



Australian Government

Australian Aged Care Quality Agency

BlueCross Springfield

RACS ID 3125
40 Dorking Road
BOX HILL VIC 3128

Approved provider: Blue Cross Community Care Services Group
Pty Ltd

Following an audit we decided that this home met 44 of the 44 expected outcomes of the Accreditation Standards and would be accredited for three years until 01 May 2018.

We made our decision on 02 March 2015.

The audit was conducted on 03 February 2015 to 04 February 2015. The assessment team's report is attached.

We will continue to monitor the performance of the home including through unannounced visits.

Most recent decision concerning performance against the Accreditation Standards

Standard 1: Management systems, staffing and organisational development

Principle:

Within the philosophy and level of care offered in the residential care service, management systems are responsive to the needs of residents, their representatives, staff and stakeholders, and the changing environment in which the service operates.

Expected outcome	Quality Agency decision
1.1 Continuous improvement	Met
1.2 Regulatory compliance	Met
1.3 Education and staff development	Met
1.4 Comments and complaints	Met
1.5 Planning and leadership	Met
1.6 Human resource management	Met
1.7 Inventory and equipment	Met
1.8 Information systems	Met
1.9 External services	Met

Standard 2: Health and personal care

Principle:

Residents' physical and mental health will be promoted and achieved at the optimum level in partnership between each resident (or his or her representative) and the health care team.

Expected outcome	Quality Agency decision
2.1 Continuous improvement	Met
2.2 Regulatory compliance	Met
2.3 Education and staff development	Met
2.4 Clinical care	Met
2.5 Specialised nursing care needs	Met
2.6 Other health and related services	Met
2.7 Medication management	Met
2.8 Pain management	Met
2.9 Palliative care	Met
2.10 Nutrition and hydration	Met
2.11 Skin care	Met
2.12 Continence management	Met
2.13 Behavioural management	Met
2.14 Mobility, dexterity and rehabilitation	Met
2.15 Oral and dental care	Met
2.16 Sensory loss	Met
2.17 Sleep	Met

Standard 3: Resident lifestyle**Principle:**

Residents retain their personal, civic, legal and consumer rights, and are assisted to achieve active control of their own lives within the residential care service and in the community.

Expected outcome		Quality Agency decision
3.1 Continuous improvement		Met
3.2 Regulatory compliance		Met
3.3 Education and staff development		Met
3.4 Emotional support		Met
3.5 Independence		Met
3.6 Privacy and dignity		Met
3.7 Leisure interests and activities		Met
3.8 Cultural and spiritual life		Met
3.9 Choice and decision-making		Met
3.10 Resident security of tenure and responsibilities		Met

Standard 4: Physical environment and safe systems**Principle:**

Residents live in a safe and comfortable environment that ensures the quality of life and welfare of residents, staff and visitors.

Expected outcome		Quality Agency decision
4.1 Continuous improvement		Met
4.2 Regulatory compliance		Met
4.3 Education and staff development		Met
4.4 Living environment		Met
4.5 Occupational health and safety		Met
4.6 Fire, security and other emergencies		Met
4.7 Infection control		Met
4.8 Catering, cleaning and laundry services		Met



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Audit Report

BlueCross Springfield 3125

Approved provider: Blue Cross Community Care Services Group Pty Ltd

Introduction

This is the report of a re-accreditation audit from 03 February 2015 to 04 February 2015 submitted to the Quality Agency.

Accredited residential aged care homes receive Australian Government subsidies to provide quality care and services to care recipients in accordance with the Accreditation Standards.

To remain accredited and continue to receive the subsidy, each home must demonstrate that it meets the Standards.

There are four Standards covering management systems, health and personal care, care recipient lifestyle, and the physical environment and there are 44 expected outcomes such as human resource management, clinical care, medication management, privacy and dignity, leisure interests, cultural and spiritual life, choice and decision-making and the living environment.

Each home applies for re-accreditation before its accreditation period expires and an assessment team visits the home to conduct an audit. The team assesses the quality of care and services at the home and reports its findings about whether the home meets or does not meet the Standards. The Quality Agency then decides whether the home has met the Standards and whether to re-accredit or not to re-accredit the home.

Assessment team's findings regarding performance against the Accreditation Standards

The information obtained through the audit of the home indicates the home meets:

- 44 expected outcomes

Audit report

Scope of audit

An assessment team appointed by the Quality Agency conducted the re-accreditation audit from 03 February 2015 to 04 February 2015.

The audit was conducted in accordance with the Quality Agency Principles 2013 and the Accountability Principles 2014. The assessment team consisted of two registered aged care quality assessors.

The audit was against the Accreditation Standards as set out in the Quality of Care Principles 2014.

Assessment team

Team leader:	Stephen Koci
Team member:	Kerry Ewing

Approved provider details

Approved provider:	Blue Cross Community Care Services Group Pty Ltd
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Details of home

Name of home:	BlueCross Springfield
RACS ID:	3125

Total number of allocated places:	50
Number of care recipients during audit:	50
Number of care recipients receiving high care during audit:	N/A
Special needs catered for:	N/A

Street:	40 Dorking Road	State:	Victoria
City:	Box Hill	Postcode:	3128
Phone number:	03 9898 9211	Facsimile:	03 9899 4586
E-mail address:	springfield@bluecross.com.au		

Audit trail

The assessment team spent two days on site and gathered information from the following:

Interviews

	Number		Number
Management	3	Residents/representatives	14
Clinical care coordinator	1	Physiotherapist	1
Nursing care and lifestyle staff	7	Maintenance management and staff	3
Ancillary staff	2	Catering staff	2

Sampled documents

	Number		Number
Residents' files	9	Medication charts	5
Resident agreements	4	Personnel files	5

Other documents reviewed

The team also reviewed:

- Audits and peer review audits
- Chemical register and material safety datasheets
- Cleaning documentation
- Clinical charting
- Clinical indicator data and analyses
- Communication books/diaries
- Compliment, comments and concern forms and action for improvement
- Doctors' communication folder
- Education calendar and records
- External contractor agreements
- Fire equipment service records
- Handover folder
- Information booklets and packs
- Information guide for residents
- Kitchen documentation, menu, audits, dietary forms and food safety program
- Laundry documentation
- Lifestyle documentation, schedules, evaluations and calendars
- Medication registers
- Meeting schedule and minutes
- Memoranda
- Newsletters

- Nurse registration register
- Online maintenance system and documentation
- Photobooks
- Police certificate register
- Policies, procedures and flow charts
- Quality improvement register, staff questionnaires and trending analysis
- Regulatory compliance notifications
- Reportable incident consolidated register
- Rosters
- Specialised nursing care folder
- Staff handbook
- Staff resource folders.

Observations

The team observed the following:

- Activities in progress
- Archiving system
- Chemical storage
- Cleaning in progress, cleaners' room and trolley
- Dining experience
- Door control console
- Equipment and supply storage areas
- External and internal living environment
- Firefighting equipment, fire panel, evacuation diagrams, evacuation pack and evacuation report (resident list)
- Handover in progress
- Infectious and general waste disposal processes
- Interactions between staff and residents
- Kitchen, freezer, cool room and dry stores
- Laundry service in operation
- Living environment
- Meal and refreshment services
- Medication administration
- Noticeboards and information displays
- Outbreak kit
- Personal protective equipment
- Short observation conducted in communal lounge
- Shredder and secure destruction bin

- Staff room and noticeboards with poster on display with work, health and safety representatives
- Storage of medications.

Assessment information

This section covers information about the home's performance against each of the expected outcomes of the Accreditation Standards.

Standard 1 – Management systems, staffing and organisational development

Principle: Within the philosophy and level of care offered in the residential care service, management systems are responsive to the needs of care recipients, their representatives, staff and stakeholders, and the changing environment in which the service operates.

1.1 Continuous improvement

This expected outcome requires that "the organisation actively pursues continuous improvement".

Team's findings

The home meets this expected outcome

The organisation has a continuous improvement system that demonstrates improvements in management, staffing and organisational development. The system for residents and representatives include feedback forms, meetings, forums and informal feedback. The system for staff includes forms, direct feedback, audits and meetings. Continuous improvements are identified, documented on a quality improvement register and are monitored and evaluated via the home's quality control system. Feedback on continuous improvements is provided via direct feedback and at meetings. Residents, representatives and staff are satisfied continuous improvement occurs. .

Improvement initiatives implemented by the home over the last 12 months in relation to Standard 1 Management systems, staffing and organisational development include:

- Management introduced a staff appreciation program called 'carers under cover' where staff are encouraged to do random acts of kindness towards fellow staff members. Management display a staff appreciation board and celebrate staff member birthdays. Management report the program promotes good team building and has led to an increase in staff satisfaction through the staff survey.
- The organisation introduced an electronic shift system that allows employees to access annual leave balances, the roster and personal information. Management report the system has reduced administration time and allows staff to easily access information.

1.2 Regulatory compliance

This expected outcome requires that "the organisation's management has systems in place to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines".

Team's findings

The home meets this expected outcome

The organisation has a system for identifying relevant legislation and regulatory requirements and ensuring compliance with professional standards and guidelines. Corporate office receives regulatory information via a legal update service and provides regular information to the home. Residents and representatives are informed of changes to regulatory compliance through established communication channels. Staff are informed through meetings where regulatory compliance is a standing agenda item, memoranda, updates to policy and procedures and via noticeboards. Regulatory compliance regarding management systems, staffing and organisational development is monitored through audits, staff competencies and observation. Staff said they are informed about regulatory compliance.

Examples of responsiveness to regulatory compliance relating to Standard 1 Management systems, staffing and organisational development include:

- Personal information is managed and destroyed in accordance with regulatory requirements.
- Management ensured the notification, within the required time-frame, of all stakeholders about the re-accreditation audit.
- The organisation has processes to monitor police certificates and credential checks for staff, volunteers and service providers.

1.3 Education and staff development

This expected outcome requires that "management and staff have appropriate knowledge and skills to perform their roles effectively".

Team's findings

The home meets this expected outcome

The organisation fosters a culture that supports continuous professional development through the delivery of a formalised education program for management and staff. At the site level, management identify educational requirements through mechanisms such as resident need, stakeholder feedback, clinical indicator data, incidents and hazard reports, staff requests and performance processes. Education sessions are evaluated and staff attendance is recorded and monitored. Management and staff are very satisfied with the educational opportunities available. Residents and representatives are highly satisfied with the knowledge and skill shown by management and staff.

Recent education relating to Standard 1 Management systems, staffing and organisational development includes:

- incident reporting
- management training
- financial changes.

1.4 Comments and complaints

This expected outcome requires that "each care recipient (or his or her representative) and other interested parties have access to internal and external complaints mechanisms".

Team's findings

The home meets this expected outcome

Management maintains a comments and complaints mechanism that is accessible to residents, representatives, staff and other stakeholders. Access is facilitated through compliment, comments and concern forms, meetings and open door access to management. Information on the internal and external complaint mechanisms is communicated through resident information and through flyers available at reception. All complaints go directly to management, are recorded on a register and actioned in a timely manner. Feedback is provided personally to the complainant if requested on the form and themes are raised at meetings. The organisation has processes for the handling of confidential complaints and residents and representatives can go directly to the organisation corporate office with any comments and complaints. Residents, representatives and staff are aware of the home's comment and complaints processes and said they are comfortable to raise any concerns.

1.5 Planning and leadership

This expected outcome requires that "the organisation has documented the residential care service's vision, values, philosophy, objectives and commitment to quality throughout the service".

Team's findings

The home meets this expected outcome

The organisation has documented its vision (be there, have fun, choose your attitude and make their day) and commitment to continuous improvement. We observed the home's vision displayed throughout the home.

1.6 Human resource management

This expected outcome requires that "there are appropriately skilled and qualified staff sufficient to ensure that services are delivered in accordance with these standards and the residential care service's philosophy and objectives".

Team's findings

The home meets this expected outcome

The organisation has processes to ensure the recruitment of appropriately skilled and qualified staff for the delivery of care and services to residents. Management follow the organisation's formal recruitment process and monitors qualifications and credentials information. New staff complete a formal orientation program that includes 'buddy shifts' to assist them in adjusting to their new roles. All roles have position descriptions to guide staff and staff sign employment contracts. Rosters show adequate staffing levels across all shifts and a registered nurse is on-call for assistance out of hours as required. Management advertise roster vacancies and these are filled from the home's permanent staff, a casual bank or from agency staff. Residents, representatives and staff are satisfied with current staffing levels at the home.

1.7 Inventory and equipment

This expected outcome requires that "stocks of appropriate goods and equipment for quality service delivery are available".

Team's findings

The home meets this expected outcome

The home demonstrates a system to ensure stocks of appropriate goods and equipment are available for quality service delivery. Key personnel regularly monitor and order supplies through preferred suppliers identified through organisational processes. Prior to purchase, new equipment is trialled to ensure it is fit for purpose. Implementation of new equipment occurs in the setting of staff training. The provision of goods and equipment is reflective of the identified needs of residents. Staff follow cleaning, corrective and preventive maintenance programs to ensure equipment remains in good repair. We observed sufficient, clean secure storage space within the home and stock rotation as applicable. Staff, residents and representatives are satisfied the home has a sufficient level of appropriate goods and equipment.

1.8 Information systems

This expected outcome requires that "effective information management systems are in place".

Team's findings

The home meets this expected outcome

Organisational systems are effective in ensuring all stakeholders have access to current and relevant information. Two -way communication processes ensure both management and stakeholders are kept as informed as possible. Communication pathways include, scheduled meetings, electronic mail, newsletters, feedback forms, information packs, policies, procedures, flowcharts and care consultations. Confidential records are securely stored, archived and destroyed as required and electronic information is password protected and backed up. An established document control system ensures site based staff have ready access to updated and relevant information that aligns with contemporary practice. Stakeholders are satisfied with the quality and timeliness of information provided.

1.9 External services

This expected outcome requires that "all externally sourced services are provided in a way that meets the residential care service's needs and service quality goals".

Team's findings

The home meets this expected outcome

There are processes to ensure all external services are provided in a way that meets the residential care service's needs and service quality goals. External services at the home include physiotherapy, dietetics, fire system testing, hairdressing and pest control. Contracts are handled at the organisation's corporate office and specify the required standards and timeframes and regulatory requirements. The organisation has an approved contractors and suppliers register. Management seek feedback about the quality of service delivery through observation, audits and stakeholder feedback. Residents and representatives are satisfied with the home's external services.

Standard 2 – Health and personal care

Principle: Care recipients' physical and mental health will be promoted and achieved at the optimum level, in partnership between each care recipient (or his or her representative) and the health care team.

2.1 Continuous improvement

This expected outcome requires that “the organisation actively pursues continuous improvement”.

Team's findings

The home meets this expected outcome

The home has a continuous improvement system that demonstrates improvements in resident health and personal care. The continuous improvement system is described in expected outcome 1.1 Continuous improvement. Residents advised they are satisfied they receive appropriate clinical care. Staff said improvements have occurred in the area of health and personal care.

Improvement initiatives implemented by the home over the last 12 months in relation to Standard 2 Health and personal care include:

- The home is participating in a project for reducing the use of sedative medications. The program is being conducted in collaboration with a university, a pharmacist and doctors. The home appointed a champion to inform residents and representatives about the program. Management report the reduction in sedative medication has resulted in residents feeling and sleeping better. Representatives report the reduction in medications has had a positive effect on their family member.
- A new form has been introduced to identify in detail residents palliative care needs. The form has developed in conjunction with a palliative care organisation. The form is discussed with residents and representatives and gives a clear pathway so residents and representatives can make informed decisions.

2.2 Regulatory compliance

This expected outcome requires that “the organisation's management has systems in place to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines about health and personal care”.

Team's findings

The home meets this expected outcome

The system used to identify and ensure compliance with all relevant legislation, regulatory requirements and professional standards is described in expected outcome 1.2 Regulatory compliance. Staff stated they are informed about regulatory requirements by management.

Examples of responsiveness to regulatory compliance relating to Standard 2 Health and personal care include:

- Medications are stored and administered according to legislated processes.
- There are systems and processes in the event of an unexplained resident absence.
- The organisation has processes to monitor the current registration of nursing staff.

2.3 Education and staff development

This expected outcome requires that “management and staff have appropriate knowledge and skills to perform their roles effectively”.

Team’s findings

The home meets this expected outcome

There is a system to ensure management and staff have the knowledge and skills to perform their roles effectively in relation to health and personal care. For details regarding the home’s system, refer to expected outcome 1.3 Education and staff development.

Staff are satisfied with the ongoing education and support to develop their knowledge and skills in relation to health and personal care. Residents and representatives are satisfied management and staff have the appropriate knowledge and skills to perform their roles effectively.

Recent education relating to Standard 2 Health and personal care includes:

- antibiotic use
- Parkinson’s disease
- palliative care approach.

2.4 Clinical care

This expected outcome requires that “care recipients receive appropriate clinical care”.

Team’s findings

The home meets this expected outcome

Clinical staff in partnership with each resident’s general practitioner and relevant health specialists undertake a comprehensive assessment process that informs the development of each resident’s care plan. Mechanisms such as change of shift handover, communication diaries, care plan reviews and consistent staffing arrangements assist with timely identification of changes in residents’ needs. Consultation with residents and representatives occurs formally and informally to ensure residents or their nominated representative are actively engaged in the management of residents’ clinical care. A system exists for the reporting of clinical incidents and records shows appropriate management occurs. Management monitor the effectiveness of the system through clinical indicators, audits and feedback mechanisms. Residents and representatives are satisfied with the clinical care provided.

2.5 Specialised nursing care needs

This expected outcome requires that “care recipients’ specialised nursing care needs are identified and met by appropriately qualified nursing staff”.

Team’s findings

The home meets this expected outcome

Nursing staff in consultation with health specialists identify, assess and plan for residents’ specialised care needs. Residents’ care plans provide direction to staff in all aspects of the specialised nursing care needs and the required management. Staff said changes in the care needs of residents are communicated effectively and staff are provided education to ensure they have the appropriate skills and knowledge to meet a diverse range of specialised needs. Management ensure residents’ specialised nursing care needs are managed appropriately through staff education, quality processes and feedback mechanisms. Residents and

representatives said appropriately qualified nursing staff meet residents' specialised care needs.

2.6 Other health and related services

This expected outcome requires that "care recipients are referred to appropriate health specialists in accordance with the care recipient's needs and preferences".

Team's findings

The home meets this expected outcome

Residents are referred to a wide range of health specialists in accordance with their individual needs and preferences. Clinical systems assist staff to identify if residents require the advice or review of health specialists. Mechanisms exist to capture, record, communicate and incorporate health specialists' recommendations in the daily care of residents. Each resident in accordance with their wishes are assisted to access visiting health specialists or health specialists within the broader community. Residents and representatives are satisfied with the range of health specialists available.

2.7 Medication management

This expected outcome requires that "care recipients' medication is managed safely and correctly".

Team's findings

The home meets this expected outcome

There are systems to support safe and correct medication management. Appropriately skilled and qualified staff administer medications and quality processes monitor whether they are doing so safely and correctly. Staff are guided by established processes to identify, assess and review residents' medication needs. Processes exist for the ordering, delivery and disposal of medications. Residents wishing to self-medicate are enabled to do so safely. Medications are stored safely and securely and in accordance with regulatory guidelines. Policies, procedures and current medication resources are readily accessible and guide staff practice. Management monitor medication administration through audits, incident data analysis and staff competency completion. Residents and representatives are satisfied with how staff manage residents' medications.

2.8 Pain management

This expected outcome requires that "all care recipients are as free as possible from pain".

Team's findings

The home meets this expected outcome

Care recipients said they are free as possible from pain. Clinical staff in partnership with a physiotherapist identifies, assesses and monitors residents' pain needs to ensure optimum comfort levels are achieved. Reassessment and charting occurs if residents develop either increased level of pain, a new origin of pain or if a change to the pain management program occurs. The effectiveness of residents' pain management is monitored through feedback mechanisms and clinical review processes. Staff are aware of residents' individual pain needs and how to assist with pain prevention and management.

2.9 Palliative care

This expected outcome requires that “the comfort and dignity of terminally ill care recipients is maintained”.

Team’s findings

The home meets this expected outcome

A collaborative palliative care approach ensures optimal comfort and dignity of care recipients who are terminally ill. Discussion occurs with residents or their nominated representative about the resident’s end of life wishes and staff stated this underpins the care provided in the terminal stages. Staff from all work domains are involved in terminal care to ensure the resident remains as comfortable as possible and the family and friends are supported and cared for. Access to a palliative care service occurs if required and spiritual support is available for the resident and their family. Staff said they take an individual palliative approach for each resident. Staff practice is monitored through observations, audits and feedback mechanisms. Records show representatives are satisfied with how staff respect and support individual beliefs and comfort levels during the palliative care process.

2.10 Nutrition and hydration

This expected outcome requires that “care recipients receive adequate nourishment and hydration”.

Team’s findings

The home meets this expected outcome

Staff guided by clinical systems, identify, assess and evaluate care recipients’ nutritional needs, hydration needs and preferences. Nutritional monitoring occurs as relevant and clinical guidelines are accessed to manage weight variance, fluid imbalance or swallowing difficulties. Catering services are aware of those who require a specialised diet, provide texture modified diets and fluids and assistive devices are available if required. Communication processes between clinical staff and the catering department exist to ensure any dietary changes are actioned promptly. Management monitor nutrition and hydration by resident weight analysis, audits and stakeholder feedback. Residents stated staff support and assist them to maintain an adequate level of nutrition and hydration in accordance with their individual likes, wishes and needs.

2.11 Skin care

This expected outcome requires that “care recipients’ skin integrity is consistent with their general health”.

Team’s findings

The home meets this expected outcome

Staff identify, assess and plan appropriate care to ensure care recipients’ skin integrity is consistent with their general health. A comprehensive assessment identifies actual and potential risks to residents’ skin integrity and staff implement strategies to minimise such risks. Additional charting and monitoring occurs for altered skin integrity including wounds or skin irritation. Advice from general practitioners or other relevant health specialists is sought for complex skin conditions or wounds. Staff describe residents’ individual skin needs and said they have access to specialised equipment to optimise residents’ skin integrity. Management monitor through quality processes including incident data analysis, audits and stakeholder feedback. Residents are satisfied with how their skin care needs are managed.

2.12 Continence management

This expected outcome requires that “care recipients’ continence is managed effectively”.

Team’s findings

The home meets this expected outcome

Care recipients are satisfied with the approach taken to manage their individual continence needs. Staff identify and assess each resident’s continence needs initially and if required, a continence management plan is developed and reviewed for currency. A natural approach to bowel management is promoted, and medical advice is sought if needed. Residents can access a diverse range of support aids to assist with their continence needs. Staff are aware of residents’ individual needs and preferences in regard to continence care. Management monitor the effectiveness of the system through quality processes and feedback mechanisms. Staff are aware of residents’ individual continence needs.

2.13 Behavioural management

This expected outcome requires that “the needs of care recipients with challenging behaviours are managed effectively”.

Team’s findings

The home meets this expected outcome

The home fosters an environment where care recipients with behaviours of concern are valued and supported to retain quality of life. An integrated approach is taken for staff to identify, assess and support the needs of residents with behaviours of concern. Staff said management provide education and training to enable them to support residents with behaviours as required. Mental health services are utilised as a supportive resource for staff and to help implement strategies. Management monitor residents’ behaviour needs by incident data analysis, audits and stakeholder feedback. Residents and representatives are satisfied the needs of all residents are managed effectively.

2.14 Mobility, dexterity and rehabilitation

This expected outcome requires that “optimum levels of mobility and dexterity are achieved for all care recipients”.

Team’s findings

The home meets this expected outcome

Care recipients living at the home are encouraged, supported and enabled to achieve optimum levels of mobility and dexterity. Health specialists including a physiotherapist assesses, plans for and evaluates each resident’s levels of mobility and dexterity which underpins the development of an individual physiotherapy. Staff engage the specialist advice of the physiotherapist for specialised equipment and safety management strategies to ensure optimal outcomes for each resident. Mobility and dexterity is optimised where possible through passive and active exercise and use of aids. Management monitor through incident data analysis, audits and stakeholder feedback processes. Residents and representatives indicate staff enable and support residents to retain their mobility and dexterity.

2.15 Oral and dental care

This expected outcome requires that “care recipients’ oral and dental health is maintained”.

Team’s findings

The home meets this expected outcome

The clinical system ensures care recipients maintain optimal oral and dental health. Assessments for oral and dental needs and preferences are conducted initially and on an as need basis thereafter. Care plans are generated to assist care staff to provide individualised support and assistance to residents. Changes to care plans occur in line with health specialists’ recommendations. Residents identify their preferred provider of dental care and staff assist residents to attend the practitioner of their choice as needed. Systems support the regular replacement of residents’ oral and dental equipment. Monitoring occurs through quality processes, care plan reviews, stakeholder observation and feedback. Residents and representatives are satisfied with the staff approach to managing residents’ oral and dental health.

2.16 Sensory loss

This expected outcome requires that “care recipients’ sensory losses are identified and managed effectively”.

Team’s findings

The home meets this expected outcome

Staff are guided by established processes that identify, assess and evaluate care recipients’ sensory needs. Records show visiting specialist services attend the home regularly and provide advice in managing residents’ sensory losses. The living environment supports residents with sensory losses through design features such as wide corridors, handrails, easily accessible communal areas, appropriate lighting and the provision of a clutter free and quiet environment. Monitoring occurs through care plan reviews, stakeholder observation and feedback. Staff are aware of residents’ individual needs and those who require assistance to fit and clean their aids. Monitoring occurs through quality processes care plan reviews, stakeholder observation and feedback. Residents appreciate the support staff provide in minimising the impact sensory loss has on their lives.

2.17 Sleep

This expected outcome requires that “care recipients are able to achieve natural sleep patterns”.

Team’s findings

The home meets this expected outcome

The home’s clinical systems guide staff through the assessment, care planning and evaluation of residents’ individual needs so each resident can achieve natural sleep patterns. Sleep disturbances are noted in progress notes, reassessed, and changes to the sleep and settling regimes occurs. Staff are aware of residents’ individual settling routines and were observed to assist residents with rest periods throughout the day in accordance with residents’ wishes. Monitoring occurs through care plan reviews, observation and feedback. Residents said staff support and enable them to achieve natural sleep patterns through the identification of their individual needs and preferences.

Standard 3 – Care recipient lifestyle

Principle: Care recipients retain their personal, civic, legal and consumer rights, and are assisted to achieve control of their own lives within the residential care service and in the community.

3.1 Continuous improvement

This expected outcome requires that “the organisation actively pursues continuous improvement”.

Team’s findings

The home meets this expected outcome

The home has a continuous improvement system that demonstrates improvements in care recipient lifestyle. The continuous improvement system is described in expected outcome 1.1 Continuous improvement. Residents, representatives and staff are satisfied with the home's improvements in the area of care recipient lifestyle.

Improvement initiatives implemented by the home over the last 12 months in relation to Standard 3 Care recipient lifestyle include:

- Management have introduced a wellness program that incorporates an exercise group and the total distance walked is plotted on a map of Australia. When residents get to main towns on the map lifestyle staff do a presentation on the town. Management report residents have walked over 100,000 kilometres. Residents report a high level of satisfaction with this initiative.
- Management did a survey of residents of what they would love to do in their lifetime. Staff then reviewed this information and work with representatives to try to make it happen. Management report so far three residents have been able to complete activities from their list. A book is presented to the resident as a memento of the event.

3.2 Regulatory compliance

This expected outcome requires that “the organisation’s management has systems in place to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines, about care recipient lifestyle”.

Team’s findings

The home meets this expected outcome

The system used to identify and ensure compliance with all relevant legislation, regulatory requirements and professional standards is described in expected outcome 1.2 Regulatory compliance. Residents and representatives stated they are informed of residents’ rights and responsibilities.

Examples of responsiveness to regulatory compliance related to Standard 3 Care recipient lifestyle include:

- Policies, procedures and flowcharts are in place regarding reportable incidents such as elder abuse.
- The home has systems to demonstrate compliance related to residential agreements.
- The organisation has policies and procedures in regards to privacy of resident information.

3.3 Education and staff development

This expected outcome requires that "management and staff have appropriate knowledge and skills to perform their roles effectively".

Team's findings

The home meets this expected outcome

There is a system to ensure management and staff have the knowledge and skills to enable them to perform their roles effectively in relation to care recipient lifestyle. For details regarding the home's systems and processes, refer to expected outcome 1.3 Education and staff development.

Staff are satisfied with the ongoing education and support to develop their knowledge and skills in relation to care recipient lifestyle. Residents and representatives are satisfied management and staff have the appropriate knowledge and skills to maximise each resident's wellbeing.

Recent education relating to Standard 3 Care recipient lifestyle includes:

- emotional well being
- compulsory reporting and elder abuse
- privacy and dignity and confidentiality.

3.4 Emotional support

This expected outcome requires that "each care recipient receives support in adjusting to life in the new environment and on an ongoing basis".

Team's findings

The home meets this expected outcome

The home supports care recipients in adjusting to life in the home and on an ongoing basis. Assessment of residents' emotional support needs and preferences occur upon entry to the home and care plans are developed to meet their needs. Review of residents' emotional support needs occurs on a regular basis by nursing and lifestyle staff and care plans are updated as required. Residents and representatives are provided with a resident information directory to assist their orientation to the home and residents. Lifestyle staff run a formal one to one visiting program with the assistance of volunteers and the home is part of the community visitors' scheme. Residents and representatives confirmed their satisfaction with the initial and ongoing emotional support residents receive at the home.

3.5 Independence

This expected outcome requires that "care recipients are assisted to achieve maximum independence, maintain friendships and participate in the life of the community within and outside the residential care service".

Team's findings

The home meets this expected outcome

Residents are assisted to achieve maximum independence, maintain friendships and participate in the life of the community within and outside the home. Initial and ongoing assessment and care planning processes identify, assess and plan for residents' physical, social, cognitive and emotional needs. Strategies to maximise independence include supporting residents to visit local shops, freedom of movement within the home, taking residents by bus shopping and to do banking and the use of individual mobility aids. The

home welcomes visitors and maintains contact with local schools and community groups. Residents and representatives are satisfied residents' independence is actively promoted.

3.6 Privacy and dignity

This expected outcome requires that "each care recipient's right to privacy, dignity and confidentiality is recognised and respected".

Team's findings

The home meets this expected outcome

Staff respect care recipients' right to privacy, dignity and confidentiality. Staff practices are governed by organisational policies and procedures which detail residents' rights to privacy and dignity. Protecting your privacy is discussed in the information guide for residents. Staff describe appropriate practices to protect residents' privacy and dignity including knocking on doors, not discussing private information in public areas and calling residents by their preferred name. Monitoring processes include audits, stakeholder feedback and observation. Residents and representatives said staff respect residents' rights to privacy and dignity.

3.7 Leisure interests and activities

This expected outcome requires that "care recipients are encouraged and supported to participate in a wide range of interests and activities of interest to them".

Team's findings

The home meets this expected outcome

Care recipients are encouraged and supported to participate in a wide range of interests and activities. Staff complete an assessment on entry to the home and develop a care plan in consultation with residents and representatives. Staff regularly review lifestyle care plans to ensure currency. The program includes a wide range of activities that are advertised through a weekly calendar that is distributed to all residents and is displayed on notice boards. Management obtain feedback on the program via evaluations, meetings, direct feedback, forms, observation and through reviewing participation records. Residents and representatives are satisfied with the lifestyle program and confirm residents are able to participate in a range of activities at the home.

3.8 Cultural and spiritual life

This expected outcome requires that "individual interests, customs, beliefs and cultural and ethnic backgrounds are valued and fostered".

Team's findings

The home meets this expected outcome

The organisation values and fosters individual interests, customs, beliefs and the cultural and ethnic backgrounds. Staff identify residents' cultural and spiritual needs through the assessment process on entry to the home. There is provision for church services for residents at the home including regular Anglican and Catholic services and the Salvation Army by request from residents. There are special days held throughout the year and staff have access to culturally specific services via the internet and a cultural care kit to assist in meeting individual cultural needs as required. Residents and representatives are satisfied with the home's response to residents' cultural and spiritual needs.

3.9 Choice and decision-making

This expected outcome requires that "each care recipient (or his or her representative) participates in decisions about the services the care recipient receives, and is enabled to exercise choice and control over his or her lifestyle while not infringing on the rights of other people".

Team's findings

The home meets this expected outcome

There are processes in place that promote care recipients' right to exercise choice and control over their lifestyle. Residents and representatives are encouraged to participate in the assessment process. The home provides residents and representatives with regular meetings and compliment, comments and concern forms to provide feedback on the home. Management have an open door policy to ensure they are easily accessible if needed. Staff will support residents to manage their own financial affairs if required and management have a petty cash system in place. There is a wide range of activities on offer and residents can choose their participation levels. Residents and representatives stated their individual choices and decisions are encouraged, respected and supported by management and staff.

3.10 Care recipient security of tenure and responsibilities

This expected outcome requires that "care recipients have secure tenure within the residential care service, and understand their rights and responsibilities".

Team's findings

The home meets this expected outcome

The organisation has a system to ensure care recipients have secure tenure within the residential care service and understand their rights and responsibilities. Resident information covers security of tenure and residents' rights and responsibilities. The organisations client services manager discusses entry requirements and agreements with residents and representatives. Any change of rooms or facility will only occur after consultation with the resident and their representatives. The client services manager can clarify on an ongoing basis any residents' rights and responsibilities, security of tenure information or any financial questions. Residents and representatives said residents have secure tenure within the home and are aware of their resident's rights and responsibilities.

Standard 4 – Physical environment and safe systems

Principle: Care recipients live in a safe and comfortable environment that ensures the quality of life and welfare of care recipients, staff and visitors.

4.1 Continuous improvement

This expected outcome requires that “the organisation actively pursues continuous improvement”.

Team’s findings

The home meets this expected outcome

The home has a continuous improvement system that demonstrates improvements in the physical environment and in the area of safe systems. The continuous improvement system is described in expected outcome 1.1 Continuous improvement. Staff said ongoing improvements occur at the home. Residents and representatives are satisfied with the safety and comfort of the home’s environment.

Improvement initiatives implemented by the home over the last 12 months in relation to Standard 4 Physical environment and safe systems include:

- Following feedback received at a meeting that residents and representatives were not sure about what to do in the case of a fire. Management conducted formal fire training at a meeting for residents and representatives. Management report this training will be offered twice a year and is conducted by a fire training consultant. Residents and representatives report they are aware of the homes fire systems and would know what to do if they heard the fire alarm.
- Management have recently installed wireless systems throughout the home as well as a subscription based television service. Management report residents will be able to access the wireless system in their room to use the internet.

4.2 Regulatory compliance

This expected outcome requires that “the organisation’s management has systems in place to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines, about physical environment and safe systems”.

Team’s findings

The home meets this expected outcome

The system used to identify and ensure compliance with all relevant legislation, regulatory requirements and professional standards is described in expected outcome 1.2 Regulatory Compliance. Staff confirm compliance with safe working practices within the home.

Examples of responsiveness to regulatory compliance relating to Standard 4 Physical environment and safe systems include:

- Ongoing monitoring of the safety of fire safety systems by internal staff and external contractors.
- Chemicals are securely stored with current material safety data sheets.
- The home has an audited food safety programme and has appropriate auditing of kitchen systems.

4.3 Education and staff development

This expected outcome requires that "management and staff have appropriate knowledge and skills to perform their roles effectively".

Team's findings

The home meets this expected outcome

There is a system to ensure management and staff have the knowledge and skills to enable them to perform their roles effectively in relation to the physical environment and safe systems. For details regarding the home's systems and processes, refer to expected outcome 1.3 Education and staff development.

Staff are satisfied with the ongoing education and support to develop their knowledge and skills in relation to the physical environment and safe systems. Residents and representatives are satisfied management and staff have appropriate knowledge and skills to maintain a safe and comfortable environment.

Recent education relating to Standard 4 Physical environment and safe systems includes:

- 'STAR moves'
- chemical handling
- food safety.

4.4 Living environment

This expected outcome requires that "management of the residential care service is actively working to provide a safe and comfortable environment consistent with care recipients' care needs".

Team's findings

The home meets this expected outcome

The organisation has processes to assist in providing care recipients with a safe and comfortable environment consistent with their care needs. The home has single rooms with private ensuites. Residents are encouraged to personalise their rooms. Internal and external areas are available for the use of residents and their representatives. Maintenance of buildings, grounds and equipment is through regular servicing and maintenance programs by internal staff and external contractors. There are appropriate preventative and corrective maintenance programs. Residents and representatives said management provides a safe, secure, clean and comfortable living environment.

4.5 Occupational health and safety

This expected outcome requires that "management is actively working to provide a safe working environment that meets regulatory requirements".

Team's findings

The home meets this expected outcome

Management is actively working to provide a safe working environment to meet regulatory requirements. On commencement of employment, staff complete orientation that includes occupational health and safety. Policies and processes guide staff to understand their rights and responsibilities relating to occupational health and safety and notices with photographs identify relevant representatives. Management monitor the effectiveness of its occupational health and safety procedures through regular audits and review of incident forms.

Management and relevant stakeholders discuss and address any occupational health and

safety issues at staff meetings where occupational health and safety is a standing agenda item. The home ensures all equipment is subject to routine and preventative maintenance. Staff said they are able to recognise and report hazards or incidents and are satisfied they work in a safe environment.

4.6 Fire, security and other emergencies

This expected outcome requires that "management and staff are actively working to provide an environment and safe systems of work that minimise fire, security and emergency risks".

Team's findings

The home meets this expected outcome

Management and staff are actively working to provide an environment and safe systems of work that minimise fire, security and emergency risks. Management display evacuation diagrams, there is clear signage of emergency exits that are free from obstructions. Compulsory fire training occurs regularly at the home. The home has an annual essential safety measures report relating to fire systems. Service of firefighting equipment is by external contractors and chemicals are stored safely and securely in locked rooms. Staff secure the home in the evenings and there is backup lighting in case of a blackout. There are fire procedures that is accessible to all staff. Staff are comfortable with their roles and responsibilities relating to fire, security and other emergencies.

4.7 Infection control

This expected outcome requires that there is "an effective infection control program".

Team's findings

The home meets this expected outcome

The home has a robust system to prevent, identify, manage and contain infections. Staff collect, analyse and trend infection surveillance data on a monthly basis and if required strategies and interventions are subsequently implemented. Resident's own general practitioners direct the treatment of individual resident's infections and provision of immunisations. Outbreak guidelines, protective equipment, a food safety program, infectious waste disposal and pest control form part of the infection control program. Infection control education is well attended by staff. Staff stated identification and management of infections occurs quickly and effectively.

4.8 Catering, cleaning and laundry services

This expected outcome requires that "hospitality services are provided in a way that enhances care recipients' quality of life and the staff's working environment".

Team's findings

The home meets this expected outcome

Management has effective systems to enable the provision of catering, cleaning and laundry services that enhance residents' quality of life and the staff working environment. All food is prepared in a central kitchen onsite and meals are served directly to residents. Monitoring mechanisms in the kitchen include external and internal audits and reports and records of food temperature. The home has a four week menu that changes every season and is reviewed by a dietitian. Schedules are in place to ensure that cleaning tasks by cleaning staff are completed and the team observed the living environment and resident rooms to be clean during the visit. All personal laundry is completed onsite with all linen laundered through an offsite contractor and there are adequate linen services. All residents clothing is labelled and

staff have access to a labelling machine. The home has a system to manage lost property. Staff and residents are satisfied with the home's catering, cleaning and laundry services.