



Aged Care
Standards and Accreditation Agency Ltd

Lionsbrae Hostel

RACS ID 3134

29 Everard Road

RINGWOOD EAST VIC 3135

Approved provider: Ringwood Area Lions Aged Care Inc

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 10 November 2015.

We made our decision on 4 October 2012.

The audit was conducted on 28 August 2012 to 29 August 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

Audit Report

Lionsbrae Hostel 3134

Approved provider: Ringwood Area Lions Aged Care Inc

Introduction

This is the report of a re-accreditation audit from 28 August 2012 to 29 August 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 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 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

Audit report

Scope of audit

An assessment team appointed by the Accreditation Agency conducted the re-accreditation audit from 28 August 2012 to 29 August 2012.

The audit was conducted in accordance with the Accreditation Grant Principles 2011 and the Accountability Principles 1998. The assessment team consisted of two registered aged care quality assessors.

The audit was against the Accreditation Standards as set out in the Quality of Care Principles 1997.

Assessment team

Team leader:	Dawn de Lorenzo
Team member:	Jennifer Thomas

Approved provider details

Approved provider:	Ringwood Area Lions Aged Care Inc
--------------------	-----------------------------------

Details of home

Name of home:	Lionsbrae Hostel
RACS ID:	3134

Total number of allocated places:	55
Number of residents during audit:	54
Number of high care residents during audit:	49
Special needs catered for:	Dementia specific unit

Street:	29 Everard Road	State:	Victoria
City:	Ringwood East	Postcode:	3135
Phone number:	03 9870 7523	Facsimile:	03 9870 9602
E-mail address:	ci@ralac.org.au		

Audit trail

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

Interviews

	Number		Number
Management	2	Residents/representatives	9
Director of Nursing	1	Medical officer	1
Registered nurses	2	Podiatrist	1
Enrolled nurse/occupational health and safety staff	1	Leisure and lifestyle staff	1
Care staff	4	Catering staff	1
Administration assistant	1	Laundry staff	1
Maintenance staff	1	Cleaning staff	2

Sampled documents

	Number		Number
Residents' files	10	Medication charts	20
Weight charts	21	Leisure and lifestyle files	6
Resident agreements	6	Personnel files	10
External contracts	9		

Other documents reviewed

The team also reviewed:

- Activity program plans and evaluations
- Archive documentation
- Audits/audit schedule
- Behaviour management needs plans
- Cleaning/laundry schedules
- Complex health care needs documentation
- Compulsory reporting register
- Continuous improvement plan and register
- Documentation related to nutrition and hydration
- Education program and participation documentation
- Fire equipment/detection systems maintenance records
- Food safety plan
- Infection control surveillance and analysis
- Job descriptions
- Kitchen cleaning schedules

- Kitchen temperature records for food/refrigerator/freezer
- Legislation updates folder
- Maintenance books and associated schedules and documentation
- Master documents register – health and personal care
- Material safety data sheets
- Memoranda
- Minutes of meetings
- Observation folders
- Occupational health and safety documentation
- Palliative care preferences/wishes when ill or dying forms
- Pest control folder
- Police certificates/statutory declarations
- Policies and procedures
- Recruitment policies and procedures
- Registered nurse and enrolled nurse register
- Resident hand over sheets
- Resident monitoring check forms
- Residential care information package
- Restraint documentation
- Rosters
- Staff competencies
- Staff information package
- Visiting doctor's book

Observations

The team observed the following:

- Activities in progress
- Activities schedule
- Archive areas
- Cleaning in progress
- Clothing labelling machine
- Continuous improvement request forms with box
- Equipment and supply storage areas
- Evacuation packs and resident lists
- External complaints pamphlets
- Fire fighting equipment/fire alarms/evacuation maps/fire panel/fire exits/assembly areas
- Hand washing stations and sanitisers around home
- Infectious outbreak kits

- Infectious waste containers
- Interactions between staff and residents
- Laundry in progress/lidded linen bags
- Living environment – internal and external
- Lunch service
- Medication administration
- Medication storage and trolleys
- Menus displayed
- Modified crockery and cutlery
- Notice boards
- Organisational philosophy displayed
- Oxygen storage
- Resident art displayed around the home
- Smoking areas
- Spill kits
- Storage of medications
- The Charter of Residents' Rights and Responsibilities displayed
- Utility rooms

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 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

The home has a continuous improvement system to identify improvement opportunities and monitor performance against the Accreditation Standards. Continuous improvement plans include log in numbers, actions, completion dates and evaluation comments. Management encourages residents, their representatives, staff and others to contribute to the continuous improvement process through individual verbal and written feedback including the use of continuous improvement requests and attending various meetings. Management introduces improvements in a structured manner and monitors the impact of the change on the residents, their representatives and others with further changes implemented if needed. The home uses such processes as internal and external audits and incident trends to review its performance and identify opportunities for improvement. The home provides feedback to residents, their representatives, staff and others as appropriate.

Examples of improvement initiatives implemented by the home in relation to Standard 1 Management systems, staffing and organisational development include:

- Management and staff identified the need to review the staffing structures in the home due to the increased needs of the residents. The home introduced new staffing structures to include registered nurses present in the home on all shifts and group allocations. Management said and staff confirmed the new staffing structures are working well.
- Management identified staff did not always complete the questionnaire section of the fire and security training within the required timeframe. Management sent out memoranda to staff to remind them of the importance of completing this documentation. Management said and staff confirmed the questionnaires are now being completed in a timely manner.

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 home's management has systems to identify and ensure compliance with relevant legislation, regulatory requirements and professional standards and guidelines across the Accreditation Standards. The home subscribes to various legislative services to ensure they receive notification of changes in legislation and information from various government agencies. Management notifies staff and others of any regulatory changes through such avenues as meetings, memoranda and notices. The home's management develop or modify policies and procedures to ensure alignment with any changes with review. Management

notifies residents and their representatives of accreditation audits through signage and meetings. The home monitors the professional registrations of staff to ensure tasks are performed by qualified individuals. Management ensures all relevant individuals working in the home have a current criminal record check.

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

Management employs staff according to the education and skill criteria established in the recruitment policy. Management monitors staff skills through a series of competencies and provides planned and compulsory education sessions to further enhance their knowledge. Management develops an education calendar based on identified needs at annual appraisal, observation of practice, staff suggestions and changes in legislation. Management maintains records of staff attendance at education sessions and evaluates each session presented to staff. The home plans to trial education online and self directed learning packages to staff in the future. Staff and documentation confirmed management provides a positive education experience aimed at improving skills to benefit staff and residents.

Examples of education in relation to Standard 1 include:

- audits – making them work for you
- teamwork – helping each other
- continuous improvement.

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

Each resident and other interested parties have access to internal and external complaints mechanisms. Management informs residents, their representatives and others about internal and external complaints through brochures, information booklets and meetings. The home has continuous improvement requests available for the use of residents and others to lodge comments and complaints and provides a locked box for these forms. Management also encourages residents and others to verbalise complaints either directly to them or in meetings. The home logs comments and complaints into their continuous improvement system as required. Management said they provide feedback to residents, their representatives, staff or others as appropriate through meetings, individual or communal, or written if required. Residents, their representatives and staff said they are aware of how to make a complaint and are happy to do so if required.

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 displays its philosophy statement in the home and documents the statement in resident and staff handbooks. The statement includes a commitment to resident focused care, compassion and quality throughout the home.

1.6 Human resource management

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

Team's findings

The home meets this expected outcome

The home has appropriately skilled and qualified staff sufficient to ensure delivery of services in accordance with these standards and the home's philosophy and objectives. Management recruit staff through 'word of mouth' or online or written advertisements with the home's hiring process including interviews with qualification, referee and criminal record checks. The organisation has an in house orientation process which includes mandatory education, initial buddy system and a probationary period. The home has documented job descriptions and monitors and maintains the skills of staff through education, appraisals, competencies, audits and observation of practices. The home uses either their own staff or agency staff to cover absenteeism. Management support staff in their ongoing professional development. Staff said they were satisfied with the number of staff and adequacy of skills. Residents and their representatives said they were satisfied with the responsiveness of staff and adequacy of care.

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 has stocks of goods and equipment to support quality service delivery. There is an effective stock system where designated staff check and re-order inventory before reaching minimum stock levels. Staff inspect and evaluate purchased goods/equipment upon arrival and electrical equipment is checked and tagged prior to use. There are preventive and requested maintenance systems with stock being securely stored in safe, clean areas. Staff, residents and representatives confirmed their satisfaction with the quantity and quality of goods and equipment management makes available to them.

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's organisation has effective information management systems. The home's management ensures regular review of its policies and procedures. Management, staff, residents, their representatives and others have access to any information, activities and events of the home as appropriate through meetings, noticeboard displays and brochures. Management and staff get accurate and sufficient information to help them perform their roles through meetings, care plans, education, handover lists, policies and procedures. The home backs up all computerised information and staff have individual logons and passwords. The home has locked storage areas for the archiving of information to ensure confidentiality and maintains a record of contents of archived boxes. Residents and their representatives said they get enough information to assist them to make decisions about residents' care and lifestyle. Staff said they receive enough information to perform their roles.

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 provides externally sourced services to meet the residential service's needs and quality goals and therefore the needs of the residents. The home has preferred external service providers and reviews all contracts on a regular basis to ensure optimum service and compliance with relevant regulatory requirements. Management ensures external suppliers having direct contact with residents have a current police clearance certificates. The home seeks feedback from staff, residents and their representatives at meetings for satisfaction regarding externally sourced services. Management, staff, residents and their representatives said they were satisfied with the services provided by contractors.

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

Refer to expected outcome 1.1 Continuous improvement for information about the home's continuous improvement systems and processes.

Examples of improvement initiatives implemented by the home in relation to Standard 2 Health and personal care include:

- Management identified the need to revise duty lists for care staff on the night shift regarding medication and wound audits. Management introduced a new form and gave training concerning its use through meetings. Management said staff are pleased with the new duty lists with all audits being completed in a timely manner.
- Management identified the need to review the wound trolley. Management revised the contents with a new more user friendly check list. Management said there has been positive feedback from staff regarding the improved wound trolley.
- Management identified the need to increase physiotherapy access for residents. Management increased physiotherapy to four sessions a week. Management said and staff interviewed confirmed there has been positive feedback from staff and residents.

2.2 Regulatory compliance

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

Team's findings

The home meets this expected outcome

The home's management has systems to identify and ensure compliance with all relevant legislation, regulatory requirements and professional standards and guidelines in relation to resident health and personal care with the overall processes described in 1.2 Regulatory compliance. Management demonstrates it follows legislation in relation to medication management. Registered nurses oversee specific care planning activities and care tasks. The home has procedures to ensure it complies with legislation in the event of a resident's unexplained absence.

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 provides staff with education to support their knowledge and skills to perform their roles in relation to residents’ health and personal care. Management performs medication competencies on care staff who administer medication. For details regarding the systems and processes, refer to expected outcome 1.3 Education and staff development.

Examples of education in relation to Standard 2 include:

- Parkinson’s – a person centered approach
- pain management – use of analgesics
- dementia – night time care.

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 clinical care in accordance with their assessed needs and preferences provided by registered nurses, enrolled nurses and personal care staff. Registered nurse assistance and support is available 24 hours per day onsite. Registered and enrolled nurses develop, implement, review and evaluate care plans via a comprehensive review process. Staff demonstrated their knowledge of resident care needs and preferences. Ongoing care consultation is evident in each reviewed resident’s file and progress notes. Residents and representatives confirmed staff consulted them regarding residents’ care and said they were satisfied with the clinical care staff provided.

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 and enrolled nurses provide, review and supervise all specialised care required by residents. Detailed care plans are available and contain additional information for staff to assist them to deliver contemporary specialised care to residents. Staff have access to acute specialist services as care needs dictate. Residents with specialised care requirements have documented reportable ranges recorded and treatment strategies available for staff. Residents and representatives said they are satisfied with the specialised care provided.

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

The home has a number of other health and related services that are available according to residents’ needs and preferences. Services accessed include dietitian, speech pathology, a mental health team, occupational therapist and a wound consultant. These services are available either internally or externally and progress notes document these referrals. Residents and representatives confirmed they could access health related services and said staff kept residents and representatives informed of the outcomes of any referrals.

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 and enrolled nurses and medication competent personal care staff administer medication from blister packs. Staff involved in administering medication stated they manage and store medication safely and they are aware of the legislative requirements relating to medication management. Annual medication competencies are completed for personal care staff who administer medication. We observed staff administering medication in a correct and safe manner. Medication charts are clearly identifiable with photographs of residents and specific information detailed on optimum ways to administer medication to each resident. Audits of medication charts are undertaken regularly. Medication storage areas are kept locked. Residents said they are satisfied with their medication management.

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 have pain assessments and, if needed, have specific pain management care plans implemented. Staff confirmed they complete education sessions on pain management and incorporate this information when developing and reviewing resident’s pain status. Staff offer non medication strategies including alternative therapies to relieve resident’s pain. Residents, staff and progress note entries confirm the use of medication to relieve pain. Staff document the effectiveness of these interventions in the residents’ progress notes. Residents said they are satisfied with the assistance given to them by staff to be as pain free and comfortable as possible.

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

Residents and representatives inform staff of their preferences for end of life care and this information is recorded on a care plan. Palliative care is implemented and provided by registered and enrolled nurses, well supported by personal care staff. Diversional therapy staff are also involved in supporting residents and families at this time. Staff told us about the complimentary therapies available to assist in keeping residents comfortable. External palliative care services are available as care needs dictate. Staff said they respected resident’s wishes at this time and representatives said they have seen staff providing palliative care and support to residents and families.

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

On entry to the home staff record residents dietary likes, dislikes, food allergies and preferences. This information is recorded on each resident’s nutrition care plan and we confirmed nursing staff send dietary information to the kitchen. Staff regularly weigh residents and notify the doctor if they identify a significant change in a resident’s weight, and referral for review by a dietitian and/or speech pathologist can be initiated as needed. Food supplements are available and we observed residents being encouraged and assisted by staff to eat their meals and being offering additional food and drinks throughout the day. Residents and representatives said the meals were satisfactory, alternative meals are available and there is always enough to eat and drink.

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 have skin assessments that identify potential or actual skin integrity issues. Staff use this information to develop detailed care and management plans. Individual skin care products such as creams, protective devices and wound dressings are available for residents. Staff are offered education on wound and skin care and confirmed they have adequate supplies to provide consistent skin and wound care. Residents and representatives confirmed they are satisfied with the skin care provided.

2.12 Continence management

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

Team’s findings

The home meets this expected outcome

Documentation confirmed staff assessed and charted for bowel and bladder continence when a resident entered the home and then used this information to develop effective continence management plans. Toileting schedules and aid allocation information assists staff to provide residents with individualised continence management. Registered and enrolled nurses monitor the effectiveness of continence management through the care plan review process, progress notes, other documentation and observation. Staff confirmed continence aids are available to meet individual assessed needs. Residents confirmed staff manage their continence effectively and maintain their privacy and dignity when providing continence care.

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 for any challenging behaviours on entry. If behaviours are identified, staff implement individualised care plans detailing cognitive and mental health management needs. Documentation supports the provision of effective management strategies. Staff said they could refer residents to a visiting aged care psychiatric team for behaviour management advice and support. Staff confirmed they complete behaviour management education. Interviews and observations confirmed care and lifestyle staff work together to develop effective behaviour management strategies for residents. Wandering residents are able to freely mobilise in the internal and external environments and staff initiate wandering charts to monitor residents in the home. Residents and representatives state that if another resident’s behaviour impacts on them staff are prompt to intervene and redirect the resident.

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

Residents have their mobility status assessed by the physiotherapist resulting in an individual exercise and mobility plan being developed, which staff implement. Care plans detail the number of staff and equipment required to safely transfer and mobilise each resident. Care staff said they assisted residents to mobilise and to undertake their individual exercise program as per each resident’s preferences. Modified equipment such as cutlery and plate guards are available to enhance dexterity. We observed residents walking around the home using mobility aids. Residents stated they enjoyed daily exercise groups and appreciated the assistance given to them by staff to optimise their mobility and dexterity.

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

The home has processes to assess, plan, document and review residents’ oral and dental care plans and to identify when a referral to a dental service is required. Consultation with the resident or representative before making appointments occurs. Staff stated they assist residents by arranging a domiciliary service to visit the home or to organise an external appointment and transport. Staff said stock is always available to enable them to provide oral and dental care. Residents and representatives confirmed they had access to dental services and are satisfied with the oral and dental care provided.

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

Residents have their vision and hearing assessed initially and then as required. Care plans record resident preferences in regard to wearing/using their sensory aids. Following consultation with residents and representatives staff organise referrals to appropriate services for examination and review of sensory losses. Staff assist residents to access external services or residents can attend when services are onsite. Resident appointments are recorded in the communication diary and follow up is recorded in their progress notes. Residents and representatives stated they are satisfied with the effective sensory loss management provided.

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

All residents have a sleep care plan detailing resident settling routines and their preferences in relation to the environment most conducive for sleep. Night staff are aware of individual resident needs via documentation and verbal hand over information. Staff administer medication, as prescribed, to aid sleep and offer residents drinks and snacks to help them to settle to a natural sleep. Progress note entries confirm staff spend one on one time with restless residents and staff record the number of times they return to check on unsettled residents. Residents told us they sleep as well as possible at night because of the quiet environment and the assistance given to them by the staff.

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 information about the home’s continuous improvement systems and processes.

Examples of improvement initiatives implemented by the home in relation to Standard 3 Resident lifestyle include:

- Management identified the need for activity and care staff to obtain information about possible environmental ideas to improve quality of life for residents with dementia. Management organised for these staff to visit an aged care mental health facility. As a result of information obtained from this visit, management sourced and purchased such items as special tray table covers, aprons, wall panels and pods with tactile items. Management said and staff confirmed the residents have benefited from these items which provide positive diversions. We noted residents using and enjoying these items.
- The home turns on a ‘butterfly lamp’ when residents pass away. Residents requested to be informed of the name of the resident. After consultation and discussion, management now have a small picture frame with the resident’s name which sits beside the lamp during this sad event. At meetings management said residents had stated this was a lovely way to remember residents who had passed away.

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

The home’s management has systems to identify and ensure compliance with all relevant legislation, regulatory requirements and professional standards and guidelines in relation to resident lifestyle with the overall processes described in 1.2 Regulatory compliance. The home’s management ensure all staff receive education regarding mandatory reporting of elder abuse. There is a system to manage mandatory reporting to relevant agencies in accordance with regulatory requirements. Management give residents and their representatives information on resident rights and responsibilities, services provided and the complaints scheme on entry to the home. The home has a privacy policy.

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

Management demonstrated staff have appropriate levels of knowledge and skills relating to resident lifestyle and that staff have access to education and training opportunities. Management provides compulsory training on topics relevant to resident lifestyle. For details regarding the home's systems and processes refer to expected outcome 1.3 Education and staff development.

Examples of education in relation to Standard 3 include:

- promoting health and wellness for residents
- dignity in care – not an optional extra
- textured foods and modified liquids – for lifestyle staff.

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 has a system to ensure each resident receives emotional support adjusting to life in the home and on an ongoing basis. Before or on entry all residents and their representatives receive introductions to the resident's new surroundings and meet staff and other residents. Lifestyle and care staff offer new residents support in adjusting to the new environment in a careful manner. Lifestyle staff complete assessments and care plans which include residents' emotional needs. The leisure and lifestyle program provides individual time with each resident as required. Staff communicate with residents in an open and empathic manner. Residents personalise their rooms with their own personal effects. Residents and their representatives said they are satisfied with support for residents' emotional needs in the home.

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 encourages residents to achieve maximum independence and maintain community ties. Lifestyle care plans identify residents' needs to participate in specific interests, maintain their independence and retain ongoing community ties and relationships. Residents are encouraged and supported to participate in a range of individual interests in the home and broader community with assistance from staff and volunteers. The home offers a range of mobility and dexterity aids to assist resident independence and residents have menu choices. Interviews, documentation review and observations confirmed the fostering of residents' independence. Residents and their representatives said staff assist residents to be as independent as possible.

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 recognises and respects each resident's privacy, dignity and confidentiality. Quiet areas are available for residents to meet privately with visitors. Staff assist residents in a respectful manner when attending to activities of daily living. Residents and/or their representatives sign various privacy consent forms on entry to the home. All resident information is securely and appropriately stored. The home has a privacy policy. Staff said they were aware of respecting each resident's privacy and dignity including calling residents by their preferred names and knocking on doors before entering resident rooms. Residents and their representatives said staff respect their privacy and dignity.

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 encourages and supports residents to participate in a wide range of activities both in groups and on an individual basis. Lifestyle staff complete a lifestyle assessment in consultation with each resident and/or their representative to identify such information as each resident's social history, interests, hobbies and lifestyle needs. This assessment forms the basis of the lifestyle care plan which undergoes regular review. Lifestyle staff plan both group and individual activities and offer a range of activities five days a week with some programs on weekends. The lifestyle activities include the celebration of special occasions and cultural days. Lifestyle staff evaluate programs on an ongoing basis. Residents and their representatives said they are satisfied with the range and amount of activities offered in the home.

3.8 Cultural and spiritual life

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

Team's findings

The home meets this expected outcome

The home ensures residents' individual customs, beliefs and cultural backgrounds are fostered and valued. Lifestyle assessments and care plans document cultural and spiritual preferences. The home celebrates culturally significant days with special decorations and catering as required. Staff support and value residents' individual spiritual and cultural needs. Various religious personnel visit the home on a regular basis to facilitate significant celebrations with residents. Residents attend services offsite if desired. Residents and their representatives said they are satisfied with the cultural and spiritual life in the home.

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 and supports residents to exercise choice and decision making over his or her lifestyle while not infringing on the rights of others. Residents have input into the services they receive such as menu selection, waking and settling times, activity choice and preferred title and name. The home encourages residents and their representatives to provide feedback about care and services through meetings and consultation with management. Staff encourage residents to make their own choices. Residents and/or their representatives sign various consent forms on entry to the home. Residents and their representatives said they are satisfied with choice and decision making in the home. Residents said other residents in the home are respectful of their rights.

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

The home has a system to ensure residents have secure tenure within the home and understand their rights and responsibilities. Before or on entry, the home provides prospective residents with an information package. Management offers all residents a resident agreement which includes information on care and services in the home. Management consults with residents and their representatives if there is a change to specified care and services. The Charter of Residents' Rights and Responsibilities along with external complaint information is on display. Residents and their representatives said residents feel secure and residents understand 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 information about the home’s continuous improvement systems and processes.

Examples of improvement initiatives implemented by the home in relation to Standard 4 Physical environment and safe systems include:

- Staff identified the need to improve menus for residents. Catering staff formulated a new menu with resident and dietitian input. Management said there has been positive feedback from staff and residents. Interviews with residents and their representatives confirmed the residents are happy with meals in the home.
- Staff identified the need to inform residents of different themed meals. They now display this information in a stand on the residents’ tables. Management said there has been positive feedback from residents about the new ‘table talkers.’ Residents we interviewed confirmed they are pleased with this new concept.

4.2 Regulatory compliance

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

Team’s findings

The home meets this expected outcome

The home’s management has systems to identify and ensure compliance with all relevant legislation, regulatory requirements and professional standards and guidelines in relation to physical environment and safe systems with the overall processes described in 1.2 Regulatory compliance. There is a food safety plan which is audited regularly both internally and externally. Management has processes to provide a safe working environment to meet regulatory requirements. The home has infection control guidelines in the event of an outbreak.

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

Our interviews with management and staff confirmed they had appropriate skills and knowledge to perform their roles effectively in relation to the home’s physical environment and safe systems. Staff confirmed they attend annual mandatory and compulsory training and expressed an understanding of processes required during environmental emergency or

infectious outbreaks. For further details refer to expected outcome 1.3 Education and staff development.

Examples of education in relation to Standard 4 include:

- Gastroenteritis outbreak education for kitchen staff
- fire and emergency training
- food safety refresher course for catering and activity staff.

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 consists of a spacious building with a variety of open areas and courtyards. All residents live in single rooms with an en-suite. Residents are encouraged to personalise their rooms with furnishings and memorabilia. Central and main areas of the home are air-conditioned and heated. Residents have access to numerous lounge rooms and communal dining areas. Management has implemented preventive and requested maintenance systems along with emergency systems and procedures. The environment is uncluttered and management monitors its safety through audits, regular walk throughs, incident and hazard reporting processes and feedback. Residents confirmed they felt safe and comfortable living here.

4.5 Occupational health and safety

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

Team's findings

The home meets this expected outcome

Management is actively working to provide a safe working environment to meet regulatory requirements. A dedicated committee meets regularly and the home discusses occupational health and safety at staff meetings and supplies written information to staff as required. The occupational health and safety staff representative has received appropriate training externally. The home's staff conduct regular workplace inspections to identify any potential risks or hazards and completes risk assessments as needed. The home provides secure storage for all chemicals and dangerous goods. Staff said they know how to report hazards and are satisfied management has provided a safe working environment.

4.6 Fire, security and other emergencies

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

Team's findings

The home meets this expected outcome

Management and staff are actively working to provide a safe environment to minimise fire, security and emergency risks. The home has documented emergency procedures and provides regular education for staff in fire and evacuation including the use of fire

extinguishers. An approved professional contractor carries out maintenance on all fire fighting equipment. The resident transfer lists and evacuation maps are current and appropriately located. Exit doors are free from obstruction with clear egress routes. Residents and their representatives said the residents feel safe in the home and know what to do if the alarm sounded. Staff said they have received fire, evacuation and other emergencies training regularly and know what to do in such 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

The home has an effective infection control program that includes education, provision of personal protective equipment and infection surveillance. Staff record individual resident infections and management collate and analyse these monthly. Clinical staff undertake regular audits. Staff stated they have completed infection control education in the past twelve months. Staff confirmed they have adequate stock supplies to maintain infection control practices when providing resident care. The home has biohazard spill kits, yellow infectious waste disposal units, infectious outbreak kits with guidelines and lidded soiled linen bags. We observed staff following infection control practices prior to and after carrying out resident care activities.

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 provides hospitality services in a manner which is generous towards residents and others. Meals are prepared on site with resident allergies, likes and dislikes and choice of menu taken into account. Catering staff have appropriate education and clean the kitchen according to a schedule. Both internal and contracted cleaners provide cleaning according to a set schedule with provisions for ad hoc cleaning. Laundry staff clean all laundry on site with provisions for labelling of resident clothes to assist in the prevention of lost items. Management arrange for audits of catering, cleaning and laundry services with regular education provided for staff such as hand washing, infection control and chemical training. Residents, their representatives and staff said they are satisfied with the home's catering, cleaning and laundry services.