



**Australian Government**

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**Australian Aged Care Quality Agency**

## **Sandhill Aged Care Facility**

RACS ID 8057  
25 Waveney Street  
SOUTH LAUNCESTON TAS 7249

**Approved provider: Aged Care Services Four (Park Group) Pty Ltd**

Following an audit we decided that this home met 44 of the 44 expected outcomes of the Accreditation Standards and would be accredited for three years until 28 May 2018.

We made our decision on 09 April 2015.

The audit was conducted on 03 March 2015 to 04 March 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.

<b>Expected outcome</b>	<b>Quality Agency decision</b>
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



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**Australian Aged Care Quality Agency**

## **Audit Report**

**Sandhill Aged Care Facility 8057**

**Approved provider: Aged Care Services Four (Park Group) Pty Ltd**

### **Introduction**

This is the report of a re-accreditation audit from 03 March 2015 to 04 March 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 03 March 2015 to 04 March 2015.

The audit was conducted in accordance with the Quality Agency Principles 2013 and the Accountability Principles 2014. 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 2014.

## Assessment team

<b>Team leader:</b>	Gayle Heckenberg
<b>Team members:</b>	Gerard Velnaar Jim Chamouras

## Approved provider details

<b>Approved provider:</b>	Aged Care Services Four (Park Group) Pty Ltd
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## Details of home

<b>Name of home:</b>	Sandhill Aged Care Facility
<b>RACS ID:</b>	8057

<b>Total number of allocated places:</b>	134
<b>Number of care recipients during audit:</b>	122
<b>Number of care recipients receiving high care during audit:</b>	N/A
<b>Special needs catered for:</b>	N/A

<b>Street:</b>	25 Waveney Street
<b>City:</b>	South Launceston
<b>State:</b>	Tasmania
<b>Postcode:</b>	7249
<b>Phone number:</b>	0363445566
<b>Facsimile:</b>	0363431035
<b>E-mail address:</b>	<a href="mailto:sandhillfm@acsagroup.com.au">sandhillfm@acsagroup.com.au</a>

## Audit trail

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

### Interviews

Category	Number
Management	2
Clinical/care/lifestyle staff	12
Administration assistant	2
Volunteers	1
Care recipients	14
Representatives	6
Hospitality and environment/safety staff	8

### Sampled documents

Category	Number
Care recipients' clinical files	13
Care recipients' lifestyle files	6
Medication charts	10
Infection reports	8
Incident reports	9
Personnel files	11
Care recipient agreements	9

### Other documents reviewed

The team also reviewed:

- Activities planner and participation records
- Admission checklist and admission form
- Allied health and specialist referrals and recommendations
- Audits - Internal and external
- Comments and complaints register
- Communication diaries
- Dangerous drugs register

- Education, training and attendance records
- Fire and emergency equipment maintenance records and manuals
- Food safety system documentation
- Handover sheets
- Maintenance and electrical test and tag records
- Mandatory reporting documentation
- Meeting schedule and minutes
- Memoranda and newsletters
- Menu
- Monthly infection registers, surveillance data and summaries
- Palliative care wishes form
- Pest control records
- Policies and procedures
- Privacy/confidentiality consent form
- Quality system documentation, audits, surveys and benchmarking data
- Resident and staff handbooks and information packs
- Resident information collection and consent form
- Resident medical directives
- Resident of the day information
- Resident smoking assessments and management plans
- Restraint authorisation form
- Safety system documentation
- Sign in registers
- Human resource documentation
- Rosters
- Police certificate information and statutory declarations
- Statement of wishes forms.



## Observations

The team observed the following:

- Activities in progress
- Annual maintenance certificate Form 56 displayed
- Brochures, noticeboards, information displays
- Chemical storage areas
- Church service in progress
- Cleaning in progress
- Electronic keypad security systems
- Emergency evacuation kit and egress routes and equipment
- Equipment and supply storage areas
- Hairdressing services
- Hygiene stations
- Interactions between residents and staff
- Internal and external living environment
- Kiosk services
- Meal and refreshment services
- Medication round in progress and medication storage
- Secure storage of confidential information and document shredders
- Sensory and skin tear kits
- Short observation – ground floor East wing dining room
- Suggestion boxes and feedback forms
- Vision, mission and philosophy on display.

## 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 actively pursues continuous improvement across the Accreditation Standards. Residents, their representatives and staff offer suggestions for improvement through verbal and written feedback and via consultation with management. Management initiate improvements in response to feedback from stakeholders, comments and complaints, safety, quality and clinical data. There are processes including internal and external audits and surveys used to monitor the home's performance. Management implement changes in a planned manner which includes review and evaluation of actions. Management provide feedback to stakeholders through meetings, consultation, correspondence and notice boards.

Examples of improvements relating to Standard 1 Management systems, staffing and organisational development include:

- Following survey feedback management introduced an employee assistance program to support staff well-being. The program includes the provision of counselling to staff. Management said staff have commented favourably on this initiative.
- Recognising an increase in the acuity of residents, management increased the work hours of the clinical care registered nurse, and introduced an additional morning and afternoon personal care assistant shift. Management said residents have provided positive feedback on this increase in staffing levels.
- Following a review of information technology at the home, management improved server efficiency, wireless accessibility, access to fax machines and improved the document control system. Management said staff report they have more timely access to information and improved after hour's communication as a result of these initiatives.

## 1.2 Regulatory compliance

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

### **Team’s findings**

The home meets this expected outcome

The home identifies changes relating to regulatory compliance through information received from Government departments, industry peak bodies, professional organisations and a legislative alert service. Management review this information and implement relevant changes to policies and procedures. Stakeholders are informed of any changes through meetings, emails and other correspondence. Management monitor the home’s processes and practices to ensure compliance with identified requirements. Regulatory compliance is an agenda item for relevant meetings. There is a system to ensure all personnel have current police certificates and statutory declarations.

## 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 and staff have appropriate knowledge and skills to perform their roles effectively. New staff participate in an orientation and buddy program on commencement, and are appraised after three months to identify training needs. Management has an education planner that includes mandatory training and self-directed training packages.

Management identifies educational opportunities through the comments and complaints system, observation of staff practices, audits, incident reports, meetings, staff appraisals, and an education matrix. Management inform staff of training packages through meetings, noticeboards, memoranda, flyers, and electronic messaging. Management maintains records of attendance and evaluates the effectiveness of all training. Staff said they are satisfied with the training they receive. Residents and representatives said they are satisfied staff have appropriate skills and knowledge to perform their roles.

Examples of education and staff development relating to Standard 1 Management systems, staffing and organisational development include:

- bullying and harassment
- documentation in aged care
- registered nurse/enrolled nurse responsibilities.

## 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

Each care recipient, their representative and other interested parties have access to internal and external complaints mechanisms. Management and staff inform residents and representatives of internal and external complaint and advocacy mechanisms upon induction to the home and through the resident handbook. Stakeholders have access to information to the complaints mechanism in the information directory, staff handbook, brochures and posters on display throughout the home. Management promotes an open door policy and assures anonymity for complaint management. Stakeholders are encouraged to make complaints or suggestions through feedback forms, meetings, telephone or in person.

Management record, monitor and evaluate comments and complaints as part of its quality system. Residents, representatives and staff said they are aware of the internal and external complaint processes and are satisfied management addresses complaints in an appropriate manner.

## 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 a documented vision, values, mission statement and commitment to high quality care. This information is displayed in the main entrance area of the home and included in material provided to residents and staff. The home demonstrates its commitment to quality through the provision of adequate resources to deliver quality services.

## 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

Management demonstrates there are appropriately skilled and qualified staff sufficient to ensure delivery of care and services in accordance with the standards and their own philosophy and objectives. Position descriptions and duty statements specify the skill requirements for all staff. New staff complete an orientation and induction program, including competency assessments. Experienced staff members mentor new staff through a buddy system. Management regularly monitor skills and qualifications of staff through appraisals, observation of staff practices, feedback from residents and representatives, surveys, ongoing competency testing and a review of residents' clinical care requirements. Management monitor

the roster to ensure sufficient staff numbers to meet residents' needs. Residents, representatives and staff said they are satisfied with staffing numbers and the competency of staff.

### **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 to provide quality service delivery. Designated staff and contractors ensure stock levels are maintained and utilise approved suppliers. The home has a preventive and reactive maintenance program. Equipment and goods are securely stored. Residents and staff said there are adequate supplies of goods and equipment provided to meet their needs.

### **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 organisation has effective information management systems in place. Management provides clearly documented policies and procedures and maintains a schedule to ensure they are current and relevant. Appropriate documentation and communication systems identify residents' care needs and help ensure required delivery of care. Management maintains effective communication with all stakeholders through meetings, newsletters, memoranda, noticeboards and the organisation's intranet and external website. Management ensures protection of their electronic systems with specific levels of password security with back up of systems occurring on a regular basis. Documents are securely stored, archived and destroyed when required. Staff said they have access to the administrative, care and operational information required to perform their duties. Residents and representatives said they have access to information and the home keeps them well informed.

### **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 systems to ensure the quality of externally sourced services. The home uses contractors from an approved supplier list, which includes after hours emergency assistance contacts. Management monitor the performance of contractors, and agreements detailing service quality goals are reviewed annually. Contractors undertake an on-site induction to ensure services are provided in a safe manner. Residents and staff said they are satisfied with the external services provided at the home.

## 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 regarding the home's continuous improvement system and processes.

Examples of improvements implemented in relation to Standard 2 Health and personal care include:

- A review of wound management led to the introduction of standardised wound management regimes at the home. Management said this resulted in more effective use of wound dressings and improved wound healing times. This improvement is supported by the provision of on-site wound management education and provision of specialist wound advice.
- A review of falls management at the home led to the reassessment of a number of relevant affected residents. Management said this has resulted in a reduction in the number of falls experienced by residents, especially those identified as experiencing frequent falls.
- An increase in the acuity of residents led to the purchase of oxygen saturation reading machines, and additional hoist slings, security and support devices. Management said this allows more effective monitoring of relevant residents and better management of residents' care 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

Refer to expected outcome 1.2 Regulatory compliance for information about the home's regulatory compliance systems and processes.

All registered nursing staff have current professional registrations and perform duties within their scope of practice. The home has a system to report, record and manage instances of unexplained resident absences and elder abuse.

## 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 details of the organisation’s education and staff development system.

Management and staff have appropriate knowledge and skills to perform their roles effectively in relation to their provision of residents’ health and personal care. Staff complete relevant training to assist them to fulfil their duties.

Examples of education and staff development relating to Standard 2 Health and personal care include:

- care of hearing aids
- diabetes management, including skin care
- nutrition and dysphagia – thickening fluids.

## 2.4 Clinical care

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

### **Team’s findings**

The home meets this expected outcome

The home demonstrates there are systems to ensure care recipients receive appropriate clinical care. On entry an initial admission checklist, assessment and interim care plan inform staff of resident care needs. Registered and enrolled nurses complete further comprehensive assessments over a fourteen day timeframe and use this information to create detailed care plans using a paper based documentation system. Care plan reviews occur using a resident of the day approach on a monthly basis. Participation from residents and representatives in care planning is actively encouraged and consultation with medical practitioners, specialists and a variety of allied health professionals takes place. Clinical care audits and incident report results assist registered nurses in monitoring residents’ clinical care alongside observation and from receiving staff and resident feedback. Clinical policies, procedures and flow charts guide staff practices and residents said they are satisfied with the clinical care provided.

## 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

The home demonstrates that care recipients’ specialised nursing care needs are identified and met by qualified nursing staff. As residents enter the home information is gathered to inform

staff of residents' individual complex care requirements. Consultation occurs with medical practitioners for treatments and registered and enrolled nurses initiate referrals to specialists as necessary. Medical directives and specialist recommendations are documented on specialised care plans. Management support staff in their clinical practice by providing specialised equipment, resources and relevant training. Specialists providing services and consultation to the home include a speech pathologist, dietitian, wound consultant, stoma therapist and palliative care team. Residents said they receive specialist input and support by staff when required.

## **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

The home's nursing staff ensure care recipients are referred to appropriate health specialists in accordance with the care recipient's needs and preferences. Visiting health specialist services include physiotherapy, podiatry, optometry, audiology and dementia advisory consultations. Treatments recommended by health specialists are communicated to medical practitioners, residents and representatives and staff. Residents said they receive visits from health specialists and staff support recommended treatments.

## **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 care recipients' medication is managed safely and correctly. Registered and enrolled nurses administer medications from single dose packs and multi-dose sachets, confirming administration on a paper based medication chart. Medication charts contain current photographs, allergies and individualised instructions for administration, and records reflect residents receive medications as instructed by medical practitioners. Residents participate in self-administration of medication when competence is confirmed through formal assessment. The home monitors their medication management system using audits and medication incident reporting, with results discussed at staff and medical advisory committee meetings. Nursing staff complete medication competencies annually. Residents said they receive their medications in a timely manner.

## **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 demonstrates all care recipients are as free as possible from pain. On entry to the home staff assess residents' pain by completing pain charts and a pain assessment to identify the types and location of pain described and observed. A pain clinic facilitated by an onsite



physiotherapist develops and reviews treatments on a regular basis. A specialised nursing care plan for pain includes information on pain relief measures and reassessment of residents' pain occurs monthly and as required. Treatments offered to assist with relieving residents' pain include a range of medications, massage, heat packs, exercise, limb movements and comfort measures. Staff said they consult regularly with medical practitioners regarding residents' pain. Residents said staff respond in a timely manner when they are experiencing pain and are satisfied their pain is managed effectively.

## **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 demonstrates the comfort and dignity of terminally ill care recipients is maintained. As part of the home's palliative approach, staff gather information on a palliative care wishes form to ensure records reflect resident requests. Consultation with the medical practitioner occurs for referral to an external palliative care team for advice as required. A detailed palliative care plan provides strategies of care to assist in maintaining residents' comfort during the palliative stage. Consideration of residents' cultural, emotional and spiritual needs occurs. Staff said they refer to residents' palliative care wishes in order to support residents and representatives during this time.

## **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

The home demonstrates care recipients receive adequate nourishment and hydration. As residents enter the home staff identify individual dietary requirements, menu choices, personal preferences and assistance required. As residents' dietary needs change, nursing staff notify and forward documentation to the kitchen. Monitoring of residents' weight occurs monthly and a risk rated assessment assists staff in responding to significant increases and decreases in weight. Meal and refreshment services are available throughout the day and residents have an opportunity to participate in a food focus forum to provide feedback to management on the menu provided. Staff implement and monitor recommendations from a speech pathologist and dietitian regarding modified diets, food consistencies and supplements. Residents said they are generally satisfied with the food and beverage services provided by the home.

## 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 demonstrates care recipients’ skin integrity is consistent with their general health. A risk rated skin assessment assists staff with their approach to skin care in providing individualised treatments. A specialised nursing care plan for skin and a wound management plan and treatment sheet detail strategies for minimising and reducing episodes of skin breakdown, and the wound care products used to promote healing. Referral to a wound consultant occurs as necessary for expert advice in consultation with the medical practitioner. A visiting podiatrist provides regular foot care and staff assist with regular finger nail and hair care. Management maintain a register of reported incidents regarding skin tears, wounds, pressure areas, bruises, excoriation, rashes and infections with results and identified trends discussed at monthly staff meetings. Residents said they are satisfied with the skin care treatments provided by staff.

## 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 demonstrates that care recipients’ continence is managed effectively. As residents enter the home staff gather information through specific charts and an assessment to identify continence concerns and to recognise and implement appropriate strategies of care. A continence management plan provides information on the type of continence aids allocated, individual toileting programs, cognitive and physical abilities and the level of assistance from staff required. Management maintain an infection register and monitor infection reports on urinary tract infections with data analysed and discussed at monthly staff meetings. Staff consult with the medical practitioner for recommended pathology and prescribed treatments. A bowel management program assists with the prevention of constipation and monitoring of residents’ fluid intake occurs when required. Residents said they are satisfied with the assistance provided by staff in order to manage their continence care in a timely and effective manner.

## 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 demonstrates the needs of care recipients with challenging behaviours are generally managed effectively. On entry staff collect information through specific charts and a range of assessments to identify behaviours of concern and to implement individualised strategies of care. Residents with cognitive impairment live within the general population on the ground floor area of the home. A variety of behaviour care plans inform staff of ways to

approach and respond to residents' care requirements and the lifestyle program assists with providing individual and group activities. Referrals occur to the dementia advisory services and mental health specialists as necessary for expert advice with recommendations discussed with the medical practitioner and residents' representatives. Staff report incidents on resident behaviours regularly with results and identified trends discussed at monthly staff meetings. Residents said they were generally satisfied with the care provided to residents with behaviours of concern.

## **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

The home demonstrates that optimum levels of mobility and dexterity are achieved for all care recipients. On entry staff and a physiotherapist conduct assessments on residents' mobility, dexterity and rehabilitation and incorporate information from a falls risk rated tool. Mobility and physiotherapy care plans identify a range of strategies to support residents' mobility including exercise, walking, aids and equipment and in maximising residents' independence. Staff report on resident falls and near misses as they occur with trends identified and outcomes discussed at monthly staff meetings. Records reflect nursing staff conduct neurological observations post falls according to the home's policy. Residents said they are satisfied with the assistance they receive from staff and the physiotherapist to maintain their 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 demonstrates care recipients' oral and dental health is maintained. On entry staff gather information and conduct an assessment to identify any oral hygiene concerns that may affect residents' oral and dental health. The assessment considers past dental appointments, eating and swallowing difficulties experienced and preferences for oral hygiene. A care plan contains details to inform staff on the approach required to assist residents with their oral and dental care. Staff support residents to attend external appointments with a dentist and dental technician when necessary. Mouth care products relevant to oral hygiene are provided by the home on a routine basis. Residents said they receive satisfactory assistance from staff to maintain their oral and dental care.

## **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 demonstrates that care recipients' sensory losses are identified and managed effectively. As residents enter the home assessments and a sensory kit assist with gathering

information regarding communication, vision, hearing, taste, touch and smell. A care plan provides information for staff on communication strategies and instructions for the care of vision and hearing aids. Residents attend appointments with a visiting audiologist and optometrist as required. Residents have access to an extensive range of large print books, talking books, large numbered telephones and oversized television screens. Residents said they are satisfied with the assistance provided by staff with the fitting and maintenance of aids and in meeting their sensory needs.

## **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 demonstrates care recipients are able to achieve natural sleep patterns. As residents enter the home, staff record past history information on residents’ routines and approach to sleep. Staff conduct sleep charts and an assessment over a seven day timeframe to identify contributing factors preventing their ability to achieve restful sleep. A care plan contains specific information and strategies such as waking and rising routines and comfort measures required to assist with settling residents at night. In consultation with the medical practitioner sedation is offered. Staff encourage residents to access alternatives to induce sleep including warm milk drinks, snacks and heat packs. Residents said staff attend to their preferences on retiring at night and they slept well and felt secure in the home.

## 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 regarding the home’s continuous improvement system and processes.

Examples of improvements implemented in relation to Standard 3 Care recipient lifestyle include:

- Resident feedback led to the purchase of a bus that can transport less mobile residents. Management said this has doubled the number of residents participating in community outings.
- Some residents expressed a wish for activities they can participate in alone. Management said two electronic devices were purchased with wireless internet accounts made available, and relevant residents have been very satisfied with these options.
- Following recognition that men at the home were less likely to participate in activities, a men’s shed was developed. Male residents provided positive feedback on this initiative and management said that they congregate at the shed to participate in a wide variety of activities.

### 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

Refer to expected outcome 1.2 Regulatory compliance for information about the home’s regulatory compliance systems and processes.

The home’s resident handbook and agreement include information on residents’ rights and responsibilities. The Charter of Residents’ rights and responsibilities is on display in the main foyer. Residents and representatives are informed about their right to privacy and confidentiality during the admission process.

### **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 of the home's education and staff development system.

Management and staff have appropriate knowledge and skills to perform their roles effectively.

Examples of education relating to Standard 3 Care recipient lifestyle include:

- elder abuse - mandatory reporting
- grief and loss
- leisure activities and dementia.

### **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 care recipient receives support in adjusting to life in the new environment and on an ongoing basis. Management and staff initially support residents by conducting introductory tours, providing information and answering questions from prospective residents. Staff consult with residents and representatives to assess individual preferences, family history, life events, and emotional support required to assist residents with their transition to life in their new home. Staff provide individual support on entry through orientation and introductions to fellow residents. Staff complete lifestyle profiles to identify strategies to emotionally support and incorporate resident needs into care plans. Residents' representatives and friends are encouraged to visit at any time. Residents and representatives said they are satisfied with the level of emotional support provided by staff on entry and on an ongoing basis.

### **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

Staff ensure 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. Staff complete resident assessments, develop care plans, and consult with residents and representatives to identify assistance required for residents to maintain their

independence. Residents are encouraged to continue important relationships. Staff provide information on events and lifestyle activities within the home and the wider community.

Residents have access to a men's shed. Voting booths are set up in the home at election times for residents to vote. Residents and representatives said they are satisfied with the level of assistance the home provides in promoting resident independence and participation in the home and the community.

### **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 organisation ensures each care recipient's right to privacy, dignity and confidentiality is recognised and respected. Staff receive training in regard to their responsibilities in maintaining the privacy, dignity and confidentiality of residents. Residents' personal details are only published if residents and representatives give their consent. The home has several quiet areas where residents can meet with representatives and friends. We observed staff knocking on residents' doors before entering their rooms and staff treating residents with warmth and respect. Staff provided examples of maintaining the privacy and dignity of residents when providing personal care. Residents said staff respect their privacy and dignity.

### **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

Care recipients are encouraged and supported to participate in a wide range of interests and activities of interest to them. Staff consult with residents and representatives when they enter the home to identify their preferences and needs. Staff complete lifestyle and leisure assessments and develop individual care plans reflecting residents' requirements. Residents' care plans are reviewed by staff on a regular basis to ensure the lifestyle program is responsive to changing needs and preferences. The home informs residents of activities through newsletters, verbal invitations, and a monthly calendar which is on display throughout the home. Residents are encouraged to provide feedback and suggestions regarding the activity calendar. The home has two buses for providing outings for residents. Residents and representatives said they were satisfied with the range and quality of activities, and the freedom of choice to participate in activities.

### **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 has processes for identifying and fostering individual customs, beliefs, and cultural and ethnic backgrounds. Staff consult with new residents and representatives regarding residents' lifestyle, interests, spirituality and cultural preferences and complete an assessment and care plan based on the information gathered. Staff access cultural care resources to assist them with providing appropriate care and support. Management make provision for celebrating days of cultural significance, religious days, theme days and individual events, such as birthdays. Regular church services occur within the home, and assistance is provided to residents who wish to have their own clergy visit. Ethnic-specific visits are organised where requested and links with community and cultural groups are encouraged and fostered. Residents and representatives said the home values and foster residents' individual interests, customs and beliefs.

### **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

Management provides residents and representatives with a contract containing information about their rights to make decisions, to have their choices respected, and their responsibilities to other people. The Charter of Residents' rights and responsibilities is on display throughout the home. Residents have choices regarding the services they receive including personal care, allied health services, medical practitioners, food and participation in activities. Management provides residents and representatives with the opportunity to provide feedback through meetings, surveys, suggestion and feedback forms, and discussion with key staff. Staff review and update care plans regularly in response to changes in resident wishes. Residents said staff respect their preferences and choices.

### **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

Management offer resident agreements, handbooks and information packs to all new residents, which contain information regarding their security of tenure, rights and responsibilities, details of care and services provided and schedules of fees. An interpreter service and advocacy brochures in a number of languages are available for people of non-English speaking background. Residents and representatives are encouraged to seek



independent financial advice. Management keep residents and representatives informed through resident forums, newsletters, brochures and noticeboards. Residents said they have secure tenure in the home and understand 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 regarding the home’s continuous improvement system and processes.

Examples of improvements implemented in relation to Standard 4 Physical environment and safe systems include:

- A review of work health and safety systems led to development of safe work procedures and extension of the safety audit program. Management said this has resulted in better monitoring of sling and hoist equipment and reduced the risk of adverse incidents due to staff having access to improved procedures to guide work practice.
- Staff identified dishwashers in the kitchenettes were not effectively cleaning dishes. New dishwashers were purchased and staff report these dishwashers clean and disinfect effectively and are safer and easier to operate.
- A review of risk management strategies relating to bus use led to the home obtaining operator accreditation. Management report this accreditation meets relevant legislative requirements and decreases the risk of adverse incidents, as bus safety plans have been developed.

### 4.2 Regulatory compliance

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

#### **Team’s findings**

The home meets this expected outcome

Refer to expected outcome 1.2 Regulatory compliance for information about the home’s regulatory compliance systems and processes.

The home has systems to ensure compliance with safety, fire and emergency, infection control and food safety legislation. Relevant staff attend mandatory education on these subjects.

### **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 of the home's education and staff development systems.

Management and staff have appropriate knowledge and skills to perform their roles effectively.

Examples of education relating to Standard 4 Physical environment and safe systems include:

- fire and emergency
- food handling for carers
- infection control – hand washing competencies.

### **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

Management are actively working to provide a safe and comfortable environment consistent with care recipients' care needs. Accommodation is predominantly single rooms with heating, ceiling fans and individual ensuites. Residents' rooms can be personalised. Residents have access to a variety of internal and external areas with adequate and appropriate furniture and fittings. Communal areas are air-conditioned. The internal and external environment is monitored and maintained in a safe manner. Residents and representatives generally commented favourably on the home's 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

Management actively work to provide a safe working environment that meets regulatory requirements. The home has systems that support the provision of a safe workplace. Risks are identified through audits, surveys and incidents and addressed using a risk management framework. Monthly meetings include the consideration of safety issues and incident data, and ways to address any identified issues. Staff are provided with appropriate personal protective equipment and training on safe work practices including manual handling. The home has first aid kits available for emergency use.

#### **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 systems that minimise fire, security and emergency risks. A fire and smoke detection and fire suppression system is installed within the home and is maintained by approved contractors. Staff are provided with training on fire safety, evacuation procedures and other emergency situations. Chemicals are securely stored and safety information on chemicals is readily available for staff reference. Staff demonstrate knowledge of their responsibilities in an emergency situation. The home employs measures to provide a safe and secure environment including external security lighting and access via doorbell after hours.

#### **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 demonstrates they have an effective infection control program including a central point of control. Staff complete infection control and hand washing competencies annually, and personal protective equipment is provided for all staff. The home conducts regular audits and routine pest control. Management monitors infections and collects data to identify trends, and determines appropriate interventions and opportunities for improvement. Management has procedures for food safety and the containment of sharps and blood spills. The organisation follows Government guidelines for influenza outbreaks, and has procedures to follow in the event of an infectious outbreak, including notification to relevant authorities.

We observed hand washing stations and hand sanitising units used by staff and management encourage resident and staff participation in the home's vaccination program.

#### **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

The home provides hospitality services in a way that enhances care recipients' quality of life and the staff's working environment. Meals are prepared on site and take account of resident preferences and changing needs. Cleaning staff complete assigned tasks according to a designated schedule and complete additional tasks in an effective manner. Laundry services are provided on-site seven days per week. Management monitor the staff's working environment and make improvements based on observation, review and staff feedback.

Residents and representatives commented favourably on cleaning and laundry services and are generally satisfied with catering services provided at the home.