



Aged Care
Standards and Accreditation Agency Ltd

Terrey Hills Nursing Home

RACS ID 2555

42 Booralie Road

TERREY HILLS NSW 2084

Approved provider: Thompson Health Care 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 27 May 2015.

We made our decision on 2 April 2012.

The audit was conducted on 6 March 2012 to 7 March 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

Terrey Hills Nursing Home 2555

Approved provider: Thompson Health Care Pty Ltd

Introduction

This is the report of a re-accreditation audit from 6 March 2012 to 7 March 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 6 March 2012 to 7 March 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:	Sue Kelly
Team member/s:	Rodney Offner

Approved provider details

Approved provider:	Thompson Health Care Pty Ltd
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Details of home

Name of home:	Terrey Hills Nursing Home
RACS ID:	2555

Total number of allocated places:	53
Number of residents during audit:	51
Number of high care residents during audit:	51
Special needs catered for:	n/a

Street/PO Box:	42 Booralie Road	State:	NSW
City/Town:	TERREY HILLS	Postcode:	2084
Phone number:	02 9450 1719	Facsimile:	02 9450 1227
E-mail address:	thnt@thc.net.au		

Audit trail

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

Interviews

	Number		Number
Director of Nursing	1	Residents/representatives	7
Deputy Director of Nursing	1	Representatives	4
Registered nurses	3	Visiting clinical psychologist	1
Care staff	8	Laundry staff	1
Physiotherapist	1	Cleaning staff	2
Catering staff	4	Maintenance staff	1
Education coordinator Thompson Health Care	1	Employment relations manager Thompson Health Care	1

Sampled documents

	Number		Number
Residents' files	15	Medication charts	15
Summary/quick reference care plans	4	Personnel files	6
Suggestions, comments, complaints and compliments	25		

Other documents reviewed

The team also reviewed:

- Activity program
- Activity program participant evaluations
- Activity record forms
- Activity survey results
- Admission assessment guidelines
- Admission welcome pack
- Annual education calendar
- Committee meeting schedule 2012
- Complaints register
- Continuous quality improvement plan
- Contractor agreements and information folder
- Contractor master list
- Corporate organisation chart
- Emergency kit for use in the event of an emergency
- Emergency procedure manual
- Equipment and supply storage areas
- Executive services manual
- External service provider contracts
- External service provider register
- Fire safety certificate
- Human resource manual
- Infection control audits, education and monthly reports

- Infection control manual
- Maintenance request books
- Management and quality improvement committee minutes
- Mandatory reporting folder
- Material safety data sheets
- Medical practitioner agreements and annual registrations
- Medication storage
- Meeting minutes
- Menu on display
- Monthly planner activities
- Moving on audit results
- Newsletters
- NSW Food Authority licence
- NSW Food Authority reports
- Orientation program manual
- Pastoral care and church service information
- Policies and procedures
- Position descriptions
- Pre and on admission checklist
- Preventative and reactive maintenance logs
- Preventative maintenance program
- Quality management system
- Register of nurse registration board practicing certificates
- Resident agreement
- Resident entry information and admission pack
- Resident handbook
- Resident survey results
- Self assessment – Terrey Hills Nursing Home
- Service contractor list
- Social and cultural resource folder
- Specimen signatures and initials
- Staff allocation sheets
- Staff and volunteer police check reports
- Staff application pack
- Staff appraisal schedule
- Staff competency assessments
- Staff handbook
- Staff rosters
- Staff survey results
- Staff training attendance records
- Staff welcome pack
- Temperature records for medication refrigerator and refrigerator for resident food and drinks
- Thermostatic mixing valve results
- Volunteer confidentiality agreement
- Workplace health and safety and injury management manual

Observations

The team observed the following:

- Activities in progress
- Archive room
- Charter of residents' rights and responsibilities
- Cleaning being undertaken
- Comments, compliments and complaint feedback forms
- Computer network system
- Equipment and supply storage areas including chemicals, linen supplies, clinical supplies, continence aids
- Fire panel and fire equipment
- Food preparation
- Hand sanitisers and personal protective equipment located throughout home
- Handwashing facilities
- Interactions between staff, residents and visitors
- Laundry and laundry trolleys
- Laundry being washed and folded
- Living environment
- Lunch time meal service
- Maintenance being undertaken within the home in a safe manner
- Medication round
- Menu displayed
- Mobility aids in use and available for use as well as pressure relieving equipment
- Noticeboards for residents, visitors and staff
- Nurses' stations
- Philosophy displayed
- Staff amenities
- Suggestion box
- Treatment rooms
- Utility rooms and waste disposal

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 utilises a continuous improvement system which incorporates a number of activities including a quality management system and the home's overall performance review mechanism. Improvements are identified through a number of avenues including: residents and relatives meetings, staff meetings, audits, surveys, comments, complaints and suggestions, accidents and incidents and staff performance appraisals. Part of this system also includes ensuring compliance with the Accreditation Standards through undertaking the audit program which covers a significant number of expected outcomes. The home uses these indicators along with other input from stakeholders to identify opportunities for improvement and to develop improvement plans. Residents, representatives and staff report that they have opportunities and are encouraged to participate in the home's continuous improvement activities through providing feedback and making suggestions for improvement through the home's continuous improvement feedback mechanisms.

Examples of recent improvements in relation to Accreditation Standard One include:

- Management have introduced a computerised care documentation system and staff have received training in this system with the result being that a more effective and efficient resident information system is in operation within the home.
- Management identified that due to one section of the home being re-developed there was a need to review staffing levels as occupancy rates had decreased significantly and as a result new staffing levels and working hours have been adjusted based on residents' care needs.
- Management identified that there was a need to implement an improved reporting system to ensure that all staff had undertaken required mandatory training and as a result an education matrix was developed which clearly indicates which staff have successfully completed required training and which staff have not.
- The organisation identified that there was need to have staff uniforms re-designed which included having the names of staff on their uniforms which has resulted in residents, visitors and other staff members being able to readily identify who the staff members are and address them appropriately by name.
- Management identified that there was a need to make the home's feedback form more user friendly especially with one section of the home being re-developed and as such a new feedback form was developed.

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 that identify and ensure compliance with changes in relevant legislation, professional standards and guidelines. The organisation accesses relevant information through subscription to legislative update services, from government departments, attendance at professional meetings and seminars and accessing the internet and other sources. Management communicate changes to staff by memoranda, staff meetings and staff education sessions. Compliance with regulatory requirements is monitored through audits, surveys, competency assessments, staff appraisals and observations by management.

Examples of regulatory compliance relating to Accreditation Standard One include:

- The organisation conducts reviews of all policy and procedure manuals on a regular basis to ensure that all relevant legislation, regulatory requirements, professional standards and guidelines are appropriately documented.
- Procedures for police checks for staff, visitors and contractors are in place. Interviews and documentation confirm that these have been completed.
- The home has a system to ensure nurses’ registrations are current.
- The home has a system whereby external contractors’ registrations and insurances are checked to ensure they are current.

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 systems that ensure staff have appropriate knowledge and skills to perform their roles. A calendar of education sessions is developed which includes mandatory training sessions and education considered of interest or importance to various staff members. Learning packages are provided some of which are competency based. Education and training requirements are identified through staff performance appraisals, internal audits and staff requests. Management supports staff to attend internal and external courses. Participation records are maintained and reviewed by management when planning future education program schedules. Staff interviews indicate that they are provided with training as part of the home’s orientation process and have access to on-going education.

Examples of education and staff development relating to Accreditation Standard One include:

- The home regularly undertakes orientation sessions for new staff.
- There is a calendar of education sessions which has been developed through a consultative needs analysis between managers and staff.
- Management and staff receive training on topic areas such as elder abuse, employment relations, accreditation, teamwork and the future of aged care.

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

Information about internal and external complaints' mechanisms is provided to residents and representatives on entry to the home through the resident handbook, in the resident agreement and as part of residents' orientation to the home. Information is also communicated on a regular basis through resident and relative meetings and information displayed throughout the home. Staff are made aware of these mechanisms through policies and procedures and staff meetings. Feedback forms and a suggestion box are available in the home. Brochures about the external complaints' mechanism are also displayed. Staff interviews demonstrate they have knowledge and understanding of the complaint handling process and of their role in assisting residents to raise issues if necessary. Residents and representatives interviewed are aware of the home's comment and complaint process. Review of comments and complaints as well as other relevant documents indicates that issues raised are responded to in an effective and 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's philosophy, vision and values are documented and on display in the home. This information is also available in a number of documents including the resident handbooks and other publications by the home. The home's philosophy, vision and values form a part of the staff orientation program, regular staff sessions and are discussed at staff meetings.

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 that aims to ensure there are enough staff with appropriate skills and qualifications to meet residents' care and lifestyle needs. Management reviews the home's staffing requirements to ensure sufficiency of human resources. Management report that factors considered to ensure the adequacy of the home's staffing levels and skill mix include, but are not limited to: residents' care and lifestyle needs, quality performance indicators, feedback from staff, residents and representatives, the layout of the home, re-development or refurbishment activities and workplace health and safety requirements. The home has a flexible rostering system that is responsive to the changes in residents' needs. There are systems in place for staff orientation, education and performance management. Recruitment policies and procedures ensure that the best possible match between candidates and roles are achieved. Job descriptions, selection criteria and reference checks are used by management to increase the effectiveness of the process. Staff are provided with position descriptions and duty lists as necessary. Performance appraisals are conducted

and results are fed into the home's human resource management system. Observations, documentation reviews and resident and representative interviews suggest that there are sufficient staff with the appropriate knowledge and skills to perform their roles effectively. Residents and their representatives are of the opinion that there are adequate levels of staff, and that staff respond to their needs in an acceptable and timely manner.

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 stocks of goods and equipment that support quality service delivery. Specific staff are designated for maintaining adequate stock levels and ensuring such stock meets the required quality standards. The home has systems in place to guarantee the integrity of the stock, and stock is rotated as required. Equipment needs are identified through staff requests, audits, asset replacement and acquisition programs. The home has preventative and reactive maintenance programs. Maintenance request log books are maintained and action is taken in an efficient and effective manner to deal with any requests or preventative maintenance tasks. Emergency maintenance requirements are dealt with in a timely manner. Staff confirm their satisfaction with the amount of supplies and quality of the equipment available to ensure the provision of quality care and services.

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 an information management system that provides stakeholders with information relevant to them. The home's communication system includes: meetings, resident and staff handbooks, intranet, newsletters, policies and procedures, noticeboards, orientation and training sessions, staff handover meetings, a clinical documentation system and managements' open door policy. The home utilises these communication channels to disseminate information and to collect feedback. The information management system governs the collection, processing, accessing, reporting, storage, archiving and destruction of information and records. The home has policies covering relevant regulatory requirements for management of information and records including confidentiality and privacy matters. The home has a computer based electronic care documentation system and access to this system is password protected. Backup of the home's computer based information occurs daily by the organisation's corporate services information technology system. Access to confidential information and records is controlled and limited to authorised personnel. Observations demonstrate that resident and staff files are stored securely. Staff confirm they receive and have access to relevant information that allows them to perform their roles effectively and residents and representatives stated that they are kept well informed regarding care and all other matters that are appropriate to them.

1.9 External services

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

Team's findings

The home meets this expected outcome

The home's externally sourced services are arranged primarily through the organisation's property services group by way of specified contract agreements. There is a designated process whereby quality criteria in relation to services to be supplied must be satisfied and reference, insurance and police checks are made. All major contracts are reviewed regularly through feedback by the home to the organisation's property services group. Contractor non-performance is recorded and actioned immediately when urgent or at the time of reviewing the contract. To enable staff to contact an appropriate contractor a list is maintained at the home and updated as required and staff informed of appropriate matters relating to provision of services by external contract suppliers.

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 about the home's continuous improvement system.

Examples of specific improvements relating to Accreditation Standard Two include:

- Some staff identified that there was a need to deal more effectively with residents who have challenging behaviours and as a result management organised additional education related to behaviour management and a number of case conferences were held. The result being that staff gained more knowledge and skills on how to deal effectively with those residents displaying challenging behaviours.
- Management identified that there was a need to update registered nurses' knowledge concerning wound management and as a result a professional education day on effective wound management was arranged with registered nurses attending. The result of this professional education day was that registered nurses are now more skilled and confident to undertake effective wound management.
- Management identified that information related to resident case conferences were not always being transferred into the home's electronic care documentation system and as a result some important care information was not always being recorded. To address this issue management has now put in place a process to ensure all case conferencing information is transcribed into progress notes in the electronic care documentation system.
- Through observation management and staff identified the need to raise awareness of the importance of residents' oral hygiene and as a result the home arranged for appropriate oral hygiene posters to put in selected residents' bathrooms to prompt staff and residents to ensure appropriate oral and dental health is maintained.

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 details on the home's system to identify and ensure compliance with all relevant legislation, regulatory requirements, and professional standards and guidelines.

Examples of regulatory compliance relating to Accreditation Standard Two include:

- The home monitors the currency of nurse registrations.

- The home has a policy, procedure and education in place regarding elder abuse and maintains a mandatory reporting register.

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 details of the home’s systems for ensuring that management and staff have appropriate knowledge and skills to perform their roles effectively.

Examples of education relating to Accreditation Standard two include but are not limited to:

- medication management,
- wound care,
- managing challenging behaviours,
- specialised nursing care needs,
- therapeutic massage,
- continence management,
- pain identification and management.

2.4 Clinical care

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

Team’s findings

The home meets this expected outcome

Terrey Hills Nursing Home has systems in place to ensure residents receive clinical care based on their assessed needs. Resident clinical care is regularly monitored and evaluated, documented and communicated to relevant staff. Initial assessments and interviews with residents/representatives are used to develop the care plan summary and subsequently the resident care plan, which is reviewed regularly and updated as required when care needs change. Each resident’s general health and care needs are monitored through clinical observations, monitoring charts, re-assessments, and an accident/ incident reporting system. If a change is noted the resident is more closely monitored, the resident’s general practitioner and representatives are notified. At least annually, a comprehensive reassessment is conducted for each resident to ensure the care plan is consistent with their care needs. Review of documentation and interviews with care staff confirm these systems are effective. Residents/representatives interviewed by the team expressed satisfaction with the care that is provided and relatives advise they are involved in care decisions and informed if resident care needs change. Comments such as “staff are wonderful” and “staff are brilliant” were received by the team.

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

There are systems in place at Terrey Hills Nursing Home to ensure residents’ specialised nursing care needs are identified and met by appropriately qualified nursing staff. Registered nurses oversee and monitor care. Specialised care needs available include wound management, enteral feeding, oxygen therapy, catheters and pain management. Medical practitioners provide guidelines to ensure residents’ diabetes is well managed. The home has access to a range of health professionals to ensure the care provided meets the residents’ specialised care needs. Staff reported they regularly liaise with other specialist services including continence care, palliative care and the dementia services. This was confirmed during documentation review and interviews with residents/representatives.

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

A range of health professionals and allied health specialists are available to assist staff to meet the residents’ needs and preferences. Referrals are arranged in consultation with residents and representatives, medical officers and in accordance with residents’ health needs. Examples of the types of resident referrals include medical, palliative care, dietician, podiatry, speech pathologists, hearing, optometry and dental services. Staff demonstrated a comprehensive understanding of the residents’ health needs and preferences. Residents/representatives interviewed were very satisfied with the arrangements for referral to health specialists and gave examples of support provided to attend appointments and have reviews undertaken.

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

Terrey Hills Nursing Home is able to demonstrate there is a management system which ensures medications are administered in a safe and correct manner. When a resident moves into the home arrangements are made for a general practitioner to review them and order medications as required. Medication is stored securely, orders are current and reviewed regularly by a medical officer. An external pharmacist conducts audits of residents’ medication charts and provides information to management. Weekly monitoring of medications occurs and regular medication audits are undertaken. A review of medication charts and signing sheets indicates they are appropriately documented, contain relevant and correct information including the identification of residents using up to date photographs. Medication incidents are discussed at the professional practice meetings and medication advisory committee meetings. They are also reviewed, analysed and audited by the deputy director of nursing on a regular basis. Care staff advise they have received education and undergo competency assessments. Residents/representatives interviewed by the team advise they are satisfied with the care provided including the management of medication.

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

Documentation review confirms the systems in place ensure residents are as free as possible from pain. The home has a range of pain assessment strategies to assist staff in identifying residents’ pain levels. Pharmacological and non-pharmacological interventions are used to control pain, for example, medications, massage, aromatherapy, heat therapy repositioning, pressure relieving devices, and exercise. Staff monitor residents’ responses to pain relief by documenting the effect of pain relief strategies in the progress notes. This assists the team to determine the effectiveness of the pain management provided. Residents are referred to their medical officer for advice and treatment when required. Additional expertise is obtained from the local palliative care team when needed. Staff are provided with education on pain management strategies on a regular basis. Residents/representatives confirm that pain management strategies used by the home are effective.

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

Terrey Hills Nursing Home has a system in place to ensure that the dignity and comfort of residents who are terminally ill is maintained. Staff advised the team that the local community palliative care team provides assistance as required, with the care of residents. Information is obtained at time of admission and/or at an appropriate time thereafter about each resident’s physical, emotional and spiritual palliative care needs and preferences. The documentation reviewed by the team confirmed a range of interventions are used by the home to provide palliative care to residents. If a resident is at end of life stage, their family is able to visit at any time and staff provide the resident and their family with emotional support. The registered nurses and nursing assistants interviewed described a range of strategies they employ to ensure the comfort and dignity of residents receiving palliative care. Residents/representatives interviewed expressed satisfaction with the manner in which the home identifies end of life wishes and manages the palliative care 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

The home’s system to ensure residents have adequate nutrition and hydration includes mini nutritional screening on entry to the home as well as a comprehensive assessment which includes resident likes and dislikes, cultural preferences and their ability to eat and drink. Catering staff are provided with this information in a timely manner. Nutrition and hydration care plans are developed, reviewed and updated on a regular basis to reflect the needs of the resident. Residents’ weights are recorded monthly, or if there is a change in the resident’s care needs. Appropriate supplements are provided to residents based on assessments by the registered nurses following discussions with the residents’ medical

practitioner and the dietician. These supplements are monitored by the registered nurses to ensure they are adequate. The monitoring includes pre and post program weights. Referral to a dietician and speech pathologist occur as required. Staff interviewed by the team indicated that they understand residents' nutrition and hydration needs. Staff were observed providing residents with assistance at meal times. Residents/representatives stated there is sufficient quantity and variety of food and drinks readily available. The residents have a choice of their meal preference at all meals. Representatives also commented that they eat at the home when they are there at meal times if they choose to do this.

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

Initial and ongoing assessments, care planning and regular evaluation of residents ensures the home maintains residents' skin integrity. A review of the documentation indicated the use of various strategies to facilitate skin care and ensure skin integrity is consistent with the residents' general health. The team was advised these strategies include the use of various products, repositioning and skin protectors. Follow up and referral is arranged to the medical officer, podiatrist or dermatologist as required. The team observed a range of dressing products and aids available to maintain and promote skin integrity. Staff advised that these products and aids are available at all times. Strategies are in place to relieve pressure, reduce dry skin and promote skin integrity. The home monitors and trends accidents and incidents including wound infections and skin tears. Residents/representatives interviewed stated that they are satisfied with the skin care of residents.

2.12 Continence management

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

Team's findings

The home meets this expected outcome

All residents/representatives and staff interviewed by the team indicated that residents' continence is managed in an effective and dignified manner. Residents' continence is managed effectively through initial and focus continence assessments, care planning and the provision of individual toileting programs, bowel management programs and continence products. Staff prompt and assist residents with toileting, use of continence aids and catheter/stoma care as needed. The effectiveness of interventions relating to continence management is evaluated on a regular basis and care plans are updated to reflect current needs and preferences. There is an allocated staff member who ensures an adequate supply of continence aids is maintained at all times. Terrey Hills Nursing Home has an effective system for the management of bowel habit recording and management and assessment of residents' changing urinary requirements. The home was noted to be odour free.

2.13 Behavioural management

This expected outcome requires that “the needs of residents with challenging behaviours are managed effectively”.

Team’s findings

The home meets this expected outcome

The home has systems in place to identify, assess and manage residents with challenging behaviours including a secure section for residents who may wander. Progress notes, behaviour monitoring charts, assessments and care plans are used to record challenging behaviours by residents. Staff interviews confirm familiarity with a variety of techniques to manage challenging behaviours. The team was advised by staff that one significant strategy they use for residents with challenging behaviour is hand massage using essential oils. Staff commented that this strategy has a calming effect on all current residents who display challenging behaviours. Staff advised the team that training is provided regularly and changes in a resident’s behaviour is communicated during handover. Behaviour incidents are included in the clinical indicator system and regularly reviewed, analysed and audited. The team was advised that no restraint is currently used at Terrey Hills Nursing Home. If restraint is used, this is with the express permission of families and medical officers and their use is monitored closely. Residents/representatives commented that they are satisfied with the care given by staff when managing residents who display 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

The home demonstrates optimum levels of mobility and dexterity are achieved for residents of the home. Residents’ mobility needs are assessed on entry to the home and are reviewed based on individual resident’s care needs and include falls risk. Manual handling instruction cards are readily available in resident rooms and are updated regularly. A physiotherapist attends the home two days a week and assesses the mobility of individual residents. The care staff work closely with the physiotherapist and follow the documented care plans. The physiotherapist provides an advanced exercise and falls minimisation exercise program twice weekly. The team reviewed documentation which confirmed that residents are assessed by the physiotherapist on entry to the home. Following this review, strategies are implemented and regularly evaluated and resident falls are monitored and residents reviewed by the physiotherapist as required. The team observed residents using mobility aids and handrails throughout the home. The team was told by the staff that residents are encouraged to mobilise safely and independently where possible. Ongoing staff education in manual handling of residents is provided to increase both resident and staff safety. Residents/representatives interviewed stated that residents are involved in the exercise program and they are satisfied with the programs available.

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 oral and dental health of residents’ is maintained. Interviews with residents and resident representatives confirmed that they are able to access dental health specialists and that care

staff assist with their daily dental care. Residents are assessed on admission by a registered nurse and the residents' needs are documented on the nursing care plan. The home will arrange for residents with dental problems to be assessed and managed by a local dentist or residents' families can arrange dental appointments. Care staff were able to describe oral and dental care and how they may prompt or assist residents with their oral hygiene.

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 needs and losses are assessed and reviewed regularly according to the documentation reviewed as well as staff interviews. Residents who are identified as having specific sensory needs, such as requiring hearing devices, have management strategies documented in their care plan and in progress notes. Staff interviewed identify sensory strategies offered to residents including aromatherapy, walks in the garden, audio books, large print books and ensuring residents' hearing aids are clean and being used. The home has a process for referring and assisting residents who require review or assessment to appropriate specialists including optometrists, audiologists, and speech pathologist. Residents interviewed by the team stated they receive assistance with care and maintenance of their glasses and hearing aids from staff.

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 and resident representatives interviewed by the team stated that they are able to sleep well and if they have any difficulties sleeping, the night staff assist them to go to sleep. On entry to the home, the sleep patterns of individual residents are assessed by the night staff. Interventions used to assist residents in sleeping are documented in the resident's nursing care plan. Alternatives to promoting sleep rather than using medication is encouraged. The alternatives used include massage, use of aromatherapy creams, positioning for comfort, pain relief, reduced noise levels and adjustment of the heating, cooling and lighting of the environment. Sedation is used according to medical practitioners' orders.

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 the details of the home’s continuous improvement system.

Examples of continuous improvement relating to Accreditation Standard Three include:

- Management identified the need to notify staff and visitors when a resident is receiving treatments so they do not enter residents’ rooms when it is considered not appropriate to. As a result two sided signs on door knobs have been introduced saying ‘welcome’ or ‘treatment in progress’ and staff have received education on using the signs appropriately. The feedback on using these signs is that there are now a lot fewer interruptions when staff are treating residents on a one on one basis and hence residents’ need for privacy is able to be respected.
- Staff identified the need to provide a resident from Poland with reading material in the Polish language and as a result reading material was sourced from the Sydney South West Area’s Multi-lingual Communication Resource Centre.
- In accordance with the Department of Health and Ageing advice the home has ceased taking residents on bus outings during those times when Sydney, especially in the summer months is experiencing extreme heat.

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 details on the home’s system to identify and ensure compliance with all relevant legislation, regulatory requirements, and professional standards and guidelines.

Examples of regulatory compliance relating to Accreditation Standard Three include:

- The charter of residents’ rights and responsibilities is displayed in the home.
- The resident agreement outlines security of tenure and is based on applicable legislation.
- Department of Health and Aged Care Complaint Scheme information brochures are available in the home’s entrance foyer.

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 details of the home's systems for ensuring that management and staff have appropriate knowledge and skills to perform their roles effectively. Interviews and documentation reviews demonstrate that staff have knowledge and skills relating to resident lifestyle.

Examples of education related to Accreditation Standard Three include:

- leisure, interests and activities,
- maintaining dignity,
- residents' rights and responsibilities.

3.4 Emotional support

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

Team's findings

The home meets this expected outcome

The home has effective systems to ensure that each resident receives initial and ongoing emotional support. This includes orientation to the home, staff and services for new residents and their families; resident meetings; involvement of volunteers in the activity program and a quarterly newsletter. Information is gathered from residents and their representatives to identify residents' previous history, backgrounds and current lifestyle preferences to assist in settling into the home and ongoing care planning. Residents are encouraged to personalise their rooms and visitors including pets are encouraged. The team noted that during those times when residents were receiving one on one massages or reflexology treatments with staff members then this time was often conducive for staff to provide emotional support to residents. Residents expressed their satisfaction with how staff assists them in adjusting to life at the home and the ongoing support they receive.

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 ensures residents are assisted to maintain maximum independence, friendships and participate in all aspects of community life within and outside the home. There is a range of individual and general strategies implemented to promote independence that includes mobility and activities programs and mobility equipment for resident use. Community visitors, volunteers and entertainers are encouraged to visit the home to interact and participate in activities. Residents are assisted to maintain their civic duties by the home assisting residents to participate in voting and elections. Documentation, observation of staff practice and resident interviews confirms residents are actively encouraged to maintain independence.

3.6 Privacy and dignity

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

Team's findings

The home meets this expected outcome

The home has systems to ensure that individual resident's right to privacy, dignity and confidentiality is respected. All residents advised they are satisfied with the approach taken by the home to manage their privacy and dignity. Residents and or their representatives are asked to sign consent forms to distinguish different aspects of living in the home that may impose on their right to privacy and confidentiality. For example disclosure of clinical and personal information, display of photographs and recording of social events, disclosure of age and birthday celebrations. Residents' information is stored securely and staff handovers are discussed in private. Staff interviewed and observation confirmed that staff practices enhance residents' privacy through the use of privacy screens, knocking on closed doors and addressing residents by their preferred name. Privacy and dignity of residents is further enhanced through staff education and staff signing a confidentiality agreement.

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 has systems and encourages and supports residents to participate in a wide range of interests and activities. Residents' specific needs, interests and preferences are assessed on moving into the home and on an ongoing basis. The home offers a comprehensive activities program seven days a week provided by a team of recreational activity officers with the assistance of volunteers. Ongoing evaluation of the activities program ensures that the group and individual programs provided to residents are appropriate and reflect any change in residents' conditions. Residents and visitors are informed of daily programs through display of the activities program on noticeboards and activities are discussed at the residents' meetings. Residents are invited to make suggestions and have input into the activities program. Residents are given the choice of whether or not to take part in activities. Current activities include weekly bus trips, music and singing, visiting pets, brain teasers and ball game activities. The home has a library with large print books and also utilises the services of the Terry Hills library mobile book service. A volunteer attends the home to assist residents with undertaking leisure interests that are of interest to them. Residents confirmed they are satisfied with the activities and interactions provided to them by staff and volunteers.

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 that residents' interests, customs, beliefs, cultural and ethnic backgrounds are recognised, valued and fostered. Cultural and spiritual needs are assessed when a resident moves into the home. Care plans are initiated to reflect the

resident's needs and are reviewed regularly. Clergy from different denominations visit the home regularly and there is a church service held weekly. Residents are assisted and encouraged to attend church services with family and friends within the community. Staff confirmed they have a variety of resources available to improve their knowledge of residents' different cultural backgrounds and language prompts. Recreational activity officers plan celebrations days acknowledging the residents' different cultural backgrounds and have included celebration days for Germany and Holland. Other days of cultural and religious significance celebrated include Australia Day, ANZAC Day, Melbourne Cup, a variety of sporting events, Easter and Christmas. Residents advised they are satisfied with the support provided to enable them to maintain their cultural and spiritual lives.

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 can demonstrate that each resident and/or representative participates in decisions about the services of the home and is able to exercise choice and control over their lifestyle through consultation around their individual needs and preferences. Residents can choose or decline to participate in the activities at the home while staff described their flexibility in meeting the daily care needs of residents. Residents advised they are encouraged to participate in decisions about their care and services required to meet their individual needs. Processes include one-on-one interviews, discussions with staff and management, attending meetings, completing surveys and other feedback mechanisms. The home undertakes case conferencing for residents and representatives. Management have an open door policy that results in continuous and timely interaction between the management team, residents and representatives. Residents are satisfied with the support of the home relative to their choice and decision making processes.

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

The home has processes to inform prospective and new residents and representatives of the services provided by the home and the residents' rights and responsibilities. New residents and/or their representatives are provided with comprehensive information about their rights and responsibilities prior to the resident moving into the home. This information is explained and a resident agreement is offered to each resident and/or their representative to formalise occupancy arrangements. The agreement includes information for residents about care and services provided, rights and responsibilities, complaints handling, fees and charges, security of tenure and the process for the termination of the agreement. Residents advised they are satisfied with the information provided relating to their security of tenure and their rights and responsibilities.

Standard 4 – Physical environment and safe systems

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

4.1 Continuous improvement

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

Team’s findings

The home meets this expected outcome

Refer to Expected Outcome 1.1 Continuous improvement for further information relating to the home’s continuous improvement system.

Examples of recent improvements in relation to Accreditation Standard Four include:

- Management identified the need to develop a new policy and procedure manual for cleaning services and this manual has now been completed and staff are following the policies and procedures detailed in the new manual with the result that cleaning services meet and exceed residents’ expectations.
- The home has undertaken a resident survey of food services provided including choices on the menu and as a result in October 2011 the menu was changed with the result that residents expressed a high level of satisfaction with the new menu and choices provided.
- To minimise fire, security and emergency risks the home has reviewed its emergency procedures and in particular its evacuation plans so that it reflects current changes as a result of the current building re-development. The result is that emergency procedures are more effective and the evacuation plans are easier for staff to follow.
- The home has introduced a new audit tool to monitor dust levels within the home caused by the current re-development of a wing of the home. The result is that additional cleaning is undertaken in those areas where there has been an increase of dust.

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 details on the home’s system to identify and ensure compliance with all relevant legislation, regulatory requirements, and professional standards and guidelines.

Examples of regulatory compliance relating to Accreditation Standard Four include:

- The home has a current NSW Food Authority licence and the food safety system has been audited by the NSW Food Authority.
- The home has a current fire safety statement displayed.
- The home provides material safety data sheets with stored and used chemicals.

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 details of the home's systems for ensuring that management and staff have appropriate knowledge and skills to perform their roles effectively

Examples of education relevant to Accreditation Standard four include but are not limited to:

- manual handling,
- infection control,
- fire safety training,
- safe food handling,
- emergency procedures,
- workplace health and safety,
- use of restraint,
- safe handling of chemicals.

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 provides a safe and comfortable environment consistent with residents' care needs. The home is a two storey building with single and two bedded rooms with en suites. Privacy screens are provided in the shared accommodation. There are well maintained gardens and comfortable lounge and smaller sitting areas. While not a designated secure unit the home has security systems with door and gate alarms. All rooms and bathrooms have call bells and there are hand rails to aid mobility in corridors. There are regular environmental inspections, planned preventative maintenance schedules and corrective actions. Residents/representatives interviewed were satisfied that the home provided a safe and comfortable 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

Terrey Hills Nursing Home has a comprehensive system to provide a safe working environment that meets regulatory requirements. The home discusses work health and safety (WHS) at the continuous quality improvement meetings. The team sighted evidence that management of WHS at the home consists of, conducting risk assessments, a system of

hazard reporting and compulsory education. The team also noted that a process is in place for capturing potential risks identified. The team observed staff using personal protective equipment such as gloves and aprons. Staff interviewed by the team were aware of the importance of WHS. They were also aware of the responsibilities of themselves and management in maintaining a safe working environment and were able to describe the hazard reporting system. Staff interviewed stated they felt that the home was a very safe place in which to work. The residents/representatives interviewed stated that they believed that Terrey Hills Nursing Home provides a safe environment for them.

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 established practices to provide an environment and safe systems of work that minimise fire, security and emergency risks and there are evening lock-up procedures. Monitoring and maintenance of all fire equipment is undertaken and reports provided. Fire equipment is located throughout the home and there is evidence that this is regularly serviced and tested. Fire evacuation plans and exit signs are located throughout the home. Fire safety and evacuation training is included in the staff orientation program and there are mandatory annual updates. There is a fire safety and emergency procedure manual and emergency flip charts are located throughout the home. Staff interviewed state that they are aware of and understand their responsibilities in the case of fire and other emergencies.

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 in place. There is an infection control surveillance and reporting system and infection control education for all staff. Data on infections are collected and analysed monthly, trend analysis is undertaken and actions to address deficiencies implemented. Regular environmental inspections are carried out. Staff practices observed by the assessment team are consistent with effective infection control including hand washing, the use of personal protective equipment/clothing and colour coded equipment in all areas. All staff interviewed demonstrated an understanding of, and commitment to, infection control principles and guidelines.

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

All residents/representatives interviewed expressed a high level of satisfaction with the catering, cleaning and laundry services provided.

Catering

The team observed meal service and noted that meals were attractively presented. Kitchen staff interviewed stated they enhance residents' quality of life by providing choice and variety of food. The team reviewed a four-week seasonal rotating menu which is assessed by a qualified dietician. A dietician consults with residents who require this service. There are documented systems in the kitchen to ensure residents' preferences are identified and interviews with residents confirmed they are consistently implemented. Food storage areas are well organised with foods correctly stored, labelled and dated. The team reviewed the latest report from the NSW Food Authority which indicated that the home complies with all requirements of safe food handling. All residents/representatives interviewed expressed a high level of satisfaction with the catering, services provided.

Cleaning

The residents' rooms and bathrooms, and all common areas and staff work areas were observed to be clean and odour free at all times during the visit. The residents' rooms are cleaned daily and are scheduled for regular spring-cleaning. Residents and their representatives interviewed stated the home is always very clean and tidy. All residents/representatives interviewed expressed a high level of satisfaction with the cleaning services provided.

Laundry

All linen and residents' clothing is laundered on site. There is a system for distribution of residents' clothes and providing linen to the residential areas. The team observed that resident clothing which is creased is ironed by the laundry staff. The team observed the dirty and clean laundry areas to be separate and operating in accordance with the home's infection control guidelines. Mops are washed on a separate cycle at the end of each day. Resident/representatives interviewed stated all clothes are laundered appropriately and returned to residents in a timely manner.