

Promoting Health Independence

Contents

Introduction	3
Acknowledgement of Country	3
Charter of Care Recipients' Rights and Responsibilities – Residential Care	5
About Barwon Health	7
Aboriginal and Torres Strait Islanders	8
Accommodation, Care and Services	8
Alcohol	9
Ambulance Transportation	9
Café/Kiosk	10
Clothing, Footwear, Jewellery, Valuables and Personal Effects	10
Clothing and Dry Cleaning	11
Complaints, Comments, Compliments and Feedback	12
Cultural and Linguistic Diversity	13
Drugs	13
Electrical Appliances	14
Electric Wheelchairs and Scooters	15
Emergency Preparedness	16
End of Life Arrangements and Advance Care Planning	16
Falls	17
Family Contact Details	17
Financial Information - Fees and Trusts	17
Food Safety Programme	18
Gay, Lesbian, Bisexual, Transgender, Intersex Queer (GLBTIQ)	19
Gifts and Bequests	20
Gratuities to Staff	20
Hairdressing	20
Infection Prevention and Control	21
Influenza	21
Interpreters	22
Leave from your Lodge	22
Lifestyle and Recreation	22





Promoting Health Independence

Town Square	23
Mail Delivery	23
Medical Treatment	23
Menus and Meals	24
Newspaper Delivery	24
Spiritual Care	25
Pharmacy Service	25
Power of Attorney	27
Privacy and Confidentiality	27
Quality Improvement and Accreditation	28
Resident/Representative Meetings	28
Residents' Advisory Committee	28
Safety	29
Security	29
Security of Tenure -Transfer to Other Units/Changing Rooms	30
Signing and Witnessing of Legal Documents	30
Smart Moves	30
Smoke Free Policy	31
Telephone Calls	31
Televisions	31
Therapy	32
Visiting Pets	32
Visitors	32
Voting and Electoral Procedures	
Appendix 1: Lifestyle Activities	35
Appendix 2: Map of the McKellar Centre	36
Appendix 3: Map of Alan David Lodge	37
Fact Sheet 1: Accreditation Standards for Aged Care	38
Fact Sheet 2: Falls Prevention	40
Fact Sheet 3: Food Safety Tips	41
Fact Sheet 4: Flu Season	
NOTES	46





Introduction

Welcome to Barwon Health Residential Aged Care Program

This information booklet has been developed to assist you, your family and friends to become familiar with the day-to-day operations and activities of our public sector residential aged care services.

This booklet will also give you information about issues you might like to consider as part of the admission process to one of our residential aged care facilities.

Please feel free to discuss any aspect of care or services with relevant staff in the Lodge in which you live.

Acknowledgement of Country

We, Barwon Health, acknowledge the Traditional Owners of the land, the Wadawurrung people of the Kulin Nation. We pay our respects to the Elders both past and present. We thank the Traditional Owners for custodianship of the land, and celebrate the continuing culture of the Wadawurrung people acknowledging the memory of honourable ancestors.

We also welcome all Aboriginal and Torres Strait Islander people present today.







Barwon Health provides residential aged care on two campuses.

McKellar Centre, Ballarat Road, North Geelong 3215

 Wallace Lodge is a 108 bed home, completed in June 2006.

Wallace Lodge Reception Ph: 03 4215 6191

 Blakiston Lodge is a secure and specialised 90 bed dementia and aged persons' mental health home, completed in May 2007.

Blakiston Lodge Reception Ph: 03 4215 5241

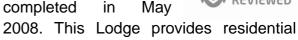
 Percy Baxter Lodges offers 83 beds in 4 separate stand alone lodges.

Percy Baxter Lodge Reception Ph: 03 4215 5892

Torquay Road, Charlemont 3217 (Grovedale)

Alan David Lodge is an 89 bed home, completed in May

care and transition care.



Alan David Lodge Reception Ph 03 4215 6501

Reviewed by Senior Aged Care Staff January 2018.

Minor Amendments Approved by Director of Aged Care July 2018

Approved by the Clinical Guidelines Review Committee for Residential Aged Care (RAC) February 2018

Approved by WISE March 2015



Health



Charter of Care Recipients' Rights and Responsibilities – Residential Care



Australian Government

Department of Health

Aged Care Act 1997, Schedule 1 User Rights Principles 2014

1. Care recipients' rights - residential care

Each care recipient has the following rights:

- a) to full and effective use of his or her personal, civil, legal and consumer rights;
- b) to quality care appropriate to his or her needs;
- c) to full information about his or her own state of health and about available treatments:
- d) to be treated with dignity and respect, and to live without exploitation, abuse or neglect;
- e) to live without discrimination or victimisation, and without being obliged to feel grateful to those providing his or her care and accommodation;
- f) to personal privacy;
- g) to live in a safe, secure and homelike environment, and to move freely both within and outside the residential care service without undue restriction;
- h) to be treated and accepted as an individual, and to have his or her individual preferences taken into account and treated with respect;
- i) to continue his or her cultural and religious practices, and to keep the language of his or her choice, without discrimination;
- j) to select and maintain social and personal relationships with anyone else without fear, criticism or restriction;
- k) to freedom of speech;
- I) to maintain his or her personal independence;
- m) to accept personal responsibility for his or her own actions and choices, even though these may involve an element of risk, because the care recipient has the





right to accept the risk and not to have the risk used as a ground for preventing or restricting his or her actions and choices;

- n) to maintain control over, and to continue making decisions about, the personal aspects of his or her daily life, financial affairs and possessions;
- o) to be involved in the activities, associations and friendships of his or her choice, both within and outside the residential care service:
- p) to have access to services and activities available generally in the community;
- q) to be consulted on, and to choose to have input into, decisions about the living arrangements of the residential care service;
- r) to have access to information about his or her rights, care, accommodation and any other information that relates to the care recipient personally;
- s) to complain and to take action to resolve disputes;
- t) to have access to advocates and other avenues of redress;
- u) to be free from reprisal, or a well-founded fear of reprisal, in any form for taking action to enforce his or her rights.

2. Care recipients' responsibilities - residential care

Each care recipient has the following responsibilities:

- a) to respect the rights and needs of other people within the residential care service, and to respect the needs of the residential care service community as a whole;
- b) to respect the rights of staff to work in an environment free from harassment;
- c) to care for his or her own health and well-being, as far as he or she is capable;
- d) to inform his or her medical practitioner, as far as he or she is able, about his or her relevant medical history and current state of health.

Retrieved July 6, 2018 from

https://agedcare.health.gov.au/publications-and-articles/guides-advice-and-policies/charter-of-care-recipients-rights-and-responsibilities-residential-care



Health

MCKELLAR CENTRE

Promoting Health Independence

About Barwon Health

Vision

Together with our community we build healthier lives, inspired by world class standards.

Mission

With our consumers at the forefront, we excel in delivering efficient integrated care, education and research to advance health and wellbeing for all.

Pillars

Our consumers at the forefront.

Our people at their best.

Right Care, right time, right place.

Research and education for excellence.

Our community's well being.

Retrieved July 16, 2018 from http://www.barwonhealth.org.au/about-us/column-4/strategic-plan

Values

Respect

We respect the people we connect with.

Compassion

We show compassion for the people we care for and work with.

Commitment

We show commitment to quality and excellent in everything we do.

Accountability

We take accountability for what we do.

Innovation

We drive innovation for better care.







Aboriginal and Torres Strait Islanders

Barwon Health is committed to *Closing the Gap* to improve the lives of Australian Aboriginal and Torres Strait Islander peoples. We are working to achieve the key priorities set out in *Koolin Balit* (which means "healthy people"), the Victorian Government's strategic direction for Aboriginal Health 2012-2022.

Key priorities include:

- Increasing the number of Aboriginal people in our Barwon Health Workforce;
- Providing culturally sensitive care to our Aboriginal patients and residents;
- Strengthening our relationship with Wathaurong Aboriginal Cooperative;
- Providing a healthy start to life for Aboriginal babies born at the hospital.

Enabling all Aboriginal people to access the information, support and culturally appropriate service responses that maximises their wellbeing is a key priority in Barwon Health.

Further information is available through Barwon Health's Aboriginal Health Policy and Projects Officer. Phone 4215 0765.

Accommodation, Care and Services

Percy Baxter Lodges, situated on the McKellar Campus, comprises of four stand alone lodges with single rooms and shared ensuites. A typical room consists of:

- adjustable single bed
- wardrobe
- bed side locker
- lounge chair
- heating
- telephone and TV connections

The communal dining/lounge rooms in each lodge are airconditioned.

Wallace Lodge situated on the McKellar campus, and Alan David Lodge on the Charlemont campus, have been built in accordance with the Department of Health Aged Care Residential Services Generic Brief (2000) for the Barwon Region.

The majority of rooms are twin share with an ensuite. There are a number of single rooms with a shared ensuite.

A typical resident room consists of:

- high/low adjustable bed
- wardrobe
- bedside locker with a lockable drawer
- lounge chair
- privacy screen
- lifting hoist if required
- ducted heating and ceiling fan
- telephone and TV connections

Communal dining/lounge areas have ducted heating, air-conditioning and TV with Foxtel connection.





Secure care is provided in **Blakiston Lodge** situated on the McKellar campus. It consists of 90 beds for dementia and aged persons mental health residents. The generic brief reflects the differing needs for residents in this lodge and includes both heating and cooling throughout the building including resident bedrooms.

We like to encourage a home-like atmosphere in all our lodges. Pictures and photos are welcome, as well as other personal items. Please label these clearly but discreetly with your name.

Large items like furniture will have to be discussed with the unit manager to ensure adequate space, safety and other regulatory requirements are met. For example, personal items need to fit in the storage areas provided in your room to enable efficient cleaning and movement throughout for staff, visitors and others. (See <u>Electrical Appliances</u>, including portable cooling equipment and televisions).

Care and Services

Refer to your Residential Aged Care Agreement or contact the unit manager who can provide further information and advice.

Alcohol

Our policy permits residents to consume alcohol in moderation. If you wish to consume alcohol, we strongly advise you consult with your doctor to make sure it is safe to have alcohol with any medications you may be taking.

The consumption of alcohol must not disturb or disrupt other residents, staff or visitors.

Ambulance Transportation

Barwon Health may utilise Ambulance transportation whenever necessary.

Barwon Health will not be liable for any costs incurred by Ambulance Victoria. Therefore we recommend you consider your eligibility for free Ambulance Victoria transportation.

Ambulance Victoria states:

"Under the State Concession Scheme. Victorians eligible for concessions receive free clinically necessary ambulance coverage throughout Australia. This coverage will provide free emergency and medically authorised non-emergency ambulance transport to the nearest and most appropriate hospital. A person holding a current Pensioner Concession Card is eligible."

Non Pension Concession card holders (e.g. self-funded retirees) therefore may be charged by Ambulance Victoria.





Dependent on your individual Private Health Insurance policy, ambulance transportation may not be covered through your Private Health Insurance Provider unless you are a current member of Ambulance Victoria.

Café/Kiosk

Comfortable seating and pleasant garden surroundings are available for use by residents, family, visitors, volunteers and staff on the McKellar campus at Café 45. Café opening hours:

- 7.00 am 4.45 pm Monday to Friday.
- 10.45 am 3.45 pm Saturday and Sunday
- 11.00 am 3.00 pm on public holidays. Closed Christmas Day, Boxing Day and New Years Day.

At Alan David Lodge, a kiosk is open between 9.30 am and 3.30 pm Monday to Friday. On weekends, please ask for staff assistance.

Percy Baxter Lodges has a kiosk available at any time – further information is available from staff.

There are vending machines available at all times on both campuses.

Clothing, Footwear, Jewellery, Valuables and Personal Effects

Barwon Health takes all reasonable measures to protect your personal effects, which includes clothing, footwear, jewellery and valuables.

Depending on your individual circumstances you may wish to consider Personal Contents Insurance.

Barwon Health does not take responsibility for the loss or theft of valuables or money despite all endeavours to maintain and promote a secure environment.

We suggest that valuable items and large amounts of cash are not brought into our Lodges.

Residents and/or their family members who insist on leaving valuables in their room may do so after releasing the lodge from any responsibility. (See Security)

All personal clothing is to be provided by you or a family member. To minimise loss of clothing, please ensure the clothing is clearly but discreetly labelled. To assist you with this, a labelling service is available on site and is free of charge.

We recommend at least six complete changes of clothes be brought in on admission, especially underclothing. All clothing repairs are the responsibility of you or your family.



Promoting Health Independence

It is recommended that footwear is comfortable, low-heeled, non-slip and well fitted. Each home has information available about recommended footwear. Please ask staff for a pamphlet.

We ask that you consider the appropriateness of clothing and footwear, keeping in mind comfort, safety and ease of laundering; particularly for those residents who require assistance with movement. In general, split back clothing is recommended for residents who have difficulty with sitting balance or find it difficult to bring their weight forwards in a chair. Larger sized clothing that stretches easily is also recommended for residents who have difficulty stretching out their limbs, or require assistance dressing themselves. Modified clothing such as this makes the dressing/undressing process more comfortable for residents, and helps prevent staff injury. Machine washable clothing made of a stretch fabric is encouraged.

For further information please also refer to information on <u>Clothing and Dry Cleaning</u> and <u>Smart Moves</u> within this booklet.

When personal effects of a resident need to be returned to the family/carer, it is the practice for staff to pack all items for collection within 24 to 48 hours.

As it is the responsibility of the family/carer to collect these items in a timely manner, Barwon Health cannot be held responsible for any loss or damage that may be seen to have occurred during this time. Any items

not collected will be disposed of as facilities have limited storage.

Clothing and Dry Cleaning

Wallace Lodge, Blakiston Lodge and Alan David Lodge

A laundry service is available to all residents at these facilities. If you would prefer your clothes be washed by a family member or friend, please inform staff.

Percy Baxter Lodges

A fully equipped laundry with a washing machine, clothes dryer and wash trough is available in Lodges 1, 4 and 5. If you wish to access an iron and ironing board, please ask a staff member. There is a clothes lines between hostels hostels 4 and 5.





Complaints, Comments, Compliments and Feedback

"We want to hear from you!"

We encourage you to share any ideas, suggestions, compliments or complaints about our service within Barwon Health.

There are a variety of ways you can do this:

- Through our internal feedback forms. By completing a "We want to hear from you" form and placing in the suggestion box. These are collected regularly by the Facility Manager / Nurse Unit Manager.
- 2. Through speaking with management or staff in the lodge.
- 3. You may choose to contact the Co Director of Aged Care by phone or in writing:

Co - Director of Aged Care

Barwon Health – McKellar Centre Confidential 45 – 95 Ballarat Road North Geelong Vic 3215 Phone: 03 4215 5563

4. Barwon Health provides a liaison officer who can be contacted at:

Consumer Liaison Officer

Barwon Health Safety and Quality Unit PO Box 281 Geelong Vic 3220 Phone: 03 4215 1251 complaints process through the Aged Care Complaints Commissioner:

5. There is an external aged care

"Making a complaint is not 'being difficult'. Most aged care providers do their best to provide quality care and services for older Australians. However, issues can occur so we need to ensure that people can raise their concerns in a constructive and safe way.

If you have a concern about the care you or someone else is receiving, it is important that you talk about it.

Complaints are important because they can help service providers improve the quality of care and services they provide to you or your loved one. Your complaint can help other people too.

If you feel comfortable, we encourage you to raise your concern with the staff or managers of the service first as this is often the best way to have your concern quickly resolved. All service providers are required to have a complaints system in place. In most cases, you will be able to resolve your concern with them.

If this doesn't work or you don't feel comfortable, we can support you to resolve your concern with the service provider. We provide a free service for anyone to raise a concern or make a complaint about the quality of care or services provided to people receiving Australian Government funded aged care."

Retrieved 30.6.16 from www.agedcarecomplaints.gov.au

Aged Care Complaints Commissioner

Australian Government GPO Box 9848 Melbourne Vic 3000 Phone 1800 550 552





6. You could also contact Elder Rights Advocacy, which is an external provide advocacy organisation that persons. services for older encourage vou to contact this organisation if you would like help in working through any issues you have living in residential aged care.

Services provided by Elder Rights Advocacy are:

- providing information, support and advice about rights and responsibilities to aged care recipients and/or their family representatives.
- encouraging and supporting action by individual people, groups or their representatives, including making approaches to management with issues or problems.
- assisting with complaints.
- assisting with the development of or support residents' committees.
- providing information and education sessions to aged care recipients, their families, and staff of aged care service providers.
- consulting on policies to enhance consumer rights.
- promoting community awareness of the rights of older people.

Access the website (<u>www.era.asn.au</u>) for more information about their service, including extensive list of fact sheets and other publications about rights in aged care.

Elder Rights Advocacy

Level 2, 85 Queen Street Melbourne VIC 3000 Phone 1800 700 600

Email: era@era.asn.au
Website: www.era.asn.au

Cultural and Linguistic Diversity

Barwon Health and the McKellar Centre aim for the following outcomes:

That those individuals and groups from culturally and linguistically diverse (CALD) backgrounds will be:

- informed about health issues and service options
- able to participate fully in determining their personal health care decisions
- able to use health services, both curative and preventive at levels that are appropriate to their health needs
- content with the cultural sensitivity of health care services and the health promotion and prevention programs
- satisfied with the quality of communication in the health care services and the health promotion and prevention programs
- able to participate equitably in all aspects of health planning and review
- able to access an interpreter service Please see information on Interpreters.

Drugs

The presence and / or use of illicit drugs is illegal. Identification of such practice will be reported to the police.



Promoting Health Independence

Electrical Appliances

All electrical equipment in residential aged care facilities must be tested to ensure that it is safe for use. This includes extension cords and power boards. Barwon Health provides testing of electrical appliances on an annual basis.

When residents first come into the lodge, any electrical equipment they bring with them must be tested and tagged as safe prior to entering the premises. The exception is new equipment, which is deemed by the current Australian standard to be electrically tested and safe for 12 months.

For the safety of all residents, staff and visitors, it is important that the Facility Manager/Nurse Unit Manager be informed of any electrical equipment brought into the lodge. This is to ensure that the appropriate and timely safety testing of the equipment occurs.

Due to restrictions of available power supply, and adequate safe working space, limitations are placed on the number of electrical appliances allowed. The lodge manager may remove any item of electrical equipment if its use is considered hazardous or has not been approved. This includes portable heating and cooling equipment that has not been approved by the unit manager in consultation with the site engineer.

For testing of personal electrical equipment Barwon Health has negotiated a discounted cost for residents if they wish to use the same contractor as our facilities. Please discuss with staff for details.

Electrical appliances must be placed in such a manner that there are no cords or cables, which will pose a trip hazard to residents and staff.

Residents are welcome to bring in their own television, however Barwon Health requires that certain guidelines are followed (see Televisions).







Electric Wheelchairs and Scooters

Purchase of Vehicles

If you are looking to purchase an electric wheelchair or scooter, please discuss first with the Facility Manager

Assessment of User

You will be required to have an assessment by an occupational therapist to determine if you are able to drive the vehicle safely. The occupational therapist will give you advice regarding suitable models for you to purchase.

It is important that you are able to drive the vehicle safely at all times and there may be reason for staff to discuss concerns with you. You may be considered to be temporarily or permanently unfit to drive.

Electric wheelchair and scooters have been known to cause accidents and harm to users, other residents or members of the public, as well as damage to property.

Staff will discuss with you where you can drive, appropriate speed (walking pace only), safe parking and re-charging facilities.

Purchase and Maintenance of Vehicles

Purchase, payment and maintenance are the responsibility of the user or the support person. Staff may request repairs and are able to arrange Geelong Wheelchairs to attend and complete repairs. Any liability incurred arising out of the use of such motorised wheel chairs or scooters rests with the resident. All vehicles are to have dry cell batteries.

Charging of Batteries in Vehicles

Staff are able to assist with docking of the vehicle for re-charging overnight in a designated location within the Unit.

Disposal/Sale of Vehicle when No Longer Required

It is the responsibility of the user or support person to remove the vehicle when it is no longer required.





Emergency Preparedness

Barwon Health takes seriously the responsibility it has to ensure the safety and wellbeing of all residents in its care. A committed and collaborative approach to emergency preparedness at all times is a key focus.

Residents are to follow instructions given by staff in the event of an emergency. Emergency situations may include events such as a bush fire, heatwave, severe storm or flood.

In order to plan for emergency situations, it is important that your next of kin details are kept up-to-date. To assist us, please make sure you inform the Nurse Unit Manager of any change to personal details, or complete a change of details form (see <u>Family</u> Contact Details).

End of Life Arrangements and Advance Care Planning

Advance Care Planning (ACP) is a process whereby a resident in consultation with health care providers, family members and important others, makes decisions about his or her future health care, should he/she become incapable of participating in medical treatment decisions.

Advance Care Planning only comes into effect when the resident loses the capacity to make medical treatment decisions. This approach reflects important ethical principles of autonomy, informed consent, dignity and prevention of suffering.

If you would like to speak with an Advance Care Planning consultant to provide you with support and further information on Respecting Patient Choices, please speak to your Facility Manager/Nurse Unit Manager to organise.







Falls

Please refer to <u>Fact Sheet on Falls</u> <u>Prevention</u> at the end of this booklet.

Family Contact Details

Family and friends are asked to keep Barwon Health informed of any changes of address or telephone numbers in the event we need to contact them. *Change of Address* information forms are available in the foyer in each unit. Please return them to the Facility Manager/Nurse Unit Manager (see Emergency Preparedness).

Financial Information - Fees and Trusts

The basic daily care fee for residential aged care is based on a percentage of the single maximum aged pension, therefore care fees increase every six months in line with the aged pension. Depending upon the result of a Centrelink Income and Asset Assessment, residents may incur additional fees. Fee accounts are sent in advance each month and are due and payable when received.

Trust accounts are sent in arrears, and are posted within seven days of the end of each month. Residents may be assisted to keep a small amount of cash securely in their room; however it is recommended that only minimal amounts of cash be kept in this manner.

Items such as newspapers, hairdressing and Café 45 purchases can be charged to your Trust Account to reduce the need for cash purchases. If you wish to use this free service we request an opening deposit of \$100. You can make cash withdrawals from reception between 9.00 am and 4.00 pm weekdays, but the account must always remain in credit. You or your representative should check the charges on your trust account statement each month.

While Barwon Health takes all reasonable measures to ensure charges are accurate, Barwon Health is not liable for any amounts charged by suppliers in error. Barwon Health will of course endeavour to recover amounts identified as overcharged.





You can have your pension paid directly into your trust account; we will then deduct your bed fees and pay any other charges you may have incurred during the month. After these transactions have occurred you will have access to the balance remaining in your trust account.

A form is available from the Trust Office if you would like to have your pension added to the schedule.

If you are currently in receipt of a married pension you will now both be entitled to single pensions, due to the fact that you are separated on medical grounds. It is your responsibility to inform Centrelink or the Department of Veterans Affairs of this medical separation. Centrelink will only pay the single pensions from the date you advise them. They will not backdate this payment.

If you are required to, or request to change facilities within Barwon Health you need to contact the billing manager to discuss any financial implications prior to any move.

Fees and Trust Office

Phone (03) 4215 5819.

Food Safety Programme

Guidelines for food brought into the Facility by relatives for residents

Responsible and safe food handling practices are necessary when transporting ready to eat foods.

All food items brought into the Facility must be labelled with the resident's first name and room number, and entered into the Register of Incoming Food Items.

Upon arrival, please advise staff of food items brought into the Facility. A register of incoming food items must be completed at this time and high-risk foods will be stored appropriately by staff. Any suspect items will either be returned or disposed of in the appropriate manner.

Whilst we take every precaution to safely store food items brought into one of our facilities by relatives or friends, we are unable to take responsibility for potentially hazardous foods not provided by the Barwon Health Food Services Department.

Hot or cold foods that require temperature control (potentially hazardous foods) should be avoided as these foods could cause a problem. If in doubt of correct food choices, please contact the Facility Manager/Nurse Unit Manager for assistance.

Please refer to <u>Food Safety Tips</u> at the end of this booklet.

Ask staff for our "Can I Bring in Food for Residents?" pamphlet.





Gay, Lesbian, Bisexual, Transgender, Intersex Queer (GLBTIQ)

Barwon Health's Gay, Lesbian, Bisexual, Transgender, Intersex and Queer (GLBTIQ) Inclusive Practice Committee supports an environment that creates:

- A positive, respectful, supportive and fair work environment, where employee differences are respected, valued and utilised to create a productive and collaborative work place.
- Improved health experience and outcomes for gay, lesbian, bisexual, transgender, intersex and queer people.

A quality health service provides safe, sensitive, and high quality care for everyone, and Barwon Health is committed to:

- an inclusive environment where GLBTIQ people feel physically, spiritually and emotionally safe;
- using appropriate language that is respectful and aligned with how a person identifies themselves;
- providing GLBTIQ sensitive practices;
- providing education and training for staff to equip them with the skills and knowledge required to support and work with GLBTI people.

References:

Gay and Lesbian Health Victoria. (2008). "You don't have to tell us if you're gay or lesbian". Retrieved July 27, 2016 from http://www.glhv.org.au/poster/aged-care-services-poster

Many older GLBTIQ people have lived through a time when disclosing their sexual orientation or gender identity could result in imprisonment, forced medical 'cures', loss of employment, family and friends.

Consequently, many older people learned to hide their sexual orientation or gender identity to be safe.

Older GLBTIQ people were subjected to discrimination from a range of government organisations, police, churches, the community and their family.

Homosexuality was criminalised throughout Australia and conviction could have meant incarceration.

Gay men and trans people were regularly subjected to police harassment and entrapment.

The historical experiences of older GLBTIQ people have had a significant effect on their health and wellbeing as well as their fears about discrimination when accessing services. As a consequence:

- Some older GLBTIQ people have been relatively invisible;
- Many have a network of 'chosen' family or friends rather than genetic family ties, while some may have few social connections:
- Have never known a time when they have felt safe disclosing their sexual/gender identity;
- Have 'straightened up' their lives in order to stay safe;
- May revisit historical trauma when encountering discrimination.







The consequences of this invisibility for older people are significant. The My People report found that some people who felt unable to disclose their sexual/gender identity also:

- Felt unable to be themselves; devalued or depressed/
- Experienced stress and pressure from maintaining a façade of heterosexuality/
- Have unmet care needs/
- Have limited opportunities for sexual expression.

Retrieved July 16, 2018 from https://www2.health.vic.gov.au/about/populations/lgbti-health/rainbow-equality/working-with-specific-groups/older-people

Gifts and Bequests

In the event that you have a desire to provide assistance towards the future development and improvement of the facilities and services at the McKellar Centre or Alan David Lodge, you may wish to provide either a donation or make provision in your Will for the Barwon Health Aged Care Directorate or facility of your choosing. If this is your desire, we encourage you to discuss these possibilities with your legal advisor and site management.

Gratuities to Staff

It is Barwon Health's policy that staff members are not permitted to accept tips or gratuities. However, we are always delighted to receive your feedback, either by direct contact, via a letter, or by completing the 'We Want to Hear from You' form, relating to the treatment and care that has been received by you, your family or your relatives. Such letters of appreciation are a source of great pleasure, both to our direct care staff and senior managers.

Hairdressing

A hairdressing service is available to provide a full range of services. Appointments can be made via the nursing, reception/ward clerks or lifestyle staff, as appropriate to the Lodge.

Alan David Lodge:

- Wednesday from 9.00am
- Thursday from 9.00am

Blakiston Lodge:

Wednesday from 9.00am

Wallace Lodge:

- Thursday from 9.00am
- Friday from 9.00am

Percy Baxter Lodges:

Monday 11.00am – 3.00pm





Tuesday 0930am – 3.00pm

Infection Prevention and Control

Continually improving quality of care and providing a safe working environment are fundamental activities for our facilities. We have effective infection control strategies to assist with the prevention and management of the spread of infections from person to person within the facilities.

Standard precautions and specific work practices are required to achieve a basic level of infection prevention and control.

Strategies to assist with our practices include:

- All residents and visitors are requested to maintain good personal hygiene practices, especially hand hygiene. You are encouraged to use the hand hygiene products available before entering, and when leaving the facility.
- Inform medical staff of a suspected or known infection risk.
- If a visitor is feeling unwell, e.g. flulike symptoms or gastro symptoms, they should not visit any health care facility until their symptoms have subsided and they are feeling better.
- If a potential risk to either residents or visitors is identified, specific strategies will be implemented and those at risk will be informed so as to minimise the risk of infection transmission.

- If there is an outbreak of infection, strategies will be initiated to ensure residents are not placed at harm. A notice will be placed on the outer door of the building instructing visitors to the facility in what to do. Even if a relative may not be infected, we do request that they observe these guidelines to minimise the risk of infection spreading throughout the unit.
- Any food brought into the facility for residents should be cooked, stored and transported safely. Residents or family members bringing in food must make sure it is properly stored, labelled and dated.
- If a staff member, visitor or resident sustains a needle stick or blood splash accident, procedures will be followed to assess any potential risk of transmission as per facility policy.

Influenza

An influenza vaccine is strongly recommended and free for residents in residential aged care facilities.

You will be asked to complete the Consent to Immunize Against Influenza form upon admission.





Interpreters

Access to interpreters by telephone are available seven days a week, 24 hours a day. Phone 131 450.

Barwon Health provides a professional, confidential interpreting service to ensure that you or your family member understands and makes informed decisions regarding care and treatment.

If you require an interpreter please ask a staff member to organise one for you through the Barwon Health On Line Interpreter Booking Application or by phoning the on call interpreter service on 03 8807 2300.

Leave from your Lodge

Any amount of leave may be taken by residents for the purpose of receiving hospital treatment.

You can take up to 52 days of social leave each financial year.

If any leave is required, other than hospital or social leave, please speak to your Facility Manager/Nurse Unit Manager.

Lifestyle and Recreation

We encourage you to continue with existing activities in the community after you move into residential aged care.

We promote and encourage enjoyable activities for all residents. All lifestyle activities are based on your choices, preferences and needs. There are a wide variety of activities available.

These include both individual and group activities. Some examples of group activities include:

- cooking, including special food events such as BBQs.
- outdoor activities, such as gardening, woodwork and fishing trips.
- culturally-specific friendship groups
- walking and exercise groups.
- quizzes, word games, cards and board games.

There is a sample of <u>lifestyle activities</u> at the end of this booklet.

Ongoing community involvement is encouraged and there is opportunity for you to be involved in activities outside the centre and also to foster community involvement within the facility. For example concert groups, visiting pets and visiting school groups. Family members are welcome to attend outings to support and share enjoyment with residents; however they must make their own way to the outing venue as the Volunteer Services' bus is for resident use only.







Volunteers play an integral part in the lifestyle program providing support and assistance to residents.

To learn more about how to become a Barwon Health Volunteer, please visit: http://www.barwonhealth.org.au/volunteer-services

Town Square

The McKellar Centre Town Square is a great place to engage with other people living or working at the McKellar Centre. We encourage and promote the use of the McKellar Town Square precinct.

The Town Square is fully equipped with a playground (see <u>Safety - Playground</u> <u>Safety Rules</u>), sensory and tranquil gardens, shaded areas, and is in close proximity to Café 45 - the perfect place for a family gathering.

Mail Delivery

Mail is delivered to each lodge twice daily.

Your mailing address will be either:

(Your name)
Name of your lodge
The McKellar Centre
45-95 Ballarat Road
NORTH GEELONG VIC 3215

or

(Your name)
Alan David Lodge
382 Torquay Road
CHARLEMONT VIC 3217

Stamps are available from the kiosks at the McKellar Centre, Percy Baxter Lodge and Alan David Lodge. Post boxes for out-going mail are provided at Alan David Lodge and Percy Baxter Lodges. There is a post box within the McKellar Centre grounds situated outside the Inpatient Rehabilitation Centre opposite the centre's main Reception.

Medical Treatment

Residents have the right to choose their medical practitioner and are able to continue consulting with the doctor who cared for them prior to moving into residential aged care. If you wish to do this, please check with your doctor that such medical services are available prior to admission. If this is not the case, your doctor may be able to refer you to another GP, or admission staff will assist you.



Health

MCKELLAR CENTRE

Promoting Health Independence

Menus and Meals

The Food Services Department at Barwon Health provides freshly cooked meals using a cook/chill system. There is a wide selection of meals, which have been prepared by our qualified chefs in consultation with Barwon Health dietitians to ensure all meals are nutritionally well balanced.

Meal choices are made on a rotating menu cycle through a computerised menu system. Meal selections can be changed at any time, and there is also food available in each lodge to cater for last minute choices. A staff member is available in our Food Services Department (meal monitor) to come and see you and assist you with menu choices and changes.

Special events and celebrations are catered for and families can bring in food. There is a food safety program in place to ensure food handling and safety standards are met. Refer to comprehensive information in this booklet under the section **Food Safety**.

Your nutrition and hydration needs and preferences are discussed with you or your family representatives. You will be assisted to maintain your dietary customs according to your religious and cultural beliefs.

Assistance will be given where necessary to ensure residents receive sufficient food and fluid. Assessment for special needs is done in consultation with dietitian, speech pathologist, occupational therapist, doctors,

nursing staff, resident and/or their representative.

Snacks and fresh fruit are available at any time.

Approximate meal times:

- breakfast 8:00 am
- morning tea 10:30 am
- lunch 12:00 noon
- afternoon tea 2:30 pm
- dinner 5:00 pm
- supper 7:00 pm

Newspaper Delivery

A local newsagent makes daily deliveries of newspapers, magazines, etc. The newspaper is charged directly to your trust account on a monthly basis. Please speak to the staff if you would like to have the newspaper delivered. Newspapers and magazines in languages other than English can be ordered.





Spiritual Care

Spiritual Care is available and supports a holistic approach to resident care. Arrangements can be made for visits to residents in the home and your current pastor is more than welcome to visit also. Services are held by different denominations.

If you would like to see someone from the Barwon Health Spiritual Care Service, please talk to a staff member. Should you have any enquiries or concerns, the spiritual care coordinator can be contacted on (03) 4215 6145. There is a brochure about Spiritual Care Services in each lodge.

Pharmacy Service

The McKellar Centre offers a pharmaceutical service to residents through the supply of pharmaceutical benefit items, medication reviews and advice to staff, residents and carers, via the contracted community pharmacist.

The community pharmacist monitors the Medicare Safety Net Scheme to ensure your entitlements are met, and arranges for prescriptions to be obtained from your medical officer. On admission, please supply your Medicare number, pension number and any Safety Net details, or advise us which pharmacy will have this information.

Payment for medications is through your McKellar Centre trust account, usually on a monthly basis. A copy of your itemised account is sent to the nominated person for your records.

A limited number of items, which are not available on pharmaceutical benefits, may be provided from either the contracted community pharmacy or the McKellar Centre Pharmacy, depending on availability, cost or resident preference.

Should you prefer to choose your own pharmacist, the responsibility for supply of medications and payment will be your own. Please inform your Facility Manager if you would like this option.

If medication is required and cannot be obtained from your usual service, eg. on a weekend or when family is not available, the contracted community pharmacy will be requested to supply your medication and you may be charged a service/out of hours delivery fee.

Information is available in each lodge about complementary therapies and medications. Remember if you take complementary medications, you should advise your doctor and the Facility Manager/Nurse Unit Manager.

If you have any queries regarding the service or would like advice about your medications, please contact the Facility Manager/Nurse Unit Manager.





Promoting Health Independence





Power of Attorney

A Power of Attorney is a legal document that allows you to choose a person to act on your behalf if you cannot make decisions for yourself. Any existing Power of Attorney should be provided on admission to ensure appropriate medical and financial decisions are made.

There are four types of powers of attorney:

- General Power of Attorney is given to a nominated person for a short term and specific time frame, eg nominating a person to act on your behalf while overseas. This attorney is only valid while you are competent to direct the attorney.
- Financial Enduring Power of Attorney allows one person (the donor) to appoint another person (the attorney) to make financial and legal decisions for the donor. This power of attorney continues to operate if the donor becomes incompetent and unable to make reasonable decisions.
- Medical Enduring Power of Attorney gives someone the power to make medical decisions on your behalf, for example, a decision to agree to or refuse surgery. This power of attorney can only make decisions if the donor becomes incompetent and unable to make reasonable decisions.

- Enduring Power of Guardianship. Guardianship is the appointment of a person (a guardian) to make personal and lifestyle decisions for an adult with a disability (the represented person) when they are unable to do so. A guardian may make decisions about the healthcare the person receives, where they live, and what services they are given. All orders are reassessed by the Guardianship Tribunal within three years of appointment and can be cancelled
- Supportive attorney appointments are about promoting autonomy and dignity for a person who is able to make various decisions themselves, provided they have support to make and give effect to those decisions.

when no longer needed.

Further information is available from the:

Office of the Public Advocate
Level 5, 436 Lonsdale Street
Melbourne Vic 3000
Telephone Toll free 1300 309 337
Website: www.publicadvocate.vic.gov.au

Privacy and Confidentiality

Barwon Health Residential Aged Care is committed to protecting the privacy of aged care residents, staff and volunteers at our residences, and to the confidentiality of any information relating to them. If you would like to view our Privacy Policy, you can do so on our website or by asking the Facility Manager.





Quality Improvement and Accreditation

The Barwon Health Residential Aged Care program is committed to providing quality care and services.

Staff are involved in quality improvement and facilitate our quality improvement program. Some components of this program include:

- Seeking feedback from residents and representatives
- Collating feedback to enable improvement of our care and services.

Quality improvement is an integral component of accreditation and is a requirement of all health care organisations wishing to establish or maintain accreditation.

Accreditation is an internationally recognised evaluation process used in many countries to assess the quality of care and services provided in a range of areas. Accreditation programs focus on continuous quality improvement strategies. In Australia, Residential Aged Care homes are required to be accredited to receive Australian Government subsidies.

The Barwon Health organisation is involved in multiple Accreditation programs. Barwon Health's Residential Aged Care Facilities are supported by the Australian Aged Care Quality Agency Accreditation (AACQA) program.

Extensive information about the Accreditation process is available on the The Australian Aged Care Quality Agency (AACQA) website

https://www.aacqa.gov.au/

See <u>Fact Sheet 1: Accreditation</u> Standards for Aged Care.

Resident/Representative Meetings

Meetings for residents and their representatives are held in each lodge. These meetings provide an opportunity for all attendees to be included in the decision making process.

Residents' Advisory Committee

There is a Resident Advisory Committee established to provide a forum for residents to have input and participate in decision-making regarding issues that will affect their lives in residential care.

The issues that are raised and discussed in this meeting are those that often affect residents across residential care. If you are interested in joining please see your Facility Manager/Nurse Unit Manager for further information.





Safety

Barwon Health's Residential Aged Care facilities are both working and living environments. The balance between the needs of residents and the occupational health and safety of staff needs to be monitored and maintained.

Our living environment is continually assessed and managed to ensure it is safe and comfortable for residents and staff. Any changes to resident's individual areas will be fully discussed with them first.

Playground Safety Rules for McKellar Town Square Precinct

The playground is provided for the enjoyment of children and their families.

Please observe the following rules as conditions of use for this playground:

- 1. Children must be supervised by a parent or adult at all times.
- 2. It is designed for children, aged 3-12 years old. Parents or adults may support play, but may not use the equipment.
- 3. No standing or climbing on the outside of the playground equipment.
- 4. No running.
- 5. No toys on, or around playground equipment.
- 6. No food or drink on playground equipment.

Caution

In warm weather, the playground equipment may become very hot. Supervising parents or adults should check before allowing children to play on the equipment.

Security

If you plan to leave your facility for any reason or amount of time, please inform staff. After hours security is provided across the lodges including securing external entrances/exits.

Management and staff accept no responsibility for the safety and security of valuables and possessions.

Barwon Health can provide a key to securely lock valuables within your room, which can be requested on admission. It is the resident's responsibility to keep this key safe. Replacement keys will incur a cost, please refer to your residential agreement.

All Barwon Health staff and contractors must wear their identification badges for security and courtesy reasons. If you have any difficulty in identifying staff – please see your Facility Manager/Nurse Unit Manager.





Security of Tenure -Transfer to Other Units/Changing Rooms

Any transfer or change of room will only occur after full consultation with the resident and their family/representative. Please refer to your Residential Aged Care Agreement. See example below **Security of Place** (**Tenure**):

The Approved Provider shall not allocate an existing Care Recipient's place to another Care Recipient unless:

- The Care Recipient cannot be cared for with the resources available to the Approved Provider; or
- The Care Recipient informs the Approved Provider in writing, that the Care Recipient wishes to move to another location; or
- The Care Recipient informs the Approved Provider, in writing, that the Care Recipient no longer wishes to receive the care; or
- The Care Recipients condition changes to the extent that:-
 - The Care Recipient no longer needs care: or
 - The Care Recipient's needs can be more appropriately met by other type of service or care.

Signing and Witnessing of Legal Documents

Barwon Health's organisational policies prevent staff from signing or witnessing any legal documents on behalf of residents or their relatives/friends. This excludes Consent to Medical Treatment forms.

Smart Moves

The McKellar Centre is committed to reducing risk in the workplace and improving quality of care. Residential Aged Care has implemented the Smart Moves patient manual handling system for staff. This system trains staff to transfer residents safely and comfortably.

In order to meet this commitment, residents are assessed upon admission in relation to their ability to move in bed, sit up, stand and walk.

If assistance is required, nurses will use mobility devices such as walking aids, standing or ceiling hoists to transfer residents in comfort and safety whilst reducing the risk of injury for staff.

Clothing style is also important with the Smart Moves system. Split back clothing is recommended for residents who have difficulty with sitting balance or find it difficult to bring their weight forwards in a chair. Larger sized clothing that stretches easily is also recommended for residents who have difficulty stretching out their limbs, or require







assistance dressing themselves. Modified clothing such as this makes the dressing/undressing process more comfortable for residents and also aids in preventing staff injury. Clothing that is of a stretch fabric is encouraged.

Smoke Free Policy

All Barwon Health sites, including the McKellar Centre and Alan David Lodge, are 'Smoke Free' zones. However, under our policy 'Rules of Occupancy and Rights of Residents'. residents can smoke in designated external areas within the grounds. To find out where these areas are, please talk to your Facility Manager/Nurse Unit Manager. This exemption does not apply to visitors, who will be reminded they are not allowed to smoke on site.

We encourage you to consider giving up smoking.

Telephone Calls

Residents can make or receive telephone calls as they wish. A cordless phone is available and can be taken to a resident at any time. For you and your family's convenience, pay phones are available in most facilities.

Private phone lines can be connected in your room at your expense and should be discussed with your Facility Manager/Nurse Unit Manager.

Televisions

Residents are welcome to bring in their own television for use in their bedroom; however Barwon Health requires that certain regulations are met:

Percy Baxter Lodges

The television must be kept on a purpose built stand to ensure the appliance is secure at all times.

Wallace Lodge, Blakiston Lodge and Alan David Lodge

The television must be flat screen with built in tuner, wall mountable and not exceeding 80 cm in size.

Televisions will be positioned in consultation with the resident and the McKellar Centre Engineering Department. Installation of the TV will only occur after it has been tested and tagged by the Engineering Department.

Wireless headphones are required for use with all televisions. This is to minimise noise and disruption to other residents within the home.

Upon request, Barwon Health will:

- Supply and install a wall mounted television bracket free of charge.
- Mount and commission the television free of charge.
- Maintain ownership of the mounting bracket.







Please discuss with Facility Manager/Nurse Unit Manager prior to purchasing a television.

Televisions and headphones are at the resident's expense and remain the property of the resident.

Therapy

Residential care supports residents to access services such as physiotherapy, occupational therapy, speech pathology, dietetic services, podiatry and social work. Assessments are conducted to identify individual needs and preferences.

Assistance in accessing complementary therapy, such as massage, can be provided. A fee will apply for this service. The individual lodge can provide information regarding additional and complementary therapies.

Visiting Pets

Each of our Facilities has resident pets.

Relatives and friends wishing to bring a pet into the facility to visit a resident must:

- obtain permission from the manager;
- make arrangements for time and place for the visit/s to occur;
- ensure the pet is appropriately restrained;
- ensure the pet is clean, wormed and vaccinated (as appropriate);
- ensure you clean up after your pet.

Visitors

Visitors are welcome at any time. There are no specified visiting hours, however we expect visitors to respect residents' privacy and dignity, particularly in the morning during peak times of resident care. We welcome and encourage children and young adults to visit their family member, as it is acknowledged that interaction between young and old can be positive and rewarding.







Voting and Electoral Procedures

Residents are supported to continue voting if they choose to do so. The Victorian Electoral Commission (VEC) states that it is important to ensure that all residents of aged care facilities are correctly enrolled for Federal and State Elections.

Voting usually takes place several days before the election. Once a resident has voted, he/she is not eligible to vote again on election day. Alternatively residents may choose to attend a public polling booth. Residents confined to bed can be assisted to vote in their room.

Assistance in completing a ballot paper will be available by a member of the VEC Team as staff are not permitted to assist.

Appendix 1: Lifestyle Activities

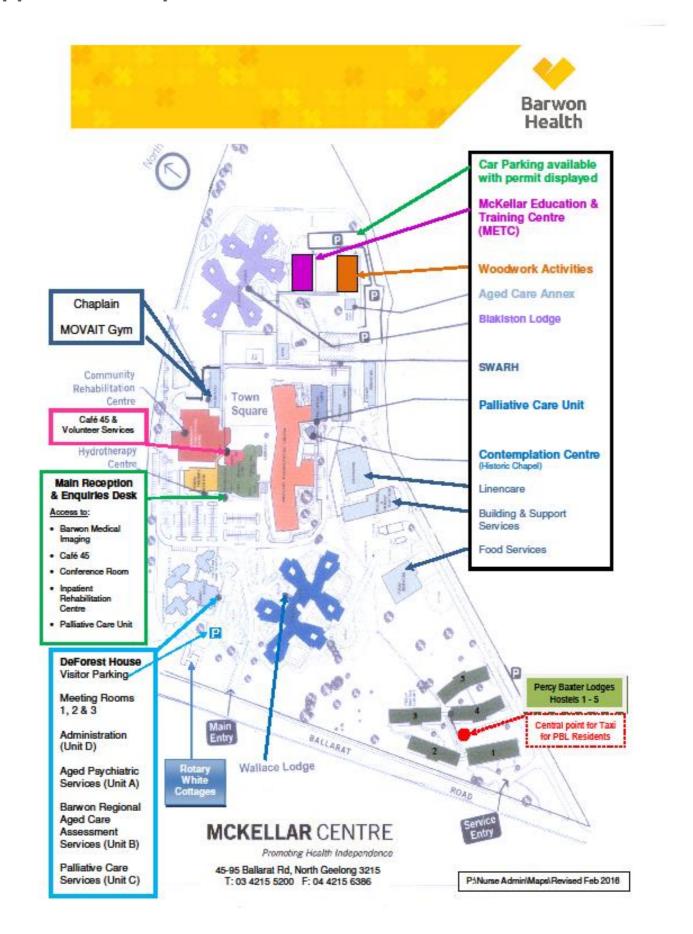
Sample of Lifestyle Activities Program in Residential Aged Care

Which covers Standard 3 - Resident Lifestyle

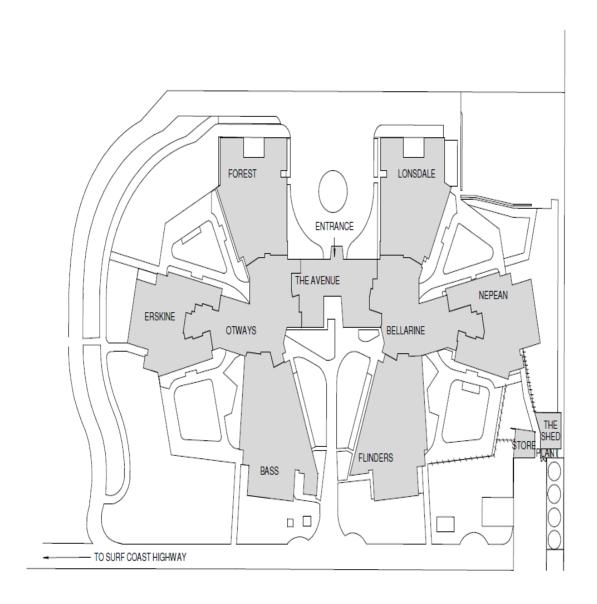
- Independence
- Leisure Interest and Activities
- Cultural and Spiritual Life
- Choice and Decision Making

Independence	Religious Services	Leisure Groups/Clubs	Food	Music/ Relaxation	Outings
Residents' Meetings	Contemplation Centre	Art Group	BBQ	Music therapy	Shopping trip
Newspaper group	Anglican	Craft group	Cooking group	Concerts	Lunch outings
Crossword group	Catholic	Ceramics	Fish and Chip nights	Singing groups	Bus trips
Library/Book Exchange	Presbyterian	Woodwork	CALD cooking	Christmas Carols	McKellar Fete
Quiz and games	Uniting Church	Gardening	Coffee club	Movie nights	Wallace Lodge Market Days
Bingo	Ecumenical service	Exercise		Pet therapy	Vintage car parade
Computer	ANZAC Day Service	Bocce		Hairdresser	Morning Melodies
School students groups	Remembrance Day Service	Knitting group		Nail care	
Voting in Elections		Ten Pin bowling			
		Playgroup			
		Fishing Group			

Appendix 2: Map of the McKellar Centre



Appendix 3: Map of Alan David Lodge





Fact Sheet 1: Accreditation Standards for Aged Care



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 care recipients, their representatives, staff and stakeholders, and the changing environment in which the service operates.

Intention of standard: This standard is intended to enhance the quality of performance under all Accreditation Standards, and should not be regarded as an end in itself. It provides opportunities for improvement in all aspects of service delivery and is pivotal to the achievement of overall quality.

1.1 Continuous improvement

The organisation actively pursues continuous improvement.

1.2 Regulatory compliance

The organisation's management has systems in place to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards and guidelines.

1.3 Education and staff development

Management and staff have appropriate knowledge and skills to perform their roles effectively.

1.4 Comments and complaints

Each care recipient (or his or her representative) and other interested parties have access to internal and external complaints mechanisms.

1.5 Planning and leadership

The organisation has documented the residential care service's vision, values, philosophy, objectives and commitment to quality throughout the service.

1.6 Human resource management

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.

1.7 Inventory and equipment

Stocks of appropriate goods and equipment for quality service delivery are available.

1.8 Information systems

Effective information management systems are in place.

1.9 External services

All externally sourced services are provided in a way that meets the residential care service's needs and service quality goals.

Standard 2

Health and personal care

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

2.1 Continuous improvement

The organisation actively pursues continuous improvement.

2.2 Regulatory compliance

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.

2.3 Education and staff development

Management and staff have appropriate knowledge and skills to perform their roles effectively.

2.4 Clinical care

Care recipients receive appropriate clinical care.

2.5 Specialised nursing care needs

Care recipients' specialised nursing care needs are identified and met by appropriately qualified nursing staff.

2.6 Other health and related services

Care recipients are referred to appropriate health specialists in accordance with the care recipient's needs and preferences.

2.7 Medication management

Care recipients' medication is managed safely and correctly.

2.8 Pain management

All care recipients are as free as possible from pain.

2.9 Palliative care

The comfort and dignity of terminally ill care recipients is maintained.

2.10 Nutrition and hydration

Care recipients receive adequate nourishment and hydration.

2.11 Skin care

Care recipients' skin integrity is consistent with their general

2.12 Continence management

Care recipients' continence is managed effectively.

2.13 Behavioural management

The needs of care recipients with challenging behaviours are managed effectively.

2.14 Mobility, dexterity and rehabilitation

Optimum levels of mobility and dexterity are achieved for all care recipients.

2.15 Oral and dental care

Care recipients' oral and dental health is maintained.

2.16 Sensory loss

Care recipients' sensory losses are identified and managed effectively.

2.17 Sleep

Care recipients are able to achieve natural sleep patterns.

www.aacqa.gov.au

Accreditation Standards

Standard 3

Care recipient lifestyle

Principle: Care recipients 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.

3.1 Continuous improvement

The organisation actively pursues continuous improvement.

3.2 Regulatory compliance

The organisation's management has systems in place to identify and ensure compliance with all relevant legislation, regulatory requirements, professional standards, and guidelines, about care recipient lifestyle.

3.3 Education and staff development

Management and staff have appropriate knowledge and skills to perform their roles effectively.

3.4 Emotional support

Each care recipient receives support in adjusting to life in the new environment and on an ongoing basis.

3.5 Independence

Care recipients are assisted to achieve maximum independence, maintain friendships and participate in the life of the community within and outside the residential care service.

3.6 Privacy and dignity

Each care recipient's right to privacy, dignity and confidentiality is recognised and respected.

3.7 Leisure interests and activities

Care recipients are encouraged and supported to participate in a wide range of interests and activities of interest to them.

3.8 Cultural and spiritual life

Individual interests, customs, beliefs and cultural and ethnic backgrounds are valued and fostered.

3.9 Choice and decision-making

Each care recipient (or his or her representative) participates in decisions about the services the care recipient receives, and is enabled to exercise choice and control over his or her lifestyle while not infringing on the rights of other people.

3.10 Care recipient security of tenure and responsibilities

Care recipients have secure tenure within the residential care service, and understand their rights and responsibilities.

Standard 4

Physical environment and safe systems

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

4.1 Continuous improvement

The organisation actively pursues continuous improvement.

4.2 Regulatory compliance

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.

4.3 Education and staff development

Management and staff have appropriate knowledge and skills to perform their roles effectively.

4.4 Living environment

Management of the residential care service is actively working to provide a safe and comfortable environment consistent with care recipients' care needs.

4.5 Occupational health and safety

Management is actively working to provide a safe working environment that meets regulatory requirements.

4.6 Fire, security and other emergencies

Management and staff are actively working to provide an environment and safe systems of work that minimise fire, security and emergency risks.

4.7 Infection control

An effective infection control program.

4.8 Catering, cleaning and laundry services Hospitality services are provided in a way that enhances care recipients' quality of life and the staff's working

care recipients' quality of life and the staff's working environment.



www.aacqa.gov.au

BRO_CAH_0011 V14.1

Fact Sheet 2: Falls Prevention

I want to stay independent: Slips, trips and broken hips are not for me

Preventing Falls and Harm From Falls in Older People

Best Practice Guidelines for Australian Residential Aged Care Facilities 2009

Did you know that nearly half of all people living in residential aged care facilities fall each year? While some falls cause no injuries, others can cause serious harm. Falls can also result in you fearing further falls and make it harder for you to stay independent.

There are usually a number of reasons for someone falling. These may include poor balance, incontinence, unfamiliar environments and obstacles in the environment, poor eyesight, unsafe footwear and some medicines, to name a few.

Aged care staff can help you to reduce your risk of falling by:

- helping you to settle in, keeping your surroundings safe, and providing you with falls prevention information
- assessing your risk of falling and discussing the results with you
- developing and implementing a care plan suited to your needs (your risk of falling will be reviewed regularly)
- organising other health professionals to manage the causes of you being at risk of falling.

Everyone has a role to play in preventing falls.

What can you do?

- Be active every day in as many ways as you can; participate in supervised exercise classes at your facility.
- Wear comfortable clothing that is not too long or loose. Whenever you are up and about, wear comfortable, low-heeled and nonslip shoes that fit you well, rather than slippers.
- Use your call bell when you require assistance, especially for going to the bathroom, and keep the call bell in easy reach.

- Take your time when getting up from sitting or lying down.
- If you have your prescribed walking aid, make sure it is in good condition and that you use it rather than using furniture or walls for balance.
- Let staff know if you feel unwell or unsteady on your feet.
- If staff recommend that you need assistance or supervision when moving, please ask them for this assistance and wait until they come to help you.
- Look out for environmental hazards such as spills and clutter that may cause a fall, and tell staff about them promptly.
- If you have spectacles, only wear your distance ones when walking. Take special care when using bifocal or multifocal glasses.
- Eat healthily and keep your fluid levels up, because dehydration can disorient you.
- Wear your hip protectors if you have them.

What happens if you fall?

If you do fall, staff should take action to identify what contributed to your fall and reduce the risk of you falling again. You may be assessed by a doctor, and staff will repeat some or all of your fall risk assessment. This may mean that your care plan is changed. However, any changes to your care plan will be discussed with you.

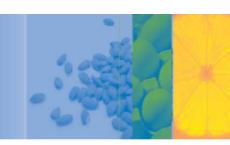
This fact sheet has been adapted from *Preventing Falls and Harm From Falls in Older People:*Best Practice Guidelines for Australian Residential Aged Care Facilities 2009, developed by the Australian Commission on Safety and Quality in Health Care.

AUSTRALIANCOMMISSIONON SAFETYANDQUALITYINHEALTHCARE

Fact Sheet 3: Food Safety Tips

Food Safety Tips

Over five million cases of food poisoning in Australia each year can be reduced if you follow these simple rules.



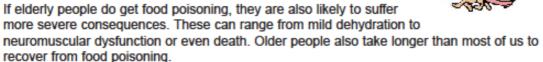
Do you cook and bring food to an elderly relative or friend in an aged care facility?

This fact sheet has been kindly sponsored by Compass Group (Australia) as a service to aged care facilities.

It's really nice to show you care by cooking special favourite meals for the resident of an aged care facility - perhaps culturally specific food or a family favourite which is not normally available in that facility.

But if you do, you really wouldn't want to make them sick, so there are some things you need to know.

Our immune systems get weaker as we get older. Also our stomachs produce less acid which makes it easier for harmful germs to get through the digestive system and invade our bodies.



There are some foods that pose a higher risk than others, particularly of passing on a Listeria infection which is dangerous for the elderly.

What are the higher risk foods?

Cold meats	Cooked or uncooked, packaged or unpackaged eg roast beef, ham etc.
Cold cooked chicken	Purchased whole, portions, sliced or diced
Pate	Refrigerated pate, liverwurst or meat spreads
Salads	Pre-prepared or pre-packaged fruit, vegetables or salads eg from salad bars, retail outlets etc.
Chilled seafood	Raw or smoked ready-to-eat eg oysters, sashimi or sushi, smoked salmon or trout, sandwich fillings, pre-cooked peeled prawns such as in prawn cocktails and salads
Cheese	Pre-packaged and delicatessen soft, semi soft and surface ripened cheeses eg brie, camembert, ricotta, feta and blue
Ice cream	Soft serve
Other dairy products	Unpasteurised dairy products eg raw goats milk, cheese or yoghurt made from raw milk



For full details please refer to the pamphlet 'Listeria and food' on the FSANZ website, http://www.foodstandards.gov.au/ srcfiles/Listeria.pdf

Foods made with raw egg such as home-made egg mayonnaise, hollandaise sauce, uncooked cakes and desserts and egg-nog can also be dangerous for the elderly.

You should not provide these foods to an elderly resident.

The elderly person may also have special dietary requirements or restrictions of which you are unaware. Please check with the staff before providing food to an elderly resident.

What precautions should I take when preparing foods?

There are no special rules for cooking for elderly people - you just need to be even fussier than normal. If you plan to take chilled or frozen food you have cooked yourself, make sure that the food is cooled quickly in your refrigerator: never at room temperature. Always wash your hands well under running water using soap and dry thoroughly before handling food.



You can get information on preparing food safely from the fact sheet 'Protecting Tiny Tummies and Sensitive Systems' and other fact sheets on the Food Safety Information Council website, www.foodsafety.asn.au.

How can I transport food safely for an elderly person?

You will need to transport your food to the aged care facility so take care that it is protected from contamination during transport and, if it is chilled food, it is kept cool or if you are taking it hot, you keep it hot during the journey.

Food should be kept at 5 degrees Celsius or cooler or, for hot food, at 60 degrees Celsius or hotter. Between 5 and 60 degrees is known as the temperature danger zone because harmful bacteria multiply to dangerous levels in food when it is kept between these temperatures.



Put cold food into a cooler with ice packs when travelling to visit your relative or friend. Don't pack food if it has just been cooked and is still warm. Coolers cannot cool food they can only keep cold food cool. Always cover pre-prepared foods securely and prechill them, for example, keep in the refrigerator overnight. Other perishable foods and drinks, such as deli products, cooked chicken and dairy products must also be cold when put in the cooler.

Hot food is difficult to keep hot and is best avoided if you are travelling long distances. It is best to chill the food overnight and reheat it at the residence. If you must take hot food on a longer journey, an insulated jug, preheated with boiling water before being filled with the steaming hot food, can be used.

If you are unsure whether the jug will keep the food above 60 degrees Celsius, try filling it with water at 90 degrees Celsius, seal and test the water temperature after the length of time you expect your journey to take. If it is still above 60 degrees then you can use the jug. You will need a food thermometer to do this test. If any perishable food you bring is not eaten immediately, make sure it is refrigerated before you leave.

Reheating food

Different aged care facilities will have different rules about reheating food provided by friends or relatives. In some, staff will reheat the food, in others, staff are not permitted to do so. In some facilities, the elderly person can reheat the food themselves, in others the person providing the food must do the reheating.

Check with the staff to find out the rules in that facility. Make sure that staff know that you have brought in food and ask them how to go about re-heating it.

Food needs to be reheated to a minimum of 75 degrees Celsius or 70 degrees Celsius for two minutes to kill any bacteria or viruses that might be present in the food.



Reheating food in a microwave oven

If you are reheating food in a microwave, you need to be especially careful that the food is heated evenly.

Food heated in a microwave oven does not heat uniformly and unwanted germs may survive in portions of poorly heated food.

Manufacturers recommend standing times to help alleviate the problem of uneven heating. Many microwaveable meal packs carry the instruction to stir the food part way through the cooking process. Items such as lasagne that can't be stirred should be allowed standing time to allow the whole product to reach a uniform temperature.

How evenly the food will heat will also depend on the thickness of portions and on the composition and moisture content of the food.

Frozen food needs to be completely thawed before reheating.

If you are reheating a commercially prepared food, read and follow all the manufacturers' microwaving instructions.



Storage of the food you bring in

If any perishable food you have provided is not eaten immediately, tell the staff and ask them about storing the food in a refrigerator.

Some elderly people like to keep extra food in their rooms in drawers or bedside tables for eating later. While this is okay for shelf-stable foods like cakes, biscuits and chocolates, this can be very risky with perishable food such as cold meats, custard or cream filled cakes and cooked vegetables and meat dishes.

Leaving perishable food in the temperature danger zone for too long before eating can result in foodborne illness. Food which can cause food poisoning may not look or taste spoiled.

Sometimes elderly people can also forget how long the food has been there.

If you bring commercially prepared food make sure the elderly person is aware of any 'best before' or 'use by' date on the food.

Make sure you tell the staff if the elderly person has some perishable food in their room.

Remember:

When you bring food into an aged care facility for a relative or friend it is you and not the staff who is responsible for its safety.

If you are cooking for an elderly person, please check the fact sheet 'Protecting Tiny Tummies and Sensitive Systems' under 'publications' on the Food Safety Information Council's website www.foodsafety.asn.au for more information on preparing food safely.

Food Safety Information Council

The Food Safety Information Council is a non-profit group with representatives of State and Federal governments, food industry and professional associations. Membership is open to any organisation with an interest in promoting safe food handling practices for consumers.

We aim to reduce the over five million cases of food poisoning in Australia each year by educating consumers to handle food safely from the time it leaves the retailer until it appears on the plate.

We organise Food Safety Week each November as part of our campaign to pass on simple messages to improve consumers' knowledge of how to handle, store and cook food safely.

For more information

Telephone Project Co-ordinator: 0407 626 688 (mobile)

Email: info@foodsafety.asn.au Website: www.foodsafety.asn.au











GET THE FLU SHOT BEFORE THE FLU GETS YOU



Flu shot available now

Consumer fact sheet

- Vaccination is the single most effective way of preventing the spread of fluin the community.
- If you want to protect yourself from the flu, get vaccinated every year because the flu virus is constantly changing.
- The flu vaccine is available free under the National Immunisation Program from April 2016 for those people who have the greatest risk of becoming severely ill from flu.
- Flu vaccines are age-specific, so parents should tell their doctor the age of their child before vaccinating.

WHAT IS THE FLU?

Influenza (flu) is a highly contagious viral infection that spreads easily from person to person through coughing, sneezing and close contact.

The flu virus infects your nose, throat and sometimes your lungs. Unlike a cold, symptoms such as fever, sore throat and muscle aches develop suddenly with flu and last about a week. In some cases, severe illness and complications such as pneumonia and bronchitis can develop, which can result in hospitalisation and even death. The flu can also make some existing medical conditions worse.

WHY SHOULD I GET THE FLU SHOT?

Annual vaccination is the best way of preventing the flu and any associated illness.

You should get the flu shot every year because the flu virus is constantly changing. Every year, the flu vaccine changes too, so it protects against the flu strains which are most likely to be around during that winter.

Being vaccinated in autumn allows time for the vaccine to work before the flu season starts and offers protection throughout the winter months. Even if you received a flu shot towards the end of the last flu season, you should still be vaccinated again before this flu season.

The flu vaccine does not contain any live virus, so you cannot get the flu from the vaccine.

WHO IS ELIGIBLE FOR THE FREE FLU SHOT?

Vaccination experts recommend the flu vaccine for everyone from six months of age, however the vaccine is free under the National Immunisation Program for people at high risk of complications. They are:

Pregnant women

Pregnant women are at higher risk of severe complications associated with the flu. Vaccinating against flu at any stage during pregnancy is safe and also provides some protection for babies during their first, vulnerable months of life.

Aboriginal and Torres Strait Islander people

All Aboriginal and Torres Strait Islander people from six months to less than five years of age, and 15 years of age and over, are eligible for free flu shots.

People 65 years and over

People aged 65 years and over have the highest risk of complications associated with seasonal flu.

People with certain medical conditions

People with some existing medical conditions are more likely to experience complications from flu. These include anyone who is six months of age and over who has:

- heart disease
- severe asthma
- chronic lung condition
- chronic illness requiring medical follow-up or hospitalisation in the past year
- · diseases of the nervous system
- impaired immunity
- diahetes
- children aged six months to 10 years on long-term aspirin therapy





GET THE FLU SHOT BEFORE THE FLU GETS YOU Flu shot available now

FLU VACCINE FOR CHILDREN

The flu vaccines are age-specific. Make sureyour vaccination provider knows how oldyour child is so they can receive the correct dose and brand of vaccine.

FLU VACCINE SAFETY

Common side effects usually occur within one to two days following fluvaccination and include soreness, redness, pain and swelling at the injection site, drowsiness, tiredness, muscle aches and low grade fever. If these side effects occur they are usually mild and go away within a few days, usually without any treatment.

There may be a small increase in the risk of fever when a child receives both the flu vaccine and the pneumococcal disease vaccine (Prevenar 13) at the same time. These two vaccines can be given separately, with a least a three day interval between them, to reduce the likelihood of fever. If you are concerned, you should discuss this option with your doctor or vaccination provider.

You are encouraged to report any adverse event following the flu vaccine to your doctor or vaccination provider, to the Adverse Medicines Events Line on 1300 134 237, or to the Therapeutic Goods Administration (TGA) through the 'Report a problem' link on the TGA website.

WHERE CAN I GET THE FLU SHOT?

Vaccines are available from April 2016 from doctors and other vaccination providers.

CONTACT LIST

State and territory contact numbers:

ACT: 02 6205 2300 NSW: 1300 066 055 NT: 08 8922 8044 WA: 08 9321 1312 SA: 1300 232 272 TAS: 1800 671 738

VIC: 1300 882 008

QLD: 13 HEALTH (13 43 25 84)

For more information about the 2016 seasonal influenza vaccine, visit immunise.health.gov.au or call the Immunise Australia Information line: 1800 671 811.

A more detailed fact sheet, Australian Technical Advisory Group on Immunisation (ATAGI) information for individuals and families on the influenza vaccines available in 2016, is also available on the Immunise Australia website.

All information in this fact sheet is correct as at 22 March 2016 and valid for the 2016 influenza season.

FACT SHEET

Flu Season 2016

NOTES

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