Australian Government
Australian Aged Care Quality Agency

Bundaleer Nursing Home

RACS ID 2675
4 -8 Johnstone Street
WAUCHOPE NSW 2446

Approved provider: Bundaleer Care Services 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 08 September 2018.

We made our decision on 29 July 2015.

The audit was conducted on 23 June 2015 to 24 June 2015. 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	Quality 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	Quality 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	Quality 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	Quality 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

Audit Report

Bundaleer Nursing Home 2675

Approved provider: Bundaleer Care Services Ltd

Introduction

This is the report of a re-accreditation audit from 23 June 2015 to 24 June 2015 submitted to the Quality Agency.

Accredited residential aged care homes receive Australian Government subsidies to provide quality care and services to care recipients 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, care recipient 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 Quality 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

Scope of audit

An assessment team appointed by the Quality Agency conducted the re-accreditation audit from 23 June 2015 to 24 June 2015.

The audit was conducted in accordance with the Quality Agency Principles 2013 and the Accountability Principles 2014. The assessment team consisted of two registered aged care quality assessors.

The audit was against the Accreditation Standards as set out in the Quality of Care Principles 2014.

Assessment team

Team leader:	Toby Hammerman
Team member:	Helen Hill

Approved provider details

Approved provider:	Bundaleer Care Services Ltd

Details of home

Name of home:	Bundaleer Nursing Home
RACS ID:	2675

Total number of allocated places:	55
Number of care recipients during audit:	50
Number of care recipients receiving high care during audit:	50
Special needs catered for:	nil

Street/PO Box:	4 -8 Johnstone Street
City/Town:	WAUCHOPE
State:	NSW
Postcode:	2446
Phone number:	02 6585 2811
Facsimile:	02 6585 1740
E-mail address:	info@bundaleer.org.au

Audit trail

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

Interviews

Category	Number
Facility manager	1
Chief executive officer/fire officer (CEO)	1
Care manager	1
Quality manager	1
Human resources manager	1
HR Administration assistant	1
Registered nurses	2
Enrolled nurse	1
Care staff	8
Reception	1
Executive chef external kitchen	1
Residents	10
Representatives	5
Volunteers/laundry assistants	2
Recreation activity officer	1
Recreational activity officer/physiotherapy-aide	1
Clinical nurse	1
Physiotherapist	1
Catering staff/ servery staff	6
Cleaning staff	1
Maintenance supervisor	1

Sampled documents

Category	Number
Residents files	8
Personnel files	8
Medication charts	6

Other documents reviewed

The team also reviewed:

- Catering - NSW Food Authority licence, diet summary sheet, food preferences, dietary information lists, menus –four week rotating, kitchen communication book, order book, food safety manual, cook chill delivery monitoring records, temperature monitoring records, audits and results, kitchen cleaning schedule, duty lists, daily menu on display

- Cleaning – room and task cleaning schedules, work procedures, protocols for infection control and training records

- Clinical indicator reports

- Comments, complaints folder and register, complaint handling flowchart

- Communication systems: newsletters, notices, memoranda, handover sheets, diaries and communication books

- Continuous improvement "mauve" logs, register and action plans, audit folder schedule and completed audits of each expected outcome

- Doctors' communication book, medical officers' contact details

- Education: orientation checklist, proposed training and development schedule 2015, attendance records fire education, staff records for internal and external courses completed, toolbox talks content and attendance records

- Fire system logbooks and annual fire safety certificate, emergency flip chart with emergency manual and resident evacuation list

- Human resource documentation: recruitment policies and procedures, job descriptions & duty lists, rosters and daily sheet, staff employment kit and staff handbooks

- Information systems: various committee meeting minutes and meeting schedules, memo folder, feedback folder, electronic communication systems (including e-mail and intranet), residents' lists, communication books, staff handbooks, clients and staff information packages and satisfaction surveys

- Inventory and equipment and external services: approved supplier lists, service provider agreements, stock monitoring and delivery systems, planned maintenance program and routine maintenance request and electronic implementation records

- Leisure and lifestyle, cultural and spiritual: monthly activities programs, record of activities and attendance, activities evaluations, monthly activities report and activities program review schedule

- Medication management: medication charts, tough book administration signing record, nurse initiated medications, medication refrigerator and temperature monitoring records, Schedule 8 drugs register, medication incident reports, clinical pharmacist reviews

- Physiotherapy aide attendance records

- Policies and procedures

- Regulatory compliance: Mandatory consolidated reporting registers for alleged or suspected elder abuse and missing persons, staff police checks register, peak body and government update bulletins

- Security of tenure: new resident information kits (including resident handbook and agreements)

- Self-assessment report for re-accreditation

- Work health and safety: policies, hazard reports and agenda item in meeting minutes

Observations

The team observed the following:

- Activities whiteboard and activities in progress, associated resources, photographs of past events, activity program on display and activity resources

- Aged care complaints scheme feedback forms

- Australian Aged Care Quality Agency re-accreditation audit notice displayed

- Charter of residents' rights and responsibilities on display

- Cleaning in progress

- Emergency call bell access

- Environment, internal and external

- Equipment and supply storage areas including food, chemical and clinical supplies, toiletry, chemical, paper goods, continence and linen stock in sufficient quantities

- Fire safety systems and equipment and Annual fire safety certificate on display

- Hairdressing salon

- Infection control signage, personal protective equipment, outbreak supplies, spills kits, infectious waste bins, sharps disposal containers, hand-washing facilities, colour coded cleaning equipment, waste disposal

- Information brochures on display for clients, visitors and staff, internal and external complaints system and advocacy services, information notice boards, menu, activities calendar

- Inspection tags on fire extinguishers, colour coded emergency flip charts and evacuation floor plans in various locations around the site

- Interactions between staff, residents and representatives

- Laundry being distributed by volunteers

- Living environment, grounds

- Manual handling and mobility equipment including walk belts, wheeled walkers, shower chairs, toilet seats, mechanical lifters, sensor mats, low beds, handrails and internal lift access between floors

- Medication rounds and storage

- Menu and servery list of resident menu choices and preferences

- Notice boards for staff and residents

- NSW Food Authority Certificate displayed

- Nurse call system and response by staff

- Quality Agency re-accreditation audit notices on display

- Residents utilising pressure relieving and limb protection equipment

- Safety data sheets, out of order tags

- Secure storage and archiving of confidential resident and staff information

- Short small group observation

- Sign in/out books for visitors and tradesman/contractors

- Staff practices and interactions with residents, visitors and other staff

- Staff work areas and practices including clinical, lifestyle, administration, catering, cleaning, laundry (pick up and distribution) and maintenance

- Dining environments during lunch and beverage services with staff assistance including the serving and transport of meals and nutritional supplements, morning and afternoon tea, use of assistive devices for meals and residents being assisted with meals in their rooms

- Thickened fluids and texture modified meals

- Visitors register and security measures

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 care recipients, their representatives, staff and stakeholders, and the changing environment in which the service operates.

1.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

The home is actively pursuing continuous improvement. Areas for improvement are identified through mechanisms that include: mauve coloured quality logs and action plans, regular meetings, feedback from stakeholders, annual surveys and an organisational program of audits with scored results. Monitoring data is collected and prepared for tabling at board meetings. Opportunities for improvement are also formulated centrally into quality projects by the organisation's quality manager and often result in a systems review, change of practice, purchase of new equipment or staff education. The facility manager records identified improvements on a register that describes its relevance to an expected outcome of the Accreditation Standards, the action taken and the evaluation of the outcome.

Residents/representatives and staff are encouraged to actively contribute to this process and those interviewed report they are aware of the ways they can make suggestions for improvement.

The home demonstrated it is actively pursuing continuous improvement in relation to Accreditation Standard One and recent examples of this are listed below:

- The facility manager identified the need for improved flow of information and communication of daily resident and staff movements within the home after hours. The registered nurse after hours report was created for completion by the in-charge night shift nurse. The form includes details of resident admissions, transfers, illness and accidents. The form is then emailed to the facility manager, care manager and administration. Evaluation of the improvement one year after its implementation indicated this routine method of communication has become an integral and essential part of the home's information management processes.

- On appointment to the position the facility manager identified the need for additional equipment to meet the increasing care needs of residents. A purchase request for items such as urinal holders, rail protectors, walk belts and pressure relieving mattress was submitted and approved. Feedback from relatives has been positive, particularly about the benefits of using the bubble mattress.

- In partnership with other community groups Bundaleer Care Services has pioneered an innovative training program for students of the local high school entering year 11. The

school based apprenticeships scheme offers students the opportunity to gain valuable experience in aged care and obtain both the senior school certificate and the Certificate III national qualification giving them an advantage over other students on entering the workforce. Apprentices commit to 100 days work at the nursing home two years and they are paid for the actual time on site. The organisation's human resource manager attends school career events and participates in the intensive pre-enrolment screening process to ensure candidates with the right attributes are selected for the program. While the partners in the program and some elements of its implementation have changed since its inception in 2010, Bundaleer Nursing home has remained highly committed to the facilitating the school based traineeships. The home is able to demonstrate a wide range of benefits including the creation of recruitment opportunities for staff based in the local community and the ability to contribute to the work skills, attitudes and ethics of future employees.

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, with the organisation's support, has a process to identify and ensure compliance with relevant legislation, regulatory requirements, professional standards and guidelines. The organisation subscribes to an aged care specific legislation update service and a peak body membership to ensure the home is up to date with regulatory requirements. The home receives regular updates from the organisation's quality and compliance manager who, together with the CEO is responsible for identifying all regulatory related information. The facility manager ensures policies and procedures reviewed and updated by head office are implemented at site level. We verified that staff are informed of changes to regulatory requirements through meetings and memos and staff practices are monitored regularly to ensure compliance with regulatory requirements. Examples of the home's responsiveness to recent legislative changes are:

- A system is in place for the secure storage, archiving and destruction of personal information in accordance with the NSW Privacy and Personal Information Protection Act and regulations for residents' records. The organisation upgraded their privacy policy when the legislation changed.

- An electronic register is maintained to ensure criminal history record checks have been carried out for all staff. The home demonstrated they have an efficient system to ensure staff, volunteers and contactors with unsupervised access to residents have current certificates and the renewals are completed in a timely manner.

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 that management and staff have appropriate knowledge and skills to perform their roles effectively. A program of proposed training and development is formulated by the organisation's quality manager and the facility manager chooses the topics to be included in the site specific annual calendar. The recruitment process identifies the knowledge, skills and education required for each position with the emphasis on finding staff with the "right fit and positive attitude". There is a comprehensive orientation program for all new staff and an allocated buddy system to support the new staff during their first days of employment. The education program, including topics covering the four Accreditation Standards, is developed with reference to resident needs, staff surveys, performance appraisals, and management assessments. Records of attendance at training are maintained, the training is evaluated and the effectiveness of the training is monitored through questionnaires and competency assessments. Management and staff interviewed report they are supported to attend relevant internal and external education and training. Resident/representatives interviewed are of the view staff have the skills and knowledge to perform their roles effectively.

Recent education and training that management and staff attended relating to Accreditation Standard One include:

- The orientation program covering such topics as: policies and procedures, the philosophy of the organisation, the communication system and the complaints process.

- The in-service program which included such topics as: protecting residents' rights, team work-helping each other and effective workplace relations.

1.4 Comments and complaints

This expected outcome requires that "each care recipient (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

Residents/representatives said they are aware of the home's complaint mechanisms and are generally satisfied with the home's response to issues raised. The resident agreement and rights and responsibilities posters displayed in the home provide residents with information about their rights and the internal and external complaints mechanisms available to them.

Processes such as surveys, staff and resident meetings and informal discussions are combined with "mauve coloured" suggestion, comments and complaints forms to identify areas of concern. The chief executive officer and the corporate quality manager have access to all comments and complaints data using the organisation's intranet. Residents interviewed say they are aware of how to make a comment or complaint and feel confident that concerns are addressed appropriately.

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 organisation has documented its mission, vision, core values and commitment to quality. These are included in staff information booklets and clearly displayed in the home. The home's Statement of Philosophy is included in the residents' handbook.

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

Residents and their representatives interviewed told us staff who provide care to the residents are skilled and competent. The human resource manager said the staffing levels to determine the number of appropriately qualified and skilled staff required for resident care and service delivery are determined by ongoing assessment of resident care needs, input from staff and reference to a consultant's statistical analysis of industry practice. Surveys, audits and reporting activities across the four Accreditation Standards monitor that there are sufficient skilled staff available to deliver the care and services required. The organisation maintains a casual staff pool and rosters show they are able to fill most unexpected vacant shifts. Recruitment processes, including traineeships, student placements and links with the community identify prospective staff who are resident focused and have the necessary skills and approach to provide care and services. Residents/representatives interviewed said they are satisfied with staff responses to residents' care needs. Staff interviewed said that they mostly have sufficient time for their duties.

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 uses organisational generated systems to ensure that appropriate stocks of goods and equipment are available at all times. Observations, interviews and review of documentation demonstrated that appropriate stocks of goods and equipment, food, continence aids, furniture and linen are achieved. Stock rotation processes, budgeting and purchasing through preferred suppliers ensures this ongoing program is effective. Staff and relatives interviewed all confirmed that there is sufficient and suitable equipment for their use. The organisation has also developed an electronic preventative maintenance schedule and a daily maintenance procedure to ensure that equipment is maintained in a safe operational standard. All maintenance requirements are carried out in an appropriate time frame by a team

of maintenance persons located at the organisation's other home. We observed and all stakeholders reported there is sufficient and appropriately maintained equipment and stocks of goods.

1.8 Information systems

This expected outcome requires that "effective information management systems are in place".

Team's findings

The home meets this expected outcome

The home has organisational and locally generated systems that effectively manage the creation, usage, storage and destruction of all records, both hardcopy and electronic. The home's electronic resource library provides staff with access to care procedure guidelines and staff stated they have access to appropriate documentation required for resident care. Written consent is obtained from residents and representatives for the use of photographs in care provision. Processes, including the intranet, memoranda, newsletters and direct consultation are used to communicate with staff, residents and representatives. Current and archived resident and staff information is stored securely. Processes maintain the security of computer-based information and emergency back-up measures are in place. The home uses audits and staff, resident and representative feedback to review and evaluate information management systems. Staff interviewed are satisfied with the information they receive to assist them in providing appropriate care to residents.

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

External services are managed at a corporate level. Contractor registration and insurance details are recorded and efficiently monitored. The organisation has a preferred supplier and preferred contractor list. Major contracts are tendered out and all contracts are reviewed regularly. Changes are made when services received do not meet the needs of residents or the home. Staff, residents and representatives interviewed said they are encouraged to comment on service providers' performance and stated they are satisfied with the quality of services that are sourced externally.

Standard 2 – Health and personal care

Principle: Care recipients' physical and mental health will be promoted and achieved at the optimum level, in partnership between each care recipient (or his or her representative) and the health care team.

2.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for information about the home's system for actively pursuing continuous improvement.

The home demonstrated it is actively pursuing continuous improvement in relation to Accreditation Standard Two and recent examples of this are listed below:

- An assessment contact from the Australian Aged Care Quality Agency (July 2014) indicated the need to review the clinical education program and to improve the content and frequency of training sessions being provided. The review came to the conclusion that the characteristics of the staff cohort were less suited to classroom style frontal lectures and better able to respond to on the spot 'tool box' style sessions. This method is now being successfully implemented in small groups on a regular basis. The care manager or the registered nurse have delivered a range of topics with a series of sessions to cover all shifts including "chronic pain and end of life care" and a demonstration using an improvised model to explain how catheters work.

- The assessment contact (July 2014) identified alternative pain management therapies provided to residents by either the physiotherapist or the physio-aide were not being evaluated for effectiveness. The home responded by initiating a repeat audit on the effectiveness of the home's pain management practices. The audit found residents' level of pain was being assessed prior to each treatment and the treatments noted, however the outcomes were not being recorded. In response staff were reminded in toolbox talks to record outcomes after treatment and as a further measure the monthly case manager review forms were adapted to include changes to the frequency of the interventions following a change in residents' pain management needs.

2.2 Regulatory compliance

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

Team's findings

The home meets this expected outcome

The home's regulatory compliance system is referred to in expected outcome 1.2 Regulatory compliance. The home uses those processes to identify and implement a range of compliance measures relevant to Standard two Health and Personal Care. These include:

- Implementing a system to ensure registered nurses and other health care professional registrations are maintained. The human resource manager can also access the Australian Health Practitioner Regulatory Agency (AHPRA) website to verify registrations if needed.

- Registered nurses and staff assisting with medications are monitored to ensure they comply with the relevant policies that reflect the Health (Drugs and Poisons) Regulations 1996 and Best Practice Guidelines in Medication Management.

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

Refer to expected outcome 1.3 Education and staff development for information about the home's system to ensure that management and staff have appropriate knowledge and skills to perform their roles effectively. We verified through discussions with staff and management and documentation review that the home delivers education relevant to Standard Two that will promote residents' physical and mental health. A registered nurse with training credentials delivers a range of tool box sessions on topics, such as colostomy care, to ensure staff have specific skills to meet identified resident needs. Examples of education provided specific to Standard Two include best practice in oral health, pain management, falls prevention and continence care.

2.4 Clinical care

This expected outcome requires that "care recipients receive appropriate clinical care".

Team's findings

The home meets this expected outcome

There are systems to ensure that residents receive appropriate clinical care. Residents' are assessed on a regular basis and care planned to support the residents' needs. Residents can nominate a medical officer of their choice and all doctors are available to visit the home, including providing or arranging after hours services. Residents are transferred to hospital whenever necessary. Doctor's notes confirm regular review and updates to care requirements. Care plans support the daily care activities required and a care consultation is held on an

informal basis to enable residents/representatives the ability to have input into their planned care. Staff confirmed knowledge of procedures they are required to undertake for residents relating to clinical care and ways that individualised care is provided to the residents. Observations of vital signs are carried out on a monthly basis via a special care day system. Residents/representatives confirmed they are satisfied with the care provided, and say the staff are very caring and they have confidence in the staff caring for their needs.

2.5 Specialised nursing care needs

This expected outcome requires that "care recipients' specialised nursing care needs are identified and met by appropriately qualified nursing staff".

Team's findings

The home meets this expected outcome

Specialised nursing care needs are identified and are managed appropriately by appropriately qualified staff. Staff gave examples of and confirmed their knowledge of current specialised needs such as diabetic management, blood glucose monitoring, catheter care and wound management. Care staff said they are educated on these procedures and understand the need to report any concerns they have to the registered nurse. Registered nurses confirmed they have access to sufficient supplies of equipment for residents' specialised nursing care needs. Residents/representatives said if they or their resident had a specialised care need they are confident it would be appropriately managed by the staff.

There has been consultation with appropriate specialists to assist in the management of specialised care needs.

2.6 Other health and related services

This expected outcome requires that "care recipients are referred to appropriate health specialists in accordance with the care recipient's needs and preferences".

Team's findings

The home meets this expected outcome

There is an effective system to ensure there are referrals of residents to appropriate health specialists. Residents have been seen by a range of health services some of which visit the home such as physiotherapy, podiatry, speech pathology, dietitian, optometry, audiometry, wound care, clinical pharmacist and pathology services. Residents/representatives said sometimes the residents were able to be seen at the home and sometimes they go to the community to access the service. Staff at the home arrange referrals and assist with arranging appointments as required.

2.7 Medication management

This expected outcome requires that "care recipients' medication is managed safely and correctly".

Team's findings

The home meets this expected outcome

The home has a system to ensure that residents' medication is managed safely and correctly. Medications are administered to the residents by registered nurses and suitably qualified staff,

from a seven day multi-dose blister packaging system. Medications are stored and managed safely and in accordance with regulatory requirements. A medication profile clearly identifies the resident and the current medical officer's orders for each resident.

Registered nurses are consulted about the administration of residents' PRN (as required) medications. A review of medication charts confirmed they are reviewed regularly by medical officers. A medication incident reporting system is in place. A clinical pharmacist conducts regular medication reviews on individual residents. Residents/representatives are satisfied with the management of their medication.

2.8 Pain management

This expected outcome requires that "all care recipients are as free as possible from pain".

Team's findings

The home meets this expected outcome

The home has processes to ensure that all residents are as free as possible from pain. This includes assessment and monitoring processes, treatments provided by the physiotherapist and review by doctors when indicated. The physiotherapist and physiotherapy aide provide a pain management program consisting of massage, gentle exercise and repositioning. Verbal and non-verbal pain assessments are available for staff to use. Ongoing pain management assessments are conducted for these residents and any residents who develop pain, to enable pain levels to be monitored on a regular basis. Staff demonstrate an understanding of the need to identify pain and ways in which the staff can assist in identifying those residents who may be experiencing pain. They report residents identified to be experiencing pain to a registered nurse for review. Residents/representatives said they are maintained as free from pain as possible and staff ask about their pain needs regularly.

2.9 Palliative care

This expected outcome requires that "the comfort and dignity of terminally ill care recipients is maintained".

Team's findings

The home meets this expected outcome

The home ensures that residents requiring palliative care have their comfort and dignity maintained. This includes processes to identify residents' end of life wishes including discussions relating to end of life planning. Staff also have access to palliative care teams to assist with the care of residents if required. A palliative care room supports the privacy and dignity of residents receiving palliative care. Management report the representatives of residents who are terminally ill can stay in the home overnight if desired. Care staff said they are provided with education to enable them to provide comfort and dignity to terminally ill residents. Residents/representatives said they are comfortable their wishes would be considered and respected.

2.10 Nutrition and hydration

This expected outcome requires that "care recipients receive adequate nourishment and hydration".

Team's findings

The home meets this expected outcome

Residents receive adequate nourishment and hydration. Information regarding the resident's likes and dislikes, choices and preferences are made available to kitchen staff and updated as required. Residents are offered a menu which offers choice to ensure it meets their likes and dislikes. Provision is made to support residents who require dietary assistive devices, blended meals, thickened fluids, special diets and meals cut up. Staff record all residents' weights monthly. The dietitian is available to consult residents who have fluctuations in weight which may impact on their health status. High protein, high energy drinks and supplements are introduced where there is a noted decline in appetite or weight. A speech pathologist has reviewed several residents in relation to their swallowing and dietary needs. Staff are able to identify residents who need encouragement with their diet due to weight fluctuations. Residents/representatives expressed they are satisfied with the quality of food and drinks offered.

2.11 Skin care

This expected outcome requires that "care recipients' skin integrity is consistent with their general health".

Team's findings

The home meets this expected outcome

The home has a system to ensure that residents' skin integrity is consistent with their general health. Assessments and care plans include assistance provided in maintaining/improving the residents' skin integrity. Management strategies include application of skin emollients, use of sheep skin products, slide sheets, limb protectors, special cushions and alternating air mattresses. Wound charts record treatment of any breakdown in skin integrity and ongoing progress of the wound. The accident and incident reporting system records incidents of breakdown in residents' skin integrity. A podiatrist is also available to assist in the promotion and maintenance of residents' toenails. Staff said that residents' skin integrity is monitored daily and that they report any abrasions, rashes or abnormality to the registered nurse.

Residents/representatives confirmed they are happy with the skin care provided.

2.12 Continence management

This expected outcome requires that "care recipients' continence is managed effectively".

Team's findings

The home meets this expected outcome

The home has a system in place to ensure residents' continence is managed effectively. There is an assessment of the residents' needs and a care plan developed. A disposable continence aid system is used for residents who are assessed as requiring it. Staff can identify their responsibility for monitoring residents' needs and reporting changes to the registered nurses. Registered nurses review individual residents' requirements to ensure care needs are

appropriate. Staff confirmed there are adequate supplies of disposable continence aids of varying sizes available for residents. Residents/representatives confirmed they are satisfied with the continence care provided.

2.13 Behavioural management

This expected outcome requires that "the needs of care recipients with challenging behaviours are managed effectively".

Team's findings

The home meets this expected outcome

The home has effective systems in place to manage residents' challenging behaviours. Residents/representatives said they are very happy with the care, the staff management and interaction with residents requiring this care. Behaviour assessments are completed as required and plans of care are developed to assist in providing appropriate intervention strategies to manage residents' behaviours. Progress notes indicate an ongoing evaluation of the effectiveness of the strategies. Other allied health providers are also accessed to assist with management plans for residents. Staff confirmed various strategies they use to assist them to manage residents' behaviours and also say they are provided with education to improve their behavioural management skills. Staff were observed to interact with residents in a caring and calming manner.

2.14 Mobility, dexterity and rehabilitation

This expected outcome requires that "optimum levels of mobility and dexterity are achieved for all care recipients".

Team's findings

The home meets this expected outcome

Residents are assisted to achieve optimum levels of mobility and dexterity. Staff assess, manage and evaluate residents' mobility and to achieve optimum levels of mobility and dexterity. A physiotherapist and physiotherapy aide provide services to the residents. The physiotherapist develops individualised programs for residents which may include a range of movement exercises, walking programs, specific exercises and breathing exercises. The physiotherapy aide supports residents with the programs. Any changes in mobility and falls incidents are followed up by the physiotherapist. Residents were observed to be actively participating in the daily physical exercises. Staff advised of how they assist with maintaining mobility for residents and confirm they have been provided with education on manual handling. Residents/representatives are satisfied with the efforts made by staff to maintain/improve the resident's mobility.

2.15 Oral and dental care

This expected outcome requires that "care recipients' oral and dental health is maintained".

Team's findings

The home meets this expected outcome

The home has strategies in place to ensure the residents' oral and dental health is maintained. Residents' oral and dental needs are assessed and a care plan is developed. Residents can attend their own dentist in the community and a dentist is available to visit the home as

required. We were informed by the care staff that if residents need to attend a dentist, staff assist in arranging appointments if necessary. Staff expressed their knowledge of oral care and care of residents' teeth and dentures. Residents/representatives said they are happy with all care provided.

2.16 Sensory loss

This expected outcome requires that "care recipients' sensory losses are identified and managed effectively".

Team's findings

The home meets this expected outcome

The home identifies and effectively manages residents' sensory losses. Assessments of residents' sensory needs are initially undertaken and when there is a change in the resident's condition. Care staff advised of strategies they use to assist residents with vision and hearing loss such as explaining the location of items to residents with vision loss and providing hearing aid care. Residents/representatives said staff assist them with the care and maintenance of their glasses and hearing devices. Staff who provide activities for the residents identified sensory activities offered such as hand massage, garden walks, tea tasting and a herb garden.

2.17 Sleep

This expected outcome requires that "care recipients are able to achieve natural sleep patterns".

Team's findings

The home meets this expected outcome

The home has implemented strategies to ensure residents can achieve natural sleep patterns through initial and ongoing identification of night care requirements.

Residents/representatives advised that the environment is quiet and comfortable for them to achieve uninterrupted sleep. Staff confirmed various ways in which they can assist in supporting an adequate sleep pattern for residents including offering warm drinks and snacks, one-to-one time and pain management strategies.

Standard 3 – Care recipient lifestyle

Principle: Care recipients retain their personal, civic, legal and consumer rights, and are assisted to achieve control of their own lives within the residential care service and in the community.

3.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for information about the home's system for actively pursuing continuous improvement.

The home demonstrated it is actively pursuing continuous improvement in relation to Accreditation Standard Three and recent examples of this are listed below.

- The plan for continuous improvement (updated June 2015) notes an assessment contact from the Australian Aged Care Quality Agency (July 2014) observed newly installed privacy screens surrounding residents' beds were see-through, potentially impacting on their level of privacy. The plan notes these unsuitable curtains were removed and replaced ensuring ongoing respect for residents' privacy.

- The recreation team needed to find creative ways to bring families and other community members into the home to assist residents to maintain friendships and, especially for those with reduced mobility, to create opportunities for social interaction with the community outside the nursing home. Family members, local community groups, school pupils and local celebrities have responded to the call attending special events within the home. The home reports these special events, with community participation, have created a sense of pride for those residents with family members taking part and a continuity of former contacts in the local area.

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 care recipient lifestyle".

Team's findings

The home meets this expected outcome

The home's regulatory compliance system is referred to in expected outcome 1.2 Regulatory compliance. The home has used those processes to identify and implement a range of compliance measures relevant to Standard Three Care recipient lifestyle. These include:

- A copy of the Charter of Residents' Rights and Responsibilities is displayed prominently in the home and reprinted in the residents' handbook.

- Residents' contracts are generated by head office, on advice from the industry peak body, and updated as legislative changes occur. Notifications of significant changes are sent direct to relevant stakeholders.

- A comprehensive policy was developed on elder abuse and reporting procedures outlining the organisation's interpretation of the legislation. The policy lists the specific requirements from all stakeholders to ensure compliance including the creation of a consolidated register of incidents documenting all information recommended in Appendix

A of the Australian Government's Compulsory Reporting Guidelines for Approved Providers of Residential Aged Care.

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

Refer to expected outcome 1.3 Education and staff development for details about the home's system for ensuring management and staff have appropriate knowledge and skills to perform their roles effectively.

Recent education and training that management and staff attended relating to Accreditation Standard Three is listed below.

- The orientation program covering such topics as clients' rights and the organisation's philosophy.

- The in-service program covering such topics as: sexuality and dementia, emotional, spiritual and cultural support and workplace bullying and harassment- professionalism at work.

- Recreation activity officers have completed the Certificate IV in Leisure and Lifestyle.

3.4 Emotional support

This expected outcome requires that "each care recipient receives support in adjusting to life in the new environment and on an ongoing basis".

Team's findings

The home meets this expected outcome

Each resident receives support in adjusting to life in the new environment and on an ongoing basis. Information about the resident is collected from residents/representatives including assessments of emotional, leisure, physical, cultural, social and family care needs. The home offers a variety of written information to assist in ensuring that residents are well informed about the home. Many residents have personalised their rooms with photos and other items. Recreational activity staff described how they provide residents with emotional support, particularly during the early days after arrival, such as introducing them to other residents and checking on a daily basis to ensure they are aware of and invited to attend activities on the day. Residents/representatives said staff make them feel welcome and many commented that the staff are very supportive and look after them exceptionally well.

3.5 Independence

This expected outcome requires that "care recipients 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

Residents are encouraged to maintain their independence and participate in community life and their ability to make choices is facilitated and respected. Residents who wish to participate in activities and community outings are encouraged to do so and are also supported in maintaining their contacts with family and the community. The activities program ensures residents, who are able, have access to the community via regular visits to the home by various community members such as entertainers and volunteers. Residents are free to join family outings and activities outside of the home when they wish. Equipment is available to support resident independence such as mobility aids and handrails in corridors. Residents' confirm they are assisted to achieve maximum independence, maintain friendships and participate in the life of the community within and outside the home.

3.6 Privacy and dignity

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

Team's findings

The home meets this expected outcome

The home has a system in place to ensure each resident's right to privacy, dignity and confidentiality is recognised and respected. Residents/representatives are provided with information relating to the home's privacy policy. The offices are designed to enable residents' personal information to be maintained in a confidential manner. Staff were observed to be diligent about maintaining residents' privacy, closing doors to residents' rooms, knocking before entering a resident's room and using privacy screens where required. Staff described

ways they can enhance resident's privacy and dignity when providing care. Residents/representatives confirm residents' privacy and dignity is respected at all times and staff are particularly considerate when attending to personal care.

3.7 Leisure interests and activities

This expected outcome requires that "care recipients 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

Residents are encouraged and supported to participate in leisure interests and activities by providing an interesting, individualised and varied recreational activity program. Assessments and care plans are completed to identify residents' interests and activities of interest to them. The recreational activity officers, volunteers and entertainers all support activity programs which are held seven days a week. The daily activity programs are displayed on a white board in each dining room. Development of the program includes maintaining records of attendance at activity sessions and evaluations of activity sessions. Individual room visits are provided for those who choose not to participate in group activities and residents are assisted to maintain their individual interests. The activity programs have a range of activities available such as musical entertainers, games, bingo, happy hour, singalong and trivia.

Residents/representatives confirm they are supported and encouraged to participate in activities and that they enjoy the program.

3.8 Cultural and spiritual life

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

Team's findings

The home meets this expected outcome

The home has systems to ensure individual interests, beliefs and cultural and ethnic backgrounds are valued and fostered. Special celebrations are held for cultural and religious days such as Australia Day, ANZAC Day, St Patrick's Day, Easter and Christmas. A variety of religious services are available on a monthly basis, such as Uniting Church, Presbyterian Church, Salvation Army and Seven Day Adventist. A Roman Catholic priest also visits the visits the home every week and provides communion for residents.

Residents/representatives are satisfied with the services available to them and are satisfied that the home values and fosters residents' individual interests, customs, beliefs and cultural backgrounds.

3.9 Choice and decision-making

This expected outcome requires that "each care recipient (or his or her representative) participates in decisions about the services the care recipient receives, and is enabled to exercise choice and control over his or her lifestyle while not infringing on the rights of other people".

Team's findings

The home meets this expected outcome

The home has effective systems to assist residents to participate in decisions about the care and services they receive. Residents and/or their representatives are informed of choices available and their rights through information provided such as the resident agreement and the resident handbook. Information on advocacy services is also available and the Charter of Residents' Rights and Responsibilities is on display. Residents/representatives were able to confirm a number of choices and decisions they are encouraged to make. These include for example choice of meals, choice to visit friends in the community and choice of participation in activities. They said they have been made aware of their rights and responsibilities and were complimentary of the service's encouragement and response regarding individual choices and decisions.

3.10 Care recipient security of tenure and responsibilities

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

Team's findings

The home meets this expected outcome

Information is provided to explain care and services for new residents and/or their representative prior to entry to the home. A resident agreement is offered to each resident and/or representative to formalise occupancy arrangements. The agreement includes information for residents about their rights and responsibilities, care and services provided, fees and charges, complaints handling, their security of tenure and the process for the termination of the agreement. Residents and representatives are invited to seek independent legal and/or financial advice prior to signing the agreement. The resident information pack provided contains relevant information. Residents/representatives are satisfied with the information the home provides regarding security of tenure and their rights and responsibilities.

Standard 4 – Physical environment and safe systems

Principle: Care recipients live in a safe and comfortable environment that ensures the quality of life and welfare of care recipients, staff and visitors.

4.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for information about the home's system for actively pursuing continuous improvement.

The home demonstrated it is actively pursuing continuous improvement in relation to Accreditation Standard Four and recent examples of this are listed below.

- The facility manager identified the need to improve the garden area to include sitting areas and shade to replace ageing shade cloths. A pergola with roofing in the outside activities area has been installed and very well received by all stakeholders. New plants and raised garden beds are also beautifying the area and many of the residents from farm or rural backgrounds are taking an active role in their ongoing maintenance.

- Maintenance services are provided centrally by the organisation and contracted on a needs basis to each facility. In order to adequately monitor the timely and consistent delivery of preventative maintenance services the facility manager developed a comprehensive electronic preventative maintenance schedule. The program also has arrange of site specific supporting documents to ensure all activities are conducted as determined in the weekly and monthly schedule.

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

This expected outcome is based on the home's regulatory compliance system, referred to in expected outcome 1.2 Regulatory compliance. The home has used those processes to identify and implement a range of compliance measures relevant to Standard Four Physical environment and safe systems. These include:

- We observed documents stored on site used to inform the workforce of relevant legislation and regulatory requirements such as work health and safety and manual handling information displayed on a staff notice board, food safe information in the kitchen and infection control policy and procedure.

- A review of records and observations showed fire safety equipment is being inspected, tested and maintained in accordance with fire safety regulations. Staff training records

and interviews with staff indicate most staff have fulfilled the mandatory fire awareness and evacuation training.

- The organisation's central kitchen and the regothermic on site kitchens are licenced by the NSW Food Authority and a food safety program is implemented to ensure ongoing compliance with legislation relating to the provision of food to vulnerable persons.

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

Refer to expected outcome 1.3 Education and staff development for details about the home's system for ensuring management and staff have appropriate knowledge and skills to perform their roles effectively.

Recent education and training that management and staff attended relating to Accreditation Standard Four is listed below.

- The orientation program includes training in; fire safety, infection control, manual handling, accident/incident reporting, and the maintenance system.

- The in-service program covering topics such as: fire awareness and evacuation, manual handling, health and safety – understanding your role.

- All catering staff have attended food safety training.

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 care recipients' care needs".

Team's findings

The home meets this expected outcome

Residents/representatives interviewed said they are generally satisfied with the safety, comfort and amenities available in the home, including, residents' rooms and communal areas. Accommodation is provided in a mix of single and shared rooms with en-suite facilities in some rooms. There are comfortable lounge and dining areas throughout the home with access to well-maintained external courtyards. Residents are encouraged to personalise their rooms with decorations as appropriate. Preventative and corrective maintenance programs maintain the environment and equipment required by residents. Planned audits, resident surveys and ongoing reporting processes monitor and maintain the safety and comfort of the living environment.

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

Work Health and Safety matters are addressed through inclusion as a standard agenda item on all committees. Staff are encouraged to report potential hazards by using a hazard report and to take action to isolate or eliminate those hazards where possible. Surveys, audits and reporting processes are used to monitor the safety of staff practices and the work environment. Manual handling training programs at orientation provide staff with the necessary skills to perform their roles safely. Information systems and feedback processes assist staff to identify hazards and report accidents and incidents. Management and staff interviewed are aware of their responsibilities in maintaining a safe work environment. Staff interviewed are satisfied that management is supportive and proactive in providing equipment and resources to maintain a safe working environment.

4.6 Fire, security and other emergencies

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

Team's findings

The home meets this expected outcome

The home has established systems and procedures to minimise the risk of fire, security and other emergencies. Staff receive regular training in fire and emergency procedures delivered by the CEO, a trained fire officer. There is appropriate equipment for use in the event of an emergency. Evacuation plans and emergency procedures are strategically placed throughout the home. The emergency information flip charts are easily accessible and include stepped instructions for fire and other emergencies such as bomb threats, medical emergency, and internal and external emergencies. An accredited external contractor monitors and maintains the safety and function of fire alarm and fire suppression equipment. Electrical testing and tagging monitors the safety of electrical equipment. The home has a current annual fire safety assessment and a sprinkler system is due to be commissioned to meet the regulatory requirement. There are nurse call activators in each resident's room and in communal areas, which are regularly checked by the maintenance staff. Staff demonstrated knowledge of the location of emergency equipment and emergency procedures and residents said they feel safe and secure in the home.

4.7 Infection control

This expected outcome requires that there is "an effective infection control program".

Team's findings

The home meets this expected outcome

There is an effective infection control program which includes staff education, infection surveillance, personal protective equipment, staff vaccinations, and routine environmental reviews. Staff said there is a sufficient supply of equipment to promote infection control within their daily work for example; gloves, disposable aprons and hand washing equipment. Staff

were observed to be using this equipment and carrying out duties according to the homes procedures such as the use of colour coded equipment and washing hands. Vaccination to prevent influenza is offered annually to residents and staff. Residents are monitored for signs and symptoms of infection and timely follow-up action is taken to diagnose and treat infections in liaison with medical officers. Infection data is collected and graphed and discussed at staff meetings. Cleaning programs are implemented for general cleaning of the environment including services areas. There is a temperature monitoring system which includes refrigeration, cool room, food delivery and service and dishwasher. Systems are in place for the disposal of waste, including infectious waste.

4.8 Catering, cleaning and laundry services

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

Team's findings

The home meets this expected outcome

Residents/representatives interviewed said they are generally satisfied with the catering, cleaning and laundry services provided and the home's responsiveness to any issues they raise. Catering is prepared at the home's nearby sister site and re-constituted in the on-site kitchen. Residents' food preferences and needs are recorded when they enter the home and kitchen staff are advised in writing of any assessed changes as a result of resident changing needs. The menu is varied to reflect the seasons and was reviewed by a dietitian when first introduced. All linen and clothing is laundered off-site. Residents' clothing is marked for identification and the home has processes to monitor and locate lost clothing. Volunteers distribute the clothing to residents' rooms, using the opportunity to interact and engage warmly with residents. Cleaning is provided by the home's staff and cleaning schedules guide staff in their daily cleaning routine.