

# Merrimac Park Private Care

## Resident Handbook

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### **MERRIMAC PARK PRIVATE CARE**

**50 – 52 Macadie Way  
Merrimac 4226  
Phone: 5618 1111  
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PROPRIETOR:  
DIRECTOR:  
HEAD OF OPERATIONS:

Mr. Russell Thomas Egan  
Mr. Russell Douglas Egan  
Mrs Letisha Gleeson

Merrimac Park Private Care is a fully accredited 'Ageing in Place' residential facility. 46 High and 48 Low care places are available for both ACAT approved aged care, including secured environments for Dementia specific care in both the High and Low care facilities.

At Merrimac Park Private Care we are committed to providing excellent care, achieved through our use of innovative therapies and modern clinical care. With the support of each resident and their family, care is individually planned and is designed to satisfy the emotional, spiritual, cultural, physical and recreational needs of each resident.

*\*\*\*We take this opportunity of welcoming you to our home\*\*\**

### **OUR CARE PHILOSOPHY STATEMENT**

Our hope is to improve and enrich the lives of all our residents by giving professional quality care in a homely environment.  
We hope to make a meaningful difference to the life of each of our residents

by:

Giving love and respect.

Preserving dignity.

Developing trust.

Understanding feelings and focusing on the unique worth of each person.  
We value the wisdom of the aged and continually enjoy a mutually satisfying relationship.

### **OUR OBJECTIVES STATEMENT**

We will develop effective relationships by actively listening to each other and by using open and honest communication.

We will resolve differences of opinion by seeking to understand each other's point of view.

We will value each other's differences and respect each other by giving each other support and encouragement in times of happiness and sadness.

We will help each other with empathy and practical assistance.

We will strive to uphold a peaceful environment by being happy, friendly and by using a calm manner. We will work together with the resident and their loved one by accepting them into Wellington Park and including them in the care and activities of the Centre.

We will promote the well being of individual residents by assisting them with spiritual, medical, nursing and allied health needs.

### **OUR MISSION STATEMENT**

To provide professional, compassionate care in a peaceful, inclusive community environment.

**CURRENT ACAT ASSESSMENT (Aged Care Assessment Team):** Upon check-in a photocopy of the complete current ACAT assessment will be required to apply for placement.

**PRE-CHECK IN:** When a resident enquires about placement at Merrimac Park

Private Care they will be provided with:

- A Resident Accommodation Agreement
- A Check-in application form
- A copy of the Resident Handbook

If you require an appointment, please bring the following:

- ACAT (Aged Care Assessment Team) Assessment form (a photocopy of the complete assessment)
- Asset assessment summary from Centrelink or DVA
- Proof of pension entitlements (photocopy of relevant cards)
- Certified copy of Power of Attorney / Enduring Power of Attorney
- Any questions that you may have after reading the handbook

Alternatively, these items can be posted back to the service. Upon receipt of all of these documents, the residents name will be put on the waiting list.

Once we have an appropriate vacancy, the staff will notify the applicant by phone. Please keep the management updated if resident needs change.

**TOURS:** We are mindful that this is our resident's home and we respect their peace and privacy so tours are conducted with management by appointment only. Pictures of our facility are included on our web site: [www.merrimac-park.com.au](http://www.merrimac-park.com.au) Alternatively, applicants can visit the site to collect or deliver the application forms to the reception area. This quick visit will generally give applicants a small glance at our environment, gardens, type of décor and a 'feel' for our home. When a vacancy is available, management staff will notify the applicant by phone to come and view our facility. The resident will then have an option of accepting a placement. If the resident is not ready for placement at that time, their details will remain on the waiting list. Pre-checking in, we welcome residents to join us for morning or afternoon tea, join in an activity with our residents and lifestyle coordinators or join us for a meal. Bookings are essential to ensure adequate catering.

**AGEING IN PLACE:** The 'ageing in place' philosophy is promoted and respected within the whole Merrimac Park Private Care Complex. This means we will endeavour to meet all changing resident needs within the various facilities throughout the whole complex. Primarily this means enabling residents to live continuously in a familiar environment minimising disruption for as long as practicable. Each facility has specifically designed units to promote the most appropriate delivery of care.

**SURROUNDS:** Residents and family are encouraged to enjoy the open spaces, beautiful gardens and courtyard areas throughout the complex. Relatives are welcomed to bring well-behaved family pets to visit, please see the management first.

**RESIDENT AGREEMENT:** A mandatory 'User Agreement for Residential Care' must be entered into prior check in. This is an agreement between Superior Care Group Pty Ltd, trading as Merrimac Park Private Care and the resident or the resident's representative. Due to the differing care needs of High & Low care residents, the range of goods and services provided by Merrimac Park Private Care will vary accordingly. Applicants should carefully and

thoroughly read the Resident Agreement that provides more detail. We strongly recommend that applicants obtain independent legal and financial advice on this agreement as it is a legally binding document.

**FEES AND COSTS:** Charges apply from the day of acceptance as per indicated on the Resident Accommodation Agreement. For further details please carefully read the Resident Accommodation Agreement and attached information letter. Financial queries are to be directed to the administration staff on phone: 3822 6761

**MOVING IN:** Upon acceptance of a placement, Merrimac Park Private Care is now the resident's home. The resident will be required to move into their room within 7 days of acceptance, unless hospitalized. Residents are welcome to begin moving items into their room at any time after acceptance. Relatives can prepare the room if the resident is in hospital, making the room personal and homely. Residents are required to move in between the times of 9am – 1.30pm week-days. Please discuss with staff if these times are not suitable.

**HEALTH CARDS & PRESCRIPTIONS:** To assist with clinical management of resident medical needs, the resident is to supply the Registered Nursing staff with their:

Pension Card Affairs)	DVA card (Department of Veterans Affairs)
Private Medical Health Cards	Medicare Card
Seniors cards card	Safety Net Pharmaceutical Benefit card
Copies of existing prescriptions	Optical prescriptions
Hearing Aid Service Card	

Any other membership card that may entitle the resident to subsidised medical supplies or services. Cards will be securely stored with resident information charts and are accessible upon request.

**ENDURING POWER OF ATTORNEY:** To ensure compliance with the resident's legal requests, a certified photocopy of current 'Power of Attorney' or 'Enduring Power of Attorney' documents, Advanced Health Directives or Living Will documents, are to be supplied to the management staff upon check in. Staff are not permitted to witness residents or relatives signatures on any document. Please refer any queries in this area to the management.

**MEDICAL ATTENTION:** Prior to check in, the resident will need to make arrangements for a local doctor of their choice to manage their care whilst in the home. Doctors are required to visit a minimum of once in a 3-month period and be available for emergencies 24 hours a day. Arrangements are to be made for a locum to attend if the doctor is unavailable. Should a locum doctor be required to visit during the nominated doctor's absence, it will be at the resident's expense. Should the nominated doctor or a locum be unavailable for an emergency, medical attention will be sort

from the casualty department of the local Hospital. If the resident is moving into this area or doesn't have a doctor of preference, the staff will be happy to assist with this. We have several doctors from the local practices visiting our residents here.

**INFLUENZA VACCINE:** We recommend all residents have the annual 'influenza vaccine'. This should be discussed with the resident's doctor upon check-in. The staff are able to advise and assist in this matter.

**EXTERNAL MEDICAL APPOINTMENTS & SPECIALIST MEDICAL ATTENTION:** If the resident has been receiving other specialist medical attention prior to check in, they are encouraged to continue. Upon request, the staff can arrange all external or specialist medical appointments. Should an escort be required, the resident's family will be required to escort the resident to all external appointments. An hourly fee, with a minimum of 3 hours, will be charged if a staff escort is required. This is calculated at the staff member's base rate of pay & includes all appropriate penalties. Staff are able to assist and advise in this matter.

**RIGHT TO REFUSE MEDICAL TREATMENT:** The resident's wishes to refuse any medical treatment will be respected. The resident will be required to document their requests should they wish to refuse any medical treatment. Relevant documentation can be obtained from staff upon request.

**PHOTOGRAPH CONSENT:** Residents must inform staff of their wishes with the taking and displaying of photographs. Resident photographs are taken during social events and displayed through out the facility. This consent form is included on page 2 of the application check-in form; alternatively please ask staff for a copy of this form.

**MEDICATION ASSISTANCE AND CONSENT:** Residents must inform staff of their wishes with the assistance of their medications. Staff can only provide assistance if permission is given in writing. Assistance includes managing scripts, administering medications. Alternatively residents who are capable can continue to self manage their medications. The consent form is included on page 2 of the application check-in form; alternatively please ask staff for a copy of this form.

**RESTRAINT CONSENT:** If a resident is at risk of wandering or absconding from the premises, a restraint consent form must be signed by the resident's authorised representative and medical practitioner. Please discuss this issue with the staff.

**CARE – NURSING CARE:** Merrimac Park Private Care provides 24 hour nursing care by Registered Nurses & Assistants in Nursing. The high care has a Registered Nurse on duty 24 hours, who also supervises the low care during the evening and night. The low care has a Registered Nurse or Enrolled Nurse on duty during day time hours only. Both facilities have Assistants in Nursing on duty 24 hours. All nursing care is carried out in consultation with the

resident, the doctor and the families. We encourage family involvement with all aspects of care.

We give:

- Assistance with activities of daily living
- Rehabilitation support (however we are not a specified rehabilitation unit)
- Support for residents with confusion or challenging behaviours (as long as the safety of others is maintained)
- Emotional support to residents and relatives
- Administration of medications as per doctors' orders
- Support with palliative care and grief counselling

**MOVING ROOMS DUE TO CHANGING CARE NEEDS:** As a resident's care needs change, staff will consult with the resident and the family about moving the resident to the most appropriate unit to meet the needs of the resident. We will only suggest a change based on providing the most appropriate care for the resident. During these transfers, staff will arrange for removal of all furniture and clothing into the new room. Family will have to arrange for the removal of larger pieces of furniture if they are no longer appropriate for resident use. A resident residing in the **Low Care facility** will have priority placement in the **High Care facility** if their care needs change.

**RESIDENT REQUEST TO CHANGE ROOM:** Under some circumstances, residents may be able to request a change of room as vacancies become available. These moves are usually for social reasons. During these transfers, it will be the responsibility of the resident and family to move all furniture and belongings into the new room.

**PLACEMENT AFTER HOSPITAL LEAVE:** In some circumstances, a resident from the low care may go to hospital due to illness or for medical attention. If the residents care needs change and they require placement back into the high care, the resident will initially return back into the low care and the process for transfer to a more appropriate wing will be followed.

**SECURITY OF TENURE:** Residents who need hospitalisation are assured of their bed being kept for them. Residents only may be asked to leave if our facility can no longer provide accommodation and care suitable to the resident's needs and level of dependence. The residents 'Accommodation agreement' can be terminated if the resident fails to pay any agreed fee within 42 days of the due date or the resident repeatedly breaches the Facility's rules and regulations. The agreement can also be terminated if the resident intentionally causes serious damage to the facility, its property or seriously injure any staff or other resident.

**HYGIENE:** We follow the 'best practice' model of care. For residents requiring staff assistance to meet hygiene needs, a full shower / bath will be alternated with a bed sponge / wash. Therefore, residents who require staff assistance will be showered every 2<sup>nd</sup> day at a time of their choice, alternating with a bed sponge / wash. Residents capable of showering themselves, do so at a time of their choice.

**PODIATRIST:** A podiatrist visits the high care every six weeks to attend the foot care of the residents. There is no charge for this service. The resident may also have their own Podiatrist visit, or the resident may wish to make arrangements to have their foot care needs attended to outside the Home. Staff are able to assist and advise in this matter. Residents in the low care will be required to manage their own independent Podiatrist needs and costs. Residents can arrange to have the facility Podiatrist or have their own Podiatrist visit within the home, or they may wish to make arrangements to have their foot care needs attended to outside the home. Staff can assist with the booking of appointments upon request.

**DENTAL, OPTICAL, AUDIOLOGY, DIETICIAN, SPEECH THERAPY & OTHER THERAPIES**

The facility's Dentist, Optometrist, Audiologist, Dietician and Speech Therapist can be arranged to visit upon request. The standard fee will apply. Alternatively, the resident may wish to make arrangements to have these needs met outside the home. Staff can assist with the booking of appointments upon request.

**PHYSIOTHERAPIST**

***High Care facility:*** The Physiotherapist assists with the planning and management of rehabilitation plans. These programs are designed to maintain the current state of resident's mobility capabilities and promote and maintain comfort. The physiotherapist will also work in consultation with the resident, the family and the staff to plan the safest means of mobilising and transferring residents, whilst complying with 'Workplace Health & Safety requirements'. There is no charge for this service. Appointments with the physiotherapist can be made through the staff. Standard mechanical equipment used for mobility is supplied by the facility. Items include: wheelchairs (for transferring), mobile shower-chairs, lifting devices and monkey bars above beds. If facility stock is available, some comfort chairs can be borrowed. The Physiotherapist can assist with information on purchasing the most appropriate equipment for the residents' needs. Alternatively, residents can contact the 'Independent Living Centres', as they offer several services designed to promote safe living. Phone: (07) 3397 1224 Residents may also wish to make arrangements to have these needs met outside the home or by their own Physiotherapist; these costs will be paid by the resident. Staff can assist with the booking of appointments upon request.

***Low Care facility:*** Residents will be required to manage their own independent Physiotherapist needs and costs. Residents can arrange to have our Physiotherapist or have their own Physiotherapist visit within the home, or they may wish to make arrangements to have these care needs attended to outside the home. Staff can assist with the booking of appointments upon request. A physiotherapist will conduct an assessment to monitor on-going problems or pick up new problems early. The physiotherapist will plan a program to assist the resident to manage any problems.

- New problems will be assessed earlier and plans will be implemented to minimize further deterioration.

- A plan will be implemented to manage, maintain or improve on-going problems already being experienced.
- The plan will help maintain independence.
- The plan will help prevent falls.
- The plan will help with musculo-skeletal pain and swellings.
- The plan will improve joint movements and muscle stretches.

**Low care** residents will be required to provide all mechanical equipment used for their individual mobility or transfer needs. Until arrangements can be made to purchase these items, we do provide equipment for residents to borrow for a short term. Staff can assist with information on purchasing the most appropriate equipment for the residents' needs upon request.

**ALTERNATIVE THERAPIES:** Residents may wish to make arrangements for Alternative therapies, or have their therapist visit within the facility. All staff will endeavour to support these treatments where possible. Upon request, staff can assist with bookings and can supply the resident with a comprehensive list of local Alternative therapists.

**PHARMACEUTICALS:** Staff are available to assist with managing the resident's medicinal needs. The nursing staff will attend to all pharmaceutical needs if required. The facility pharmacy is APHS, located at John Flynn Hospital. Accounts are included in the resident's monthly statements. Queries concerning pharmaceutical accounts are to be directed to the pharmacy on phone: (07) 3394 9250 Spouses are encouraged to contact the APHS pharmacy with details of all chemist accounts to ensure accurate billing and monitoring for the Pharmaceutical Benefits Scheme. (PBS). We request approval to be sought from the management prior to bringing any medical or chemical item into the home. This does not include toiletry items.

**NO LIFTING POLICY:** All staff must comply with the 'Workplace Health & Safety' requirements. The lifting of persons and objects must always be undertaken strictly in accordance with the 'NO LIFTING POLICY'. All resident transfers will be attended in accordance to Physiotherapist assessment and recommendation.

**CARE COORDINATOR:** Care coordination for the resident is equally shared amongst all Nursing staff, however an individual Registered nurse / Enrolled nurse will be responsible for the care coordination of an individual resident. The Care Coordinator is responsible for completing all assessment data and the resident care plan. The resident and family will be introduced to the Care Coordinator upon check-in.

**RESIDENT PROGRESS NOTE UPDATE REPORT:** As attendance at a family conference is not always convenient, a comprehensive progress report is sent to the resident's nominated relative. These reports generally include all information that would otherwise be discussed during the family conference. They are generated every 12 months and include all information about every aspect of the resident's care. We recommend relatives make copies to send to other family members to keep them updated on the resident's care. A

section is included for the relatives to respond and acknowledge receipt of the report.

**FAMILY CONFERENCES – OPTIONAL:** Alternatively, a family and staff conference can be arranged upon family request. This would be conducted during normal business hours. We understand personal and business commitments can make appointments difficult, therefore phone conferencing or email communication can also be accommodated. Family can request a conference at any time. The meeting may or may not include the resident, doctor and other allied health team members depending on the need at the time.

**RESIDENT CARE PLANS:** Upon check-in a plan of care is formulated from data gathered from the resident, the family, discharge medical assessments and relevant assessment tools. These plans are used to direct staff on the most appropriate care for the resident. To ensure the best possible care is being delivered and planned for, input from the resident and family is imperative. Care plans are stored behind the resident's bedroom door. Care plans for residents in the secured units are located at the reception desk. Please feel free to read the care plan and see staff to discuss any item.

**FINANCES:** All fees are to be paid by DIRECT DEBIT ONLY. Information is included in the Resident Accommodation Agreement. All beds in our facilities are Commonwealth-funded and we observe Commonwealth regulations.

**Low Care placements** incur payment of a refundable accommodation bond generally on the day of placement acceptance, **however, until our new facility receives government certification, a bond will be charged as per the asset assessment upon certification. We perceive this date to be one month after opening in December 2011.** Daily care fees are to be paid one month in advance. Accounts are monthly and include all relevant resident expenditure throughout the month, including pharmacy accounts. Account queries are to be directed to our Administration. Contact on phone: (07) 3822 6761 You will be provided with all relevant information by our administration staff as part of the 'Accommodation Agreement for Residential Care' upon check in. The facility will assist with arranging the purchase of substantial items for residents (eg. Wheelchairs), however, these items must be prepaid by the resident. The management maintains a small petty cash float for resident in-consequentials up to the value of \$100 per resident. If we incur additional expenses on behalf of the resident we will include details of these expenses on the resident's monthly invoice.

**LEAVE – HOSPITAL AND / OR SOCIAL:** A resident may take leave from the facility for any reason and whenever required provided the staff are notified before taking such leave. The Department of Health and Ageing permits each resident 52 days social overnight leave each year (July 1 to June 30). Social leave days do not accumulate. Each temporary leave day taken by the resident shall be treated as occupancy; this means that the resident will still be charged daily bed fees. Residents who need hospitalisation are assured of their bed being kept for them. Hospital leave days are unlimited. During all hospitalisations, the resident will still be charged daily bed fees.

**VISITING HOURS:** As we consider our homes to be the resident's home too, the resident's family may visit at any reasonable time convenient to the resident or themselves, bearing in mind the privacy needs of other residents. Family members may be required to leave the resident's room upon staff requests or whilst staff are assisting with care needs. Visitors will also be asked to leave if others are being disturbed. All community support and volunteers are encouraged to visit. For safety, all exit doors are locked at dusk, but a doorbell is provided at the front door and all visitors will need to ring the bell for admittance. For safety reasons all exit doors can be opened from the inside when locked, but not from the outside. A resident's family may also phone our facilities at any time.

**We request family and friends visiting our home refrain from attending if they are ill and telephone residents instead.**

**PERSONAL TELEPHONE / INTERNET ACCESS:** Personal telephone lines and Internet access is available in every room. Residents will be charged for use of the phone or internet access. Please discuss with management if you require the phone or internet.

**COMMUNITY VISITORS SCHEME:** This is a national programme funded by the Commonwealth Government. The Scheme aims to enrich the quality of life of residents of aged care homes who are isolated or lonely, and would benefit from a friendly visitor. The scheme also helps to establish and reinforce links between residents of homes and their community. If the resident would like to know more, contact Commonwealth Carelink Centre on phone: 1800 052 222

**PARKING:** Parking areas are available at the front and back of the facilities. Disabled parking is also available. Please be mindful of the 10km speed limit throughout the complex.

**PUBLIC TRANSPORT:** It is recommended that the resident apply for the 'Taxi Subsidy Scheme'. These application forms are available from the management upon request, or from the Queensland Transport Department phone: (07) 3253 4954. The resident's doctor or Physiotherapist also assists with these applications.

**ACTIVITIES:** The home provides activities Monday to Friday. Programs are designed to assist residents to maintain their interests developed prior to checking into the home and learn new skills. Community and relatives involvement is welcomed. Whilst we strongly encourage the resident's participation in our active social calendar, staff will respect their right to decline joining in planned group activities. We would gladly accept any donations towards items that can be used by residents for their comfort, enjoyment or creativity. Should family wish to celebrate special events or share a meal whilst visiting with the resident, staff will gladly take bookings to use the communal activity rooms. Residents can book use of the BBQ's and Activity room kitchenette for functions. We have a small collection of videos and DVD's for loan. It will also be very helpful in most cases if relatives have

the time to visit frequently and be part of the activity programme. How much they visit and what they can do is best discussed with the staff.

**SHOPPING:** Residents / relatives are encouraged to attend to their own shopping needs where possible. Residents should have or be provided with sufficient funds to be able to purchase certain comforts such as sweets, alcohol, hairdressing etc.

**NEWSPAPERS:** A communal local newspaper is delivered weekly to the facility. Other newspapers or magazines can be delivered by the local newsagency. Staff can assist with arranging this service. Costs are at the residents' expense.

**LIBRARY SERVICE:** Residents are welcome to borrow any books or tapes from our small library, we also suggest residents visit the local libraries themselves or arrange family to borrow books on their behalf.

**VOTING:** Postal polling booths are conducted within the home during elections. Voting is encouraged where a resident is still able to make an informed decision. Should this not be possible, family must make an application to the electoral office for removal of the resident's name from the electoral list.

**CHAPLAIN SERVICE:** Ministers of religion visit regularly and are available twenty-four (24) hours a day. Church services are conducted on a regular basis. If the resident requires special spiritual support the staff will be able to assist organise a representative of their choice. Staff support, honour and respect all lifestyle choices, cultural or spiritual requests. Staff will assist with contacting relevant clergy upon request.

**HAIRDRESSER:** Staff can assist with making appointments in our hairdressing salon with the facility hairdresser. Hair cuts cost from \$10.00. Costs for other treatments will be upon request. Alternatively, the resident may have their own hairdresser visit, or they may wish to make arrangements to have their hair care needs attended to outside the home.

**PERSONAL POSSESSIONS:** Each resident has their own bedroom and ensuite. Residents are encouraged to bring small personal items to make it feel like home, such as photographs, wall hangings, ornaments, vases, plants, quilts etc.

**VALUABLES:** Requests for larger items are to be referred to the Management. E.g. furniture items. Items of significant value are best left in the care of relatives. Valuable items can be locked in the resident's bedside table. We recommend you seek advice concerning personal insurance matters.

**BEDSIDE TABLE KEY:** All bedside tables have a lockable drawer for use. The key is to be kept by the resident if able, or returned to the staff. Family members are not permitted to take the key off the premises. If the key is lost or damaged, supply of a replacement key will be \$20. This will be charged

to the resident's account.

**ELECTRICAL ITEMS:** All electrical items must be electrically tested and safety tagged by a qualified technician prior usage within the service. Electrical items cannot be used within the home, unless safety tagged. If required, management can arrange this to be completed within 5 days of check-in. After check-in this is to be repeated every year. A small fee of \$10 per item will be charged for this service.

**TELEVISIONS:** Residents are provided with televisions in their bedrooms. Residents are to remain respectful of noise levels. The use of headphones is recommended to minimise inconvenience to resident neighbours. Television sets are provided in the lounge areas and activity areas for community viewing.

**WALL HANGINGS / PICTURES:** Pictures, wall hangings or paintings are only to be hung by the facility maintenance person on request. Staff are happy to arrange this for you.

**PERSONAL FRIDGES:** It is the responsibility of the resident to ensure personal fridges are maintained and regularly cleaned. The freshness of food items is to be controlled. All other food items stored in resident rooms are to be kept in appropriate storage containers. A charge of \$15 will apply if staff are required to clean the resident's fridge.

**AIR CONDITIONING:** Residents have all been supplied with a private air conditioning unit into their bedrooms. All running costs will be at the resident's expense. The resident can choose to use the air conditioner and an air conditioning agreement must be completed prior the air conditioner being used. An agreement is to be obtained from the staff upon request. Air conditioning costs will be added to the monthly accounts for the months of October – March, inclusive at the current rate of electricity.

**LABELLING OF PROPERTY:** All personal items and equipment are to be discreetly yet clearly labelled with the resident's full name.

**CHEMICALS:** No chemicals or medications are to be provided by family members without approval from the Registered nursing staff.

***All care will be taken of your possessions, but the staff and management will not be held responsible for loss or damage.***

**CLOTHING:** Residents are encouraged to dress comfortably during the day. The amount of clothing and style worn will be dependent on the resident's personal preference and care needs. Family members are encouraged to regularly sort clothing and wardrobe items. It is recommended out of season clothing be stored with family. Family will be required to attend to all clothing repairs. Staff will assist with providing family members with 'shopping lists' of required clothing items. When selecting clothing please take into account all clothing is washed in **industrial washers and dryers**. Industrial machines reach temperatures of 70 degrees and all wash cycles include bleach. All care will be taken of resident possessions, but the staff and

management will not be held responsible for loss or damage. We encourage the resident's family to wash delicate items at home. The staff are available to advise and assist in this matter. **Residents and family are not permitted in the commercial laundry.**

**CLOTHING LABELS:** Due to the numbers of residents residing in this facility, marking of clothing is important. All clothing is to be labelled using heat sealed or sewn on labels only. It is a requirement that all items are labelled to help facilitate the quick return of clothing after being washed. If clothing is not labelled prior time of check-in, the resident will be charged \$56.20 (small increases of this fee occur throughout the year) for the supply of 100 labels, which will be heat sealed to all clothing. The cost will be added to the initial monthly account. Any misplaced items are to be reported to the staff.

**DRY CLEANING:** Staff can assist with arranging dry cleaning of any items upon request.

**PERSONAL LAUNDRY:** Residents are welcome to use the personal laundry. A domestic washing machine, dryer and ironing facilities are available for resident use.

#### **SUGGESTIONS FOR APPROPRIATE CLOTHING**

Here are some suggestions on what clothing items to provide:

- Clothes a size or two larger than normally worn
- Dresses that button or zip down the front or back are preferable for ease of dressing and undressing
- Half slips instead of full slips
- Elastic topped stay up stockings
- About 7 Nighties with elastic necklines or several buttons (so that they can be lipped down rather than lifted over the head)
- Track suit pants or permanent press trousers
- Slip on shoes with flat soles or low heels
- At least one good outfit to be worn on outing and special occasions
- An overcoat or jacket for outings
- Clothes made from knit or interlock so that fabrics wash and wear well without ironing
- Socks that do not have a tight binding at the top which restricts circulation

**LOST PROPERTY:** We take due care of residents' possessions, but cannot accept responsibility for damage or loss of property. Lost property items or unclaimed items (after the resident's departure from the facility) are kept for one month then distributed to charities.

**HOSPITAL BAG:** Residents are required to provide a bag to pack clothing and toiletries into if admission to hospital is required. We recommend a zippered vinyl striped bag that can easily be stored in the resident's wardrobe until required. If the resident doesn't supply a bag, the facility will supply one and charges of \$3 will be added to the resident account.

**GLASSES, DENTURES AND HEARING AIDS:** We recommend using an engraving machine to label these items with the resident's full name. Staff can assist with this upon request.

**TOILETRY ITEMS:** Residents in the **high care** will be supplied with all basic items: soap / body-wash, toothpaste, denture cleaning preparations, shampoo and conditioner, disposable razors, talcum powder, tissues, continence products and toilet paper. Items not provided are: electric razors, toilet bags, moisturiser for the face, make up, perfumes or deodorants. Residents in the **low care** supply their own toiletry items and continence products. We supply you with tissues and toilet paper.

**LINEN:** All standard single bed linen, blankets, decorative bed covers, bath towels, bath mats and face washers will be supplied. (Excluding doonas, sheepskins, quilts or boomerang pillows. These items are to be laundered by the resident's family). The resident is responsible for supplying 2 complete sets of linen for any beds other than single. Please label these items.

**MENUS:** All food is prepared on the premises in accordance with resident preference, special diets and under advice from a dietician. Residents choose meals from the set daily menu; all attempts will be made to cater to the resident's preference. Menus are on display in reception and we welcome all comments from residents or family. We have a four week menu, which is designed in consultation with residents and a Dietician. Family are invited to share a meal. Prior bookings (a day in advance) are essential for catering purposes. Meal costs are displayed at reception. Family can also provide **non-perishable food items**. If being stored in the communal dining room fridges, items are to be in sealed containers and be clearly labelled with the date and resident's full name. To ensure the safety of all food items, access to the communal dining room fridges is upon staff request. Free tea and coffee making facilities are provided in the communal dining room kitchenettes. Access to these facilities in the Special Needs secured units is upon staff request.

**MEAL TIMES:**

Breakfast	7.00am – 8.00am
Morning tea	10.00am – 10.30am
Lunch	12.00pm – 12.30pm
Afternoon tea	2.00pm – 2.30pm
Dinner	5.00pm – 5.30pm
Supper	7.00pm – 7.30pm

**ALCOHOL:** Alcoholic beverages can be enjoyed at a time of resident preference and with medical approval. However, it is preferred that alcohol is not kept in resident rooms.

**SMOKING:** Smoking is NOT permitted within the buildings. Residents / relatives and staff are only permitted to smoke outside.

**RESIDENT MEETINGS:** A resident meeting is held monthly. The resident and / or relatives conduct these meetings every month. This is an opportunity for

residents or their representatives to share in morning tea and to discuss comments or concerns freely. Staff attend by invitation only. Meeting minutes are accessible at the reception upon request. Activity Planning meetings are held with the Lifestyle co-ordinators every 3 months. Previous activities are evaluated and plans for future social events are organized in this meeting. All residents and relatives are invited to attend these meeting. Your input is valuable.

**COUNSELLING FOR THE CARERS:** We recognise that most people experience some very difficult emotions when they first place their loved one in a residential care facility. Some feel guilty, others have a feeling of relief – but then feel guilty that they feel relieved. Others again feel a great sense of loss. All these feelings are quite normal, but sometimes it is helpful to talk about them. Please feel free to do so if you wish and contact any member of our management team or staff.

**PALLIATIVE CARE:** During palliative care, relatives are welcomed and encouraged to participate in the resident's care. We will assist you to spend as much time as you like with your loved one. We will happily provide you with items for hand massage, moisturizers and music. Family are welcomed to stay overnight during this time.

**MOVING OUT:** Upon moving out of our facility, staff will assist with the packing of resident belongings. It is preferred for personal belongings to be removed from the resident room within 1 day and from the service within 7 days of discharge. We understand that sometimes delays with the collection of items can occur; we will store personal belongings for 30 days in our storage sheds. To ensure items are made available for pick up from the shed, please pre-arrange a time for collection with staff. After this time, if the items have not been collected, they will be donated to charity.

**OUR RIGHTS AND RESPONSIBILITIES:** We must act in a manner consistent with the Charter of Residents Rights and Responsibilities.

**RULES AND REGULATIONS OF THE FACILITY:** We will make Rules and Regulations for the smooth running of the facility. A breach of the Rules or Regulations does not entitle you or us to terminate care provision and will not amount to grounds for expulsion. We will bring to your attention any change in the Rules and Regulations from time to time.

### **Rules And Regulations**

- Residents, staff and the Service Provider are to be respectful in their dealings with each other.
- Each resident will conduct himself or herself in a way that allows each resident their respective rights under the Charter of Residents' Rights and Responsibilities as detailed below.
- Residents may not engage in activities that is a danger to them, is intimidating or endangers other residents or staff or causes damage to property.

- Smoking is NOT permitted inside the building.
- The consumption of alcohol is to be in moderation and be consistent with doctor's advice.
- Any and all absences from the facility are to be notified to the person in charge, prior to departure.

### **Charter Of Residents' Rights And Responsibilities**

Each resident of a residential care service has the right:

- to full and effective use of his or her personal, civil, legal and consumer rights
- to quality care appropriate to his or her needs
- to full information about his or her own state of health and about available treatments
- to be treated with dignity and respect, and to live without exploitation, abuse or neglect
- to live without discrimination or victimisation, and without being obliged to feel grateful to those providing his or her care and accommodation
- to personal privacy
- to live in a safe, secure and homelike environment, and to move freely both within and outside the residential care service without undue restriction
- to be treated and accepted as an individual, and to have his or her individual preferences taken into account and treated with respect
- to continue his or her cultural and religious practices, and to keep the language of his or her choice, without discrimination
- to select and maintain social and personal relationships with anyone else without fear, criticism or restriction
- to freedom of speech
- to maintain his or her personal independence
- to accept personal responsibility for his or her own actions and choices, even though these may involve an element of risk, because the resident has the right to accept the risk and not to have the risk used as a ground for preventing or restricting his or her actions and choices
- to maintain control over, and to continue making decisions about, the personal aspects of his or her daily life, financial affairs and possessions
- to be involved in the activities, associations and friendships of his or her choice, both within and outside the residential care service
- to have access to services and activities available generally in the community
- to be consulted on, and to choose to have input into, decisions about the living arrangements of the residential service
- to have access to information about his or her rights, care, accommodation and any other information that relates to the resident personally

- to complain and to take action to resolve disputes
- to have access to advocates and other avenues of redress
- to be free from reprisal, or a well-founded fear of reprisal, in any form for taking action to enforce his or her rights

B. Each resident of a residential care service has the responsibility:

- to respect the rights and needs of other people within the residential care service, and to respect the needs of the residential care service community as a whole
- to respect the rights of staff and the proprietor to work in an environment free from harassment
- to care for his or her own health, personal hygiene and well-being,
- to inform his or her medical practitioner, as far as he or she is able, about his or her relevant medical history and current state of health.
- to keep their personal area and self in a manner acceptable to management and the Community in general
- to dispose of their personal rubbish

**IMPROVEMENT REQUEST FORMS:** Completing a pink 'Improvement Request Form' assists us to continually improve our service to you. If you have any positive or negative comments about our service, suggestions on how to improve or if you have identified something that is dangerous to our residents, staff or visitors, please talk to staff. You can complete the Improvement request form and give it to staff, leave it at reception, post it to the facility or staff can complete the form on your behalf. Completed forms are actioned by management. Management will provide to you a written response on the actions taken. We appreciate all suggestions about our service. Improvement Request forms are located at the reception desks.

**DISPUTE RESOLUTION, COMMENTS, SUGGESTIONS OR COMPLAINTS:** We aim to provide a superior service in a warm and caring environment, but nobody is perfect, so we are committed to attempt to resolve any dispute between us. We are always looking for comments and suggestions to improve conditions for you and we welcome all complaints in the hope of improving our service to you. There are no reprisals for any complaints made.

Clinical care issues must be raised with the Registered Nurse on duty

If you are not satisfied with a decision concerning services provided you must raise your concern with the Head of Operations Mrs Letisha Gleeson.

Email: [lgleeson@superiorcare.com.au](mailto:lgleeson@superiorcare.com.au)

If your concern remains unresolved you must raise it with the Executive Officer

Mr. Russell Douglas Egan. Phone: (07) 3822 6761

Email: [rdegan@superiorcare.com.au](mailto:rdegan@superiorcare.com.au)

Alternatively you can write letters or have staff assist you to complete an Improvement Request form to be given to the management for actioning. This process does not limit your right to pursue your concern through other avenues

You can make a complaint to the Aged Care Complaints Investigation Scheme,

c/o Department of Health and Aged Care. Phone: 1800 550 552

The Aged Care Complaints Investigation Scheme provides a way for care recipients, their families and anyone else who has concerns about the care provided in an Australian Government subsidised aged care service to raise these concerns with the Department of Health and Ageing. Your concerns can be about anything that affects quality of care – catering, hygiene, security, activities, choice, comfort, safety, neglect, financial matters or assault. Further information about the Aged Care Complaints Investigation Scheme can be found on the Department of Health and Ageing's website at: [www.health.gov.au/oacqc](http://www.health.gov.au/oacqc)

Queensland Aged and Disability Advocacy Inc. Phone: 1800 818 338

If you have a query for the Department of Health and Ageing you can phone the Aged and Community Care Information line on Phone: 1800 500 853

Our OPEN DOOR POLICY means we are available to discuss any item at all times.

**OUR VIEWS ON PAIN MANAGEMENT:** Residents have the right to be comfortable and pain free. To ensure this, staff will actively seek to facilitate pain relief for the resident. The resident will be assessed for pain and the cause of the pain ascertained and addressed. An individual pain management programme will be developed in consultation with the resident and/or significant other and the medical practitioner. Assessment of the pain and its relief will be in consultation with the GP, the RN and the resident. We will also seek support from the Palliative Care pain management team. The pain management programme will be monitored and actioned for its effectiveness. All pain relief measures will be documented after communication with the resident. Measures used to reduce or relieve pain within Merrimac Park include;

- ♥ Frequent position change
- ♥ Pressure relieving devices
- ♥ Application of hot packs distraction
- ♥ Administration of prescribed medication
- ♥ Massage
- ♥ Relaxation
- ♥ Visualisation /

**OUR VIEWS ON CONTINENCE MANAGEMENT:** Continence will be promoted at all times, whilst maintaining privacy, dignity and comfort. Assessment for incontinence will be carried out on check-in and for 3 – 5 days using continence assessment tools. Urine will be tested regularly and whenever required to detect infection and any other abnormality. Incontinence will be referred to the medical officer for review, assessment and treatment. Continence will be promoted through programs such as scheduled toileting

programs or bladder retraining. Individualised, dignified incontinence aids will be used. Residents are able to participate in their continence care and have a choice of incontinence aids. Residents in the **low care** supply their own continence aids.

**OUR VIEWS ON DEATH AND DYING:** Management and staff believe that each individual is a spiritual being and that death is a natural process. Our residents have a right to die pain free, in peace and with dignity, in a caring environment surrounded by those who love them. Relatives and significant others are welcomed to actively support their loved one at any time day or night. Staff will facilitate support and counselling for the resident and their family. Staff will facilitate contact with the Chaplain or other clergy if the resident so chooses. Each resident and/or representative will be consulted regarding his or her wishes or instructions concerning death upon coming to live at Merrimac Park Private Care. This information will be checked periodically.

This information will include:-

- ♥ Special aspects of terminal care
  - ♥ Funeral or Cremation arrangements
  - ♥ Religious or Cultural customs to be observed
  - ♥ Family/Representatives requests will be respected and accommodated
- Upon check-in, it is asked that you indicate your preference for burial or cremation and which funeral director is to handle the arrangements. These details are on the application form. Should you require information with respect to this matter, we can provide material available from the local directors.

### **OUR VIEWS ON RISK TAKING& DIFFICULT BEHAVIOUR MANAGEMENT**

**♥♥We cannot totally prevent falls or accidents♥♥**

Our residents have the right to take risks within our complex and the community. Dignity of risk will be discussed with significant others and the resident. Individual assessment will be undertaken by the team (RN, Physiotherapist and Doctor) as to the extent of the risk of injury to the resident and others. Protective assistance or restraint is only used as a last resort and will be dignified and the least invasive. It will be monitored continually and reviewed on a daily basis. All forms of restraint, including physical, chemical or environmental, will be discussed prior its use with the resident and representatives. This includes residing into the secured units within the complex. Bed rails will not be used unless proven necessary or at resident request. Independence will be actively encouraged and maintained at all times.

The safety of the residents and staff will be actively promoted at all times by minimising the risk of injury and hazards.

This is a brief view of Merrimac Park Private Care, compiled to help you understand how it operates. Of course it is not possible to provide in a small handbook everything that you might want to know, so we urge you to ask our staff or management team anything else you are wondering about. The Head of Operations, Ms Kesri Kaushal can offer you further information should it be required.