. During interviews Management described how they encourage consumers and representatives to participate in consumer satisfaction surveys that seek feedback in relation to the quality, quantity and variety of the meals delivered and gave examples of how feedback from consumers feeds into broader service improvements.

Consumers and representatives interviewed by the Assessment Team reported the service operates in a way that is inclusive and accountable for the provision and delivery of meals, meeting consumer needs and preferences. Observations noted by the Assessment Team showed the workforce demonstrates behaviours and values consistent with a culture of safe, inclusive, respectful meal service delivery. Evidence analysed by the Assessment Team showed the office manager and head chef provide a monthly report to the management committee that includes information on incidents, complaints and feedback

Evidence analysed by the Assessment Team showed the service has effective governance systems relating to information management, continuous improvement, financial governance, workforce governance, regulatory compliance, feedback and complaints. For Example:

Evidence analysed by the Assessment Team showed the service has financial governance systems and processes to manage the finances and resources required to deliver a safe and quality meal delivery service. Evidence analysed showed Management has oversight of the service’s income and expenditure and this is reviewed regularly and discussed at monthly management committee meetings.

Evidence analysed by the Assessment Team showed Management, staff and volunteers are provided with a job description and have a clear understanding of their roles and responsibilities. Evidence analysed showed the service supports and develops its staff to deliver safe and quality care and services.

The Assessment Team noted while most of the feedback received from consumers and representatives is verbal, the service has systems and processes to document this feedback and use it to improve outcomes for consumers.

Evidence analysed by the Assessment Team showed Management receives updates from relevant regulatory bodies through the Queensland Meals on Meals (QMOW), including COVID-19 updates. Information is distributed to staff, and consumers and representatives as appropriate.

Evidence analysed by the Assessment Team showed 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. Consumers and representatives during interviews with the Assessment Team stated they feel the service supports them to live the best life they can and where potential risks to a consumer’s well-being has been identified, including where a consumer has food allergies and/or intolerances, this is discussed with the service and strategies are put in place to manage the risks. Evidence analysed by the Assessment Team showed consumer specific information is available to kitchen staff and volunteers to ensure the right meal is provided to the right consumer, according to their needs. The Assessment Team noted there is a food safety plan in place to support safe food handling and the management of potential risks to consumers.

Management interviewed by the Assessment Team described the high impact and/or high prevalence risks associated with the consumers receiving the meal service. Evidence analysed by the Assessment Team showed vulnerable consumers are identified including consumers who are socially isolated, have vision and hearing impairments, mobility limitations and cognitive impairment. Evidence analysed by the Assessment Team showed changes in consumer wellbeing or identified deterioration is recorded with prompt communication with the consumers representative. The Assessment noted based on interviews with volunteer delivery drivers that understand the processes to follow if consumers do not respond to a scheduled visit.

The Quality Standard for the Commonwealth home support programme service is assessed as Compliant as four of the four applicable requirements have been assessed as Compliant. Requirement 8(3)(e) is Not Applicable and therefore not assessed.

## Assessment of Standard 8 Requirements

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| Requirement 8(3)(a) | CHSP | Compliant |

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

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| Requirement 8(3)(b) | CHSP | Compliant |

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

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| Requirement 8(3)(c) | CHSP | Compliant |

*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.*

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| Requirement 8(3)(d) | CHSP | Compliant |

*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.*

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| Requirement 8(3)(e) | CHSP | Not Applicable |

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# 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, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.