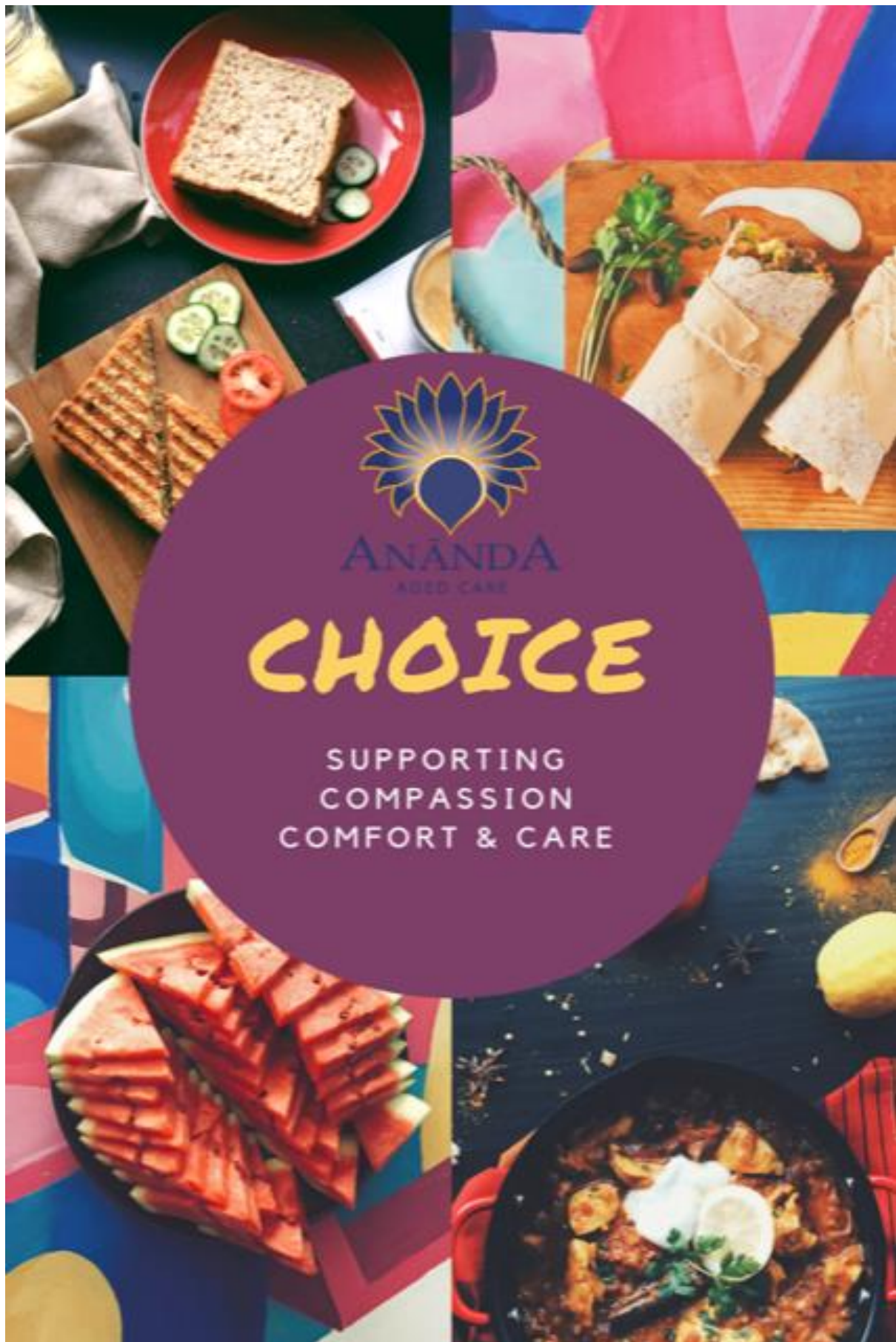


## **Staff Handbook**

### **Welcome to Ananda Aged Care**

**Introduction to the new Aged Care Quality  
Standards and the Ananda's Resident Focused Care  
Model**



## **PHILOSOPHY**

The origins of 'Ananda' being defined as 'great bliss', captures the foundation and spirit with which we deliver holistic care, striving at all times to enhance the well-being of our residents through meaningful experiences and best-practice service.

Set in two locations Findon & Hope Valley; Ananda Aged Care upholds a strong tradition of providing aged care services based on authentic family values and a history of pride in treating every resident and staff member as part of our extended Ananda family.

Both Ananda Aged Care sites at Hope Valley and Findon offer general care and dementia specific amenities enabling us to meet the individual needs of people with varying health issues and disabilities.

Our staff are dedicated to making residents' lives at Ananda stimulating and fulfilling. We expect our team to deliver individual centred care, companionship, lifestyle and leisure activities and support to ensure the well-being of all our residents.

### ***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 well-being experiences.

## **WELCOME TO OUR NEW STAFF**

Congratulations on your new career with Ananda Aged Care. We trust you will find your work with us both enjoyable and fulfilling.

This booklet will provide you with some guidelines and information on working at Ananda Aged Care. Please read it carefully, and if you have any further questions your supervisor or our administration team will be only too happy to help you out.

Ananda Aged Care has two homes in metropolitan Adelaide:

### ***Ananda Aged Care Hope Valley***

95-97 Awoonga Rd  
Hope Valley, SA 5090

### ***Ananda Aged Care Findon***

2 Malken Way  
Findon, SA 5023

All members of the Ananda team need to have a current and valid police clearance free of any precluding offences as stipulated by the Aged Care Act 1997 (Cth). In addition to this, we must hold on file for you a statutory declaration in the prescribed aged care format. We will provide you with a copy of this. Police checks need to be updated every three (3) years.

If you are a Registered or Enrolled Nurse, you are required to hold a current National Registration relevant to your role and the level to which you practice. This practising certificate along with any relevant supporting documentation must be provided to us prior to the commencement of your first shift.

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## **ABSENCE FROM THE HOME**

If you need to leave the facility for any reason during a shift (including for meal breaks), you must notify the RN in charge prior to leaving. This is for your safety, and to maintain the safety and wellbeing of our residents.

## **ACCIDENT, INCIDENT AND HAZARD PROCEDURES**

If you witness or are involved in an incident you must fill out the prescribed incident form at your soonest convenience. A copy of this form must then be given to the RN in charge, or Clinical Nurse.

Further, if you identify or become aware of a hazard in the facility, after ensuring the safety of all present you must fill out the prescribed hazard / incident form. Again a copy must be given to the RN in Charge, or Clinical Nurse. On occasion further supporting documentation may be required from you. You will be advised of this if required.

## **ANNUAL LEAVE**

Employees are requested to submit a request for annual leave via Tri – On line (electronic system) at least 6 weeks prior to the anticipated leave commencing. Leave is approved based on a number of factors, and you should be careful not to assume that leave will always be approved! As per our policy on this matter, management reserves the right to decline leave for operational reasons, where the required leave has not been accrued or if leave would not be practical at that time. Of course, every effort is made to accommodate leave requests. Staff will be advised accordingly.

## **CHANGE OF ADDRESS**

It is the responsibility of each employee to advise the administration team of any change of personal details or address during their time of employment. This includes telephone numbers; as if you change your number we may not be able to ring you about shifts!

## **COMMUNICATION**

The key to any good team is communication. As employees of Ananda Aged Care we are all part of one team. Please take the time to communicate with all of your colleagues across all departments in an effective, and concise manner. Please always remember to be respectful in your communication.

If you notice any change in a resident's condition please ensure that you report that change to the RN in Charge or the EN in your area immediately.

Handover occurs at the commencement and conclusion of every shift for nursing and care staff. Please be sure to give accurate and detailed descriptions of any changes or issues at these handovers. Good communication at handover makes for an improved work experience for all. We have implemented the **STAR** system at Ananda with all staff encouraged to SPEAK, THINK and ACT with RESPECT at all times when speaking with residents, families, co-workers and visitors to the home. You will find STAR written on all Duty Statements.

## **FEEDBACK and OPEN DISCLOSURE**

All complaints from residents, relatives, staff medical practitioners or visitors must be referred to the RN / CN or DON immediately, no matter how small, so that appropriate action can be taken. The complainant should be given a copy of the (Blue) Feedback Form to complete so that their concern or complaint is documented and can then be followed up by management. Feedback forms are located at reception and at each nurse station. Alternatively staff can complete a capturing feedback form.

## **CONTINUOUS IMPROVEMENT**

All staff are encouraged and supported in the continuous improvement system. Staff involvement is critical when identifying, actioning and reviewing improvements. If you identify a continuous improvement tell somebody! You can fill out a Blue Feedback Form / Capturing Feedback Form, speak to your supervisor or visit our friendly management team. All feedback in this regard is valued and taken seriously.

## **CONFIDENTIAL INFORMATION**

It is the policy of Ananda Aged Care that all employees adhere strictly to the code of privacy and confidentiality in relation to the personal and private information relating to every resident at Ananda and additionally to staff's private information. Any staff member identified as having breached a resident's confidentiality may face disciplinary action, which could result in termination of employment.

All employees of Ananda Aged Care have an ethical obligation not to disclose confidential information which is acquired about residents or their care, except when such disclosure occurs during the course of their professional duties.

Information, which is classed as confidential, is anything related to the resident's condition, treatment being given, the prognosis, or anything relevant to the Resident's private life. Disclosure of such information may lead to legal action against the facility or the employee.

The resident's right to privacy should be respected and his/her affairs should not be discussed with other residents, with non-professional staff, or with members of the general public.

Staff employed at Ananda also deserve to expect full confidentiality and privacy in relation to their personal and private information. During off duty hours all staff should use discretion and they should avoid careless chatter about the facility, or any of its residents, or staff. This includes outside of work chat and discussions, staff need to be aware of mentioning their

- Place of work
- Residents name
- Residents conditions
- Family concerns
- Staff issues
- Conditions at work

Any staff member identified as having breached a resident's confidentiality may face disciplinary action, which could result in termination of employment.



## **EDUCATION**

It is the responsibility of each employee to fulfil their obligations in relation to attending annual mandatory training, and to upgrading their skills through attending scheduled in-service education programs.

This training will be scheduled on site unless where it would be impractical to do so and will be relevant to all staff in maintaining their skills. Education sessions include large and small group sessions, 1:1, supervision, work books / quick quiz and staff meetings

Advance notice of sessions will be given. Staff who do not attend mandatory training sessions provided will not be able to continue working until their training has been completed.

Ananda Aged Care encourages all employees to participate in ongoing education and professional development. Where possible, assistance will be extended to employees in their pursuit of professional advancement.

Discuss your education or career planning with the Human Resources Manager or Director of Nursing as they may be aware of possible opportunities or funded options for aged care staff training.

## **ANANDA ACADEMY**

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 course 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 encouraged to complete the on-line learning modules as they are tailored for Ananda staff, user-friendly and easily accessibility. Ananda Academy is a great initiative.

## **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, Italian, Greek, Vietnamese and Hindi and 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.

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; yet 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 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 individualized 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 sexuality.

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 the 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 and 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 course 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.

## **EMERGENCIES & GENERAL SAFETY**

Ananda Aged Care has detailed manuals regarding emergency procedures and protocols. Further to this, Ananda Aged Care offers annual mandatory training for all staff in relation to reacting to and dealing with emergencies.

Please take the time to always be aware of your surroundings. If you see or become aware of a hazard please take the appropriate action to either isolate or eliminate the hazard, and to alert the appropriate staff, for example your manager, to take the necessary action.

Many of our residents are particularly vulnerable to accidents such as trips. Falls can be potentially fatal. Given this please always ensure that walkways and areas of heavy use by residents are free from obstacles that may prove a risk as such. Further, chemicals such as cleaning solutions must be secured at all times, and be kept either in your immediate vicinity under strict supervision, or locked in the appropriate storage areas. These chemicals can be potentially dangerous to residents and visitors alike.

Any accident or incident must be reported to the RN in charge immediately. The RN will then take the appropriate action to follow through. You may be required to complete an incident or hazard form.

In the event of a fire emergency the RN in charge becomes the designated fire warden. Please follow carefully any instruction given by the RN in charge during such an event. It is your responsibility to make yourself aware of the emergency response equipment available to your area of work on any given shift.

All areas are equipped with appropriate fire extinguishers, fire blankets, sprinklers and other equipment as per legislative requirements.

Fire and emergency drills will be held regularly and staff members are encouraged to take these seriously and to respond in the manner of a real emergency.

If you identify equipment that is faulty, broken or potentially hazardous, please isolate it from use, and inform maintenance as soon as practicable. Maintenance Report Folders are kept at various points throughout the home (reception, nurse's stations and kitchen). If you are unsure where to find your nearest maintenance report folder please see a member of the administration team. In the event that the hazard is a safety risk to residents and / or staff it must be immediately reported to the RN in Charge – safety is paramount.

In the event of an emergency requiring external emergency response please follow the direction of the emergency services personnel in charge.

## **FACIAL RECOGNITION MACHINE**

You are required to register via the facial recognition monitor at the commencement and conclusion of every shift. Please note, that you should enter the facility with enough time to prepare yourself and to be in your work area by the commencement time of your shift. The facial recognition machine is a new continuous improvement project commenced in May 2018 and links to your electronic roster and timesheet.

## **FIRE ALARM SYSTEM**

The fire control panel (FIP) is located in the front foyer, near the front entrance of the facility. In the event of a fire, the fire alarm will sound and all the smoke doors in the corridors will automatically close to contain any actual fire to a localised area. At the same time that the smoke doors close, all external doors to the facility will release to assist evacuation of the building should it become necessary. Staff must immediately ensure that the external doors are monitored to ensure no resident leaves the building while the fire alarm is sounding. A direct alarm is connected to the Metropolitan Fire Service, which will notify the nearest fire appliance immediately of any fire alarm in the building.

Staff are advised to follow the fire management procedure as specified in the Fire and Emergency Manual.

If a fire alarm occurs the fire brigade will attend to identify and check the source of the alarm and address any fire found, or reset the board if the call was a false alarm. If the alarm occurs after hours the RN/EN in charge must contact the Director of Nursing as soon as possible.

## **ILLNESS DEVELOPING WHILST ON DUTY**

Staff becoming ill whilst on duty, should immediately report to RN in charge who will determine what action will be taken. The Registered Nurse may need to advise the staff member to go straight to the doctor to be reviewed as soon as possible, or if the illness is serious, the RN may need to call an ambulance for transfer of the staff member to hospital for assessment.

## **INFECTION CONTROL**

It is the responsibility of all staff to be familiar with the Infection Control Manual and the 'Blue Bird system'.

Please report if you or a colleague have any rash or skin irritation to the Nurse Manager (Hope Valley) / Clinical Site Manager (Findon) or RN in charge for assessment.

Any staff member who has an infection or an infectious condition like scabies, influenza, or diarrhoea, must not attend the workplace. They must contact the RN in Charge and advise of their condition. If the staff member is contagious, they will require a medical clearance to return to work, and must have been symptom free for at least 48 hours, prior to returning to work. This is to protect your colleagues and our residents, many of whom have compromised immune systems.

## **LATEX**

Ananda Aged Care is a latex free organisation. Please do not use your own gloves and do not bring in latex items such as balloons. Please also remain vigilant in regard to visitors – and politely ask them to remove any latex brought into the facility.

Also take note of any health professionals such as physiotherapists, optometrists, dentists and doctors using gloves, ensuring that they are only using vinyl gloves and not latex.

## **LONG SERVICE LEAVE**

Long service leave is available for staff that have at least 10 years of continuous service. Long Service Leave is governed by the *Long Service Leave Act (SA) 1987*.

## **COMPULSORY REPORTING**

Staff must follow the Department of Health and Ananda Aged Care Policy in relation to the Mandatory Reporting of any abuse, suspected or witnessed, or unexplained absence of any resident in our care. Please familiarise yourself with this policy under the Aged Care Act 1997 (Cth), copies are available in the Policy Manual and a copy is provided to you at the commencement of your employment. Compulsory Reporting Flowcharts are located throughout the home as a quick reference.

Incident forms have a provision for the reporting or notification of such reports via a tick box at the top of the form.

## **MANUAL HANDLING**

All staff are advised they must have attended mandatory manual handling assessment at the commencement of your employment, and then they must attend a repeat mandatory training session annually.

All manual handling and resident transfer requirements are directed as per resident assessment and this is documented in the resident's care plan.

A 'Dot Mobility' system is used: in the Care Plan indicate the transfer risk of each resident. Please seek information from the Registered or Enrolled Nurse to ensure you understand this system. Any changes to a residents mobility, must be reported to the Registered and a referral made to the allied health team.

## **MEAL BREAKS AND TEA BREAKS**

All shifts are entitled to a paid 10 minute tea break. Shifts over 5 hours must have a 30 minute unpaid meal break

## **MOBILE PHONES**

Mobile phones are not permitted to be on your person at work and may not be used for personal calls or texts whilst on duty. Personal electronic devices are only to be accessed during authorised breaks, or once the staff member is off duty.

No pictures are to be taken on your mobile phone inside the facility unless authorised by management.

## **NURSE CALL SYSTEM**

All bedrooms, bathrooms, toilets, and some communal areas are fitted with nurse call buttons. Staff need to orientate themselves to the call bell system, and must respond to a resident's call as quickly as possible. Staff must also be familiar with the emergency call bell alarm and respond immediately to this call. It is expected that all calls are to be answered within 8 minutes.

Please speak to the Nurse Manager or a Registered Nurse if you are not aware of these sounds and how to distinguish them.

Floor sensor mats, bed and chair alarms are also used and these have a different call sound to immediately identify a resident has moved from where they were lying or sitting. The residents on these alarms are considered to be at high risk of falling, and staff must respond to this sound immediately.

## **PAY ENQUIRIES**

Any questions or concerns relating to your pay must be directed to the Admin Manager.

## **PRIVACY**

All personal information that is given to the organisation as part of your employment records are treated as strictly confidential. A personnel file is developed for each individual and is stored in a secure and confidential filing cabinet.

## **REMUNERATION**

All staff are paid fortnightly into their nominated bank accounts. Please see administration as soon as possible if your banking details change.

## **RESIDENTS' BELONGINGS**

At all times staff must be aware that residents' belongings are to be treated with the highest level of care. Residents' personal items of clothing should be labelled through the IPSO labelling system. When removing personal clothing items for washing please pay particular attention to each resident's individual arrangements. Some residents will have specific instructions in relation to the laundering or care of their garments, and this will usually be displayed in the residents' wardrobe. Special items should be left for the relative's special attention if in doubt.

## **ROSTERS**

Rosters are completed by the Administration staff at each site, rosters are posted in advance for staff to see or plan their shifts.

## **SECURITY**

The facility is secured at all times. CCTV is installed throughout the common areas of the home. All staff are requested to be acutely aware of their contribution to maintaining security. Kindly ensure that all windows are closed and security locks activated during the evening shift or as required.

All visitors to the premises are to sign the visitor's book on entry and sign out when leaving; this allows staff to identify who is on the premises, their name and purpose for being at the facility. Staff are advised to ask a visitor for identification if there are any suspicious circumstances or if you are uncertain as to a visitor's identity. Only authorised visitors may visit the wings where residents are accommodated. Ananda Aged Care reserves the right to refuse visitor entry in the interests of resident safety and wellbeing.

Report all suspicious events to the RN in charge immediately. The RN will identify if external support is required or if corrective action needs to take place. It is in the interest of all staff and residents to see that the property of the facility is adequately protected from theft, burglary and abuse. Please be observant and report anything unusual to the RN in charge immediately.

No person is to be admitted to the home at any time if they are unable to suitably identify themselves. If in doubt, ask for appropriate identification and, if you are still suspicious or have concerns for the immediate safety of residents or staff alike, call the police on either 131 444 or 000. (Seek information in relation to the Duress Alarm as it applies to your site, as part of your orientation).

No information of any kind should be given to unauthorised callers regarding staff, residents or the home in general.

Staff are reminded that no responsibility is accepted for loss or damage of personal property. If you have valuables on you, you must take responsibility for securely storing them whilst at work. Our best advice is to leave valuables at home.

Lockers are provided, for staff to store their belongings. Please do not leave personal belongings and handbags visible within the premises.

## **SICK LEAVE**

Staff are required to call the RN in Charge phone when calling in sick or if unavailable for a shift.

RN / EN must supply a Medical Certificate for sick leave.

Suitable evidence may be required to substantiate your leave.



## **SMOKING**

Ananda Aged Care sites are smoke free. If you smoke, then this must be done off premises.

## **STAFF APPRAISALS**

Staff appraisals will be carried out annually. These will be kept in each employee's personnel file.

The appraisals will be completed by the employee in line with their job description and an appointment will be made for an interview to be held with nominated staff for all members of staff. This interview will provide an opportunity for employees to discuss their progress with their supervisor and plan goals for the next year.

## **SUPERANNUATION**

As an Employee of Ananda Aged Care, your employer contributes to a superannuation fund of your choice or to the HESTA fund for all eligible employees. All employees receive a contribution based on government legislation to their nominated superannuation fund at predetermined intervals.

If any eligible employee wishes to make additional contributions to their superannuation fund please advise Administration staff in writing, so that these arrangements can be made with payroll on their behalf.

## **TEAMWORK**

All members of the Ananda Aged Care team are required to work co-operatively for the benefit of residents and in the interest of harmonious working relationships.

Gossip and anti-social behaviour is not encouraged. Remember STAR (Speak, Think and Act with Respect)

## **TELEPHONE PROTOCOL**

Ananda Aged Care has strict rules for the answering and handling of telephone calls. Please see a member of our administration team for details on telephone etiquette. Printed scripts and instructions for phone calls are available to all staff.

## **UNIFORMS and JEWELLERY**

Ananda Aged Care has approved uniform supplier. All staff receive a uniform allowance as part of their remuneration, and as such are required to purchase uniforms within 1 month of service. Staff are encouraged to purchase uniforms during this time. To purchase uniform items, please consult the administration team at your site. For further information on uniforms and dress standards please see a member of our administration team.

Staff working in direct contact with residents or machinery are to wear minimal jewellery. Hoop earrings, rings with anything other than a flat, smooth surface and watches are prohibited for staff that directly care for residents, or work in food preparation areas.

Any jewellery required for religious or cultural reasons can be discussed with the relevant manager. Resident safety will be the paramount overriding concern

**WORK HEALTH AND SAFETY**

The facility has a Work Health and Safety Committee charged with the responsibility of ensuring that all safety issues are regularly reviewed. All staff members are to be acutely aware of their surroundings and report any unsafe environments, equipment or situations immediately. You are ultimately responsible for your own safety, but please also be mindful of the safety of others including the residents whose care we are responsible for.

# Welcome to a new dimension of care – the new Aged Care Quality Standards are here!

Organisations providing Commonwealth subsidised aged care services are required to comply with the Aged Care Quality Standards. Like all other providers, Ananda Aged Care will be assessed and must be able to provide evidence of their compliance against the Standards from **1<sup>st</sup> July 2019**.

While it is not expected that all staff can explain each of the eight (8) Standards and forty-two (42) requirements within them, it is very important you do understand how care and service at Ananda is changing and will continue to change in order for us to continue to provide the best possible care for all our residents.

This booklet is intended as a quick reference guide to the Standards and a new model of care we are starting to develop, which we call the **Ananda Resident Focused Care model**.

This booklet is not intended to replace your Staff Handbook or any policies or procedures, but offers a starting point for understanding the Standards and the transition journey we have started on. It does not talk about all the eight standards.

## How to use this booklet

This is your own personal booklet and you are asked to read it and complete the brief quiz at the end. Once you feel confident you understand all the articles in the booklet please sign the last page and give a photocopy to your line manager or reception for our records. Please do refer to the booklet often, and discuss its contents with other staff and do ask questions if you are unsure of anything.

In addition to your mandatory competency training, face to face training will be provided during the first half of 2019 on the Standards and Resident Focused Care, as well as dementia best practice through our Tailored Training Package (TTP) partnership with Dementia Training Australia (DTA), training on how to use Mobile Care Monitoring and, for clinical staff how to use medication management software and a pain recognition app to assess pain in residents who cannot communicate it (e.g. residents with cognitive impairment).

We ask you to proactively book into sessions and to complete the online training that is offered to you. For some staff who are designated as dementia care champions and work within our Memory Support Units (Derwent at Hope Valley and Rose at Findon) we expect training to be completed and will pay for this time on completion as at July 1 2019.

We will continue to communicate with you via team meetings, toolbox talks, buzz meetings as well as MEMOs and the weekly message from management which we send by SMS to you on Mondays.

We hope you find this booklet helpful and welcome your feedback.

**The Ananda Leadership Team**



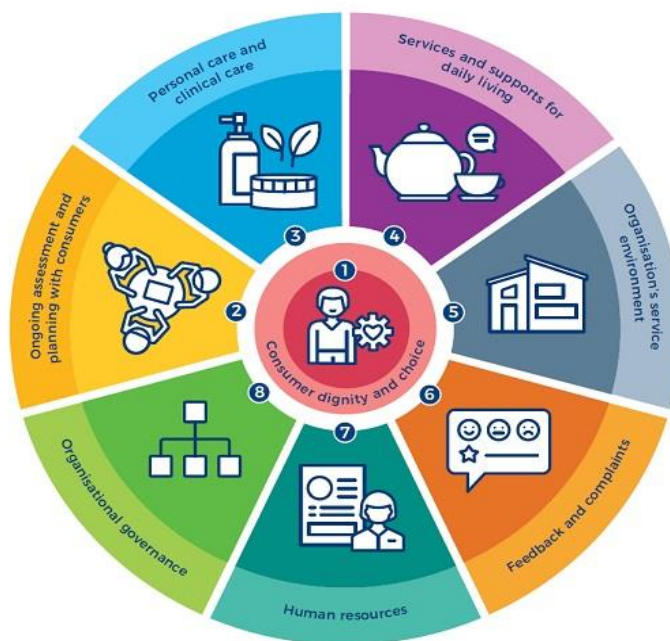
ANANDA  
AGED CARE

*Choice*

supporting compassion comfort & care

## Standard One. Consumer dignity and choice.

Standard One is central to the new standards and it is pictured in the middle as it is a foundation standard – which means its is refelcted in all the other standards as well.



Standard one emphasises consumer (resident) dignity, preference and choice. At Ananda we say that residents do not live in our workplace, **we are guests in their homes**. Residents have the right to make their own informed choices and to be supported in them to be as independent as possible. We should not *do care to* people, but instead *support and engage with* residents to help them do what they can for themselves, in the way they wish to do so. This is the reason we are talking about moving from **task focus** to **resident focused** care.

Standard one acknowledges that a resident defines what their culture is, what is important to them and how they expect to be treated. At Ananda we follow **STAR – Speak, Think, Act with Respect**, which includes knocking on resident's doors and waiting to be invited into their home, using the Ananda preferred language guidelines, and attempting to learn as much as we can about each of our residents' histories, likes and dislikes, preferences and choices as we can – and buidling these into an agreed plan of care.

Ananda delivers care that is inclusive and does not discriminate and our community is enriched by having a wide diversity of residents and staff. We seek to ebrace diversity even more in the future and celebrate our cultural and linguistic diversity as well as providing an inclusive and responsive environment for residents and staff who are lesbian, gay, bisexual, transgender, or intersex (LGBTI).

Each resident expects their preferences and choices to be respected and acted upon and not to be required to fit into routines or rules they do not agree to. At a basic level this may include staying in bed until whenever they choose, or watching TV in the lounge at 2am.





*DIGNITY OF*  
**RISK**  
*At Ananda*

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*Supporting compassion comfort care*

## Dignity of Risk at Ananda

Also within Standard one is the concept of **dignity of risk**, and the exact wording of this requirement is:

***New Standards requirement 1.4: Each consumer is supported to take risks to enable them to live the best life they can.***



Ananda Aged Care supports dignity of risk 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 the ultimate opportunity to maintain resident dignity and provide individualized quality care which is at the foundation of our ethos for compassion, comfort and care at Ananda Aged Care.

Ananda encourages 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 instilling work health and safety for our staff, visitors and residents remains unchanged. Our duty of care to our residents continues but with recognition 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.

Taking time to discuss possibilities, solutions and ongoing consulting with residents and their families is paramount to maintain dignity of risk and I urge you all to consider this with everyday activities as well as additional services on offer in our homes.

Ananda Aged Care recognises this is an important facet of Standard One of the new standards and encourages staff to familiarize themselves with this concept with any questions to be directed to your line manager.

**Pictures. Above left: Pat lives in Rose Wing at Findon and loves baking biscuits and bread. Above right: Rick lives in Yarra Wing at Hope Valley and is seen on a regular 'shift' helping the maintenance team.**



Ananda provides care and services that do not discriminate and are responsive and inclusive.

We are working at extending our ability to be sensitive to the needs of Culturally and Linguistically Diverse residents and also residents who are lesbian, gay, transgender and intersex (LGBTI).

Ananda will be working towards Rainbow Tick accreditation and respects the culture and sexuality of its residents and staff.

Understanding a resident's social, cultural, language, religious, spiritual, psychological & medical needs is embraced within Standard 1: Consumer dignity and choice and Standard 2: Ongoing assessment and planning with consumers.



Ananda staff come from over 40 different countries and many more culturally diverse backgrounds.

At Ananda we have a large number of residents from Culturally and Linguistically Diverse communities and whose first language is not English.

Within Standard One the concept of Cultural Safety means the resident defines what is important about culture to them. Important things to remember are understanding a resident's culture, acknowledging differences, and being actively aware and respectful of these differences in planning care and services.

The CULTURA app will be available to support you on your handheld care devices in 2019.



## Ananda STAR- Speak, Think, Act with RESPECT



Being treated with respect and dignity is essential to quality of life. It includes actions to recognise strengths and empower them to be independent. It means communicating respectfully and recognising and respecting individuality in all aspects of care and services. Dignified and respectful care and services will help residents live their lives in the way THEY choose, including social and intimate relationships.

Ananda respects that resident's rooms are their homes and so we knock before entering and wait to be invited in. At every engagement with residents we should take our time to listen, ensure communication is possible by sitting by the resident and making eye contact where culturally appropriate, limiting background noise and making sure the resident understands what we are saying to them. For residents with cognitive impairment or those whose first language is not English we need to take more time and effort to help communication. For residents with dementia we need to speak slowly and clearly and in a calm tone. Often the words may not be understood but the actions of the person can show respect for the resident.

Individual preference and choice is key to the new Standards and so we should not be saying to residents "you can't" or "you are not allowed." The old 'rules' about what residents can and can't do are outdated – if you are unclear or unsure ask your team leader or manager and fill in a verbal feedback form.

The general rule to follow is treat residents how you would wish to be treated if you were in them. Ananda does not tolerate disrespectful behaviour and will be providing formal and ad hoc/on the spot training around these concepts so if in doubt ask, and always reflect on how you might improve the living experience of residents.

## Thank you for being an Ananda STAR!



Assessment,  
Planning &  
Consultation  
*Supporting  
compassion,  
comfort & care*

## Standard Two. Assessment, Planning and Consultation with consumers (residents)

For all residents Ananda will carry out a thorough assessment and develop a care plan in partnership with the resident. The aim of this care plan is to understand resident preference and choice, document aspects from their life history, likes and dislikes that may be relevant the care and services we provide and also to optimise their health and well-being in accordance with their needs, goals and preferences.

You may notice there is a lot of similarity with Standard One: Consumer dignity and choice because that standard crosses over all the other standards. The care and services we provide should focus on the individual resident and their wishes, and they must agree with this plan.

Any changes to a resident's status (for example if their health needs change) this must be reflected in the care plan.



[www.personcentredsoftware.com.au](http://www.personcentredsoftware.com.au)

Currently Ananda uses paper based care planning systems, and while these have worked well for years they take up a lot of time (and trees) and the time we are currently using writing notes, filing and looking for files could better be spent actually engaging with residents.

In early 2019 Ananda started to move to computerised (hand held) devices which enable real time, point of care evidence of everything we provide for a resident. It shares all the information currently in lots of paper files instantly with the carer, lifestyle carer or nurse who is engaging with the resident. It will allow team leaders to see where care is needed as a priority and to ensure regular care and activities are not late or missed. It will also allow us to share pictures of what residents have been participating in with their families by messenger links. For management it allows trending of data which can be used to better plan care and staff. This process has commenced at our Findon home and will be introduced to the Hope Valley home later in 2019.

You will receive training and the transition is part of our commitment to move away from a **task** centred approach to a **resident focused** approach. The individual likes, preferences, cultural, social needs of every resident can be viewed and met.

This quality improvement will help break down silos and move towards a team approach where there are no 'my residents' and 'your residents,' and all staff feel confident to be able to engage with and support every resident or seek the right help at the right time.



ANĀNDA  
AGED CARE



# SEEK FEEDBACK

*Assess, consult and provide care*

*Supporting compassion,, comfort & care*

## Standard Six. Feedback and Complaints

The exact wording for the consumer (resident) outcome for standard six is: “I feel safe and I am encouraged and supported to give feedback and make complaints. I am engaged in a process to address my feedback and complaints, and appropriate action is taken.

Wait a minute, are we saying we want residents or family members to complain about us? Well, yes. That is because nobody is perfect and mistakes are made or residents just aren't happy with the care or service they are receiving at a particular time. This might be an issue that may seem quite minor to you, though if not recognised, acknowledged and addressed becomes a source of concern, anxiety and even stress for the resident.

Often comments made by families or residents are not seen as complaints. Often we do not record positive things residents say, or suggestions they make because we don't think it's that important. WRONG!

While we do encourage members of staff at every level to deal with issues as they arise and solve any problems residents have, we also need to know what the issue was to work out how to improve things for all residents. It is also common that while you believe you have resolved an issue a resident has, they actually have more complex issues that need further investigation and support at more senior level.

While it may seem strange to encourage residents to provide feedback, we absolutely need to know what every resident and every family member thinks about our care and service otherwise we cannot make the necessary changes or resolve problems in a reasonable time. And if problems are not resolved in a reasonable time they often snowball into bigger and bigger issues.

And of course, from what you already know about resident preference and choice, we need to know what residents like and don't like to be able to tailor things for them. Remember what we said earlier, residents do not live in our workplace, this is their home. So any opportunity to understand how we can make Ananda even more homely for each resident the better.



So, how can you help residents, family members or visitor's feedback?

There are 3 main ways:

1. Tell your line manager (Team Leader, RN/EN, Manager or DON). You should do this if something needs to be addressed quickly and to seek advice on the best way to act.
2. Encourage the resident/family/ visitor to fill in a blue **Feedback form** which are located around each home at reception, nurses' stations and other main areas. There are locked boxes the forms can be dropped into so the form is anonymous. These forms are addressed and responded to by management (usually the DON).
3. Complete a (white) Capturing Verbal Feedback form. These are for staff to feedback comments, suggestion and verbal complaints from residents who perhaps do not wish to fill in a form or may not be able to. Again every one of these forms is actioned and recorded by management.

## Ananda positive language guidelines

The language we use with and about our residents translates into the quality of care. We provide below some suggestions of preferred language and language that should not be used and the reasons why. Please discuss with your colleagues and line manager.

Preferred/Do use 	Avoid using/Do not use 	Why?
Resident with dementia or a person with dementia	Dementee, demented, sufferer	In the same way we would not say someone with cancer is a cancer or cancerous we do not say a person with dementia is demented etc.
Responsive behaviour	Challenging behaviour, bad, troubling, difficult behaviour	All behaviour resulting from dementia is an attempt at communication and a response to an unmet need. While many behaviours may be challenging to us because we do not understand what the resident is communicating, often behaviours are positive strengths. Pacing may be a message the resident needs more activity, is bored or is in pain. Shouting similarly may be a way of asking for food, drink, a quieter environment, some attention etc.
Assisting or supporting a resident with...their shower, their meal, their continence needs etc	Doing the ADLs, doing a resident etc	Talking about engagement with residents as tasks to be done leads to a culture where tasks become more important than real relationships with residents and engagement. Residents value engagement above tasks.
Assisting or supporting a resident with their meal	Feeding a resident	As above, also remember we are here to promote independence and not to take over from residents because it is quicker/more convenient for us.
Describe what is happening e.g. the resident likes to pace around the wing, the resident often wants to leave the building, the resident needs support with continence etc	Wanderer, absconder, wetter, screamer,	Labels stigmatise a resident and are not respectful. They also lead to assumptions about resident behaviour that focus on deficits rather than strengths.

A resident	A resident is no trouble, a good resident, an easy resident	Saying a resident is no trouble implies that other residents with needs are trouble. We are here to support residents, they do not get in the way of our work, they are our work. Also, the resident who does not frequently require assistance should still be engaged with and asked if they have any needs
A resident who needs 2 staff to safely mobilise etc	They are a 2 person assist, a hoist, an overnight pad etc	Labelling focuses on deficits not strengths and can lead to stigma. Describe how we can provide support without labelling the resident by their needs
We need to observe the resident to support their safety (or other actions that are described in the care plan)	They are a falls risk	All residents have a risk of falls and some will require closer observation than others and this should be assessed and documented. Talking about a resident as just 'a falls risk' can inadvertently lead to restrictive care eg preventing safe mobility. <b>Dignity of risk</b> is a process where we partner with residents or representatives to balance activity that may be risky against resident preferences and choice and include this in the care plan
Use the person's name to describe them not labels	They, them, that one, those etc	Residents are individuals not groups and deserve respect for who they are

- Maps to the new Aged Care Quality Standards. Standard 1: Consumer dignity and choice, Standard 2: Ongoing assessment and planning with consumers and Standard 3: Personal and clinical care, and also the concept of dignity of risk.
- See more about dementia language guidelines from Dementia language guidelines, available online at: <https://www.dementia.org.au/resources/dementia-language-guidelines>



## Quick Quiz for New Staff

**Please complete this quick quiz and sign that you have read and understood the articles in this brochure, and photocopy this page for your staff file. If you have any questions at all about the contents please do discuss with your line manager. Thank you for being resident focused!**

1. What is Standard One, and why is called a Foundation Standard?
2. In your own words explain dignity of risk and give one example of how we have supported a resident to take risks at Ananda?
3. A resident who usually has one glass of wine with their evening meal says they'd really like a second glass. What would you say, and do?
4. At Ananda we say that residents are not living in our workplace, we are visitors here to support them live the best way they can. Give 3 ways you can make this happen every day:
5. If a resident or visitor told you they were offended by the way another carer spoke to them, what would your response be? What forms might you suggest they fill in or you might fill so that management are aware of the issue?
6. Why do we refer to changed behaviours of a resident with dementia as responsive behaviour? (2 reasons).



7. What is the difference between task orientated care and resident focussed care?
8. Whose role is it to support residents with meaningful activity that they wish to do? (Circle one answer):
- RN   Carer   DON   Leisure/Lifestyle   Receptionist   Cleaners   Maintenance   Everyone
9. You are working in Hope Valley A1 and a resident from A2 who is visiting a friend needs support to go to the bathroom. What do you do? For Findon staff you are in Iris and the resident is from Tara.
10. You are about to enter the room of a resident and they say they are soon being visited by another resident of the same sex and wish to be intimate. What would you do?

Completed By: \_\_\_\_\_

Date Completed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature Of Staff Member Completing: \_\_\_\_\_

Signature Of Line Manager: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

***HAVE YOU REGISTERED FOR ANANDA ACADEMY***