



Aged Care
Standards and Accreditation Agency Ltd

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 2015.

We made our decision on 30 April 2012.

The audit was conducted on 27 March 2012 to 28 March 2012. 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	Accreditation 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	Accreditation 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		Accreditation 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		Accreditation 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



Aged Care
Standards and Accreditation Agency Ltd

Site Audit Report

Baptcare - Hedley Sutton Community 3623

Approved provider: Baptcare Ltd

Introduction

This is the report of a site audit from 27 March 2012 to 28 March 2012 submitted to the Accreditation Agency.

Accredited residential aged care homes receive Australian Government subsidies to provide quality care and services to residents 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, resident 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 a site 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 Accreditation 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

Site audit report

Scope of audit

An assessment team appointed by the Accreditation Agency conducted the site audit from 27 March 2012 to 28 March 2012

The audit was conducted in accordance with the Accreditation Grant Principles 2011 and the Accountability Principles 1998. 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 1997.

Assessment team

Team leader:	Gerard Barry
Team members:	Kye Tan
	Bridgit Lane

Approved provider details

Approved provider:	Baptcare Ltd
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Details of home

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

Total number of allocated places:	100
Number of residents during site audit:	99
Number of high care residents during site audit:	96
Special needs catered for:	Percutaneous endoscopic gastrostomy feeding.

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	4	Residents	6
Nurses/care/lifestyle	12	Representatives	14
Hospitality/environment/safety	11	Allied health/administration	5

Sampled documents

	Number		Number
Residents' files	14	Medication charts	10
Summary/quick reference care plans	14	Residents' lifestyle care plans	11
Resident agreements	10		

Other documents reviewed

The team also reviewed:

- Activity calendar
- Agency orientation information
- Audits and surveys
- Bowel folder
- Care documentation
- Catering records
- Cleaning communication folder
- Communication diary
- Competency tests
- Dietitian referral folder
- Education records
- Essential services records
- External contractors' service agreements
- Foot care folder
- Frequent observations folder
- Handover sheets
- Improvement logs
- Incident reports
- Infection notification report
- Inventory stock folder
- Laundry work practices
- Maintenance records
- Medication documentation
- Menu
- Minutes of meetings
- Nutrition folder
- Physiotherapy folder
- Plans for continuous improvement and related information
- Position descriptions
- Preventive maintenance service agreement
- Professional registration folder

- Residents' information package and surveys
- Selected policies and procedures
- Specialised nursing folder
- Staff handbook
- Wandering charts
- Wound folder

Observations

The team observed the following:

- Activities in progress
- Cleaning in progress
- Equipment and supply storage areas
- Essential services and emergency equipment
- Hand washing basins and posters
- Interactions between staff and residents
- Living environment
- Meal service
- Medication administration/storage
- Mobility aids
- Noticeboards and displayed information
- Oxygen equipment
- Personal protective equipment
- Staff education notices
- Storerooms

Assessment information

This section covers information about 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 residents, 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

Hedley Sutton Community (the home) is part of a charitable organisation known as Baptcare. This organisation supports the home with resources including senior personnel, equipment, policies and procedures and system management. The quality system, of which continuous improvement is a part, is largely based upon a risk management process. The quality management system consists of a number of registers recording resident incidents, complaints, hazards, clinical care aspects, audits and suggestions. Staff log complaints into a continuous improvement register; if the concern cannot be resolved promptly they send it to the continuous improvement plan. The continuous improvement plan also contains strategic and operational issues aligned to the needs of the residents. The home monitors its quality system through an internal auditing process with corrective actions recorded in the continuous improvement register. All improvement activities are registered, progress monitored and actions evaluated to confirm successful completion. Management discusses continuous improvement at all meetings to keep stakeholders aware of the operational issues within the home.

Recent improvements relative to Standard one include:

- Following changes to the Aged Care Complaints Scheme the home advised all stakeholders of the changes and updated all resident/staff handbooks. The home also updated posters and information brochures displayed in the home. The actions taken were to maintain regulatory compliance but also to ensure stakeholders could access correct information.
- The home sent five staff members to a staff conference. The conference was about becoming “brand ambassadors” for Baptcare. Staff stated it had been a valuable and entertaining event. The home considered it a worthwhile exercise to publicise their work and to maintain staff morale.
- A staff suggestion that the management of towels delivered to the units required upgrading resulted in a review with laundry services. Management found that more towels were required to prevent the units running short and purchased 200 extra towels. Management, in consultation with laundry staff, implemented a system detailing how many towels laundry services were to deliver to each wing each morning. Staff are satisfied with the number and quality of towels.

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

Baptcare's central office identifies relevant legislation, regulatory requirements, professional standards and guidelines across all four Accreditation Standards, and notifies the home's management accordingly. This central office uses a commercial update service, peak bodies, publications and government communiqués to maintain currency. Corporate management reviews and amends policies and procedures in response to legislative changes while the home audits the system for continued compliance. The home informs stakeholders of updates through memoranda and meetings and occasionally through education sessions. Management provided examples of regulatory compliance relevant to Standard One including a process to ensure relevant staff, volunteers and contractors have current police checks. Staff said they were aware of their regulatory compliance responsibilities.

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 educational program that ensures management and staff have the knowledge and skills required for effective performance relating to the Accreditation Standards. An annual calendar schedules mandatory and relevant topics that reflect suggestions from staff and current residents' needs. Management monitors attendance records and evaluates sessions for effectiveness. Staff undertake appropriate competencies to ensure practices are consistent with policies. The home provides training online and on-site and management encourages and supports staff to attend external courses/conferences to increase their skills and qualifications. To broaden staff learning and exposure, management hosted an international gerontological conference workshop. Staff stated they are satisfied with the educational opportunities offered to them at the home.

Education conducted relating to Standard one includes:

- documentation and care planning
- human resources program
- office manager study day
- the funding instrument and e-case study.

1.4 Comments and complaints

This expected outcome requires that "each resident (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

Documentation showed the home records, actions and monitors concerns, suggestions and compliments through their continuous improvement system. The home explains its system in the residents' information pack. Information brochures explaining the external complaint system are also available in the home in various languages. Residents and their

representatives can use the improvement form or they can verbally explain their concerns to the staff. We observed examples of stakeholder concerns having been recorded and actioned within the system. Residents told us they prefer to raise concerns directly with management. We observed that representatives were more likely than residents to use the formal written system for notifying management of their 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 home follows and displays the vision and mission statements that Baptcare's corporate body has documented. Facility managers meet and report to senior management monthly on operational and strategic matters. Central office can directly access the home's registers to have timely updates on performance and incidents. The corporate body issues policies and procedures and adds legislative changes to the intranet to allow access to all staff. The home's management is responsible for staff performance and operational issues.

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

There are systems and practices to ensure that the home employs appropriately skilled and qualified staff to meet residents' care needs in accordance with the homes' goals. Recruitment processes include interview, criminal checks, qualifications, registrations and reference checks. Position descriptions and policies/procedures inform and guide staff in areas of resident care and professional development. New staff attend an orientation program and management partners them with experienced staff for one or more shifts. Management performs appraisals at the completion of the probationary period and then annually. Staff confirmed satisfaction with the ongoing training and support they receive from management. Residents and representatives stated they were satisfied with the level of care provided by staff and the availability of care staff to meet residents' needs.

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 demonstrated an effective system to ensure goods and equipment are available for appropriate service delivery. Selected personnel monitor stock levels and reorder supplies from a list of approved suppliers. Effective reactive and preventive maintenance takes place in a timely manner and electrical equipment is tested and tagged for safety. Purchase of goods and services takes into consideration any special needs of the current resident population. New equipment is trialled prior to purchase, with staff receiving

appropriate training in its use. Equipment, supplies and chemicals are securely stored with access restricted to authorised personnel. Residents and staff stated adequate supplies of appropriate goods and equipment were available at all times.

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

The home has strategies to ensure staff have access to current information for the delivery of appropriate services. Management provides staff with position descriptions, duty lists, policies/procedures relevant to their departments. Management distributes new information through meetings, email, communication books, handover sheets, care plans and progress notes. The home's computer system is password protected with restricted levels of access. Confidential documents relating to resident and staff are securely stored, archived or destroyed according to regulations. Residents and representatives receive information on activities. Clinical staff conduct case management through case conferences as needed. Staff, residents and representatives were satisfied with their level of access to relevant information provided at the home.

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 has effective processes to ensure externally sourced services meet quality and service requirements. Formal agreements include police clearance, qualifications, confidentiality and expected service levels. Management reviews contracts regularly to monitor compliance. Suppliers receive online induction, registration and undergo orientation to the home. Staff, residents and representatives provide direct feedback while audits, surveys and observations monitor satisfaction. A list of preferred service providers is available and staff have access to after hour's emergency numbers. Staff and residents were satisfied with the currently sourced external suppliers.

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.

2.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

For details on the home's continuous improvement system refer to expected outcome 1.1 Continuous improvement. Management encourages staff to complete quality improvement requests for any of their initiatives. Staff are also encouraged to complete the comments and complaints forms for issues residents may have verbalised to them. Staff confirmed management keeps them informed of improvement activities.

Recent improvements relative to Standard two include:

- As a result of obtaining a new syringe driver, management made available to staff an on-line training program in the equipment's use. All nursing staff have completed the program and are aware of the safe operation of the syringe driver; staff will use the driver to alleviate residents' pain as required.
- The home arranged for the physiotherapist to conduct an audit of bed pole usage within the home. The physiotherapist interviewed all residents with bed poles to ascertain the reason behind the use. One resident agreed to trial a different type of aid while staff adjusted other bed poles to improve safety. The home will make prospective residents aware of bed pole risks at pre-entry meetings in future. Residents with bed poles were happy with the consultation.

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

Refer to expected outcome 1.2 Regulatory compliance for details on the home's system for regulatory compliance. Staff confirmed management updates them on regulatory changes. The method of communication used depends upon the extent of the change and the effect it has on their roles. Central office places revised policies and procedures on the intranet making them available to all staff. There are systems for reporting the unexplained absence from the home of any resident and the recognition of continuing professional 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

Educational programs ensure staff have the knowledge and skills to provide health and personal care to residents. Staff selection and recruitment practices ensures management employs appropriately qualified and skilled staff and ongoing education opportunities ensure skills are maintained and reflective of the current resident population. Staff stated they were satisfied with the clinical education offered and confirm they undergo skill competencies. Refer to expected outcome 1.3 Education and staff development for a description of the home’s education system.

Education sessions relating to Standard two includes:

- clinical day
- diabetes management
- enrolled and registered nurses study day
- palliative care
- syringe driver usage.

2.4 Clinical care

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

Team’s findings

The home meets this expected outcome

Residents receive appropriate clinical care. Care plans noting individual resident requirements and preferences with care issues guide staff in their daily delivery of care. Registered nurses are rostered onto every shift, monitor care processes and conduct regular reviews. Registered nurses update requirements as changes occur. Allied health and medical staff assist with the plan of care and documentation confirms their input. Registered nurses complete complex care and share information regarding issues and incidents at handover, noted in residents’ files and via documentation in communication books. Residents confirmed they received timely and appropriate clinical care.

2.5 Specialised nursing care needs

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

Team’s findings

The home meets this expected outcome

Registered nurses oversee and manage residents’ specialised nursing care. Assessments and care plans guide staff in management and care. Specialised care at the home includes diabetes management, catheter care, oxygen therapy, wound management, complex pain and percutaneous endoscopic gastrostomy feeding tube management. Staff access information regarding specialised requirements; reportable parameters from allied health professionals and medical practitioners, and residents’ files and care plans, show documentation of relevant information. There are adequate supplies of equipment and stock to enable staff to attend appropriately to specialised care. Staff feedback and documentation confirmed that staff appropriately manage residents regarding their specialised nursing requirements.

2.6 Other health and related services

This expected outcome requires that “residents are referred to appropriate health specialists in accordance with the resident’s needs and preferences”.

Team’s findings

The home meets this expected outcome

Registered nurses evaluate resident assessments and make referrals to allied health personnel. Documentation and staff/resident feedback confirmed that allied health staff visit the home regularly. Allied health and other related services that visit the home and are available for review include speech pathology, dental technicians, eye specialists, dietician services, physiotherapist, hearing specialists, wound consultants, mental health teams and podiatrist. Residents confirmed that staff referred them to allied health personnel in a timely manner.

2.7 Medication management

This expected outcome requires that “residents’ medication is managed safely and correctly”.

Team’s findings

The home meets this expected outcome

Registered nurses manage and store/check medications according to legislative requirements. Competency tested care staff assist with the delivery of medications. An electronic medication management system, with a hard copy backup, ensures staff do not miss administering medications and that they sign for all medications. The unit manager monitors and audits residents’ charts and staff practise. We observed appropriate delivery of medications and that staff identified residents’ needs. Residents confirmed staff administered their medications on time.

2.8 Pain management

This expected outcome requires that “all residents are as free as possible from pain”.

Team’s findings

The home meets this expected outcome

Residents are as free as possible from pain. Staff conduct assessments and develop care plans that note residents’ history of pain and strategies known to assist with pain relief. Management trains staff to recognise non verbal cues for pain. Strategies to minimise pain include a range of techniques such as hot and cold packs, position changes, exercise, massage and analgesia. The registered nurses refer residents to the physiotherapist who conducts a pain clinic. Staff use techniques such as massage, transcutaneous electrical nerve stimulation, ultrasound and gentle exercise as alternatives to medication to relieve pain. The unit manager audits the use of ‘as required’ medication, and initiates discussions re medication with residents’ medical practitioners. Residents confirmed staff managed their pain levels and initiated interventions.

2.9 Palliative care

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

Team’s findings

The home meets this expected outcome

Appropriate staff discuss information regarding advanced care plans with residents or their representatives when residents enter the home. Staff develop palliative care plans when required and note all aspects of clinical care, emotional support and spirituality on the plans. Staff monitor pain levels and registered nurses instigate appropriate interventions with medical consultation. Pastoral care staff assist with emotional and spiritual issues and offer support to family and friends. Documentation confirmed ongoing medical consultation, and a holistic approach to palliative care.

2.10 Nutrition and hydration

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

Team’s findings

The home meets this expected outcome

Registered nurses oversee residents’ nutritional requirements. Staff regularly assess and weigh residents and there are processes to respond to changes in nutritional status. Staff discussion and documentation confirms that allied health specialists such as speech pathologists and dieticians review residents as required. The kitchen prepares supplements and specially modified foods according to assessed requirements. Staff forward preferences and cultural requests to the kitchen and appropriate processes ensure residents get the correct meals. Staff monitor resident intake and raise issues with the registered nurses. Care and lifestyle staff have received training in modified fluid preparation. Residents confirmed they receive adequate nourishment and hydration.

2.11 Skin care

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

Team’s findings

The home meets this expected outcome.

Residents’ skin integrity is consistent with their general health. Staff conduct assessments of residents’ skin condition to identify areas of risk. A risk assessment tool assists staff to develop strategies to prevent skin breakdown. Staff instigate interventions such as repositioning, air mattresses, cushions, booties, limb protectors, exercise, creams, hygiene, nutrition and hydration as required. Staff regularly update care plans to reflect changes and our review of documentation confirmed staff completed interventions according to care plan direction. Registered nurses manage wound management charts and access wound consultants as required. Staff confirmed they have adequate equipment and supplies to assist in the maintenance of residents’ skin integrity and management have trained them in skin management. Residents and representatives confirmed staff manage residents’ skin integrity well.

2.12 Continence management

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

Team’s findings

The home meets this expected outcome

Staff manage residents’ continence effectively. Staff identify and investigate residents’ continence issues through assessments and reviews if required. Night staff allocate and distribute continence aids according to assessed requirements. Daily charting identifies issues, and residents are encouraged to consume adequate amounts of nutrition and hydration to assist with continence care. Staff have received training in continence management and external representatives are available to assist with education and advice. The unit managers audit charting and instigate strategies to assist with continence issues. Residents and representatives confirmed that staff manage residents’ continence effectively.

2.13 Behavioural management

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

Team’s findings

The home meets this expected outcome

The home assesses residents over several days to identify challenging behaviours. Care plans note strategies and interventions to manage issues. Family consultation in conjunction with medical practitioners’ input assist in the development of care plans. Documentation confirmed that the home sources external behavioural consultants if required. Staff implement Investigations upon behavioural changes to determine if there is a clinical reason and interventions implemented. Lifestyle and pastoral care staff work closely with care staff to assist with behaviour management. Staff are aware of residents’ issues and we observed interventions gently implemented to assist with diversion and redirection.

2.14 Mobility, dexterity and rehabilitation

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

Team’s findings

The home meets this expected outcome

Care and physiotherapy staff conduct assessments on residents’ mobility and dexterity and note interventions and strategies on the care plans. Staff assess all residents as to their walking and transfer ability and a falls risk assessment forms part of the management. Care plans document strategies to reduce falls and staff notify medical practitioners and families of incidents. The lifestyle program includes chair exercises and walking groups, and interventions such as frames, pain management, nutrition and hydration, and staff monitoring encourages residents with their mobility. We observed residents moving freely throughout the home. Residents stated that staff assist them to maintain their mobility.

2.15 Oral and dental care

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

Team’s findings

The home meets this expected outcome

Staff assess residents’ oral and dental health and develop the care plans. Care plans note individual preferences with oral care and record interventions to assist residents. External personnel such as dental technicians and dentists are available to assist with care. Staff assist residents to attend external appointments as required. Staff are knowledgeable with regard to resident’s preferences and identify changes in food consumption which they report to the registered nurses. Residents expressed satisfaction with oral and dental care.

2.16 Sensory loss

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

Team’s findings

The home meets this expected outcome

Comprehension and communication form part of the residents’ initial assessment. Care plans note interventions and assistance required to maintain sensory function. Staff note what aids a resident uses on their care plan. Staff are aware of individual resident’s requirements and the level of assistance a resident requires maintaining those aids. Documentation confirmed external personnel such as vision and hearing specialists are available to attend to the residents’ needs. Staff have received education regarding the senses and sensory loss, and lifestyle activities include sensory and tactile programs. Residents confirmed that staff identify and effectively manage residents’ sensory needs.

2.17 Sleep

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

Team’s findings

The home meets this expected outcome.

The home assists residents to achieve natural sleeping patterns. Staff conduct assessments over several days and registered nurses evaluate the findings. Residents and documentation confirmed staff use strategies such as warm drinks, extra bedding/pillows and dimmed lighting to assist residents to sleep. Individual preferences regarding sleeping and waking times, day time activities and rest requirements and bedding are noted. Residents confirmed the environment is quiet at night and staff assist them to sleep when required.

Standard 3 – Resident lifestyle

Principle: Residents 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

Refer to expected outcome 1.1 Continuous improvement for more details on the home’s overarching system. The home conducts continuous improvement activities in relation to residents’ lifestyle through internal audits and resident satisfaction surveys. The home’s improvement plan also takes note of comments, complaints and feedback from resident/representative meetings. We observed that improvements were documented, evaluated and the originator was formally notified of the results. Residents and their representatives stated the home’s management informs them of improvement activities through meetings, newsletters and informal discussions.

Recent improvements relative to Standard three include:

- Staff noticed the hairdresser not following the correct process for collecting and returning residents. Staff have spoken to the hairdressers to ensure they do not remove residents from the dining areas or leave them in passageways. The result has been a more pleasant experience for the residents.
- The lifestyle coordinator and a chaplain from the home attended a series of information sessions on working effectively with those from culturally and linguistically diverse backgrounds. The aim was to improve the lifestyle of such residents through an improved understanding of their needs. Projects have followed from the training.
- Recognising that communication with non cognitive residents or culturally and linguistically diverse residents was not optimum, the chaplains created a diversity spirituality box. The box contains specific items aimed at assisting and enhancing the lifestyle of such residents.

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 resident lifestyle”.

Team’s findings

The home meets this expected outcome

Refer to expected outcome 1.2 Regulatory compliance for specific details on the home’s system for regulatory compliance. The home provides residents with information packs detailing information about the specified care and services, security of tenure, complaints mechanisms and their rights and responsibilities. The home displays its vision and mission along with the Charter of Resident’s Rights and Responsibilities. Information brochures on the external complaint system and other aged care related matters are readily available within the home. The home notifies residents and their representatives of changes to legislation through letters and at meetings. The home has a consolidated system for reporting elder abuse and has trained staff in mandatory reporting. The home maintains residents’ security of tenure and confidentiality and meets accommodation charges/bond fiduciary requirements.

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

Educational programs ensure staff have appropriate levels of knowledge and skills relating to resident lifestyle outcomes, and management is supportive of developmental and external training opportunities. Attendance records confirmed staff attended training on topics relevant to this Standard. Staff interviewed were able to provide practical examples relating to respecting residents' privacy and dignity, choice and preferences. Refer to expected outcome 1.3 Education and staff development for a description of the home's education system.

Education sessions attended relating to Standard three include:

- compulsory reporting
- cultural care
- dignity, respect and privacy
- elder abuse
- leisure and lifestyle study day.

3.4 Emotional support

This expected outcome requires that "each resident 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 assists residents in adjusting to life at the home providing them with ongoing emotional support. A resident handbook provides new residents with information on services and levels of care. On entry, lifestyle assessments document past/current social and emotional histories while care plans capture preferences, triggers and strategies for managing residents' well-being. Residents are encouraged to personalise their rooms and the home welcomes representatives in joining activities and maintaining close contact. The home provides referrals to external counselling services when required and the activity program schedules individual time with residents. We observed staff interacting with residents in a caring manner and residents confirmed staff actions met their emotional needs.

3.5 Independence

This expected outcome requires that "residents 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

The home supports and assists residents to achieve optimal independence, maintain friendships, family connections and community links. The home's assessment and care planning process identifies residents' cognitive, mobility and dexterity levels and preferences for social interaction. Physiotherapy and exercise programs help residents maintain mobility and lifestyle programs and community outings incorporate features to stimulate various senses. Arrangements assist residents to maintain financial independence, vote in elections

and attend community groups. Suitable equipment and utensils encourage independence and audits ensure the environment is free of hazards. Residents stated they felt a part of the local community and staff assisted them to be independent.

3.6 Privacy and dignity

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

Team's findings

The home meets this expected outcome.

The home demonstrates it respects each resident's right to privacy, dignity and confidentiality. Resident and staff handbooks and contracts document policies on privacy and confidentiality. Residents sign consent forms for the use of their photographs and names. The home features single rooms with en suite bathrooms, and there are numerous internal and external areas for private time with visitors. Secure areas hold resident files, handover occurs discreetly and residents can lock their doors. We observed staff knocking on doors before entering and addressing residents by their preferred name. Residents were complimentary on the attention provided by staff and confirmed their privacy is maintained.

3.7 Leisure interests and activities

This expected outcome requires that "residents 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

The home supports and encourages residents to participate in a range of activities and events both in groups and individually. Lifestyle profiles capture details of past and current interests, preferences for social interaction, and community and family links. Care plans document choices and reviews take place to reflect changes in the individual needs of the resident. Activity evaluations, surveys, feedback from meetings and participation records monitor satisfaction, and residents are encouraged to make suggestions for future planning. School groups, community groups and volunteers are welcomed at the home and outings take place regularly. Lifestyle staff support residents in maintaining individual hobbies and friends and family are involved in their life at the home. The home has received a Better Practice award for its extensive lifestyle program. Residents expressed a high level of satisfaction with the range and variety of activities offered by the lifestyle program.

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 home demonstrates it fosters and values residents' cultural and spiritual lives. In-house pastoral care staff provide ongoing cultural/spiritual support and various denominations hold group and individual religious services. Initial assessments and care plans document preferences including celebratory days, beliefs, religious choices, cultural preferences and advanced care wishes. Staff have access to cultural care kits and symbolic cultural and spiritual items are available for special occasions. Volunteers play an active and ongoing role in providing residents with meaningful exchanges. The home celebrates special events and

acknowledges significant days. The home conducts memorials for residents who have passed and manages the grieving process in a holistic manner. Residents stated satisfaction with the support provided to meet their cultural and spiritual needs.

3.9 Choice and decision-making

This expected outcome requires that "each resident (or his or her representative) participates in decisions about the services the resident 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

The home promotes residents' right to participate in choices and decisions regarding their clinical care and lifestyle preferences. Assessments identify residents with reduced decision making capacity and the home consults with authorised representatives about issues of choice as appropriate. The resident handbook and resident agreement contain information on residents' rights and responsibilities, the complaints process, external advocacy services, and policies relating to clinical care and lifestyle choices. Resident and relative meetings provide a forum for discussion on matters of decision making and choice of interest to them and surveys monitor satisfaction. The home maintains residents' preferences in terms of personal care, grooming, rising and sleep times and participation in activities. Residents stated satisfaction with their ability to make independent choices and decisions.

3.10 Resident security of tenure and responsibilities

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

Team's findings

The home meets this expected outcome.

On residents' entering the home, staff provide residents with information regarding their security of tenure, rights and responsibilities, financial obligations and the services offered. An information handbook and formal agreement covers policies on termination of occupancy and strategies to deal with harassment and victimisation. The management undertakes extensive consultation in the event of the need to move a resident to another room or a more appropriate facility. Where required, residents and representatives are encouraged to seek external legal and financial advice. The home maintains an open door policy to discuss concerns and promptly informs residents and representatives of relevant changes. Residents stated they felt secure in their tenancy and understood their rights and responsibilities.

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.

4.1 Continuous improvement

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

Team’s findings

The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for a detailed explanation of the home’s overarching system. The home monitors its physical environment and safety systems through environmental inspections, analysis of incident/infection reports, resident/staff surveys and comments/complaints. Residents can make suggestions or express concerns through the regular residents’ meetings or feedback forms. The home includes identified issues on its continuous improvement plan for further development/action.

Recent improvements relative to Standard four include:

- Following an audit of hazardous chemicals used on site, management implemented an on-line system to deliver up to date material safety data sheets. The system also maintains the hazardous chemicals register and the risk assessment for dangerous goods. The system has reduced administrative duties and ensured correct information is always on hand.
- The home has researched and purchased a new product for disinfecting environmental surfaces. Staff use the nebuliser system for disinfecting surfaces following a gastroenteritis outbreak or cleaning rooms that a resident with a resistant infection may have previously occupied. It is too early to provide quantitative results as the effect the spray has had on the rate of infections within the home.

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

Refer to expected outcome 1.2 Regulatory compliance for details on the home’s system for regulatory compliance. The home maintains systems ensuring continued compliance with essential services, occupational health and safety and food safety programmes. The home has an operational food safety program. Staff have had compulsory education around safety systems and hospitality services including infection control and safe food handling. The home has processes to assist residents with respect to heatwave management.

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

Educational programs monitor and enhance the skills and knowledge of staff to ensure they perform their roles effectively in relation to the physical environment and safe systems. Staff

confirmed they attend annual mandatory training and expressed an understanding of processes required during environmental emergency or infectious outbreaks. Refer to expected outcome 1.3 Education and staff development for a description of the home's education system.

Education sessions attended relevant to Standard four includes:

- emergency and evacuation procedures
- food handling for non-kitchen staff
- food safety
- infection control
- manual handling.

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 residents' care needs".

Team's findings

The home meets this expected outcome

The home is a modern, multi storey building with spacious entertaining and lounge/dining and garden areas. Residents have single room accommodation with a private ensuite bathroom. Residents are encouraged to personalise their rooms with some furnishings from home. The home is air conditioned throughout with the temperature preset in the common areas. Residents have control over the heating/cooling in their own bedrooms. Management maintains the safety of the building and environment through preventive and corrective maintenance programs. Staff secure storage and service areas to protect residents from possible harm. The occupational health and safety committee monitors hazards and incidents and there are regular environmental audits. Residents and relatives were satisfied that the home was safe, well maintained and met their needs.

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

Occupational health and safety manuals and information is available to all staff and residents. There is a committee that meets to discuss hazards, incidents, training needs regarding safety, workplace inspections and trend data. A comprehensive risk management system prioritises hazards so that the responsible person or authority can take effective action in a timely manner. Management encourages all staff and residents/representatives to report any hazards or to offer improvement suggestions. Staff demonstrated an understanding of their occupational health and safety responsibilities and the home's incident and hazard reporting mechanisms and processes. Staff and documentation confirmed that training in safety related mandatory subjects occurred annually and at orientation for new staff.

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

The home ensures that legislative requirements regarding essential services is met by using an external contractor to maintain and perform system checks on the home's fire safety system. The home maintains clearly marked and unobstructed fire exits. There is a preventive maintenance program that includes the testing and tagging of all electrical equipment, the cleaning of mobility aids and the maintenance of plant and equipment. Key pad locks control external doors for resident security, these doors automatically release in the event of an emergency. Staff and documentation confirmed annual training in fire and emergency occurs for staff. Residents and representatives stated they would wait for instructions in the event of an emergency. We observed appropriate security measures, equipment and environmental controls in the home.

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.

Management demonstrated the home has an effective infection control program. Registered nurses monitor resident infections, instigate appropriate action, follow up, and record issues regarding infections in residents' files. Staff audit and trend infection rate data and from this identify and deliver education. The home has appropriate procedures for the management of outbreaks including; hand washing, waste disposal, food safety, pest control and cleaning. Management reminds residents of the vaccination programs and encourages staff to have vaccinations. All staff complete mandatory infection control training. Staff stated and observation confirmed the home had adequate supplies of personal protective equipment. Residents and representatives said they observed staff wash their hands at appropriate times. We observed a staff vaccination program occurring during the visit.

4.8 Catering, cleaning and laundry services

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

Team's findings

The home meets this expected outcome

The home outsources all its hospitality services to professional cleaning, laundry and catering contractors familiar with the needs of residential aged care homes. Each contractor has its own policies and procedures and provides the home with trained staff. Catering staff have relevant resident information identifying specific nutrition and hydration requirements, food allergies, food preferences and choices. There is a registered food safety plan and a rotating menu offering variety and choice to residents. There are cleaning schedules that meet individual resident and service needs, while the laundry aims at same day turn around for residents' clothing. Residents and representatives have access to a cafe/restaurant housed within the same building and separating the home from the attached independent living areas. The home monitors its hospitality systems to identify and correct deficits throughout the services. Residents and representatives confirmed their satisfaction with the hospitality services provided by the home.