



Aged Care
Standards and Accreditation Agency Ltd

Emmy Monash Aged Care

RACS ID 3037

518 -526 Dandenong Road
CAULFIELD NORTH VIC 3161

Approved provider: Emmy Monash Aged Care Inc

Following an audit we decided that this home met 44 of the 44 expected outcomes of the Accreditation Standards and would be accredited for three years until 1 November 2015.

We made our decision on 13 September 2012.

The audit was conducted on 13 August 2012 to 14 August 2012. The assessment team's report is attached.

We will continue to monitor the performance of the home including through unannounced visits.

This home is a 2014 Better Practice Award winner. [Click here](#) to find out more about their award.

Most recent decision concerning performance against the Accreditation Standards

Standard 1: Management systems, staffing and organisational development

Principle:

Within the philosophy and level of care offered in the residential care service, management systems are responsive to the needs of residents, their representatives, staff and stakeholders, and the changing environment in which the service operates.

Expected outcome	Accreditation Agency decision
1.1 Continuous improvement	Met
1.2 Regulatory compliance	Met
1.3 Education and staff development	Met
1.4 Comments and complaints	Met
1.5 Planning and leadership	Met
1.6 Human resource management	Met
1.7 Inventory and equipment	Met
1.8 Information systems	Met
1.9 External services	Met

Standard 2: Health and personal care

Principle:

Residents' physical and mental health will be promoted and achieved at the optimum level in partnership between each resident (or his or her representative) and the health care team.

Expected outcome	Accreditation Agency decision
2.1 Continuous improvement	Met
2.2 Regulatory compliance	Met
2.3 Education and staff development	Met
2.4 Clinical care	Met
2.5 Specialised nursing care needs	Met
2.6 Other health and related services	Met
2.7 Medication management	Met
2.8 Pain management	Met
2.9 Palliative care	Met
2.10 Nutrition and hydration	Met
2.11 Skin care	Met
2.12 Continence management	Met
2.13 Behavioural management	Met
2.14 Mobility, dexterity and rehabilitation	Met
2.15 Oral and dental care	Met
2.16 Sensory loss	Met
2.17 Sleep	Met

Standard 3: Resident lifestyle**Principle:**

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

Expected outcome		Accreditation Agency decision
3.1 Continuous improvement		Met
3.2 Regulatory compliance		Met
3.3 Education and staff development		Met
3.4 Emotional support		Met
3.5 Independence		Met
3.6 Privacy and dignity		Met
3.7 Leisure interests and activities		Met
3.8 Cultural and spiritual life		Met
3.9 Choice and decision-making		Met
3.10 Resident security of tenure and responsibilities		Met

Standard 4: Physical environment and safe systems**Principle:**

Residents live in a safe and comfortable environment that ensures the quality of life and welfare of residents, staff and visitors.

Expected outcome		Accreditation Agency decision
4.1 Continuous improvement		Met
4.2 Regulatory compliance		Met
4.3 Education and staff development		Met
4.4 Living environment		Met
4.5 Occupational health and safety		Met
4.6 Fire, security and other emergencies		Met
4.7 Infection control		Met
4.8 Catering, cleaning and laundry services		Met



Aged Care
Standards and Accreditation Agency Ltd

Audit Report

Emmy Monash Aged Care 3037

Approved provider: Emmy Monash Aged Care Inc

Introduction

This is the report of a re-accreditation audit from 13 August 2012 to 14 August 2012 submitted to the Accreditation Agency.

Accredited residential aged care homes receive Australian Government subsidies to provide quality care and services to residents in accordance with the Accreditation Standards.

To remain accredited and continue to receive the subsidy, each home must demonstrate that it meets the Standards.

There are four Standards covering management systems, health and personal care, resident lifestyle, and the physical environment and there are 44 expected outcomes such as human resource management, clinical care, medication management, privacy and dignity, leisure interests, cultural and spiritual life, choice and decision-making and the living environment.

Each home applies for re-accreditation before its accreditation period expires and an assessment team visits the home to conduct an audit. The team assesses the quality of care and services at the home and reports its findings about whether the home meets or does not meet the Standards. The Accreditation Agency then decides whether the home has met the Standards and whether to re-accredit or not to re-accredit the home.

Assessment team's findings regarding performance against the Accreditation Standards

The information obtained through the audit of the home indicates the home meets:

- 44 expected outcomes

Audit report

Scope of audit

An assessment team appointed by the Accreditation Agency conducted the re-accreditation audit from 13 August 2012 to 14 August 2012.

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

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

Assessment team

Team leader:	Heather Sterling
Team members:	Leah Kane
	Michelle Harcourt

Approved provider details

Approved provider:	Emmy Monash Aged Care Inc
--------------------	---------------------------

Details of home

Name of home:	Emmy Monash Aged Care
RACS ID:	3037

Total number of allocated places:	90
Number of residents during audit:	87
Number of high care residents during audit:	60
Special needs catered for:	Dementia

Street:	518 -526 Dandenong Road	State:	Victoria
City:	Caulfield North	Postcode:	3161
Phone number:	03 8508 9300	Facsimile:	03 9509 6176
E-mail address:	tanya@emmymonash.asn.au		

Audit trail

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

Interviews

	Number		Number
Management/board of directors	5	Residents	18
Registered nurses	5	Representatives	9
Enrolled nurses	6	Lifestyle and pastoral care staff	4
Care staff	3	Ancillary staff	4
Allied health staff	5	Contract staff	3

Sampled documents

	Number		Number
Residents' files	17	Resident agreements	6
Summary/quick reference care plans	16	Personnel files	9
Medication charts	20		

Other documents reviewed

The team also reviewed:

- Allied health referral folders
- Audits, surveys, schedules and results
- Bus safety folder
- Catering certificates, food safety plan, records and third party audits
- Cleaning schedules and guidelines
- Consent/permission forms
- Continuous improvement plan
- Community consultation documentation
- Dangerous goods and chemical registers
- Diabetic management plans
- Dietary and meal preference information
- Dietician assessments
- Education documentation
- Emergency procedures manual
- External contractor agreements
- Fire systems maintenance records
- Incident and risk documentation/analysis
- Infection surveillance data
- Laundry records and associated documentation

- Leisure and lifestyle information
- Lifestyle calendar, records of attendance and evaluations
- Mandatory reporting register and flowcharts
- Material safety data sheets
- Medication self-assessment form
- Meeting and forum minutes, agendas and schedules
- Memoranda
- Menu and menu choice records
- Newsletters
- Occupancy permit
- Opportunity for improvement forms
- Outbreak kit and outbreak management plans
- Pest control records
- Police check and statutory declaration records
- Policies and procedures
- Professional registration records
- Reactive and preventative maintenance program
- Recruitment and staff orientation documentation
- Registration of food premises
- Resident handover records
- Resident welcome pack and handbook
- Risk assessments
- Self-assessment report
- Sign in registers
- Staff and volunteer packs and handbooks
- Staff performance appraisals
- Staff roster
- Survey results
- Temperature check records
- Vaccination records
- Vision, mission and philosophy statements
- Wound care records.

Observations

The team observed the following:

- Activities in progress
- Advocacy, external complaints process and other support service brochures
- Annual Essential Safety Measures Report

- Cleaning in progress
- Equipment and supply storage areas
- Evacuation folder and resident list
- Facility map showing evacuation points
- Fire and safety equipment and signage
- Hand washing stations
- Infectious waste disposal
- Interactions between staff and residents
- Library/computer area
- Lifting equipment and mobility aids
- Living environment
- Meal and refreshment service
- Medication storage rooms
- Noticeboards
- Notification of Agency visit on display
- Pain clinic in operation
- Personal protective equipment
- Pest control baits
- Regulatory and legislation compliance folder
- Security key pass system
- Staff room
- Suggestion boxes
- Synagogue.

Assessment information

This section covers information about the home's performance against each of the expected outcomes of the Accreditation Standards.

Standard 1 – Management systems, staffing and organisational development

Principle: Within the philosophy and level of care offered in the residential care service, management systems are responsive to the needs of residents, their representatives, staff and stakeholders, and the changing environment in which the service operates.

1.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

Emmy Monash Aged Care has a quality system that drives continuous improvement across the four Accreditation Standards. The home identifies opportunities for improvement from a range of sources including resident and staff feedback, meetings, compliments and complaints, hazards and incidents, survey and audit results. Management document issues and opportunities in the home's continuous improvement plan and record actions for individual continuous improvement activities. Management communicate results through meetings, memoranda, newsletters, noticeboards and education. Management review and evaluate outcomes generated through the system. Staff said they are aware of the continuous improvement system and confirm improvements are ongoing. Residents and representatives confirmed ongoing improvements occur at the home.

Recent improvements relevant to Standard one include:

- As a result of a legislative update, management engaged a qualified external educator to conduct training for supervisors on pro-active complaints management. Management said supervisors are now more competent in identifying and seeking resolution to complaints from residents or representatives.
- Management identified an opportunity to enhance communication with staff across the home. A new system of memo folders has been set up, with supervisors ensuring all staff in their area read and sign off on relevant meeting minutes and memos. The quality manager oversees the system with monthly checks. Staff said management keep them well informed and staff are aware of the location of the memo folders.

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

Emmy Monash Aged Care has a system to identify and comply with relevant legislation, regulatory requirements and guidelines across all four Accreditation Standards. Management receive information through a legislative update service, peak bodies and Government departments. Management then disseminate requirements for regulatory compliance to relevant areas of the home through meetings, memoranda and education. Management review and amend policies and procedures in response to legislative changes. Staff confirmed they receive information about regulatory compliance issues relevant to their roles.

The home includes relevant updates on regulatory compliance at resident and representative meetings and in newsletters.

Examples of responsiveness to regulatory compliance obligations relating to Standard one include:

- The home has a system to maintain police record checks for staff, volunteers and external contractors.
- The home displays up to date information about the Aged Care Complaints Scheme.
- Management monitor and maintain professional registrations of staff.
- Management notified residents, representatives and staff of the re-accreditation audit.

1.3 Education and staff development:

This expected outcome requires that "management and staff have appropriate knowledge and skills to perform their roles effectively".

Team's findings

The home meets this expected outcome

Management provide educational opportunities to ensure staff have appropriate skills and knowledge to provide quality care to residents. Management develop an education calendar from observation of staff clinical practice, incidents, audit results, staff appraisals and requests and current residents' care needs. Management amend the education calendar throughout the year to include additional education opportunities as necessary. Management record and monitor staff attendance at training and external courses. Staff provide evaluation around education sessions to management for continuous improvement purposes. Documentation evidences management's commitment to ongoing professional development opportunities for all staff. Staff stated they are encouraged and supported to attend education and have completed their mandatory competencies.

The home's education sessions relevant to Standard 1 include:

- Accident/incident investigation
- Documentation/ACFI
- Leadership
- Positive communication strategies.

1.4 Comments and complaints

This expected outcome requires that "each resident (or his or her representative) and other interested parties have access to internal and external complaints mechanisms".

Team's findings

The home meets this expected outcome

The home provides residents, representatives, staff and visitors with formal and informal avenues to make comments and complaints. Management discuss this with residents and their representatives upon entry to the home. The home provides information to stakeholders about internal complaints processes and external resolution services through information handbooks, meetings, residential agreements and brochures. Mechanisms to notify the home of concerns or suggestions include "Opportunity for improvement" forms, correspondence, meetings and direct discussion with management. Documents show the home is responsive to stakeholder feedback and concerns are actioned in a timely manner.

Residents and representatives said they feel very comfortable approaching both staff and management with concerns and feel confident appropriate follow up will occur. Staff are able to describe appropriate actions for following through on resident comments and complaints.

1.5 Planning and leadership

This expected outcome requires that "the organisation has documented the residential care service's vision, values, philosophy, objectives and commitment to quality throughout the service".

Team's findings

The home meets this expected outcome

The home has documented vision, mission and philosophy statements on prominent display throughout the home. Management communicate these statements consistently in relevant stakeholder publications such as brochures, information handbooks and position descriptions. The home's board of directors and management team regularly review operational and strategic goals and hold relevant stakeholder consultations. Quality improvement is a standing agenda item at all facility-based meetings including resident and representative meetings. The quality committee meeting has representatives from all areas of the home, including representation from residents and representatives. Residents and representatives confirm they are involved with and kept well informed about the strategic direction of the home.

1.6 Human resource management

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

Team's findings

The home meets this expected outcome

The home has effective systems to ensure appropriately skilled and qualified staff are available to meet residents' individual needs. The home has documented systems and processes for the recruitment, selection and retention of qualified staff. All new and temporary staff undertake induction and orientation. Line managers implement an annual performance appraisal with staff and support and supervise staff on an ongoing basis to ensure staff maintain skills and practices. Rosters reflect the appropriate type and numbers of staff are rostered to meet residents' needs in clinical and non-clinical areas. Planned and unplanned vacancies are backfilled through permanent and casual staff availability and, if necessary, with nursing agency staff. Staff levels are increased on an as needs basis for special resident requirements. Staff said management supports them and staffing levels are adequate. Residents provided positive feedback about their supports and confirm staffing levels are adequate to meet their individual needs.

1.7 Inventory and equipment

This expected outcome requires that "stocks of appropriate goods and equipment for quality service delivery are available".

Team's findings

The home meets this expected outcome

The home has systems to ensure stocks of appropriate goods and equipment are available and maintained. Purchasing of consumables follows a regular order cycle to maintain an

adequate stock holding level. Identification of equipment needs is through staff reporting, changing residents' needs, audits and feedback mechanisms. Storage areas are secure, clean and sufficient for inventory and equipment not in use. The home has effective processes to ensure maintenance of all equipment in optimal condition, including an external and internal preventative maintenance program and a reactive maintenance procedure. Staff, residents and representatives said they are very satisfied with the appropriateness and quality of supplies and equipment used by the home and the responsiveness to maintenance requests.

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

Management and staff have access to current policies and clinical and other relevant resource documentation. Resident and staff handbooks, newsletters, noticeboards, communication books and diaries are in use. Dissemination of information occurs at shift handovers and by memoranda, meetings, newsletters and flyers. There are processes for document review and control, secure storage, archiving and destruction of confidential documents. Staff, residents and representatives confirmed they are satisfied with the level of information provided including opportunities for feedback and communication with management.

1.9 External services

This expected outcome requires that "all externally sourced services are provided in a way that meets the residential care service's needs and service quality goals".

Team's findings

The home meets this expected outcome

The home has effective systems to ensure external contractors provide services within agreed quality standards. The home maintains contracts with approved providers covering provision of services and agreed conduct. Management review service contracts regularly and make any changes required. External contractors sign in and out of the home and processes are in place to ensure current police checks of contractors. Management monitor the effectiveness of external services through a variety of mechanisms, including the homes' service improvement request system, staff and resident meetings, comments and complaints and quality audits. Staff and residents are satisfied with the external services provided.

Standard 2 – Health and personal care

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

2.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

The home has a system showing ongoing improvements in resident health and personal care. For a description of the system refer to expected outcome 1.1 Continuous improvement.

Recent improvements relevant to Standard two include:

- Clinical observation identified the opportunity to improve pain management interventions for residents. As a result, a dedicated pain management clinic has commenced with a contracted physiotherapy service. The program utilises massage, gentle exercise and transcutaneous electrical nerve stimulation therapy. Residents said they attend the clinic and find it helpful in managing their pain.
- Management identified the need to enhance staff knowledge and practice in providing person centred support. Subsequently management engaged a qualified external educator to provide staff with training in “Dementia Care Mapping”. The training has led to a further leadership course on promoting a culture of Person Centred Care. While this improvement activity is still in progress, management said the professional development opportunities have increased staff awareness of person centred support.

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 has a system to identify and ensure the home meets regulatory compliance obligations in relation to resident health and personal care. For a description of the system refer to expected outcome 1.2 Regulatory compliance.

Examples of responsiveness to regulatory compliance relating to Standard two include:

- The home demonstrates compliance with regulatory requirements regarding medication management and storage.
- Appropriately qualified personnel carry out specific care planning activities and care tasks.
- The home has policies and procedures and staff are made aware of their responsibilities in relation to unexplained resident absences.

2.3 Education and staff development

This expected outcome requires that “management and staff have appropriate knowledge and skills to perform their roles effectively”.

Team’s findings

The home meets this expected outcome

Management has systems and processes to monitor the knowledge and skills of staff to enable them to perform their roles effectively in relation to residents’ health and personal care. For details regarding education systems and processes at the home, refer to expected outcome 1.3 Education and staff development.

Examples of education and training provided in relation to Standard 2 include:

- Continence
- Dementia care mapping
- Medication management
- Pain medication
- The palliative approach and advanced care planning
- Wound management.

2.4 Clinical care

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

Team’s findings

The home meets this expected outcome

Residents receive appropriate clinical care. Clinical staff assess care needs and identify management strategies in consultation with the resident, or their representative. Clinical staff then develop individualised plans to guide staff practice when providing resident care. A review of resident care plans occurs regularly to capture changes in need or preference and staff consult with residents about their care needs at this time. Line management support and encourage staff to attend education sessions relating to clinical care. Residents and representatives said they were confident in the competency of all staff providing clinical care. Residents said care is appropriate and according to their needs and preferences.

2.5 Specialised nursing care needs

This expected outcome requires that “residents’ specialised nursing care needs are identified and met by appropriately qualified nursing staff”.

Team’s findings

The home meets this expected outcome

Appropriately skilled staff identify and meet residents’ specialised nursing care needs. Regular assessment of residents’ specialised nursing needs occurs on entry to the home in consultation with residents or their representatives. Other health professionals are consulted as needed, such as palliative care teams, and acute services from local hospitals that provide care to residents living at Emmy Monash Aged Care. Developed care plans document specialised nursing care needs, preferences and the interventions required. Appropriate staff review residents’ care plans regularly, or more frequently if there is an identified need. Staff said they attend education pertaining to specialised nursing care needs.

Residents and representatives said residents receive specialised nursing care in accordance with their needs and preferences.

2.6 Other health and related services

This expected outcome requires that “residents are referred to appropriate health specialists in accordance with the resident’s needs and preferences”.

Team’s findings

The home meets this expected outcome

Residents’ referrals to health professionals occurs in accordance with their needs and preferences. Assessments occur regularly to determine residents’ need for input from other health related services. Referrals to health professionals occur as needed using the home’s referral system. Some health professionals regularly visit the home including physiotherapists, medical officers, a social worker, podiatrists and dieticians. Staff said communication between allied health professionals’ and the home is appropriate to ensure implementation of recommendations. Residents and their representatives confirmed referrals to appropriate health specialists take place as necessary.

2.7 Medication management

This expected outcome requires that “residents’ medication is managed safely and correctly”.

Team’s findings

The home meets this expected outcome

The management of residents’ medication occurs safely and correctly. Residents have their medication administration needs assessed on entry to the home and reviewed as needed. Care plans and medication charts document the relevant information needed for staff to safely administer residents’ medication. Some residents choose to administer some, or all of their own medications; their ongoing ability to do this safely is monitored. Medication is stored safely and in accordance with legislative requirements. The home has a very active medication advisory committee meeting quarterly and overseeing the medication management at the home. Staff said they were able to access medication out of pharmacy hours, including on weekends. Residents and representatives said the administration of residents’ medications is timely.

2.8 Pain management

This expected outcome requires that “all residents are as free as possible from pain”.

Team’s findings

The home meets this expected outcome

Residents are as free as possible from pain. Staff conduct residents’ pain assessments on entry to the home and formally reassess all residents for pain two monthly, or sooner if there is an identified need. Care plans document the relevant triggers of pain and interventions required in guiding staff practice. The home uses a multidisciplinary approach to pain management and a physiotherapist runs a pain clinic four days a week. Referrals to appropriate health professionals occur as needed and recommendations are followed. Staff could describe verbal and non verbal cues for pain and a range of interventions to manage residents’ pain. Residents and representatives said they are satisfied with the management of residents’ pain.

2.9 Palliative care

This expected outcome requires that “the comfort and dignity of terminally ill residents is maintained”.

Team’s findings

The home meets this expected outcome

The home maintains terminally ill residents’ comfort and dignity. Management established a project this year in collaboration with external expert facilitators, to implement advanced care planning for all residents who wished to participate. The majority of residents have actively participated in this project and have their wishes documented in their records. The home’s social worker has been involved in this project, as has the pastoral care team. Additional consultation with residents and representatives in relation to end of life wishes occurs as necessary. Palliative care specialist and medical officer input occurs if additional assistance is required. There is the provision of appropriate equipment and supplies to accommodate palliative care. Palliative care plans are developed in consultation with medical practitioners and other professionals as needed and many staff have undertaken palliative care education. Staff described care measures undertaken when caring for terminally ill residents, which include comfort and dignity measures.

2.10 Nutrition and hydration

This expected outcome requires that “residents receive adequate nourishment and hydration”.

Team’s findings

The home meets this expected outcome

Residents receive adequate nourishment and hydration. Residents’ dietary needs and preferences are determined on admission and this includes the identification of any culturally specific and modified diets, most notably Kosher. Developed care plans document identified allergies, dietary needs, special utensils and the level of assistance staff provide when assisting with meals. The monitoring of residents weights occurs regularly and referrals to the dietician takes place as needed. Documentation showed and staff confirmed recommendations made by dietitians and speech pathologists occur. Residents and representatives said they were satisfied with the home’s approach to meeting residents’ nutrition and hydration needs.

2.11 Skin care

This expected outcome requires that “residents’ skin integrity is consistent with their general health”.

Team’s findings

The home meets this expected outcome

The home has processes to ensure residents’ skin integrity is maintained consistent with their general health. All residents undergo a skin integrity assessment to identify risk of skin breakdown or review an existing skin condition. Following this assessment, a management plan is developed and registered and trained enrolled nurses oversee the management of all wounds. The care plan details strategies to prevent skin breakdown including application of emollients, use of protective devices and position changes. External specialists are available to advise staff and review wound care if required. Staff said they monitor the condition of residents’ skin while they undertake personal care tasks such as showering. Residents said they are very satisfied with the care staff provide in relation to their skin.

2.12 Continence management

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

Team’s findings

The home meets this expected outcome

The home has processes for the assessment, management and ongoing review of residents’ individual continence needs. Residents’ continence management needs are assessed on entry and care plans developed to promote continence or maintain social continence. Continence aids are trialled and reviewed on a regular basis to identify the most suitable aid for each resident. The residents’ menu and individual needs are assessed to ensure enough fibre and fluids are provided to aid with bowel management. A range of interventions, medicines and nutrition, promotes regularity and minimises episodes of constipation. Residents said staff are always helpful with their continence needs and attend to them in a dignified and private manner.

2.13 Behavioural management

This expected outcome requires that “the needs of residents with challenging behaviours are managed effectively”.

Team’s findings

The home meets this expected outcome

The management of residents with challenging behaviours is effective in the home. The home has a secure dementia unit mostly attended by staff with a particular interest in caring for residents’ with challenging behaviours. Behaviour management assessments occur on entry to the home to ensure identification of residents with challenging behaviours. Care plans document relevant triggers for behaviours if any and relevant interventions required. Referrals to specialists in aged care mental health occur as needed and a very active and diverse lifestyle program is utilised to manage residents’ behaviours if appropriate. Staff have received training regarding behaviour management strategies. Residents said other residents did not infringe on their rights. We observed difficult behaviours being managed effectively and discreetly.

2.14 Mobility, dexterity and rehabilitation

This expected outcome requires that “optimum levels of mobility and dexterity are achieved for all residents”.

Team’s findings

The home meets this expected outcome

All residents undergo an assessment on entry to the home and an individualised program is developed to ensure optimum levels of mobility and dexterity are achieved. Care plans are developed in consultation with the physiotherapist and nursing staff and are implemented by all staff. Mobility aids such as walking frames and wheelchairs are available according to assessed needs to enhance mobility and ensure resident safety. All falls are managed through the incident reporting system. The home strives to create an environment to enhance residents’ mobility and confidence to engage in independent activities and access to the garden and local community where possible. Residents said staff are always helpful in assisting them with their mobility and dexterity needs.

2.15 Oral and dental care

This expected outcome requires that “residents’ oral and dental health is maintained”.

Team’s findings

The home meets this expected outcome

The maintenance of residents’ oral and dental health occurs effectively. Oral and dental care assessments occur on entry to the home and the development of a care plan occurs. Care plans document oral and dental care regimes, equipment and the level of assistance by staff needed. Access to residents’ preferred oral and dental health specialists occurs and staff arrange assistance to attend appointments where necessary. Staff said there is adequate stock and equipment to assist residents with maintaining oral and dental regimes. Residents and representatives said residents received assistance as required to maintain their oral and dental care.

2.16 Sensory loss

This expected outcome requires that “residents’ sensory losses are identified and managed effectively”.

Team’s findings

The home meets this expected outcome

The home ensures residents’ sensory losses are identified and managed effectively. Assessment of residents’ cognition, communication and hearing occurs on entry to the home. The level of assistance and any special aides required by residents is determined. Care plans reflect the assessments and staff regularly review them. Optometry services visit the home annually and some residents choose to access vision and hearing services externally. The lifestyle program incorporates a range of activities to stimulate residents’ senses such as gardening, cooking and coffee making. Residents said staff assist them in maintaining their sensory aids in accordance with their preferences.

2.17 Sleep

This expected outcome requires that “residents are able to achieve natural sleep patterns”.

Team’s findings

The home meets this expected outcome

Staff practices at the home assist residents to achieve quality sleep. All sleep assessments identify residents’ individual patterns and many residents commented on being able to achieve a good night’s sleep. Sleep care plans are developed and reviewed, indicating triggers that disturb sleep and identifying specific strategies to assist in achieving natural sleep patterns, including the room environment. Some residents said they use medicines to help them sleep and staff give medications in a timely manner when they request it. Residents state the home is quiet and staff respond quickly to their needs during the night.

Standard 3 – Resident lifestyle

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

3.1 Continuous improvement

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

Team’s findings

The home meets this expected outcome

The home has a system showing ongoing improvements in the area of resident lifestyle. For a description of the system refer to expected outcome 1.1 Continuous improvement.

Recent improvements relevant to Standard three include:

- Management and lifestyle staff identified the opportunity for residents to participate in an art project pilot with the National Gallery of Victoria. The “Art Down Memory Lane” project involves residents attending the gallery to study selected works. Management said the visits engaged and stimulated residents with dementia. The National Gallery of Victoria now have an ongoing relationship with the home and provide in house appreciation talks to residents from all areas of the home. Residents expressed a high level of satisfaction with “Art Down Memory Lane” activities.
- The volunteer liaison manager identified the opportunity to enhance the mobility and community connections of residents at Emmy Monash Aged Care through a walking program with residents of the co-located Emmy Monash apartments. As a result lifestyle and physiotherapy staff were engaged to identify and support residents with the capacity to participate and with assistance from the volunteer liaison manager residents are now participating in walks together with volunteers from the apartments. Residents have expressed a high degree of satisfaction with the walking program.

3.2 Regulatory compliance

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

Team’s findings

The home meets this expected outcome

The home has a system to identify and ensure the home meets regulatory compliance obligations in relation to resident lifestyle. For a description of the system refer to expected outcome 1.2 Regulatory compliance.

Examples of responsiveness to regulatory compliance relating to Standard three include:

- The home demonstrates compliance with obligations related to security of tenure, such as provision of a residential agreement.
- The home has processes to manage compulsory reporting of elder abuse.
- The home provides residents with goods and services as required by the Quality of Care Principles 1997 Division 2.1 Specified care and services for residential care services.
- The home has systems to ensure resident privacy, including the secure storage and destruction of confidential information.

3.3 Education and staff development

This expected outcome requires that "management and staff have appropriate knowledge and skills to perform their roles effectively".

Team's findings

The home meets this expected outcome

Management has a system to ensure staff have the necessary skills and knowledge to perform their roles effectively and for their ongoing performance to be monitored. All staff are encouraged to attend education pertaining to resident lifestyle to ensure an understanding of the residents' right to have the lifestyle they choose. For details regarding education systems and processes at the home see expected outcome 1.3 Education and staff development.

Examples of education attended by staff relevant to Standard 3 resident lifestyle include:

- Pesach (Passover) education
- Living longer, living better
- Leisure and lifestyle
- Mandatory reporting.

3.4 Emotional support

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

Team's findings

The home meets this expected outcome

Management and staff support residents to adjust to life in their new environment and provide emotional support on an ongoing basis. Prior to entering the home, residents and their families are informed about the services available at the home, residents' rights and responsibilities and information about relevant fees and charges. On entry the resident is orientated to their room, the environment and amenities and introduced to other residents. Lifestyle staff ensure new residents are aware of the activities program and commence assessments which capture social, emotional needs and life histories. A social worker/psychologist attends the home regularly to provide emotional support to residents and their families and education and advice to staff. Residents said staff are friendly, kind, caring and their emotional needs are met.

3.5 Independence

This expected outcome requires that "residents are assisted to achieve maximum independence, maintain friendships and participate in the life of the community within and outside the residential care service".

Team's findings

The home meets this expected outcome

Management and staff support residents to be as independent as possible and to participate in the life of their community. Lifestyle staff assess residents' needs and develop care plans which document strategies to maximise independence such as physiotherapy, exercise programs, shopping trips and gardening. Staff, representatives, friends and volunteers assist residents to maintain their individual interests, to participate in outings, have control over their financial matters where appropriate and maintain their civic responsibilities. Continued links with local organisations and schools are encouraged and incorporated into daily

activities. Residents confirmed they are satisfied their independence is encouraged, supported and respected.

3.6 Privacy and dignity

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

Team's findings

The home meets this expected outcome

Management ensures staff support and respect each resident's right to privacy and dignity. Staff receive information about privacy and confidentiality during orientation and on an ongoing basis. Staff knock and request permission before entering residents' rooms and close doors during personal care. Residents are encouraged to personalise their rooms with their own belongings. The home manages documentation securely and staff hold confidential conversations in private. Residents said staff are respectful and maintain their privacy and dignity at all times.

3.7 Leisure interests and activities

This expected outcome requires that "residents are encouraged and supported to participate in a wide range of interests and activities of interest to them".

Team's findings

The home meets this expected outcome

Management and staff encourage and support residents to participate in a range of interests and activities relevant to their individual preferences. The lifestyle co-ordinator visits all residents when they move into the home to discuss their leisure and recreational interests and social interaction preferences before preparing care plans. Activities cater for the needs of residents with physical, sensory and cognitive deficits with additional support provided for residents with dementia. The 'Life Enrichment Project' incorporates intergenerational, creative and artistic activities to improve resident's lifestyle and connectedness with the community. A pool of volunteers assist staff in undertaking the many and varied activities offered to residents at the home, including regular attendance by the National Gallery of Victoria and other community groups, choir recitals, bus outings, games, gardening, cooking and exercise groups. Residents and representatives have input into the program through meetings, suggestions and direct feedback. Lifestyle staff review the lifestyle program in response to resident and representative feedback. We observed residents enjoying a range of activities and residents/representatives interviewed by the team commented very favourably about the activities available to residents.

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

Management provides services in a manner which values and fosters residents' cultural and spiritual lives and supports individual interests. Staff identify residents' cultural and spiritual preferences on entry and document these in each resident's care plan. Staff ensure Jewish holidays and traditions are observed at the home and encourage participation of families and community members. A rabbi attends the home for weekly Sabbath service and other Jewish

festivities. The home has a Synagogue which is utilised for Sabbath, festivities and funeral services. Staff are sensitive to residents' cultural and spiritual needs and demonstrated knowledge of individual residents' requirements in this regard. Residents are satisfied with the way staff acknowledge and respect their cultural and spiritual needs.

3.9 Choice and decision-making

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

Team's findings

The home meets this expected outcome

Staff are committed to promoting and respecting resident choices and decisions ensuring independence is promoted and maintained. Residents have input into the services they receive including their personal care, choice of medical practitioner, rising and retiring times, food choices and their level of participation in activities. Residents and their representatives are encouraged to provide feedback about the care provided via formal mechanisms such as meetings, improvement forms and surveys. Staff said residents are able to have a choice about everything in the home. Residents provided favourable comments regarding the opportunities for them to exercise choice and control over their individual lifestyle at the home.

3.10 Resident security of tenure and responsibilities

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

Team's findings

The home meets this expected outcome

Residents have secure tenure within the home and there are processes to ensure they understand their rights and responsibilities. Management provide residents and representatives with information about security of tenure, residents' rights and responsibilities, specified care and services and independent complaint mechanisms prior to entry. The home documents this information in the resident handbook and residential agreement. The home informs staff about residents' rights and responsibilities, security of tenure and elder abuse through policy, the staff handbook and education. Consultation takes place between management, residents and representatives prior to changing residents' rooms. Residents said they feel secure in the home and are aware of their rights and responsibilities.

Standard 4 – Physical environment and safe systems

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

4.1 Continuous improvement

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

Team’s findings

The home meets this expected outcome

The home has a system showing ongoing improvements in the area of physical environment and safe systems. For a description of the system refer to Expected outcome 1.1 Continuous improvement.

Recent improvements relevant to Standard four include:

- In response to a legislative update regarding bus safety, management registered the organisation as a bus operator and arranged for all Emmy Monash Aged Care bus drivers to undertake relevant training. The home is now able to operate a number of buses ensuring residents can access the community on a regular basis.
- Management identified the opportunity to secure a Work Safe grant to enhance staff wellbeing. The grant has helped to establish a staff wellbeing project, with activities and information engaging staff in healthy eating, fitness, resilience and stress management. Staff said management keep them well informed of the range of wellbeing activities available to them and staff are enjoying participation with their workmates.

4.2 Regulatory compliance

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

Team’s findings

The home meets this expected outcome

The home has a system to identify and ensure the home meets regulatory compliance obligations in relation to physical environment and safe systems. For a description of the system refer to expected outcome 1.2 Regulatory compliance.

Examples of responsiveness to regulatory compliance and guidelines released relating to Standard four include:

- Chemical storage is secure and current material safety data sheets are available to staff.
- The home has policies and procedures for monitoring, responding to and reporting infectious outbreaks.
- The home shows evidence of following relevant protocols in relation to compliance with food safety regulations and guidelines.
- An external service provider monitors and maintains compliance with fire and safety regulations.

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 information about the education and staff development systems and processes in place at the home. The system for education and staff development includes compulsory education days. Staff confirmed they are encouraged to suggest topics, receive training in the use of new equipment and attend regular education relating to the physical environment and safe systems.

Examples of education attended by staff relevant to Standard 4 Physical environment and safe systems include:

- Bullying and harassment
- Clinical waste management
- Fire and evacuation
- Food handling
- Infection control
- Manual handling.

4.4 Living environment

This expected outcome requires that "management of the residential care service is actively working to provide a safe and comfortable environment consistent with residents' care needs".

Team's findings

The home meets this expected outcome

The home provides a safe and comfortable living environment for residents and has effective systems in place to ensure the environment is consistent with resident care needs and individual preferences. Private and communal living areas are of comfortable temperature, clean and well maintained, with systems in place for reactive and preventative maintenance. There are a number of internal and external living areas for residents to use and staff support residents to personalise their bedrooms. Staff employ appropriate practices to ensure the safety and comfort of residents. Residents are satisfied the home is safe and comfortable. Management and the Board of Directors consult with residents about improvements to the living environment through meetings, correspondence and formal consultation.

4.5 Occupational health and safety

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

Team's findings

The home meets this expected outcome

Management has effective systems to provide a safe working environment in a manner which meets regulatory requirements. Systems are in place to assess risks and develop effective risk controls. Staff receive education, have access to equipment and supplies to undertake safe work practices. Maintenance staff implement a system of corrective and

preventative maintenance to ensure the safety of equipment and furnishings. Management ensures staff are aware of health and safety responsibilities through documented procedures, education and the orientation process. Staff provide feedback about workplace health and safety issues using incident and hazard reports, meetings and through the health and safety committee members. Staff were able to describe incident reporting process and responsibilities relating to occupational health and safety.

4.6 Fire, security and other emergencies

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

Team's findings

The home meets this expected outcome

Emmy Monash Aged Care has effective systems to identify and minimise fire, security and emergency risks. The home has a comprehensive emergency management plan identifying appropriate procedures for a range of external and internal emergencies. Fire and emergency equipment is monitored both internally and maintained by qualified external contractors. Emergency exits and egress routes are free from obstruction. Security systems include keypass access, video monitoring and portable phone systems. There is a designated resident and staff smoking area and staff conduct smoking risk assessments for residents who smoke. Staff are able to describe appropriate actions to undertake in the event of an alarm. Residents' representatives say they have confidence in the ability of staff to respond to an emergency.

4.7 Infection control

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

Team's findings

The home meets this expected outcome

Management supports an effective infection control program. Staff complete mandatory training in infection control and have access to personal protective equipment, hand washing facilities and gel dispensers. Management maintains an infections register and undertakes trending and analysis of data. Management tables and discusses infection control reports at various meetings. Management adopts a proactive approach to infection control, utilising the services of infection control consultants for improvement purposes. Kitchen, cleaning and laundry practices follow current infection control guidelines, the home has a food safety program and there are regular pest control inspections. Staff confirmed they receive education in infection control and demonstrated an awareness of appropriate infection control practices relevant to their duties.

4.8 Catering, cleaning and laundry services

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

Team's findings

The home meets this expected outcome

Management has systems to provide hospitality services which support residents' quality of life and enhance the working environment for staff. Monitoring mechanisms include internal and external audits, reports and temperature records. Kosher meals are prepared which incorporate resident's likes, dislikes, special dietary requirements and food allergies. The menu is on a four weekly rotating cycle with alternative meal selection offered. Schedules are

in place to ensure cleaning tasks are completed and we observed the home to be clean and odor free during the visit. Laundry provides personal laundry services onsite and staff confirmed there are adequate linen supplies. We observed identified clean and dirty laundry areas. Residents expressed satisfaction with the catering, laundry and the cleanliness of the home.