



Australian Government
Australian Aged Care Quality Agency

Reconsideration Decision

Baptcare - Hedley Sutton Community RACS ID: 3623

Approved Provider: Baptcare Ltd

Reconsideration of decision regarding the period of accreditation of an accredited service under section 2.19(1)(a) of the *Quality Agency Principles 2013*.

Reconsideration Decision made on 22 November 2017

Reconsideration Decision

An authorised delegate of the CEO of the Australian Aged Care Quality Agency has decided to vary the decision made on 20 May 2015 regarding the period of accreditation. The period of accreditation of the accredited service will now be 24 June 2015 to 24 January 2019.

Reason for decision

Under section 2.69 of the *Quality Agency Principles 2013*, the decision was reconsidered under 'CEO's own initiative'.

The Quality Agency is seeking to redistribute the dates for site audits for a number of services that have demonstrated consistent and sustained compliance with the Accreditation Standards to achieve a more level distribution of the timing of accreditation site audits over a three year period. More information is available on our website at <http://www.aacqa.gov.au/publications/news-and-resources/redistribution-of-aged-care-accreditation-program>.

The Australian Aged Care Quality Agency will continue to monitor the performance of the service including through unannounced visits.

This decision is effective from

22 November 2017

Accreditation expiry date

24 January 2019



Australian Government

Australian Aged Care Quality Agency

Baptcare - Hedley Sutton Community

RACS ID 3623
19 Canterbury Road
CANTERBURY VIC 3126
Approved provider: Baptcare 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 24 June 2018.

We made our decision on 20 May 2015.

The audit was conducted on 14 April 2015 to 15 April 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



Australian Government

Australian Aged Care Quality Agency

Audit Report

Baptcare - Hedley Sutton Community 3623

Approved provider: Baptcare Ltd

Introduction

This is the report of a re-accreditation audit from 14 April 2015 to 15 April 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 14 April 2015 to 15 April 2015.

The audit was conducted in accordance with the Quality Agency Principles 2013 and the Accountability Principles 2014. The assessment team consisted of three 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:	Colette Marshall
Team members:	Jordan Galea
	Tracy Findling

Approved provider details

Approved provider:	Baptcare Ltd
--------------------	--------------

Details of home

Name of home:	Baptcare - Hedley Sutton Community
RACS ID:	3623

Total number of allocated places:	100
Number of care recipients during audit:	97
Number of care recipients receiving high care during audit:	N/A
Special needs catered for:	No

Street:	19 Canterbury Road	State:	Victoria
City:	Canterbury	Postcode:	3126
Phone number:	03 9834 4000	Facsimile:	03 9882 2389
E-mail address:	bquigley@baptcare.com.au		

Audit trail

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

Interviews

	Number		Number
Management	6	Care recipients/representatives	24
Facility manager	1	Administration staff	2
Clinical and care	11	Hospitality and environmental staff	6
Lifestyle/pastoral and volunteer staff	5		

Sampled documents

	Number		Number
Care recipients' files	16	Medication charts	10
Resident agreements	7	Personnel files	9

Other documents reviewed

The team also reviewed:

- Compliments/complaints/suggestions records
- Continuous improvement plan and associated documentation
- Dietary documents and menu
- Education documentation
- Emergency procedures manual
- Essential services schedules, service reports and monitoring processes
- Food safety plan and associated documentation
- Human resource documentation
- Incident reports/summary data and analyses
- Lifestyle documentation
- Maintenance documentation
- Meeting minutes
- Newsletters
- Policies and procedures
- Re-accreditation notification to stakeholders
- Regulatory compliance documentation
- Resident and staff information handbooks
- Self-assessment documentation
- Vision, mission, values statement.

Observations

The team observed the following:

- Activities in progress
- Charter of residents rights and responsibilities
- Equipment and supply storage areas
- Fire equipment, signage and evacuation kits
- Infection control equipment
- Interactions between staff and care recipients
- Internal and external complaint and advocacy information
- Living environment
- Meal and refreshment services
- Noticeboards, information displays and suggestion box
- Security system
- Short group observation in dining room.

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

Management actively pursues continuous improvement. Management and staff welcome and encourage input from all stakeholders and use it to improve resident care and lifestyle. Feedback, risk management, key performance indicators, audits, reviews, meetings, legislation updates and system reviews all feed into the system. Improvement initiatives are actioned, delegated, monitored and evaluated through an electronic register. Staff, residents and other stakeholders discuss continuous improvement at relevant meetings. Evaluation occurs regularly through follow up audits, analysis of data and monitoring of feedback. Staff and residents said management are committed to continuous improvement.

Recent improvements in relation to Standard 1 – Management systems, staffing and organisational development include:

- The organisation has introduced an electronic incident reporting system. The system facilitates and records information from the initial event through to formal investigation and closure. The system notifies key staff via email, depending on the severity. Management said the new system facilitates timely action and assists in data analysis.
- As part of the organisation's strategic planning, a new e-learning online induction and professional development system is now in place. The system provides comprehensive industry educational modules that allow managers to monitor staff progress and completion. Management said the systems is more flexible and provides staff with consistent information.
- In response to residents increasing complex health needs, management reviewed the staffing levels and skill mix, resulting in an additional registered nurse rostered on the afternoon shift. Representatives have reported satisfaction with the increased access to registered nurses and management report improved quality of clinical care.

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 systems to identify and ensure compliance with relevant legislation, regulatory requirements, professional standards and guidelines. Corporate representatives monitor changes to regulations and disseminate necessary information and procedure amendments to managers as required. Audits and internal and external reviews ensure

compliance with regulatory obligations. Staff are aware of their regulatory responsibilities relevant to their roles. The home notifies residents and representatives of any relevant changes to legislation.

Regulatory compliance at the home relating to Standard 1 - Management systems, staffing and organisational development includes:

- There is a process to ensure currency of police certificates for staff, volunteers and contractors.
- There is an effective process to manage statutory declarations for staff, volunteers and contractors.
- There is accessible information on external complaint and advocacy services.
- Management informed residents and representatives of the re-accreditation audit.

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 home has an education program that ensures management and staff have appropriate knowledge and skills to perform their roles. The organisation provides an overarching education calendar, which is adapted at site level to allow management to add additional topics in response to feedback, clinical indicator data, audit results and changes in resident needs. The home offers a range of education topics delivered through practical sessions, online modules, competencies and external workshops. All staff complete and participate in mandatory education at induction and on an annual basis. Attendance records are kept and sessions are evaluated. Staff are satisfied with the training and development opportunities offered.

Education relating to Standard 1 - Management systems, staffing and organisational development includes:

- Customer service
- Documentation
- Electronic incident reporting system
- Financial purchasing system
- Quality forum
- Strategic direction presentation.

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

Care recipients, representatives and other stakeholders have access to internal and external complaint mechanisms. External complaint brochures are available throughout the home in various languages and this information is contained in resident packs. Comments and

complaints may be anonymous and a suggestion box is available. Feedback is actioned appropriately and in a timely manner. Management welcome and encourage feedback and incorporate it into their continuous improvement system. Residents and representatives are satisfied with the complaint process.

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 consistently documents and prominently displays the vision, mission, philosophy and core values. Management and staff have a commitment to providing residents with a high standard of quality care and service.

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 home has appropriately skilled and qualified staff to meet care recipients' needs and lifestyle preferences. Management follow standardised recruitment, selection and orientation procedures including qualifications, police certificate and reference checking. Management monitor the roster to ensure the appropriate level and skill mix of staff reflects residents' clinical and leisure needs. Staff are aware of the requirements of their position through position descriptions and guided by policies and procedures. The home monitors and maintains the skill level of staff through the education program, competencies and annual appraisal system. Staff said the level and skill mix of staff is appropriate for residents' needs. Residents are satisfied with the responsiveness of staff and quality of care provided.

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

There are systems to ensure stocks of appropriate goods and equipment are available. Management and key staff purchase consumables using a structured order cycle and maintain adequate stock holding levels. Management and staff identify equipment needs through review of care needs, stakeholder feedback, meetings, data analysis and observations. Newly purchased equipment is trialled, tested and evaluated on site prior to final purchase. Goods are stored safely in a variety of secure areas and stock rotation of goods occurs. There is a preventative and reactive maintenance program including electrical testing and tagging. Staff, residents and representatives said they are satisfied with the availability 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

There are effective information management systems in place. Management and staff have access to information that is accurate and appropriate to their roles. The home's clinical and operational documentation system is accurate, current and accessible to relevant staff. Residents and representatives are provided with information on entry to the home including a handbook and resident agreement. Ongoing information is provided through noticeboards, care consultations and meetings. Processes to keep staff informed include position descriptions, policies and procedures, education, meetings and electronic mail. Key data is routinely collected, analysed and made available to the relevant staff. Confidentiality and security of staff and resident information is maintained. Computerised information is backed up regularly and archived material is stored securely either on or offsite. Staff, residents and representatives said they are kept informed of the home's operations.

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

The home's management incorporates processes to ensure externally sourced services meet the home's service needs and quality objectives. Management maintain service agreements with a wide variety of external service providers. Contractors provide evidence of qualifications, certifications and insurances as part of the contractual arrangement. Management has processes to ensure external service providers meet their contracted obligations as scheduled. Management monitors the quality of services through the home's feedback processes and meeting forums. Management, staff, residents and representatives said they are satisfied with external services provided in the home.

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 system to support the pursuit of continuous improvement in relation to health and personal care. A range of audits and clinical indicator data is used to monitor performance and identify improvement opportunities in this area. Refer to expected outcome 1.1 Continuous improvement for details of the home's continuous improvement systems and processes.

Recent improvements undertaken in relation to Standard 2 – Health and personal care include:

- In response to feedback that residents on modified diets would like more variety, management have introduced pre-packaged thickened beverages and food products. There is a range of different beverages and food products available in an assortment of flavours and varying thicknesses. Management said they now know staff are providing the correct consistency in a uniform and reliable manner. Residents are satisfied with the increased variety.
- As part of the home's commitment to improve resident care, management implemented an advanced care planning program. The program includes extensive staff training and a range of tools to accurately capture and implement residents' future medical and health care choices. Management and staff report the new program promotes comfort, enables family involvement, accommodates spiritual and cultural beliefs and recognises an individual's right to live and die with dignity.

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

Management have a system to identify and ensure compliance with their regulatory requirements in relation to care recipients' health and personal care. Refer to expected outcome 1.2 Regulatory compliance for details of the home's processes.

Regulatory compliance at the home relating to Standard 2 – Health and personal care includes:

- Registered nurses oversee and manage resident care planning and specialised care.
- Professional registrations of staff are monitored and maintained.
- Medication management and storage is according to policy requirements.
- There is a policy and procedure for unexplained absence of a resident with appropriate reporting and notification processes.

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

Management and staff have appropriate knowledge and skills to perform their roles in relation to health and personal care. Staff are required to complete a range of clinical competencies and management encourage and support further education. Staff are satisfied with the education and training opportunities provided. Refer to expected outcome 1.3 Education and staff development for information regarding the home’s education system and processes.

Education relating to Standard 2 – Health and personal care includes:

- Continence management
- Diabetes management
- Medication administration
- Nutrition and hydration
- Palliative care.

2.4 Clinical care

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

Team’s findings

The home meets this expected outcome

Care recipients receive clinical care appropriate to their needs and preferences. Registered nurses undertake assessment and care planning in consultation with the resident, their representative, medical practitioners and other health professionals when residents move into the home. Evaluation of the effectiveness of care provided occurs on a regular basis in consultation with the resident and their representative. There are effective processes to communicate resident care needs and changes to health to relevant staff. Clinical incidents are reviewed and evaluated by relevant health professionals and changes to resident care is implemented as required. Residents and representatives are satisfied that care is provided according to residents’ needs and preferences.

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

Care recipients’ specialised nursing care needs are identified and met by appropriately qualified nursing staff. Specialised care plans are developed and outline interventions and monitoring for staff to follow. Registered nurses review and evaluate outcomes of care in consultation with medical practitioners and a range of other health professionals. Residents and representatives are satisfied with how specialised care is undertaken.

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

Care recipients are referred to appropriate health specialists in accordance with their assessed needs and preferences. Medical practitioners visit residents regularly and on an as needs basis and other health professionals provide services on site including physiotherapy, podiatry, dietitian and speech pathology. Dental, hearing, and eye care services are provided on site or residents attend outside appointments according to their choice and preference. Referral to medical specialists outside the home occurs as needed and information regarding changes to treatment and care are followed. Residents and representatives are satisfied with the home’s process for referral to health specialists according to needs and preferences.

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

Care recipients’ medication is managed safely and correctly. Nurses undertake or supervise medication administration and competency training is completed. Nursing staff and medical practitioners monitor resident medication usage and effectiveness. There is an audit system which evaluates specialised medication and analgesia use on a monthly basis. Medications administered on an as needs basis are evaluated for effectiveness. The system for regular and urgent medication supplies is effective and occurs in a timely manner. Medications are stored in secure and safe areas according to policy requirements. Medication incidents are evaluated and review is undertaken accordingly. There are systems in place to monitor the effectiveness of the medication system. Residents and representatives are satisfied with how staff undertake medication administration.

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

Pain management practices used at the home enable all care recipients to be free as possible from pain. Care processes for pain management include assessment of pain history, the presence of pain and effectiveness of current or previous therapies. Assessment tools include verbal and non-verbal signs of pain. There is a pain management program for residents with chronic pain which provides a range of pain management strategies including heat packs, massage and analgesia. There is evaluation of the effectiveness of pain management treatments and adjustments are made as required. Residents and representatives are satisfied with pain management treatments used at the home.

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

The comfort and dignity of terminally ill care recipients is maintained. Advanced care plans outline resident choices for when the end of life stage approaches and palliative care plans define care needs and preferences for treatment options. Consultation with the resident, representative, medical practitioner and other health professionals occurs to allow effective care provision that meets resident choice and preference. There is access to a palliative care support service if required and staff described care measures they undertake when caring for terminally ill residents including comfort and dignity measures.

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

Care recipients receive adequate nourishment and hydration and there are effective processes to support resident choice and preference. Assessment of nutritional status includes dietary requirements, medical conditions, personal preferences and allergies. Residents at risk of poor nutrition and hydration are identified through specific assessments such as weight monitoring and poor dietary intake. There are effective referral and review mechanisms in place for the dietitian and speech pathologist and supplements and specialised diets are provided as required. There is an effective communication process to inform catering staff of resident dietary plans including variations. Residents and representatives are satisfied with the provision of nutrition and hydration and assistance given to residents with meal and refreshment services.

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

Care recipients’ skin integrity is consistent with their general health. Skin care plans outline residents’ individual care needs and includes assessment of nutrition, continence and mobility status. Staff monitor the condition of residents’ skin and maintain skin integrity through the application of moisturisers, routine repositioning and use of pressure relieving devices. Nurses undertake and evaluate wound care treatment and external specialists assist with the management of complex wounds. The incidence of skin injuries is monitored through the incident reporting system. Residents and representatives are satisfied with how staff attend to skin care.

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’ continence is managed effectively. Assessments include triggers and health conditions which may affect continence and care plans outline individual support to maintain or restore continence. Approaches used to optimise healthy continence include dietary and fluid intake, effects of medication and existing or new illness. Residents and representatives are satisfied with how staff manage continence and maintain privacy and dignity when providing assistance.

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 needs of care recipients with challenging behaviours are managed effectively. Behaviour care plans outline individual triggers and intervention strategies. This includes evaluation of treatment plans in consultation with medical practitioners, external specialists and the lifestyle team. Referral to psychogeriatric services occurs as required. The lifestyle program includes activities for residents with behavioural problems and dementia related illness which are personalised to meet the specific needs of each resident. Residents and representatives are satisfied staff manage behaviours in a caring and supportive manner.

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

Optimum levels of mobility and dexterity are achieved for all care recipients. Care plans outline measures to maintain and promote mobility and dexterity according to resident capabilities and include falls prevention strategies. The environment of the home promotes independent mobility for residents using assistive equipment. Residents are reviewed by the physiotherapist or occupational therapist after a fall and there is a range of falls prevention equipment in use. Review and analysis of falls data enables revision of prevention strategies used throughout the home. Residents and representatives are satisfied mobility and dexterity is actively encouraged and staff provide suitable assistance.

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

Care recipients’ oral and dental health is maintained according to needs and preferences. Care plans include details about daily care of teeth, mouth and dentures and level of assistance required by the resident. Dental appointments are arranged as required and

dental products are replaced according to a schedule or as required. Residents and representatives are satisfied with the level of oral and dental care provided by staff.

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

Care recipients’ sensory losses are identified and managed effectively. Care plans outline sensory support needs to optimise communication, touch, taste and smell. Referral to other health professionals such as audiologists and optometrists occurs as required. Staff assist residents with use of hearing, visual and other aids and routine checks of the working condition of aids occurs on a regular basis. Residents and representatives are satisfied residents receive assistance to optimise their communication and other sensory needs.

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

Care recipients are assisted to achieve natural sleep patterns. Staff assist residents to adopt their preferred sleep pattern when they move into the home and provide suitable assistance as required. Residents select their individual preferences for settling and rising time and sleep promotion comforts they may wish to use. Residents said the home is quiet at night and staff provide assistance as needed and according to their 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 system to support continuous improvement in relation to care recipients’ lifestyle. A range of audits, surveys and meetings are used to monitor performance and identify improvement opportunities in this area. Staff incorporate resident feedback into the lifestyle program. Refer to expected outcome 1.1 Continuous improvement for details of the home’s continuous improvement system and processes.

Recent improvements in relation to Standard 3 – Care recipient lifestyle include:

- In an effort to support and welcome new residents, staff conduct introductory evening sessions. Management invite all new residents and representatives to attend the sessions where they can meet others, ask questions and hear about life at the home including pastoral care services. Residents and representatives have expressed deep appreciation for the opportunity to connect with others.
- The home identified the need to modify spiritual services to cater for residents with diminished ability to maintain concentration. As a result, the home implemented small group devotional services which preserve residents’ spiritual connections. Staff conduct the services in the chapel area in front of the communion table and involve the use of background religious music, a prayer offering and a short reading. Residents now have a greater opportunity to maintain connections with their spiritual background.
- In response to an identified need to provide male residents with an opportunity to debrief and discuss end of life topics the Chaplain conducts a monthly men’s group. Residents said the group is beneficial and is a great addition to the activities program.

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

Management have a system to identify and ensure compliance with their regulatory requirements in relation to care recipients’ lifestyle. Refer to expected outcome 1.2 Regulatory compliance for details of the home’s processes.

Regulatory compliance at the home relating to Standard 3 – Resident lifestyle includes:

- Policies are available to guide staff practice to manage allegations of elder abuse, including a consolidated register for compulsory reporting.
- The Charter of residents’ rights and responsibilities is on display.
- Residents and their representative are offered an agreement on entry which includes secure tenure information.

- The home demonstrates its obligations to meet privacy legislation.

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

Staff have the appropriate knowledge and skills to perform their roles in relation to care recipients' lifestyle. Refer to expected outcome 1.3 Education and staff development for information regarding the home's education system and processes.

Education undertaken relating to Standard 3 – Resident lifestyle includes:

- Confidentiality
- Debrief and reflection
- Elder abuse and mandatory reporting
- Gender and sexuality in aged care
- Laughter yoga session.

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

Each care recipient receives support in adjusting to life in the new environment and on an ongoing basis. Staff provide an orientation and additional emotional support to residents on their arrival at the home. Assistance from lifestyle staff, a music therapist and onsite chaplains offer guidance and ease the transitioning period for residents and their representatives. Key staff assess residents' emotional needs and preferences and create care plans to meet specific needs updating strategies as required. Staff encourage resident participation with activities to promote and support socialisation. Volunteer programs further support residents who wish to access personalised companionship services. The home offers religious support to residents and a community based visitor scheme stimulates socialisation. Residents and representatives are satisfied with how staff meet residents' emotional support needs.

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

Staff support care recipients to remain as independent as possible and to maintain friendships both within the home and the wider community. Individual residents' social, sensory, physical, cognitive and financial independence are assessed and care plans are

developed and reviewed regularly. Staff support and encourage residents to participate in social activities according to their preferences and abilities. Intergenerational programs within the wider community promote freedom of independence. Management arrange extra support to residents through the volunteer program. Residents and representatives said they are satisfied how staff encourage and support residents achieve optimum independence.

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

Management and staff ensure each care recipients' right to privacy, dignity and confidentiality is recognised and respected. Resident and staff handbooks feature residents' right to privacy, dignity and confidentiality. Staff respect resident privacy and dignity by knocking on doors prior to entering resident rooms, addressing residents by their preferred name, and during personal care. Observations, feedback, education and audits assist with monitoring and improving resident's privacy and dignity. Residents and representatives said they are satisfied how staff respect residents' privacy, dignity and confidentiality.

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 range of activities, and can provide input into programs. Staff identify each residents' leisure and activity interests using assessment tools to reflect past and current leisure interests. Care plans based on residents' assessed goals and preferences allow staff to create and shape individual leisure interests and activities. Staff review care plans regularly and according to changing needs. The activity program offers group and individualised activities reflecting residents' social, emotional, physical, cognitive, sensory and cultural needs. Weekly and bi-monthly newsletters promote activities and offers short stories and articles. Staff monitor effectiveness through audits, care plan reviews, stakeholder feedback, meetings and activity evaluations. Residents and representatives are satisfied with the range of activities available.

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

Staff foster and value care recipients' interests, customs, beliefs and differing cultural backgrounds. On entry, key staff consult with the resident or their representatives regarding opportunities to maintain residents' spiritual and cultural life in the home. Care plans outline individual needs and preferences for staff to follow and update as care needs change. Chaplain services offer extensive one-on-one and group sessions optimising spiritual needs and personal support. A wide range of cultural and personal celebrations are included in the

lifestyle program according to the preferences of residents and their families. Residents and representatives said they are satisfied how cultural and spiritual life is valued and fostered.

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

Care recipients and their representatives are encouraged and supported to participate in choice and decision making opportunities concerning care and services. Residents have their choice of doctors, pharmacy, health and personal care, lifestyle activities and allied health specialists including food and beverage selections. Residents and their representatives are encouraged to provide feedback about choices and decisions through the home's feedback mechanisms. Review of care plans in consultation with residents or their representatives provide opportunities to update individual choices and preferences. Residents and representatives said staff, recognise and respect residents' preferences and choices.

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

There is a system to ensure care recipients understand their rights and responsibilities and secure tenure. On entry to the home key personnel discuss and provide information to residents and representatives about security of tenure, rights, responsibilities, fees, additional services and specified care. Management offer an agreement to each resident or representatives. If a room change is to occur planned consultations take place. Management offer ongoing assistance to residents and representatives regarding security of tenure through meetings, consultations and letters outlining legislative or organisational variations. The 'Charter of residents' rights and responsibilities' is prominently displayed and reflected in residential agreements and a range of documentation. Residents and representatives expressed an understanding and satisfaction of secure tenure at the home.

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

Management actively pursues continuous improvement to ensure care recipients live in a safe and comfortable environment. A range of audits and occupational health and safety data is used to monitor performance and identify improvement opportunities in this area. Refer to expected outcome 1.1 Continuous improvement for details of the home’s continuous improvement system and processes.

Recent improvements in relation to Standard 4 – Physical environment and safe systems include:

- Following resident feedback about the catering and dining experience, management have appointed a concierge manager, introduced a ‘bain-marie’ lunch service, table cloths, floral placemats and staggered meal times. Residents and representatives are satisfied with the improvements.
- The home has completed an extensive garden renovation to enhance the living environment. Residents had input into the garden design that included dedicated garden beds for growing vegetables and other edibles. Residents and representatives are satisfied with the renovated garden areas.
- The organisation has introduced a new manual handling program. The new program encompasses an assessment tool for evaluating risks associated with manual handling and a ‘train the trainer’ model. Staff trainers, who completed a three-day workshop, have trained staff onsite including practical implementation of safe manual handling and lifting techniques during shifts. Staff are satisfied with the new program. Management report a significant reduction in overall ‘lost time injuries’ across the organisation.

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

Management has systems to identify and ensure compliance with relevant regulations to ensure a safe and comfortable environment for care recipients and staff. Refer to expected outcome 1.2 Regulatory compliance for more information about the home’s systems and processes.

Regulatory compliance at the home relating to Standard 4 – Physical environment and safe systems includes:

- Chemicals are stored appropriately with accompanying material safety data sheets.
- The kitchen has a current food safety program and certifications by external authorities.

- Effective monitoring and maintenance of the fire safety and emergency system including compliance with essential service safety measures.
- The home adheres to occupational health and safety policies.
- There are infection control guidelines to minimise the risk of infection including during outbreaks.

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

Management and staff have the appropriate knowledge and skills to provide a safe and comfortable environment for care recipients. Staff attend annual mandatory training and are confident of their skills in the event of an evacuation or infectious outbreak. Refer to expected outcome 1.3 Education and staff development for information regarding the home's education system and processes.

Education undertaken in relation to Standard 4 – Physical environment and safe systems includes:

- Back attack training (manual handling)
- Fire and emergency training
- Food safety
- Infection control
- Occupational health and safety induction and refresher.

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

Management actively work to ensure the living environment is safe and comfortable for care recipients. Residents are accommodated in spacious single rooms with en-suite bathrooms. The home has several wings with lounge and dining areas with well-appointed furnishings and décor. There are smaller retreat corners and outdoor courtyard spaces. There is a full service café for resident and visitor use. Heating and cooling systems ensure comfortable temperatures are maintained. There is a corrective and preventative maintenance program. Management and key staff monitor the comfort and safety of the living environment through observations, audits, and risk management data. Residents and representatives said they are satisfied with the 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 that meets regulatory requirements. Management inform staff of occupational health and safety responsibilities through policies and procedures, meetings, information handbooks, orientation and education programs. There are health and safety representatives who attend accredited external training and a workplace safety committee meets on a regular basis. Management monitor occupational health and safety through review of incident and hazard reports and evaluation of maintenance and workplace audits. Staff said they can confidently report incidents and hazards and have appropriate equipment promoting safe work practices. Staff are satisfied management work actively to create a safe work environment and are responsive to any issues raised.

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 maintain a safe environment that minimises fire, security and other emergency risks. Staff have access to documented emergency procedures and there is an emergency evacuation kit. An accredited external contractor regularly monitors and maintains fire safety and emergency equipment. Management maintains keypad security, a manned reception operates during business hours and night duty staff secure the home during the evening. Management and staff are responsive to fire training and drills that involve all stakeholders of the home. Staff follow emergency procedures and said they attend mandatory fire training during orientation and on an ongoing basis. Residents said they feel confident staff can assist them in emergency situations.

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

There is an effective infection control program. Infection surveillance is undertaken and results are evaluated by key clinical staff and discussed at relevant staff meetings. Infection control policies and procedures are available including outbreak management. Staff have access to personal protective equipment, hand hygiene equipment and there is a waste disposal system. Residents are offered vaccinations in consultation with their doctors and staff immunisation is promoted by management. There is a pest control program and environmental inspections occur regularly. There is a current food safety plan and hospitality staff follow cleaning schedules. Management and staff discuss and promote the importance of effective infection control practices within the home.

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

Hospitality services enhance care recipients' quality of life and the staff's working environment. Resident meals and snacks are freshly prepared on site in accordance with the home's food safety program. Catering staff understand and meet residents' individual nutrition and hydration requirements, allergies and preferences. A rotating seasonal menu offers residents meal and beverage choices including cultural options. All linen and residents' personal clothing are laundered in-house and there are processes to label resident clothing and minimise lost property. Cleaning services are completed according to set schedules. Chemicals are stored securely and safely with corresponding material safety data sheets. Residents and representatives said they are satisfied with the delivery of hospitality services.