



Glenview **Health**

# Resident Information Booklet

## Glenview Health Residential Aged Care



Glenview Health Inc acknowledges the Traditional Custodians of the land and pays respect to Elders both past and present.



Glenview Health Inc acknowledges and respects the diversity of our community and our consumers.



## Welcome to Glenview Health Residential Aged Care!

Welcome to Glenview Health and the Residential Care Unit – Glenview Community Care Nursing Home.

We are privileged that you have entrusted your care to us. We strive every day to ensure you receive the best possible care, in a manner that meets your needs, in a way that you wish us to provide care and services to you.

We are proud of our new facility and trust you will enjoy the amenities provided. We will work with you to ensure your care needs are met while you are assisted as needed, to maintain your leisure interests and explore new leisure interests that are available within Glenview Health

You will be enabled to enjoy activities, such as lawn bowls, bocce, gardening, going to the Cinema and enjoying quiet time in the alfresco areas, visiting the library, participating in a variety of art and craft, taking a stroll through the Art Gallery or through the acres of Garden. You are welcome to utilise the Private Dining Room to entertain friends and family or to enjoy a wood fired pizza or BBQ with them in the courtyard. Of course, we will have the Jukebox and Pinball machine available in Kirk's Korner should you wish to kick your heels up of an evening or relax watching your favourite movie in the Cinema.

While you are enjoying the amenities, rest assured our staff will be working diligently to ensure you receive the best possible medical care remaining attentive to any care needs, and that your room and facilities are kept spotlessly clean. The food you choose from our Menu each day, is guaranteed to be made with the freshest of ingredients by our qualified chef's.

If you believe that we can improve our services in any way please speak to any staff member or myself as we will listen and act on your suggested improvements.



*Shane Kirk*  
**CHIEF EXECUTIVE OFFICER**

### OUR DETAILS

Name: Glenview Health Inc.

Address: 33 – 45 Main Street, Rutherglen 3685

Rutherglen Campus: Phone: 02 6033 6200 Fax: 02 6032 9133

Chiltern Campus: Phone: 03 5726 1405 Fax: 03 5726 1049

Email: [info@glenviewhealth.org.au](mailto:info@glenviewhealth.org.au) Website: [glenviewhealth.org.au](http://glenviewhealth.org.au)

**Administration Office Hours:** Monday – Friday 8.30am – 5pm

The information in this booklet has been written to help answer questions you may have about moving into Glenview.

We recognise that making the decision to live in a residential care facility is not an easy one.

The Management and staff at Glenview Health are committed to providing emotional support to new residents/representatives on admission, and on a day-to-day basis.

If you have any further questions, or would like a tour of Glenview, please contact reception during office hours to arrange an appointment.

**TABLE OF CONTENTS**

Topic		Page(s)
1.	History of Health in Rutherglen	5
2.	About us	6
2.1	Our Vision and Mission	
2.2	Organisation Structure	
2.3	Strategic Plan	
3.	Your Accommodation	7
3.1	Respite Care	
3.2	Admission and Change of Address	
3.3	Security of Tenure	
4.	Fees and Charges	8
4.1	Accounts	
4.2	Pharmacy Accounts	
5.	Advanced Care Planning	9
6.	Consumer Focused Care and Services and Care Planning	10
7.	Consumer Rights	10

8.	Cultural and Religious Requirements	11
9.	Australian Privacy Principles	11
10.	Security	11
10.1	Security Camera	
11.	Staff Privacy	12
12		12
12.1	Leisure, interests and Activities	
12.2	Sun Protection Bus	
12.3	Music Therapy	
12.4	Pet Therapy	
13	Resident Representative Meetings	13
13.1	Consumer Advisory Board	
13.2	Quality Care Advisory Board	
14	Grapevine Newsletter	13
15	Volunteers	14
16	Valuables / Spending Money	14
17	Visiting, Outings, Leave	14
18	Furnishings and Electrical Appliance Testing and Tagging	15
19	Sexuality and Intimacy	16
20	Smoking	17
21	Alcohol	17
22	Meals, Snacks and Food Safety	18
22.1	Tea and Coffee and Meals for Visitors	
23	Clothing and Laundry	19

24	Care and Services	20
24.1	Physiotherapy	
24.2	Podiatry	
24.3	Hairdresser	
24.4	Medical Care	
25	Immunisations	21
26	Safety and Emergencies	21
27	Quality of Care and Accreditation	22
28	Opportunity to Improve and Complaints	23
29	Elder Abuse, Compulsory Reporting	23
30	Health Workplace for Staff	24
31	Infection Prevention and Control	25
32	What to Bring	26

## 1. HISTORY OF HEALTH IN RUTHERGLEN

1860 – Wahgunyah Diggings - miners and tradespeople erect a tent hospital on the goldfield at Drummond and Murray Street. Various medicos administer to the miners, some with qualifications and some without.

1860 – 1870 - Nurse Bridget Glasgow, provides a voluntary midwifery and nursing service dedicated to the women on the goldfields. She had a mobile hospital operated out of her buggy and would tender to the ill and their children at all hours.

1897 – 1905

Nurse Nicholas' Hospital at 129/130 High Street

Nurses McEvey Hospitals at 27 Ready Street, 59 Ready Street and 26 Meehan Street. 13 Fortune Street – details unknown, Nurse Thompson or Nurse Robertson.

1908 to 1920's estimated.

147 High Street – Dr. Harris surgery and hospital rooms

Hunter and Murphy Streets - 1920's era providing rehabilitative rest for out of towners seeking recovery.

1938 - The Rutherglen Bush Nursing Hospital was opened at 168 High Street Rutherglen. In later years it became the Rutherglen District Hospital.

1960's - The District Nursing Service commenced servicing the Shires of Rutherglen and Chiltern.

1980's - Acute services cease at Rutherglen  
Glenview Community Care Inc. Is formed and a 23-bed nursing home and community health centre is opened.

1989 to July 2008 - Renovations and expansion - RAC Bed numbers increase from 23 to 40 beds and services offered in the Primary Care Program are expanded.

July 2008 - Glenview Community Care Inc. amalgamates with Chiltern and District Health Service to form Indigo North Health Inc (INH), with campuses at Rutherglen and Chiltern, servicing the Indigo North region.

2009 - Indigo North Health purchases St Mary's Community Village units (located adjacent to St Mary's church in Rutherglen) The modern complex comprises 6 two-bedroom free standing units providing the option of retirement village living for those who wish to maintain their independence.

July 2014 - Indigo North Health becomes the Approved Provider of the Rutherglen Kindergarten, providing Kindergarten services to Rutherglen and surrounding communities.

June 2025 – New name and new home. Indio North Health becomes Glenview Health and moves to a new facility on 33 – 45 Main Street.

## 2. ABOUT US

### 2.1 Our Vision and Mission

Our vision and mission are reflected in the care and services we provide to our residents and clients.

#### Our Vision

Assisting individuals and communities to achieve the best possible health outcomes.

#### Our Mission

Deliver a range of services that improve the health and wellbeing of individuals

and families in our communities.

## **2.2 Organisational Structure**

Refer to the Glenview Health Organisational Chart attached.

## **2.3 Strategic Plan**

The Board of Management (BOM) oversees the development of the organisations Strategic Plan. The latest Strategic Plan is attached.

## **3. YOUR ACCOMMODATION**

Glenview Health Residential Aged Care (RAC), has 50 single rooms that are approved and certified by the Commonwealth Department of Health and Aging to provide 'ageing in place' residential aged care. This means that you don't need to move to another facility as a result of changing care needs. All rooms have a private ensuite.

Couples can be accommodated in double rooms if available.

A compendium in each room explains the room facilities and services provided.

You will need an aged care assessment to determine whether you are eligible to receive government subsidised aged care services. Visit My Aged Care's website [www.myagedcare.gov.au/assessment](http://www.myagedcare.gov.au/assessment) or call My Aged Care on 1800 200 422

### **3.1 Respite Care**

We have One respite room available for short stay. Please contact us for information and bookings.

As with permanent residential care, you will require an aged care assessment for Government subsidised respite. Visit My Aged Care's website [www.myagedcare.gov.au/assessment](http://www.myagedcare.gov.au/assessment) or call My Aged Care on 1800 200 422

In most cases, a person can have up to 63 days of respite care in a financial year. However, extensions of up to 21 days at a time are possible if needed.

### **3.2 Admission and Change of Address**

After completing the Glenview Health Application for Permanent and Respite Admission form, you will be contacted by our admissions team to discuss your plans and needs. You will be placed on our waiting list and we will contact you when a suitable room becomes available.

On the day of admission, we ask that a relative or representative accompany a you to our facility. This will provide you with additional moral support during the admission process. If this is not possible, we ask that someone close to the you visit the facility shortly after your admission.

Please see 'Checklist for Administration Purposes' enclosed with this package for a guide on what to bring. An orientation of the facility is provided to each new resident and their representative to assist them to adjust to the new living environment.

Pre-Entry leave of seven days can be arranged to assist the new resident/family to prepare for admission.

Following admission into the facility, it is necessary that all relevant authorities be notified of the change of address, regardless of whether the resident still has a spouse living at home in the community.

The change of a resident's address from her/his previous place of residence to Indigo North Health Inc. is the responsibility of the resident or their nominated next of kin/representative.

### 3.3 Security of Tenure

All residents are offered a Residency Agreement, which specifies:

- the rights and responsibilities of the resident
- the rights and responsibilities of the service provider
- fees and charges
- termination of the agreement

A resident's security of tenure is valid from the time of admission until the time of their departure unless otherwise specified in the Resident Agreement.

Residents are free to move from the facility at any time, be it for reasons of relocating to another care environment or returning home to live with their family. If we are unable to continue to provide an adequate level of care for a resident whose care needs have grown beyond the capacity of our staff to manage, this will be discussed with both the resident and the resident's family/representative with a view to assisting in arranging appropriate alternative accommodation.

## 4. FEES AND CHARGES

Fees and charges are prescribed by the Aged Care Act 1997 and associated principles. A Residential Aged Care – 'Calculation of Your Cost of Care' is conducted by Centrelink will determine the fees and charges residents are asked to pay. More information in relation to fees and charges can be gained from Centrelink on 13 23 00, the Glenview Health CEO, or from "My Aged Care" on: Freecall 1800 200 422 or their website: [myagedcare.gov.au](http://myagedcare.gov.au)

## 4.1 Accounts

Accounts are calculated in advance on a monthly basis and are direct debited from the nominated account within the first week of each month. Please complete the Direct Debit Form attached with this package.

No money will be accepted outside office hours. All enquires related to accounts should be received at Reception during office hours.

## 4.2 Pharmacy Accounts

Pharmacy accounts are billed directly from the pharmacy to the resident / representative. Payments, as well as all enquiries related to the account are to be made direct to the pharmacy. Please ensure the pharmacy is notified of the nominated person responsible for the payment of the account.

## 5. ADVANCED CARE PLANNING AND POWER OF ATTORNEY

Advance care planning allows those closest to you to make healthcare decisions on your behalf if you are not able to make decisions for yourself. It also enables health professionals to understand and respect your health care preferences, if you become seriously ill and unable to communicate for yourself. (Advance Care Planning Australia)

Victorian legislation (as at 12 March 2018) allows for a person to plan for the future, should they not be able to make their own decisions. They can do this by:

- Appointing a Medical Treatment Decision Maker (MTDM) and, or;
- Completing an Advance Care Directive (ACD) and, or;
- Making an Enduring Power of Attorney which may involve the appointment of an attorney for financial matters and or an attorney for personal and lifestyle decisions (but not health care matters).

To complete these legal documents the person must have the capacity to make a decision including:

- An understanding of the information related to the decision and the effect of the decision
- The ability to retain the information for the decision to be made and;
- Be able to communicate the decision in some way.

Medical treatment should only be provided with informed consent. A health practitioner must seek informed consent from the resident or if the resident does not have decision making capacity, the resident's medical treatment decision maker.

The only exception is where urgent treatment is required to save life or prevent serious damage to a person's health or; to prevent or to alleviate pain or distress.

The medical treatment decision maker for a resident is the first person in the below list who is reasonably available, and willing and able, to make the decision:

- The resident themselves where there is decision making capacity
- The resident's appointed medical treatment decision maker
- The resident's guardian appointed by VCAT to make decisions about their medical treatment
- The first of the following people who is in a close and continuing relationship with the resident:
  - spouse or domestic partner
  - an adult child (eldest first)
  - parent (eldest first)
  - an adult sibling (eldest first).

Further information can be obtained from the Office of the Public Advocate and Advance Care Planning Australia.

## 6. CONSUMER FOCUSED CARE AND SERVICES AND CARE PLANNING

We are committed to providing care and services that meet your needs and preferences for your health and well-being.

To enable this to occur we work in partnership with you and your nominated representative to conduct an initial assessment and develop an individualised Care Plan that takes into consideration your needs, preferences, safety and your right to take risks. The plan is put into action and monitored on a day-to-day basis.

The Care Plan is reviewed regularly and staff will discuss the plan with you and your representatives to ensure that the plan is understood and agreed with.

Where things change, a reassessment is conducted with you and or your representative and if needed, the Care Plan is changed.

If a referral to another service may assist to maintain your health and or wellbeing, this will be discussed with you and or your representative. Staff will also forward a Monthly Care Statement to the Primary Contact that will ensure that you remain fully informed of care

## 7. CONSUMER RIGHTS

We respect each resident's right to:

- Personal privacy
- Be treated with dignity and respect
- Have identity, culture and diversity valued and supported
- Safe and quality care and services

- To be involved in decisions that affect you • Complain and be involved in the resolution process
- Advocacy support.

Tolerance, understanding and respect for diversity is upheld regardless of age, race, cultural customs, religion, physical ability or attributes and sexual identity. Discrimination of any kind shall not be tolerated.

Refer also to attached –Charter of Aged Care Rights.

## **8 CULTURAL AND RELIGIOUS REQUIREMENTS**

Please discuss with staff any cultural or religious requirements. A cultural plan addressing the key areas of healthcare provision can be developed that consider the environment, communication, religious and spiritual needs, dietary customs and emotional well-being.

## **9 AUSTRALIAN PRIVACY PRINCIPLES**

To provide you with the best care, we need to collect a range of personal information. We can assure you that we abide by the Australian Privacy Principles within the Privacy Amendment (Enhancing Privacy Protection) Act 2012 which amends the Privacy Act 1988 and the Victorian Health Records Act 2001. Both these acts set out the requirements for ensuring systems and processes are in place to appropriately manage personal information.

A copy of our full Australian Privacy Principles Policy is attached and will be explained to you on admission.

## **10 SECURITY**

Safety and security of our residents is of utmost importance to us therefore internal entry doors to the Aged Care facility are locked. Access is available through the use of a proximity security tag.

### **10.1 Security Cameras**

The building has security cameras located at each entry and exit, in the car park and the common areas such as; corridors, dining rooms and lounges for safety and security.

These cameras record images that are kept for 1 week for review should an incident occur. Staff also monitor the images throughout each shift to identify potential or actual incidents related to resident safety and or security. The cameras and images are not used for any other purpose.

## **11 STAFF PRIVACY**

Residents and their visitors are requested to respect staff privacy and not take staff's photos or video them at work and do not post images on social networking sites including but not limited to: Facebook and YouTube without staff consent.

## **12 LEISURE, INTERESTS AND ACTIVITIES**

We offer a diverse range of individual, group and community focused activities. Our activities program considers individual needs, interests and preferences.

The weekly activity program and information about special events and other points of interest is placed on notice boards throughout the home. A monthly newsletter is published to keep you and your family and staff informed on news and happenings. We welcome your contribution.

### **12.1 Sun Protection**

Residents are encouraged to wear wide brimmed hats, long sleeves and sunscreen 30+ in the summer months prior to going outside. If a resident does not have sunscreen, it will be purchased on their behalf through the pharmacy.

### **12.2 Bus**

Glenview Health has its own 17 seat bus with a wheelchair lift to give residents the opportunity to participate in community programs. Payment for the purchase of a meal may be required on some bus outings.

### **12.3 Music Therapy**

Music therapy is regularly provided with a number of techniques used including sing-a-longs, dance and movement, the playing of instruments and school and dance concerts.



If you know a resident's music preferences, please let the Leisure and Lifestyle Team know so that their individual choices will be downloaded onto our iPods for their individual listening.

Residents wishing to continue other complimentary therapies will be supported to do so, within regulatory requirements.

### **12.4 Pet Therapy**

To enhance quality of life and general well-being residents / representatives have the opportunity to interact with pets daily. Pets may be also brought into Glenview Health after completing the assessment form: Assessment Guidelines for bringing an animal to visit at Glenview form (see staff for a copy of the form).

## **13 RESIDENT REPRESENTATIVE MEETINGS**

Resident / representative meetings are conducted every month. All residents and their representatives are welcome to attend this meeting. The date of the next meeting and agenda is displayed on the notice board located in the day room. The purpose of each meeting is to provide an opportunity for residents / representatives to comment on matters relating to the facility and be involved in decision making about the operation of the facility and other matters that may affect the residents.

Information sessions are also provided at the meeting about aspects of care and safety for example; falls prevention and emergency procedures. A copy of the minutes of the meetings is displayed in the Resident/Representative Meetings folder held at reception.

### **13.1 Consumer Advisory Board**

Every November, we extend to all residents an invitation to join our Consumer Advisory Board. Members have a 12-month tenure and meet four times per year. This is an opportunity to provide senior management and our Board of Management with feedback and to participate in the decisionmaking processes of our organisation.

### **13.2 Quality Care Advisory Board**

A representative from the Residential aged Care Service is invited to join our Quality Care Advisory Board for a 12-month tenure commencing in February. The purpose of the Quality Care Advisory Body is to provide independent feedback to the INH Board of Management on the quality of care provided to consumers. This is a role that is distinct from the role of the governing body (such as a board of directors).

If you are interested in participating in either of these boards, our Quality Manager will be happy to provide you with further details.

## **14 GRAPEVINE NEWSLETTER**

Glenview Health produces a monthly newsletter to keep you informed of our activities and provide information as required.

## **15 VOLUNTEERS**

Glenview Health could not continue to function if not for the support it receives from community members and service groups. This generosity extends to the volunteering of time and financial support

Volunteers contribute greatly to the resident's quality of life as well as assisting in our Community Programs.

If you would like to be involved as a volunteer, please organise an appointment with the Volunteer Coordinator or ask at reception for a Volunteer Information Pack.

## **16 VALUABLES / SPENDING MONEY**

Residents are discouraged from leaving valuables or large amounts of cash in the facility. Glenview Health will not take responsibility for the loss of valuables or money despite all endeavours to maintain and promote a secure environment. Residents may require spending money for various outings, hairdresser, shopping etc. These fees may be added to the monthly account.

A lockable safe is provided in all resident's rooms to safely store valuables

## **17 VISITING, OUTINGS AND LEAVE**

You are entitled to take up to 52 nights of social leave away from the home without losing your right of occupancy. This does not include time spent in hospital.

We encourage family and friends to visit residents anytime.

To help us know who is in the facility at any given time, and in case there is an emergency, please make sure you sign in and out through the online system 'Telltouch' situated near reception.

Visitor access during business hours Monday to Friday 8.30am-5pm is via reception.

Outside business hours: please use the Intercom, located in the air lock at the front reception. Staff will respond to your call and enable your entry to the facility.

Car parking for visitors is available in the car park (entrance in Main Street), as well as kerbside parking, though restrictions may apply.

Please do not block the front door, this area is for emergency vehicle use and for family and visitors picking up or dropping off residents.

If a resident is leaving the facility, for example for an outing with a family member/friend, or for an appointment etc. please inform the nursing staff prior to leaving. Please state the expected time of return. This helps us to know where

residents are should there be an emergency and we can also advise catering staff if a resident will not be at the facility for a meal.

Please Note - When leaving the building please check with staff before opening the door for anyone else as there are some residents who could wander off and are not safe on their own. Please do not visit if you are unwell particularly if you have had

COVID symptoms, vomiting or diarrhoea (gastro) or the influenza ('flu'). These diseases can spread quickly and the elderly are at a higher risk of becoming very ill and these diseases can be life threatening for the elderly. Do not visit for 48 hours after vomiting or diarrhoea has ceased or for 5 days from the onset of flu symptoms.

If there is an illness outbreak, management and staff will act quickly to stop the spread and to protect other residents, staff and visitors. A number of extra precautions will be taken such as increased use of gloves, gowns/aprons and or masks, increased hand hygiene, increased cleaning in some areas, collection of specimens, isolating affected residents who may be allocated dedicated staff, notifying relatives and friends using signs throughout the building, restricting activities and visitors if necessary.

Such outbreaks must be reported to the Communicable Disease Prevention and Control Unit who will monitor the outbreak and provide advice about managing the outbreak as required.

Please talk to a nursing staff member or the Nurse Unit Manager if you have any questions related to visiting when you or a family member or friend are unwell or if there is an outbreak. (Refer also to the Infection Prevention and Control section).

## 17 FURNISHINGS AND ELECTRICAL APPLIANCE TAGGING

We provide the following furniture and fixtures for your room.

- Height adjustable King Single bed
- Bedside table
- Fixed bedside lamp
- Private ensuite with easy access shower and toilet
- Electric Lift Recliner
- Flat Screen Television
- Adjustable heating and air conditioning
- All linen, including bedspread and curtains - sheer and blackout. You may bring your own coverlet.
- Built in wardrobe
- PIN coded Safe to store valuables

Residents are encouraged to personalise their rooms and may bring some small items of furniture and personal effects following approval from the Nurse Unit Manager.

A Resident Belongings Form is completed as part of the orientation process. Please discuss with Nurse Unit Manager any specific needs.

For electrical safety all electrical appliances and cords need to be checked and tagged by Glenview Health Maintenance staff upon admission, and prior to their use. Appliances are also labelled with the resident's name. All electrical appliances have to be tested and tagged annually.

When a resident departs Glenview, nursing staff should confirm with the resident representative that all items as listed on the Resident Belongings Form completed upon entry to Glenview are present and accounted for. We request that all items are removed from the resident's room within 24 hours; however, we understand that this can be a very difficult time, and we will retain the items for seven days, after which a retention fee will be charged on a weekly basis.

If the family/representative prefers Glenview Health to dispose of unwanted larger items of furniture, then a fee of \$50 per item will be charged, to cover transport and disposal costs.

## 18 SEXUALITY AND INTIMACY

Sexual health which includes sexual identity (maleness, femaleness), sensuality (body image, grooming, touch, erotica, romance), intimate relations and expression of sexuality (hugging, kissing, holding hands, flirting, masturbation, sexual intercourse) is supported in a private environment.

This includes lawful, consensual and private intimacy between opposite and same sex residents and or partners/community members but does not include sexual relationships between a staff member, volunteer or contractor.

You must be aware that when forming relationships with other residents, the other resident may not have the mental capacity to give informed consent to sexual activities due to a medical condition such as; dementia, stroke. Refer also to the Elder Abuse section of this booklet.

Where complex situations arise related to sexuality and residents who suffer from memory loss these will be managed on an individual basis with relevant health team members and the resident's representative/s and if required legal representatives.

## **19 SMOKING**

There is a no smoking policy within all buildings and vehicles owned by Glenview Health - this includes staff, resident representatives, visitors and contractors. This includes E Cigarettes / Vapes.

Staff will conduct a Risk Assessment for all residents who wish to smoke to identify if the resident is able to smoke safely and independently. A designated smoking area is located in the garden area of the Residential Aged Care facility for residents only.

We are required to meet our legislative obligations to provide a safe work environment for staff as far as is practicable and cannot allow or expect staff to passively smoke whilst supervising a resident who wishes to smoke. Monitoring is by distant observation.

If a risk to safety is identified, strategies will be discussed with the resident or her/his representative to work out ways of eliminating and or controlling the risk, for example, scheduled smoking times so that staff can monitor, cigarettes and lighter/matches stored safely by staff and / or the use of a fire-retardant apron.

Agreed strategies will then be implemented, monitored and evaluated. If the risk increases, changes will be discussed and made to protect the resident and others within the facility. The only option may be for Residents to "Quit Smoking" and ways to facilitate this can be discussed with a medical practitioner and implemented.

## **20 ALCOHOL**

Residents may consume moderate amounts of alcohol unless consumption results in behaviour that infringes on the rights of other residents or staff, or the doctor advises against this.

Visitors are not permitted to consume alcohol on the premises unless it is part of a celebration or activity, which the residents are participating in. Alcohol requirements must be purchased by the resident/representative.

We ask family members to notify the staff member In-Charge when bringing alcohol onto the premises. All alcohol is stored in a locked cupboard/fridge.

## 21 MEALS, SNACKS AND FOOD SAFETY

A four - week rotating menu with three meals a day provides a variety of meals, beverages and snacks from the 5 food groups to promote healthy eating and to meet residents' nutritional and hydration needs and preferences. Individual food preferences and specific dietary needs are taken into consideration.

The menu is reviewed with resident input through an annual survey, through resident meetings, analysis of Feedback Forms and current residents' needs and preferences.

A Dietitian reviews the menu when there are significant changes in residents' needs and preferences to ensure it meets nutritional requirements, including for those residents with special dietary requirements.

### Meal Times

Breakfast: 7.30am - 9 am

Lunch: 12.30pm

Dinner: 5.30 pm

### 21.1 Tea and coffee and meals for visitors

Tea and coffee making facilities for residents and visitors are available in the dining area of each house. Our café is also open for visitor and resident use.

Families may book to have a meal with their family member. To ensure we are able to accommodate your request we ask that you advise us 24 hours prior to the required meal time. Payment can be made at reception during business hours.

Families are able to make a reservation in the Private Dining Room and either share a meal from our menu or bring in food to have in the dining room.

Whilst this is your home, due to food safety requirements staff cannot be responsible for food brought in by you or your family and friends.

The Register of Food Brought into Glenview Health, located at the reception desk, must be completed when bringing any food or drinks into the facility for a resident. Please also advise the Registered Nurse (RN) on duty so that it may be determined if the food/drink is suitable for their dietary needs.

Foods of *high risk* such as, poultry, seafood, dairy products, meat and small goods (e.g. sliced ham, roast beef, chicken), eggs, rice, pasta brought into the home must be kept at an acceptable temperature by bringing it in a suitable container such as; insulated bag  $\pm$  an ice brick or a thermos flask and consumed at the time of being brought to the facility. Staff must not store these food items or reheat them.

Food of low risk such as; biscuits, unfilled cakes, fruit and lollies are fine to be stored and served.

You must not offer/give brought in food to other residents not only because of the food safety requirements but because the resident may have an allergy or a medical condition that may prevent them from eating the food including the possibility that they may choke.

## **22 CLOTHING AND LAUNDRY**

A full laundry service operates at no additional cost to residents. This service will wash all clothing items that can be washed by a standard machine cycle and tumble dried. Items requiring special care, such as woollens, need to be attended to by the resident representative.

All clothing must be clearly and discreetly labelled with the resident's name including socks and underwear. Labelling of clothing will be arranged by the laundry staff. Please ensure new clothing is given to staff to arrange for labelling before it is placed in a resident's room as no responsibility is accepted for lost clothing not labelled.

Residents generally require frequent changes of clothing therefore it is important to ensure residents have an adequate supply of clothes for day-to-day use. Clothing should be adequate in size, design and material to accommodate ease of dressing and undressing. Non-iron clothing is encouraged. The up-keep of resident's clothing, including underwear, remains the responsibility of the resident/representative. Nursing staff can be consulted and may alert representatives of the residents clothing needs. (Refer to the list of suggested recommended clothing attached).

### **Clothing Selection**

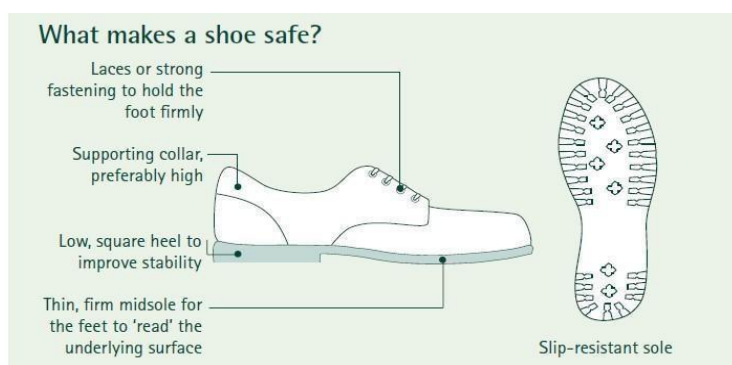
Clothing should be selected with the following considerations:

- Comfort
- Dignity
- Individual preference
- Ease of dressing, undressing and going to the toilet. Ease of dressing also allows for independence and reduced risk of resident/staff injury
- Reduced risk of tripping for example nightie or dressing gown not dragging on the floor.

When selecting footwear including slippers look for:

- Non slip sole
- Wide, flat heel, no greater than 2.5cm (1")
- Support over the top and back of the foot
- Velcro or adjustable straps
- Correct/firm fit (not too big or too small)
- One finger width between the end of the longest toe and the end of the shoe

*It is best to purchase the shoes in the afternoon, as feet can swell during the day*



## 23 CARE AND SERVICES

A comprehensive range of services is provided/arranged for residents who need them according to the Aged Care Act – Care and Services and the Resident Agreement including:

- Personal care to assist with activities of daily living
- Nursing care
- Catering services
- Cleaning services
- Laundry, including personal clothing
- Activities program
- Complimentary therapies, such as, aromatherapy, massage, music therapy.

Visiting services include:

- Podiatry
- Hairdressing
- Physiotherapy
- Dietician
- Speech Pathologist.

In addition to providing services from within our facility access to a wide range of services operating within the wider local community is also available.

### 23.1 Physiotherapy

An initial assessment will be performed by a qualified Physiotherapist for all residents in the 21 days after admission. An individualised care plan is developed for each resident depending on their particular needs. The program is carried out by staff and reviewed annually or as needed.

Please Note: Should mobility aids be required as a resident's needs change, such as wheelie walkers, walking sticks, wheelchairs etc it will be discussed as required.

## **23.2 Podiatry**

An initial assessment will be performed by a qualified Podiatrist for all residents in 21 days after admission. A foot care nurse maintains nails between podiatry appointments.

## **23.3 Hairdresser**

A hairdressing salon is available on the premises for residents/representatives, clients and staff, and offers cuts and Trims. Residents/clients are responsible for payment of this service. A list of current prices is displayed in the salon. Advise nursing staff if you wish to make an appointment.

## **23.4 Medical Care**

Redgum Medical Centre is located on site. Doctors are available to provide medical care to residents. Residents are responsible for payments associated with medical care.

All residents are reviewed by their doctor every three months, or as required. The Facility ensures that all nominated doctors of residents provide an emergency 24 hours a day phone number so that should medical care be required immediately, it can be accessed. Referral to appropriate specialists is made as required by the attending doctor.

## **24 IMMUNISATIONS**

Staff will arrange immunisation for residents with their medical or general practitioner.

All residents and regular visitors over 65 years or 50 years for Indigenous residents/regular visitors are encouraged to have COVID vaccinations, annual influenza vaccination and if eligible, pneumococcal vaccination.

## **25 SAFETY AND EMERGENCIES**

Glenview Health has an active Health and Safety Program with systems in place to identify and eliminate or control hazards. If a resident or visitor identifies a hazard, please inform staff verbally or complete a 'Customer Feedback Form' for us to follow up. (Refer to Opportunity to Improve Section).

Staff have been trained in emergency procedures. In the event of an emergency, for example fire, you are asked to follow staff instructions. Emergency practice drills are conducted throughout the year. You may be asked if you would like to participate. Safety information and education is provided at the Residents/Representative Meetings.

Due to fire and safety precautions, any person who is a visitor to Glenview Health must sign in using the Visitor’s Register, located in the foyer, upon arrival and departure. (Refer to the visiting and outings information).

For security reasons, the outer doors are locked outside of office hours. Please use the Intercom located at the front door to Glenview Health for entry to the facility.

In an emergency, please remain calm and wait the Staff direction. The Registered Nurse is the designated Fire Warden and will determine an appropriate course of action.

## 26 QUALITY OF CARE AND ACCREDITATION

During the last sitting period of 2024, the Aged Care Bill was passed by the Senate and then by the Lower House. The new Act replaces the previous Aged Care Act, which was drafted almost 30 years ago, in 1997. The new Act will be in effect from November 1<sup>st</sup> 2025. A new rights-based Aged Care Act was the number one recommendation of the Royal Commission into Aged Care Quality and Safety.

The new Act includes changes to the Aged Care Quality Standards. The new standards have a greater emphasis on individualised care. There are seven standards – as presented below.



The Aged Care Quality and Safety Commission (Commission) is responsible for accrediting and monitoring the quality of care and services of residential aged care homes.

Assessment contact visits are usually conducted without notice, as are re-accreditation site audits. Letters and posters will be displayed to inform you of the Commission Assessor visits. You can speak to the Assessors whilst they are on site, or you can contact the Commission to provide feedback on  
Toll free: 1800 951 822

## **27 OPPORTUNITY TO IMPROVE AND COMPLAINTS**

Management and staff of Glenview Health are committed to providing a highquality service to our residents. To assist us to ensure our systems are working well, residents and visitors are encouraged to complete a 'Telltouch Feedback Form' when they identify an area in which we are doing well, where we can improve or if you have a concern.

Telltouch Feedback Forms are available throughout the facility near one of the 'Your Opinion Counts' letter boxes. Completed forms can be posted or placed in one of the letter boxes. Staff may help you to complete 'Telltouch Feedback Form' if you need assistance.

In addition to a 'Telltouch Feedback Form' you may discuss issues of concern by phone or in person with the Nurse Unit Manager during office hours, Registered Nurse in Charge or other relevant team leader, or at resident meetings, or you can access the Customer Feedback Form on our website, [www.glenviewhealth.org.au](http://www.glenviewhealth.org.au).

We will work with you to promptly address and resolve issues. All issues raised are taken up with management for follow up action with these being treated confidentially, promptly and fairly.

You have the right to raise issues of concern anonymously if you don't wish to be identified.

If you would prefer to speak to someone independent of the facility, and are not satisfied with how we managed your complaint, you can contact the Aged Care Quality and Safety Commission:

The Aged Care Quality and Safety Commission

Phone: 1800 951 822

Web: [www.agedcarequality.gov.au/making-complaint/lodge-complaint](http://www.agedcarequality.gov.au/making-complaint/lodge-complaint).

National Aged Care Advocacy Line

This is a free and confidential service promoting the rights of people receiving aged care services Phone: 1800 700 600

## **28 ELDER ABUSE AND COMPULSORY REPORTING**

We respect your right to live without abuse, neglect, exploitation and violence.

We do not tolerate abuse of any kind to residents and have procedures in place to reduce the risk of abuse occurring. For example; mandatory police checks of staff and volunteers prior to employment and then 3 yearly, staff training related to elder abuse.

You are encouraged to report any concerns you have about your wellbeing or safety. If you experience or observe any form of abuse you are encouraged to

discuss your concern with the Registered Nurse in Charge. We treat any concerns related to abuse very seriously and will follow up any reports of abuse.

Concerns can also be raised with the Aged Care Quality and Safety Commission on (1800 951 822) if you do not feel comfortable raising a concern with staff or a manager.

Staff and managers must comply with the requirements of mandatory notification of reportable incidents to the Commission required of Approved Providers of residential aged care services.

This includes an allegation, suspicion or witness account of the following serious incidents if they occur to a consumer whilst in our care:

- Unreasonable use of force
- Unlawful sexual contact, or inappropriate sexual conduct
- Psychological or emotional abuse
- Unexpected death
- Stealing from, or financial coercion by a staff member
- Neglect that involves a breach of duty of care or a gross breach of professional standards
- Use of physical or chemical restraint (other than in the circumstances set out in the Quality-of-care principles)
- Unexplained absence from the service.

Other notifications maybe required depending on the nature of the matter e.g., police, WorkSafe, coroner, Australian Practitioner Regulation Agency.

## 29 HEALTHY WORKPLACE FOR STAFF

Residents and their visitors are requested to respect staff including volunteer and health professional's privacy and not take photos or videos of them, nor post images on social networking sites including but not limited to: Facebook and YouTube without staff consent.

The Workplace Equality Opportunity law protects staff from discrimination, sexual harassment and victimisation. Discrimination is treating or intending to treat a person unfairly because of a personal attribute that is protected by law for example; gender, race, religion, age or disability.

Workplace bullying is when an individual or group of individuals repeatedly behaves unreasonably towards a worker or group of workers at work and the behaviour creates a risk to health and safety.

Management is committed to providing and maintaining so far as is reasonably practicable a work environment free of workplace bullying, discrimination, sexual harassment or victimisation.

The following Workplace Standards of Behaviour are expected to be followed:

- Be polite to each other
- Treat each other with dignity and respect
- Have tolerance for difference
- Work together
- Treat each other honestly and fairly
- Listen and respond respectfully to others' point of view
- Work professionally and safely.



There will be zero tolerance to workplace bullying and any breach of the expected standards of behaviour will be treated seriously.

If the matter is not able to be resolved by management an application to the Fair Work Commission can be made to issue an Order to stop workplace bullying by cognitive residents or visitors who are bullying staff.

### **30 INFECTION PREVENTION AND CONTROL**

We have an infection prevention and control program in place to minimise the risk of transmission of infections.

There are 2 levels of infection control practices:

1. Standard precautions – which are the routine basic measures that staff practice every day. These include:
  - Hand Hygiene – washing hands and using hand gel
  - Use of Personal Protective Equipment (PPE) – gloves, gowns, mask
  - Appropriate handling and disposal of sharps – used razors and needles
  - Routine environmental cleaning and spills management
  - Reprocessing of reusable equipment & instruments
  - Respiratory hygiene and cough etiquette
  - Appropriate handling of waste and linen
  - Food Safety practices.

In addition to the above staff practices all staff and residents and regular visitors over 65 years or 50 years for indigenous residents/regular visitors are encouraged to have COVID vaccinations, the annual influenza vaccination and if eligible pneumococcal vaccination.

2. Transmission-based precaution – which are the measures taken to manage known infections in addition to standard precautions.

Visitors are asked to use the hand gel/rub station on entering the building. Visitors are also asked to follow any signage and instructions by staff during an infectious outbreak.

### 31 WHAT TO BRING

#### Administration Items

- Medicare Card
- Pension Card
- Repatriation Card (if applicable)
- Pharmaceutical Benefits Scheme (PBS) Card
- Taxi Card (if applicable)
- Private Health Insurance Card (if applicable)
- Current nominated Doctor's name
- Doctor's address
- Doctor's telephone number  Next of Kin's name
- Next of Kin's address and telephone number
- Nominated Funeral Director
- Nominated Religion
- Name of person responsible for paying account
- Address and telephone number of the person paying account

#### Legal documents (if completed)

- Enduring Power of Attorney – Financial and/or Lifestyle decisions
- Enduring Power of Guardianship, prior to 1/9/2015
- Guardianship Administration Board orders (if applicable)
- State Trustees details (if applicable)
- Appointment of a Medical Treatment Decision Maker
- Enduring Power of Attorney – Medical, prior to 12/3/2018
- Advance Care Directive
- Advance Care Plan, prior to 12/3/2018

Toiletry Requirements – *All must be clearly labelled*  Large size toilet bag.

- Hair comb and / brush
- Soap container
- Soft nail brush, nail file
- Nail clippers – please name with key ring tag.

- Soap and toiletries are provided for everyone. You may wish to supply soap, toothpaste, denture preparation, shampoo & conditioner of your choice. □ Electric shaver or disposable razor blades.
- Makeup as preferred

### **31.1 Recommended Clothing**

*(Guide only) – all must be clearly labelled – We can label them for you when you arrive.*

#### Night Wear

Winter nighties/pyjamas	3
Summer nighties/pyjamas	3

#### Under Wear

Singlets	4
Spencers	3
Petty coats	3
Underpants	8
Socks/Stockings	6 pair

#### Footwear

Slippers	2 pair
Casual Shoes	1 pair
Formal Shoes	1 pair

#### Shirts

T-Shirts	3
Summer Shirts/Blouse	3
Winter Shirts/Blouse	3

#### Leg Wear / Dresses

Winter pants/Slacks/Trousers	2 pair
Dresses/Shorts	2
Track pants	4 pair

#### Jumpers / Tops

Windcheaters	4
Machine washable cardigan/Jumper	2

#### Winter Clothes:

Jacket for outings	1
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Sun Protection: Wide brimmed hat	1
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