

IRT Aged Care Centres Quarterly Resident/Relative Meeting

11 May 2023 Diversional Therapy Room 10.30am

No.	Topic/Content	Tabled By
1	PRESENT	R Perry (OM), M Murphy (RHM), (LTL), K Wood (SCM) (RN) (SCC)
2	APOLOGIES	Sarah Bartrim (CM), K Judd (RHM)
3	PREVIOUS MINUTES	
	INTRODUCTION/ UPDATE OF NEW STAFF	R Perry introduced herself as the Operations Manager, also who is our Lifestyle Team Leader. Another new face is who will be our Senior Care Co-ordinator to assist our Care Manager and RN's.
4	BUSINESS ARISING	 K Judd to look into accessing volunteer services for various residents. Action: The IRT Volunteer Coordinator, Rosie Newcombe, has been contacted regarding sourcing volunteers for residents. A referral has also been sent to Tanya from MCCI seeking a Turkish volunteer for a resident – Ongoing. Continues to liaise with Ecolab and Maintenance to arrange pest sprays – we are gaining traction lately. Action: Pest Spray has been completed by Ecolab – Closed.
		 K Judd to follow up organising an Anglican Minister to visit. Action: K Judd has contacted both Fairy Meadow and Corrimal Parrish's and is awaiting a reply – Ongoing. HTL/M Murphy to look into the new morning/afternoon tea routine feedback. Action: New process and procedures were put in place and added to the care duty list. Will continue to be
		and added to the care duty list. Will continue to be monitored and reviewed – Ongoing.

		HTL/M Murphy to organise daily bathroom check for room 107.
		Action: A month long daily check has been completed – Closed.
		 K Judd now discussing vending machine issue with Auxiliary and supplier, there are logistical issues due to credit card payments being an option and costing. Action: Cost for a vending machine is \$9000 plus set up costs for the credit card so this won't be going ahead as snack fridges are to be placed in areas for residents to access – Closed.
		 S Bartrim to check preference for female staff only has been added to her profile. Action: Profile preference has been updated - Closed
		 S Bartrim to source a list of often used IRT/aged care acronyms. Action: List of acronyms was attached to last minutes - Closed
5	SAFETY	 R Perry asked if everyone feels safe in their home and if there were any questions in regards to safety? Residents/NOKs - no questions raised.
		• R Perry re-iterated if any residents do have any issues to raise them with the staff, who will log them into our Hazard Reporting System so they can get resolved and everyone is in a safe environment.
		Action by: Information only Required by: Resolution:
6	AGED CARE PORTFOLI	O UPDATE
6.1	ACC Plan on a Page	Relates to the priorities both at care centre level and a regional level in the Illawarra. Actions are related to working on the below priorities.
		Action by: Information only Required by:
6.2	Centre/Region Priorities	 Resolution: IRT Five Islands Court Aged Care Centre is undergoing a roster review to implement 24/7 RN coverage at the site as per the Aged Care Reform. 24/7 RN comes into effect from 1 July. This is currently already the case here at Tarrawanna so no change in regards to this. <u>S Bow</u> asked 'where are we going to get these RNs from"? R Perry stated IRT have been able to recruit a
		couple, but obviously it takes time and is a work in progress. If you know of anyone who would like to work in aged care point them in our direction.

 Other priorities for the region include working with Marco Polo in the lead up to 1st July 2023 when the two facilities (Unanderra and Woonona) will become a part of IRT, and eventually also our Illawarra region.
 Preparation is also underway for the budgets for the new financial year. This will include reviews of direct care hours including RN hours across the sites.
 Trial of an Embedded Pharmacist at FIC and Tarrawanna commencing this month (May 2023). Three rotating pharmacists all from Pharmacy Express. Hours are based on the funding model proposed by the government. This equates to one day a week at FIC and 3 days a week (Monday, Wednesday and Friday) at Tarrawanna. It will primarily be the whole day and they will be based up in the RN office on 1st floor. Orientation will commence next week. The aim of the trial is to see whether a model using a community pharmacist as an embedded pharmacist is effective, as measured by NQIP and other medication audits. Measures will include (but are not limited to) polypharmacy, psychotropic and antipsychotic use, appropriate use of antibiotics and antimicrobials in line with Antimicrobial Stewardship guidelines. They will work in conjunction with the doctors and help to follow up with them. There are many advantages and benefits of having these pharmacists come on board.
• Project Welcome is still ongoing. We are currently preparing for the first cohort of overseas workers to arrive in the next 1-2 months. Accommodation is being prepared at Woonona. The first cohort will be working across Woonona, William Beach Gardens and Tarrawanna. Question was raised that they are difficult to understand, however we have been assured that their English is quite good. There are about 6-8 workers allocated to Tarrawanna which will help fill our gaps in the rosters and reduce our need to use agency staff.
• Updates around our incident management procedures which includes our open disclosure policy. This means that if something happens we have an obligation to let you and your family know exactly what happened, how it happened and what we are going to do to fix it and hopefully prevent it from happening again. There is a whole new incident management framework looking at investigating the causes of incidents so that we can try and prevent them from happening again.
 A couple of other things we are looking at is a milkshake recipe for those that might be losing weight, a bed rail

		fact sheet and a policy around additional services as well.
		Action by: Information only Required by: Resolution:
6.3	Policy/Procedure related to Resident	Added 1 May 2023 - 5.34.01 Open Disclosure Procedure (pdf 499.7KB) New
		 Added 1 May 2023 - 5.34 Open Disclosure Policy (pdf 339.1KB) New
		 Added 1 May 2023 - 5.31 IRT Incident Management Framework (pdf 299.5KB) New
		 Added 19 Apr 2023 - 5.01.002 - IRT Aged Care Centres - Site Level Continuous Improvement (CI) Review Process (pdf 473.2KB) New
		 Added 19 Apr 2023 - 5.01.001 - IRT Aged Care Centres - Org Level Continuous Improvement (CI) Process Map (pdf 452.2KB) New
		 Added 31 Mar 2023 - 1.57.033 - Bed Rails Fact Sheet (pdf 308.2KB) New
		 Added 22 Mar 2023 - 1.57.031 - Advital Milkshake Recipe (pdf 148.2KB)
		 Added 15 Feb 2023 - 5.37 - Additional Services Policy (pdf 212.8KB)
		Action by: Information only Required by: Resolution:
6.4	Self-Assessment/CI plan	The CI Plan is reviewed and updated at least monthly with evidence of how the site is tracking in relation to each item on the CI Plan. Feedback is collected from meetings like the Resident and Relative meeting and if there are any improvements they are added into the CI Plan. It is very important and valuable to receive feedback and any suggestions made.
		Action by: Information only Required by: Resolution:
6.5	ACQASC Activity	• There have been no visits from the ACQSC in the past quarter, however they could visit at any time. The site is always prepared for an unannounced visit.
		• The ACQSC arrived at Dalmeny this week.
		Action by: Information only Required by: Resolution:

6.6	EGM Update	 A new process for Capital Budget was implemented this year.
		• A review of current equipment on sites was undertaken as part of this process.
		• Staffing remains a focus across the organisation. Those coming from overseas as part of Project Welcome will help relieve some of the staffing pressures at sites.
		The new Incident Management Framework has been developed.
		Action by: Information only Required by: Resolution:
7	LEARNING & DEVELOP	
7.1	Nurse Call Statistic Report	• For the three months from 1 February 2023 to 23 April 2023 there were 50,000 uses of call bells; 1663 were over 10 minutes, with an average response time of 1 minute 54 seconds.
		 Reasons for those over 10 minutes are looked into. There are various reasons and explanations for these delays. Further education to manage these reports is being looked into and the new Care Coordinator will be able to help with this.
		Action by: Information only Required by: Resolution:
7.2	Journey of Care	 Internal resident shuffles will continue as needed in terms of care needs and this is done in conjunction with residents and their families. Action by: Information only Required by:
		Resolution:
7.3	Clinical and NQIP Trends/Areas of Concern/ Outcome	• The number of residents meeting the criteria for high risk case management has drastically reduced indicating that falls prevention strategies are working.
		Relatively low number of incidents involving aggression.
		• Most incidents are mild in nature, and generally numbers are stable.
		UTIs have recently started to decrease.
		• Wound infections remain high and will continue as an action item with continued education around wound care and management.
		Action by: Information only

		Required by:
		Resolution:
7.4	MOA Results	Nil to report
7.5	Safety Net Report	Nil to report
7.6	Outbreak Management	• The recent outbreak at Tarrawanna is not quite over yet.
		• Staff continue to respond very well when it comes to residents of concern. There have recently been residents with respiratory illnesses, shingles, scabies and gastro issues.
		• Daily RATs, temperature checks and wellness screening questions remain in place for visitors. A big thank you to all visitors for being so understanding and compliant.
		Action by: Information only Required by: Resolution:
7.7	Workforce Management Update	 We've continued to say hello to some new faces and have also said goodbye to a few people for various reasons since the last meeting.
		• We're continuing to recruit and are also focusing on maintaining a positive culture to retain the employees who come to the Tarrawanna team.
		 A new Care Coordinator, Reja, is starting the on boarding process on 9 May 2023.
		Action by: Information only Required by: Resolution:
7.8	Care and Assessment Planning	 Care evaluations are up to date. They continue to be looked at on a 3rd monthly basis at a minimum. Please keep talking to us and letting us know if your preferences change so we can continue to support you.
		Action by: Information only Required by: Resolution:
8	HOSPITALITY UPDATE	·
8.1	Environmental Audit Trends/Areas of Concern/ Outcome	Nil to report
8.2	Menu Feedback	 stated that over the last few weeks, she can recall 3 times she has not had meal served that was on the menu. Once it was dessert and twice it was the main meal. She also struggles to understand why there is a shortage of food. R Perry stated she will have M Murphy review the ordering and number of portions.

		 Directly after the meeting, HTL and Michael spoke to and addressed her concerns and also explained on occasions due to staff shortages in the kitchen or last minute delivery issues there may be substitutions. There is no shortage of food. Various residents gave feedback about the menu and their concerns eg, food being very dry. Feedback given to Catering and HTL to pass on to the Hospitality Team. This feedback will be added to our next Food Focus Meeting minutes and given to the staff to read. New ovens are to be installed so this should alleviate some of the cooking issues. Metting processes, procedures and food quality. He will be coming out to our next resident and relative meeting scheduled in a few months. Recruitment of two new staff members is underway to assist the hospitality team with leave management.
8.3	Cleaning Audit Trends/Areas of Concern/ Outcome	 Laundry A new process will start soon regarding clothing labelling no set date yet – TBA. Any other concerns or issues please let HTL or M Murphy know. If any items of clothing are missing there is a lost and found clothing trolley which rotates from floor to floor for you to go through. This also gets left at reception over the weekend for Next of Kins to look through. Various residents voiced their concerns regarding missing clothing. M Murphy asked all residents to ensure all clothing is labelled to prevent losing clothing again. HTL has advised care staff to assist where possible with unlabelled clothing, eg double checking when providing care. We have a process in place that if an item is found
		 to be not labelled, it is then put into a bag with the resident's name and sent down to the laundry for labelling. <u>Cleaning</u> M Murphy asked how the cleaning had been. Residents stated they are slower and grout cleaning needs to be better. M Murphy to speak with cleaners regarding this. HTL will also speak to each cleaner as she sees them on site to ensure they are across this cleaning and will also make a note in the Communication Book.

		 M Murphy stated due to the outbreak a few things had to be shuffled around, however will go back to regular cleaning days next week. Trying to maintain same cleaners for continuity.
		• During the outbreak cleaning was carried out and maintained very well particularly in Lyrebird. Overall the results from the audit have been very good. Cleaners are working well together.
		 Bathroom vents should be vacuumed every week. HTL will also speak to each cleaner as she sees them on site to ensure they are across this cleaning and will also make a note in the Communication Book.
		 Any issues with cleaning should be added to the Communications Book at reception.
		 If you have any cleaning that involves bodily fluid please let HTL or M Murphy know so they can request an adhoc clean.
		Action by: Information only Required by: Resolution:
9	LIFESTYLE UPDATE	
9.1	Lifestyle Update	• At the moment we are focusing on resident's cultural preferences. Looking at theme days that may be added to the programme for those residents who may want to celebrate their traditional culture.
		 Looking at the programmes in general and asking residents if there are any things of interest or ideas they wish to be added.
		 R Perry asked for any feedback. A resident stated they were disappointed as there was nothing planned for the Kings Coronation until it was mentioned to staff.
		 Have been in touch with a minister from a Catholic Church regarding coming in to provide Catholic mass services and communion to residents.
		• The question was raised regarding when the hairdresser would be coming back? LTL stated she was due to go back to the physio and would let us know after that when she could return. Hopefully won't be too much longer. Unfortunately we have been unable to obtain another hairdresser in the interim.
		 The Kiosk will re-open when we are out of the current outbreak.
		 It was voiced that the PA system was hard to hear. LTL will endeavour to look into the speakers around the building to get this rectified.

		Action by: Information only
		Required by:
		Resolution:
9.2	Program Evaluation	Staff members do an activity evaluation every 3 months.
9.2	Filografii Evaluation	Feedback is always welcome at these meetings regarding
		any activities held.
		any activities field.
		Action by: Information only
		Required by:
		Resolution:
9.3	Theme Days	Nil to report.
		Action by: Information only
		Required by:
		Resolution:
9.4	Survey Feedback	There will be an activity survey at the end of this month. Staff
		members will come around to ask residents about the
		activities on offer here along with any suggestions.
		Action by: Information only
		Required by:
10		Resolution:
10	FEEDBACK AND COM	PLAINTS
10.1	Feedback Register	There were 31 entries into our electronic system from
	Status for Quarter	January to March which is great! Keep talking to us!
		One anonymous piece of feedback was that there is "a
		lack of essential services" and the writer wanted the café
		open longer.
		 R Perry asked "is there any feedback regarding any
		essential services that may be missing or lacking??
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		 Resident stated, podiatrist, audiologist, optometrist,
		speech pathologist, mobile dentist etc.
		 R Perry stated that IRT are looking at these and more
		to organise these additional services.
		 The café is run by volunteers and unfortunately
		longer hours are not possible.
		Action by: Information only
		Required by:
		Resolution:
10.2	Trends for the Quarter	Relatively even number of complaints, compliments and
		general feedback received.
		Action by: Information only
		Required by:
		Resolution:
10.3	Open Feedback	
	Session	
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11 NEW E	BUSINESS	Nothing to report
12 CLOSI	E OF MEETING	With there being no further business, members were thanked for attendance and the meeting was closed 11.30am.