



Aged Care
Standards and Accreditation Agency Ltd

Barclay Gardens

RACS ID 0837

105 The Southern Parkways

Forster NSW 2428

Approved provider: Darvelan 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 08 January 2017.

We made our decision on 27 November 2013.

The audit was conducted on 15 October 2013 to 17 October 2013. 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

Barclay Gardens 0837

Approved provider: Darvelan Pty Ltd

Introduction

This is the report of a re-accreditation audit from 15 October 2013 to 17 October 2013 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 15 October 2013 to 17 October 2013.

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:	Barbara Knight
Team member/s:	Judith Ann Charlesworth

Approved provider details

Approved provider:	Darvelan Pty Ltd
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Details of home

Name of home:	Barclay Gardens
RACS ID:	0837

Total number of allocated places:	100
Number of residents during audit:	88
Number of high care residents during audit:	67
Special needs catered for:	dementia

Street/PO Box:	105 The Southern Parkways	State:	NSW
City/Town:	Forster	Postcode:	2428
Phone number:	02 6555 5699	Facsimile:	02 6555 5688
E-mail address:	lillian@pinkbells.com.au		

Audit trail

The assessment team spent 3 days on-site and gathered information from the following:

Interviews

	Number		Number
Organisation management team	2	Specialist mental health for older persons (SMHOPS) team representatives	2
Executive director of care	1	Continence advisor	1
Director of care	1	Residents/representatives	14
Nursing unit manager	1	Extra services specialist	1
Registered nurses	1	Chef manager	1
Care staff	8	Catering staff	2
Physiotherapist	1	State cleaning manager	1
Physiotherapy aide	1	Cleaning contract manager	1
Dietician	1	Cleaning staff	1
Maintenance officer	1		

Sampled documents

	Number		Number
Residents' files including assessments, care and lifestyle profiles and plans, progress notes and associated documentation	9	Medication charts including primary chart, signing sheets, nurse initiated medications, self medication assessments	10
Wound assessment and management charts	10	Personnel files including position descriptions and confidentiality agreements	8
Resident agreements	8		

Other documents reviewed

The team also reviewed:

- Analgesic patch application records
- Anticoagulant medication variation records
- Audit data, additional audit log
- Catering records consistent with Hazard Analysis Critical Control Point (HACCP) requirements, NSW Food authority food safety audit results and recommendations
- Complaints register
- Continence assessments, pad distribution lists, continence evaluation forms, monthly review records
- Continuous improvement documentation including plan for continuous improvement, improvement suggestions forms, audit and survey data, audit inspection outcomes log

- Diabetic and blood pressure management plans, observation charts including weight, blood pressure, blood glucose levels
- Dietary information including daily menu selection lists, food suggestion log, trolley food preference sheets, dietary preferences and allergy/analysis sheet, discarded food log, menu comment cards, dietary needs, allergies and changes sheets
- Education documentation including education matrix, staff education tool box records, signed education records, education calendar, staff electronic information folder, education and policy and procedures files, orientation and questionnaire packs
- External cleaning contractor records - cleaning schedules, cleaning manual, cleaning duty procedures, kiosk cleaning log, safety data sheets
- Falls risk assessments, falls monitoring and investigation forms
- Fire documentation including detection systems log, emergency lighting maintenance log, service providers maintenance reports fire, sprinkler system maintenance reports, evacuation protocols, fire equipment testing results
- Handover guidelines and handover sheets
- Incident and accident reports including investigations, monthly incident data analysis
- Infection control documentation including infection control manual, vaccination records, infection monitoring records
- Laundry duty procedures
- Lifestyle documentation including assessments, care plans, care plan review schedule, activities programs, participation records, evaluations, cultural dictionary, calendar of cultural and religious dates
- Maintenance schedule, maintenance requests, warm water testing schedule, equipment cleaning schedule, quarterly cleaning schedule
- Mandatory reporting register
- Master roster, fortnightly rosters, change of shift requests, staff casual list, leave requests, staff allocation sheets, position description folder
- Meeting minutes, memoranda, newsletters, communication diaries
- Missing persons log
- Pest management reporting log, pest sighting reports, pest recommendations and checklists, pest audit reports, corrective action requests
- Physiotherapy assessments, care plans and evaluations, physiotherapist communication folders
- Police certificates register and statutory declarations. Police check electronic summary
- Policies and procedures, policy amendment folder
- Professional registration records
- Resident handbook and resident newsletters
- Schedule eight drug registers
- Staff appraisal register
- Staff handbook
- Weight management policy, weight loss guidelines

Observations

The team observed the following:

- Activities calendar displayed and activities in progress including exercise classes, special morning tea, pamper afternoon
- Charter of residents' rights and responsibilities displayed
- Closed circuit television monitoring and keypad access to secure areas
- Equipment and supply storage areas and equipment in use
- Fire safety statement, fire equipment, exit signage
- Information notices and brochures displayed
- Interactions between staff, residents, representatives
- Internal and external comments and complaints brochures on display, improvement suggestion forms, suggestion box
- Ladies scrabble game in progress
- Living environment internal and external
- Lunch time meal service, morning and afternoon teas
- Medication administration rounds, storage of medications, medication refrigerator temperatures
- Outbreak kits, spill kits, evacuation packs, sharps containers, locked infectious waste bins
- Staff handover at change of shift

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

Barclay Gardens actively pursues continuous improvement across the four Accreditation Standards through implementation of the organisation quality framework which is resident and achievement focused. The home's continuous improvement system includes audits across all standards, resident and staff surveys, improvement logs, comments and suggestion forms, incident reporting and the monitoring of key performance data. Management and staff from each department meet three monthly to discuss identified opportunities for improvement during continuous improvement committee meetings. These are discussed and added to the home's continuous improvement plan and are then actioned by the relevant department. Monitoring of improvements to completion and evaluation of outcomes shows ongoing improvements to the quality of care and services. Residents/representatives and staff say they are involved in and satisfied with improvements at the home. Improvement initiatives implemented by the home over the last 12 months in relation to Standard One Management systems, staffing and organisation development include:

- Following staff feedback that workloads in some areas were heavy, management reviewed the roster. A new roster was introduced in September 2013, with staff hours across morning and afternoon shifts increased by a total of eight hours. Morning shift now commences at 6am to attend to residents who prefer early showers. All afternoon staff now start at the same time and work in pairs. Staff interviewed said the roster changes are working well
- A director of care was appointed in 2012 to provide a stable environment and ensure good clinical care outcomes. An executive director of care has also been employed to oversee the organisation's three sites. Management said morale in the home has improved and staff agreed the management changes have had a positive effect on the running of the home.
- After reviewing the continuous improvement template, changes were made. The template is now easier to read and includes the benefits/outcomes of the improvements for residents.
- A return to work coordinator has been employed to support injured employees. The result has been a reduction in worker's compensation claims and better outcomes for injured workers returning to work.

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

Management has systems to identify compliance with relevant legislation, regulatory requirements, professional standards and guidelines. The organisation receives information about regulatory compliance through membership of industry organisations, a legislative update service, industry journals, networking conferences, as well as being on the mailing list for government departments and agencies. Relevant changes in legislation and guidelines are communicated to staff through memoranda, communication books, education, information, verbally, at meetings and copies of changes to legislation are attached to staff pay slips. Staff are required to sign to show they have read and understood the changes. Management monitors compliance with legislation, regulatory requirements and professional guidelines through the observation of staff practices, performance appraisals, the audit program and feedback. Staff report they are satisfied with the information provided to them about legislation, regulatory requirements, professional standards and guidelines relevant to their work.

Examples of regulatory compliance relevant to Accreditation Standard One include:

- Barclay Gardens has recently reviewed and updated its policy and procedures to reflect changes in legislation.
- Residents/representatives were informed about the dates of the re- accreditation site audit.
- There is a system to ensure police certificate checks for all staff remain current
- Management ensures all residents/representatives and staff have access to internal and external comments and complaints mechanisms. Comments and complaints are a standing agenda item at staff and resident meetings.

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

Barclay Gardens has strategies to ensure that management and staff have appropriate knowledge and skills to perform their roles effectively. There is orientation for new staff and a flexible education program which includes needs identified through performance appraisals, complaints, mandatory requirements, results of audits and surveys, in response to resident care needs and staff requests. The organisation facilitates networking opportunities and conferences to assist managers to undertake their roles effectively. Staff education is provided by management and registered nurses. It is also delivered by contracted suppliers of goods and services and allied health professionals. The executive director of care oversees all education. Staff receive individual coaching when a skill deficiency is identified. Staff attendance at in-service education is monitored. The knowledge and skills of staff are evaluated on an ongoing basis through observation, performance appraisals, audit and survey results and feedback. Staff reported satisfaction with the education program. Residents/representatives expressed confidence in the competence and experience of staff.

Education relevant to Accreditation Standard One includes but is not limited to:

- The executive director of care recently attended education regarding legislative changes to security of tenure.
- Bullying and harassment
- Comments and complaints
- Confidentiality
- Continuous improvement
- Documentation and report writing
- QUEST

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

Residents/representatives advise they are aware of how to make a comment or complaint. Residents/representatives are informed of complaint mechanisms when the resident moves into the home and they are encouraged and supported through informal discussions, meetings and surveys to provide feedback on the services provided. The residents' handbook includes information about internal and external complaints' mechanisms. Staff take action to address minor concerns that residents or representatives report to them. Residents/representatives advise they would talk to senior management, who they know by name, if they have any significant concerns or complaints. Management keeps a record of complaints made to ensure that action is taken and feedback provided. Residents said that when they have raised concerns, management takes action. The staff handbook provides information about the complaints' mechanisms available to staff.

1.5 Planning and leadership

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

Team's findings

The home meets this expected outcome

The organisation's vision statement is displayed throughout the home, and documented in the home's publications. The organisation's commitment to quality is evident through its policies, procedures and other documents that guide the practices of management and staff.

1.6 Human resource management

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

Team's findings

The home meets this expected outcome

Residents at Barclay Gardens express a high level of satisfaction with the care, lifestyle and hospitality services provided to them by staff. Residents said there are sufficient staff to provide services that meet their needs. Residents/representatives state the services residents require are delivered by staff who are experienced in their duties. Staff feedback confirms they usually have sufficient time and support to undertake their duties during their rostered shifts. Staff advise relevant education is provided to ensure they have the necessary skills to undertake their duties. Management reported staffing levels are monitored and adjusted according to resident care needs, staff skill mix, services required and feedback from residents, representatives and staff. The organisation has procedures for staff recruitment, orientation and performance appraisals. Staffing rosters demonstrate staff who are on leave are routinely replaced. Staff state they enjoy their work and expressed a commitment to the residents and to the home.

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 ensures stocks of appropriate goods and equipment are available for quality service delivery. All purchases of equipment are recorded in an equipment register and an equipment instruction folder is readily accessible to staff. Maintenance records show equipment is serviced according to a regular schedule. Consumables are ordered regularly and management monitors usage. Management and staff review the quality of goods and supplies and all stock is inspected on delivery. Perishable items are identified and stored appropriately, ensuring stock rotation. A review of documentation shows maintenance requests are attended to in a timely manner. The system is monitored for effectiveness through audits and feedback from staff and residents/representatives. Staff advise there are sufficient supplies of goods and equipment to provide quality care for residents.

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

Barclay Gardens has systems both electronic and manual to manage the collection and dissemination of information that supports care and service delivery. Electronic data is password protected, accessible at varying levels to authorised staff and regularly backed up. Confidential hard copy files are securely stored and there is a system for their archiving and disposal. Staff have access via the organisation's intranet to policies and procedures, forms and other resources. Information is also disseminated to staff and residents via email, newsletters, family conferences, memoranda, at meetings and education sessions.

Discussions with staff and residents/representatives indicate there is an efficient two way flow of 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

The organisation has a system to ensure that all externally sourced services are provided in a way that meets the home's needs and quality goals. Service and supply agreements are signed with contractors and approved suppliers. Feedback on the quality of services provided by external contractors is encouraged and collected from residents/representatives and staff through meetings, audits, comments, complaints and surveys. The organisation evaluates the performance of external service providers to ensure the services provided are efficient and effective. Visiting contractors sign in and out and visiting contractors are overseen by the maintenance officer. The organisation also reviews the performance of external service providers according to relevant regulations and the home's policies and procedures. Identified performance issues are communicated to contractors so that problems can be rectified, if possible, or a new contractor sought. Management and staff expressed satisfaction with the quality of the services currently 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 further information including a description of the overall system of continuous improvement. The home has made planned improvements in Accreditation Standard Two - Health and personal care, which include the following examples.

- Blood pressure charts for all residents with blood pressure management plans have been reviewed. These charts are now all signed off by the residents' medical officers and the charts record the acceptable parameters for each resident. This provides staff with clear guidelines when recording blood pressures.
- The home has entered into an agreement with a physiotherapy company. A physiotherapist visits the home 7 days per week and each resident is assessed every three months, or post fall and after hospitalisation.
- It was identified that sensor mats next to resident beds were a slip hazard. As a result management purchased non slip matting which is stuck underneath the mats to prevent slipping. Management state this change has resulted in improved resident and staff safety.
- Due to the higher demand for lifting equipment and the sharing of lifters between wings management have purchased a new lifter for the low care section of the home. This has reduced waiting time for residents and improved time efficiency for staff.
- Management met with the pharmacist and key staff to review warfarin medication management. As a result a variable dose administration chart has been developed. This chart will avoid confusion between the primary medication chart and the medication signing off chart.

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

Management has systems to identify and ensure compliance with relevant legislation, regulatory requirements and professional standards and guidelines. For further information relating to the home's regulatory compliance system, please see expected outcome 1.2. Examples of regulatory compliance relevant to Accreditation Standard Two include:

- The storage, administration and recordkeeping of drugs of addiction (Schedule 8) is in accordance with regulations and best practice guidelines.
- A medication advisory committee provides the home with advice concerning regulatory requirements applicable to medication management and related processes.

- A system to monitor professional registrations to ensure registered nurses and allied health workers have a current authority to practice.
- A system for the mandatory reporting of alleged and suspected reportable assault and/or abuse. Management and staff have received information and education on elder abuse policies and procedures.

2.3 Education and staff development

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

Team’s findings

The home meets this expected outcome

Management is committed to provide a dynamic and evolving level of learning within the facility to ensure contemporary practice. Barclay Gardens has a competency based training program to cover clinical and care competencies. Education sessions relevant to Accreditation Standard Two include but are not limited to:

- Pain management
- Death and dying
- Dementia care
- Wound management
- Continence
- Oral care
- Pressure area care
- Nutrition
- Skin integrity
- Medication management

2.4 Clinical care

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

Team’s findings

The home meets this expected outcome

There are systems and processes at Barclay Gardens to ensure that residents receive appropriate clinical care. Care information is obtained pre entry and on entry to the home and initial care needs are identified. A comprehensive suite of assessments is undertaken and a care plan developed in consultation with the resident and family members. Care plans are reviewed on a regular basis and/or as care needs change. Review of resident files and discussions with staff demonstrate that all dimensions of resident need are identified during the assessment period and strategies implemented to ensure individual wishes and preferences are recognised and respected. Residents/representatives interviewed state they are informed of and involved in the care planning processes and are generally very satisfied with the care provided. Comments made include “staff are very caring”, “staff understand our needs”.

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

At Barclay Gardens residents’ specialised nursing care needs are identified and met by appropriately qualified staff. Documentation and discussions with staff show residents’ specialised nursing care needs are identified when they move into the home and addressed in the care planning process. Specialised needs such as complex wound care, oxygen therapy, and diabetic management are overseen by the nursing unit manager and registered nurses. Residents may be referred to specialist care services for advice and support in the management of their particular needs. Residents/representatives are satisfied that specialised nursing care needs are met.

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

Documentation including resident files, demonstrates that appropriate referrals are made to health specialists including medical and allied health practitioners, such as dietician, speech pathologist, podiatrist and optometry and audiology services, psychogeriatrician and mental health teams, palliative care teams. Referrals are made in consultation with the resident, family members and the resident’s medical practitioner. Providers of specialised services may visit the home or alternatively residents are assisted to attend external appointments. Residents/representatives advise residents have access to specialised services as required.

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

Barclay Gardens can demonstrate that residents’ medication is managed safely and correctly. This includes the prescription, dispensing, storage and administration of medications. Medications are administered by registered nurses or competency assessed care staff using a multi dose blister packaging system. Observation of medication administration rounds demonstrates staff carry out appropriate checking procedures in accordance with medication management policy. Staff are aware of and respond to individual need such as time to ingest, or breaking/crushing of medications. Residents who wish to self-medicate must be assessed as competent to do so. Medications are stored appropriately within a secure environment. Medication issues are discussed at the medication advisory group which meets three monthly and has multidisciplinary representation. Residents interviewed are satisfied with the management of their medications.

2.8 Pain management

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

Team's findings

The home meets this expected outcome

Residents of Barclay Gardens are assessed at entry and on an ongoing basis to ensure they are as free from pain as possible. There is a holistic approach to managing pain with consultation between staff, residents/representatives, allied health and medical practitioners. Verbal and non verbal indicators of pain are considered and interventions are monitored and evaluated on a regular basis. Regular gentle exercise, heat packs and massage assist in pain management. Residents advise staff are aware of and understand their individual pain management issues and provide analgesia and other therapies to keep them as free from pain as possible.

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

Residents who are terminally ill are enabled to remain at Barclay Gardens where their comfort and dignity can be maintained. On entry to the home residents and family members are provided with information regarding advanced health care planning, and are given the opportunity to indicate any specific instructions in relation to palliative and terminal wishes. There is liaison with the palliative care team for advice and support including pain management issues. Soft music and aromatherapy may be used in accordance with residents' wishes at this time. Visiting ministers of religion are available for spiritual and emotional support. Staff interviewed display understanding of, and are empathetic with, resident and family end of life wishes.

2.10 Nutrition and hydration

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

Team's findings

The home meets this expected outcome

Residents' nutrition and hydration status is assessed on initial entry to the home to ensure their intake needs will be adequately met. Documentation demonstrates that assessments include the need for special diets, food preferences, physical limitations such as swallowing difficulties, oral and dental deficiencies, sensory loss and dexterity issues. Resident needs and preferences are identified and communicated to the catering staff, as are any changes. Residents' weights are monitored monthly and more frequently if significant weight gain or loss is identified. Residents may be referred to the dietician and/or speech pathologist as necessary. Use of dietary supplements, extra fluids and other modifications to food and fluid intake are actioned as recommended. Residents were observed enjoying their meals in pleasant surroundings and they commented favourably on the variety of food and choices available.

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

Residents’ skin integrity is assessed on moving into the home through the initial assessment process. Staff monitor residents’ skin as part of daily care practices and report any changes. The registered nurses oversee wound management and residents may be referred to external wound consultants for expert support. Pressure relieving devices such as alternating pressure mattresses, sheepskins and limb protectors are available for those residents with decreased mobility who may be at risk of breaches of skin integrity. Incidence of skin tears and pressure ulcers is monitored and reported and care plans adjusted as necessary. Residents have access to podiatry services, hand and nail care and a hairdresser attends regularly. Residents report they are satisfied that their skin care needs are met.

2.12 Continence management

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

Team’s findings

The home meets this expected outcome

Barclay Gardens demonstrates that its’ processes ensure residents’ continence is managed effectively. There are initial and ongoing assessments and individualised care plans are developed. A continence advisor attends regularly and is available for advice, support and education. Staff are trained in continence management including scheduled toileting, the use of continence aids, the assessment and management of urinary tract infections, and bowel management strategies which include daily monitoring. Staff ensure residents have access to regular fluids, appropriate diet and medications as ordered to assist continence. There are weekly informal meetings with the Director of care and continence link nurses to review any changes to resident needs. Residents are satisfied that their continence is well managed and that their privacy and dignity is maintained.

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

There are systems to effectively manage residents with behaviours of concern. Initial and ongoing assessments identify residents’ behaviour management needs and care plans which include the triggers for, and strategies to address such behaviours are developed, implemented and regularly reviewed. Residents may be referred to a psychogeriatrician and/or mental health team for advice and support. Staff are aware of underlying causes of behaviour management concerns, such as pain and urinary tract infections, and advised the team of methods they would use to exclude these issues. The secure unit was noted to be calm and peaceful during the three days of the audit and observation confirmed that staff are skilled in responding to residents with behaviours of concern. Representatives interviewed are very satisfied with the way in which such behaviours are managed.

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

Residents are assessed on entry to Barclay Gardens and regularly thereafter and management plans developed to ensure optimum levels of mobility and dexterity are achieved and maintained. A physiotherapist attends daily reviews residents and develops programs which are carried out by physiotherapy aide. Falls risk assessments are undertaken and the physiotherapist reviews all residents following a fall. Daily exercise classes and walking programs assist in maintaining mobility and were observed to be well attended. Assistive devices such as walking frames and wheelchairs enable residents to maintain their independence. Staff include passive exercises for non mobile residents during daily care routines. Craft classes, art work and other like activities assist residents maintain dexterity. Residents/representatives are satisfied that residents' mobility needs are met.

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

There are strategies to ensure residents' oral and dental health is maintained. Documentation demonstrates that residents' oral and dental health is assessed when they move to the home and care plans developed. Staff assist residents to maintain oral and dental health through mouth and denture care and observe any associated pain and/or discomfort. Diet and fluids are provided in line with the resident's oral and dental health needs and preferences. Residents/representatives advise they are satisfied with the oral and dental care provided and residents are assisted to attend dental appointments.

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

On entry to the home residents' sensory losses are identified and included in the care planning process. Referrals are made as necessary to specialist services including speech pathologist, optical and audiology services. Staff ensure that residents' sensory aids are well maintained. The activities program includes pursuits that promote the use of all five senses including touch, taste and smell. Cooking, hand massage and aromatherapy were observed taking place during the audit. Residents/representatives are satisfied that resident sensory needs are identified and managed.

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

Resident sleep patterns are assessed on entry to the home including preferred sleeping times and any history of night sedation. Barriers to natural sleep including pain, continence, hunger, emotional state are considered when planning care. As residents are accommodated in individual rooms with en suite bathrooms, disturbance by noise or other residents’ activities is minimal. Residents are able to determine their retiring times and opportunities to watch television and/or listen to music as they prefer. Residents are satisfied that they are able to maintain their normal sleeping arrangements

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 further information regarding the overall system of continuous improvement. Improvement relevant to Accreditation Standard Three include:

- With the increasing number of staff from different backgrounds the home now holds multicultural theme days. Staff work with the recreational activity team to provide opportunities for residents to explore different cultures. Resident and staff feedback has been positive.
- After consultation with recreational activity staff a more individualised social care plan has been developed for residents. Staff interviewed state this care plan makes it easier for them to get to know residents.

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

Management has systems to identify and ensure compliance with relevant legislation, regulatory requirements and professional standards and guidelines. For further information relating to the home’s regulatory compliance system, please see expected outcome 1.2. Examples of regulatory compliance relevant to Accreditation Standard Three include:

- There is a system to manage unexplained absence of residents in accordance with regulatory requirements.
- The obligations of staff to maintain the confidentiality of residents’ information and to respect residents’ privacy are included in the staff handbook. Staff sign a declaration on commencement of their employment stating they will abide by the home’s policies and procedures in this regard.
- The Charter of residents’ rights and responsibilities is displayed in the home and is in the residency agreement which is provided to each resident on entry.
- All residents/representatives receive a copy of the residency agreement upon residents’ entry to the home and this document provides information about residents’ entitlements.

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

Barclay Gardens has systems and processes for ensuring that management and staff have appropriate knowledge and skills as described in expected outcome 1.3 Education and staff development. Examples relevant to Accreditation Standard Three include:

- One recreational activity staff member holds a Certificate IV in health and lifestyle. Two recreational activity staff have either a Certificate III in community services or Certificate III in Dementia care.
- The recreational team network regularly with other recreational activity staff within the organisation.
- Recreational activity staff have attended education on elder abuse and privacy and dignity.

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

Barclay Gardens demonstrates that residents are supported in adjusting to life in the new environment and that their emotional status and needs, and are identified and met on an ongoing basis. Pre entry residents/representatives have a designated staff member (Facility Services Manager) as a key contact for advice and support. On entry residents are welcomed into the home, introduced to staff and residents, advised of activities they may enjoy and of the opportunities to maintain their links with the community. Initial assessments cover a social, cultural and lifestyle profile including personal preferences. The lifestyle program offers opportunities through one to one interaction with staff, for residents' emotional needs to be identified and addressed. Observation demonstrates that staff are empathetic with, and supportive of residents, and residents/representatives are satisfied residents emotional needs are met.

3.5 Independence

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

Team's findings

The home meets this expected outcome

Processes at Barclay Gardens ensure residents are assisted to maintain their independence and participate in community life. Residents are supported to be as independent as possible with their activities of daily living and receive assistance to maintain or improve their mobility so they can move independently. Residents are encouraged to maintain their family and social networks and assisted to attend external activities. Some residents have their own cars and drive to medical appointments and social events within the community. Lifestyle staff liaise with the electoral commission and postal votes can be arranged at election time for those who wish to continue their civic responsibilities. Residents who are able may prefer

to vote independently and are encouraged to do so. Residents interviewed are satisfied with the ways in which they are encouraged to maintain their independence.

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

Residents' rights to privacy, dignity and confidentiality are recognised and respected. Information regarding resident's rights and responsibilities is included in pre entry and entry information and residents give consent for disclosure of personal information. Staff receive education regarding respecting residents' rights to privacy and dignity and the need to maintain their confidentiality. Observation and interviews demonstrate that staff understand and are respectful of residents' privacy and dignity, knocking on doors before entering and calling them by their preferred name. Smaller sitting areas are available for residents and family members if they wish to have more privacy when visiting. Resident couples are provided with "Do not disturb" signs should they wish for private time together. Residents' information is securely stored and appropriately archived. Access to computerised information is password protected. Residents interviewed state staff care for them in a respectful and dignified manner.

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

Barclay Gardens ensures residents are encouraged and supported to participate in a wide range of interests and activities of interest to them. Residents' social and cultural history and their current activity interests are identified when they move into the home and included in the plan of care. A comprehensive program is developed by the lifestyle team based on residents' identified preferences and on feedback received. Residents receive an individual copy of the program which is also displayed. There is opportunity to provide feedback through surveys and resident meetings. Residents in the secure unit are encouraged to participate in mainstream activities such as concerts and themed morning teas, but more individualised activities are provided in the unit. These residents enjoy a secure garden area with rabbits and guinea pigs and the opportunity to watch the local bird life. Observation over three days identified a wide variety of large and small group activities in progress. Residents interviewed state there is plenty to do, but if they choose not to participate in activities their wishes are respected.

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

Barclay Gardens is able to demonstrate that each resident's interests, customs, beliefs and cultural background is valued and fostered. Residents are predominately of Anglo/European

origin but each resident's cultural background is considered when planning for example, meals, activities and specific celebrations. Culturally specific days are celebrated and staff will dress in appropriate costumes. A recent survey demonstrated that residents are happy with the current monthly religious service conducted at the home. For those residents who prefer more individual support the activities staff will organise pastoral carers to visit. Activities staff will also provide the opportunities for, and participate in bible reading and private prayer. Residents interviewed are satisfied that their cultural and spiritual beliefs and values are recognised and supported.

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

Each resident at Barclay Gardens is encouraged to exercise choice and control over their lifestyle. Residents and their families receive information pre entry and on entry to the home regarding their rights and responsibilities and on the choices available to them. Resident preferences are identified during the assessment processes and documented in the care plan. Case conferences are held with residents and their family members regarding any changes to care that may be required. Residents have the opportunity to provide feedback on any issues through the suggestion forms, surveys and resident meetings. Resident feedback is incorporated into the activities program and decisions not to participate are respected. Residents/representatives report that they are informed of choices and involved in decisions regarding care issues and referrals to specialist services. Residents interviewed are satisfied that their decisions and choices regarding care and lifestyle issues are respected.

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

Barclay Gardens is able to demonstrate that residents have secure tenure within the home and understand their rights and responsibilities. A residential aged care service agreement and resident handbook is provided for all residents. The agreement outlines information on security of tenure, the Charter of residents' rights and responsibilities, fees/bonds, privacy matters and specified care and services. The resident handbook details the services available at the home. Information is provided and displayed in the home for residents/representatives and includes brochures on comments and complaints. Residents/representatives interviewed state they are satisfied with the information that was provided pre entry and on entry to the home and on an ongoing basis.

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 further information including a description of the overall system of continuous improvement. Examples relevant to Accreditation Standard Four include:

- Following a resident survey a new menu has been developed with new dishes taken from resident suggestions. This menu is now reviewed in conjunction with resident suggestions/comments every three months. Residents interviewed were generally complimentary about the quality and quantity of food served.
- There are regular three monthly catering meetings held with residents, the director of care and the catering manager to ensure residents preferences are being met.
- New menu suggestion cards are available for residents to record their comments after meals. These suggestions are reviewed by the director of care and each suggestion/comment is discussed with the resident concerned and changes made where possible according to resident preference.
- Raised garden beds have been placed in the outside area of the dementia specific unit with appropriate gardening equipment to encourage residents to utilise the outside areas. Staff said residents now often like to tend the garden beds in this area.

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

Management has systems to identify and ensure compliance with relevant legislation, regulatory requirements and professional standards and guidelines. For further information please refer to expected outcome 1.2. Examples of regulatory compliance relevant to Accreditation Standard Four include:

- The home maintains and monitors work, health and safety guidelines and procedures in line with legislation.
- Audits, surveys and checklists are used to ensure compliance with relevant legislative requirements in the areas of food safety, infection control, laundry processes and fire safety and security.
- To ensure compliance with manual handling requirements all staff have undertaken manual handling education and attend regular update training.
- The home maintains a current fire safety certificate.

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

The home demonstrates that staff have the knowledge and skills required for effective performance in relation to physical environment and safe systems. For further information refer to expected outcome 1.3 Education and staff development. Examples of education and training programs relevant to Accreditation Standard Four include:

- Mandatory training including fire safety and evacuation procedures, work health and safety, infection control and manual handling.
- Chemical safety and awareness.

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 building is modern, homely, comfortable and air conditioned, the rooms are spacious and filled with natural light. Separate dining, lounge, library and activities areas are available. There are shaded outside garden areas for residents and their visitors when the weather is suitable. The home has a resident dog, guinea pigs and rabbits for the enjoyment of residents. Extensive garden views are available from various rooms and common areas of the home. There is a hairdressing salon, a large café and a chapel. A reactive and preventative maintenance system ensures that fittings, furnishings and equipment are well maintained. An electronic lock up system is activated each evening and there are security monitors in each nurses' station as well as exterior lighting. Residents/representatives are very satisfied with the comfort and ambience of the home.

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

Barclay Gardens has a system which ensures management and staff members are actively working together to provide a safe working environment. The workplace health and safety committee meets on a regular basis and discussions include risk management and audit results. Incidents/accidents and hazards are also discussed and evaluated for any preventative action that could be used. All staff attend mandatory training on a yearly basis. Staff members report any workplace incidents and these are followed up by management with a focus on injury prevention. A return to work program is developed organisationally for staff members as needed. Resident and staff incidents are monitored to ensure the home is a safe living and working environment.

4.6 Fire, security and other emergencies

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

Team's findings

The home meets this expected outcome

There are systems to ensure the provision of a safe environment that minimises fire, security and emergency risks. Fire safety and emergency response is covered in the staff orientation program and included in annual mandatory training. Fire detection and fire fighting equipment is inspected regularly by a fire safety contractor. There is a designated smoking area available to staff. All visitors and contractors are required to sign in and out to ensure staff are aware of who is in the building in the event of an emergency. There are procedures for locking of the building after hours with access to the home only after identification by designated night staff. The home has an evacuation pack ready in case of emergencies. Staff are able to describe the training provided and demonstrate a good knowledge of emergency procedures. Residents state they feel safe and secure within the home.

4.7 Infection control

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

Team's findings

The home meets this expected outcome.

There is an effective infection control program at Barclay Gardens. The program is coordinated by the clinical manager and includes processes to manage, prevent, monitor and minimise the risk of infection to staff and residents. Infection data is collected, evaluated and reported at quality committee meetings, work health and safety meetings, and discussed at staff meetings. Infection control and hand washing competencies are included in staff orientation. The team observed staff practices including the use of personal protective equipment, hand washing and colour coded equipment being used in the kitchen and during general cleaning. There is a regular pest control program. Outbreak management kits and a large stock of personal protective equipment are available and there is resident and staff immunisation program. Staff interviewed demonstrate a good knowledge of the home's infection control practices and outbreak management procedures.

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 has hospitality services to enhance residents' quality of life and the staff's working environment. Catering is carried out by a contracted service and food is cooked fresh on site. The service catering services accommodate residents' personal preferences and dietary requirements. Residents are offered a choice of meal selections and alternatives are offered. Observation confirms comfortable and aesthetically pleasing dining areas and residents being assisted with all aspects of their meal. Residents and their representatives are satisfied with the meal services provided.

Contractors have a comprehensive cleaning schedule to maintain the cleaning process for all areas of the home. Staff are aware of the home's cleaning processes and ensure correct infection control practices are implemented at all times. Residents and their representatives

report the home is always fresh, clean and tidy and they are satisfied with the cleaning services provided.

Laundry services are provided onsite. The laundry has separate clean and dirty areas and all washing machines have automated programs using an oxygenated system and alginate bags for infectious materials. Laundry staff maintain a system of labelling residents' clothes to minimise lost items. Staff state and residents confirm that personal washing is usually washed, ironed and returned to residents within 24 hours. Residents expressed a high level of satisfaction with the laundering services provided and the manner in which clothing is returned.