



Australian Government

Australian Aged Care Quality Agency

Eden Park Residential Aged Care

RACS ID 4148
31-33 Thompson Street
WHITTINGTON VIC 3219

Approved provider: Serene Brook 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 29 April 2017.

We made our decision on 05 March 2014.

The audit was conducted on 03 February 2014 to 04 February 2014. The assessment team's report is attached.

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

Most recent decision concerning performance against the Accreditation Standards

Standard 1: Management systems, staffing and organisational development

Principle:

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

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

Standard 2: Health and personal care

Principle:

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

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

Standard 3: Resident lifestyle

Principle:

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

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

Standard 4: Physical environment and safe systems

Principle:

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

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



Australian Government

Australian Aged Care Quality Agency

Audit Report

Eden Park Residential Aged Care 4148

Approved provider: Serene Brook Pty Ltd

Introduction

This is the report of a re-accreditation audit from 03 February 2014 to 04 February 2014 submitted to the Quality 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 Quality Agency then decides whether the home has met the Standards and whether to re-accredit or not to re-accredit the home.

Assessment team's findings regarding performance against the Accreditation Standards

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

- 44 expected outcomes

Scope of audit

An assessment team appointed by the Quality Agency conducted the re-accreditation audit from 03 February 2014 to 04 February 2014.

The audit was conducted in accordance with the Quality Agency Principles 2013 and the Accountability Principles 1998. The assessment team consisted of three registered aged care quality assessors.

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

Assessment team

Team leader:	David Barnett
Team member:	Dawn de Lorenzo Doris Hamilton

Approved provider details

Approved provider:	Serene Brook Pty Ltd
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Details of home

Name of home:	Eden Park Residential Aged Care
RACS ID:	4148

Total number of allocated places:	90
Number of residents during audit:	78
Number of high care residents during audit:	74
Special needs catered for:	Residents living with dementia

Street:	31-33 Thompson Street
City:	WHITTINGTON
State:	VIC
Postcode:	3219
Phone number:	03 5248 8760
Facsimile:	03 5248 0795
E-mail address:	op@serenebrook.com.au

Audit trail

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

Interviews

Category	Number
Management	2
Administration assistants	3
Nursing/care/lifestyle staff	9
Residents/representatives	20
Domestic/hospitality staff	9
Allied health professionals	4

Sampled documents

Category	Number
Resident administration files	7
Resident care files	8
Wound management records	7
Medication charts	9
External provider contracts	4
Personnel files	9
Diabetic management plans	6
Enteral feeding management plans	2

Other documents reviewed

The team also reviewed:

- Activity calendar
- Admission planner
- Agency staff orientation check list
- Audits, results and audit schedule
- Cleaning schedules
- Clinical records and documents
- Consolidated register of reportable events

- Controlled substances registers
- Cultural resources
- Daily bowel management report
- Doctors communication book
- Duty lists
- Education documentation, calendars and matrix
- Emergency lighting log
- External gap analysis report
- Fire and emergency equipment testing logs
- Food safety plan with kitchen external audit documentation
- Handover sheet
- Hazards and hazardous substances registers
- Incidents reports and analysis documentation
- Kitchen temperature and cleaning records
- Lifestyle assessments, care plans and individual preferences for residents
- Lifestyle attendance and participation records
- Material safety data sheets
- Meeting schedule and minutes
- Memoranda
- Monthly infection control reports
- Newsletter
- Nursing qualification register
- Pest control log
- Pharmacy correspondence
- Plan for continuous improvement
- Police certificate register and statutory declarations
- Policies and procedures
- Position descriptions

- Preferred suppliers' list
- Reactive and preventative maintenance schedules and logs
- Resident evacuation list
- Residents' agreements and admission checklists
- Residents' information package and surveys
- Restraint authorisation and review
- Rosters
- Sensory assessment form
- Staff handbook and surveys
- Suggestion, compliment, comment and complaint register
- Testing and tagging log

Observations

The team observed the following:

- Activities in progress
- Aged care advocacy pamphlets
- Allied health professionals in attendance
- Charter of residents' rights and responsibilities displayed
- Chemical storage
- Cleaning in progress
- Contractor in attendance
- Electronic and hard copy information systems
- Electronic security systems
- Emergency exits, paths of egress and assembly areas
- Equipment, supply and archive storage areas
- External complaints pamphlets in English and languages other than English
- Fire and emergency equipment, signage and manual
- Interactions between staff and residents
- Kitchen

- Laundry in progress
- Living environment
- Meal service and menu displays
- Medication storage
- Mobility assistive devices
- Noticeboards and information displays
- Occupational health and safety information display
- Pressure relieving devices
- Re-accreditation visit signage
- Assessment information
- Resident and staff interactions
- Resident's secure medication storage
- Residents receiving assistance
- Residents' rights and responsibilities displayed
- Specialist nursing care equipment with instructions
- Staff room
- Suggestion, compliment, comment and complaint forms with box
- Vision, mission and values statement displayed

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 organisation actively pursues continuous improvement and monitors performance against the Accreditation Standards. The home identifies areas for improvement through various mechanisms such as feedback from stakeholders, audits, infection data and incident reports. Residents, representatives and staff contribute to the continuous improvement system through verbal and written feedback including attending meetings or completing forms. Management introduces changes in a structured manner and monitors their impact. The home uses processes such as internal and external audits to review its performance.

Management provides feedback to residents, representatives, staff and other stakeholders as appropriate through meetings or consultation.

Examples of improvement initiatives implemented by the home in relation to Standard 1 Management systems, staffing and organisational development include:

- Management recognised the need to review staffing. The home employed more enrolled nurses to support registered nurses on day and evening shifts. Management said there has been positive feedback from staff who report the new staffing has resulted in improved care for residents.
- Management identified the need to improve equipment for use in palliative care. The home purchased a pump-less air mattress. Management said there has been positive feedback from representatives and staff who report satisfaction with the mattress' noiseless operation with improved comfort for residents.
- Management recognised the need to improve catering documentation. The home devised new tools through the electronic care planning system. Management said there has been positive feedback from staff who report the new forms provide improved information resulting in improved care for residents.

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 to identify and ensure compliance with relevant legislation, regulatory requirements and guidelines. The home receives regulatory compliance information and changes from industry and government bodies and update services. This information is actioned and disseminated by management to staff through the homes information systems and processes. Regulatory compliance is a standing agenda item for the home’s meetings. Regular audits, staff training, meetings and memoranda assist to monitor and maintain compliance and the home regularly reviews and updates policies. Residents and their representatives are informed of re-accreditation audits. A system ensures all relevant persons have and maintain a current police check and required statutory declaration.

1.3 Education and staff development

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

Team’s findings

The home meets this expected outcome

The home’s education program ensures management and staff have appropriate knowledge and skills to perform their roles effectively. The home has regular education sessions with internal or external presentations. Subjects for inclusion in the education program originate from the results of needs analysis, incident reporting, residents’ changing care needs, surveys, meetings and the home’s complaint processes. All staff undertake mandatory education on commencement of employment and on a regular basis. The home records and monitors all attendances at education sessions. Evaluation of education sessions takes place to ensure the effectiveness of the program. Staff said they were satisfied with education in the home.

Education undertaken in relation to Standard 1 Management systems, staffing and organisational development includes:

- aged care funding instrument
- computer training
- teamwork
- accreditation.

1.4 Comments and complaints

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

Team's findings

The home meets this expected outcome

The home ensures the internal and external complaints mechanisms are accessible to all stakeholders. The system includes feedback forms, meetings, information handbooks and brochures. A locked box to lodge forms ensures anonymity if desired. Management also encourages stakeholders to verbalise complaints either directly to them or to staff. The home logs suggestions, compliments, comments and complaints into a register as required to assist in the continuous improvement process and conducts regular resident and staff surveys. Management investigate any suggestions promptly and provide feedback to residents, their representatives, staff or others as appropriate through meetings or consultations. Residents, representatives and staff said they are aware of how to make a complaint and are satisfied to do so if required.

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

Management has documented its vision, mission and values statement which is on display in the home and in resident and staff handbooks.

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 ensures appropriately skilled and qualified staff deliver care and services in accordance with the Accreditation Standards and the service's philosophy and objectives. Management ensure staffing meets regulatory requirements, professional guidelines, policies, procedures and the current needs of residents. The recruitment process includes interviews, reference and qualification checks with continued monitoring of qualifications once employed. There is a system to ensure staff maintain current police certificates with associated documentation. The home's orientation process includes education and supernumerary shifts. Position descriptions document staff roles and management monitor performance through such means as competencies and observation of practice.

Management ensure roster coverage through the use of temporary or other permanent staff to fill any vacancies. Staff are satisfied with the number of staff and adequacy of skills.

Residents and representatives said they are satisfied with the adequacy of resident care and the responsiveness of staff.

1.7 Inventory and equipment

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

Team's findings

The home meets this expected outcome

There are systems to ensure there are adequate stocks of goods and appropriate equipment for quality service delivery. Management and designated staff complete monitoring and ordering of supplies and goods. Supplies are stored in clean secure areas. Identification of equipment requirements occurs through processes such as resident needs and staff feedback. The home organises for staff to trial new equipment prior to purchase with education provided. There are corrective and preventive processes for the maintenance and cleanliness of equipment. Staff, residents and representatives said they are satisfied with the provision of supplies and equipment to meet resident needs.

1.8 Information systems

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

Team's findings

The home meets this expected outcome

The home's management has effective information management systems with confidentiality, privacy and security maintained throughout. Management, staff, residents, representatives and others have access to current information, activities and events of the home as appropriate through such means as meetings, noticeboard displays, handbooks and newsletters.

Residents and representatives receive enough information to assist them to make decisions about residents' care and lifestyle. Management and staff generally receive accurate information to help them perform their roles through the electronic care planning system, handovers, education, policies and procedures. There is a process to regularly back up the computer system with logons and passwords for staff as required. Management stores confidential material securely with the information retrievable in a timely manner.

Residents, representatives and staff said they are satisfied with communication and information systems in the home.

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

There is a system to provide externally sourced services to meet the home's needs and service quality goals. The home has a current register of contracted providers and reviews the contracts as required ensuring the provision of optimum service. There is a system to ensure contractors possess current police certificates with associated documentation as necessary. Residents, representatives and staff said they are satisfied with the services 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 and processes.

Examples of improvement initiatives implemented by the home in relation to Standard 2 Health and personal care include:

- Management identified the need to improve the medication delivery system. The home changed from blister packs to a sachet system. Management said there has been positive feedback from staff who report the new system is user friendly with tasks such as crushing medications completed in a timely manner.
- Management recognised the need to introduce a handover sheet for all clinical, care and lifestyle staff. The home accessed the form through the electronic care planning system to ensure accurate information for staff. Management said there has been positive feedback from staff who report care information relayed in a timely manner resulting in more time spent with residents.
- Management identified the need to improve wound care products. The home introduced new products following advice from a wound care consultant. Staff received education concerning the new products with updated procedures provided. Management said there has been positive feedback from residents and staff who report improved wound care.

2.2 Regulatory compliance

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

Team's findings

The home meets this expected outcome

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

The home demonstrates regulatory compliance in health and personal care with care tasks performed by appropriately qualified staff, the maintenance and monitoring of nursing registrations, medication management requirements and systems for the required reporting of unexplained absences of residents.

2.3 Education and staff development

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

Team’s findings

The home meets this expected outcome

Refer to expected outcome 1.3 Education and staff development for information in regard to the home’s education systems and processes.

Education undertaken in relation to Standard 2 Health and personal care includes:

- wound management
- behaviour management
- nutrition and hydration
- diabetic management
- 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

The home has systems and processes to provide residents with appropriate clinical care. Clinical staff assess residents on entry using information from the resident, their representatives, their medical practitioner and referring agencies. Clinical staff follow a 28 day assessment schedule to ensure all aspects of care are assessed by appropriately qualified staff using a multidisciplinary approach. Clinical and allied health care staff develop care plans, which are evaluated three monthly and as clinical care needs change. Medical practitioners document medication regimes that they regularly review. Management monitor clinical care using an annual auditing schedule, incident reporting, clinical indicator data and reports generated from an electronic care management program. Staff stated they have appropriate information and training to perform clinical care. Residents and representatives expressed satisfaction with their clinical care.

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

The home has systems and processes to identify and meet residents’ specialised nursing care needs by appropriately qualified nursing staff. Registered nurses assess residents for their

specialised nursing care needs on entry to the home. Registered nurses in consultation with medical practitioners develop plans of care that registered nurses review regularly.

Specialised nursing care currently provided by the home includes tracheostomy, wound, urinary catheter, brain stimulation, diabetes management, oxygen therapy and percutaneous enteral feeding. Management monitor results through audits of relevant procedures and through the collection and analysis of a range of clinical indicators and incident reports. Staff stated the recent introduction of a detailed handover and a daily tasks and events sheet is assistive in the management of specialised nursing care delivery. Residents expressed satisfaction with the specialised nursing care they receive.

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

The home has systems and processes to refer residents in accordance with their needs and preferences to appropriate health specialists. Staff refer residents to appropriate health specialists on entry to the home and ongoing. Allied health professionals stated staff communicate and implement their plans of care. Management stated staff are made available to accompany residents to external appointments and this process assists in effective communication. Allied health services available to residents include, ophthalmology, audiology, dental, psychology, speech pathology, physiotherapy, podiatry and dietetics. Management monitor results using regular audits of the relevant procedures. Staff stated allied health professionals are available for referral as necessary. Residents expressed satisfaction with their access to appropriate health specialists.

2.7 Medication management

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

Team’s findings

The home meets this expected outcome

The home has systems and processes to generally manage residents’ medication safely and correctly. Registered nurses assess residents for their medication management requirements on entry to the home. The resident’s medical practitioner documents their medication regime on medication charts and reviews responses to treatment as necessary. Registered nurses, endorsed enrolled nurses and medication administration competent personal care attendants administer medications. Registered nurses assess residents’ competence to self-medicate if they desire and provide secure storage. Management monitor results through audits, incident reports and the medication advisory committee. Staff stated nurse initiated medications were reduced through a review process. Residents expressed satisfaction with their medication management.

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 systems and processes to ensure all residents are as free from pain as possible. Registered nurses assess residents for pain on entry to the home. Staff complete pain charting to establish trends and responses to management. Assessment includes verbal and nonverbal indicators of pain. Registered nurses develop plans of care for pain management using a multidisciplinary approach. Pain management strategies, in addition to analgesia, include cold packs for acute injury, heat packs, ultrasound, ‘tens’ machine, massage, exercise programs, repositioning and diversional therapy. The physiotherapist plans and implements pain management regimes that incorporate group exercise classes. The allied health assistant provides one on one exercise regimes for pain management under the direction of the physiotherapist. Staff stated they are able to recognise the nonverbal indicators of pain. Residents expressed satisfaction with their pain management.

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 has systems and processes to promote the comfort and dignity of terminally ill residents. Staff consult residents and representatives regarding their preferences for end of life care and document terminal care wishes. Residents are offered the choice to develop an advanced care directive. The home accommodates all residents in single rooms with en suites and has areas for private consultations regarding care. Management stated the home provides specialist equipment and a palliative care kit. Management stated staff and residents have access to an external palliative care team, who provide specialist services and counselling services, if desired. Staff stated they increase observation and care for residents who require it and complete a palliative care attendance sheet for each occasion of care which is reviewed by a registered nurse. Residents expressed satisfaction with the care and consultation provided by staff.

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 has systems and process to provide residents with adequate nourishment and hydration. Staff assess residents on entry to the home for their nutrition and hydration needs and dietary preferences. Staff develop plans of care that are reviewed regularly and specify specialised utensils as appropriate. Staff refer residents to a dietitian as necessary who visits monthly assesses, plans and evaluates nutrition and hydration care. The dietitian reviews the menu to ensure it is nutritionally and culturally appropriate for residents living in the home.

The home provides texture modified foods and fluids as assessed and recommended by a speech pathologist and dietitian. The dietitian monitors residents’ weights, which staff measure monthly. The dietitian provides staff with education regarding texture modified foods and providing assistance with meals and drinks. Residents expressed satisfaction with nutrition and hydration.

2.11 Skin care

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

Team’s findings

The home meets this expected outcome

The home has systems and processes to ensure residents’ skin integrity is consistent with their general health. Registered nurses assess residents risk to skin integrity on entry to the home. Registered nurses develop plans of care that they review regularly. Management and staff stated the home has a range of pressure relieving devices including pressure care mattresses, cushions and booties. Management stated staff and residents have access to a wound care consultant. Management monitor results through audits, incident reports and rates of breaks to skin integrity. Staff stated they adhere to residents’ care plans with respect to hygiene, apply emollients to residents’ skin and report abnormalities to senior clinical staff. Residents expressed satisfaction with the care provided by staff.

2.12 Continence management

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

Team’s findings

The home meets this expected outcome

The home has systems and processes to manage residents’ continence effectively. Staff assess residents for their continence needs and preferences on entry to the home. Staff document plans of care that are regularly reviewed by a registered nurse. Staff chart responses to care. A registered nurse has a continence management portfolio. The home’s continence aids supplier provides specialist consultation including staff education.

Management monitor results by auditing and daily reports generated by the electronic care management system. Residents expressed satisfaction with the assistance provided to them by staff to access toileting facilities.

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 and processes to manage the needs of residents with challenging behaviours. Staff assess residents for behaviours on entry to the home and ongoing. Staff develop plans of care following behaviour charting which contain residents’ preferences for care. Registered nurses review behaviour management care plans three monthly and as required. The home has a secure care for residents living with dementia. Staff have access to specialist dementia care services for residents as required. Management monitor results through audits and incident reports. Residents and staff expressed satisfaction with residents’ behaviour management provided by 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

The home has systems and processes to optimise residents’ levels of mobility and dexterity. Clinical staff assess residents’ mobility on entry to the home. The physiotherapist completes a detailed assessment for each resident’s mobility, dexterity and rehabilitation. A multi-disciplinary approach is taken for the development of individual care plans which include assistance required to maintain mobility, optimise dexterity and rehabilitation as appropriate. Management monitor results through audits, incident reports and the collection and analysis of rates of falls. Staff stated they are satisfied with the rehabilitation programs for residents in achieving residents’ goals. Residents expressed satisfaction with the assistance provided to them to optimise mobility and perform activities of daily living.

2.15 Oral and dental care

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

Team’s findings

The home meets this expected outcome

The home has systems and processes to maintain residents’ oral and dental health. Staff assess residents on entry to the home for their oral and dental needs and preferences. Staff develop care plans which are regularly reviewed. Dental services visit the home and provide services to residents as desired. Documentation review indicated staff refer residents to their general practitioner for any concerns regarding oral health. Staff stated they audit the residents’ dental supplies and replace toothbrushes monthly. Management monitor results through regular audits. Staff stated they clean residents’ teeth and dentures and perform mouth care using appropriate equipment for residents who require it. Residents expressed satisfaction with their oral and dental care.

2.16 Sensory loss

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

Team’s findings

The home meets this expected outcome

The home has systems and processes to identify and manage residents’ sensory losses. Staff assess residents on entry to the home for sensory deficits including vision and hearing. Resident care plans provide staff with information on the strategies required to assist residents to maximise their ability to function independently and the assistance required from staff. Staff refer residents to specialists for vision and hearing and include their recommendations in plans of care which are regularly reviewed. Management monitor results through annual audits of the sensory loss procedure. Staff stated they have sensory kits available to assist with resident assessment of all five sensors. Residents expressed satisfaction with the assistance staff provide them to perform the activities of daily living they cannot due to 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

The home has systems and processes to enable residents to achieve natural sleep patterns. Staff assess residents on entry to the home for their sleep needs and preferences.

Residents’ care plans include individual strategies for example usual rising and waking times, curtain and door positions and night time rituals. Document review confirmed staff offer residents medications as ordered by the residents’ medical practitioner. Staff assist residents who have difficulty sleeping by providing them with a warm drink, company and comfort, pain relief or a change of position. Management review work processes to minimise disruptive activities at night. Management monitor results through regular audits and resident feedback. Residents stated the home was quiet at night and they have a good nights’ 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 and processes.

Examples of improvement initiatives implemented by the home in relation to Standard 3 Resident lifestyle include:

- Staff identified the need to improve activities for residents who tend not to socialise. Based on resident feedback, the home developed an improved selection of activities for these residents, from board games to individual chats. Management said there has been positive feedback from residents who report both improved selection of activities and emotional support.
- Through a resident survey, staff suggested increased bus outings for residents. The home increased bus outings for activities such as going out for lunch, beach excursions and shopping trips. Management said there has been positive feedback from residents and representatives who report residents enjoy the extra outings.
- Staff suggested improved communication tools for residents who speak languages other than English. The home compiled and introduced new booklets to assist staff in communicating with these residents. Management said there has been positive feedback from residents, representatives and staff who report the new tools have improved communication.

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

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

The home demonstrates compliance in relation to resident lifestyle with privacy and dignity policies and practices, security of tenure, residents’ rights and responsibilities and the maintenance of a consolidated register according to mandatory reporting requirements.

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 information in regard to the homes education systems and processes.

Education undertaken in Standard 3 Resident lifestyle includes:

- elder abuse and compulsory reporting
- privacy and dignity
- emotional support of the new resident
- cultural and spiritual needs.

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

The home has systems to ensure each resident receives emotional support in adjusting to life in the home and on an ongoing basis. Prior to or on entry to the home management and relevant staff provide residents and representatives with information regarding the entry process and a tour and familiarisation. Staff complete an assessment and care plan for each resident which includes an emotional assessment on the level of support required. Reviews occur regularly and/or as circumstances change. Lifestyle and care staff provided examples of emotional support to help residents adjust to their new environment and to meet individual residents' changing needs. The lifestyle program provides one-to-one time with individual residents to assist in maintaining residents' emotional well-being, interests and involvement. Residents and representatives are complementary of the emotional support provided by the home.

3.5 Independence

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

Team's findings

The home meets this expected outcome

Management and staff encourage residents to maintain their independence at their individual levels of capacity and preferences. Lifestyle assessments and care plans identify residents' needs, interests, likes and dislikes to maintain their independence and their preferences for

levels of participation in the home's and broader community. Residents have a variety of mobility and dexterity aides to maintain physical independence. Residents said staff assist and encourage them to maintain their independence and they enjoy a high level of 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

The home respects residents' right to privacy, dignity and confidentiality. Information and policies in regard to privacy and dignity informs stakeholders to ensure each residents' rights are recognised and respected. Residents' sign appropriate consent forms to maintain their rights to privacy and the use of their photographs and names. Residents have single rooms with ensuite bathrooms and there are a range of internal and external areas to meet privately with visitors. Storage of files is secure and handover discussions occur discreetly. Staff are aware of and address residents by their preferred name. Residents and representatives confirmed staff treat residents respectfully and maintain residents' privacy and dignity at all times.

3.7 Leisure interests and activities

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

Team's findings

The home meets this expected outcome

The home identifies residents' social, emotional, cultural and spiritual needs to develop a lifestyle care plan reflective of resident's individual interests and preferences. Each resident's assessments and care plan are regularly reviewed and their activity attendances and involvement monitored including daily one-to-one activities. The home's lifestyle program offers a variety of activities and is continually evolving and responsive to meet residents' changing needs and interests. Effective documentation and forms maintain attendance records, levels of involvement and individual preferences for each resident. Lifestyle staff regularly discuss and review the program and residents' participation. Residents' are encouraged to contribute ideas or make criticism and annual lifestyle surveys give residents a voice and choice in the program and control of their lives in the home. Residents and representatives speak highly of the lifestyle staff and program.

3.8 Cultural and spiritual life

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

Team's findings

The home meets this expected outcome

Residents are encouraged and supported to practice and express their spiritual and cultural beliefs and customs. Lifestyle assessment processes identify residents' cultural and spiritual backgrounds and their individual needs and preferences. The home's cultural resources meet

and support residents' cultural backgrounds. The home facilitates on-site church services and attendances by community cultural groups and personnel of different faiths and demonstrates they value and foster each individual resident's beliefs and preferences. Staff state they understand residents' cultural and spiritual needs and provide support as required. Residents and their representatives are satisfied with the way the home meets residents' cultural and spiritual interests and beliefs and individual preferences.

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

The home demonstrates a commitment to recognising and respecting resident choices and their decisions. Consultation in regard to residents' individual preferences takes place on entry to the home and on an on-going basis. Residents with reduced decision-making capacity have an authorised representative to assist in making decisions on the resident's behalf. Staff provided examples of empowering residents to make their own decisions.

Residents and representatives confirm residents have input into the care and services residents' receive including their personal care, meals and participation in activities of interest to them. The home regularly monitors and evaluates the effectiveness of their processes in this regard through surveys, formal and informal feedback/comment and audits.

3.10 Resident security of tenure and responsibilities

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

Team's findings

The home meets this expected outcome

Residents are provided with a range of information relating to their security of tenure, financial information, privacy, care and services, complaints information and rights and responsibilities on entry to the home and on an on-going basis through the home's processes and forums. Resident agreements are offered to all residents and power of attorney and appropriate consents are in place. Residents and their representatives are consulted with approval required prior to residents' changing rooms. Residents and their representatives are informed of the specified services provided on change of classification from low-care to high-care. External complaint and advocacy information is available. Residents said they feel secure in the home and are aware of their rights and responsibilities

Standard 4 – Physical environment and safe systems

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

4.1 Continuous improvement

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

Team’s findings

The home meets this expected outcome

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

Examples of improvement initiatives implemented by the home in relation to Standard 4 Physical environment and safe systems include:

- Residents suggested they would like the gardens improved. Management organised for the gardens to be updated with an improved sprinkler system, more plants, vegetables and raised garden beds. Management said there has been positive feedback from residents, representatives and staff who enjoy the improved gardens.
- Management identified there was no seating at the outside entrance. The home organised for the installation of chairs and a bench. Management said there has been positive feedback from residents and representatives who enjoy the new seating.
- Residents suggested they would like more visible menus. Management replaced the table menus with large blackboards where staff write the daily selections. Management said there has been positive feedback from residents and representatives who like the new, more visible menus.

4.2 Regulatory compliance

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

Team’s findings

The home meets this expected outcome

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

The home demonstrates compliance in relation to the physical environment and safe systems through the building and living environment, fire and emergency requirements, occupational health and safety policies and requirements, infection control guidelines and a food safety program with related kitchen documentation and current certification.

4.3 Education and staff development

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.3 Education and staff development for information in regard to the home's education systems and processes.

Education undertaken in Standard 4 Physical environment and safe systems includes:

- infection control
- outbreak management
- manual handling
- fire and security
- food safety
- chemical handling.

4.4 Living environment

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

Team's findings

The home meets this expected outcome

The homes' environment reflects the safety and comfort needs of the residents. The home accommodates residents in single personalised rooms with en suite bathrooms. The internal environment is clean, well maintained and spacious with a range of communal and private areas for residents and visitors. The home provides a calm environment with sufficient and appropriate furniture and a comfortable temperature. Residents have access to call bells and the home completes call-bell audits. Residents move safely and easily around the environment that includes attractive garden areas and clear walking paths. The home has a strict minimal restraint policy with authorisations and regular reviews where appropriate.

Audits monitor the living environment. Residents state satisfaction with the home's environment and said they feel safe and comfortable.

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 demonstrate a safe working environment in line with regulatory requirements. Organisational occupational health and safety systems and processes in the home include a trained representative, regular discussion and follow-up through meetings, occupational health and safety information displays, incident/ hazard management, audits and a return to work program. Documentation confirms stakeholder input and monitoring and analysis of the working environment and data. Initial and on-going occupational health and safety training is mandatory for all staff. Chemicals are safely and securely stored with current material safety data sheets and a hazardous substances register. Interviews and observations confirmed staff awareness of and satisfaction with occupational health and safety and the maintenance of a safe working environment.

4.6 Fire, security and other emergencies

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

Team's findings

The home meets this expected outcome

The home has systems for detecting and acting on fire, security and other emergencies and required safety certification is in place. Approved professionals regularly check fire detection and fire-fighting equipment. Audits and monitoring ensure the maintenance of safe systems and completion of contractor work as required. The home has security systems, an emergency lighting log and electrical equipment is regularly tested and tagged. There is a designated smoking area for residents, evacuation maps and signed assembly areas, a current emergency manual and an evacuation pack with a resident list electronically updated. Signed emergency exits and paths of egress are clear and unobstructed. All staff complete mandatory annual fire and emergency training. Residents said they feel safe and secure.

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 systems and processes to maintain an effective infection control program. Management stated a registered nurse has the portfolio for infection control. The home has effective cleaning programs throughout the service. The home has a food safety plan.

Registered nurses in consultation with residents and their general practitioner treat residents' infections appropriately. Staff stated they receive education in infection control and use standard and where necessary additional precautions. Management monitor results through regular audits and rates of infection data. Residents expressed satisfaction with their clinical

care, staff practises and the manner in which management and staff managed a recent outbreak of gastroenteritis.

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 provides hospitality services in a manner which is generous towards residents and others. Meals are prepared on site with resident allergies, likes and dislikes taken into account. Catering staff clean the kitchen according to a schedule. Contracted cleaning staff provide cleaning according to a schedule with provisions for ad hoc cleaning. Laundry staff process all laundry on site with provisions for labelling of residents' clothes to assist in the prevention of lost items. Management monitors hospitality services through internal and external audits with regular education provided for staff such as chemical training and infection control. Residents, representatives and staff said they are satisfied with the home's catering, cleaning and laundry services.