Tanby Hall
RACS ID 7218
1 Tanby Place
COOLOONGUP WA 6168
Approved provider: ACK 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 two years until 24 October 2014.

We made our decision on 25 September 2012.

The audit was conducted on 21 August 2012 to 22 August 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

Tanby Hall 7218

Approved provider: ACK Pty Ltd

Introduction

This is the report of a re-accreditation audit from 21 August 2012 to 22 August 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 21 August 2012 to 22 August 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:	Karen Jane
Team member:	Shirley Rowney

Approved provider details

Approved provider:	ACK Pty Ltd

Details of home

Name of home:	Tanby Hall
RACS ID:	7218

Total number of allocated places:	54
Number of residents during audit:	45
Number of high care residents during audit:	44
Special needs catered for:	Residents with dementia and related conditions

Street:	1 Tanby Place	State:	WA
Town:	COOLOONGUP	Postcode:	6168
Phone number:	08 9592 9500	Facsimile:	08 9527 5370
E-mail address:	tanby.don@belrosecare.com.au		

Audit trail

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

Interviews

	Number		Number
Director	1	Residents/representatives	9
Facility manager	1	Care staff	4
Quality coordinator	1	Chef	1
ACFI/iCare coordinator	1	Administration assistant	1
Clinical nurse	1	Laundry staff	1
Physiotherapist	1	Maintenance staff	2
Occupational therapist	1	Hospitality staff	2
Enrolled nurse	1	Cleaning staff	2
Therapy staff	2		

Sampled documents

	Number		Number
Residents' clinical documentation system	6	Resident agreements	3
Summary care plans	6	Personnel files	6
External services contracts	8		

Other documents reviewed

The team also reviewed:

- Accidents, incidents and hazard reports
- Activity planner
- Audit/survey results and action plans
- Bowel charts
- Catering service documentation and menu
- Cleaning schedules
- Clinical indicator file
- Communication books and diaries
- Complaints and compliments file
- Compulsory training matrix, attendance records, and evaluations
- Continuous improvement plan and general feedback form
- Dietary preferences
- Duty statements and position descriptions
- Infection control surveillance records

- Location maps, fire equipment testing logs, and fire procedure manual
- Material safety data sheets and posters
- Meeting minutes
- Memoranda
- New staff orientation program
- Newsletters
- Observation charts
- Police certificates and professional registration monitoring matrix
- Policies and procedures
- Preventative and corrective maintenance, and electrical tagging records
- Referrals to other health professionals
- Resident list
- Residents' information package and surveys
- Roster
- Staff performance appraisal monitoring matrix
- Therapy files and statistics
- Weight records
- Wound care plans.

Observations

The team observed the following:

- Accreditation visit notice
- Activities in progress
- Activity calendar displayed
- Archive storage and register
- Charter of residents' rights and responsibilities
- Chemical storage
- Electronic medication management system
- Equipment and supply storage areas
- Fire fighting equipment and fire exits
- Fire fighting simulator and training resources
- Interactions between staff and residents
- Internal and external complaints information, and advocacy services leaflets
- Living environment
- Meal and refreshment services in progress
- Mission, values and philosophy statement, and organisational structure
- Noticeboards and information posted around the home
- Outbreak resource, spill kit and personal protective equipment

- Storage of clinical supplies and medication
- Suggestion box
- Visitor and contractor sign in/out books
- Volunteer information pack.

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

Staff, residents and representatives reported they are encouraged to contribute to the home's pursuit of continuous improvement and they are satisfied with management's responsiveness to feedback. The home has systems and processes to plan, identify, implement, evaluate and review continuous improvement activities. Management capture improvement opportunities through suggestions and complaints, incident and hazard reports, audits, surveys and meetings. Improvements requiring ongoing action are added to the plan for continuous improvement. The home provides information regarding continuous improvement to residents and staff via information handbooks and meetings.

Examples of recent or current improvement activities related to Standard 1 are described below.

- The organisation identified the opportunity to improve the home's information system via the introduction of an electronic clinical documentation system. Delegated staff attended train the trainer education to assist/support staff during the implementation of the system which was completed in November 2011. Management reported all staff gained competency in using the system and staff reported they have quick access to care planning and assessment information.

- Staff identified that many residents were not always informed or aware of the passing of fellow residents. In response, a memorial notice board has been placed in the activity room where a photograph and an appropriate memorial statement is mounted for two weeks. Staff reported that residents are able to talk about the resident. Residents interviewed stated they felt the noticeboard provides respectful information which enables them to acknowledge the life of the resident.

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

Residents and representatives reported they are aware of the charter of residents' rights and responsibilities and the external complaints mechanisms. There are processes to ensure the home complies with all relevant legislation, regulatory requirements, professional standards and guidelines. Management receive updates on legislative and regulatory changes from corporate office, peak bodies, government departments and web sites. The organisation updates policies and procedures and the changes are disseminated to management at the

home. Management provide staff with information regarding changes through education, meetings and memoranda. Staff provides police certificates on commencement of employment and a system monitors currency. Residents' charges and fees are set according to legislation. Management conduct regular audits to ensure regulatory compliance and informed residents and representatives that a re-accreditation audit was to take place.

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

Residents and representatives reported staff have sufficient skills and knowledge to attend to their needs. The home's education program ensures that staff have the knowledge and skills to perform their roles effectively. Management uses feedback and requests from staff and residents, satisfaction surveys, observation of work practice, and accident/ incident reports to identify training needs. The organisation provides sessions that are mandatory and elective and maintains records of attendance. There is a 'buddy' system to support new staff through the induction and orientation process. Staff reported they receive appropriate education to enable them to perform their duties effectively.

Examples of education and training related to Standard 1 are listed below.

● Documentation

● Mandatory reporting and elder abuse.

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

Team's findings
The home meets this expected outcome

Residents and representatives reported other interested parties have access to internal and external complaints mechanisms. Management provide this information in residents' formal agreements and during orientation. The home displays brochures and literature regarding external complaints and advocacy mechanisms in various languages. Management follow up comments and complaints promptly and add them to the plan for continuous improvement when appropriate. The effectiveness of the comments and complaints mechanisms is monitored via audits. Staff reported many residents verbally report issues and that management is approachable and responsive to feedback.

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 displays the organisation's mission, philosophy and objectives statement and it is documented in the resident information package. These statements incorporate the home's

commitment to provide excellence in care, accommodation and support to enhance the quality of life for residents. Staff reported management discuss the organisation's mission, philosophy, objectives and vision at orientation.

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 a system to manage human resources based on policies and procedures and regulatory requirements. Systems include recruitment, selection, orientation, training and development of staff. Staff are employed against set criteria as required for each role and undertake orientation. Initial supervised shifts ensure staff are competent to perform the required tasks. Staff attend mandatory, optional and competency-based training. The monitoring of staff performance includes feedback mechanisms such as complaints, clinical indicators, surveys and performance appraisals. The home has an electronic roster system and absenteeism is covered by staff doing extra shifts or by utilising agency staff.

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

Team's findings
The home meets this expected outcome

Staff reported stocks of goods and equipment are adequate, repairs are made in a timely manner and management are responsive to requests for additional supplies and equipment. The home has processes to facilitate the purchase, use, storage, maintenance and management of appropriate goods and equipment required for quality service delivery. The corrective and preventative maintenance programs ensure equipment is regularly checked and serviced. Management undertake audits and inspections to ensure goods and equipment is maintained at sufficient levels and is correctly stored. The home has processes for the ordering of supplies including chemicals, paper goods and surgical requirements.

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

Residents and representatives advised they have access to information to assist them to make care and lifestyle decisions. The home has effective processes to facilitate the collection, analysis and dissemination of information related to residents' care, business and operational issues. Management collates information from clinical assessments and monitoring processes. On induction staff sign an employment contract that includes a privacy and confidentiality agreement. Staff have access to information via policies and procedures, care plans, memoranda, handovers and at meetings. Electronic information is backed-up and password protected. Archived residents' records are stored securely with a system in place

to facilitate retrieval of archived information. Staff interviewed stated they have access to appropriate information to help them perform their roles.

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

Maintenance and management staff reported satisfaction with the quality of services they receive from external service providers. Corporate management oversee external service agreements and identify the service to be provided in a way that meets the home's needs and service quality goals. Service agreements include the responsibilities of relevant parties' for insurance arrangements, confidentiality, professional registration requirements and provision of a police certificate. The home has a list of preferred suppliers and management monitor the quality of goods and services on an ongoing basis through audits, surveys and staff feedback. A visitors log is used to monitor contractors as they enter and exit the home.

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

See Continuous improvement in Standard 1 – Management systems, staffing and organisational development for an overview of the home's continuous improvement system.

Examples of recent or current improvement activities related to Standard 2 are described below.

• The organisation identified the opportunity to introduce an electronic medication administration system. Management reported that the system is linked to the existing electronic clinical documentation system and early evaluation of this initiative identifies a reduction in medication errors. Staff gave positive feedback stating the system is efficient and saves time, allowing increased time for resident care.

• Management of the organisation identified the need to provide more competency based education to support staff in their role. As a result various clinical competency education packages have been placed onto the intranet system. Management demonstrated how staff accesses the packages which incorporate information/guidelines and competency assessments. Staff reported the packages provide relevant information to enable them to gain competency in tasks relating to their role.

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

Team's findings
The home meets this expected outcome

The home has systems and processes for identifying relevant legislation, regulatory requirements, professional standards and guidelines. Management disseminates relevant information to staff at meetings and within memoranda and regular audits monitor regulatory compliance. Medication is stored safely and administered by clinical staff or care assistants deemed competent by a registered nurse. There is a system for monitoring the registration of professional staff. Registered nurses carry out initial and ongoing assessment of residents receiving a high level of 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

See Education and staff development in Standard 1 – Management systems, staffing and organisational development for an overview of the education and staff development system. Examples of education and training related to Standard 2 are listed below.

- Continence care

- Dementia care

- Diabetes

- Oral care

- Palliative care

- Wound care.

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

Team's findings
The home meets this expected outcome

Residents reported they are consulted about their care needs and receive appropriate clinical care. On moving to the home, all residents undergo a range of assessments to identify their care needs. Care plans are developed and reviewed four monthly or earlier if required to guide staff in each resident's care need requirements. Regular staff meetings are held to discuss residents' needs and ensure appropriate care is being given. Staff interviewed reported they are encouraged and supported to attend internal and external training to maintain their knowledge and skills. Residents reported they are satisfied with the appropriateness of the care they receive according to their needs and preferences.

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

Residents reported they are satisfied they receive specialised nursing care in accordance with their needs and preferences. They stated they are consulted about any specialised care needs. The clinical nurse oversees the assessment, care planning and monitoring of residents with specialised care needs, including diabetic management, chronic wounds, pain management and challenging behaviours. Specific care needs are documented in the residents' care plan to guide staff and outline the residents' specialised care needs including directives from the general practitioner and other health professionals. Management reported registered staff are available for consultation at all times. Clinical staff reported they are encouraged and supported to attend internal and external education to maintain their skills and knowledge.

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 confirmed they are referred to appropriate health specialists in accordance with their needs and preferences. The home has access to a variety of health care specialists including a dietician, speech therapist, podiatrist and mental health services. A multi-disciplinary team, including input from the general practitioner contributes to the residents' assessments and identify the need for input from other health specialists. Following consultation with the resident and/or their representative a referral is arranged. Care plans are revised as required and include directives from other health specialists. Residents and representatives reported satisfaction with the access to other health services.

2.7   Medication management
This expected outcome requires that "residents' medication is managed safely and correctly".

Team's findings
The home meets this expected outcome

The home has processes for the safe administration, delivery, storage, documentation and disposal of medications. Medication competent staff assist residents with their medications using a multi-dose blister pack administration system. The electronic medication management system contains each resident's medication profile and relevant information including allergies, non-crushable medications and an up-to-date coloured photograph of each resident for identification. An external accredited pharmacist reviews each resident's medications on an annual basis, and this information is made available for the general practitioner. Medication incidents are reported, addressed and analysed monthly to identify any trends. Residents reported they are satisfied their medications are managed safety and correctly.

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 interviewed reported they are as free as possible from pain. They described being consulted about their pain management and are offered a range of pain management options. Qualified staff are trained in pain management and have access to a range of pain management interventions. The home has processes to identify individual resident's pain management needs and strategies to relieve the resident's pain are documented in their care plan. As required medications (PRN) and alternative therapies are used to alleviate resident's pain including wax baths, gentle massage, diversional therapy and heat packs. Staff assess, evaluate and document effectiveness of interventions provided, and follow up if further interventions are required.

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's approach to palliative care is maintained in accordance with the residents' palliative and terminal care wishes. Palliative and terminal care wishes are discussed with the resident and/or their representative on moving to the home or if preferred, as the need arises. When required, a specific palliative care plan is developed to guide staff in the resident's personal care needs and pain management requirements. The clinical nurse oversees and monitors the effectiveness of care interventions, and the home has access to external palliative care specialists if required. Pastoral care is available at the home and staff described how they support residents and their families throughout the palliative process.

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

Team's findings
The home meets this expected outcome

Residents reported they are satisfied they receive adequate nourishment and hydration. They reported they are consulted about their likes, dislikes, preferences, allergies and cultural requirements on moving to the home, and this information is provided to relevant staff and reviewed on a regular basis. Residents are weighed on moving to the home and monthly thereafter unless otherwise directed by the clinical nurse. Nutritional supplements are commenced for residents identified as having significant weight loss and a referral to the dietician is completed for continued weight loss. Modified diets are prepared following assessment by the speech pathologist for residents identified as having difficulties swallowing. Modified cutlery and crockery is used for residents identified with impaired motor skills. Staff were observed assisting residents with meals and drinks as required.

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

Team's findings
The home meets this expected outcome

The home has processes to assess residents' skin integrity and associated health care needs. Where a risk of compromised skin integrity is identified, treatment and nursing interventions are implemented. Cushions, pressure-reliving mattresses and moisturising creams are available for resident's needs when required. Residents' skin integrity incidents are reported, actioned and a specific wound care plan developed. Staff reported how they monitor residents' skin integrity during personal care and report any concerns to the supervisor for follow-up. Skin integrity incidents are analysed monthly to identify trends. Residents reported they are satisfied with the care provided in relation to 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

Residents reported they are satisfied the home manages their continence needs effectively. The home has processes to identify each resident's continence requirements on moving to the home and on an ongoing basis, and a care plan is developed. Residents are assisted to maintain their continence using a variety of measures including scheduled toileting, assistive devices and the use of appropriate continence aids. Bowel elimination is monitored daily and interventions documented. Infections are monitored via the home's infection log, actioned, and analysed monthly to identify any trends. Staff reported they have adequate supplies and training to manage each resident's continence requirements effectively.

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 reported they are generally not adversely affected by the behaviour of other residents. Behaviour assessments are conducted to identify triggers and effective strategies to manage and minimise challenging behaviours. If behaviours of concern are identified, a specific care plan is developed, including strategies to guide staff in managing and minimising behaviours. The effectiveness of interventions are monitored via observation, discussions with staff and clinical indicators. Referrals to mental health services are completed in consultation with the general practitioner, resident and/or their representative. Staff reported appropriate measures to manage and minimise challenging 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

Residents reported they are satisfied with the support provided by the home to maintain and optimise each resident's mobility and dexterity. On moving to the home, each resident is assessed for their mobility and dexterity by the physiotherapist. Care plans and mobility plans are developed and reviewed regularly. The physiotherapist develops individual exercise programs that are implemented by the physiotherapy assistant who monitors and reports residents' participation and progress. Appropriate seating and mobility aids are available to promote and maintain each resident's independence. Resident falls and strategies are discussed at regular staff meetings, and incident forms are analysed monthly to identify any trends. Staff reported strategies to promote residents' mobility such as assistive devices and exercise programs.

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

Assessment and evaluation of residents' oral and dental needs occurs when residents move into the home, annually and as required. Care plans identify the assistance residents require to maintain their oral and dental hygiene these include assisting residents to clean their teeth or dentures. Care plans are reviewed regularly to assess the effectiveness of the care interventions. Staff can arrange for a dentist to undertake dental care for residents at the home, or family can arrange for dental appointments to a dentist of their choice. Staff reported they routinely undertake oral care for residents and ensure they have appropriate oral health equipment and products. Residents and representatives reported are satisfied with the oral and dental care provided by the staff.

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' care needs related to sensory loss are assessed when they move into the home. Care plans include strategies to manage residents' sensory losses and to maximise each resident's independence and interaction in activities of daily living. The activity program is designed to provide sensory activities such as wax baths, aromatherapy, bread making and large print and audio books are available. Residents have access to and are referred to allied health professionals including audiologists and optometrists. Staff described the strategies they use to assist residents with sensory loss and to manage their sensory devices. Residents and representatives stated they are satisfied with the assistance residents receive to manage their 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

Residents stated they are able to achieve natural sleep patterns. They reported they are consulted about their preferences in relation to settling routines and rising times. On moving to the home, a sleep assessment is conducted to identify each resident's sleep pattern and to identify any disturbances. Strategies to assist with sleep are documented in the care plan. Reviews are conducted four monthly or sooner if sleep disturbances are identified. In consultation with the resident and/or their representative and the resident's general practitioner, medications and alternative therapies are used to assist residents sleep. Staff reported strategies such as pain relief, toileting, a warm drink or snack and decreased noise to assist residents to sleep.

Standard 3 – Resident lifestyle

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

3.1   Continuous improvement

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

Team's findings

The home meets this expected outcome

See Continuous improvement in Standard 1 – Management systems, staffing and organisational development for an overview of the home's continuous improvement system.

Examples of recent or current improvement activities related to Standard 3 are described below.

- Following a suggestion from staff, the activities program has been reviewed to provide separate activities for male and female residents. As a result a ladies high tea and gentlemen's coffee club activity has been trailed. Residents reported the first activity attended was very enjoyable. Staff advised the activities are incorporated into the monthly program.

- Staff identified the need to provide family/social events. In response to this suggestion, a family bingo evening was held in July 2012. We identified from feedback forms and interviews during our visit that this event was successful. Staff reported more family events will be organised monthly.

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

Residents and representatives reported they are informed of any changes to fees and they are aware of residents' rights and responsibilities. The home has systems to ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines. Management inform staff of changes relevant to resident lifestyle through training, memoranda, and meetings. There are procedures for mandatory reporting of elder abuse. Staff reported they have access to policy and procedures, sign employment contracts that contain a confidentiality clause and attend mandatory training.

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

See Education and staff development in Standard 1 – Management systems, staffing and organisational development for an overview of the education and staff development system.

Examples of education and staff development undertaken relevant to Standard 3 are listed below.

- Cultural diversity

- Grief and loss

- Leisure and lifestyle skills.

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

Residents confirmed the support provided by the home is appropriate and effective in meeting their individual needs and preferences. Prior to moving to the home, residents or their representative are supplied with information about the admission process and care and services provided. Residents are orientated to their surroundings on moving to the home, encouraged to personalise their room and introduced to staff and other residents. Following a settling in period, an assessment is completed to identify each resident's emotional care needs and an individualised care plan is developed and reviewed on an ongoing basis. Staff described strategies used to support residents during the transition period and report any concerns with changes to the residents' emotional status to the shift supervisor. Residents and their representatives have access to the home's pastoral care provider if required, and a number of religious personnel visit the home on a regular basis.

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

Team's findings
The home meets this expected outcome

Residents reported they are satisfied with the assistance provided by the home to maintain and support each resident's independence. Residents' abilities and wishes are assessed on moving to the home and a care plan is developed to ensure residents are able to make choices that promote independence. Staff reported they encourage and support residents to maintain independence through social and therapy activities to maintain friendships within the home and community. Relatives and friends are encouraged to visit the home and participate in activities. Several residents undertake group outings or independent outings with the family and friends.

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 reported staff are respectful and each resident's right to privacy, dignity and confidentiality is respected. Residents' confidential information is stored securely and information is only accessible to authorised staff. The home has single rooms with ensuites

and we observed residents' doors were closed when staff were attending to their personal care. Residents' cultural needs are taken into account when planning of care is undertaken. Staff were observed interacting with residents in a respectful and courteous manner and were able to describe appropriate measures to ensure each resident's right to privacy, dignity and confidentiality are maintained.

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 reported they are encouraged and supported to participate in a wide range of interests and activities. Residents reported they are consulted about past and current interests. An activity and social history profile is completed for each resident on moving to the home to identify each resident's interests, and a care plan is completed. A range of internal and external activities are developed and incorporated in the home's activity program and includes activities for residents with cognitive, sensory and physical impairment. The activity planner is displayed around the home. Staff remind residents individually of the daily activities. Therapy staff record resident attendance and participation at each activity. Statistics are reviewed on a regular basis by therapy staff and in consultation with the residents to ensure activities remain appropriate. Staff reported how they assist residents to attend and participate in activities.

3.8 Cultural and spiritual life

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

Team's findings

The home meets this expected outcome

Residents confirmed they are satisfied the home values and fosters residents' individual interests, customs, beliefs and cultural and ethnic backgrounds. They reported they are consulted about their beliefs. Events of importance are celebrated including Anzac Day, Australia Day, Christmas, Easter and other days of significance. Resident's individual interests, including customs and beliefs are identified on moving to the home and included in the resident's care plan. Religious personnel and community visitors attend the home on a regular basis. Staff reported they use the resident's care plan to gain an understanding of the resident's cultural and spiritual practices.

3.9 Choice and decision-making

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

Team's findings

The home meets this expected outcome

Residents reported they are satisfied with the opportunities provided to enable them to exercise choice and make decisions about their lifestyle. They reported they are consulted during the care planning process and on an ongoing basis, have a choice of doctor, time they wish to attend to personal care and activities they wish to participate in. Internal complaint

mechanisms, care conferences and resident/representative meetings provide opportunities for residents and/or their representative to express their views. Staff reported the resident's choice not to attend activities is respected.

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

Team's findings
The home meets this expected outcome

Residents reported they feel secure in their tenure in this home and understand their rights and responsibilities. Information regarding the internal and external complaints and advocacy services, security of tenure and changes to care needs are services are outlined in the residents' agreement and residents' information pack. The Charter of residents' rights and responsibilities is displayed at the home. Consultation with the resident and/or their representative is undertaken prior to room changes within the home and residents are advised of changes to their care needs and services.

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

Examples of recent or current improvement activities related to Standard 4 are described below.

● Following the increase in worker compensation claims the organisation identified the need to support staff during the process of recovery and monitor return to work programs. In response, the organisation has recruited an occupational safety and health consultant. Management reported that staff are supported in early diagnosis and access to general practitioners and the monitoring of return to work programs has ensured staff safety.

● The organisation identified the need to review the fire training provision. As a result the occupational safety and health consultant facilitates practical fire training. Training resources purchased includes DVD's and a fire fighting simulator with an attached extinguisher. Staff demonstrated how the simulator is used to provide staff with experiential exercises in attending to a fire. The evaluation of this initiative will be carried out later in the year.

● The home is currently undertaking a refurbishment program including installation of air conditioner units, décor throughout, carpet replacement with hospital grade floor covering and renewed window furnishings. Feedback from all interviews shows the work carried out so far has enhanced the working and living environment. Management advised the refurbishment will extend to residents rooms, and completion of external areas.

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

There are systems and processes to identify and ensure ongoing regulatory compliance in relation to the physical environment and safe systems. Staff reported they receive mandatory training in fire and emergency procedures, manual handling and infection control. The home has regular fire safety checks and a food safety program in place. External contractors are provided with contracts that outline obligations and responsibilities. There are reporting mechanisms for accidents, incidents and hazards. Staff are provided with personal protective equipment. Material safety data sheets are kept where chemicals are stored, and infection control guidelines are available in the event of an outbreak.

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

See Education and staff development in Standard 1 – Management systems, staffing and organisational development for an overview of the education and staff development system.

Examples of education and staff development undertaken relevant to Standard 4 are listed below.

- Chemical training

- Fire and safety

- Food safe

- Infection control

- Manual handing

- Occupational health and safety.

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

Residents and representatives reported they are encouraged to personalise their rooms and are satisfied with the living environment. The home has systems and processes to assist in providing residents with a safe and comfortable environment consistent with residents care needs. Residents are accommodated in single rooms with ensuite and have safe access to internal and external communal areas that are used for social and therapy activities. There is clear and consistent signage around the home. Regular inspections and maintenance of the home and hazard and incident reporting mechanisms contribute to ensuring the safety and comfort of residents. There is a restraint minimisation policy and reporting protocols regarding unplanned absences of residents. Staff interviewed described appropriate procedures to ensure the safety and comfort of residents.

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

A collaborative and participatory approach in providing a safe working environment ensures that all residents live and staff work in a safe environment. Management identify issues through incident and hazard reports, risk assessments, suggestions for improvement and audits. Management review and action issues and if identified as high risk, automatically escalate them for immediate action. A corrective and preventative maintenance program ensures that equipment is maintained and fit for their intended purpose. Staff attend training

and demonstrated an understanding of safe work practices related to occupational health and safety.

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

Team's findings
The home meets this expected outcome

Staff and residents reported awareness of emergency procedures and actions they are to take in the event of a fire. There are processes to provide an environment and safe systems of work that minimise fire, security and emergency risks. Procedures for fire safety and other emergencies such as bomb threats and armed hold-ups are readily accessible, along with evacuation maps, and a residents' list including transfer requirements. The home has specialised contractors to conduct scheduled monitoring and servicing of all components of the fire and emergency system. Emergency exits are clearly marked, well-lit and free from obstruction. All staff receives education in all aspects of managing fire and emergencies which includes the safe handling and storage of chemicals.

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 infection control program to effectively identify, contain and prevent infection. Measures that contribute to the effectiveness of the program include the provision of personal protective equipment, a vaccination program, hand washing facilities, a food safety program, waste management and pest control measures. Clinical staff monitor infections are as they occur and data analyses of clinical indicators are reported. Staff are provided with training on infection control, and reported knowledge of the principles of minimising the risk of infection. Residents and representatives reported satisfaction with the actions taken by staff to control the risk of cross-infection.

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

Residents and representatives reported their satisfaction with the hospitality services provided by the home. The home provides catering, cleaning and laundry services to assist residents and enhance their quality of life. The catering service provides a seasonal four-weekly rotating menu and a range of meal choices are available. Catering staff have relevant resident information identifying specific nutrition and hydration requirements, food allergies and preferences. Residents can provide feedback on meal quality and service at resident meetings, or via feedback forms and surveys. Cleaning staff use colour-coded equipment and follow documented cleaning schedules. Laundry service of personal items and linen is carried out within the home and adequate linen stock levels are maintained.