

RESIDENT HANDBOOK

HOPE VALLEY

FINDON

COMPASSION * COMFORT * CARE www.anandaagedcare.com.au



INDEX



Contact	3
Mission Statement	4
Philosophy	5
The New Aged Care Standards &	
Ananda's Resident Focused Care	
Model	7
Welcome	8
Aboriginal and Torres Strait Islander	
Residents	1
Admission Process	1
Alcohol Policy	1
Ananda Academy	1
Car Parking	1
Feedback and Open Disclosure	1 1 1 1 1 1 1 2
Communication	1
Cultural Safety	1
Dementia Care at Ananda	1
Dignity of Risk	2
Diversity Action Group	
End of Life Care	2 2
Emergencies	2
Fire Drills	
Intruders	
Entry and Exit	
Food, Nutrition and Hydration	
Bringing Food into the Home	
Food Provided by Ananda	2
Freedom of Movement, Inside and Out	
Gifts & Gratuities	
Hairdressers	
Inclusivity	2
Intimacy & Sexuality	
Laundry	
Lost Clothing	2
Meaningful Engagement & Activity	4
Medication Management	
Complimentary & Natural Therapies	4
Mobile Care Monitoring	

•	i ersonaritems	
4	Furniture	
5	Pictures	
	Ornaments	
	Money	30
7	Electrical Tagging	
8	Collection of Property	
	Privacy	
10	Charter of Aged Care Rights	31
11	Smoking	
12	Social Independence	
13	Social Media	
14	Staff	
15	Staff Training	32
17	Taking a Resident Home	
18	Visiting	
19	Pets	33





CONTACT

HOPE VALLEY

95-97 Awoonga Road Hope Valley SA 5090 **Phone** 08 8397 7500 **Fax** 08 8264 5971 **Email** hopevalley@anandaagedcare.com.au

nopevaney@anandaagedcare.com.ac

FINDON

2 Malken Way Findon SA 5023 Phone 08 8445 9720 Fax 08 8345 4667 Email findon@anandaagedcare.com.au

HEAD OFFICE

257 Hampstead Road Northfield SA 5085 **Phone** 8262 5020 **Fax** 08 8262 1916 **Email**

headoffice@anandaagedcare.com.au





OUR VISION

In being a good community citizen, people will feel able to entrust their family to the care of ours.

OUR MISSION

Enriched by the values of family, Ananda is a place where respect, integrity of life and compassion are supported by holistic care and wellbeing experiences.



PHILOSOPHY



The origins of Ananda are defined as 'great bliss', capturing the foundation and spirit with which we deliver resident focused, holistic care. At all times we strive to enhance the well-being of our residents through meaningful experiences and best-practice care and services.

Ananda Aged Care believes that caring for the aged is a specialised field, involving a multidisciplinary approach, including medical, allied health, nursing and non-nursing care. We use a holistic approach to health and maintenance of physical and emotional well-being for residents and their families.

PHILOSOPHY

Personal wellness is maintained by encouraging and supporting independence, involving the full staff team working with our residents, their family, friends and the local community to maintain inclusion and prevent social isolation.

Ananda Aged Care strives to maintain a safe, home-like enviornment, respecting each person's right to make individual decisions in relation to their health care as well as their social activities. We believe through individualised, resident focused care which is skilfully planned, assessed, implemented and evaluated, that we can meet the physical, psychological, spiritual, intimacy and sexual goals of each of our

Through a rigorous recruitment and onboarding process, ongoing education and ensuring staff are skilled in their role, we maintain a high standard in providing current best practice care and servcice delivery to our residents.

In 2019 Ananda Aged Care embraced the transition to new Aged Care Standards (commencing 1st July 2019) and as a result began to develop the Ananda Resident Focused Care model to reflect greater focus on resident choice. While the new Standards refer to Consumers, Ananda Aged Care received clear feedback that 'residents' is the preferred term and hence this will be used throughout this Handbook.



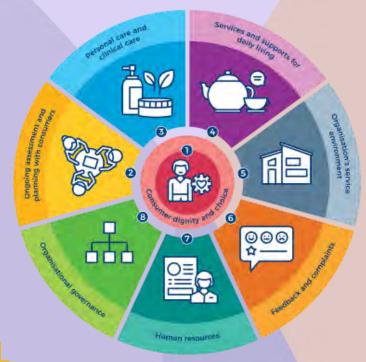


THE NEW AGED CARE STANDARDS & ANANDA'S RESIDENT FOCUSED CARE MODEL

From 1st July 2018 to 30th June 2019 all Australian Aged Care providers have been transitioning to a new set of Aged Care Standards, which come into effect on 1st July 2019 and will be audited by a new body: The Australian Government Aged Care Safety and Quality Commission. 'The Commission' came into effect on 1st January 2019 with the merger of the Australian Aged Care Quality Agency and the Aged Care Complaints Commission.

The new Standards (as per above image) are significantly different to the current Standards and Ananda, like all other care homes, will need to demonstrate it satisfies the requirements of the new standards in order to continue to receive Government funding. There are eight Standards and 42 requirements that must be met.

Ananda has embraced the opportunity the new Standards bring, and some of the key new concepts of the new Standards include (but are not limited to):



- A greater emphasis of the resident experience
- A strong focus on resident preference and choice, with Consumer dignity and choice (Standard One) being a foundation Standards which overlaps with the other seven Standards
- The significance of cultural safety, dignity of risk, and intimacy and sexuality, which are all discussed later in this Handbook under their own sections
- The importance of partnership between the resident or family/representative and the home
- A focus on diversity and the importance of each individual residents personhood

The terminology used by the Standards is a move to consumer directed care, which is really a way of saying the consumer (the resident and family/represntative) are at the centre of care and services and must have involvement control over all aspects of life in their home.



WELCOME









Ananda Aged Care upholds a strong tradition of providing aged care services based on authentic family values and a pride in treating every resident and staff member as a part of our extended Ananda family.

Please read and keep this Resident Handbook for information about the history of our homes and current policies and procedures.

Both Ananda Aged Care homes, located at Hope Valley and Findon, offer general care as well as dementia specific amenities, enabling us to meet the individualised needs and goals of people with varying levels of independence and health. Day to day medical care, companionship, engagement and wellbeing activites and support for residents are delivered.

Ananda Hope Valley opemed in 2004 and is a secure 137 bed facility which was purpose-built to accommodate the residents from Ashlea and Roseneath Nursing Homes. The initial building had four wings: Murray, Yarra, Torrens and Derwent, with a total of 71 beds. This consisted of three general care wings memory support unit to accommodate the needs of residents with advanced dementia. As the need for dementia support increased, Ananda Aged Care was extended in 2006 and dementia support wing refurbished as s general wing. The new building comprised three wings: Swan, Darling and Snowy, with a totl of 66 beds,

Each of the wings at Hope Valley are named after Australian Rivers.

The two buildings are linked by a walkway and are now named Ananda I and Ananda II. Residents are freely able to move between the two buildings as well as to each of the garden areas. The Derwent wing garden is restricted for the use of residents in the memory support unit.

Our sister home, Ananda Findon, was built in the 1990s by St Hilarian. This originally consisted of two seperate residential accommodation wings with 53 beds. In 2014 the home underwent a major refurbishment and building renovation including an additional 14 beds, making Ananda Findon a 67 bed home. Ananda Findon now has four living areas: Iris, Rose, Hazel and Tara, named after the children of the Directors of Ananda Aged Care.

Having consulted residents about the term 'consumer,' they felt strongly that they wished to be called residents. Hence when we planned for the transition to the new Standards we developed a model of care and services called that Ananda Resident Focused Care Model, which delivers the ingredients of consumer directed care but in an Ananda way.

In October 2019, with a number of significant continuous improvement initiatives already underway, Ananda employed a Resident Focused Care Advocate with a history of successful change management in the health and health education sectors and with credentials in dementia best practice and education to support the transition further.

It was decided that Ananda would initially focus on three important areas:

- 1. Changing the model of care delivery from a successful, traditional task orientated approach to a Resident Focused Care model
- 2. Focusing strongly on best practice dementia care and training for staff, and for the learnings from these initiatives to flow on to all areas of the homes
- 3. Food, culture and the dining experience

"Residents don't live in our workplace. We work in their home".

"Residents value relationships (with staff) far more than the tasks they perform".

These quotations are taken from training all staff have been encouraged to attend between October 2018 and April 2019 and which they now can access online via our new training portal, 'Ananda Academy'.

Traditionally aged care has worked well by training staff to do a series of tasks efficiently in a model often called task orientated care. In transition to the new Aged Care Standards (1st July 2019), Ananda has been moving towards a new model of care which are calling 'The Ananda Resident Focused Care' model.

Each of these complex and significant changes to the way Ananda delivers care and will not be completed overnight, though Ananda has embarked on a journey which will meet the requirements of the new Standards as well as change the emphasis of care delivered from a task focused approach to one where the resident is firmly at the centre of everything that happens to them. Ananda has begun a huge training program which communicates the changes to the mindset that staff will require to successfully transition to this model, and they will be supported with in house training and training provided as part of our partnership with Dementia Training Australia.

Ananda is committed to maintaining its impeccable accreditation record by aiming to be a leader amongst medium-sized care homes by providing genuine Resident Focused Care in partnership with each resident and family-representative and at the time of publishing we have made strong progress on this journey.

If you would like more information on the new Standards or the Ananda Resident Focused Care model please ask at reception.



ABORIGINAL AND TORRES STRAIT ISLANDER RESIDENTS

Ananda Aged Care acknowledges the land where it's residents live are on the traditional lands of the Kaurna people. We pay respect to elders past and present and to all Aboriginal and Torres Strait Islander peoples.

We acknowledge country in training presentations and strongly welcome and encourage applications from Aboriginal and Torres Strait Islander applicants.

During 2019-2020 Ananda Aged Care is partnering with Dementia Training Australia (DTA) to provide best practice training for all its staff. As part of this our Resident Focused Care Advocate, Michael Page, who has previously worked at Wardliparringa Aboriginal Research Unit at SAHMRI and also presented DTA workshops on a new Cultural Assessment Tool for Aboriginal and Torres Strait Islander people with Dementia, will be training the home's clinical leaders in how to use the tool, which uses a yarning style of talking with residents and acknowledges life events and connections to Country.

The use of this tool for residents may make Ananda more culturally safe for residents who would have been part of the Stolen Generations.



ADMISSION PROCESS

A resident receiving the Resident Handbook will have already been through the admission process which continues through the initial weeks at Ananda.

Residents and their families or representatives will be orientated to their new home and surroundings by a member of the Leisure and Lifestyle or Clinical and Care team.

This process includes:

- · Introductions to staff in their Wing
- Introductions to residents in their Wing
- Visiting activites in progress and discussing preferences
- Receive a Welcome pack

During this initial period or 'settling in period', it is common for residents and families to feel uncomfortable or out of place. Our staff are attuned to this and are very comfortable for residents and staff to talk to them about this process and how they can help residents feel at home. If you have any concerns speak with a staff member in your wing.

Nursing assessments will be continued during this time in partnership with residents and where required with family/representatives. All information during this process is used to develop a nursing care plan for the residents, which then becomes a guide to the care and services required by them.

The care plan is completed together with the resident by a senior clinical staff member (usually a Clinical Nurse Consultant or Clinical Nurse). Residents (and family/representatives where appropriate) are strongly encouraged to be involved in this process and to help us build a picture of the life story, culture, preferences and goals of the resident, so their care can be tailored to their individual wishes. This helps us provide you with Resident Focused Care.

On completion of the care plan you and/or your representative will review and be asked to sign it to acknowledge that care is a partnership between Ananda and each resident. The Nursing Care Plan is regularly reviewed and where changes are made these are agreed in partnership with the resident and/or family/representative.



ALCOHOL POLICY

Residents are welcome to enjoy alcohol according to their preferences. However, no alcohol is to be purchased or given to a resident without consultation with the Registered Nurse (RN) in charge. In most cases the resident's doctor will be consulted to ensure any prescribed medications will not be affected by consuming alcohol and if they do not recommend consumption this will be discussed with the resident.

Alcohol brought onto the premises must be given to the RN to label and store appropriately and under no circumstances is alcohol to be stored in resident's rooms.

Please do not offer or give alcohol to other residents without consultation with the Registered Nurse in charge.





ANANDA ACADEMY

Ananda provides mandatory training for all staff and in May 2019 launched its own online Learning Management System called 'Ananda Academy'. This allows staff to access courses via their computers or mobile phones at any time that is convenient and complete short courses relevant to their roles and to resident focused care.

Staff automatically receive certificates on completion of courses and management can track exactly what training each staff member has completed. All staff are contracted to completing ten hours of relevant training per year additional to what is mandated for their role and accessing tailored, user-friendly training at 'Ananda Academy' is a great initiative.





CAR PARKING





The car park at Ananda's facilities are primarily for family and visitors. Between 1000 and 1430 the car park should be free from staff cars, though for safety reasons the afternoon staff may park their cars and this may result in fewer spaces available.

At our Hope Valley home on road parking is only allowed between the hours of 0900 and 1500 from Monday to Friday. Parking outside these hours may result in large fines issued by council. There are no restrictions at weekends.

Double parking or parking in any of the driveways is not permitted, whilst parking in the goods entrance is only permitted after 1700.

Disabled parking bays are only to be used by authorised drivers with a current permit on display. Signed parking bays for doctors, ambulance or named staff are reserved exclusively for their use.



There are both internal and external systems for the management of feedback: compliments, complaints and suggestions at Ananda.

Feedback is welcomed and encouraged at Ananda and we follow up all feedback as required.

Internal systems include:

- The first point of feedback should be with a staff member. If an issue has not been resolved to your satisfaction the Registered Nurse (RN) in charge should be contacted.
- Open door policy; this is a system used in smaller homes though has been maintained at Ananda. If you need to speak to a senior staff member about an issue or a concern, arrange an appointment with that person. At times they may be able to see you immediately though making an appointment ensures their availability.
- Blue Feedback Forms; these forms can be used for compliments, complaints or suggestions. The forms are located in the reception areas and nurses' stations at both homes. Once the feedback form is completed, plae it in the locked black box nearby. The boxes are emptied every 2 days and forms forwarded to the appropriate manager to address the feedback received. A response, if required will be made wither in person or in writing.
- Capturing Feedback Forms; these are also available around the homes and

FEEDBACK AND OPEN DISCLOSURE



are primarily for staff to note feedback from residents or visitors. They are responded to in the same way as the Feedback forms. If you do not wish to fill out a Feedback form you cam ask any staff member to pass on your feedback by filling out a form this way. From April 2019 we began trialing an online version of the feedback form for staff and this is available in the staff area of the Ananda website.

- Raising issues at Resident Meetings;
 Resident and Representative
 Meetings are held regularly and are
 open to residents and their
 representatives. These meetings give
 an open forum to voice feedback and
 hear about other issues at Ananda.
- Grievance; if you have a grievance in relation to specific care of your family member we have found that speaking with the first person at hand is the best strategy for addressing these matters. For example, if you have a problem with the care provided, talk to the team leader in the wing to identify strategies to deal with the issue. If the problem is not satisfactorily



resolved through this process you can ask to speak to the Enrolled Nurse or Registered Nurse in the wing.

Most issues are resolved in the first instance or after escalation to the nurse on duty, however if at any time you feel you are not getting a satisfactory resolution you can ask to speak to the Clinical Nurse in charge (Hope Valley) or Clinical Nurse Consultant (Findon). If they are unable to resolve the issue they will liaise with the Director of Nursing (DON).

Residents and Representatives are reminded that we welcome feedback in any form and any feedback of high concern should be brought to the attention of management immediately.

External systems include:

- Contacting an advocacy service: You may wish to talk to someone independentky about your concerns and options if you feel they are not being resolved by internal systems at Ananda. Or you may feel uncomfortable talking to Ananda staff directly about an issue on your own. If so, an advocacy service may be able to help you. An advocate can;
- Provide you information about your rights and responsibilities.
- Help you resolve your problem including speaking for you if you want them to.

FEEDBACK AND OPEN DISCLOSURE

 Listen to your concerns about the feedback process.

Advocacy services are free, confidential and independent. Services are available in each State and Territory. You can call the Aged Care Rights Advocacy Service (ARAS) on 1800 700 600.

 Lodge a complaint with the Australian Government Aged Care Safety and Quality Commission on 1800 951 822.
 Vuew information on their website at www.agedcarequality.gov.au

OPEN DISCLOSURE

"To err is human, to forgive divine" ~Alexander Pope

Mistakes happen in all areas of life and while we strive to always provide best practice care, Ananda Aged Care and its staff are not immune to making mistakes. We can only improve and learn from mistakes if we are aware we are making them.

If a mistake is serious in nature, for example there is an adverse effect for a resident we will adopt an open disclosure approach. Open disclosure is intended to:

- Assist residents that have experiences harm
- Guide clinicians, the clinical workforce, and Ananda in supporting residents that have experienced harm
- Ensure that Ananda learns from adverse events

The main elements of open disclosure are an apology or expression of regret, which ususally include the words 'I am sorry' or 'Ananda is sorry' for the outcome.





Communication at the homes maintained in several different ways.

- Resident Newsletters; our seasonal newsletters contain updates and information about life in the homes. Articles include information from residents and staff about resident issues, life at Ananda and plans for upcoming activities, events and outings. The Director of Nursing's message in newsletters inform on plans for improvement and changes to policies. Please do contribute to these newsletters if you have a story and do let staff know what you would like more (or less) of in newsletters.
- Notice boards; are in all areas and are updated regularly to ensure the most current information is available for residents and their families and representatives.
- Memoranda (Memos); these are displayed in the front reception where families areas representatives sign in, informing visitors of any updates.
- General information; all staff can be asked about general information about any issue at Ananda. The staff member you ask may need to seek information from other sources to answer your question.

Generally nursing and care information will need to be addressed by a nurse and will only be given to appropriate people with the resident's consent.

CULTURAL SAFETY



Each resident defines what cultural safety is for them. It's their experience of the care and services they are given and how able they feel to raise concerns. The key features of cultural safety are; understanding a resident's culture, acknowledging differences and being actively aware and respectful of these differences in planning and delivering care and services.

Cultural needs of residents will be discussed and identified during the admission process and during ongoing assessment and planning between care and clinical staff and the resident and/or their family/representatives.

Ananda employs a multicultural workforce which is skilled and trained for the roles they undertake. Staff speak a range of languages and where possible we match staff who speak languages other than English with residents who may benefit from this.

The Ananda website is translated into five languages; English, Greek, Italian, Vietnamese and Hindi. We endeavour to translate newsletters and other information where possible.

Staff have available cue cards in many languages and also access to apps like the CULTURA app by Dementia Australia. Though the best way staff can learn about cultural needs is when residents talk to them about them, so if you have any specific cultural requirements please talk to staff about how we can meet these.

Special cultural days are celebrated throughout the year at Ananda and we usually combine an appreciation for that culture's food with activities based around a theme. Residents and staff appreciate the diversity in our community.





DEMENTIA CARE AT ANANDA

Dementia can happen to anyone, but it is more common in people over the age of 65. Over 400,000 people are living with dementia in Australia as of 2018 and an estimated 250 people join the dementia population every day. The rates of dementia in Australia are expected to increase exponentially over the next few decades with over 1 million people expected to be affected by 2056.

Providing excellent care to someone living with dementia requires special knowledge and skills. Ananda Aged Care and Dementia Training Australia (DTA) have teamed up to develop a tailored Training Package (TTP) to help staff gain further knowledge, skills and understanding in this area. This training will enable you to work more effectively with people living with dementia and their families and provide the high quality, personalised care and assistance every resident at Ananda Aged Care needs and deserves.

Staff can access online courses, face to face sessions with dementia experts and champions at both sites will take part in DTA consultancies on responsive behaviours and also medication management.



DEMENTIA CARE AT ANANDA



The goals of the one year partnership are to increase confidence of all staff to care for people with dementia, reduce the number of incidents associated with unmet needs of residents with dementia, and to reduce the already low use of medications, which is also a focus of the Royal Commission.

Ananda has already worked with DTA to carry out an environmental assessment and improvements have been made in Derwent and Rose Wings, including opening the doors to reduce environmental restraint. We have residents with dementia in all areas of both homes and are seeking to improve the care and services available to them.

The provision of best practice training is a result of a training needs analysis we carried out with DTA and the expectation of Ananda is that all staff who interact with residents must have the necessary skills, knowledge and attitude to provide current best practice care in line with the 2016 Clinical Guidelines for dementia care and also the new Aged Care Standards which come into effect on the 1st July 2019.





DIGNITY OF RISK

The new Aged Care Standards Standard One requirement (3d) states that 'Each consumer is supported to take risks to enable them to live the best life they can".

Ananda Aged Care supports a dignity of risk approach which allows residents a new and unprecedented level of flexibility to make decisions around their care and services as well as their right to take risks. This is an opportunity to maintain resident dignity and provide individualised quality care which is at the foundation of our ethos for compassion, comfort and care at Ananda Aged Care.

We encourage wellbeing experiences and the ability for residents to take opportunities and conduct their days with enthusiasm and a balanced approach. Our organisation's commitment to our duty of care and optimising work health and safety for our staff, visitors and residents remains unchanged.

Ananda recognises that it is our responsibility to empower residents with the information in a culturally appropriate manner and with respectful language to allow residents and their families to make sensible, balanced and safe choices to optimise their quality of life.





DIVERSITY ACTION GROUP

Embracing the new Aged Care Standards which come into effect on 1st July 2019, Ananda staff met to discuss what we are doing well at Ananda and what we can do better in regards to supporting diversity.

Standard One of the new Aged Care Standards (Consumer dignity and choice) focuses strongly on cultural safety. At Ananda we have a very diverse resident population (at both sites) and also a very diverse work force. As stated previously in this Handbook, cultural safety means that each individual defines their culture and what is important to them. This crosses over all aspects of life including respect, dignity, spirituality, food and celebrations as well as sexualtiy.

Following our Rainbow Day activities at both homes to coincide with Mardi Gras in March 2019, we discussed how we could become more inclusive for residents and staff who are from lesbian, gay, bisexual, transgender and intersex communities (LGBTI) and who may feel unable to express their personhood or identity due to societal discrimination over the years.

As part of Ananda's partnership with Dementia Training Australia (DTA) staff are encouraged to complete a 3 hour course 'LGBTI and dementia' which explores the history of legislation around gay relationships in Australia and uses personal stories to understand why residents would have been forced to live dual lives for fear of victimisation or imprisonment. In May we officially launched 'Ananda Academy', our

online staff portal where all staff can access high quality, relevant training and complete it on mobile phones, tablets or computers wherever they are. We have developed a one hour course called 'Intimacy and sexuality at Ananda' to help equip staff with skills in talking to residents about sensitive subjects. All Ananda staff and especially clinical nursing staff are highly recommended to complete one or both of these courses by March 2020 (the end of our year partnership with DTA).

We welcome any resident, family member or staff who are committed to diversity and inclusivity at Ananda to join the group which meets monthly for one hour, alternating between Hope Valley and Findon.

END OF LIFE CARE

On admission residents and their family/representatives will be asked how they wish their end of life to be managed. All residents have the right to die with dignity and in keeping with their own personal wishes.

Some residents will have an Advanced Care Directive and may have appointed family or friends as Medical Power of Attorny or Enduring Power of Attorny. It is required for any documentation of this nature to be provided to us so clinical staff are aware and can meet your requests.

If the Anticipatory Direction has not been attended, then Ananda staff will discuss with you, or your family/representatives, the need to consider a Good Palliative Care order. This is a form to be authorised by next of kin, informing care and clinical staff of what they believe their loved one would want in the event of a sudden illness or death. This then supports Ananda staff to know whether a would cardiopulmonary want resuscitation in the event their heart stopped (and to be sent to hospital by ambulance), or if they would rather not have this happen, and instead receive comfort care.

From 1st July 2014 the Advanced Care Directives Act 2013 (ACD Act) came into effect. It did not replace the Good Palliative



Care Plan, but replaced the Enduring Power of Guardianship (EPG), Medical Power of Attorney (MPA) and the Anticipatory Direction (Ant D) with a single Advance Care Directive form (ACD) for future health, personal, accommodation and residential matters. It allows a competent adult to values documet wishes, instructions or to appoint one or more substitute decision-makers to make these decisions on their behalf.

The ACD Frequently Asked Questions is attached.

If residents have an EPG, MPA or Ant D in place these still have legal effect as if they were made under the Advance Care Directives Act.

Compassionate and comfort palliative care is provided at Ananda Aged Care to support individuals and to ensure a dignified, peaceful and pain-free end to their life. As with all resident wishes it is helpful to consider these in advance so discussions can be held between residents and family/representatives and clinical staff can plan ahead and a plan of care be documented.

EMERGENCIES

Ananda follows the nationally recognised 'Emergecy Procedure' colour coded chart as a part of our emergency management process. This is displayed in nursing stations and other areas of our homes.





FIRE DRILLS

Fire Drills (practices) are held to ensure staff and residents are aware of what to do in an emergency, for example a fire. All staff are required to participate and demonstrate competence in annual mandatory fire training and clinical staff and those escorting residents off site must demonstrate competence each year in mandatory Basic Life Support training.

INTRUDERS

Both Ananda homes operate a sophisticated security system which requires that all doors must be released by staff to allow access to the building. Staff can monitor the entry of all visitors into Ananda through closed circuit monitors. All communal areas of both homes have closed circuit TV security.

ENTRY AND EXIT

Ananda's facilities are secure; all entry and exit points are managed through a security network and access is only possible once the electronic lock is released by staff.

During office hours (9am-5pm Monday to Friday), the doors are controlled by Reception staff, There may be delays in answering doors after hours as nurses will prioritise care but every effort will be made to minimise this delay.

On entering a 'sign in' book at reception must be filled in on each visit so in an emergency we are aware of who is on site. Please be aware we may have residents who wish to leave the building though may put themselves at risk if they do so. Be very careful when entering or leaving the building that you do not let anyone in or out at the same time. If unsure consult a staff member.

FOOD, NUTRITION AND HYDRATION

In line with the Aged Care Food Safe Legislation and Food Safety Act (SA), Ananda has a policy in relation to management of food, as special precautions are taken with all food provided to any resident.

BRINGING FOOD INTO THE HOME

- No home cooked food can be brought into the home for Food Safety reasons
- Commercially bought non-perishable food must be in sealed packets and must be in sealed packets and must a 'use by date' visible on the pack (and in date)
- If you are planning to bring biscuits or sweets please check with the Registered Nurse to ensure the resident is able to swallow these items safely
- Please bring an airtight container to ensure the food is at peak condition
- Food brought in for a resident is the responsibility of that resident and their family to maintain
- Under no circumstances should food be offered to another resident without consultation with the Registered Nurse as this may constitute a risk to that resident

FOOD PROVIDED BY ANANDA

During 2018 and 2019 Ananda is making significant efforts to improve the choices available for residents, the flexibility of service and the ambience of meal time experiences for residents and families.

Resident preferences and dietary requirements are discussed on admission through a diet sheet which is communicated to our hospitality staff. Any allergies or restrictions are noted and hospitality and care staff are made aware.



Ananda provides a 4 week rotating menu with a qualified Chef responsible for meal choices. All additions and changes to the menu are reviewed by a dietician.

At Hope Valley after successful and popular trial, a bain marie service in both Ananda I and Ananda II was implemented from April 2019, so residents can experience an improved visual choice, smell the food on offer and mix and match options as they choose. It also improves temperature control. Residents receiving tray service in their rooms may opt for bain marie options also.

At Findon a fixed bain marie style meal service is set up in The Hub and plans are in place for inclusions in the Friendship Club.

Fresh fruit is offered daily, fresh seasonal vegetables are used in most meals and for variety, frozen vegetables are used occasionally.

Ananda Anytime snacks are available 24 hours per day with a snack menu available. Residents just have to ask staff what they would like and when.

Residents are able to choose from a premium menu, attend Fine Dining evenings and also have their family or friends join them for meals for an additional fee (subject to availability and minimums apply).

Throughout the year we plan cultural days where food demonstrations and tastings accompany a themed day. Examples have been India, America, France, Sudan and Greece, with

a new destination each month of 2019.

MEALS SUPPLIED INCLUDE:

BREAKFAST; served between 0700 and 0800 MORNING TEA; served between 1000 and 1030 LUNCH; served between 1145 and 1230 (depending on location in the home)

AFTERNOON TEA; served between 1400 and 1430

TEA; served between 1700 and 1730

SUPPER; served at various times depending on resident preference

ANANDA ANYTIME; snack packs available at any time on request











FREEDOM OF MOVEMENT, INSIDE AND OUT

Ananda has sophisticated security systems and the entry and exit points are controlled by staff. Internally doors may be locked by proximal cards and opened at request by staff. However, in transition to the new Aged Care Standards (1st July 2019), Ananda has opened up all it's internal doors to allow complete freedom of movement for residents, inside and also out into the gardens.



This allows greater social interaction and exercise opportunity for our residents and ties in with a dignity of risk approach.

Doors to our Memory Support Units (Derwent wing at Hope Valley and Rose wing at Findon) have also been opened during daytime hours to allow freedom of movement and meaningful engagement for our residents in these areas, though after hours the doors are closed to limit stimulation and noise which is an important need for some residents living with dementia.

GIFTS & GRATUITIES

It is Ananda policy that staff are not to take any gift or gratuity from any resident or visitor. Any gift or donations to the organisation should be directed to the Director of Nursing, who will communicate with the resident or family as appropriate.

Staff are not to be offered jewellery or money or any personal belonging of the resident.

This policy does not extend to such items as a box of chocolates or biscuits for staff which can be shared in the staff area.

HAIRDRESSER

A hairdresser service is provided on site at both homes. Hairdressing is available at Hope Valley on Tuesdays and Thursdays, and at Findon on Mondays. The cost of hairdressing is





added to each resident's monthly account.

INCLUSIVITY

Australians of all backgrounds deserve aged care that meets their needs and expectations. Ananda provides acre to a diverse and multicultural community with a diverse and multicultural staff workforce. Ananda does not discriminate on grounds of gender, race, nationality, religion, sexuality, sexual orientation in regards to its recruitment or employment practices nor to its care for

residents and families. Ananda does not discriminate on grounds of cognitive or intellectual ability of residents and believes that the dignity, preference and choice of residents who cannot communicate in traditional ways must be identified and met wherever possible.

Ananda established a Diversity Action Group in March 2019 and is actively working towards an environment of inclusivity for all. We acknowledge that in a changing cultural environment we need to proactively partner with Culturally and Linguistically Diverse (CALD) communities to monitor the care we provide as well as members of the Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) communities.

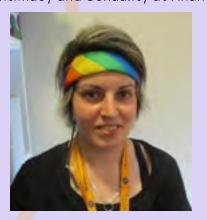
Developing a culturally safe environment will require all staff and also residents to agree to follow our motto 'Speak, Think, Act with Respect (STAR), and while we do not anticipate changing long held beliefs or attitudes of residents, we will not tolerate offensive behaviour at any level, whether it is towards staff or other residents.

INTIMACY & SEXUALITY

Sexuality remains a fundamental aspect of being human throughout life. It encompasses gender identities and roles, sexual orientation, intimacy, sexual expression and sexual acts.

Ananda supports residents to express their sexuality and to meet intimacy needs and will work with them to enjoy relationships according to their wishes.

Ananda has dev<mark>el</mark>oped a one hour course for staff, Intimacy and Sexuality at Ananda Aged



Care' which uses the Royal College of Nursing (RCN, UK) guidelines to help staff discuss intimacy and sexuality with residents who wish to be supported to maintain what is important for them.

Ananda does not assume relationships in older people are heterosexual and is actively working to make the homes comfortable and safe for residents who are Lesbian, Gay, Transgender and Intersex (LGBTI) able to disclose this to staff or residents of their choice, if and when they would like to.

LAUNDRY

Ananda provides a personal laundry service for all residents. If a resident or family chooses to use this service they must ensure that all clothing is fully labelled, using permanent labels of industrial standard. These may be purchased from Administration.

If your family decides to do your washing for you, a basket must be provided in your room.



LOST CLOTHING

Our staff make every effort to ensure resident clothing is not lost. However, if any item of clothing is lost we will attempt to find it. During the labelling process 'Ananda Hope Valley' or 'Ananda Findon' is printed on the label so that if a piece of laundry is sent to the commercial laundry it hopefully will be retrned. No responsibility is taken for lost clothing that is not appropriately labelled.



MEANINGFUL ENGAGEMENT & ACTIVITY

Ananda Aged Care has dedicated Leisure and Lifestyle Staff who are part of the clinical and care team at both Hope Valley and Findon. In partnership with residents and supported by other members of the care team, a range of activities and events are provided on a regular basis across weekdays and weekends.

An Activities Calendar is given to residents (and can be found online) informing them of what is available. The personal address system (PA) is used to announce events though is restricted to a minimum to promote a home-like feel at both sites.

Both internal and external activities are offered and these may be group based or individual activites.

A range of outings are available and we encourage residents to let us know what outings, events or other activities they would like. Some costs may be involved for special activities; permission will be obtained prior to offering these to residents.

As part of our dementia training partnership with Dementia Training Australia (March 2019 to March 2020) we are increasing the focus on





meaningful engagement for residents. This encourages residents with dementia to carry out activities of interest to them and which engage them with other residents and staff and which make use of our knowledge of their life story, preferences and personalities.

Volunteers play an important role in our meaningful engagement program and are an asset to our family. We would love to hear of anyone who might have some time to spend with residents in whatever way they feel comfortable. Please speak to reception staff if you are interested,

RESIDENT HANDBOOK PAGE 28





MEDICATION MANAGEMENT

Ananda Aged Care employs Registered and Enrolled Nurses to carry out medication assistance and administration at both homes. Ananda uses a sachet medication administration system for each resident. Staff are trained in medication administration and it is a requirement of the service that all residents have their medication in this system unless they are able to self-administer their own medications and this is documented.

No medication of any kind is to be provided by the family to the resident. All medication is checked and supplied through our pharmacy. Residents are asked if they would like to self-administer medications. An assessment is required for them to do this, with approval sought from their GP,

Pharmacy accounts are forwarded with the resident accounts on a monthly basis. Any queries regarding accounts should be directed to the pharmacy. Any queries regarding medications should be directed to the Registered Nurse (RN) in charge.

From August 2019, Ananda Hope Valley will be moving towards an electronic medication management system, Medi Map.

COMPLIMENTARY & NATURAL THERAPIES

We respect your choice to engage in Complimentary and Natural Therapies, however request that your GP and clinical staff are consulted and informed in order to support and monitor the resident.

We request that treatment take place off site if possible.



MOBILE CARE MONITORING

In February 2019 Ananda trialled the use of innovative technology called Mobile Care Monitoring, to evidence resident focused care at our Findon home. After successful evaluation we rolled this out across the home in March 2019

Care staff use the hand held devices (iPods) instead of paper documentation and all nurse observations are now recorded in the Person Centered Software and paper documentation. Until each resident's full care plan is moved into MCM (a lengthy reassessment process) nurses will continue to use progress notes and some paper based care plans until they are gradually removed/archived. Eventually we will also replace paper medication charts with a mobile system called MediMap.

Residents and visitors will notice staff carrying and using small devices which look like mobile phones which hold information useful for staff to have on hand rather than in several paper files stored in the nurses stations.

The system also allows data on incidents and other information to be instantly viewed by managers remotely and we expect the system will save carer time once it is fully utilised.

We will introduce the system at Hope Valley later in the year, though as the home is larger the transition period will be longer than at Findon.

PERSONAL ITEMS

FURNITURE

Ananda has a commitment to ensure a safe

work environment for staff and a safe living environment for all residents. While we will discuss preferences with each individual resident we must place a restriction on the amount and type of furniture that can reasonably be accommodated in a resident's room.

Cabinets need to be able to be moved for cleaning and must be on castors or wheels. If a cabinet is placed in the room no other furniture can be purchased.

Ananda will provide a chair for the resident's room. If you require a specialised chair every attempt will be made to supply it. Residents who wish to do so may purchase more advanced, special chairs and this should be done in partnership with a physiotherapist.

We encourage residents to personalise their rooms with small items and particularly encourage family/representatives of residents living with dementia to partner with us to make the room and environment support their personhood.

PICTURES

A picture rail is supplied in the room and hooks can be purchased from a hardware store at minimal cost. No pictures are to be hung on any other part of the wall, however pictures in frames can be placed on the window sills, shelving, TV cabinets, etc.

ORNAMENTS

Small ornaments may be brought in though residents and family/representatives are reminded that cleaning regimes are followed in the homes and there may be a risk of damage. Staff will take care with resident's belongings however they are brought in at the resident's risk.

MONEY

We ask that residents do not keep money with them. There is a 'bank system' at Ananda allowing residents to have money held in a trust account for them and the money is held in a safe in the administration department. When money is needed residents or representatives are asked to give as much notice as possible so the administration staff can organise it. If money is needed out of office hours alert the administration staff and they will leave the money for the Registered Nurse (RN) and it will be kept in the safe in the medication room.

ELECTRICAL TAGGING

All electrical equipment must be tested and tagged. This relates to items like fans, radios, touch lamps etc. Once tested the itmes will be tagged and can be used by the resident. Electrical tagging will automatically be done and the charge added to the resident account.

COLLECTION OF PROPERTY

The family or representative will be asked to remove property on the death of a resident within 48 hours. After this time frame if not collected items will be moved to a storage area. If belongings remain in storage after 7 days a phone call will be made. This will be the only time representatives will be contacted to remove items. If there is no response to the phone call the items will be discarded.

No liability will be taken for any missing or damaged items at Ananda.

PRIVACY

All residents are entitled to full privacy. Some residents requiring constant supervision may feel that their privacy is compromised during some Activities of Daily Living (ADLs), yet resident safety is also paramount and care staff have a duty to ensure safety at all times.

Privacy and dignity curtains are provided in each shared room. Staff will take steps to maintain dignity, should knock on entering resident rooms (according to resident wishes) and close doors while assisting residents with personal care.

CHARTER OF AGED CARE RIGHTS

From the 1st July 2019, the new Charter of Aged Care Rights came into effect. All new residents and existing residents will be provided with a signed copy of the Charter indicating Ananda's commitment to providing high quality care and service delivery and meeting the individual needs of residents.

Charter of Aged Care Rights

Every resident has the right to:

- Safe and high quality care and services.
- Be treated with dignity and respect.
- Have my identity, culture and diversity valued and supported.
- Live without abuse and neglect.
- Be informed about my care and services in a way I understand.
- Access all information about myself, including information about my rights, care and services.
- Have control over and make choices about my care, and personal and social life, including where the choices involve personal risk.
- Have control over, and make decisions about, the personal aspects of my daily life, financial affairs and possessions.
- My independence.
- Be listened to and understood.
- Have a person of my choice, including an aged care advocate, support me or speak on my behalf.
- Complain free from repraisal, and to have my complaints dealt with fairly and promptly.
- Personal privacy and to have my personal information protected.
- Exercise my rights without it adversely affecting the way I am treated.



SMOKING

Ananda Aged Care is a smoke free facility. Smoking by staff, residents or visitors is not permitted either in the grounds or in the buildings of Ananda, which includes the car parks. While a transition process was permitted for residents who smoke prior to this initiative being in place, all subsequent residents must respect that Ananda is a smoke free facility.

SOCIAL INDEPENDENCE

Ananda staff strive to support residents maintain as much independence as possible. At times visitors may observe staff not assisting a resident, for example you may see a resident eating very slowly. It may appear easier for staff to assist that person, however in doing so may restrict their level of independence.

SOCIAL MEDIA

Ananda would like to share information with the community by publishing images, articles and blogs on its website and social media accounts. We would request all residents or families/representatives to give consent by signing a media release form, available from reception. In this way we can publish and provide you with images of activities, events and highlights of life at the home.

STAFF

Ananda is an equal opportunity employer. We have a multicultural workforce and staff team. All staff are subject to the same rigorous process of recruitment and induction and are appropriately qualified for their position.

We also support specific student training centres and at times have students attending placements.

Ananda staff have a uniform policy and dress code; this helps residents and visitors identify who is whom. All staff have their first name printed on their shirts under the Ananda logo. Other staff like agency or students, or new starters who do not yet have a uniform, will wear a name badge.

As part of Ananda's commitment to best practice dementia care staff do not wear uniforms in the Memory Support Units. If you see staff without uniform they should have a badge or ID, though may be working in one of the units. This is to provide a more relaxed, social environment in those areas, especially when staff are assisting with personal care.

STAFF TRAINING

All staff are required to complete mandatory annual training relevant to their role. They are also required to complete at least ten hours per year of other relevant training in order to maintain best practice in a changing aged care environment.









Ananda launched 'Ananda Academy' in May 2019, an online staff communication and training portal where staff can easily read and complete quizzes on topics related to resident focused care. These short courses are more convenient and personalised than classroom based training.

Staff are encouraged to complete the Dementia Training Australia (DTA) online courses available to all Ananda staff from March 2019 to March 2020 as part of the DTA-Ananda Tailored Training Package (see Dementia care at Ananda).

TAKING A RESIDENT HOME

All permanent residents are entitled to 52 days of social leave per financial year. Respite residents are not entitled to social leave. Residents are also able to go out on day leave for social occasions or to visit their family or friends etc.

If possible, 24 hours notice would be appreciated when taking a resident home for any length of time. This allows staff to ensure you are ready to go out and your medications or other requirements are prepared.

Respite residents are not entitled to overnight social leave, so if they are transferred to hospital, or go home overnight, they will be discharged from Ananda...

VISITING

Visiting hours are between 1000 and 1900 to repect resident needs. Visiting outside these hours is only to be done following approval from the Clinical Nurses at Hope Valley, the Clinical Nurse Consultants at Findon, or the Director of Nursing (who covers both sites).

If your family member is unwell or receiving palliative care, flexible hours are agreed to by the Registered Nurse in charge.

Visitors are reminded that although Ananda is their loved one's home, it is also home to many other residents and it is important to respect those residents need for quiet and security.

Large groups of visitors for a special event are asked to organise this beforehand with the Leisure and Lifestyle members of the clinical and care team. This ensures no other residents are adversely affected by the event.

PETS

Pets must not be brought into Ananda without permission. Only animals under control of an adult visitor may come into Ananda. Dogs must be of a suitable temperament for visiting a public area, quiet and toilet trained, and they must be on a leash.

Visitors bringing animals on site must understand that some residents and staff are afraid of animals and may not want an animal near them. No aggressive animals may visit. Any damage caused by an animal will be the responsibility of the person bringing it onsite.





COMPASSION

COMFORT

CARE

HOPE VALLEY
FINDON