



Aged Care
Standards and Accreditation Agency Ltd

Autumn Lodge Nursing Home

RACS ID 2643

1-3 Short Street

MACKSVILLE NSW 2447

Approved provider: Nambucca Valley Care 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 21 July 2015.

We made our decision on 28 May 2012.

The audit was conducted on 30 April 2012 to 4 May 2012. 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	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

Autumn Lodge Nursing Home 2643

Approved provider: Nambucca Valley Care Ltd

Introduction

This is the report of a re-accreditation audit from 30 April 2012 to 4 May 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 30 April 2012 to 4 May 2012.

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

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

Assessment team

Team leader:	Mary Butcher
Team member/s:	Jennifer Woodman

Approved provider details

Approved provider:	Nambucca Valley Care Ltd
--------------------	--------------------------

Details of home

Name of home:	Autumn Lodge Nursing Home
RACS ID:	2643

Total number of allocated places:	51
Number of residents during audit:	39
Number of high care residents during audit:	39
Special needs catered for:	N/A

Street/PO Box:	1-3 Short Street	State:	NSW
City/Town:	MACKSVILLE	Postcode:	2447
Phone number:	02 6598 5000	Facsimile:	02 6598 5001
E-mail address:	admin@nvcl.org.au		

Audit trail

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

Interviews

	Number		Number
Executive care manager	1	Residents	6
Facility manager	1	Representatives	5
People support manager	1	Quality and education manager	1
Registered nurses/enrolled nurses	4	Dietician, manager resident support	1
Business manager	1	Maintenance supervisor and staff	2
Care staff	7	Laundry staff	4
Laundry and cleaning supervisor	1	Volunteer	1
Physiotherapist	1	Cleaning staff	3
Catering staff	2	Maintenance staff	2
Roster clerk	1	Purchasing officer	1
Administration staff	1	Recreational activity officer	1
Music therapist	1		

Sampled documents

	Number		Number
Residents' files	9	Medication charts	14
Wound charts	9	Personnel files	5
Accident/incident reports	3	Comments and complaints	4
Suggestions and ideas for improvement	3	Resident satisfaction surveys	11
Medication incident reports	5	Staff satisfaction surveys	31
Resident agreements	5		

Other documents reviewed

The team also reviewed:

- Action plan for Christmas and new year
- Activity program records
- Audits including monthly call bell audit (maintenance), staff satisfaction survey, kitchen, catering
- Case conference notes
- Catering documentation including resident diet changes, resident meal plan, catering communication diets, high care daily tick sheets (special diets), resident self feed lists,

transportation of refrigerated products logs, menu audit for nutritional adequacy, satisfaction survey

- Cleaning documentation including kitchen cleaning schedules, daily tick sheets
- Communication diary
- Competency assessments including hand hygiene, medication management,
- Complex health care directives
- Confidential register of allegation or suspicion of reportable assault
- Daily care documentation folders
- Education documentation including annual calendar, individual staff records, attendance sheets
- Electronic care system
- Emergency care directives
- Fire, safety and emergency documentation including maintenance logs, fire safety officer communication book,
- Gastroenteritis outbreak evaluation and action plan, dated 11 May 2011
- Hospital transfer envelopes
- Infection control strategic documents including temperature monitoring sheets, principles of VRE management, cleaning of nebulizers program,
- Job descriptions
- Maintenance documentation including schedules, communication diary, pest control schedules and receipts, monthly activity report, thermostatic mixing valves reports, Legionella reports, air conditioning maintenance logs, preventative maintenance logs, maintenance requests, electrical tagging documentation
- Mandated fire training records
- Meeting minutes including quality, medication advisory committee, senior management, care staff, registered nurse and enrolled nurse, resident, high care staff,
- Observation records
- Order book and computerised ordering documentation
- Organisational structure chart
- Physiotherapy assessments and plans
- Plan for continuous improvement
- Police clearance documentation and schedule
- Policies and procedures including missing persons pathway, standards of rostering
- Quality benchmarking data
- Re-Accreditation self-assessment
- Recruitment policies and procedures,
- Resident incident- wandering
- Resident newsletter
- Resident pre-admission pack
- Resident satisfaction survey

- Residents' information package and handbook
- Specialist and allied health documentation
- Staff handbook
- Staff satisfaction survey 2012
- Staff, allied health and medical officer registration
- Strategic plan

Observations

The team observed the following:

- Activities in progress
- Clinical care equipment and supplies
- Clinical room
- Equipment and supply storage areas
- Fire fighting, emergency and safety equipment
- Hospitality service areas
- Infection control strategies including hand hygiene stations, spill kits, outbreak kits, colour coded equipment
- Interactions between staff and residents
- Living environment
- Meal service
- Medication administration system, storage of medications
- Menu displayed in dining room
- Palliative care room
- Volunteer booth

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

The home demonstrates that continuous improvement is pursued across the four Accreditation Standards. Opportunities for improvement are identified through a range of mechanisms. These include: improvement logs, feedback, input from residents and representatives, reviews, audits, surveys and a range of meetings. Clinical data such as infections and relevant information from peak bodies and government agencies is also considered. Continuous improvement is discussed and actioned through management meetings including continuous quality improvement and addressed through a range of other meetings. Information about continuous improvement is made available to stakeholders through discussion at meetings, meeting minutes, memos, notices, newsletters, and changes to policies and procedures. Residents, representatives and staff interviewed said they have opportunities to make suggestions for improvement.

The home is co-located with Autumn Lodge Hostel. The organisation also has two homes at nearby Nambucca Heads. Much of the organisation's continuous improvement and quality management systems are combined due to their close working relationship. The home's management team generally work across the organisation and two sites, with the exclusion of the facility manager and hostel supervisor. Examples of recent improvements relating to Accreditation Standard One include:

- The home has had significant changes to their management team over the last 18 months. The executive manager and facility manager commenced during this time. Many of the home's management systems have been reviewed and improvements made following review of results. Several new roles have been developed and key staff recruited. A people support role has been developed to manage human resources. A business manager has been recruited. A roster clerk role has been developed to support the home's rostering system. A procurement officer has been employed to improve resource management.
- Care staff now work across the organisation's four homes. Management state that this initiative has improved continuity of care and supported staffing systems. A 'standards of rostering policy' was developed to support the transition. Management informed us that this was a consultative process with staff, which is working well.
- The organisation is in the process of becoming a registered training organisation. This improvement is to support access to staff training and provide consistency in staff qualifications. Eight staff have recently trained to improve skills to enable them to provide training, evaluation and competency assessment, to support the training school. It is anticipated the organisation will be certified in the near future. Management intend offering Certificate III and IV in aged care plus skill sets such as medication modules. Recruitment processes are planned.

- Management have worked to improve staffing systems in the home. To improve leave systems a toolkit for the management of sick and annual leave has been developed. The people services manager has worked to support the home's return to work program. Management are pleased with the progress made.
- Management have worked to develop career paths for staff. Staff who have undertaken Certificate IV in aged care are recognised and rewarded. These staff have higher duties assigned to them, receive increased salary and wear a different uniform acknowledging their position.
- Compulsory staff uniforms have been introduced across the organisation. Uniforms are colour coded to support identification of staff roles. Management say this improvement has supported the professionalism of the staff and fostered unity.
- The organisation has enhanced training opportunities within the home. Ten trainees and two school based trainees are currently working across the organisation. Management have developed a relationship with TAFE to support this training and tailor the training to meet the home's needs.
- Computerised information management systems have been introduced at the home. A care planning and documentation system is in use. An upgrade of this program is scheduled for mid 2012. Additional computerised programs have been acquired to improve information systems including rostering and the anticipated training school. An intranet system is being developed to provide computerised access to policies, procedures, meeting minutes and training packages for staff.

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 has systems in place to identify and ensure compliance with relevant legislation, regulatory requirements, professional standards and guidelines. The home sources relevant information through its organisation, peak bodies and information, newsletters and alerts. This includes information from NSW Health Department, Department of Health and Ageing and the Aged Care Standards & Accreditation Agency Ltd. Relevant information is communicated within the home through newsletters, notices, memos, meetings and training (including orientation of new staff). Policies and procedures are amended and updated as required. In general staff were able to describe the regulatory requirements relevant to their work and workplace.

Examples of the home's monitoring and compliance with regulatory requirements relevant to Accreditation Standard One include:

- All staff, volunteers and where required, contractors, have a current criminal record check and where relevant, a statutory declaration.
- Notices were in place to advise residents, representatives and staff that the Accreditation site audit was taking place. These notices also informed residents, their representatives and staff that they could, if they wished, speak with the assessors in confidence.
- The home provides information to residents, their representatives and staff about internal and external complaints mechanisms.
- Resident and staff handbooks and the home's policies and procedures have recently been reviewed to ensure currency with regulatory compliance and recent changes within

the home. A contractor's handbook has been developed and the contractor's list, with registrations, licences and insurance updated.

1.3 Education and staff development:

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

Team's findings

The home meets this expected outcome

The organisation demonstrates there are systems to ensure all staff have access to education and training that will support the needs of residents. Information from mandatory requirements, staff surveys and the needs of residents provides the framework for the home's training program and its professional development for individual staff. Attendance records are kept and evaluations are monitored. The home accesses both internal and external training including a televised aged care program, educators from the local TAFE, area health services, local hospital services and contracted services such as pharmacy or continence aid providers. Staff said they are satisfied with the range and quality of education available to them and said it is practical and supports their work practices.

Education sessions that management and staff have attended recently and relating to Accreditation Standard One includes:

- Six staff have recently completed Certificate IV in aged care. Five care staff have been supported to complete the enrolled nurse qualification and another two staff are currently undertaking this process.
- Most staff have attended bullying and harassment training.
- Prior to the commencement of traineeships and school based trainees within the home a session on mentoring was held. Key staff attended this session.
- The home has acquired WELL (workplace English language and literacy) funding to support staff training and assessment. A focus of this training has been use of computerised documentation systems. Most staff have had their computer skills assessed. Management have identified several staff to be trained as leaders to support other staff.
- Two catering staff and an administration staff member are undertaking a Certificate IV in frontline management to support management of their departments. Two other staff are undertaking a diploma in management.

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

Autumn Lodge Nursing Home has systems which ensure residents, their representatives and other interested parties have access to internal and external complaints processes. Information on raising concerns is contained in the resident handbook and resident agreement and raised through meetings and discussion with staff. A review of meeting minutes showed concerns are raised and discussed in these forums. Concerns were seen to be raised at resident and representative meetings. Feedback forms were observed to be available around the home. The home demonstrates its system also manages confidentiality of complaints. Staff described processes to record and address resident concerns.

Residents/representatives said they are familiar with the complaints processes available to them.

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

Autumn Lodge Nursing Home has systems to promote the home's philosophy of care, mission and vision. The organisation is a community based, not for profit group with close links to their local community. The home has a volunteer Board and numerous volunteers who support the home. Partnerships have been developed to promote local development, skills and staff succession. The organisation has a vision, mission and philosophy statement which is included in documents such as handbooks, orientation material and resident agreements. The vision, mission and philosophy statement is also displayed in the home. Staff and residents/representatives interviewed were aware of the home's mission and values, and highly value the service provided by 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 generally has appropriately skilled and qualified staff to ensure quality services delivery for residents. Rosters are regularly reviewed and the team were shown examples of staff allocation taking into account available resources, resident care needs, resident category mix, staff availability and their skills and experience. A buddy system for new staff is used to promote knowledge and familiarity with residents' needs and the home's philosophy of care. Management demonstrate that they review staffing allocation and duties regularly to ensure optimum resident care.

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

There is a system to ensure the availability of stocks of appropriate goods and equipment for quality service delivery. Stock levels are managed and maintained by key staff in the home with the purchasing officer monitoring ordering. Chemical and electrical goods registers are maintained. There is an established reactive and preventative management system. Electrical tagging and testing occurs. Observation of storage areas showed there are adequate supplies and there is stock control and stock rotation procedures in place. Interviews with staff, residents and representatives confirmed there are sufficient goods and equipment available to support care and services.

1.8 Information systems

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

Team's findings

The home meets this expected outcome

The home maintains effective information systems. A review of documentation shows staff currency is maintained through a variety of systems including meetings, education sessions, written information including memos, electronic communication, and formal and informal discussion. Computerised systems prompt and monitor staff in the performance of their duties. Staff sign a confidentiality agreement on commencement of employment and adhere to a code of conduct. All computer information, including emails, is password protected and backed up. Residents/representatives interviewed say they are kept informed through resident meetings, newsletters and regular communication with staff. The team observed noticeboards strategically placed throughout the home to support communication and ensure everyone at the home has access to the latest information.

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

Externally sourced services are provided in a way that meets the home's and residents needs, and service's quality goals. Service contracts are managed through the organisation's business manager with the home's residents and staff providing ongoing feedback regarding the quality of goods and services. A register is kept which ensures currency of contractors' certification, insurance, qualifications and where required, police criminal history clearances. The maintenance supervisor directly supervises contractors' access to the home and monitors the quality of work. Contractors include hairdresser, pharmacy, podiatrist, pest control and electrician. Staff, residents and representatives said they are satisfied with the services being provided by external contractors.

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

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

Examples of recent improvements in relation to Accreditation Standard Two include:

- 100 electric beds have been acquired for the four homes, to improve care and comfort of residents.
- Management have commenced three monthly case conferencing. A schedule has been drawn up to ensure residents and/or family members are given an opportunity to participate in care planning. Teleconferencing has been provided to a family member who was unable to attend in person.
- A palliative care pathway has been developed and the draft is being reviewed.
- Improvements have been made to the home's medication management systems. Anticoagulants are now packed by the pharmacy to improve safety. Management are reviewing computerised medication charting systems and plan to implement such a system later in 2012.
- Management have sourced a portable dental service to visit the home to provide dental services to residents.
- The organisation has developed a collaborative program to provide a graduate program for recent registered nurse graduates. This program has been developed with the local area health service and the graduates rotate through several services during the program. This has been a successful initiative and recruitment will commence for the next program. Regular meetings are held to monitor debrief and evaluate. An education program including orientation has been developed to support the program. Management hope this program will support retention of registered staff locally and encourage aged care interest and expertise.

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 systems to identify and ensure compliance with relevant legislation, regulatory requirements and professional standards and guidelines. Refer to expected outcome 1.2 Regulatory compliance for information regarding the home's systems.

Examples of regulatory compliance with Accreditation Standard Two include:

- The home maintains a register of registrations and authority to practice for registered nurses and other health and related service personnel working within the home.
- The home has a system in place to ensure it meets the regulatory requirements for the reporting of unexplained absences of residents.
- A recent alert from a coroner's report, relating to a specific bed pole, was observed to have been acted upon by the home. Documentation identified that the physiotherapist promptly reviewed bed poles in the home and had the specific poles removed.

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 a description of how the home provides education and monitors the results to ensure all staff have the appropriate skills and knowledge to effectively perform their roles.

Examples of education and training related to Accreditation Standard Two includes:

- The home has a range of annual medication competency assessments which staff undertake prior to supporting medication management systems.
- Three staff are being supported to complete the enrolled nurse qualification.
- Dementia training has been provided to staff.

2.4 Clinical care

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

Team's findings

The home meets this expected outcome

Autumn Lodge Nursing Home ensures residents receive appropriate clinical care according to their needs and preferences. Registered nurses oversee the clinical system, and liaise with doctors and other health professionals. The home implements an electronic care system which includes comprehensive assessments, care planning, progress note documentation and health monitoring. Registered nurses develop, review and update care plans in line with any changes in each resident's condition or care needs. Results show current, individualised and comprehensive resident care plans which reflect the care provided by staff. Residents/representatives say they are satisfied with the clinical care provided at the home for residents.

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

Registered nurses identify, assess and provide residents' specialised nursing care needs in consultation with residents/representatives, the resident's doctor, specialists and other health

professionals. Registered nurses regularly review each resident's care plan according to a regular schedule to ensure specialised nursing care needs are documented and current. Complex health care directives provide guidance for implementation of the specialised nursing care needs and preferences of residents. Specialised nursing care provided by registered nurses may include catheter care, diabetic management, oxygen therapy, complex wound care, pain management and palliative care. Specialist nurses are consulted for support and advice as needed such as for continence management, palliative care or behaviour management. Residents/representatives say they are satisfied with the specialised nursing care provided for residents of the home.

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

Referral of Autumn Lodge Nursing Home residents to appropriate health specialists or other health professionals occurs according to each residents' needs and preferences. The organisation employs a physiotherapist, an occupational therapist and a dietician. Other health professionals who visit the home include a podiatrist and a speech pathologist. Staff assist residents to make external appointments and arrange transport to specialists or health professionals if required. Care plans are updated with changes after appointments and there are systems to ensure care staff know about changes in resident care. Residents/representatives say they are satisfied with resident's access to external specialists and health related services.

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

Registered nurses and a pharmacist oversee the medication system to ensure residents' medication is managed safely and correctly. Medications are delivered from the pharmacy in seven day unit dose blister packs or original packaging. Registered nurses, enrolled nurses and care staff who complete training and assessment to ensure competency, complete medication administration rounds. Medications are stored safely and securely. Residents who wish to self-medicate discuss this with their medical officer, complete a competency assessment and are monitored by staff to ensure safety. No current residents administer their own medications. A pharmacist conducts regular medication reviews with results provided to the resident's doctor and the home. Staff report medication incidents which are followed up by management to prevent re-occurrence. Residents say they are satisfied with the way their medications are managed.

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

The home has a pain management system which ensures all residents are as free as possible from pain. Registered nurses review residents who are experiencing pain and refer

them to their doctor as necessary. Clinical pain assessments and discussion with residents about their pain experience assist in the identification of successful strategies to manage their pain. The physiotherapist assesses residents for pain and plans therapy which is provided by staff including massage, electrical nerve stimulation and gentle exercise. Ongoing pain monitoring is undertaken by staff and documented on pain relief records and progress notes. Residents say their pain is managed well at the home and they are comfortable.

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 provides privacy, dignity and comfort measures according to the needs and preferences of residents for end of life care. On entry residents wishes for emergency care are identified and documented via an emergency care directive which includes palliative care. Residents may choose to remain at the home for end of life care and often prefer to do so. The home has a dedicated palliative care room which provides privacy and some facilities for family members or chosen friends to stay with the resident if they wish. Specialised palliative care plans are developed which include care interventions such as pain management, nutrition and hydration, mouth care, pressure care and emotional support. Religious representatives are available to provide spiritual support for residents, their family and friends according to their wishes. Interviews and observations show palliative care provided at the home includes appropriate clinical care for residents which ensure their comfort and dignity if they become terminally ill.

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

The home implements nutrition assessments to identify residents’ individual dietary needs and preferences when they first move into the home. Staff forward information such as food allergies, special diets, food likes/dislikes and meal preferences to the kitchen for implementation. Staff provide assistance to residents who require support at meal times. The home provides special diets and nutritional supplements if needed; and staff provide additional fluids and snacks between meals. Health monitoring by staff includes regular weight recording with fluctuations reported to a registered nurse for follow up. Referral to the resident’s doctor or the dietician is arranged if required. Residents say they generally enjoy the meals provided at the home.

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

Clinical assessments implemented by staff identify the skin integrity of each resident. Consultation with residents/representatives ensures any concerns related to skin care are identified, documented in care plans and care is provided according to the resident’s needs. Registered nurses oversee all skin and wound care management including provision of complex wound care and monitoring of wound healing. Residents’ skin integrity is protected through the use of regular showering/bathing, moisturisers, limb protectors, careful manual handling and pressure relieving equipment. Other care available includes visits by a podiatrist and hairdressing services on site. Residents say they are satisfied with the skin and wound care provided at the home.

2.12 Continence management

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

Team’s findings

The home meets this expected outcome

Continence assessments provide information for individualised toileting and bowel management programs. Consultation is undertaken with each resident to ensure any concerns related to continence are identified, documented in care plans and addressed by staff. The home has appropriate equipment such as raised toilet seats and adequate supplies of continence aids. A designated staff member oversees the continence system. Referrals to a continence advisor are undertaken when specialist advice is required. The effectiveness of resident’s continence programs is monitored on a daily basis by care staff with any changes reported to a registered nurse for follow up. Residents say they are satisfied with the assistance provided for toileting and management of their continence.

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 home has systems to effectively manage residents with challenging behaviour. Clinical assessments, consultation with residents/representatives and monitoring of behaviour identify triggers and successful interventions which are included in care planning. Management and staff know strategies used to effectively manage residents with challenging behaviour at the home. Registered nurses review the effectiveness of interventions and refer to the resident’s doctor as needed. Specialist advice is available to assist staff to plan care for residents with challenging behaviour. Observation of resident and staff interaction shows a patient and gentle approach to behaviour management at the home. Residents/representatives say the needs of residents with challenging behaviour are effectively managed at the home.

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

Initial clinical assessments identify the assistance residents require for transferring and mobility. Consultation with residents/representatives provides additional information for care plan development. The physiotherapist assesses residents in relation to transfers and use of equipment such as lifters, and those residents who fall or experience difficulty mobilising. A registered nurse or care staff implement therapy plans developed by the physiotherapist. The home implements a falls prevention program and residents at risk of falling have their medications reviewed, and are encouraged to wear appropriate foot wear and use a mobility aid. The activity program includes exercise sessions to maintain muscle strength, balance and joint range of movement where possible. Games and crafts are used to maintain and if possible improve resident's dexterity. Incidents/accidents including falls are investigated to identify interventions to prevent further occurrences. Residents say staff provide support to maintain their mobility where possible.

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

Clinical assessments identify the oral and dental needs and preferences of residents which are included in care planning and provided by staff. Oral hygiene care plans detail the care each resident requires including preferred routines for teeth cleaning and denture care. Care staff monitor resident's oral health during daily care and report any changes to registered nurses for follow up. Appointments with a dentist or denture technician are arranged for residents if required. Residents say they are satisfied with the assistance provided by staff for the cleaning of their teeth, and assistance to access external 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 identifies residents' sensory impairments through completion of assessments, review of their medical history and discussion with the resident/representative. Identification of aids such as glasses and hearing aids provides additional information for care planning. Interventions include assistance with cleaning glasses, replacement of hearing aid batteries, large print books, good lighting, uncluttered hallways and large screen televisions. Staff identify residents' taste and food preferences during assessments which are forwarded to the kitchen. Residents' sense of touch is stimulated through daily care provision including assistance with personal care and massage; and their sense of smell is stimulated at meal times from foods such as garlic bread. Staff assist residents to make and attend external appointments such as to optometrists, eye specialists or hearing specialists. Residents say they are satisfied with the support provided by staff for any sensory loss.

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

Clinical assessments identify residents’ preferred routines for naps during the day, settling at night and any concerns which may interfere with natural sleep patterns. Registered nurses review residents who experience sleep disturbances in consultation with their doctor. Residents are checked regularly throughout the night and those who are unable to sleep are provided with warm drinks or snacks and support by night duty staff. Residents say the home is quiet at night and they achieve a restful sleep.

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

Refer to expected outcome 1.1 Continuous improvement for information regarding the home’s continuous improvement system.

Examples of recent improvements in relation to Accreditation Standard Three include:

- A resident internet kiosk has been established for residents. Access to the internet is available including communication devices and games. Volunteers support this activity.
- An additional activity officer has been recruited to provide coverage when other staff are on leave. This improvement follows feedback received by the home. Staff say they are now replaced if on scheduled leave and generally if they take unexpected leave. A leisure and lifestyle coordinator has been recruited to manage the team and is to commence work soon.
- To enhance the activity program, following some resident feedback, a music therapist and an art therapist have commenced a program in the home. A resident recently won a prize at the local show with their artwork. Tai-chi has commenced on weekends. Staff say these improvements are working well.
- A person centred care approach has been developed in the home. An education package has been provided to staff. Staff say this has supported a holistic approach to resident care.

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 systems to identify and ensure compliance with relevant legislation, regulatory compliance and professional standards and guidelines. Refer to expected outcome 1.2 Regulatory compliance for information regarding the home’s systems.

Examples of regulatory compliance with Accreditation Standard Three include:

- A mandatory reporting policy is in place to manage allegations of elder abuse and the policy complies with legislation. A consolidated mandatory reporting register is in use and was shown to have recorded allegations of abuse. To ensure staff awareness of the legislation, staff attend mandatory education on elder abuse procedures during their orientation and are then required to attend annual training on this topic.
- To ensure confidentiality of residents’ personal information, all records are securely stored. Staff and volunteers sign confidentiality agreements.

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 a description of how the home provides education and monitors the results to ensure all staff have the appropriate skills and knowledge to perform their roles effectively.

Examples of education and training related to Accreditation Standard Three includes:

- The home has developed a person centred care approach to care delivery. Education has been provided to staff
- Elder abuse has been provided to staff. Management have worked to ensure staff attend this training. Only a small number of staff are yet to attend. Elder abuse is now a component of the orientation of new staff.
- The home has developed an education program to support volunteers at the home. Training is scheduled in June 2012, and will cover elder abuse, manual handling and fire safety.
- Two activity staff attended external conferences in the last year. Staff say this has been a useful information sharing process. Management are sourcing a Certificate IV in leisure and lifestyle and plan to support several activity staff to attend during 2012.

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

Autumn Lodge Nursing Home recognises the importance of providing emotional support for residents. Prospective residents and their representatives are provided with an information pack, are invited to ask questions and are given a tour of the home. On moving in residents are orientated to their new home, introduced to other residents and are assisted to settle in by staff. Recreational activity staff invite new residents to participate in activities as they feel ready. Church services are held at the home and at other times residents may choose to have religious representatives visit them. Relatives and friends are encouraged to visit freely. Residents say they are happy at the home and their representatives say they are satisfied with the care and support provided for residents.

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

Residents of the home are encouraged to remain independent and to maintain their contact with the local community. Clinical assessments identify residents' abilities, wishes and choices in relation to lifestyle which are documented in care plans. The physiotherapy and

exercise programs promote independence through maintenance or improvement of movement, strength, balance and mobility where possible. Interaction with the local community is through visitors to the home, outings with family where possible, the volunteer program, entertainers and groups of school children who visit. Newspapers, television and radio broadcasts keep residents informed of happenings outside the home. Residents say they enjoy the activity programs and their involvement in the community where possible.

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

The privacy and dignity of residents and confidentiality of their personal information is maintained and respected by the management and staff of the home. Residents sign consent forms for release of information to appropriate people and staff sign confidentiality agreements which are stored in personnel files. Residents who are accommodated in multi bed rooms have screens between the beds which are of sufficient length to facilitate privacy. A private palliative care room is available where representatives are able to stay with residents who are terminally ill. Staff address residents by their preferred name. Clothing is discreetly labelled and personal items are not shared between residents. Care documentation and resident files are stored securely and computers are password protected. Residents say staff are kind and polite, treat them with respect and are considerate.

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

Autumn Lodge Nursing Home provides a varied activity program which is developed in consultation with residents and is displayed around the home. Staff encourage residents with similar interests to interact socially with each other. Activities at the home include music therapy, art classes, bingo, bowls, exercise sessions, craft, puzzles, balloon games and happy hour. A weekly onsite café provides an opportunity for outings by residents in groups or with family and friends. Groups of entertainers and school children visit the home. The home is well supported by enthusiastic volunteers who provide room visits, pet therapy, hand massages, manicures and assist with activities such as art classes. An active auxiliary provides additional resources such as fine crockery for high tea and extra comforts such as scatter cushions. Recreational activity staff provide individual room visits for residents who are too frail or choose not to attend activities. Residents are encouraged to join in with activities by choice and attendance is monitored to ensure all residents receive some support. Residents say they enjoy the activities especially the music therapy.

3.8 Cultural and spiritual life

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

Team's findings

The home meets this expected outcome

The cultural and spiritual preferences of residents are supported and celebrated at the home. Information is identified related to residents' cultural and spiritual background when they first move into the home which is incorporated into care planning if appropriate. Key words and phrases are developed for communication with residents who have linguistically different backgrounds and staff have access to an interpreter service if required. Residents are assisted to attend regular church services at the home if they wish and choose whether they have religious representatives visit them. Significant cultural days are planned, attended by choice and celebrated such as Easter and Christmas. Other special days are enjoyed by residents such as St. Patrick's Day, Mothers' Day and Fathers' Day. Residents say they are happy living at the home and enjoy the special functions.

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

Residents are supported and encouraged to exercise choice and control over their lifestyle while living at the home. Residents are encouraged to decorate their personal space with memorabilia and other items of their choosing in line with the space available. Assessments and consultation identify residents' preferences for routine daily care, meal choices, their choice of doctor and other health services. Feedback on the running of the home is encouraged through survey completion, the comment system and during resident/relative meetings. Voting is available on site, through the mail or if residents wish they are provided with assistance to be removed from the register. Residents say they are satisfied with the choices they are able to make about their care and lifestyle.

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

The home has established policies and procedures that ensure the residents have secure tenure within the residential care service, and understand their rights and responsibilities. New residents are provided with information about their rights and responsibilities on entry to the home. This information is explained both prior to and during the entry interview. A resident agreement is offered to each resident during this time to formalise occupancy arrangements. The agreement includes information for residents about their rights and responsibilities, complaints handling, fees and charges, their security of tenure and the process for the termination of the agreement. Room changes are undertaken only after consultation with residents/representatives. Residents/representatives say they are satisfied with the information on residents' rights provided to them.

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

Refer to expected outcome 1.1 Continuous improvement for information regarding the home’s continuous improvement system.

Examples of recent improvements in relation to Accreditation Standard Four include:

- The organisation and home have purchased new furniture to improve the environment, resident amenity and comfort. Clover leaf tables have been purchased to improve resident access for chair bound residents. New comfort chairs have also been purchased.
- Management have reviewed their safety systems including a review of the home’s environment. Access to the home has been reviewed. Several of the home’s external doors have been closed to entry. There is now one main entry to the home, which has improved security and monitoring of visitors and contractors to the home. A plan to fence part of the home has been developed to increase safety of the area close to a busy road. A plan was developed for the New Year and Christmas period to ensure staff coverage and communication systems in the event of an emergency.
- A plan to improve laundry labelling system has been developed following feedback about lost clothing. A new labelling machine has been sourced and a process developed where resident labelling has become compulsory. The process has been streamlined and staff say it is working well with lost clothing reduced.
- Following an infection control audit additional hand hygiene stations have been strategically placed about the home. A review of outbreak management has occurred including outbreak management kits. Stores of disposable supplies have been increased in the event of an outbreak. A schedule has been developed to improve cleaning of comfort chairs.

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 systems in place to identify and ensure compliance with relevant legislation, regulatory requirements and professional standards and guidelines. Refer to expected outcome 1.2 Regulatory compliance for information regarding the home’s systems. Examples of regulatory compliance with Accreditation Standard Four include:

- The home has a current New South Wales Food Authority Licence to prepare and serve food to vulnerable populations.
- The home displays its current annual fire safety statement.

- The home has an occupational health and safety committee. Management has attended training on the Work Health and Safety regulations and is preparing to implement the relevant changes in line with requirements within the transition framework.
- Infection control reporting and practices are consistent with government health regulations and guidelines.

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 a description of how the home provides education and monitors the results to ensure all staff have the appropriate skills and knowledge to effectively perform their roles.

Examples of education and training related to Accreditation Four include:

- The people support manager has attended a three day workshop relating to the recent changes to work health and safety. Nominations have been sought for a new committee at the home and the five day course to support the safety committee has been booked.
- Management plan to source a Certificate II in hospitality services and support staff to undertake the training.
- Bullying and harassment training has recently been provided to staff.

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 is surrounded by well maintained gardens and there are sufficient private and communal areas for residents and their visitors. Residents/representatives interviewed say the home is safe and comfortable and meets residents' needs. Document review and discussion with management demonstrates they are actively working to provide a safe and comfortable environment and use a risk management approach in consultation with residents/representatives, staff and others involved with the home. Regular environmental audits, surveys, accident/incidents and hazard reporting is carried out and the results are discussed at staff and management meetings for inclusion in future planning. Management demonstrate that maintenance is completed in a timely manner.

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 of Autumn Lodge Nursing Home work to provide a safe environment that meets regulatory requirements. A review of the home's safety plans, the risk management policies and discussions with staff show the home undertakes continuous improvement to ensure a safe working environment. Mandatory OH&S training is conducted for all staff at orientation, annually and as needed, and the home's safety committee meets regularly to monitor progress. A review of audits and surveys show maintenance staff and external providers provide regular preventative and routine maintenance on all equipment and staff are trained in the appropriate use of equipment. Staff said they are supported and encouraged by management to report potential and actual risks within the home and these are addressed appropriately in a timely manner.

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

Staff are required to attend mandatory fire safety education at orientation and then on at least an annual basis. Building exit signs were clearly lit, with exits clear of obstruction and evacuation plans were in place in strategic parts of the home and observed present in all areas of the home. A review of documentation shows that fire equipment and systems are regularly checked and maintained. The home has an emergency plan which covers a range of potential emergency scenarios. Emergency contact details are available to staff. The majority of staff were able to describe their role in dealing with an emergency and overall residents and representatives said that they were confident staff were trained in evacuation procedures and would know what to do in 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

The home has an effective infection control program that includes policies and procedures, monitoring of resident infections, management of contaminated waste, safe food handling practices, cleaning and laundry procedures and staff training. Infection control education is provided to all new staff at orientation and then for all staff on an ongoing basis. Infection control measures are in place including standard precautions, the use of protective clothing and equipment and immunisation programs. Staff interviewed demonstrate an understanding and knowledge of infection control procedures, have availed themselves of the home's immunisation program and were observed to be following infection control guidelines during the site audit. The home regularly collects and analyses resident infection information to plan improvements and ensure quality care for residents.

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

The home obtains information regarding resident's needs and preferences on moving to the home and actions are taken to monitor hospitality services to ensure they enhance residents' quality of life and staff's working environment. Staff receive training in food handling, manual handling, chemical handling and infection control.

Catering

All meals are prepared in the central kitchen and reheated on site, and menus offer choice. Careful attention is paid to presentation, residents' preference and portion size. The team observed residents enjoying their meals. Residents requiring assistance were not hurried and special equipment was provided as needed. The home adheres to a food safety program and the menus are rotated six weekly. Most resident/representatives interviewed said they are happy with the meals provided at the home and snacks and drinks are available during the night as requested. The catering service recently received an A rating from the NSW food authority.

Cleaning

The home's cleaning staff have systems to ensure the home is maintained in a clean and tidy manner. The home adheres to a rigorous cleaning schedule and staff receive training and supervision. Cleaning staff were observed to wear protective clothing and use appropriate colour coded equipment according to task. Resident/representatives interviewed said they were very happy with the way cleaning was carried out at the home and staff were always courteous and efficient.

Laundry services

Residents/representatives interviewed say they are satisfied with the laundry services at the home and that clothing is cared for and returned in a timely manner. Designated laundry staff attend to residents' personal laundry supported by care staff to ensure maintenance of laundry processes.