Regency Green Multi-Cultural Aged Care Service

RACS ID 6201
181 - 193 Days Road
REGENCY PARK SA 5010
Approved provider: UnitingCare Wesley Port Adelaide
Incorporated

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 23 July 2016.

We made our decision on 19 June 2013.

The audit was conducted on 20 May 2013 to 22 May 2013. 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

Regency Green Multi-Cultural Aged Care Service 6201

Approved provider: UnitingCare Wesley Port Adelaide Incorporated

Introduction

This is the report of a re-accreditation audit from 20 May 2013 to 22 May 2013 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 20 May 2013 to 22 May 2013.

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:	Cherie Davy
Team member:	Elizabeth McGrath

Approved provider details

Approved provider:	UnitingCare Wesley Port Adelaide Incorporated

Details of home

Name of home:	Regency Green Multi-Cultural Aged Care Service
RACS ID:	6201

Total number of allocated places:	80
Number of residents during audit:	78
Number of high care residents during audit:	47
Special needs catered for:	People of Aboriginal or Torres Strait descent People with dementia or related disorders People with culturally and linguistically diverse backgrounds

Street:	181 - 193 Days Road	State:	SA
City:	REGENCY PARK	Postcode:	5010
Phone number:	08 8345 3518	Facsimile:	08 8345 4350
E-mail address:	mwood@ucwpa.org.au		

Audit trail

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

Interviews

	Number		Number
Management	2	Residents/representatives	9
Corporate management	3	Hospitality staff	3
Clinical, care and lifestyle staff	8	Ancillary staff	2
Allied health	3	External hospitality manager	1
External corporate hospitality manager	1		

Sampled documents

	Number		Number
Residents' files, care plans and progress notes	6	Medication charts	5
Summary/quick reference care plans	4	Personnel files	5
Dietary detail forms	5	External contracts	5
Lifestyle care plans	5		

Other documents reviewed

The team also reviewed:
- Asbestos register
- Checklist for admissions
- Clinical incident data
- Compliments/Complaints log
- Continuous improvement documentation
- Contractors list
- Dietician menu report
- Education documentation
- Fire documentation, including Triennial Fire Safety Clearance Certificate
- Hospitality service documentation, including Food Safety Audit
- Human resources documentation
- Infection control documentation
- Maintenance documentation, including various records, audits and reports
- Management daily checklists
- Mobility/fire evacuation list
- Occupation health safety and welfare documentation
- Pest control documentation
- Policy and procedure manual
- Quality assurance schedule
- Resident handbook
- Resident newsletters
- Resident survey
- Residential agreement

- Various audits
- Various meeting minutes

Observations

The team observed the following:
- Activities in progress
- Charter of residents rights and responsibilities
- Confidential bin and secure file storage
- Contractors police check flowchart
- Corporate plan 2010-2013
- Educational DVD library
- Electronic messaging system
- Equipment and supply storage areas
- External complaints mechanisms
- Gastroenteritis kit
- Interactions between staff and residents
- Internal and external living environment
- Key pad system
- Leisure and lifestyle events on display
- Menu on display
- Secure archive room
- Storage of medications
- Suggestion box
- Various brochures on display (different languages)
- Visitors/contractors sign in/out register

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

Regency Green Multicultural Aged Care Facility is one of seven homes under the umbrella of UnitingCare Wesley Port Adelaide (UCWPA). The home works within the Service Excellence Framework which compliments the organisation Corporate Quality Framework. The management team coordinate the quality, planning and continuous improvement activities. Internal and external audits, resident and staff feedback and survey results, continuous improvement forms, something you should know forms, training and incident analysis are used to identify improvements. Improvement opportunities are logged onto the continuous improvement plan where they are monitored and analysed for trends each month. Evaluations of improvements are conducted through gathering staff and resident feedback, audits and monitoring incident data. Residents and staff interviewed are satisfied that the home actively pursues continuous improvement.

Improvement initiatives implemented by the home over the last 12 months in relation to Standard 1 Management systems, staffing and organisational development include:

- A new integrated electronic resident care plan and information technology (IT) system was implemented in December 2012 to improve communication, clinical and maintenance systems. Staff training was provided. Feedback from staff indicates the care plans are easier to read and has improved their knowledge about resident care needs. Staff report they feel more confident using the new IT system.

- To reduce the number of pagers being lost or misplaced, pagers are now labelled and an allocation system has been introduced. This has reduced the actual and potential loss of pagers. Staff report that no pagers have been lost and the pagers are always available. This has also seen an improvement in answering resident call bells.

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

Team's findings
The home meets this expected outcome

The home has systems to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines. Corporate services receive aged care alerts, notifications and updates through various professional subscriptions, memberships and peak bodies. The home is notified of policy updates and/or procedural changes via the electronic messaging system and email, education sessions and meetings. External auditing authorities and internal audit processes assist the home to monitor their

compliance with relevant legislation, regulatory requirements, professional standards and guidelines. Management and staff interviewed are aware of the legislative requirements that affect their role and responsibilities.

In relation to Standard 1 Management systems, staffing and organisational development, the home stores information according to legislative guidelines and monitors work related registrations, licences and police certificate for staff and external contractors. Residents and representatives were notified of the Re-accreditation audit.

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

Team's findings
The home meets this expected outcome

The organisation has systems to provide management and staff with the appropriate knowledge and skills to perform their roles effectively. Staff skills and knowledge is supported and monitored through both corporate and site specific orientation processes, supernumerary shifts, various performance based competency assessments, on-site educational DVD resources, mandatory training and annual performance appraisals. The training calendar identifies compulsory training along with any additional educational sessions that are responsive to both resident care needs and staff needs. Mandatory training sessions are offered throughout the year to support staffs attendance, and assist with non-attendance. Staff interviewed are satisfied with the educational opportunities to support their professional development. Residents and representatives interviewed are satisfied staff have the knowledge and skills to perform their roles effectively.

Examples of training completed in Standard 1 Management systems, staffing and organisational development over the last 12 months include Workplace English Language and Literacy Program, Information Technology/Computer training and attendance at a Aged Care Conference and Better Practice Conference.

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 are informed of internal and external complaint mechanisms through the resident handbook, during orientation to the home, display of notices and at various residents' meetings. Forms for comments and complaints are available in the home and brochures about an external complaint mechanism are accessible in different languages. A monthly analysis by management ensures appropriate actions are taken. All staff record concerns or suggestions for improvements raised by resident/representatives using the computerised system in the home. Residents and representatives can also raise concerns and identify opportunities for improvement through resident meetings, satisfaction surveys and informally. Residents and representatives interviewed say they are aware of how to make a comment or complaint and feel confident concerns are addressed appropriately.

1.5 Planning and leadership

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

Team's findings

The home meets this expected outcome

The home has on display their vision, values and goals. This is documented in the both resident and staff handbooks and throughout corporate documentation.

1.6 Human resource management

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

Team's findings

The home meets this expected outcome

The home has systems to monitor staff are appropriately skilled and qualified. Staff are screened and recruited against set criteria such as their skills, knowledge and experience, reference and criminal record checks are conducted. Management review staff numbers and the skill mix through incident data, staff feedback and resident profiles. Staffing levels are adjusted to ensure the delivery of quality care and services to residents. Multilingual staff are highly sought after to meet resident care needs. A registered nurse is available each shift, all staff leave and absentees shifts are filled by regular staff across the organisation or through a preferred supplier's agency. The home monitors staff skills and knowledge through various performance based competency assessments, mandatory training and annual performance appraisal. Residents and representatives interviewed are satisfied residents are provided care appropriate to the home's service philosophy and objectives. Staff interviewed were complimentary of the education and support provided by management and said they have enough time to perform their duties.

1.7 Inventory and equipment

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

Team's findings

The home meets this expected outcome

The home has systems for identifying that stocks of appropriate goods and equipment for quality service delivery are available. There are processes to monitor stock levels for all consumables, which includes considerations for the rotation of perishable stock. External service providers, preventative and corrective maintenance schedules, including electrical testing and tagging maintain goods and equipment in a safe and functional working order. Equipment where possible is trialled prior to purchase with consultation from staff and allied health professionals. Safe operating procedures are in place to guide staff practice. Routine maintenance schedules and incident and hazard reports assist the home to monitor equipment. Staff and residents interviewed are satisfied there are adequate and appropriate stocks of goods and equipment to deliver 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

Corporate systems support the home's information management system. There are a range of management systems to provide staff, residents and representatives with information. Admission processes, resident meetings/happy hours, newsletters, case conferencing and lifestyle reviews provide residents and representatives with information to make decisions about the care and services they receive. Lifestyle and care reviews, communication books, electronic memorandum, handover and staff meetings provide staff with the relevant information to perform their roles. Key performance indicators from audit reports, clinical analysis, incident and hazard reporting and feedback processes are discussed at management meetings with improvement initiatives actioned. Confidential information is stored securely, archived as required, and destroyed according to legislative requirements. Electronic information is password protected with varying levels of access to designated staff and backed up regularly. Corporate auditing processes assist in monitoring information management systems. Residents and representatives are satisfied residents are provided with information to assist them to make decisions about residents' care and lifestyle.

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

Corporate and site specific systems identify and monitor external services are provided in a way that meets the home's care service needs and quality goals. Major service contracts are managed corporately and include the home's expectations with regard to service delivery and obligation to comply with regulatory requirements. Service agreements are reviewed regularly. Feedback from maintenance staff assists in monitoring service and delivery outcomes. Deficiencies where identified are discussed with external service providers and contract managers. Alternative suppliers and/or contractors are sourced when poor service and delivery is not addressed through formal processes. The home monitors resident and staff satisfaction with external service providers through verbal feedback.

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 systems and processes.

In relation to Standard 2 Health and personal care, care evaluations and consultation, data on resident incidents, skin integrity and infections are collated and analysed for trends. Residents and staff interviewed are satisfied that the home actively promotes and improves residents' physical and mental health.

An example of an improvement initiative related to health and personal care implemented by the home over the last 12 months includes:

- To improve resident mobility and provide additional assistance with pain management a designated physiotherapy aide has been engaged four days per week. Residents have reported improved mobility outcomes and flexibility with treatment regimes, including attendance at medical appointments.

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

Team's findings
The home meets this expected outcome

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

In relation to Standard 2 Health and Personal Care, Schedule 4 and Schedule 8 medications are managed according to legislative requirements. Nursing registrations, medication competencies and the provision of specified services by qualified nursing staff are monitored. Management and staff interviewed are generally aware of their legislative requirements relating to reporting guidelines for absconding residents.

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

Team's findings
The home meets this expected outcome

Refer to Expected outcome 1.3 Education and staff development for information about the home's education and staff development processes.

In relation to Standard 2 Health and personal care, staff have completed medication competencies, basic life support, continence management, wound management, dietician/speech pathology training and incident management.

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

Team's findings
The home meets this expected outcome

Residents receive clinical care appropriate to their individual needs and preferences. Interim care plans are developed within 24 hours to guide care on information captured on admission. Comprehensive care plans are developed post all assessments being completed in consultation with residents and representatives, staff and input from allied health staff within the first month. Reassessment of care is initiated as necessary. Care reviews are completed three monthly to monitor effectiveness in meeting residents' needs. Clinical audits using the home's auditing schedule and daily management checklist review and observe staff practices in the home to support clinical care. Clinical incidents are monitored and analysed monthly and actioned as required. Residents and representatives interviewed are satisfied with the level of consultation and health and personal care provided.

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

Team's findings
The home meets this expected outcome

The home is able to deliver specialised nursing care needs as identified by the clinical staff. The home has access to specialised health professionals to support delivery of specialised nursing care needs to residents. Initial assessments are conducted by the registered nurse with ongoing assessments and reviews generally conducted to identify any changes to care needs. Staff practices are generally monitored for compliance by senior clinical staff. Staff are encouraged to access internal or external education to support learning practices to compliment scheduled education delivered by the home. Residents and representatives are satisfied they receive specialised nursing care according to their needs and preferences.

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

Team's findings
The home meets this expected outcome

Residents are referred to appropriate health specialists as needed. Clinical staff are able to access allied health specialists as required for individual residents. All referrals to specialists are monitored for effectiveness and documented in progress notes on the computerised system. Regular consultation occurs with medical officers, the dietitian and all other health specialists and feedback is sought from residents and staff. A physiotherapist visits the home regularly to support residents' needs. Podiatry services are scheduled regularly as required. Staff practices are monitored by senior clinical staff. Staff interviewed state they are able to access appropriate health specialists promptly in accordance with the needs of residents.

Residents and representatives are satisfied they are referred to appropriate specialists according to their needs and preferences.

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 generally has systems to ensure residents medication is managed safely and correctly. Medication incidents are investigated and actioned appropriately. The home supports residents' who wish to self medicate with appropriate assessment completed and reviewed as necessary. The use of "as required" medication is guided by clinical staff in consultation with the medical officers. Staff interviewed demonstrated an understanding of the home's medication management system. A medication advisory committee meets regularly to support safe and correct medication management. Residents and representative interviewed are generally satisfied their medication is managed safely 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' pain is managed effectively and all residents are as free as possible from pain. Clinical staff identify residents' at risk of pain on admission and document strategies to manage their pain. Alternative approaches and therapies trialled and used in the home include massage, heat packs, transcutaneous electrical nerve stimulation, ultrasound, repositioning and exercise programs to support residents' pain needs. A physiotherapist and physiotherapy aide assist the home to support residents with pain management strategies and consults with clinical staff for individual residents needs. Staff are aware of both verbal and non-verbal indicators for pain and liaise closely with the medical officers at the home around pain management. Clinical staff monitor individual resident's pain needs by regular reviews, audits and by feedback from residents, relatives and staff. Residents and representatives said they are satisfied with how residents' pain is managed.

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

Residents' palliative care preferences relating to emotional, cultural and spiritual needs are assessed on entry to the home. The home liaises with the medical officers and an external palliative care team to aid residents in the terminal phase of life. The home uses a multi-disciplinary approach to support effective referral mechanisms ensuring continuity of care for residents. The home provides residents with access to chaplaincy services at all stages of the illness as required. Family members are supported to stay with residents who are terminally ill. Memorial services are arranged to acknowledge residents passing. The home monitors palliative care services by observation of staff practices, review of clinical assessments and feedback from residents and families. Staff maintain and are aware of how

to ensure comfort and dignity for residents in the palliative stage of illness and have access to multicultural palliative care guidelines.

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

Team's findings
The home meets this expected outcome

The home has a system to provide residents with adequate nourishment and hydration. The on-site dietitian works closely with clinical staff to analyse residents' weight records and implement a plan of care to support care of individual resident's needs. The dietitian also provides in-service training to all staff and undertakes menu reviews. Staff are able to identify and communicate changes in residents' dietary, cultural and religious requirements to catering staff using the documentation provided in the home. Dietary requirements and equipment to support nutrition and hydration for residents are monitored by the scheduled care review process and monitoring residents' weight variances. Staff interviewed are aware of how to support residents' nutrition and hydration needs. Residents and representatives said they are satisfied with the home's approach to meeting residents' nutrition and hydration and associated support needs.

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

Team's findings
The home meets this expected outcome

The home provides residents with care in relation to maintaining their skin integrity. The home's entry process identifies residents at risk of skin impairment. Strategies to prevent skin impairment are recorded on care plans and reviewed regularly. Staff practices are monitored by clinical staff. Education is provided on infection control, manual handling and wound management. Staff are aware of preventative measures for individual residents and use specialised equipment, skincare products and regular re-positioning to maintain skin integrity. Skin tears and wounds are monitored through audits and reviewed by clinical staff. Residents and representatives said they are satisfied with the care provided to residents 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' bowel, bladder and mobility requirements are assessed on entry to the home. Assessment processes on admission include consultation with residents and their representatives. An individual toileting program is initiated for each resident and is reviewed and evaluated as required by clinical staff. Staff are supported with education relating to continence procedures and continence products. Urinary tract infections, bowel management and resident comfort requirements are monitored by clinical staff through audits and daily observations of practice. Staff are aware of the home's processes and individual resident's

continence management requirements. Residents and representatives said residents' continence needs are being met.

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 develops a plan to manage and evaluate care for residents with challenging behaviours. Care plans generally identify triggers, causes and interventions to support residents with challenging behaviours. Restraints use in the home is supported by policies and procedures and clinical assessments. Consultation occurs with medical officers, mental health teams and other external parties, such as the Dementia Behaviour Management Advisory Services to support residents' care needs. Staff practices are monitored by clinical staff to support methods of facilitating behaviour management. Behavior management is documented and evaluated by the care review process, feedback from relatives and observation of staff practices. Staff are aware of the home's processes and how to manage individual resident's behaviors of concern. Residents and representatives said they are satisfied with the home's approach to managing the causes which prompt 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 are supported by the home to maintain mobility and dexterity. Initial and ongoing mobility and dexterity assessments are completed by the physiotherapist who visits the home regularly to support residents with strategies to improve mobility and dexterity. Residents are encouraged with mobility programs with directives actioned by the physiotherapy aide and staff as instructed by the physiotherapist. Consultation occurs with the medical officer and the families when falls occur. Mobility aids are provided by the home and individual independence for residents is encouraged and monitored. Falls are monitored by the home's audit processes and risk factors are discussed and actioned. Staff are provided with training to support manual handling precautions and are aware of the home's processes and how to support individual resident's mobility needs. Residents and representatives are satisfied with the home's approach to optimising residents' mobility and dexterity.

2.15 Oral and dental care
This expected outcome requires that "residents' oral and dental health is maintained".

Team's findings
The home meets this expected outcome

Residents' oral and dental care is maintained in the home. An individual assessment is completed, reviewed and evaluated by clinical staff. The home ensures appropriate resources of dental products are accessible to residents to meet oral and dental care needs. Consultation is sought from the dentist in relation to residents' dental and oral status. Staff are able to access education in relation to oral and dental care and are monitored by clinical

staff through observations. Staff practices are monitored by clinical staff observation and review of care planning and progress notes. Staff are aware of how to manage residents' oral and dental health needs. Residents and representatives said they are satisfied with the home's approach to managing residents' oral and dental care.

2.16 Sensory loss
This expected outcome requires that "residents' sensory losses are identified and managed effectively".

Team's findings
The home meets this expected outcome

Residents' sensory losses are identified and managed effectively by the home. All five senses are assessed on entry to the home. The home has care strategies recorded in care plans for managing losses and re-evaluation if care needs change. The home's environment is monitored through audits to support residents' sensory needs. Monitoring processes include clinical staff monitoring of care practices, resident and relative feedback and the scheduled care review process. Staff are aware of the home's processes and how to manage residents with sensory losses. Residents and representatives said they are satisfied with the home's approach to managing residents' sensory losses in relation to all five senses.

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

Team's findings
The home meets this expected outcome

The home provides residents with assistance to enable them to achieve normal sleep patterns. Residents who experience sleep disturbance are monitored and strategies include pain management, drinks and snacks and repositioning to assist residents to settle as well as review of the environment. Staff investigate and report any sleep disturbances and consultation occurs with medical officers if sleep disturbances persist. Clinical staff review progress notes, monitor resident and relative feedback regarding sleep and monitor care plan reviews. Staff are aware of the home's processes and how to support residents to achieve natural sleep patterns. Residents said they are supported to achieve natural sleep patterns and are supported with sleep disturbances.

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

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

Team's findings
The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for information about the home's continuous improvement systems and processes.

In relation to Standard 3 Resident lifestyle, resident meetings/happy hours and resident surveys are used to gather suggestions. Feedback is recorded and evaluated from lifestyle and care activities. Staff contribute to improvements to resident lifestyle through surveys, training and networking. Staff encourage and support residents and others to provide feedback and suggestions.

An example of a recent improvement undertaken or in progress in relation to Standard 3 Resident lifestyle includes:

- To provide residents with another avenue of feedback, a weekly happy hour has been introduced by lifestyle staff and the director of nursing attends. This has created another informal pathway for residents to put forward ideas, ask questions and plan events in conjunction with the activities staff. Resident feedback indicates they enjoy the happy hour, and the opportunity to raise issues with management.

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

Team's findings
The home meets this expected outcome

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

In relation to Standard 3 Resident lifestyle, the home has processes to monitor mandatory reporting procedures and provide residents with residential care service agreements. Management and staff interviewed are generally aware of their legislative requirements.

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

Team's findings
The home meets this expected outcome

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

In relation to Standard 3 Resident lifestyle, staff have attended training in Elder Abuse and challenging behaviours, spirituality and ageing, passion for caring and the UCWPA Aged Care Conference.

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 are supported emotionally in adjusting to life in the home and on an ongoing basis. The home assesses residents' emotional needs on entry to the home by completing a social history profile. The home welcomes new residents and orientates them to the home and introduces them to staff and other residents. The home monitors and evaluates the effectiveness of emotional support through meetings, surveys and one-to-one discussions. Residents have access to spiritual and mental health services as required. Visits from family, friends, volunteers and community groups are encouraged. Staff provide one-to-one support to help residents settle into their new environment. Residents and representatives are satisfied the home provides residents with the level of emotional support they require.

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 assists residents to achieve maximum independence and to maintain friendships and connections within the community. Residents' lifestyle preferences, interests and abilities are identified during initial assessments and reviewed on a regular basis. Residents are encouraged to maintain their independence by accessing activities and events outside the home. Regular residents' newsletters communicate events and general information relevant to the home. Physiotherapy services are available to support residents maintain their mobility and independence. Residents have access to voting facilities during elections. Staff assist residents to participate in exercise programs and to maintain links with family, friends and community groups. Interpreting services support residents if required. Residents and representatives are satisfied the home assists residents to maintain their independence and participate in community activities according to their needs and preferences.

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 processes and procedures to maintain residents' right to privacy, dignity and confidentiality. Residents are provided with information about their rights and responsibilities in the resident handbook and residential services agreement. Anticipatory directives and palliative care requests are recorded and respected. The home maintains processes to protect residents' privacy and dignity, including residents' consent to collect and disclose

information. Residents' permission is sought prior to the publishing of photographs. A hairdressing service is available on-site for residents. The home monitors resident satisfaction through comments and complaints mechanisms, resident meetings, surveys and verbal feedback. Staff are aware of appropriate practices, such as knocking on residents' doors and maintaining privacy when delivering personal care. Residents and representatives interviewed are satisfied staff are courteous and respectful of residents' privacy.

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

Team's findings
The home meets this expected outcome

Residents are encouraged and supported to participate in a range of activities according to their individual needs and preferences. Residents' interests are identified on entry to the home and incorporated into the lifestyle care plan. An activities and lifestyle calendar is provided to each resident to inform them of events that are scheduled. Events on offer in the home include bus trips, musical events, 'happy hour every Friday', craft groups and exercise programs with indoor and outdoors access. Group and individual sessions include activities suiting the needs and preferences of residents with limited mobility and sensory deficits. Staff monitor resident participation through activity attendance, surveys, evaluations and resident feedback. Staff support residents to attend activities and engage in individual interests and encourage new activities. Residents are satisfied they have the opportunity to participate in a range of activities appropriate to their needs and preferences.

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' individual interests, customs, beliefs and cultural and spiritual needs are recognised and supported. The home identifies the cultural background, spiritual beliefs and social history of residents on entry to the home and implements strategies to meet their needs on an ongoing basis. Multilingual staff are available to support residents as well as an interpreting service if required. Cultural specific club visits and outing are arranged as well as devotional services. Management and staff monitor and evaluate residents' spiritual and cultural needs through resident meetings, surveys and lifestyle reviews. The home recognises all significant cultural and spiritual events such as Easter, Australia Day and ANZAC Day and supports residents to share their cultural and spiritual life. Staff are aware of residents' cultural and spiritual preferences and needs. Residents and representatives are satisfied that the home values and promotes individual interests, beliefs and cultural backgrounds.

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 are encouraged and assisted to exercise choice and control over their lifestyle. Residents' preferences, including daily routines and end-of-life decisions are recorded and integrated into care plans. The home has processes for identifying authorised representatives. Management and staff monitor resident satisfaction through surveys, resident meetings and comments and complaints mechanisms. Staff assist residents' to exercise choice and control over their lifestyle. Residents and representatives are satisfied residents are able to participate in choice and decision making that affects their lifestyle.

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 assist residents to understand their rights and responsibilities and their security of tenure. The admission process is supported by key staff and corporate staff who are responsible for coordinating financial and contractual arrangements with all new residents to ensure understanding of the agreements. The home is able to provide an interpreting service for residents and representatives if necessary. The agreements cover security of tenure, rights and responsibilities, level of care and services and fees. Surveys, audits and resident feedback assist the home to monitor compliance. Residents and representatives interviewed are satisfied with the information provided to them to understand their rights and responsibilities and security of tenure.

Standard 4 – Physical environment and safe systems

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

4.1   Continuous improvement

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

Team's findings

The home meets this expected outcome

Refer to expected outcome 1.1 Continuous improvement for information about the home's continuous improvement systems and processes.

In relation to Standard 4 Physical environment and safe systems, data on internal and external audits, staff incidents and hazards and feedback from staff and residents is collated and analysed for trends. Residents and staff interviewed are satisfied that the home provides a safe and comfortable environment.

An example of an improvement initiative implemented by the home over the last 12 months includes:

- The home identified through infection control analysis and trending, that there was an increase in infections. Hand sanitiser units have been installed adjacent to nursing stations, the main entrance and all living/dining areas in each house. Promotional posters have also been displayed. This has reduced the risk of cross contamination and the home has noted a significant reduction in upper respiratory tract infections.

4.2   Regulatory compliance

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

Team's findings

The home meets this expected outcome

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

In relation to Standard 4 Physical environment and safe systems, the home generally has processes to monitor their food safety program, infection control and health safety and welfare requirements. Management and staff interviewed said they are aware of their legislative requirements.

4.3   Education and staff development

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

Team's findings

The home meets this expected outcome

Refer to Expected outcome 1.3 Education and staff development for information about the home's education and staff development processes.

In relation to Standard 4 Education and staff development, staff have attended fire and emergency training, manual handling, infection control/hand hygiene and hazardous 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 has systems to provide a safe and comfortable environment consistent with residents' care needs. The aged care complex provides a secure internal and external environment with visitors and contractors signing in/out register, an on-site security system and external doors have key coded entry. Each housing complex maintains a temperature controlled environment and has access to communal lounge, dining and extensive outdoor and garden areas. Residents furnish their rooms with personal items and privacy curtains are available in wet areas. The home monitors the safety, comfort and cleanliness of the living environment through various external service providers, audits, feedback from staff and residents, the corrective and preventative maintenance program and incidents and hazards. Restraint where used is assessed, monitored and implemented in consultation with residents, representatives and the medical practitioner. Residents, representatives and staff interviewed said they are satisfied the home provides 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

There are management systems to provide and monitor a safe working environment according to legislative requirements. Orientation and ongoing training, including manual handling (no lift policy) provide staff with the skills and knowledge about their responsibilities and regulatory requirements for safe work practices. The organisation has a return to work program along with an early intervention physiotherapy program that staff can access. The work, health and safety committee which is representative of the home's work groups, including management meet regularly to monitor and analyse the outcomes from incidents, hazards, accidents and auditing/inspection processes. Health safety and welfare information is discussed at meetings and staff interviewed are aware of their responsibilities to maintain a safe environment. Residents and staff interviewed said they are satisfied management is working to provide a safe living and work environment.

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

Team's findings
The home meets this expected outcome

The home provides an environment and safe systems of work that minimise fire, security and emergency risks. An external contractor maintains the fire detection system and fire fighting

equipment. Emergency signage, evacuation maps and instructions are visible throughout the home. The home has a current Triennial Fire Safety Certificate. Electrical equipment is tested and tagged and chemicals are labelled and stored safely. A master list of hazardous substances is available and a chemical spill kit is available. There are emergency colour coded posters visible in each house. A resident mobility transfer list is maintained at the fire panel and updated weekly. Security procedures and environmental controls are in place and monitored regularly. Staff attend mandatory fire and emergency training and are familiar with their responsibilities in the event of a fire or other emergency. Residents and staff interviewed said they are satisfied the home is providing a safe environment.

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 minimise the incidence of infection. Senior clinical staff are responsible for the infection control program. There are contingency plans for outbreak episodes and staff have access to hand-washing facilities, automatic hand-gel dispensers and personal protective equipment. Staff are supported to attend mandatory education on infection control/hand-washing training. Sharps and waste disposal systems and cleaning and laundry schedule assist in infection control practices. Infection data is collated and analysed and reported at regular management meetings. There is a vaccination program for residents and staff. The home has an audited food safety and pest control program. Staff and residents and representatives interviewed are satisfied with the home's infection control program.

4.8   Catering, cleaning and laundry services
This expected outcome requires that "hospitality services are provided in a way that enhances residents' quality of life and the staff's working environment".

Team's findings
The home meets this expected outcome

Catering, cleaning and laundry services are provided in a way that enhances residents' quality of life and the staff's working environment. The home monitors resident satisfaction with hospitality services through surveys, resident meetings/happy hour and feedback forms. Entry processes identify residents' hospitality needs and preferences. Catering services are notified of residents' specific dietary needs and preferences. The four week cyclic menu has been reviewed by a dietitian and is provided to residents for comments. Catering services are responsive to feedback from residents and will modify the menu to suit the changing dietary preferences of residents, for example Asian soup and rice dishes have been added to the menu. Cleaning services maintain the living environment and resident and staff areas. On-site laundry services cater for personal laundry while flat linen is laundered off site. Clothes are labelled to minimise loss. Hospitality services are provided in accordance with infection control practices. Residents and representatives interviewed are generally satisfied with hospitality services provided. Staff interviewed are satisfied with their working environment.