

RESIDENT HANDBOOK



“Working Together To Provide Excellence in Care Everyday”



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WELCOME

Thank you for your welcome inquiry regarding our Aged Care facilities. We hope that this booklet will answer any questions you may have regarding the Society.

You are warmly invited to look at our facilities, talk to other residents and staff, join in on activities or perhaps share a meal. Please phone in advance to arrange a suitable time for tours or to find out what activities are on.

Please do not hesitate to contact us if you should have any further queries, or require any additional information.

HOW TO READ THIS HANDBOOK

The Society's services are bound to Federal Legislation in the Aged Care Act 1997. Our services are fully accredited and in terms of the Act fall into 4 categories of assessment. The information in this handbook is arranged in the 4 categories which are:

1. Management Systems, Staffing and Organisational Development
2. Health and Personal Care
3. Resident Lifestyle, and
4. Physical Environment and Safe Systems

The contents page has been arranged to reflect this arrangement. We have also included a subject index in alphabetical order to assist locating information on a specific subject.

The Federal Government also has a very useful website regarding aged care in general and readers are encouraged to visit <http://www.myagedcare.gov.au/>



Our Management Systems, Staffing and Organisational Development

GENERAL INFORMATION

The Lower Burdekin Home for the Aged Society was formed in the late 1960's in response to the then developing issues in caring for the aged in the Burdekin community. The Society is a non-denominational member organisation. Currently the Society operates two facilities in Ayr and Home Hill catering for residential aged care.

Oversight for strategic operations is conducted by the Society's Board of Directors. The Members of the Board of Directors are elected at an Annual General Meeting and meet monthly. The Board of Directors provides leadership and has overall responsibility for the Society's achievements, the quality of care and the Society's resources. Members of the Board of Directors perform in a voluntary capacity.

OUR GOAL

The goal of The Society is to provide high quality, individual, and personal care in a respectful, dignified manner which incorporates the physical, emotional, social, spiritual, education and rehabilitation needs of the residents.

Our aim is to provide a home-like atmosphere where residents can feel valued and at home. Within this environment, residents will grow to feel secure and relaxed, and also have the opportunity to maintain skills and interests. At the same time, new skills can be developed and thereby residents can continue as active members of the community and manage their own financial affairs for as long as possible.

The Society provides accommodation for elderly people that range from those who need some help with daily tasks such as bathing, dressing, laundry, medications etc. right up to those who need full assistance. Whilst one of the features of the Society is that support is available, it is the aim of the staff to encourage residents to live as independently as possible for as long as possible.

PHILOSOPHY

The goal of Management and staff of the Lower Burdekin Home for the Aged Society is:- "To enrich life for our elderly residents by providing opportunities through quality health and residential services, in partnership with the individual, family, friends and community, to make aging a meaningful part of life. The Lower Burdekin Home for the Aged offers services which encompass the areas of health promotion, treatment and rehabilitation to allow residents an optimal health status." The Lower Burdekin Home for the Aged Society is committed to achieving and maintaining accreditation through provision of continuous quality improvement.

MISSION STATEMENT

"Working Together To Provide Excellence In Care Everyday"



OBJECTIVES

1. To foster an innovative attitude, which enables us to be flexible and responsive to the aged residents and relative's needs.
2. To value the individual by promoting personal freedom, right of choice and independence.
3. Provide holistic care within an environment which is home like and secure enabling residents to age with dignity.
4. Promote activities that foster integration with other residents that would enhance positive outcome. To continually encourage the development of expertise and skills in our employees.
5. To create and promote harmonious relationships between Management, residents and staff.

IS IT TIME TO MOVE

Leaving your own home is a big decision, and one of the hardest you might ever have to make. There are so many things to consider – your memories and habits, medical needs, financial limits, the family and good neighbours.

One of the most frightening things about leaving your own home may be the suspicion that you may not be able to hold onto what is rightfully yours – your independence and your self-respect. The adjustment to communal living may also seem daunting. When you feel the time is right we will every effort to assist you with a smooth transition.

ADMISSION PROCEDURE

The Process we follow is simple enough:

1. We review with you the care assessment and related needs
2. Ensure that our services and available rooms properly match those needs, and then
3. Discuss your admission and any related issues such as decision making and finance

A signed Aged Care Client Record (ACCR) is needed when requesting aged care services, including respite care. An Aged Care Assessment Team (ACAT) will complete the ACCR form following assessment and approval for the level of care required. ACAT can be contacted in Townsville, (07 4799 9350) to explain the process of gaining approval. Once ACAT approval is received an application for admission is required to be completed before the consideration of acceptance of admission can occur. This form is included in the admission package. Prospective residents or relatives of the resident, need to make arrangements for an interview prior to admission.

The financial aspects of the admission will have to be explained, and details of income and assets taken. Please make an appointment with the Society's Manager to arrange this. Again we require this information before we can consider accepting your application.

Once these details have been finalised, a "Residential Care Services Agreement" is required to be signed. The agreement details the facility where the Resident will live and financial arrangements, including Accommodation Charges/Accommodation Bonds that may be payable. These charges or bonds that may be payable, will be explained in detail at a pre-admission interview.

SECURITY OF TENURE

Security of tenure is the security, or legal right of occupation, that a person has when a place in an aged care home is accepted.

Every effort is made to ensure residents move into the most appropriate room which is reflective of their care needs.



LEAVING OUR FACILITY

Residents are free to move from the facility at any time, be it for reasons of re-locating to another care environment or returning home to live with their family. A resident leaving our Facilities is subject to the terms and conditions agreed with the resident at the time of entry and individual circumstance.

Care is required in making these decisions. The Federal Government practice has been to preserve favorable terms and conditions for the term of an Agreement (grandfathering provisions). If the Agreement is broken only to be renewed at a later date then it may be the same terms and conditions will not be available.

On discharge from the facility the resident/relative must ensure any keys to the resident's room are handed into the Administration. All personal belongings (e.g. furniture and clothing) are to be removed. Upon discharge, the facility is unable to accept donations of clothing. If the resident has a change account with administration this account must be closed by the resident/representative.

FEES AND FINANCE

The Society operations are controlled by the requirements of the Aged Care Act 1997. Fees and charges are those prescribed by the Department of Health and extra charges for non-regulated services as they may apply from time to time.

Residents will pay daily fees subject to the outcome of a Means Test for Asset and Income. **This means test is in addition to the pension means test and is calculated differently.** Its completion is a requirement prior to any offer of entry we might make.

Your fees will fall into three subcategories:

1. Basic Daily Living,
2. Means Tested Care Fee, and
3. Accommodation Fee.

All three fees will have particular options attached to them. Whether you pay nothing, something or the lot is determined by the Federal Government based on the financial disclosures you make in the application for Means Testing. We will be happy to assist with any questions you have and assist in the completion of the relevant application subject to appointment.

A good resource is the Federal Government's "My Aged Care" website – www.myagedcare.gov.au

PRIVACY AND CONFIDENTIALITY OF CLINICAL RECORDS

As an aged care service The Society is bound to collect a range of personal/health information according to the *Aged Care Act 1997* which is used to ensure the appropriate level of care and service is provided to residents. Information includes date of birth, next of kin, assessments, care plans and other documents which form a resident's medical record and some financial information. Access to your records is limited to the health care professionals involved in your care, the resident or their EPOA if applicable.

The Society is committed to ensuring the privacy of your personal information and the implementation of systems for responsible handling of personal information as required under the *Privacy Act 1988*. Systems are in place to ensure residents' personal information and other confidential information related to the management of the organization is safeguarded against loss, unauthorized access or disclosure. Under the *Privacy Act 1988*, residents must submit a written request to the General Manager or Director of Nursing to inspect clinical records. The LBHA Privacy Statement can be viewed on our website.



OUR PEOPLE LOOKING AFTER YOU

Care staff are on duty 24 hours per day. The Society also employs a Physiotherapist. Diversional Therapy staff are employed to cater for resident's activity, craft and recreational requirements. Food Services staff report to the Food Services Manager. The Hotel Services staff (eg cleaning, laundry, maintenance) report to the Hotel Services Supervisor. Care staff report to their respective supervisor.

In-service training programs, and other staff development programs are conducted regularly, to ensure staff maintain a high standard of practice.

TEACHING FACILITY

The Society is actively involved in accepting students on vocational placement. On a regular basis the Society has TAFE students on practical placement and high school students on work experience. All students are actively involved in the care of residents. Please inform management if you do not wish these students to be involved in your care.

VOLUNTEERS WANTED

The Society runs a Volunteers Program that is of immense benefit to the residents of the Ayr and Home Hill facilities. Volunteers assist with programs such as social interaction and companionship, newspaper reading and current event discussions, music/singing, helping with activity groups, gardening with residents and doing craft activities with residents, etc.

Further information is available by submitting an enquiry through our website or contacting the facility and asking for the General Manager.

GIFTS TO STAFF

It is Society policy that individual staff must not accept the gift of money, personal possessions or expensive items by residents/relatives. Small gifts may be given to individual staff (not exceeding a money value of \$10).

Resident/relatives wishing to make a gift to a particular staff area or a donation (monetary or selected items) to the whole facility, or a particular facility unit, in appreciation can discuss this with the Director of Nursing / Facility Manager.



CSC – COMPLIMENTS, SUGGESTIONS, COMPLAINTS – YOUR OPINION HELPS

We support your right to share compliments, feedback, suggestions and concerns or make a complaint.

We welcome compliments, suggestions and complaints as part of our commitment to provide a high quality service and aim to provide a welcoming environment for you to raise concerns and complaints.

*Tell us what we're doing well and where we can improve.
We appreciate hearing from you.*

We understand the importance of resolving matters promptly within our service and value open and timely communication. It benefits our ongoing relationship with you.

We will work with you to address concerns and resolve issues. Seeking to resolve concerns or complaints is part of our responsibilities.

A copy of our *Compliment and Complaint Handling Policy* is available for you to view. Please ask at reception.

Simply complete a **Compliment, Suggestion, Complaint (CSC) Form**
and lodge at reception in the locked letter box

For more information or to raise a concern, you are invited to speak with:

- **GENERAL MANAGER:** Mr. Jim Collins (**Mob: 0407 219 420**)
- **DIRECTOR OF NURSING/FACILITY MANAGER:** Mrs. Helen Davey
- **FOOD SERVICES MANAGER:** Mrs. Narelle Peach
- **HOTEL SERVICES SUPERVISOR:** Mrs. Carmel McGrath
- **SENIOR CARE STAFF:** (e.g. Care Manager, Registered Nurse)
- **MONTHLY RESIDENTS MEETING**

Contact Details:

AYR: 07 47830100 9a-27a Chippendale Street Ayr 4807
HOME HILL: 07 47909600 127-141 Tenth Avenue Home Hill 4806

- Complainants have the right to ask us for an internal reconsideration of decisions we have made in relation to their complaint (e.g. with a senior manager)
- If still dissatisfied with the decision, Complainants have the right to lodge an appeal in writing, with the *President of the Board of Directors (Lyndy McCathie 0410 321 215)*
- Complainants also have the right to lodge their complaint with an external agency:
 - **Aged Care Complaints Commissioner:** Phone 1800 550 552
(a free and confidential service for anyone to raise a complaint about Australian Government subsidised aged care).
 - **Aged and Disability Advocacy Australia (ADA):** Phone 1800 818 338
(a free and confidential service promoting the rights of aged care recipients).



How we approach your Health and Personal Care

CHANGE IN LEVEL OF CARE

Where a resident's health status significantly deteriorates and further care is required, the resident will need to be relocated to another area e.g. secure dementia unit, nursing home or nearby facility. The decision to transfer a resident depends on the overall care needs required and where this can best be provided.

The availability of beds in another area of the facility and the need to relocate will be discussed with the resident and their representative. Preplanning the transfer of a resident to another section of the facility is more beneficial for all concerned however due to residents changing care needs, it can also occur quite quickly.

Under some circumstances reassessment by the Aged Care Assessment Team (ACAT) may be required. Where a resident or resident representative disagrees with the facility assessment to transfer to another section, an independent assessor can be accessed.

MEDICAL REQUIREMENTS

Some of the local medical practitioners visit the facility, either on a regular basis or on an as required basis. Staff can provide a list of the medical practitioners who visit the Home. Residents can choose or change to a medical practitioner of their choice, however the resident / resident representative is responsible to ensure the medical practitioner is willing to accept them as a patient.

For those medical practitioners that visit regularly, the facility operates an appointment system, as it is time limited. A resident can request to see their doctor during these routine visits, however the registered staff are responsible for assessing which residents will actually see the doctor.

All efforts will be made to facilitate appointments, but we rely on family to assist, particularly if the consultation is off site. All residents are reviewed by their doctor at least once every three months.

Specific documents are required pre admission as per the Resident's Application Pack.

MEDICATION

SELF MEDICATION:

Residents can continue to self-medicate, where this can still be safely managed by the person. The Society has a duty of care to assess that the resident is competent initially on admission and regularly throughout their stay in the facility. If the resident is assessed not to be competent and they still wish to self-medicate, they can appeal via a complaints resolution mechanism available both within and external to the facility. Residents who have been deemed competent to self-medicate must keep the medication safe and secure (e.g. in a locked draw), inform facility staff of any difficulties they may encounter while self-administering, ensure they have adequate supply of self-administered medications and inform facility staff of all self-selected medications including complimentary medications. If assessment identifies that the resident requires assistance this will be discussed with the resident and/or resident representative prior to changes being implemented.



MEDICATION SYSTEM:

The Society has a contract for the use of a “Webster” medication administration system. The cost of webstering the medication is met by the Society. The cost of the actual medication is met by the resident.

MEDICATION REVIEWS:

The Society has a contracted pharmacist who arranges for resident medication reviews to be conducted to ensure optimal management of the resident’s medication occurs

ALLIED HEALTH

DENTAL CARE:

Residents are responsible for arranging their own dental treatment, however if assistance is required, staff are available to help. All costs associated with dental treatment are the resident’s responsibility. The resident’s family will be required to arrange and escort the resident to the appointment. Arranging for a dentist to visit the facility to treat a resident will depend on whether or not this service is provided by the individual dentist.

PODIATRY:

Podiatry services are provided by a visiting podiatrist. Services are provided to all residents who need them, however fees may apply to some residents. For those residents who are require to pay, they have the option of attending the facility podiatrist or another podiatrist, but are responsible to meet the costs of the podiatry care.

EYE SIGHT AND HEARING TESTS:

An optometrist visits the facility regularly to conduct eye tests and repair glasses. Some hearing services visit as required, to conduct hearing tests and repair hearing aids. Where the services of an eye or hear provider is required, that does not visit the facility, then the resident is responsible for arranging an appointment. Any costs are the responsibility of the resident. If assistance is required to arrange appointments, staff are available to help.

OCCUPATIONAL THERAPY AND SPEECH THERAPY:

A visit from an occupational therapist and speech therapist may be arranged depending on the resident’s health condition. Otherwise residents are responsible for arranging their own treatments. However if assistance is required, staff are available to help.

DIETICIAN:

The Society engages the services of a dietician to conduct annual review of residents menu’s and nutritional needs. Appointments will be made by the Society for those residents who require additional dietician services (fees may apply).

PHYSIOTHERAPIST:

The Society employs a physiotherapist. Residents requiring physiotherapy can access the service on a no cost basis. All residents are assessed regularly to identify if these services are required to assist the resident to maintain their level of function and movement.

ALTERNATIVE THERAPY

Subject to Society approval a resident can choose to access complementary therapies of their choice, however it is requested that the resident/relative does so in consultation. The cost of such services is met by the resident. The Society has specific requirements that must be met in the use of oils and burners for aromatherapy which residents are required to comply with for safety reasons.



AMBULANCE

Ambulance policy on transport:- besides emergencies, transport to appointments will only be considered if your doctor certifies that, medically, you cannot be transported in any other manner. Therefore residents will need to arrange their own transport to attend routine medical appointments.

TOILETRY GOODS

Toiletry goods are provided to all residents who need them (eg soap, toilet paper, tissues, toothpaste/toothbrush, shampoo/conditioner, shaving cream, deodorant, moisturizer, denture cleaning preparation). Where a resident does not like the brand/type the facility provides they have the option of providing their own.

MINOR TREATMENTS

Basic wound treatments (eg bandages, dressings, swabs, saline) are provided to all residents who need them.

Goods to assist with toileting and incontinence (eg commode chairs, bed pans/urinals, continence aids, over-toilet chairs, shower chairs, uridomes, etc) are provided to all residents who need them however fees may apply to some residents.

CARE – RELATED ISSUES

THERAPEUTIC HEATING DEVICES

In the interest of resident and staff safety the following therapeutic heating devices are not permitted to be used within our facilities:

- Hot water bottles
- Electric blankets
- Wheat heat packs
- Gel packs

Heat packs using hydroscopic beads such as ‘TheraBeads’ are an acceptable alternative heating device. Any other devices must be approved before introduction and appropriate safe work practices followed. Please ask, if more information is required.

TALCUM POWDER:

Talcum powder is not provided to residents and the use of is not encouraged, as it can compromise skin integrity and can pose a safety risk to residents and staff (e.g. slip hazard).

RESTRAINTS:

When a possible situation arises that may require a restraint, the staff will first try to use alternative strategies and interventions to reduce the behaviour of concern. If the restraint free alternatives have been unsuccessful in managing the behaviour of concern, then it may be necessary to use the least restrictive form of restraint. A clinical assessment will be completed and the identified reasons for the use of the restraint and alternatives that have been trialed, the type of restraint being considered and the associated risks will be discussed with the resident and/or their representative. In an emergency situation, this assessment and consultation process may occur after the restraint has been put in place.



BED POLE/BAR USEAGE:

Following the death of a resident in an aged care facility in 2010, the NSW coroner recommended that aged care services should not use KA524 bed pole or similar products due to unacceptable risk. There have been more deaths since this event. Therefore the Lower Burdekin Home for the Aged wishes to advise perspective residents and their representatives that it is an organisational policy that the use of a KA524 bed pole or any other type of bed pole, stick or bar/s is **not permitted**. Suitable safer alternatives will be considered and discussed with the physiotherapist.

KA524

Examples of other types





Resident Lifestyle

CLOTHING & DRESS

The Society adopts the philosophy that the residents dress code is such that it preserves the individual residents dignity and personality.

Residents are expected to be respectfully dressed at all times. Shoes and slippers must fit well and be in good condition.

It is recommended that residents have sufficient underwear, daywear and night attire (eg 10 sets of each). Poly cotton or other synthetic blends are recommended as the Society does not provide an ironing service.

All items of residents clothing are required to be labeled. Specific sew-on labels are ordered (please see our Administration) and can be attached to garments by the facility seamstress. The cost of the labels can be charged to the residents account.

Residents, especially in high care, may require clothing adjustments due to the considerable reduced flexibility of upper and lower limbs. In this instance the resident is assessed by the Physiotherapist or Registered Nurse and then the resident and / or relative consulted related to adjusting clothing. The facility has brochures on special clothing, that can be purchased or alternatively the family or the facility can make adjustments to the residents clothing. The facility charges a small fee for the service.

HAIRDRESSING

The Society has a hairdressing salon at each facility. A contracted hairdresser visits the facility weekly at a very reasonable cost for a cut, set or perm. Appointments are to be arranged through our Administration for these services.

Residents are welcome to visit their own hairdresser at his/her own salon or have them visit and use the facilities available, providing it does not coincide with the contracted hairdresser's dates and have completed the facility's required paperwork. Residents are responsible for the costs of their hairdressing services, and any arrangements associated with attending off-site.



RESIDENT RIGHTS AND RESPONSIBILITIES

As a resident, you are entitled to enjoy the full range of rights and privileges of the home. However, living in a community places some obligations on you to be considerate of the rights of others residents. We encourage residents and their family/representative to read the Charter of Residents Rights and Responsibilities.

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;
- l) 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.

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.

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



LEGAL ISSUES

WILL:

Residents are encouraged to make a Will and lodge it with their Solicitor.

ENDURING POWER OF ATTORNEY:

Residents are encouraged to appoint an Enduring Power of Attorney (EPOA). External professional advice is required for EPOA. **Please provide a certified copy of your entire EPOA. Each page (including blank pages) will need to be stamped and signed by a Justice of the Peace / Commissioner for Declarations, to confirm that the document is true and is a complete copy of your EPOA.**

ADVANCED CARE PLANNING

Provides the opportunity to discuss your values, beliefs and treatment preferences (including end-of-life care) with your family/friends, doctor and health care provider so that the treatment and care you receive is in line with your wishes. It also helps loved ones make difficult decisions.

Residents are required to have an Advanced Care Plan in place before admission.

Our staff can assist you in completing an Advanced Care Plan (ACP) – “Statement of Choices” or alternatively you can complete an Advanced Health Directive (AHD) with your doctor.

Residents who have an Advanced Health Directive (AHD) will need to provide a certified copy of the entire AHD. Each page (including blank pages) will need to be stamped and signed by a Justice of the Peace / Commissioner for Declarations, to confirm that the document is true and is a complete copy of your AHD.

AGED AND DISABILITY ADVOCACY AUSTRALIA (ADA)

ADA provides a free and confidential service to older persons (who live in a residential care facility). ADA will address any area of concern about service provision that their client(s) may have, and provide support, information and explore available options. Aged and Disability Advocacy Australia works solely for their client and will act only under the instruction from their client. ADA leaflets containing a list of services are displayed on notice boards, in the recreation room and at the administration desk.

THE PHONE NUMBER FOR ADA TOLL FREE 1800 818 338

LEAVE – LONG TERM

In accordance with the agreement residents are permitted 52 days social leave per year and unlimited days of leave for the purpose of receiving hospital treatment. See Agreement for further details.

LEAVE – SHORT TERM

It is advisable to inform the Registered Nurse on duty if you are going out so that we are aware where you are. In Ayr Hostel there are magnetic In/Out Boards in each block which can also be used. In Home Hill there is a Sign In/Out Register near administration.



CULTURAL & SPIRITUAL LIFE

Cultural and linguistic diversity of our residents is recognised, respected, fostered and valued. We have access to people (staff and volunteers) who can assist with a range of bi-lingual needs and we provide ethnic oriented food and condiments as per cultural diversity.

Ministers of religion and church groups visit the facility to conduct church services on a regular basis. Residents can consult a Minister of their choice. Should a resident wish to see their Minister privately, staff will be able to arrange the visit. Please discuss with staff any specific cultural or religious requirements.

RESIDENT FINANCIAL AFFAIRS

Residents are encouraged to handle their own financial affairs as long as they are able to do so. It is advisable that residents do not keep large sums of money in their rooms. The Society cannot be responsible if money goes missing.

RELATIVES

Relatives and friends are encouraged to contribute to, or participate in the resident's care. They are encouraged to consult with staff on any concern that they might have. Relatives and friends are welcome at any time.

Some simple rules:

1. Before participating in the resident's care relatives are encouraged to consult with the Registered Nurse first.
2. If wishing to participate in the care of other residents, this is appreciated (eg feeding), although appreciated is not permitted for safety reasons. You are however welcome to join the facility's volunteer program and assist residents through volunteering.

Relatives are encouraged to celebrate special occasions with residents. The use of a private area is dependent on availability and must be negotiated with Food Services Manager.

VISITORS

Visitors are welcome at all times.

Our business hours are:

Ayr - 7:30am to 4pm, Monday to Friday

Home Hill – 7:30am to 3pm, Monday to Friday

Outside of these hours access is via the nurse intercom system positioned at the main entry.

To comply with Fire Safety requirements, we request that visitors please sign in and out in the book provided at the entrance of each area.



ALCOHOL

Residents may consume moderate amounts of alcohol in their rooms, at meals and Happy Hours unless consumption results in behavior that infringes on the rights of other residents.

Some alcohol is provided by the home for special celebrations and 'happy hours'. All other requirements must be purchased by the resident/family.

We ask family members to notify the Registered Nurse when bringing alcohol onto the premises. Excessive use of alcohol may lead to unacceptable behaviour and is discouraged.

Please do not offer alcohol to other residents, who may be on medications, which if mixed with alcohol, may be detrimental to them.

NO SMOKING

State Government has legislated that smoking is banned anywhere on Residential Aged Care facilities or within 5 meters of the boundary. The Society's Policy is "No Smoking" and no outdoor smoking places are provided. Any resident, current or prospective, and their family and visitors will be required to respect the law as it applies and the Society's Policy and not smoke on Society property or within the 5 meter boundary. Fines apply under the Legislation. Management can ask persons in breach of this Policy to leave the premises and can refuse future access.

MAIL

Inward mail is delivered personally to residents each week day. Outward mail can be left at the reception desk for posting by staff. Stamps can be purchased also.

NEWSPAPERS & LIBRARY

Personal orders for newspapers and magazines must be arranged by the resident or family. The cost for this service is the responsibility of the resident. If a resident is away on holiday or is hospitalized for a long period it is the family's responsibility to cancel the residents order.

There is a library located in the recreation rooms at each facility. In addition to books there is also DVDs, music and talking books. Special requests can be considered and should be directed to the Diversional Therapy Team.

SHOPPING

Residents and / or family / friends are encouraged to attend to their own individual shopping needs, however not to those of other residents. This is for the reason that other residents may have individual needs or conditions that need to be considered.

The facility provides the opportunity to approved residents to attend to own shopping needs by providing:

- Access to an in-house shopping trolley
- Bus trips to town in the limited circumstances where an individual care and mobility needs allow

Staff (paid and unpaid) are not permitted to attend to residents private shopping needs unless written authorization has been given by the Manager or DON (in absence other appropriate appointed person). This authorization is generally only approved for residents who have no family / friends readily available and for items that cannot be purchased from the in-house shopping trolley.



RECREATIONAL ACTIVITIES

The Society employs Diversional Therapists and Activities Assistants who fulfill and evaluate stimulating, ever changing programs both inside and outside the facility, ensuring what is planned corresponds to what the residents have identified as their needs and wishes, together with the ideas of the Diversional Therapist and Activities Assistants. This promotes opportunities for full, satisfying involvement by Residents and staff. In fact, most Residents plan their appointments around our social calendar!

A weekly activities program/newsletter is distributed to residents each Friday with a list of coming activities and outings. A reminder is also given each morning of the activities for the day to the residents. Residents have the opportunity to decide on their level of involvement as either a spectator or participator.

Activities include regular games of bingo and hoy, carpet bowls, shopping trips, picnics, theatre outings, movies, craft, morning teas and gentle exercises. The Diversional Therapy Team plan a variety of activities for all residents. Visitors and volunteers are welcome to participate or assist with these activities (subject to compliance with volunteer's policy.) Residents have the right to refrain from participating in any recreational activities if they so desire.

The Diversional Therapy Team also runs small fundraising activities, such as the ice cream cart. During this time the Diversional Therapy staff have the opportunity to spend 1:1 time with the residents, while offering a variety of ice creams for sale. The funds raised are returned to the Diversional Therapy Team to assist in providing resources for activities. For those residents who are unable to provide consent and manage their own money to purchase an ice cream, family can give consent and arrange for it to be charged to their account through administration.

VOTING

Electoral and voting rights are maintained with support provided for all residents wishing to continue to be involved. A mobile polling booth visits the facility during election times for your convenience. It is the responsibility of the resident or the residents' families to ensure their voting details are correct.

PETS

Residents must have Management's written approval for a pet. Residents approved to have pets are responsible for the pet's care and to ensure that the pet does not disturb other residents. If residents become unable to care for their pet, family must take over care. Pets may be bought into our facilities for visits on conditions and subject to manager approval.

RESIDENTS COMMITTEE

Residents Committees have formed in Ayr and Home Hill. Meetings are held monthly. These meetings provide an avenue for residents to have a say in the daily running of the facility, raise concerns and make suggestions. The meetings also provide an opportunity for management to inform residents of changes, upcoming events and any other relevant issues.



Physical Environment and Safe Systems

NURSES CALL SYSTEM AND DIGITAL DISPLAYS

A call system is provided in all rooms, ensuites and communal areas. Use of this system will be discussed with residents and instruction given. This call system is available 24 hours a day to offer help when needed. However, residents' should note that dependent on their care and location in the facility response times will vary.

ROOMS AND BUILDINGS

You can be assured that your accommodation is offered on a permanent basis subject to resident care needs, and you are encouraged to treat your room as your own.

You and your representative will be consulted should a change in room be thought necessary, or desirable. A full explanation will be provided at the time. Side by side, interlinked rooms are available for couples. Should one of the couple be discharged, the Society may request the other member of the couple to relocate in order that another couple can be admitted. You may also request a room change if a vacancy arises, however final decision will be at the discretion of the Society depending on care needs of the resident population.

The privacy of residents shall be respected at all times. However residents shall allow the Manager or any other person authorized by the Manager, at any reasonable time agreed to by the resident to inspect the room or to arrange any repairs required. Care staff may enter the resident's room at any time, with the resident's permission, when the health and well-being of the resident requires it. Cleaners have permission to enter a resident's room to complete cleaning duties unless otherwise requested not to.

Residents may also choose to bring in some of their own personal items such as, pictures and photos, etc, however the residents rooms are limited as to the amount of furniture that can be kept in the room due to present and future resident care needs. Workplace Health and Safety requirements must be and will be assessed on a case by case basis.

Residents are permitted to bring in the following items:

- Television
 - Particular sizes apply and in many rooms existing facility televisions are already supplied. See Management for details
- Recliner chair
 - Permitted in rooms that have space provisions. See Management for details
- Bar Fridge
 - Permitted in some resident rooms dependent on a risk assessment
 - Bar fridge must be of an approved design and cleaning is to be the resident's responsibility. See Management for details.
- Radio

Whilst we encourage each resident to make their personal space as home like as possible, we require consultation between family and Management prior to bringing in any items of furniture.

All electrical equipment, old and new, brought in with residents must be itemized and have a current electrician's inspection tag. The facilities equipment is tagged every 12 months and regular testing of Resident's electrical equipment must be carried out. A cost for testing and tagging is the resident's responsibility.

Portable heaters and electric blankets are not allowed.



Double adaptors are not acceptable. Power boards with individual switches and a circuit breaker only are to be used.

Management does not wish for residents to drive nails or screws into the walls. The facility can arrange rails and / or hooks for hanging personal items on the walls.

Residents may be required to repair any damage caused by the resident.

Linen, towels, pillows, blankets, quilts and curtains are supplied by the facility. Residents are asked to keep their rooms clean and tidy and make their own beds, if they are able. Scheduled cleaning for residents rooms will be carried out by staff eg light dusting, floor and bathroom cleaning.

WORKPLACE HEALTH AND SAFETY

Whilst every effort is made to preserve the home like environment, the Society and residents are bound to the constraints/requirements to be observed in a workplace. By example residents may participate in fire drills or be asked to reconsider furnishings they wish to bring on site or the use of a scooter may need to be modified.

EMERGENCY PROCEDURES

The Society has a Disaster and Business Continuity Plan. Residents are encouraged to follow directions when an emergency situation arises: e.g. cyclones, fires etc.

EMERGENCY EVACUATION BAGS

The Emergency Evacuation Bags will be collected on admission and stored in a secure area for easier access during an emergency.

Suggested items for these Emergency Bags are as follows:

LADIES

- 1 x Shirt or Dress (loose fitting)
- 1 x pair Trousers / Skirt / Shorts (preferably with elastic waist)
- 1 x singlet and / or bra
- 1 x underwear
- 1 x coat / cardigan

GENTLEMAN

- 1 x Shirt (loose fitting)
- 1x pair Trousers or shorts (preferably with elastic waist)
- 1 x singlet (if required)
- 1 x pair underwear
- 1 coat / cardigan

Please keep in mind that these bags are kept for the duration of their stay in the facility and will not be stored in their room. We would advise that you do not place your best or favourite clothing in these bags.



FIRE ALARM SYSTEM

At times you may hear the alarm siren. This is our automatic fire detection system, which exists throughout the facility for your safety. This alarm automatically rings through to the Queensland Fire Service and fire tenders are dispatched immediately.

THERE ARE THREE REASONS FOR THE ALARM BELLS BEING ACTIVATED:

1. Regular testing (only very short rings).
2. False alarms. These might occur because the system is very sensitive and is set to respond to minimal stimuli – e.g. smoking in the building.
3. An actual emergency involving smoke and fire, somewhere within the facility confines.

WHAT YOU SHOULD DO IF YOU HEAR ALARMS:

- Remain calm
- Wait for staff assistance to designated assembly area
- Follow instructions of staff
- Leave belongings behind

In the unlikely event that a major emergency occurs necessitating evacuation, our staff members are trained in such procedures and an evacuation plan set up for each area of the hostel. There are several easy exits from each area and we recommend that you take notice of where these are located at your convenience.

MEALS

Meal times offer opportunities to meet with others and socialise, as well as to have nutritional needs met. At your own expense, you may enjoy a wine or beer with your meal.

A rotating Dietician approved menu is provided for all residents, this includes special diets as per GP or Speech Pathologist recommendation if required.

The Society will attempt to cater for all tastes, and will try, within reason, to satisfy requirements as far as cultural and religious beliefs are concerned or diets such as; Vegetarian, Gluten free etc.

Meals are served in the designated dining room. Residents may have meals served in their rooms depending on their care needs.

Relatives/friends who may wish to dine with their family member/friend, may do so, at a minimal cost.

Arrangements are to be made with our friendly receptionist who will liaise with our Food Services Manager (week days) or Registered Nurse if on weekends.



LAUNDRY FACILITIES

The Society does not operate its own laundry. All laundry is collected and laundered under a third party contract. PLEASE NOTE: Sewn name tags placed as recommended best ensures a great service – that is for all clothing, under garments, slippers, “everything”.

Laundry has up to a four day turn around, so laundry generated on a Thursday will be collected by the contractor on Friday, returned to the Society and decanted to the resident’s rooms late Monday. Residents are encouraged to have clothing for ten days available and to ensure any washing generated each day is sent for laundering every day so as to keep any turn around delay to a minimum.

All care is taken when laundering garments, but any special laundering requirements (e.g. dry cleaning) are not included in the laundry service. On admission to the facility residents are advised to purchase woven name tags which can be sewn to garments, particularly new items. Once again this will best ensure turnaround delays are kept to a minimum.

Residents are not encouraged to bring items that require special laundering e.g. woollen items or sheepskins into the facility as the laundry processes are not suitable for these items. If these items are bought into the facility, the resident’s family is encouraged to ensure these items are laundered.

The facility does not take responsibility if items requiring special laundering are damaged as a result of the facility laundering process.

VALUABLES & INSURANCE

Careful consideration should be given to what valuables or personal jewelry is brought into the facility. Although all care will be taken, the Society cannot be responsible for the loss or breakage of such items. A locked drawer can be provided in the room, or valuables may be kept in the office safe for a nominated short period. If valuables are brought into the facility, they are the responsibility of the resident / family. If the family takes any valuables home, it would be appreciated if staff could be informed.

The Society does not carry insurance for resident’s personal property. Residents should arrange household contents insurance for their belongings.

LOST PROPERTY

If any personal items are lost / misplaced, please inform the Registered Nurse on duty. Having personal items clearly marked may help prevent loss. Refer also to the Laundry Facilities section of the Resident Handbook.

TELEPHONES

Public telephones’ are located in the main building of each facility.

You may choose to have your own telephone in your room. It is the responsibility of the resident/family to arrange this private telephone service. Both sites are cutting over to NBN. New residents will need to be mindful that you have a choice of service provider and that choice can be supported. Please note that if you choose to do so you will enter into a contract with an external telecommunications service provider that will be your full financial responsibility, as it would be in your own home. If a private phone is installed please advise staff of the phone number.



CAR PARKING

Limited parking is available for residents' vehicles onsite. Please ask management for details.

Insurance of the vehicle is responsibility of the resident. The Society cannot be responsible for loss or damage to vehicles parked at our facilities.

RESIDENT'S EQUIPMENT

Equipment belonging to residents is the residents' responsibility. Should repairs be required, staff may be able to assist in arranging or effecting the repairs, or in some cases maintenance staff may be able to carry out the repairs, in which case charges could be levied. If the above situation occurs staff must report the circumstances to management and the resident's family will be contacted if appropriate.

MOTORISED WHEELCHAIRS/BUGGIES

Approval to operate must be sort by management prior to purchasing a motorised wheelchair/buggy. All residents who are considering using a motorised wheelchair/buggy must be assessed as competent to drive the equipment by the physiotherapist. There is limited access to facility areas and limited parking/storage options. Permission to use the equipment is not to be accepted as permanent arrangements and will be regularly reviewed. All machines are to be insured for damage and damage they may cause to property and persons.

THANK YOU

The Society facilities are a place where quality care is being provided, where people can live in comfort, feel at home enjoy activities in both the facility's community and the wider community and where the residents, Management and staff have a great relationship.

Thank you for your interest in our facilities and time taken to review our available accommodation. We hope you give consideration to making our facility your new home. Should you have any further questions or wish to clarify any of the details in the information booklet, please do not hesitate to direct your enquiries to the Director of Nursing on (07) 4783 0100. Queries concerning finances or Resident Agreements should be directed to the General Manager on (07) 4783 0100.

***Please retain this Information Booklet
As it will continue to be a useful resource to the Resident during and after admission***



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