



Aged Care
Standards and Accreditation Agency Ltd

Manly Vale Nursing Home

RACS ID 2603

Cnr Condamine St & Gordon St

MANLY VALE NSW 2093

Approved provider: Manly Vale Nursing Home 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 5 October 2015.

We made our decision on 30 August 2012.

The audit was conducted on 24 July 2012 to 26 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

Manly Vale Nursing Home 2603

Approved provider: Manly Vale Nursing Home Pty Ltd

Introduction

This is the report of a re-accreditation audit from 24 July 2012 to 26 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 24 July 2012 to 26 July 2012.

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

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

Assessment team

Team leader:	Helen Ledwidge
Team member/s:	Kathryn Mulligan

Approved provider details

Approved provider:	Manly Vale Nursing Home Pty Ltd
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Details of home

Name of home:	Manly Vale Nursing Home
RACS ID:	2603

Total number of allocated places:	100
Number of residents during audit:	82
Number of high care residents during audit:	82
Special needs catered for:	N/A

Street/PO Box:	Cnr Condamine St & Gordon St	State:	NSW
City/Town:	MANLY VALE	Postcode:	2093
Phone number:	02 9949 1911	Facsimile:	02 9948 7468
E-mail address:	manlyvale@hardiagedcare.com.au		

Audit trail

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

Interviews

	Number		Number
Facility manager (retiring manager and incoming manager)	2	Residents/representatives	23
Assistant facility manager, evening manager, group managers (quality and assets management)	4	Housekeeping manager	1
Registered nurses	6	Catering, laundry and cleaning staff	3
Care staff	10	Maintenance manager	1
Diversional therapist and recreational activity officer	2	Physiotherapists and physiotherapy assistant	3

Sampled documents

	Number		Number
Residents' files	6	Medication charts	35
		Personnel files	8

Other documents reviewed

The team also reviewed:

- Activity programs, individual attendance records, individual care plans, activity sheets, newsflash and the planning and review report 2012
- Annual fire safety statement
- Audit results and benchmarking reports
- Clinical care documentation including observation charts, blood glucose level charts and action plans, supplement administration forms, pain monitoring and assessment charts, bowel and wound charts
- Complaints documentation
- Continuous improvement documentation
- Education calendar, orientation program, staff training records
- External service providers' service schedules
- Family conferencing documentation
- Infection control monthly data collection reports
- Job specification and descriptions and duty lists, staff handbook, staff communication book and performance appraisals
- Maintenance records
- Medication management documentation including medication refrigerator temperatures
- Meeting schedules, meeting minutes, memoranda, newsletters

- Menus
- NSW Food Authority Licence
- Police check register for staff, contractors and volunteers
- Policies, procedures and flowcharts
- Reportable incidents register
- Resident agreement
- Resident dietary information
- Resident vaccination records
- Residents' and visitors' sign in/out books
- Residents' information handbook, residents' enquiry and application information package, resident satisfaction surveys
- Restraint authorisation and monitoring
- Self assessment documentation
- Staff roster and allocation lists
- Staff survey results.

Observations

The team observed the following:

- Activities in progress and activity programs on display
- Aged care complaints scheme and advocacy service brochures on display, suggestion box
- Aged Care Standards and Accreditation Agency re-accreditation audit notices on display
- Call bell system in operation
- Chemical storage areas and material safety data sheets [MSDS] at point of use
- Cleaning in progress, staff using personal protective equipment appropriately
- Continence and medical supplies, mobility equipment
- Dietary requirements and preferences documentation
- Charter of residents' rights and responsibilities on display
- Emergency exits, fire panel and location maps
- Equipment and supply storage areas
- Fire detection and fire fighting equipment, evacuation plans, emergency evacuation pack, emergency procedures flipcharts
- Infection control resources including notices, hand wash basins, sanitising hand gel, personal protective equipment, spill kits, sharps' containers, outbreak kit, waste management
- Information notice boards, notices, pamphlets, forms and other information on display for staff and residents
- Interactions between residents and staff
- Laundry, stocks of linen, delivery of resident personal laundry
- Living environment, inside and outside areas

- Manual handling equipment and instructions, mobility and pressure relieving equipment in use
- Meal service at midday, four weekly menu on display
- Residents using designated smoking area
- Secure storage of residents' files
- Sharps and locked contaminated waste disposal bin
- Staff assisting residents with meals, assistive eating devices
- Staff work areas and work practices
- 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 an active continuous improvement system to identify and implement improvements across the four Accreditation Standards. Residents/representatives and staff use formal and informal mechanisms to provide feedback on service delivery. Mechanisms include: audits, surveys, the suggestions box, complaints and suggestions, meetings and clinical data.

Continuous improvement matters are captured in continuous improvement logs and reports. Actions logged on the plan are followed up in a timely manner. Meetings have continuous improvement as a standing agenda item. Staff are familiar with continuous improvement mechanisms and described recent improvements. Residents described recent improvements and are encouraged at meetings and in discussion to put forward ideas for improvement.

Recent improvements relating to Accreditation Standard One include:

- Corporate management identified the need to ensure ready access to the home's resident information in the event of an emergency. A computer drop box has been installed which allows management convenient access to information such as resident evacuation documentation. Management reports the system is working well as it allows data to be shared between relevant staff across the organisation.
- Management identified the need to standardise staff and volunteer identification tags throughout the organisation. Volunteers and all categories of staff have been issued with a new photo-identification tag. The feedback from staff 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 the identification, implementation and compliance of changes in legislation, regulatory requirements, professional standards and guidelines. Current information is provided through avenues such as membership of industry peak bodies and associations, subscription to legislation update services, the Department of Health and Ageing and other government departments, and various aged care industry bulletins and publications. Policies and procedures are reviewed and updated in line with changes to legislation. Relevant information is provided to residents/representatives at resident meetings, and through notices on display in the home. Staff are informed through

memoranda, meetings and education. Audits, surveys, quality improvement activities and staff supervision ensure work practices are consistent and compliant with legislative and regulatory requirements.

Examples of regulatory compliance relating to Accreditation Standard One include:

- A criminal police checks register is maintained which demonstrated all staff relevant contractors and volunteers have current criminal record check certification.
- The home informed residents/representatives, staff and other stakeholders of the re-accreditation audit. Notices advising of the visit were displayed prominently throughout the home.

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 has an education program which ensures management and staff have the appropriate knowledge and skills to perform their roles effectively. Staff education includes: orientation; annual mandatory topics training and a range of internal and external training programs. Management maintains education records and relevant staff receive training and education across the four Accreditation Standards. Staff training needs are identified through legislative requirements, changes in resident needs, observation of staff practices, consultation with staff and stakeholders, staff performance appraisals and surveys; and a range of clinical and audit data. The effectiveness of training and education is assessed. Staff said they are very satisfied with the education programs provided. Residents/representatives said staff and management are skilled and knowledgeable in their delivery of care and services.

Examples of recent education relating to Accreditation Standard One include:

- Accreditation
- Aged care funding instrument [ACFI] training
- Continuous improvement
- Education survey
- Medicare on-line training
- Team building

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 has policies and procedures to ensure each resident and their representative has access to internal and external complaints systems. Information concerning formal and informal complaints procedures includes access details for external agencies and advocacy services which is provided to residents/representatives and staff via handbooks, resident agreements, posters and meetings. Pamphlets, a suggestion box and materials for raising

complaints were observed throughout the home and a record of complaints is maintained by the home's manager. Comments and complaints are linked to the audit system, and hence concerns identified in surveys or discussed in meetings have been included in the continuous improvement program. The home has processes to ensure confidentiality of complaints raised. Residents/representatives and staff described the complaints and feedback processes in the home and said they feel comfortable raising issues of concern and confirmed matters are addressed in a timely manner.

1.5 Planning and leadership

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

Team's findings

The home meets this expected outcome

The home has documented its vision and philosophy statement and this is displayed in the facility and contained in written materials provided to residents/representatives and staff. The home's commitment to quality care is evident through its policies, procedures and other documents which guide the practices of management and staff. Residents/representatives and staff expressed confidence in the leadership of the home.

1.6 Human resource management

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

Team's findings

The home meets this expected outcome

The home has systems to ensure there are sufficient appropriately skilled and qualified staff to deliver care and services in accordance with the Accreditation Standards and the needs of the home's residents. There is a system for recruitment, ongoing professional development (including regular staff appraisals) and flexibility in rostering to ensure the staffing allocation addresses ongoing resident care and service needs. Position descriptions are available and updated to ensure currency. Rosters showed staffing levels are maintained and unanticipated staff absences are addressed through the use of the home's staff and casual staff pool. Staffing levels are assessed against residents' ongoing or changing clinical needs. Staff stated they generally have sufficient time to complete their duties and unanticipated staff absences are generally replaced. Staff expressed their satisfaction with the appraisal and professional development opportunities available to them. Residents/representatives said there are generally sufficient staff available to provide care and assistance and staff are caring and effective in the way they carry out their duties.

1.7 Inventory and equipment

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

Team's findings

The home meets this expected outcome

The home has a goods and equipment management system to ensure appropriate stocks of goods and equipment are maintained for quality service delivery. The home has systems to

replace and purchase equipment such as beds, chairs and lifters. Equipment is well maintained and there is a comprehensive system to manage corrective and preventive maintenance in the home. Staff and residents/representatives said the operation of this system is effective. Electrical items are tagged and registered. Staff are familiar with ordering and maintenance systems and have sufficient goods and equipment on an ongoing basis. Residents/representatives said they were satisfied that goods and equipment required for use by residents are well maintained and readily available.

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 effective information management systems which include policies and procedures to support care practices and the delivery of services. Various regular staff and resident/representatives meetings are held. The home manages information review through a broad range of audits and information gathered is analysed, reported on and actioned where required. Residents/representatives, staff and other stakeholders have access to information through mechanisms such as handbooks, meeting minutes, noticeboards, handovers, communication diaries, memoranda and verbal communication. The home's electronic data base system [backed-up daily] is password protected and access [such as to information concerning resident care] is restricted to designated staff. Current resident information was observed to be kept secured and staff were aware of their responsibility to keep resident information confidential. The home demonstrated it has a system for the archiving of resident information as well as processes for the destruction of confidential information. Residents/representatives and staff said they can access information and are kept informed about relevant matters.

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 demonstrated it has systems to monitor the quality of work being undertaken by contractors at the home and to ensure resident safety and the home's quality standards are being met. External contractors have a service agreement including proof of current licence and insurance cover. There is a system to ensure suppliers and contractors are regularly assessed against their service agreement and a breach of contract is addressed. Contractors are oriented to the home's quality and safety standards and privacy principles. Staff and residents said they are satisfied with the quality of the services currently being provided by external contractors.

Standard 2 – Health and personal care

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

2.1 Continuous improvement

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for information regarding the continuous improvement system. Improvements undertaken by the home relevant to Accreditation Standard Two include:

- Management and staff of the home identified the need to improve the system of medication administration. A blister pack system of medication administration was introduced this year. Management state the new system has reduced the incidence of medication errors and is more efficient.
- Management identified the need to improve residents' access to dental services. The home has arranged for a mobile bus and dental team to visit the home. With the consent of the resident/representative, various dental procedures will be offered in the near future.

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 regarding the system to ensure the home complies with legislation and regulations relevant to residents' health and personal care. Examples of regulatory compliance related to Accreditation Standard Two include:

- The home was able to demonstrate staff who require professional registration all hold current registration certificates.
- The home has a variety of information available and accessible to staff regarding legislation and guidelines relating to health and personal care.

2.3 Education and staff development

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.3 Education and staff development for a description of how the home provides education and monitors the results to ensure staff have appropriate skills and knowledge to effectively perform their roles. Education provided by the home relevant to Accreditation Standard Two includes:

- Blister pack medication administration
- Care planning
- Continence management
- Diabetes, diabetic care and documentation
- Falls prevention
- Fragile X syndrome
- Intrusive and challenging behaviours; Alzheimer behaviour management
- Nutrition, food consistency and weighing residents
- Pain patches, pain assessment
- Personal care and hygiene
- Pressure area care, use of air mattresses, skin tears and wound 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 a system to ensure residents receive appropriate clinical care. Residents are assessed for their clinical care needs on entering the home. A registered nurse formulates the residents’ individual care plan and reviews each care plan four monthly and as needed. Care staff are responsible for the provision of residents’ clinical care under the direct supervision of the registered nurse. Care is monitored via audits, surveys, collection of key performance indicators and the comments and complaints mechanism. Care staff demonstrated a comprehensive understanding of each resident’s specific care needs. Residents and representatives expressed satisfaction with the clinical care residents receive.

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

Manly Vale Nursing Home has systems to ensure appropriately trained staff are used to meet the needs of residents who require specialised nursing care. Registered nurses undertake clinical assessments of any resident requiring specialised nursing care. Care plans are in place and evaluated every four months and as needed. There is documentation relating to consultation with other health care specialists regarding resident care needs. Examples include the use of a speech pathologist for residents with swallowing deficits and the use of dieticians for residents with weight discrepancies. Residents and representatives expressed satisfaction with the level of specialised nursing care provided to residents. Care staff demonstrated awareness of residents’ individualised specialised nursing care needs.

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 a system to ensure residents are referred to the appropriate health care specialists in accordance with their assessed needs. A review of residents’ clinical documentation shows assessments and reviews have occurred by various health specialists. These include speech pathologists, podiatrists, behaviour management specialists and dietitians. Residents and representatives are aware of the availability of other health specialists if needed. Care staff are aware of specialist input into residents’ care planning and are made aware of any changes by a registered nurse and at staff handovers.

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 ensure residents’ medication is managed safely and correctly. There is a medication incident reporting process that forms part of the home’s safe system. Residents’ medications are administered from a blister pack system by the registered nurse. Observation of a medication round showed staff administering medications according to correct procedure. All medications were observed to be locked in medication trolleys and stored in a locked treatment room when not in use. Residents and representatives stated residents receive medication correctly and in a timely 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

Manly Vale Nursing Home has a system for assessing, monitoring and treating residents’ pain. Pain assessments are attended as needed by the registered nurse for any resident who reports pain or is receiving regular pain relieving medication. Pain monitoring is attended by the registered nurse whenever a resident receives pain relieving medication. Strategies used by the home to manage residents’ pain include heat, exercise and analgesia. Referral to specialists is in line with residents’ needs. Residents expressed satisfaction with their pain management treatment and with staff responses to their needs. Care staff demonstrated knowledge of the processes required to effectively manage residents’ pain.

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 a system for palliative care to ensure the comfort and dignity of terminally ill residents is maintained. Consultation and communication processes are used in order to

ensure residents, representatives, care staff and all other health professionals are aware of the residents' individual needs. Where possible, the home provides single rooms for palliation in order to allow family and residents more privacy. Care staff are aware of the processes to be used when a resident is requiring end of life care.

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 a system to ensure each resident receives adequate nourishment and hydration. When a resident enters the home a diet analysis is completed and the information is provided to the catering staff. Residents' weights are recorded monthly and as needed or in line with the medical officers' orders and registered nurses alert the residents' medical officer of any fluctuations in a resident's weight. Nutritional supplements are given to residents who have been assessed as needing extra nutritional support and texture modified foods and fluids are served in accordance with the assessed needs of the resident. Specialised eating equipment is used on an individual basis to help promote resident independence. The home has access to a speech pathologist and dietician as needed. Residents are generally satisfied with meals and assistance they receive from staff. Care staff are aware of residents' individual special diets, fluid requirements and of any residents requiring a food and fluid monitoring chart.

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

Manly Vale Nursing Home has systems for maintaining residents' skin integrity consistent with their general health. Initial and ongoing assessments, care planning and regular evaluations of residents' skin are conducted. Care staff monitor residents' skin condition daily and provide strategies to prevent breakdown, including changes in position and pressure area care. A registered nurse attends to all wound care. The home has a range of dressing products and pressure relieving aids to assist in maintaining and promoting residents' skin integrity. The home has a podiatrist who regularly visits residents for assessment and care. Residents and representatives are satisfied with the way staff maintain residents' skin integrity.

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 to ensure residents' continence needs are managed effectively. Continence management strategies are developed for each resident following an initial assessment of urinary and bowel patterns. Care staff assist residents with their continence programs as required and residents' bowel management programs are monitored daily. A registered nurse liaises with all care staff in relation to the individual needs of residents. Care

staff stated there is a sufficient supply of continence aids to meet residents' needs. Residents and representatives stated they are generally satisfied with the continence care and toileting program provided to residents.

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 a system to ensure the needs of residents with challenging behaviours are managed effectively. All residents are assessed on their entry to the home, behaviours identified and strategies developed by registered nurses to manage each resident individually. All episodes of challenging behaviour are recorded in the resident's progress notes and the resident is monitored closely. Registered nurses investigate the presence of infection or constipation when a resident's challenging behaviour escalates. Referral to behaviour management specialists is used to assist staff to manage behaviours of concern. Care staff are aware of residents' individual needs and management strategies. Residents and representatives are satisfied with the manner in which staff approach and manage residents' individual behaviours.

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 processes to optimise residents' levels of mobility and dexterity. Residents' mobility and dexterity is assessed on their arrival at the home and on a needs basis. The physiotherapist implements and evaluates the resident's individual program. The physiotherapy assistant is responsible for implementing the individual resident mobility strategies which include exercise programs, mobility programs and heat treatment. The accident and incident reporting system includes analysis of incidents to identify trends and the implementation of strategies to reduce falls as needed. The home has a range of mobility equipment. Staff showed an understanding of their responsibilities in relation to optimising the residents' mobility and dexterity. Residents and representatives expressed satisfaction with the home's mobility program for residents.

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 a system to ensure residents' oral and dental health is maintained. This includes initial and ongoing assessment of residents' oral and dental needs. Residents' day-to-day oral care is attended in line with individual care plans and referral to specialists is arranged according to residents' needs and preferences. Care staff demonstrated an understanding of oral and dental care practices used in resident care. Residents and representatives expressed satisfaction with the way in which the residents' oral health is maintained.

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’ sensory losses are identified and managed effectively by staff at the home. The home’s assessment process ensures any sensory loss is identified and referrals to appropriate specialists are made. Individual sensory aids are available and any special instructions are documented on the residents’ care plans. Care staff demonstrated an understanding of the sensory needs of individual residents. Residents and representatives are satisfied with the assistance provided by staff in relation to resident sensory losses.

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

Manly Vale Nursing Home has systems to assist residents achieve their natural sleep patterns. On their entry to the home, a resident’s sleep pattern is assessed and strategies are implemented. A care plan is formulated which is regularly reviewed. The use of medication is at the discretion of medical officers in consultation with residents and/or their representatives. Residents are encouraged to settle quietly in their rooms at night and staff offer snacks and drinks during the night when required. The home ensures residents who are accommodated in shared rooms are able to achieve natural sleep patterns. This is by use of bed screens and effective management of all residents in the shared room. Residents stated they are generally able to have a good night’s sleep and the night staff are very attentive to 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

Refer to expected outcome 1.1 Continuous improvement for information regarding the continuous improvement system. Improvements undertaken by the home relevant to Accreditation Standard Three include:

- The home recently reviewed their daily activities and lifestyle programs to provide new interesting and interactive alternatives for residents. The “Laugh out loud” program was introduced in April 2012 which employs humour therapy to improve residents’ mood, social engagement and reduce agitation. Residents have responded well to the program and resident representatives spoke enthusiastically about the program and the enjoyment it has provided to residents.
- Staff consulted residents regarding the purchase of vibrating foot massagers for improved circulation, comfort and relaxation purposes. As a result of residents’ positive reaction to the idea, foot massagers were purchased and are currently in use by residents. The feedback from residents who have used the massagers has been very positive.
- Staff identified the need for residents who are sick and unable to engage in group activities to be offered alternative activities in their rooms. Two portable DVD players have recently been purchased to enable residents to watch DVDs in their room. Residents and representatives are being made aware of these new resources for resident use. Staff comments are positive regarding the increased opportunity for resident participation these resources provide.

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 regarding the system to ensure the home complies with legislation and regulations relevant to residents’ health and personal care. Examples of regulatory compliance related to Accreditation Standard Three include:

- Mandatory reporting guidelines and training regarding elder abuse are implemented by the home.
- All residents/representatives are provided with a resident agreement in line with government requirements. Agreements cover security of tenure and residents’ rights and responsibilities. Residents/representatives are advised to seek independent legal and financial advice prior to finalising the agreement if they so desire.

3.3 Education and staff development

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.3 Education and staff development for a description of how the home provides education and monitors the results to ensure staff have appropriate skills and knowledge to effectively perform their roles. Education arranged by the home relevant to Accreditation Standard Three includes:

- Certificate IV in Leisure and Health for one staff member
- Compulsory reporting and resident assault
- Daily monitoring (behavioural management)
- Grieving individuals
- Resident dignity

3.4 Emotional support

This expected outcome requires that "each resident receives support in adjusting to life in the new environment and on an ongoing basis".

Team's findings

The home meets this expected outcome

Manly Vale Nursing Home supports residents and their representatives in adjusting to life in their new environment and on an ongoing basis. The results of the team's observations, interviews and document review reveal residents receive emotional support from staff. On entry to the home, a diversional therapy assessment is completed for each resident. This data combined with a case conference contributes to the assessment of residents' emotional needs. We observed residents have personalised their rooms with photographs. Care staff demonstrated insight into residents' emotional needs. Residents and representatives stated they were supported and assisted in all aspects from the initial contact with 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

The home has a system to assist residents achieve maximum independence, maintain friendships and participate in community life. The activity staff encourage and support residents to remain active members of the community and maintain life interests. Activities are aimed at enhancing residents' independence and interests. Residents advised they are encouraged to entertain their visitors at the home or go out with family and friends. Residents and representatives expressed satisfaction with the level of encouragement the residents receive. Care staff stated they are aware of the residents' needs in relation to maintaining their independence.

3.6 Privacy and dignity

This expected outcome requires that "each resident's right to privacy, dignity and confidentiality is recognised and respected".

Team's findings

The home meets this expected outcome

Residents' right to privacy, dignity and confidentiality is recognised and respected by staff at the home. Information on residents' rights and responsibilities is included in documentation provided to all residents and representatives when residents first enter the home. Staff demonstrated an awareness of practices which promote the privacy and dignity of residents. These include closing resident doors, window curtains and bed screens when providing personal care. Residents' personal information is stored securely with access by authorised staff only. Residents have access to a confidential process for reporting comments and complaints. Residents and representatives stated they were satisfied with the way staff respect and maintain residents' privacy, dignity and confidentiality.

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 actively works to ensure its residents are encouraged and supported to take part in a wide range of activities which are stimulating, interesting and are of interest to them. On entry to the home residents' activity and lifestyle interests are assessed. Activity interests and programs are documented including attendance and evaluation to assess the suitability of activities offered. Programs include group activities such as concerts, word games, one-to-one activity, or small group special interest activities, for example gardening. Activities are modified as necessary to optimise residents' enjoyment, participation and sensory stimulation. Residents and representatives expressed satisfaction with the overall leisure program for residents.

3.8 Cultural and spiritual life

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

Team's findings

The home meets this expected outcome

The home is able to demonstrate residents' individual interests, customs, beliefs and cultural and ethnic backgrounds are valued and fostered. Assessment of residents' specific needs, customs and beliefs is conducted on their entry to the home and reviewed on an ongoing basis. Residents are actively encouraged to maintain cultural and spiritual links in the community. Church services are held and the activity program incorporates weekly pastoral care visits for residents who are interested. Days of cultural significance are celebrated with various activities over one week. Residents and representatives are satisfied with the support provided for 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

The home has processes to ensure each resident (or their representative) participates in decisions about the services received by the resident. These processes uphold the resident's right to exercise choice and control over his or her lifestyle. Residents are kept informed and given opportunities to provide input to the home through systems such as assessment and care planning processes, surveys and resident meetings. Where residents are unable to make choices for themselves, an authorised decision maker is identified for the resident. Residents are provided with choices concerning their personal care regimes, cultural and spiritual choices, waking and sleeping times. Choices are also available regarding participation in activities and choice of medical officer. Residents and representatives stated the home's staff actively support residents in making their own lifestyle choices and decisions.

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

Manly Vale Nursing Home has processes to ensure residents have secure tenure and are assisted to understand their rights and responsibilities. The home's manager discusses security of tenure and rights and responsibilities with residents and/or their representatives prior to entry where possible. Documentation provided to all new residents and/or their representatives includes an information package, handbook and the resident care service agreement. This explains the services provided by the home, resident rights and responsibilities, 'cooling off' periods, conditions of occupancy, and payable fees. The charter of residents' rights and responsibilities is displayed in the home and is also included in the staff and resident handbooks. Residents and representatives reported a general awareness of resident rights and responsibilities and felt secure about resident tenure.

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 continuous improvement system. Improvements undertaken by the home relevant to Accreditation Standard Four include:

- Management identified the need to improve the standard of its indoor and outdoor living environments including the central courtyard area which is popular for use by residents and their visitors. New outdoor furniture (including umbrella shading) has been purchased and shrubs pruned which has resulted in added space and additional seating areas. The home has also purchased new lounge and dining room furniture, has repainted the common areas of the home and is progressively repainting and refurbishing the resident rooms. The home’s laundry machines and dryers have also been upgraded, the freezer replaced and the cool room renovated. Feedback from residents/representatives has been very positive.
- At the request of residents, tea and coffee making facilities have been made available within kitchenette areas on each floor of the home for the use of residents and their visitors. Feedback from residents has been positive and these facilities are well used.

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 regarding the system to ensure the home complies with legislation and regulations relevant to residents’ health and personal care. Examples of regulatory compliance related to Accreditation Standard Four include:

- Alteration to the occupational health and safety policy and procedures to comply with the new Work Health and Safety Act and Work Health and Safety Regulation 2011.
- The annual fire safety statement is current [certification dated 3 November 2011].
- A current annual NSW Food Authority licence was on display [expiry date 7 October 2012].

4.3 Education and staff development

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.3 Education and staff development for a description of how the home provides education. Education relevant to Accreditation Standard Four includes:

- Chemical usage
- Fire safety officer re-certification training for four staff
- Fire safety, fire equipment, evacuation
- Food audits and food safety
- Infection control, bug control, hand washing
- Manual handling, use of lifting equipment and slide sheets
- Trauma in the workplace
- Work health and safety, smoking issues.

4.4 Living environment

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

Team's findings

The home meets this expected outcome

The home demonstrated it provides its residents with a safe and comfortable environment consistent with their needs. Rooms were observed to contain personal items. There are living areas where residents can have privacy should this be required. There are systems to guide the use of restraints and bed rails when required including guidelines to meet required standards. The safety and comfort of the home is monitored through regular environmental audits, analysis of accidents and incidents, hazard reporting and regular workplace inspections. Residents are satisfied with their environment.

4.5 Occupational health and safety

This expected outcome requires that "management is actively working to provide a safe working environment that meets regulatory requirements".

Team's findings

The home meets this expected outcome

The home's management is actively working to provide a safe working environment that meets regulatory requirements. Information regarding work health and safety is included in the home's orientation and annual mandatory education programs. Various audits are used to monitor workplace safety and the safety of the environment including an accident, incident and hazard reporting system and analysis of the data highlights areas for improvement. Material safety data sheets (MSDS) are available at point of use and current for the chemicals in use. There is a return to work program to manage the return to work for injured employees. Staff are provided with training and instructions on each resident's manual

handling needs and equipment is provided to support safe work practices. Staff are satisfied with the safety of their 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 to provide a safe environment and ensure fire, security and emergency risks are minimised for residents and staff. The system includes regular checks and maintenance of equipment such as fire fighting equipment. Fire/emergency/evacuation plans are accessible to staff and reviewed and updated on a regular basis. Compulsory annual fire training and drills are held for staff to manage emergency situations and staff are aware of the evacuation process should it be necessary. Emergency exits are clearly marked and free from obstruction. Residents have a designated smoking area and the home provides residents with information concerning fire safety. Residents are aware of fire safety measures and feel safe in the home.

4.7 Infection control

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

Team's findings

The home meets this expected outcome

The home has an effective infection control program which includes infection policies, practices and guidelines. A designated staff member ensures the operation and effectiveness of the infection control program through policies and procedures, education and an infection surveillance program. The program is monitored through reporting of infections, trend analysis, audits and managerial review. The home has mandatory annual training in infection control and hand washing. Hand washing facilities, personal protective equipment and other equipment is available to enable staff to carry out infection control procedures. The infection control program also includes an outbreak management policy and plan, a food safety program, a vaccination program for residents and staff, pest control and waste management. Staff interviewed demonstrated they have a sound knowledge and understanding of infection control and were observed implementing the program.

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

Catering

Food is fresh cooked on site and there is a seasonal rotating menu which is reviewed by a dietician and residents/representatives have input into the menu. The home has a food safety program and regular audits ensure the kitchen environment is hygienic and infection control practices are followed. Special diets are catered for with resident likes, dislikes and food allergies identified. Residents report catering staff are responsive to their needs and preferences.

Cleaning

The residents' rooms and bathrooms, and all common areas and staff work areas were clean and odour free during the visit. Cleaning is carried out to schedule or more often as needed. Residents/representatives are satisfied with the cleanliness of the home.

Laundry

Personal items and linen are laundered on site and there are plentiful supplies of fresh linen. There is a system for the labelling of personal clothes to minimise missing clothing and residents are satisfied with the quality of laundering services provided by the home.