



Aged Care
Standards and Accreditation Agency Ltd

Vaucluse Gardens

RACS ID 8051

14 Gore Street

SOUTH HOBART TAS 7004

Approved provider: Vaucluse Gardens Pty Ltd

Following an audit we decided that this home met 44 of the 44 expected outcomes of the Accreditation Standards and would be accredited for three years until 31 July 2015.

We made our decision on 21 May 2012.

The audit was conducted on 17 April 2012 to 18 April 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

Vaucluse Gardens 8051

Approved provider: Vaucluse Gardens Pty Ltd

Introduction

This is the report of a re-accreditation audit from 17 April 2012 to 18 April 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 17 April 2012 to 18 April 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:	Margaretha (Margaret) Byrne
	Michelle Harcourt

Approved provider details

Approved provider:	Vaucluse Gardens Pty Ltd
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Details of home

Name of home:	Vaucluse Gardens
RACS ID:	8051

Total number of allocated places:	128
Number of residents during audit:	105
Number of high care residents during audit:	61
Special needs catered for:	Not Applicable

Street:	14 Gore Street	State:	Tasmania
City:	South Hobart	Postcode:	7004
Phone number:	03 6221 2200	Facsimile:	03 6224 7045
E-mail address:	krodway@vauclusegardens.com.au		

Audit trail

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

Interviews

	Number		Number
Management/administration	7	Residents	15
Nurses/carers/lifestyle	15	Representatives	10
Hospitality/environmental	6		

Sampled documents

	Number		Number
Residents' files/care plans	20	Medication charts	14
Resident's' lifestyle plans	15	Personnel files	10
Wound charts	1	Resident agreements	9
Restraint authorities	5	Risk assessment forms	5

Other documents reviewed

The team also reviewed:

- Action plan
- Blood glucose records
- Catering/cleaning records
- Clinic check list
- Clinical assessments
- Clinical flow charts
- Communication diaries
- Complex care directives
- Resident consent forms
- Continuous improvement plan
- Cytotoxic medication alert
- Dietitian report
- Education plan/attendance records
- Emergency plan
- Essential services records
- Food safety plan
- Handbooks - residents and staff
- Handover charts
- Improvement register
- Job descriptions
- Key performance indicator report September to December 2011
- Lifestyle coordinator's manual
- Medication competency tests for registered/enrolled nurses and care staff
- Medication refrigerator temperature record charts
- Meeting minutes
- Narcotic substances register
- Nutritional management policies and procedures
- Orientation documents
- Palliative care pathway documentation
- Policies and procedures

- Pre and post admission processes
- Preventative and reactive maintenance documentation
- Resident newsletters
- Resident plated food wastage assessment
- Residents' information package and surveys
- Risk assessment charting
- Selected policies and procedures
- Self assessment package
- Staff information package and surveys
- Vision statement
- Weight charts

Observations

The team observed the following:

- 'Residents Rights and Responsibilities' poster
- Accreditation visit notices on display
- Activities calendar on display
- Activities in progress
- Archive storage room
- Dental surgery room
- Equipment and supply storage areas
- Fire fighting equipment
- Gymnasium
- Hairdressing salons
- Hand washing stations
- Hydrotherapy pool
- Infection control equipment
- Interactions between staff and residents
- Internal and external living environment
- Library with computer nook
- Medication round
- Menu on display
- Morning/afternoon tea and lunch service
- Notice boards
- Nurses' stations
- Optometry visit
- Oxygen in use signage
- Safety signs
- Storage of medications
- Storage of medications
- Visiting health professionals
- Wall mounted alcohol hand gel dispensers

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

Vaucluse Gardens (the home) actively pursues continuous improvement in all aspects of care and service. The home monitors its quality system through a system of internal audits with corrective actions recorded in the improvement system. The home also identifies possible improvement activities through data analysis, complaints, suggestions, meetings, satisfaction surveys and strategic planning. All improvement activities are registered, progress monitored and then 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 include:

- Contracted a human resource adviser to assist with industrial relations, workplace injury management and other human resource matters. Following from this the home changed its manual handling training to reduce the incidence of injuries. The home also introduced "buddy shifts" for new employees to help with assimilation.
- The home introduced a staff recognition program with a staff award presentation night. Improved staff morale.
- The home reviewed the staff handbook and new employee information pack to include an orientation checklist, selected procedures and relevant information brochures. Staff reported the home provided them with good information when they commenced working at the home.

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 identifies relevant legislation, regulatory requirements, professional standards and guidelines across all four Accreditation Standards. The home's management receives information through a commercial update service, peak body newsletters, publications and government communiqués. Management reviews and amends policies and procedures in response to legislative changes while the home audits the system for continued compliance. The home informs staff and residents/representatives of updates through memoranda and meetings and occasionally through education sessions. Staff said they are aware of their regulatory compliance responsibilities.

Management provided examples of regulatory compliance relevant to Standard one including:

- a process to ensure relevant staff, volunteers and contractors have current police checks
- changes to the complaints principles

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 a system to ensure management and staff have the appropriate knowledge and skills to perform their roles effectively across all four Accreditation Standards. The organisation funds mandatory training for key areas to promote staff attendance. The home offers "roster relief" for those staff wishing to undertake further education external to the home. The home determines the internal education program through changes in legislation, government-funded initiatives, annual performance appraisals, staff requests, audits, incident trends and identified clinical care requirements. The home monitors attendance at education and communicates planned training sessions to staff through flyers and notices. Staff are satisfied with the education opportunities available to them.

Recent examples of education and training relating to Standard one include:

- education on the new computer database
- learning partners leadership programme
- outlook email training
- understanding accreditation.

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 register. The home informs residents of the complaints system in the residents' information pack. Information brochures explaining the external complaint system are also available in the home. Residents and representatives told us that they generally raise any concerns directly with management or staff. We observed examples of stakeholder concerns having been recorded and actioned within the system.

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 has documented its vision statement along with its values and principles. These statements define the home's commitment to delivering quality care and services for the elderly in its care. The home displays these statements and includes them in information packages supplied to residents, representatives, staff and other stakeholders. The approved provider and other stakeholders develop strategic direction and monitor the home's management systems through a well developed system of key performance indicators.

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 systems and practices ensuring the home employs appropriately skilled and qualified staff to meet residents' care needs in accordance with the homes' values. Recruitment processes include interview, criminal checks, qualifications, professional 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 work 'buddy' shifts as required. Management performs appraisals at the completion of the probationary period and then annually. Staff confirmed satisfaction with the ongoing training and the 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 has established processes to ensure that staff order suitable goods and equipment for quality service delivery. All meals are freshly prepared on site and catering staff manage ordering, rotation and quality checks on all incoming goods. Staff order cleaning materials and clinical supplies through preferred suppliers, and each area maintains their own preferred supplier lists. All supplies are stored in clean, secure areas around the home. The home purchases capital equipment after a trial and evaluation period and staff training. Corrective and preventive maintenance programs and electrical testing and tagging programs are in place. Staff and representatives confirmed the availability of goods and equipment and the timely manner in which maintenance is completed.

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 is in the final stages of implementing a more comprehensive and user friendly information management system. Having introduced the most of the system the home is waiting the final upgrade to the server to enable them to fully implement the major components of the computer database. Processes to inform residents and representatives include welcome packs on admission, resident and relative meetings, meeting minutes, information handbooks, noticeboards, newsletters, and lifestyle calendars. Processes to inform staff include orientation, staff meetings and minutes, handbooks, noticeboards, policies and procedures, memoranda, communication books and handovers. Clinical notes, resident and staff files are securely stored. Old files are stored on site in a secure archive room and staff have access to security destruction bins. Residents, representatives and staff confirmed their satisfaction with access to information and with the communication and feedback mechanisms 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 a system to ensure all external services meet the residential care service's needs. External services at the home include speech pathology, dietetic services, fire equipment servicing, dental services, linen services, wound specialists and hairdressing services. Contracts and agreements entered into specify the required standards, timeframes and regulatory compliance requirements. The home has service provider and contractors lists. The home monitors external services through audits, observations and feedback direct from stakeholders about the quality of service to the home. Residents and representatives confirmed that they are satisfied with the home's external services.

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 please refer to expected outcome 1.1 Continuous improvement. Staff are encouraged to complete suggestion improvement requests for any of their initiatives. Staff are also encouraged to complete the feedback forms for issues residents may have verbalised to them. Staff confirmed management kept them informed of improvement activities.

Recent improvements include:

- The home has purchased a new syringe driver for palliation. The home has trained nurses in its use. Care staff manage residents' pain better with the improved equipment.
- The home has been replacing soap in bathrooms with automatic dispensers staff will use face washers in conjunction with the dispensers. The home has made the change for reasons of infection control, improvement in skin integrity and inventory. The response from residents who have had the new system installed has been positive.
- The home has developed a form tracking the availability and location of slings. The form includes if staff have sent a sling to the laundry. Staff complete the form at the end of each shift. Staff have better knowledge of the location and number of available slings.

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 using various methods of communication. The method used depends upon the extent of the change and the effect it has on their roles. The corporate quality manager updates policies and procedures to reflect any changes and makes them available to all staff on the home's computer system. Management provided examples of regulatory compliance relevant to Standard two including processes for:

- providing residents with the specified care and services
- reporting the unexplained absence from the home of any resident
- 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

The home has a system to ensure management and staff have the appropriate knowledge and skills to perform their roles effectively in the area of resident health and personal care. For a description of the system refer to expected outcome 1.3 Education and staff development.

Recent education opportunities relevant to Standard two includes:

- abdominal massage
- first aid
- palliative care
- skin integrity
- syringe pump
- wound care.

2.4 Clinical care

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

Team’s findings

The home meets this expected outcome

The home has systems and processes to gather information regarding resident needs prior to, and immediately after, entry to the home. A scheduled assessment process enables the collection of resident data, which automates into an individualised care plan created by an electronic software program. Evaluation of care occurs on a regular basis with updates as required. Residents have access to general practitioners and a range of allied health professionals as appropriate. Monitoring of clinical care is through feedback from staff and residents, observations, audits and incident analyses. Regular ‘clinics’ involving residents and their representatives, ensure that care is still relevant and all documentation current. The appointment of various staff as ‘champions’ of different clinical areas such as continence, weight management, wound care, and palliative care ensure that residents receive appropriate and timely interventions. Residents stated they are satisfied with all aspects of their clinical care and its delivery by staff.

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

Qualified staff identify and supervise residents’ specialised nursing care needs. Information derived from admission documentation and assessments contribute to a specialised nursing care plan which is individual to each resident. Evaluation of these needs occurs on a regular basis and as required if care needs change. Residents requiring specialised care include those with diabetes, on blood thinning medications, on oxygen therapy, residents with urinary drainage devices, complex wound care needs and pain management regimes. Residents stated they are satisfied their specialised care needs are undertaken by staff with the skills and knowledge to do so.

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

Residents’ files and notes, supported by staff and resident interview, demonstrated referrals to health specialists occur according to relevant needs and preferences. Initial assessment, resident and representative consultation and regular reviews identify specific services required. Visiting health professionals include a physical therapist/personal trainer who treats residents in an onsite gymnasium and hydrotherapy pool. An onsite dental surgery accommodates a visiting dentist. Other professionals visiting include a podiatrist, audiologist, optometrist, speech pathologist and community palliative care consultants. Geriatricians and dementia/mental health advisory services attend the home and provide support and advice. Recommendations from health specialists occur in conjunction with general practitioner advice and incorporated into residents’ plans of care. Staff expressed satisfaction with visiting health professionals and residents stated they are satisfied with consultation and services provided by visiting health specialists.

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

The home demonstrated safe and correct management of residents’ medication in accordance with regulatory requirements. Qualified nursing staff and trained care staff administer medications from a blister pack system, and paper based charts record general practitioner orders and staff administration. Documentation reflected dated photographs, resident allergies and special considerations for administration. Annual medication reviews occur from an accredited pharmacist and recommendations forwarded to general practitioners. Qualified and care staff complete annual medication competencies. Reporting and analysis of medication incidents occurs in a timely manner. Staff expressed satisfaction with pharmacy services and residents advised they received 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

The home implements treatments and programs to ensure residents are as free from pain as possible. Charting and assessments following entry to the home, and repeated as required, identify pain issues and monitor pain levels. Verified verbal and non verbal assessment tools assess residents’ pain and effectiveness of treatments. Pain management strategies include a variety of treatments such as therapeutic massage, heat packs, exercise, hydrotherapy as well as pharmacological regimes. Staff reported residents’ pain management treatments assist and maintain their comfort. Residents advised staff respond to their concerns in a timely manner, consultation occurs in conjunction with their general practitioner and they are satisfied with their pain management.

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

The home identified the palliative care wishes and needs of residents on entry to the home. Residents, with representatives, are encouraged to document their preferences in regard to advanced care planning and complete a statement of wishes form. This form indicates preferences relating to pain management, provision of comfort measures, end of life treatments and if they wished to stay in the home or preferred transfer to hospital. Consultation occurs as part of regular clinic meetings between all relevant parties. Care plans document strategies to maintain the comfort and dignity of terminally ill residents and resident wishes are respected and implemented. An external palliative care team supports the home regarding delivery of complex care to residents. Spiritual and cultural wishes occur as requested and a pastoral carer provides emotional support to residents and their representatives. Staff stated they have access to specialised equipment and confirmed residents receive respectful and appropriate 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

The home ensures residents receive adequate nourishment and hydration. Staff assess residents’ individual dietary requirements and preferences on entry to the home, in consultation with the resident and their representatives. Care plans provide information and strategies to assist residents to receive appropriate nourishment and hydration. Residents’ weight monitoring occurs and a risk rated nutritional assessment tool identifies the need to implement alternative strategies in the event of significant weight loss or gain. Residents have access to a variety of snacks, fluids and supplements throughout the day as needed. Resident referrals occur to speech pathologists and dietitians as required and recommendations implemented regarding modified diets. Assistive devices promote independence with meals. Residents and their representatives expressed satisfaction with food choices offered and the quality and presentation of the meals.

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

The home demonstrated residents’ skin integrity is consistent with their general health. An accredited risk rated assessment tool identifies concerns, and care plans provide strategies to minimise skin trauma and breakdown. Consultation occurs with residents and their representatives and reviews take place as required. The home uses a variety of measures such as air mattresses, sheepskins and pressure relieving cushions and pillows to assist maintenance of skin integrity. Collection and collation of clinical data in relation to skin tears, wounds and infections occurs and reported on monthly. Staff stated they are satisfied with the resources and equipment provided to enable skin care and wound management.

Residents indicated their satisfaction with the support provided by staff for skin care and treatments.

2.12 Contenance management

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

Team’s findings

The home meets this expected outcome

The home has an effective system of managing residents’ continence issues. A member of the care staff is a continence ‘champion’ and has responsibility for the continence management program. This staff member ensures commencement of charting and assessments in a timely manner. Care plans indicate the level of assistance required and description of continence aids. The monitoring of urinary tract infections forms part of the home’s key performance indicator report. Consultation with general practitioners for prescribed treatments occurs. Bowel management programs promote preventative measures. Staff confirmed and the team observed appropriate stock levels of continence aids available and stored in secure and clean areas. Residents expressed satisfaction with the assistance provided by staff to meet their needs.

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

An assessment system identifies any behaviours of concern. This includes information gathered from prior history, charting results, consultation with representatives and observation. A dementia specific secure area houses residents with challenging behaviours in a safe environment. Care plans developed reflect identified causes of behaviours and information on a range of strategies for implementation to support and guide care staff approaches to residents. Referrals to specialists and dementia advisory services occur regularly and recommendations in consultation with general practitioners are recorded and actioned. Restraint guidelines are available to staff. A meaningful afternoon activity program addresses behaviours which tend to occur later in the day. Staff attend to residents in a timely manner and with respect and dignity.

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

Systems and processes at the home promote optimum levels of mobility and dexterity for all residents. A physical therapist/personal trainer assesses all residents and incorporates a program of exercises as appropriate to maintain mobility and flexibility. Staff record, monitor and analyse fall rates against their own benchmarks. Falls risk assessments occur and evaluation includes environmental factors and health status. A variety of walking aids, transfer and lifting equipment is available in order to promote and maintain residents’ independence. Hydrotherapy treatments offer further opportunities for exercise and rehabilitation. Staff confirmed attendance at annual compulsory manual handling training and

residents expressed satisfaction with the support provided regarding 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 demonstrated they maintain residents’ oral and dental health. The home conducts an oral and dental and oral hygiene assessment gathering current and past history information. Consultation with residents and representatives occurs and developed care plans reflect strategies for oral hygiene. A review occurs on a regular basis and includes a toothbrush replacement program. A visiting dentist and dental mechanic attend the home to address oral hygiene and denture anomalies, using the home’s own onsite dental surgery room. Staff confirmed regular supply of oral care products and residents stated staff support and assist them with their 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

Residents confirmed their satisfaction with assistance provided from staff to accommodate their sensory deficits. Staff assist residents with the maintenance and fitting of appropriate aids. On completion of a range of assessments, which incorporate all five senses, developed care plans reflect strategies to guide staff practices. Staff have access to information regarding relevant communication strategies, physical capabilities and the care required for a variety of aids. A visiting audiologist and optometrist attend the home and residents attend both internal and external appointments supported by staff. The home provides access to large print books and audio books.

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 ensures residents are able to achieve natural sleep patterns. Charting identifies causes or disturbances’ impacting on sleep and further assessment provides evaluation of outcomes. Care plans indicate resident needs and reflect a variety of effective strategies including consideration of environmental factors. Comfort measures integrated into residents’ settling routines consider pain relief, hot pack administration, continence management and position change. Inducing sleep through alternative measures other than sedation occurs including warm drinks, food, conversation and massage. Residents reported they felt safe and secure at night, staff respected their rising and settling routines and they generally slept well.

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 quality 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 are documented, evaluated and the originator is 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 include:

- The home has developed a letter that they will send to residents and/or representatives when a resident is changing classification. Previously such an acknowledgement was verbal only. The letter will provide improved communication regarding the changes to the Specified Care and Services.
- The home revised the system for orienting new residents. A ‘buddy’ system is incorporated and the home requests resident feedback on the orientation process. New residents informed us that the home handled their entry into aged care extremely well.

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 and their representatives with information packs upon entering the home. The packs detail the specified care and services, security of tenure, complaints mechanisms and residents’ rights and responsibilities. The home displays its philosophy of care 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. Management provided examples of regulatory compliance relevant to Standard two including:

- a consolidated system for reporting elder abuse
- maintaining residents’ security of tenure
- meeting accommodation charges and other 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

The home has a system to ensure management and staff have the appropriate knowledge and skills to perform their roles effectively in the area of resident lifestyle. For a description of the system refer to expected outcome 1.3 Education and staff development.

Recent education opportunities relevant to Standard three includes:

- caring through connections
- elder abuse
- post admission processes
- social and recreational training.

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 processes supporting each resident to adjust to life in their new environment and on an ongoing basis. Prior to entry each resident and their family meets with the sales manager to discuss the services provided and the financial arrangements. The home provides the resident and their family with further information about the home's care and services upon entry. The lifestyle team meets regularly with the resident until they feel settled in their new environment. Staff assess each resident's ongoing emotional support needs and preferences and develop a care plan which staff regularly review and update to reflect changing needs. There are many opportunities for residents to participate in activities within the community. A pastoral care worker is also involved in providing emotional and spiritual support. Residents and representatives were satisfied with the emotional support provided by staff at the home. We observed staff to interact with residents in a supportive and caring manner.

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

Staff assist residents to achieve independence, maintain friendships and participate in the life of the community within and outside the residential care service. Initial and ongoing assessment identify, assess and plan for residents' physical, social, cognitive and emotional needs. Strategies to maximise independence include freedom of movement throughout the internal and external environment, meal assistive aids, mobility aids, a library, sensory room, gymnasium, hydrotherapy pool, kiosk, sensory garden, outings and shopping trips. A physiotherapy program assists residents to maintain mobility and physical independence. The home welcomes visitors and supports residents to develop friendships within the community and to maintain their individual interests and community involvement. Staff gave

examples of how individual residents are encouraged to maintain their independence. Residents said they are satisfied their independence is supported and respected.

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 has processes to protect residents' right to privacy, dignity and confidentiality. Staff explain these rights to residents at pre-admission, during the initial settling in period and include them in residents' privacy consent documentation. Residents can access personal telephone connections and their confidential information is securely stored. Staff capture resident preferences for privacy and confidentiality at entry and reflect this on care plans including gender preferences for personal carers. Resident clinical and administrative details are stored securely. The team observed that staff respected resident privacy when attending to resident care needs and addressed residents according to their preferred name. Residents and representatives were satisfied that the home respects residents' privacy, dignity and confidentiality.

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 offers a comprehensive leisure and lifestyle program consisting of a variety of individual and group activities facilitated by a team of diversional therapists. The lifestyle assessment and care planning process considers resident capabilities, needs and preferences. Staff regularly review and evaluate residents to ensure care plans remain effective. Activities in the home include cognitive, sensory, therapeutic, relaxation, "heart moves", outings, visiting school groups, hydrotherapy, games, and gardening. Staff regularly evaluated activities through surveys, audits, meetings, and participation numbers. Unstructured activities available in the living environment include a library, televisions and games. Individualised activity programs are developed for those residents with specific needs and made available to staff and the resident. Staff were observed implementing activities in the home and demonstrated how the lifestyle program is responsive to group and individual needs and preference. Residents and representatives said they were satisfied with the variety of activities offered.

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 has processes to ensure staff identify, respect and promote residents' cultural, spiritual beliefs and customs. Staff assess residents on entry for their cultural and spiritual needs and develop individualised care plans. The home conducts scheduled religious services and a number of residents visit the co-located church. A pastoral care worker is on

site two days a week offering resident emotional and spiritual support. Residents' cultural needs are met through the celebration of events, days of significance and practices that are of importance to residents as a group and individually. The home is responsive to individual cultural dietary requirements. Residents and their representatives were satisfied with the cultural and spiritual program provided by 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

Management demonstrated that the rights of residents were supported and recognised in all activities and operations used by the home. Policies and procedures supported management's approach to the rights of each resident to make decisions and exercise choice. The resident handbook outlined services offered and the home displayed the Charter of Resident Rights and Responsibilities. Staff demonstrated ways in which they supported residents to exercise choice and control over their lifestyle. The home has processes to promote and review residents' choice and decision-making which included resident meetings, surveys and an internal comments and complaints system. Residents and representatives confirmed consultation occurred with respect to choice and that resident control over their lifestyle is recognised and respected. Residents confirmed their ability to participate in decisions relative to their needs and that staff respected their right to take part in activities as they chose wherever possible.

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

Corporate office supports the home by managing the admission process ensuring that residents understand that they have secure tenure. All places at the home are "extra service" status and the home provides residents with the details of what the home provides in the resident agreement and the handbook. Residents' rights and responsibilities outlined in resident agreements and these agreements also include information regarding, complaints handling, fees and charges and security of tenure. Procedures are in place for financial assessment and bond arrangements. Residents and/or representatives were generally satisfied with the security of their tenure.

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 quality 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/representatives can make suggestions or express concerns through the regular residents’ meetings or feedback forms. The home includes identified issues on its continuous improvement register or on its continuous improvement plan for further development/action.

Recent improvements include:

- Following changes to the deployment of responsibilities amongst staff the home has made an internal appointment of an environmental services supervisor. The home is assisting the appointee to improve their supervisory skills. The appointment has provided improved control over the hospitality service area as shown by improved audit results and resident feedback.
- The home has been working with the assistance of another residential aged care facility to update their preventive maintenance schedule. The home accepted the recommendations and the new environmental services supervisor has implemented and is monitoring the system. We observed documentation that showed the home has activated a comprehensive plan and that maintenance is to the residents’ satisfaction.
- The home installed new sinks in the high care section to improve infection control. We observed infection rates in this area to be low.

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 programs. The local council has registered the home’s food safety program. Staff have had compulsory education around safety systems and hospitality services including infection control and safe food handling. Management provided examples of regulatory compliance relevant to Standard four including having a process:

- for handling outbreaks of infectious diseases
- for risk management of emergency events
- to assist residents with respect to heatwave management
- To work towards the harmonisation program to ensure all occupational health and safety practices reflect the proposed changes to the Workplace Safety Act.

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

The home has a system to ensure management and staff have the appropriate knowledge and skills to perform their roles effectively in the area of physical environment and safe systems. For a description of the system refer to expected outcome 1.3 Education and staff development.

Recent education opportunities relevant to Standard four includes:

- chemical handling
- fire 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 offers a range of high and low level care suites over three separate buildings known as the Lodge, the Manor and the Court, all of which provide extra services. Most residents are in large single rooms with private ensuites while there are several double suites for couples. Residents are encouraged to personalise their rooms with furnishings and memorabilia from home. The home is air conditioned for residents' comfort. Environmental services maintains the home through the application of preventive and corrective maintenance systems along with emergency systems and procedures. There is minimal restraint used within the home as confirmed by documentation, authorisations are in situ for any form of restraint that is used. The home offers well maintained garden areas and walking paths providing opportunities for resident involvement. The internal environment is uncluttered and the home monitors its safety through audits, regular reviews, incident and hazard reporting processes and feedback. A comfortable temperature is maintained and residents said they felt safe and comfortable living in the home.

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

The home actively supports and provides a safe working environment meeting regulatory requirements through its systems and processes. Management demonstrated policies and procedures, staff education, and incident reports supporting a safe workplace. The home's program including hazard identification, incident analysis, workplace audits and maintenance schedules ensures the environment/equipment is safe. The home has safe chemical storage, appropriate safety signs and personal protective equipment in use. Management stated and documentation confirmed that safety is an agenda item at all meetings and that management

takes action to correct hazards through the improvement system. Staff confirmed they can approach management with any issue relating to occupational health and safety.

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 being 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. We observed appropriate security measures, equipment and environmental controls in the home. Residents stated they knew what to do in the event of an emergency.

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. Staff receive infection control education as part of orientation and on an ongoing basis. Staff complete hand washing competencies and management displays posters to educate staff to be aware of infection control. Staff, including laundry and cleaning staff, have access to appropriate personal protective equipment. The home has current information to guide staff in managing infectious outbreaks. Management monitors infections through information in the infection control logs. This information is analysed and reported in the quarterly key performance indicators reports. The team observed hand washing facilities throughout the home. Staff demonstrated knowledge in infection control practice and said they have access to infection control information and personal protective equipment.

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's catering staff have relevant resident information identifying specific nutrition and hydration requirements, food allergies, food preferences and choices. There is a food safety plan registered with the local council including the separate kitchenettes in each building. The home offers residents a variety of meals. The home's staff conduct all the cleaning and laundry services within prescribed procedures and schedules. The home has provided its hospitality staff with training in food handling, chemical safety and cleaning practices. There are cleaning schedules and duty lists that meet individual resident and service needs the laundry aims at same day turn around for residents' clothing. Residents and representatives

confirmed their satisfaction with the catering, cleaning and laundry services provided by the home.