Fronditha Clayton Aged Care
RACS ID 3642
94 Springs Road
CLAYTON SOUTH VIC 3169
Approved provider: Fronditha Care

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 9 October 2015.

We made our decision on 21 August 2012.

The audit was conducted on 16 July 2012 to 17 July 2012. The assessment team's report is attached.

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

Most recent decision concerning performance against the Accreditation Standards

Standard 1:   Management systems, staffing and organisational development
Principle:
Within the philosophy and level of care offered in the residential care service, management systems are responsive to the needs of residents, their representatives, staff and stakeholders, and the changing environment in which the service operates.

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

Standard 2:   Health and personal care
Principle:
Residents' physical and mental health will be promoted and achieved at the optimum level in partnership between each resident (or his or her representative) and the health care team.

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

Standard 3:   Resident lifestyle
Principle:

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

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

Standard 4:   Physical environment and safe systems
Principle:

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

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

Aged Care
Standards and Accreditation Agency Ltd

Audit Report

Fronditha Clayton Aged Care 3642

Approved provider: Fronditha Care

Introduction

This is the report of a re-accreditation audit from 16 July 2012 to 17 July 2012 submitted to the Accreditation Agency.

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

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

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

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

Assessment team's findings regarding performance against the Accreditation Standards

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

- 44 expected outcomes

Audit report

Scope of audit

An assessment team appointed by the Accreditation Agency conducted the re-accreditation audit from 16 July 2012 to 17 July 2012.

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

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

Assessment team

Team leader:	Kerry Ewing
Team members:	Anne Osman
	Mary Norman

Approved provider details

Approved provider:	Fronditha Care

Details of home

Name of home:	Fronditha Clayton Aged Care
RACS ID:	3642

Total number of allocated places:	103
Number of residents during audit:	97
Number of high care residents during audit:	95
Special needs catered for:	Nil

Street:	94 Springs Road	State:	Victoria
City:	Clayton South	Postcode:	3169
Phone number:	03 9552 4100	Facsimile:	03 9552 4139
E-mail address:	reneeb@fronditha.org		

Audit trail

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

Interviews

	Number		Number
Chief executive officer	1	Residents/representatives	17
Residential services manager	1	Volunteers	2
Quality manager	1	Laundry staff	2
Human resource manager	1	Cleaning staff	2
Assets manager	1	Maintenance staff	1
Regional manager	1	Catering staff	3
Service coordinator	1	Activities staff	3
Administration	1	Care staff	5
Clinical care coordinator	1	Podiatrist	1
Care service coordinator	1	Physiotherapist	1
Registered nurses	3	Aged persons mental health team	2

Sampled documents

	Number		Number
Residents' files	14	Medication charts	18
Residents care plans	14	Personnel files	6
Observation and weight charts	12	Resident agreements	9
Technical nursing charts	19		

Other documents reviewed

The team also reviewed:

- Activities planner and participation records

- Approved supplier list

- Audit schedule and audits

- Certification inspection reports

- Changes to dietary requirements and choices forms

- Cleaning schedules

- Clinical record charts including restraint documentation

- Communication book, diaries, handover sheet, memoranda, sign in sign out books

- Consolidated report of infectious outbreaks

- Continuous improvement plan

- Drug of dependency registers

- Education and training planner 2012
- Essential safety measures documentation and essential services report
- Feedback forms and register
- Food safety plan, associated records and reports
- Handover sheet
- Hazard alerts, incident reports, trending and analysis
- Immunisation information
- Incident reports
- Infection surveillance data and trending
- Information handbooks, packs – resident and staff
- Mandatory reporting register
- Material safety data sheets
- Medication management records
- Meeting minutes
- Newsletters
- Pest control records
- Police check register and statutory declaration records
- Policies and procedures and flowcharts
- Preventative and reactive maintenance documentation
- Regulatory compliance records
- Resident privacy documents
- Resident information handbook
- Resident surveys and analysis
- Rosters
- Staff education attendance matrix
- Staff qualifications and nurse registrations
- Temperature check records
- Vision mission and value commitment, privacy statements

Observations

The team observed the following:

- Activities in progress
- Equipment and supply storage areas
- Evacuation signage
- External smoking areas
- Fire and evacuation equipment including evacuation packs
- Interactions between staff and residents
- Kitchen

- Laundry
- Living environment
- Meal preparation and service
- Notice boards and information brochures
- Storage of medications.

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

Standard 1 – Management systems, staffing and organisational development

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

1.1 Continuous improvement

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

Team's findings
The home meets this expected outcome

The home has a continuous improvement system that shows improvements in management, staffing and organisational development. The system includes a continuous improvement log, audit tools and schedules, risk assessments and feedback mechanisms to all stakeholders. Management monitors the effectiveness of improvement processes through satisfaction surveys, meetings and evaluations. Collected information is reviewed, analysed for trends, discussed with staff and actioned. Staff said they are involved with auditing processes and advised of the outcomes of audits and improvements required and actioned. Residents are satisfied with the home's improvement processes.

Examples of improvement in Standard 1 include:

- Following staff feedback about the need to improve communication, the home has developed a staff newsletter with input from staff. Feedback has been positive with staff stating they are better informed.

- A staff suggestion, and to encourage staff to participate in promoting the home to the wider community, has resulted in information, including photographs about activities in the home being included in local and Greek specific newspapers. Feedback from residents and families has been positive.

- The home has purchased ink stamps with the home's name and address following suggestions from staff. Staff use the stamps on medication prescriptions to ensure proper identification of the home is recorded. Feedback about this initiative has been positive.

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 ensure compliance with relevant legislation, regulatory requirements, professional standards and guidelines. Management receives updates through the organisation's subscription to a peak body, legislative update services and government departments. Regulatory changes result in policies and procedures changes with information communicated to relevant stakeholders. Monitoring of the home's regulatory compliance responsibilities occurs and observation of staff practices are consistent with regulatory requirements. Staff state they receive information regarding regulatory changes. Residents

and representatives stated they are satisfied and are kept informed.

Examples of regulatory compliance relating to Standard 1 include:

- the notification of residents, representatives and staff of the re-accreditation audit.

- system maintained for police checks, statutory declarations and professional registrations

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

Team's findings
The home meets this expected outcome

The organisation encourages, supports and assists management and staff to develop and maintain the necessary knowledge and skills in order to perform their roles. An annual education calendar is developed internally based on residents' needs, staff knowledge and skill deficits identified through management processes and staff requests. The education calendar is advertised and is flexible to change. The home offers education through different methods including, in-services, external training and competency testing. Management record and monitor staff attendance and evaluate education and training sessions to ensure they are effective. Management and staff stated they are supported to develop and maintain an appropriate level of skill and knowledge.

Recent educational topics offered pertaining to Standard 1 includes:

- building leadership skills

- teamwork and managing conflict

- understanding 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

Management has established a feedback mechanism as part of the continuous improvement system. It is accessible to residents, representatives, staff, volunteers and visitors. Feedback forms have a section for compliments, suggestions, improvement, concern or complaints and locked boxes are located throughout the home for the deposit of these forms. Information about internal and external complaint services is accessible through information brochures including resident handbooks and resident agreements. Feedback is registered and actioned and management endeavours to resolve any complaints. Staff, volunteers, residents and representatives said they are encouraged to voice any comment and complaints that may arise and generally feel comfortable doing so.

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 has on display the home's vision, mission and values which includes a commitment to quality processes. These statements are shared with all stakeholders through displays in public areas, their inclusion in resident and staff handbooks and an information video.

1.6 Human resource management

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

Team's findings

The home meets this expected outcome

The home has systems and processes for the recruitment and ongoing monitoring of staff practices to meet residents' care needs and the home's philosophy and objectives. Recruitment processes include formal interviews and reference and credential checks. Position descriptions, the staff handbook and policies and procedures inform and guide staff in areas of resident care and professional development. New staff attend the orientation program and are provided buddy shifts for informal mentoring and support. Annual appraisals, feedback and quality processes assist management to identify ongoing staff training and skills requirements and to assess whether the staffing roster meets residents' needs. Residents are satisfied with the responsiveness of staff and confirm staff provide satisfactory care to meet their needs.

1.7 Inventory and equipment

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

Team's findings

The home meets this expected outcome

Management ensure stocks of appropriate goods and equipment for quality service delivery are available. Maintenance of equipment occurs with preventative and corrective maintenance programs. Appropriate personnel evaluate new equipment prior to purchase. Ordering of clinical and non-clinical supplies, continence products and chemicals occurs through preferred suppliers, and stock monitoring and re-stocking systems are in place. Clinical and non-clinical goods and chemicals are stored safely in secure areas. Staff and residents indicated satisfaction with the availability of equipment and supplies.

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 has a systematic approach to the recording, reporting, analysis and storage of information. Policies, procedures, handbooks and information resources are accessible and current. Sharing of information occurs through staff handovers, updated care plans, prominent displays of information, booklets, noticeboards, staff education, memoranda and stakeholder meetings. Resident and staff information is securely stored with controlled access to authorised personnel and hard copy documents are shredded or archived securely as required. Residents and their representatives stated they are satisfied with how the home shares information with them.

1.9 External services

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

Team's findings
The home meets this expected outcome

The home ensures the provision of externally sourced services meets the home's needs and quality goals. A list of approved suppliers is maintained and service agreements with suppliers, external tradespeople and contracted service providers are in place. External services comply with legislative requirements and documentation shows this. The home addresses any issues relating to service provision through regular review and evaluation process and contractors not fulfilling their obligations do not continue to provide services. The resident survey includes questions on satisfaction with services relating to resident care provided by external contractors. Staff and residents stated they were 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

The home has an established continuous improvement system that shows ongoing improvement in health and personal care. For a description of the home's system of continuous improvement, refer to expected outcome 1.1 Continuous improvement.

Examples of continuous improvement in Standard 2 include:

- Staff made a suggestion for the home to schedule clinical care meetings. Management trialled monthly meetings for three months and found more case discussions were taking place, more staff competencies were introduced and outcomes for residents were improved. These meetings are now on a permanent schedule.

- Following feedback from staff about the quality of the wipes used to assist residents with their hygiene has resulted in the home purchasing face washers for general daily washing of residents and larger wipes for continence care only. Feedback from staff about the new wipes has been positive.

- A resident survey completed by a relative indicated that in summer the comfort chairs became very hot and uncomfortable for residents. The home has purchased sheets for placing on the chairs in the summer months. Staff and residents state that residents are now more comfortable in the summer on these chairs.

- Staff suggested that the home replace the white toilet seats in 'Galini' unit with black toilet seats which are more in keeping with the toilet seats residents would have had in their homes. The home replaced the toilet seats with black seats and staff advise that toileting of residents has improved and the toileting regime is more streamlined with the new seats.

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 all relevant legislation, regulatory requirements, professional standards and guidelines for health and personal care. For a description of how the home identifies and ensures regulatory compliance, please refer to expected outcome 1.2 Regulatory compliance.

Examples regulatory compliance relating to Standard 2 include:

- legislative requirements are maintained for medication management.

- nursing staff have current registration.

- registered nurses assess, plan and review care planning for high care residents.
- policies and flow charts guide staff response should a resident be missing from the home.

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

The home has a system to support management and staff to develop and maintain their skills and knowledge in relation to health and personal care. For further details, see expected outcome 1.3 Education and staff development.

A variety of education is offered in relation to Standard 2. Examples of recent education include:

- medication management
- managing difficult behaviours
- mobility, dexterity and rehabilitation.

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 promotes a multi-disciplinary care approach and values the input of the resident and their nominated representative. Staff identify, assess resident's individual care needs and preferences on entry and this information underpins the development of a clinical care plan. Records show staff manage clinical issues and incidents appropriately, specialist advice is sought and changes to residents' care needs or preferences trigger reassessment. A systematic approach to review residents' clinical care needs and preferences is taken and ongoing consultation occurs. Consultation with the resident or representative and the resident's general practitioner occurs formally and informally. Staff were observed to be meeting residents' care needs and preferences and are aware of resident's individual needs. Residents and representatives are satisfied with the clinical care provided to residents.

2.5   Specialised nursing care needs
This expected outcome requires that "residents' specialised nursing care needs are identified and met by appropriately qualified nursing staff".

Team's findings
The home meets this expected outcome

Registered nurses, in partnership with allied health specialists and the general practitioners identify, assess and manage residents' specialised nursing care needs. Long term management is recorded on the resident's care plan, technical charts show appropriate care is being delivered and residents' specialised care needs are reviewed regularly and as required. Staff stated they are informed of changes to residents' specialised care needs and the home's education and training program support staff in maintaining the appropriate skills

and knowledge. Residents and representatives are satisfied with how residents' specialised care needs are managed.

2.6 Other health and related services

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

Team's findings
The home meets this expected outcome

Residents are referred and assisted to access a wide range of health specialists in accordance with their needs, preferences and own wishes. Effective processes exist to assist staff to identify residents who need referrals to health specialists and documentation shows health specialists are actively involved in the delivery of resident care. Mechanisms exist to ensure health specialists' recommendations are followed during care delivery. Residents can access visiting health specialists and where appropriate are assisted to access health specialists in the community. Residents said they are satisfied with the range of health specialists available to them.

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's systems and processes are effective in ensuring residents' medications are managed safely and correctly. Staff who administer medications are deemed competent to do so and they are overseen by registered nurses. Clinical processes assist with the identification, assessment and review of residents' medication needs. Processes exist to ensure emergency access to medications and for the ordering, delivery and disposal of medications. Medications are stored safely and securely and in accordance with regulatory guidelines. Policies, procedures and current medication resources are readily accessible and guide staff practice. Monitoring processes include audits, competency testing and an incident reporting system. Residents stated staff administer their medications on time and in a safe manner.

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 stated they are free from pain as much as possible. On entry to the home staff assess record and monitor resident's pain levels to ensure optimum comfort levels. As necessary medication use is reported, monitored and referred to residents' general practitioners appropriately and triggers reassessment of the pain as required. Alternative therapies to medications such as heat therapy, massage and active exercise are offered. The home monitors the effectiveness of residents' pain through auditing processes and resident feedback. Staff can describe residents' pain needs and the way they assist residents in meeting these needs.

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

Systems exist to support residents and their representatives during the resident's palliative care stages. End of life wishes are recorded, respected and inform the care provided to the resident. Representatives express a high degree of satisfaction with care provided. Staff state access to external palliative care services exists if required along with spiritual support for the resident and their family. Documentation supports staff in care delivery for the dying resident. Staff expressed an awareness of the needs of residents in the last stages of life.

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 processes to ensure residents receive adequate nourishment and hydration. Residents' nutrition and hydration needs are assessed upon entry in consultation with residents and representatives and are reviewed regularly thereafter. Individual dietary needs are noted on care plans and the assessment identifies residents' nutritional and hydration needs, food likes and dislikes, special diets, consistency of fluid and required dietary aids. Referrals to specialists are guided by policies and procedures in the event of resident weight change, decreased appetite or swallowing difficulties. Residents were observed utilising dietary aids and were assisted by staff in an appropriate manner. The catering department is equipped to meet individual dietary needs catering for residents with special dietary needs and preferences and hot and cold beverages and snacks were observed to be accessible to residents. Residents and representatives are satisfied with how the home meets individual resident's nutritional and hydration needs.

2.11 Skin care

This expected outcome requires that "residents' skin integrity is consistent with their general health".

Team's findings
The home meets this expected outcome

The home ensures residents' skin integrity is consistent with their general health through the assessment and monitoring of each resident's skin needs. Resident's individual skin care needs are noted on care plans and short term skin problems are monitored using wound assessments. Residents have access to specialised equipment to prevent and manage their skin care needs. Staff are aware of residents' skin needs and residents stated they are satisfied with how their skin needs are managed.

2.12 Continence management
This expected outcome requires that "residents' continence is managed effectively".

Team's findings
The home meets this expected outcome

Fronditha Clayton Aged Care can demonstrate systems which support residents to maintain optimum continence. Nursing staff assess resident's individual needs during entry, with an individual continence plan developed, implemented and reviewed when indicated. Staff are aware of residents' individual continence programs. Residents and representatives state satisfaction with the way the home assists residents in facilitating their continence needs.

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

Residents and representatives express a high degree of satisfaction in the way the home manages the needs of residents with complex behaviours. The home has a specialist area where residents with complex behaviours live, which is supported by the aged persons mental health team, and where a comprehensive lifestyle program is offered. Resident behavioural assessment commences on entry to the home, care plans are developed and regular review occurs as required. Staff can describe the individual needs of residents and staff were noted to be active participants in the lifestyle program.

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 and representatives state satisfaction in the way the home assists residents to maintain their maximum mobility and dexterity. Residents undergo mobility and dexterity and a falls risk assessment on entry to the home with an individualised care plan developed, implemented and reviewed regularly. If indicated the physiotherapist will make recommendations for specialised equipment and safety management strategies to ensure optimal outcomes for each resident. Manual dexterity is optimised where possible through passive, active exercises and use of aids. Staff have knowledge of individual resident's care needs in regard to ensuring maximum mobility and dexterity.

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

Fronditha Clayton Aged Care has systems to ensure residents maintain optimal oral and dental health. Assessments for oral and dental needs and preferences are conducted on entry to the home and appropriate referrals made where indicated. Care plans are generated to assist care staff and contain details about level of assistance required. Staff have an

understanding of the importance of residents' dental care. Residents are supported to access dental services. Residents and representatives state they are satisfied with how residents' oral and dental needs are managed.

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

Residents and representatives express satisfaction with the home's processes to manage residents' sensory needs. Identification, assessment and evaluation of all five senses occur to optimise residents' sensory functions. Staff are aware of residents who require assistance to fit and clean their aids. Specialist services are utilised and referrals made where indicated.

2.17 Sleep

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

Team's findings
The home meets this expected outcome

Staff assist residents to achieve natural sleep patterns through the identification of their individual needs and preferences. Assessment, care planning and review processes support residents in obtaining quality sleep and assistance is provided to residents and their settling routines are adhered to. Residents' general practitioners monitor the use of sedation and strategies such as reassurance, hot drinks and snacks are trialled first. Staff are aware of resident's individual settling routines and were observed to be assisting residents in accordance with their needs.

Standard 3 – Resident lifestyle
Principle: Residents retain their personal, civic, legal and consumer rights, and are assisted to achieve control of their own lives within the residential care service and in the community.

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

Team's findings
The home meets this expected outcome

The home actively pursues improvements in the areas of resident lifestyle. For a description of the home's system of continuous improvement, refer to expected outcome 1.1 Continuous improvement.

Examples of improvements in Standard 3 include:

● Following staff concerns about some residents personal needs not being met due to a lack of personal funds, the home has provided access (through the wider organisation) to a discretionary fund. Staff have accessed this fund to provide some personal items for specific residents which has resulted in positive outcomes for those residents.

● A recent resident survey identified residents wanted more Greek speaking staff. The home has commenced Greek language training for staff off site over a 20 week cycle. Staff are paid for this training and feedback from residents has been very complimentary with residents taking an active part in assisting the staff with the language.

● Further to the resident survey, the home has liaised with a local registered training organisation to provide placement for Greek speaking personal care students. Management advise they are offering employment to staff who have the required skills to work in the home.

● The home has increased the lifestyle program to seven days a week following feedback from the resident survey requesting more activities on the weekend. Resident feedback has been very positive about the increase in activities.

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

Team's findings
The home meets this expected outcome

Management has systems to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines regarding resident lifestyle. For a description of how the home identifies and ensures regulatory compliance, please refer to expected outcome 1.2 Regulatory compliance.

Examples of regulatory compliance related to Standard 3 include:

● processes to manage reporting obligations and to educate staff in recognising and responding to circumstances requiring mandatory reporting

● maintenance of a mandatory reporting database

● policies and procedures guide staff in maintaining confidentiality of resident information.

- compliance relating to the provision and signing of residential agreements
- provision of goods and services to high and low care residents in line with requirements of the Aged Care Act 1997 Specified Care and Services
- display of the charter of resident rights and responsibilities.

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

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

Recent education sessions offered in relation to Standard 3 include:

- privacy and dignity
- choice and decision making
- Greek language classes.

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

On entry to the home resident's individual needs are assessed to establish their emotional needs. Information obtained includes their family and life history, important life events, individual preferences and any emotional support required to assist them in the transition to residential communal living. Staff develop a care plan for residents to guide staff in care delivery. Information folders/books are available and include details of services provided by the home. Residents and representatives express a high level of satisfaction on the level of emotional support offered to them by the home. Staff have a comprehensive knowledge of the emotional requirements of their residents.

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

Team's findings
The home meets this expected outcome

The home supports residents to achieve independence via promoting ongoing community life and maintaining their friendships. Resident assessments are completed, care plans developed and consultations undertaken with residents and representatives to identify

assistance required for residents. Staff promote residents' independence and community involvement via offering numerous outings throughout the week. Residents state they are satisfied with the level of assistance the home provides in promoting their independence and participation in the community.

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 informs residents and their representatives of the home's commitment to maintaining privacy, dignity and confidentiality, with all residents receiving a copy of the Charter of Residents' Rights and Responsibilities upon entry to the home. The home provides staff with written information about their responsibilities to maintain residents' privacy, dignity and confidentiality. Staff sign a code of conduct on commencement of employment. Respectful communication occurs with residents, staff seek permission before entering residents' rooms and the maintenance of confidentiality of resident information is maintained. Residents stated staff are respectful of 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

Residents are encouraged and supported by staff to participate in a range of activities in keeping with their Greek culture. Assessments are undertaken and care plans developed to reflect resident's individual preferences and any special wishes. The program is flexible and adapted as required to meet the changing needs of residents and includes outings, visits from entertainers, theme days and exercise programs to enhance physical abilities. The monthly planner is on display in communal areas and staff interaction informs residents of the daily events. Evaluation and review of the program and individual resident's needs occur through observation and resident feedback. Residents and representatives reported residents are encouraged and supported to participate in the 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

Management and staff respect and acknowledge residents' cultural customs, beliefs and spiritual backgrounds. Consultation with the resident and their representatives identifies residents' religious and spiritual beliefs. Staff discuss with residents their pre-Australia history to ensure their needs are being met. Two chapels are provided for resident prayer and reflection. Staff support residents to attend regular religious services conducted by the home. Residents and representatives report satisfaction with the support and respect given to residents' cultural and spiritual needs.

3.9   Choice and decision-making

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

Team's findings
The home meets this expected outcome

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

3.10 Resident security of tenure and responsibilities

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

Team's findings
The home meets this expected outcome

Pre entry tours of the home are available for prospective residents and representatives. New residents are provided with information packs about services provided, fee structure, financial care, security of tenure and residential service agreements. Residents files include signed resident agreements and financial details. Residents receive written information about their rights and responsibilities. Residents confirmed they are aware of their rights and responsibilities within the home and feel secure in their home.

Standard 4 – Physical environment and safe systems
Principle: Residents live in a safe and comfortable environment that ensures the quality of life and welfare of residents, staff and visitors.

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

Team's findings
The home meets this expected outcome

The home has a system that shows ongoing improvements in the area of physical environment and safe systems. For a description of the home's system of continuous improvement, refer to expected outcome 1.1 Continuous improvement.

Examples of improvements in Standard 4 include:

- Management at the home have reviewed the hazard alert forms and decided to amend the form to replicate the continuous improvement steps currently on the feedback forms onto the rear of the hazard alert form. Feedback about this new form has been positive.

- Following incident reports and resident feedback about a resident climbing onto garden beds placed against a fence, the home has raised the edge of the garden bed and planted shrubs along the fence line. Staff advise this has prevented further incidents occurring and this has improved the look of the garden area

- A suggestion from an external contractor about the need for a physiotherapy space has resulted in the home relocating equipment stored in one section of the home. Management have organised walking rails and various exercise areas installed in this room. The physiotherapist now undertakes resident assessments and exercises in this area. This initiative is yet to be formally evaluated.

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 all relevant legislation, regulatory requirements, professional standards and guidelines regarding the physical environment and safe systems. For a description of how the home identifies and ensures regulatory compliance, please refer to expected outcome 1.2 Regulatory compliance.

Examples of responsiveness to regulatory compliance relating to Standard 4 include:
- management has systems to promote occupational health and safety
- chemicals are safely stored and current material safety data sheets are available
- appropriate infection control outbreak policies, response and reporting procedures are present
- qualified service personnel maintain and regularly check fire fighting equipment. Staff attend training in fire and emergency procedures regularly
- the food safety program and third party audit demonstrates current compliance.

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 can show they have systems to ensure residents live in a safe and comfortable environment ensuring the quality of life and welfare of residents, staff and visitors. For further details, see expected outcome 1.3 Education and staff development.

Recent education sessions offered in relation to Standard 4 include:

- extinguishers and hose training

- safe chemical handling

- infection control.

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 management of the home is actively working towards providing a safe and comfortable living environment for all residents. Accommodation for residents is in single rooms or double rooms with shared ensuites. Residents are encouraged to personalise their rooms. The home has systems which are effective in hazard identification, general maintenance and environmental safety issues. The environment is one which is comfortable and relaxed, surrounded by well-maintained gardens, with a number of garden beds. The team observed a clean living environment with minimal noise or disruption throughout the home. Residents are satisfied with the security and comfort at 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

Management has an occupational health and safety system that meets regulatory requirements and promotes a safe environment. The system includes an occupational health and safety committee, policies and procedures, incident reports, hazard alerts and appropriate education. Staff and resident safety is supported by regular manual handling training at induction and ongoing, preventative and corrective maintenance programs and environmental audits. Monitoring of occupational health and safety performance occurs through audits, incident and hazard analysis, staff feedback and observation. Staff stated they receive training in manual handling and confirm management provide 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 emergency management systems and actively works towards ensuring a safe living environment. Emergency and evacuation plans are displayed throughout the home with clearly signed emergency exits which are free from obstructions.
Fire training occurs bi annually for all staff and it is compulsory for staff to attend one of these sessions. The home has contracted an external service provider to ensure scheduled maintenance and inspection of emergency equipment. The home is equipped with fire - fighting equipment including break glass alarms, fire and smoke doors, fire blankets, smoke alarms, extinguishers, evacuation packs, sprinklers and fire hose reels. All visitors to the home are required to sign in and out and staff confirmed the emergency management systems to the home and felt comfortable with the level of education provided.

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 to control and monitor infection. The home has documented procedures and processes ensuring staff have a knowledge and understanding of infection control. The home monitors their infection rates on a monthly basis and acts in accordance with documented procedures. In addition to the monthly reviews, the home monitors each resident's individual needs and develops strategies to reduce or eliminate reoccurrence of infections. Staff were able to discuss the infection control program and had an understanding of the processes.

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 service to residents and staff which enhance and promote quality of life and work environment. All meals are prepared on-site daily as outlined in the four week rotating menu. This menu offers a balanced diet taking into consideration identified specific nutritional and hydration requirements, food allergies, food preferences, modified dietary requirements and alternatives in line with the registered food safety plan. The home provides laundry services which includes labelling of residents' clothing. The home conducts internal and external audits on their hospitality services throughout the year which assists the home in identifying deficits and the introduction of improvements. Residents stated they are extremely satisfied with the meals and felt they have choice when it comes to meals. Residents also confirmed satisfaction with the cleaning and laundry services provided by the home.