



Partnerships in care

Caring together

Toolkit for residential aged care providers



Australian Government
Aged Care Quality and Safety Commission

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Contents

Introduction	3
Setting up a Partnerships in care program in your service	4
Risks and responsibilities	4
What to do in an outbreak?	4
How to implement individual partnership in care arrangements	5
Strategies to support partners in care with additional learning requirements	6
Industry codes and best practice guidelines	6



Introduction

About Partnerships in care and the provider toolkit

Partnerships in care (PiC) is a person-centred approach that promotes existing relationships of care between a resident and their family or close friends within a residential aged care setting.

We know that supporting access and keeping residents connected with their families is crucial to maintaining physical and psychosocial wellbeing. A Partnerships in care program may help you achieve this.

Where a resident identifies a family member or close friend as a partner in their care, your service can implement a formal arrangement to support the partner and enhance the wellbeing and quality of life of the resident.

PiC build on recent public health advice on visitation access for aged care residents including the [Industry Code for Visiting Residential Aged Care Homes During COVID-19](#) and the [Interim Guidance on Managing Public Health Restrictions on Residential Aged Care Facilities](#).

The Commission's PiC resources include basic training for partners in care (also referred to as partners) in infection prevention and control, as well as guidance to assist your service to consider what is required to ensure continuity of visitation, particularly during periods of outbreak.

While the information in the Commission's PiC resources focuses on the role of partners in care, the information may also be useful for other visitors to your service. The Commission's fact sheet [Ensuring safe visitor access to residential aged care](#) contains more information about who are essential visitors and the obligations of residential aged care providers to ensure safe visitor access.

A PiC program should complement your paid workforce and will support continuity of visitation particularly during periods of outbreak.

This toolkit provides guidance for your service to implement individual partner arrangements, strategies to better recognise existing and potential partners in care and strategies to support partners with additional learning requirements.

The Commission's PiC resources are not designed to provide clinical guidance for staff working in residential aged care. Providers should also be aware that these resources are not exhaustive, and all providers must manage their own risk and mitigation strategies.

To access the Commission's PiC resources, including the information package developed for partners in care visit the [Commission's website](#).



Setting up a Partnerships in care program in your service

How you establish your PiC program will depend on many different factors including the size, demographics, layout, staffing and organisational structure of your service.

Your PiC program needs to be flexible and responsive to the needs of individuals involved.

The investment in developing a PiC program will improve the wellbeing and quality of life of your residents. You'll need to think about the resourcing required to establish your PiC program. This toolkit can be used to help inform this process.

Risks and responsibilities

In establishing PiC arrangements, your service should refer to the Aged Care Quality Standards in relation to managing all risks to individual residents, enabling person-centred care and ensuring good outcomes and enhanced quality of life for each resident.

You'll also need to ensure that staff, not only those directly involved in a PiC arrangement, are informed about the PiC program, provided with the PiC resources and are aware of any additional responsibilities. This might include changes to communication or reporting requirements. Your partners in care will have responsibilities too, and you will need to support them to fulfil these responsibilities.

Your service will need to conduct a comprehensive risk assessment for PiC arrangements and have a process in place to manage the risks identified.

Partners in care can raise concerns about risks or serious incidents directly with you, or via a complaint to the Aged Care Quality and Safety Commission. This is not specific to partners; your residents and their family and friends should already know how to raise concerns or give you feedback.

What to do in an outbreak?

Your PiC program can continue during an outbreak. This continuity of care serves to improve the wellbeing and quality of life for your residents. [The Interim Guidance on managing public health restrictions on residential aged care facilities](#) provides a process to support safe decision making on the application of public health restrictions on residential aged care facilities managing a COVID-19 exposure or outbreak.

While your outbreak management plan is being implemented you may need to restrict site access. It is expected that access for partners in care is facilitated as soon as possible after the initial exposure or outbreak.

Our [partner information package](#) contains information for partners in care about what to expect in an outbreak. This information package also includes guidance for partners to minimise the infection risk to the service, themselves and the person they care for. In an outbreak setting, you will need to provide partners with:

- information about enhanced infection prevention and control measures that are in place to protect residents, staff and visitors (e.g. areas that partners can or cannot enter), introduction to use of personal protective equipment (PPE)
- support with respiratory hygiene, hand hygiene and PPE use



- education, support and assistance for partners at donning and doffing stations including instructions on which PPE should be worn during the visit
- adequate supplies of PPE and disinfectant wipes.

Visiting times and arrangements for partners are made by agreement. These may be different to previous visitation hours and agreements.

You should regularly monitor how PPE is used and be on hand to correct unsafe practices (having agreed visiting times may make it easier for staff to be available to support this).

You should also consult with your local public health unit to be sure your PiC program is safe during an active COVID-19 outbreak.

How to implement individual partnership in care arrangements

Once your service has committed to implementing a PiC program and established the relevant and necessary policies and processes, you can start to implement individual PiC arrangements.

1. Identify partners in care. It is critical that the resident, or their substitute decision maker, chooses who they would like to be their partner in care. Talk with your residents, their family and friends to identify individuals interested in joining your PiC program.

You could download copies of the [Partnerships in care fact sheet for family and friends of those in residential aged care](#) for distribution to residents, their family and friends. You might also like to promote the program via email, newsletters and other media platforms.

2. Where a resident has a partner in care, you can arrange an initial discussion between the resident, staff involved, and the partner regarding the proposed arrangement.

3. Direct the partner to the [Partner information package](#), if they have not already accessed the information. Outline the importance of this training and the requirement for the partner to understand infection prevention and control practices to set up a PiC arrangement.

4. A checklist can be useful to highlight specific induction activities for your partners in care.

Examples of the types of information your checklist could include are:

- ✓ Work Health and Safety Check
- ✓ access and reading of policies such as:
 - Privacy policy
 - Work Health and Safety Policy
 - evacuation procedures of site
- ✓ site tour to ensure the partner is aware of the emergency evacuation procedure, toilets, check-in process and facilities.

5. Consider developing a PiC arrangement in collaboration with the resident, partner in care and key staff members involved. This arrangement could include details such as:

- times and days of attendance (while trying to avoid overly restrictive, inflexible arrangements)
- potential impact on other residents (for example strategies that consider and accommodate the rights and interests of residents sharing a room where one has a partner in care visiting)
- activities and care roles (and individuals responsible for each task)
- communication arrangements
- timeframe for review of the PiC arrangement.



6. Consider the need for ongoing training and education to all partners in care including monitoring and supporting compliance with infection control.

7. Ensure the resident and the partner in care understand that the type of support a partner can offer may change if the aged care home is in an outbreak or subject to public health orders. If there is a COVID-19 exposure or outbreak, it may take a few days for partners to be allowed onsite while an outbreak management plan is implemented. Access should be facilitated as quickly as possible to ensure all residents have ongoing access to visitation.

8. Establish effective communication with your partners. This will ensure they are informed of any change in arrangements, particularly during outbreaks. This is in addition to your existing communication with residents and their families.

Providers will have risk mitigation strategies which should be considered when implementing individual PiC arrangements. The risk mitigation strategies may be different in an outbreak.

Strategies to support partners in care with additional learning requirements

The [Partner information package](#) uses simple non-clinical language. The package aims to provide valuable information relating to infection prevention and control. We've designed this to be easily accessible to individuals who are not trained health professionals.

For individuals who require a more specialised learning approach, for example if they come from diverse backgrounds, have low digital literacy, speak a language that is not English, or have particular learning needs the following strategies may assist:

- have a staff member print out the Partner information package on behalf of the partner and where there is capacity to do so, talk about the content during an initial planning meeting
- have a staff member play the training videos on devices available in your service
- connect existing partners with potential partners in care. Ensure guidance and processes are provided so that the safety and wellbeing of partners, residents, and others is maintained
- where there is capacity run group training sessions for interested partners in care
- where there is a partner in care who requires translation and interpreting services you can find [further information on our website](#) about translation, interpreting, and national relay services.

Industry codes and best practice guidelines

[Industry Code for Visiting Residential Aged Care Homes during COVID-19](#)

This voluntary code aims to create a nationally consistent approach that ensures residents continue to receive visitors while minimising the risk of spreading COVID-19.

Aged Care Quality Standards and the Charter of Aged Care Rights

Aged care providers have an obligation to provide care and services in accordance with their responsibilities under the *Aged Care Act 1997*, including the Aged Care Quality Standards and the Charter of Aged Care Rights.

Advocacy

Aged care residents with further questions or concerns regarding partnerships in care can contact the Older Persons Advocacy Network (OPAN) opan.org.au or **1800 700 600**.



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.

Last updated 29 April 2022. Updated versions with new content may become available – check back on our website regularly to ensure you are accessing the current versions. If you would like to provide any feedback in relation to this resource, please email education@agedcarequality.gov.au.



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