

Enriching Life Through Care

Provider case studies

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Australian Government
Aged Care Quality and Safety Commission

Engage
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Enriching Life through Care - Case studies

In 2022, the Commission conducted the national Enriching Life Through Care roundtable program to explore the sector's pathway to transformation through the lens of consumer experience.

We held 22 roundtables across all states and territories, engaging over 320 senior executives, board chairs and directors across around 230 services, including residential, in-home and community aged care.

The roundtable forums provided a valuable opportunity for the Commission to connect with senior sector leaders and hear directly how providers are responding to the consumer expectations for a different and better experience of aged care.

The Enriching Life Through Care [National Roundtable Program Final Report](#) documents the key observations and learning shared by participants and the Commission's response.

During the roundtable series, providers shared many positive stories reflecting the good work underway to change the experience of care to be more flexible, personal and relationship based. We asked providers to tell us about work they were particularly proud of and we have captured those examples in this report.

The Commission encourages providers to continue sharing case studies for the purpose of sharing with the sector to support ongoing capability uplift and innovation. You can keep up to date with new initiatives and share your experiences and learnings [here](#).

Bus stop program

Minerva Lau, Chief Executive Officer of Melbourne's Elderly Chinese Home shared their [Bus stop program](#). This creative initiative came from staff looking for ways to assist a resident living with dementia. The resident wanted to visit a bus stop each day to pick up her son, as she had in her early days in Hong Kong. The staff built a bus stop in the home for her.

Staff also wanted to create something that would allow the residents to recall memories of their time in Hong Kong. [The Hong Kong bus stop and streetscapes video wall](#) helps their residents to recall, enjoy and share their history.



Improving residents' food and dining experience

Lutheran Services has adopted Epicure, an evidence-based program developed by accredited aged care dietitian Dr Cherie Hugo.

Lutheran Services participates in The Lantern Alliance in developing and delivering the [Happy Table program](#).

- The comprehensive Happy Table program encompasses food science and social strategies, alongside an expert dietitian service, toolbox talks, nutrition challenges and on-site Nutrition Champions.
- The science shows that boosting nutrition is a complex play of delivering tasty, nutritious fresh food in a home-like setting where people enjoy the dining experience.

- The service first screened all residents for clinical malnourishment and collected over 5,000 data points for each facility to identify what contributes to a good/bad food and dining experience.
- A tailored real, fresh and whole foods' service model was developed for each home; Nutrition Champions were identified, as well as one or more residents who helped lead the model for each facility.
- Supplements were used as an exception and only when prescribed and clinically required.
- Dining spaces were refurbished where needed to encourage residents to stay longer, enjoy the space and connect socially with other residents.
- The initial results are encouraging, with the program reducing clinical malnutrition by 20 per cent in the 6 months since introduction.

Critical Systems Analysis

Peter Williams, Chief Executive Officer of [One Care Limited](#) shared a Critical Systems Analysis (CSA) approach developed for and implemented by the service to analyse adverse events. The process supports the Serious Incidence Reporting Scheme (SIRS) and enables the service to critically analyse serious incidents to better understand causation and to implement improvements in process and systems that reduce future harm to those receiving care.

Since its introduction, the CSA approach has proven very useful to One Care in unpacking serious incidents to better understand what happened, why it happened and what can be done to reduce the risk of the same or similar event from reoccurring. The outcomes provide a platform for case study education and application of the open disclosure process.

Better for Life **QOL measurement model**

David Moran, Chief Executive Officer of [Southern Cross Care](#) (SA, NT & VIC) shared the organisation's *Better for Life* vision for every person to have the right to access to healthy ageing.

The organisation's approach is to promote reablement of older Australians to experience better quality of life outcomes. Southern Cross Care focuses on reducing functional decline by encouraging tailored exercise for consumers that includes strengthening and weight bearing for as long as possible.

The *Better for Life* framework has 4 pillars, each with a mission: Services (health promoting), People (person-centred), Environments (age friendly) and Governance (informed and proactive).

Each residential aged care facility has a gym known as a Health & Wellness Centre, and a number of community-facing Health & Wellness Centres are provided for consumers in the community. These are supplemented by the Care Car program with cars purchased through Community Foundation fundraising. This program provides affordable, safe, and age-friendly transport to residents and clients.

Southern Cross Care report monthly to their Board on the quality of life of consumers receiving a Home Care package or attending Health and Wellness Centres using the World Health Organisation (WHO) – 5 Wellbeing Index. Data is collected in a number of ways with the most common being through residential aged care staff entries in a mobile person-centred software solution.



Southern Cross Care's *Better for Life* exercises

To measure *Better for Life* in a global context, the organisation utilises the WHO-validated quality of life (QOL) tools as a best practice indicator. Residential care is measured through the WHO-QOL Brief instrument and QOL in Late Stage Dementia (QUALID) scale.

It paints a unique profile for each member of the care community and helps identify where improvements can be made. Southern Cross Care reports that currently 95 per cent of residential aged care residents are experiencing good quality of life.

Consumer-led governance model

[Queen Victoria Care](#) shared their recent experience in the transition to a co-designed, consumer-led governance model. The service began with consumer journey mapping focused on what their residents wanted and an analysis and identification of changes needed in consumer engagement and in existing models of care.

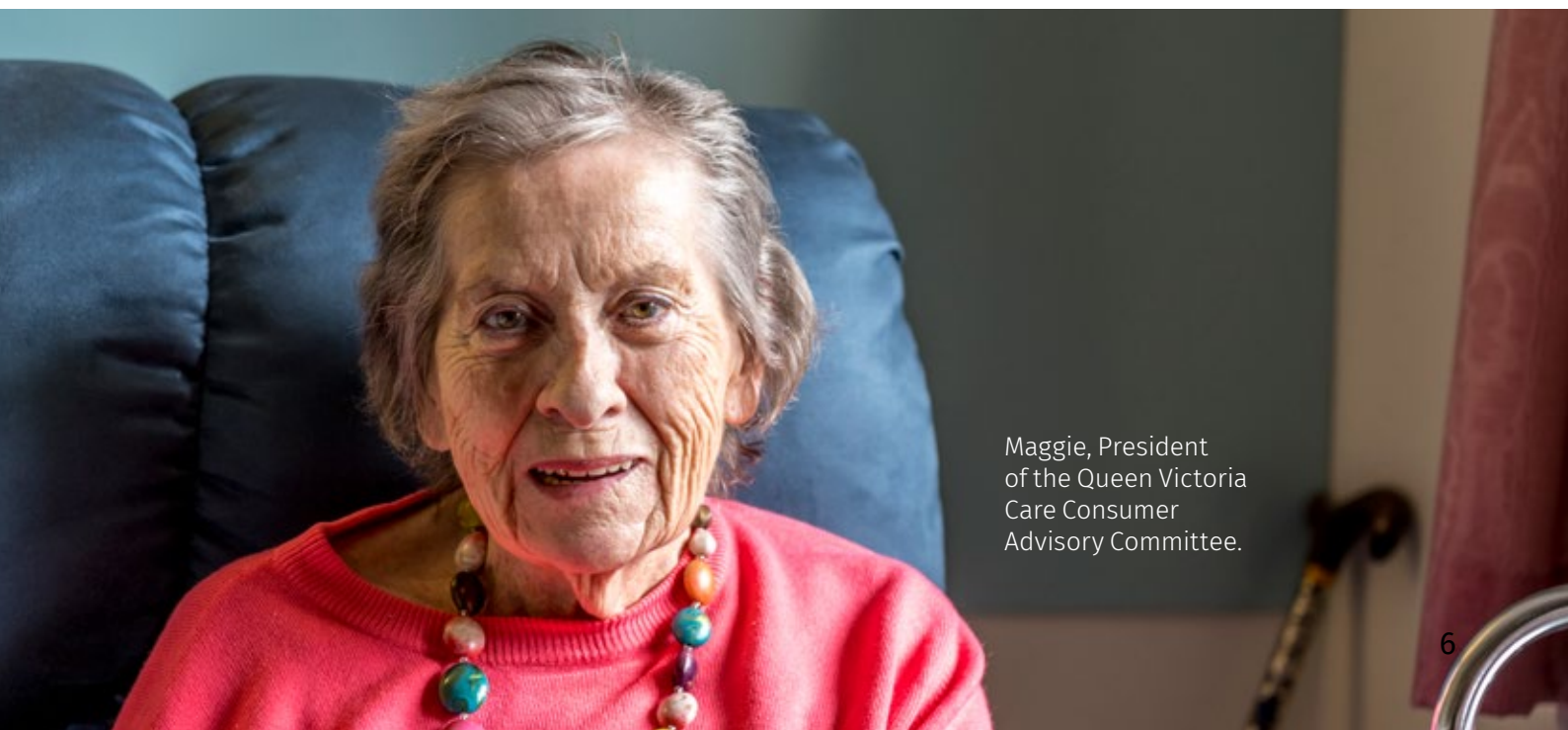
The resulting Consumer Engagement Framework moved away from resident meetings that weren't preferred by residents and under-attended family forums. The preference of their residents places a voluntary residents and family group firmly in the centre of planning and decisions. A key focus of the resident and family group is to define what is important to the residents.

The co-design process is led by consumers, is a true partnership and has been established over a 2-year process. All clinical indicators are shared with the group, which feeds back to management on issues and actions that residents and family prioritise.

Because of feedback from the resident and family group, the service has now engaged Enrolled Nurses and a Client Liaison Officer to undertake pre-admission that can be done from the home of the incoming resident. The experience starts from the initial enquiry and translates into a personalised orientation for the resident and family.

Jacqui Marden, Chief Executive Officer of Queen Victoria Care explained,

"Our residents want to do their own media, and they will tell us 'we want our courtyard done up'. They raise issues with us that they care about, including in relation to medication management. We have lots of residents who are former doctors and nurses, and they helped to choose the new medication trolleys. We shared the data with residents on call bell analysis. They get all the data, and they tell us what they think."



Maggie, President of the Queen Victoria Care Consumer Advisory Committee.

Remote renal health care

Barbara Kimber, Malpa Manager, [Purple House](#), spoke to the service's aged care program offering non-residential aged care services, both in Alice Springs and remotely in the communities of Mt Liebig and Yuendumu.

Purple House is focused on providing high quality services which are consumer centred and prioritise cultural safety. Their non-residential aged care services respond to the needs and directions of the individual consumer and are designed to assist people to live a good quality of life, whether they are in town or out bush on country. Purple House staff understand consumers connection to country, community and family and focus on the facilitation of wellbeing and reablement on country.

Services in Alice Springs are specifically available to dialysis patients from Western Desert communities and supported through the Commonwealth Home Support Programme and Commonwealth Home Care packages. Services in the remote NT communities of Mt Liebig and Yuendumu are funded through the NATSIFACP program, available to people aged over 50 years living in remote Aboriginal communities.



Purple House is a First Nations-owned and run service that offers remote dialysis, social support, aged care and NDIS services, and runs a bush medicine social enterprise called [Bush Balm](#). Purple House provides aged care consumers access to the service's renal program across the Territory.

Before Purple House was established, Pintupi people from the Western Desert of Central Australia were forced to leave their country and families to seek treatment for end-stage renal failure in Alice Springs or Darwin.



"Anangu like the open space of their land, where they can smell the Spirit, the wildflowers and other plants.

They want fire for the smell of wood smoke going through the air. They want to smell the flowers after rain."

Above: Desma from the Purple House, Mt Liebig, with goannas caught on a bush trip. Left: Peggy, Purple House, YOPP consumer, enjoying roo tail.

Run from its headquarters in a suburban house in Alice Springs, Purple House's mission is 'Making all our families well'. Flexibility and cultural safety are the 'Purple House way' and are at the centre of everything the service does.

As a result of the Purple House Service, Central Australia has gone from having the worst to the best survival rates for dialysis in Australia. The service pride themselves on getting more and more patients back home, so that families and culture can remain strong.



The Purple Truck is a self-contained mobile dialysis unit.

Dementia care in the NT

Wendy Hubbard, General Manager, Australian Regional and Remote Community Services (ARRCS) discussed the impact of cognitive impairment and dementia in older people in the Northern Territory, especially in First Nations peoples.

Rates of dementia in rural and remote First Nations communities are some of the highest in the world. Data published on the Australian Institute of Health and Welfare (AIHW) website demonstrates that rates of dementia are almost 4 per cent higher in the Northern Territory than in other areas across Australia. In rural and remote communities the prevalence rates are almost double that of the Territory as a whole.

For urban and regional dwelling First Nations people aged over 60 years of age, the prevalence of dementia is 3 times higher than in the same aged non-First Nations population across Australia.

Dementia care for First Nations people should be culturally safe and trauma-informed. Key cultural considerations should include the importance of family understanding dementia and the impacts of the disease, being involved in care and decision making, connection to country and a holistic care approach.

ARRCS Dementia care program recognises the challenges of living with dementia and the need for right and appropriate supports, especially for First Nations older people.

ARRCS acknowledges that each person's dementia journey is unique. Care planning focuses on understanding individual interests, life history, family and friends by working with consumers and carers to improve quality of life.

A range of tools and supports are available to further assist First Nations older people, carers and communities to understand dementia and dementia care, including a [Dementia Australia resources for First Nations communities](#). This includes the Aboriginal carers support guide, 'Information for Aboriginal families who are caring for an older person or a person'.

Corumbene Rural Primary Health Program

Residential, in-home and community aged care provider Corumbene Care is located in a regional setting in New Norfolk, Tasmania. Service executives recently completed a review of the organisation's service offering and customer demographic. The findings clearly indicated greater risk and need for primary health services for older people living at home and more broadly across the community.

The service has since been commissioned by Primary Health Tasmania to deliver the [Corumbene Rural Primary Health Program](#). The program provides a health coordination hub for consumers across the region and is focused on delivering services in customers' homes to improve the health outcomes for those with chronic conditions.

The innovative service diversification model provides a solution not just for elderly rural aged care consumers but for the wider rural community. In delivering the model, Corumbene Care executive focused on linking model of care outcomes to improve customer experience and quality of care.

Corumbene Care has also received funding to restore and repurpose existing infrastructure into [The Health Hub on The Avenue](#). Work on the Hub commenced in February 2022 and it is expected to open in December 2023. The hub will expand health services within the community with a physical site for the co-location of health services including increased GP services. Corumbene Care's goal in provision of the hub is to support an integrated range of community health and wellbeing services for aged care consumers at the core of the greater rural community.

The Janus Approach

Chief Executive Officer of [RSL Care SA](#), Nathan Klinge shared a consumer-centred care approach developed and adopted by the service. The [Janus Approach](#) is RSL Care SA's own philosophy of care acknowledging residents and clients as unique individuals, who have a variety of personal needs and preferences. The Janus Approach enables services and care needs to be adapted to meet the priorities and 'picture' of quality of life for each individual resident or client as well as the "home" as a whole. This approach delivers person-centred and evidenced-based care ensuring each resident/client's physical, cultural, psychological, social, sexual, and spiritual needs are addressed.

The [Janus Dignity Principles poster](#) is used by the service is provided as the simplest way to demonstrate the approach. RSL Care SA also has a detailed network of organisational policies underpinning their Janus Approach which are available on request by emailing warvets@rslcaresa.com.au.

Young workforce and member matching program

Anna Donaldson, Chief Executive Officer of Lively, spoke to the organisation's [young workforce and member matching program](#). The program is inspired by the [Buurtzorg Model](#) and focuses on engaging enthusiastic young people to provide consumer-centric and directed care in their local area.

The organisation [aims](#) to build meaningful ongoing relationships, connections to community and exposure to career opportunities for young people. Lively also aims for their members to experience increased control, activity and enjoyment of their daily lives, with a stronger network of social connections and supportive relationships. Lively has had great success in securing workforce for their growing services.



Consumer engagement framework

Home care provider, Suncare Community Services shared a structured consumer engagement framework that is designed to support and embed the Aged Care Quality Standards. Suncare seeks regular experience-based feedback from clients and staff through short telephone calls and surveys.

This feedback enables Suncare to constantly trial continuous improvement solutions including the Stepping on Program and the Restorative and Reablement Care Short Term Restorative Care (STRC) program.

The recently piloted [Stepping on Program](#) provides an occupational therapy program delivered by third year Occupational Therapy Honours students from the University of the Sunshine Coast. A key element of the program is to implement strategies at home that aim to reduce the risk of falls and to assist consumers to stay safe living independently at home.

The STRC program is focused on supporting consumers' personalised in-home care. Outcome measures show the program significantly improves functional and mobility capacity for a majority of participants.

Measuring performance, artificial intelligence and machine learning

Ross Gallagher, Executive General Manager of the [IRT group](#) shared the organisation's recent experience in intensive investment in data, analytics, predictive artificial intelligence and machine learning. IRT initially identified the need for data transformation due to an inadequate and misaligned legacy solution that wasn't scalable and struggled to deal with the volume of unstructured and semi-structured data collected across the organisation. IRT were unable to get timely and reliable data and were spending a lot more time on engineering and keeping things running than on data analysis and delivering insights.

With the support of an external partner, IRT planned for and implemented a solution focused on revolutionising the way the team's data analysts and engineers conducted their work by placing a strong emphasis on automation, testing and observability. For IRT, the transition to a best-in-class data platform, lake and analytics software has been the key to unlocking a deeper understanding of customers, improving patient wellbeing, supporting clinical decision making, improving health outcomes and streamlining inefficiencies.

Having a robust, reliable and governed data platform is playing an increasingly critical role in the delivery of quality and best practice care at IRT. The solution is heavily used to measure, monitor, compare, benchmark and improve the quality of services.

This includes supporting IRT's compliance with the Aged Care Quality Standards and the Mandatory National Quality Indicator Program. Further benefits have been identified in the realisation of a 40 per cent annual reduction in data engineering and maintenance costs. The platform works with near-zero, very low maintenance requirements and an increase in employee productivity of more than 60 per cent, largely due to best practice data and analytics processes.

IRT's vision at the start of the data transformation journey was to leverage emerging technologies in artificial intelligence and machine learning space to provide proactive care for their customers and to unlock predictive analytics capabilities for the organisation. This vision was recently realised with the deployment of IRT's first production machine learning model.

The model was developed to aid care staff with falls risk assessments, by predicting the probability of a resident's likelihood to suffer a fall in the next 6 months. These predictive insights assist with identifying customers that should be referred for a falls risk assessment. The predictive model is deployed on IRT's analytics platform and predictions are published to the business via an automated scorecard report. The model is based on over 50 different data inputs or features. Future applications of this tool will be designed to capture customers at risk of skin integrity breakdown and medication incidents.

New Work Mindset Project

Rohan Fitzgerald, Chief Executive of the Western District Health Service (WDHS) shared a recent experience in the development and implementation of the New Work Mindset project. The project is a joint initiative with South West TAFE and provides micro-credentialing courses with the objectives of:

- improving the employability of current and future aged care workers by equipping them with future focused skills, and offering opportunities for progression and growth;
- increasing the attraction and retention of workers in the high growth areas of work; and
- addressing findings of the Royal Commission into Aged Care Quality and Safety and developing industry led training solutions.

The training can be broken down into 4 areas of delivery – Manage, Communicate, Innovate and Lead.

WDHS found that this type of training improves organisational culture, supports the provision of safe care and increases staff engagement by engaging multi-disciplinary healthcare teams.

Key findings from an independent evaluation undertaken by NOUS Consulting are:

- The delivery of the micro-credentials improved the knowledge, skills and confidence of participating WDHS employees, and gave them insight into the ways they can use those skills to perform well in roles in aged care, health and social assistance.
- Participants reported an increased appreciation of collegiality and high-quality patient/resident care, and their role in it – outcomes which support WDHS' vision for a high-performing workplace and culture.
- The immediate outcome for participants was greater confidence to apply New Work Mindset skills in their work. This included enterprise skills such as 'working in a team', 'presenting ideas and information', 'managing myself', 'thinking critically', and 'being confident'.

Further information on the WDHS New Work Mindset can be requested by contacting erin.campbell@wdhs.net or by visiting the [New Work Mindset Project](#).

Workforce culture

Graeme Sloane, Chief Executive Officer of [Adina Care](#) shared an experience in further fostering staff empowerment by providing an exceptional resident experience and increased sense of belonging, community and purpose.

Adina Care's Management Team actively ask residents and co-workers to provide feedback on their experience with staff members. When residents or co-workers give positive, supportive comments, the team asks the staff member to read the feedback on camera and, with consent, shares the video on social media. The videos are the highest ranking in terms of likes and engagement. In addition, with consent Adina also shares "feel good" interactions between staff and residents. This includes staff members singing to or making jokes and bantering with residents and special activities such as visits, BBQs, fishing trips, coffee mornings and dancing.

The social media posts have become a great way for Adina to positively impact on workplace culture and to show how the Adina Community interacts with and regards the service. Feedback from staff is that they get a buzz out of peer and resident recognition.



Staff get a buzz out of peer and resident recognition.



Adina's residents enjoying a fishing trip.

Pastoral care program

[Amaroo Village](#) provides residential care services, in home community care, and independent living options in Western Australia. Amaroo's consumers highly value the hard work, skill, motivation and dedication provided by over 160 volunteers, including 21 pastoral care volunteers. The pastoral care program, led by a qualified chaplain, takes a holistic approach to supporting Amaroo's residents.

Increasingly, Amaroo staff are noticing that their consumers are requiring more social and emotional support – especially during periods of lockdown and major life adjustments. The pastoral care volunteers make a significant difference to residents who are socially isolated by providing a listening ear and at times providing spiritual support. This can be particularly important when residents are grieving the loss of a loved one.

Amaroo's other volunteers help in a range of areas including providing transport, gardening, supporting friendship groups, resident visits, activities, fundraising and administration.

For Amaroo, having volunteers makes a big difference to the resident and staff experience in the following ways:

- The opportunity to see things from different people's perspective as volunteers come with all kinds of life experiences.
- New energy, creativity and knowledge entering the Amaroo community and bringing fresh ideas and innovation.
- Amaroo staff are afforded the opportunity to provide more services to more consumers as their work is supported by volunteers.
- Improving staff morale especially during periods of lockdown.
- Improving the quality of life for all consumers and engaging them with the happenings in the wider community.
- Increasing the knowledge and awareness within the local community of Amaroo Village and the services they provide.

Ambassadors Program

Garry Lane, Chief Executive Officer of [Transcare Hunter Ltd](#), a community care and transport provider, shared recent experiences in the development and introduction of permanent staffing agreements and an Ambassadors Program.

To best recognise and demonstrate the value of care workers, Transcare Hunters qualified care workers are employed as either full-time with a company vehicle or permanent part-time with an agreed amount of available hours per fortnight. Care workers are rostered with sufficient time to travel and prepare between appointments and to complete notes for the delivery of the care plan.

Transcare also aims to restrict the number of general house cleaning jobs for each care worker to look after their fitness for work and potential burnout, and to mix up the type of services they can provide (e.g. accompanied activities and attending workshops). Staff are

paid above award hourly rates and initial casual positions are transitioned to full-time or part-time after 3 months as suitable. These measures are having a positive impact on staff attraction and retention.

Transcare Hunter also introduced support staff positions called ambassadors to provide social support for customers attending Wellness and Reablement Workshops and Meals at Centre luncheons held across the Upper Hunter region. The ambassadors provide a familiar face for customers attending events, are bus attendants for customers requiring transport and teach customers how to use technology and devices in their own home one-on-one.

Feedback from Transcare customers is that they enjoy the company provided and the relationships built through the Ambassadors Program, and that ambassadors have an individual understanding of what's important to and makes a difference in the experience of care.

Quality and people transformation approach

Jenny Hall, Chief Executive Officer of [UnitingSA](#) shared the organisation's current experience in transforming their quality and people systems to deliver great experiences for every client, every time. Fundamentally, the approach puts consumers at the center of defining what a 'great experience' means, and it engages everyone from the Board to frontline staff, to enable and create that great experience and care.

UnitingSA is taking an organisation-wide approach to this transformation, integrating their people and quality functions with a focus on delivering a great experience for staff, clients and community. The service has commenced a whole-of-organisation co-design process, which will build on involvement at every level so that every person embraces their role in creating great experiences. The innovative approach is based on a strategic quality system, including quality planning, implementation, review and evaluation. UnitingSA will be tracking the maturity of their quality system as it evolves and the impacts for consumers and staff.

Resource team to improve clinical care and outcomes

Hall and Prior Health and Aged Care Services

employ a structured preventative and reactive approach to clinical and care requirements through the provision of a resource team.

The team consists of a core group of staff with the capacity to respond to increased needs including:

- registered nurses, palliative, behavioural, wound, skin and ostomy nurse practitioners
- roving administration services, and
- allied health including occupational therapy, physiotherapy, speech pathology, dietitian and pharmacy services.

If internal auditing, monthly reviews, facility management or ad-hoc responsiveness (such as a series of COVID-19 outbreaks) identify concerns, the resource team is deployed to both identify and address gaps to ensure the standard of care and services is always optimised.

Hall and Prior provided an example of a reactive response, identified through a planned preventative approach: the routine monthly collation and reporting of incidents identified increased falls, skin tears and weight loss in one facility. A shared approach to problem solving between the facility management and the resource teams was adopted. Identified incidents were reviewed for timing with an increase of incidents occurring on the weekends being noted.

As a result, an RN coordinator was added to the roster. However, weight loss, skin tears and falls continued to be higher than previously benchmarked for this facility. It was identified that the likely root cause was reduced nutrition and hydration, as skin tears and falls can increase when nutrition and hydration are compromised.

A review of the home commenced with administration assistance, dietitians, speech pathologists, wound, skin and ostomy nurses, physiotherapists, occupational therapists and nursing and advanced practice carers reviewing clinical and operational practice and resident experience and outcomes.

With the support of the nutrition and hydration team, opportunities to increase the nutritional benefit of morning and afternoon teas were identified and implemented. The post intervention audit showed improvements in weight, reduction in skin tears and reduced number of falls.

A full clinical review was repeated on any residents who continued to lose weight, and none of these residents appeared to have preventable weight loss. The overall effect was that weight loss improved in the home. This will continue to be monitored by the home management every month using the same auditing approach that identified the problem.

EACH One Matters in residential aged care

Jenny Sinclair, NSW Operations Manager for EACH NSW spoke to EACH's Psychological Strategies Service in residential aged care funded through Healthy North Coast PHN, also known as [EACH One Matters](#). The service offers free mental health services within residential aged care homes, supporting residents with a diagnosed mental illness or at risk of mental illness through the provision of evidence-based psychological therapies designed to meet the individual needs of older people. The service operates within a stepped care framework that supports people to obtain the right level of support according to their needs.

Interventions are in-reach focused and support connection and engagement with natural and local supports such as families and loved ones. The interventions are delivered in consultation with aged care staff and care team planning and integration. Delivery of the programs use a range of modalities to provide support such as face to face sessions, and, where appropriate, digital technology such as phone and video.

The model of care has 4 levels of support:

- Level 1: One to one therapeutic support – individual therapy to address mental health needs
- Level 2: Group therapeutic support – including peer connection and skill building
- Level 3: Education sessions with residential aged care facility staff – awareness raising and building a positive mental health culture
- Level 4: Community capacity building with carers/families and other relevant community members.

The service also works with residential aged care facility staff to build capacity around education and treatment of mental health including:

- understanding mental illness
- understanding and identifying behaviors of concern
- responding to the needs of residents.

Demonstrated service outcomes include connecting residents with integrated case management and an appropriate level and mix of care, capacity building for facility staff, reduced duplication and barriers to accessing support, and reduced escalation to crisis and hospitalisation situations.



EACH One Matters group participants.



Local language Quality Standards information videos

Ben Poona, Co-Manager Family Safety and Social Services [Tangentyere](#) shared the organisation's experience in developing adaptations of Aged Care Quality Standards information, for First Nations carers and consumers.

Tangentyere Council Aboriginal Corporation is a proud Aboriginal Community Controlled Organisation, working with every household in the Alice Springs Town Camps and more than 10,000 Aboriginal people from across Central Australia. Consumers live in remote and very remote communities, often have no access to telecommunications or technology and are up to one kilometre away from mailboxes. More than 7 Aboriginal languages are spoken in this region and English is often a third or fourth language.

With these factors in mind, and an ultimate goal of access to information for staff and consumers, Tangentyere began a program workshopping what the Quality Standards mean for both staff and the community. A statement on each Standard was written with consideration of how to best weave this information into appropriate content for both staff and consumers. The written information was adapted into audio visual formats with a focus on making sure the information "is right and is good". These [audio visual clips](#) are played in community centres across community, along with other audio-visual informational clips such as Child, Family and Kin Program information.

Ben spoke about a recent experience where a Tangentyere elder quoted "it's my choice" in discussions about his care needs and preferences as a demonstration of the awareness and acceptance of the audio-visual content produced for community.

The Aged Care Quality and Safety Commission acknowledges the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.

All information in this publication is correct as of March 2023.



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