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Licensed Residential Centre Compliance Practice Guide

Youth and Community Services
Regulation 2010

Version 1.5

Ageing, Disability and Home Care
Department of Family and Community Services NSW
January 2011



Family &
Community Services
Ageing, Disability & Home Care

Document approval

The ***Licensed Residential Centre Compliance Practice Guide*** has been endorsed and approved by:

Michelle Dodd

Executive Director, Accommodation
Policy and Development

Approved: 02 January 2011

Signature on file

Samantha Taylor

Executive Director, Sector Development

Approved: 02 January 2011

Signature on file

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1 Introduction

In 2010, an amendment to the *Youth and Community Services Regulation 2005* was made to ensure the legal enforceability of requirements that had previously been incorporated in licence conditions.

In addition to this, the *Youth and Community Services Regulation 2005* was remade on 1 September 2010 with the inclusion of new requirements in relation to medication management and first aid training for staff of Licensed Residential Centres (LRCs).

The Licensed Residential Centre (LRC) Compliance Practice Guide (Practice Guide) has been developed to provide guidance on how to comply with the *Youth and Community Services Regulation 2010* (Regulation). Its intention is to clarify responsibilities and assist operators of LRCs to understand what is required of them. The Practice Guide is a useful tool for:

- Licensees and Licensed Managers of LRCs;
- residents of LRCs;
- Ageing, Disability and Home Care (ADHC) staff;
- staff of services involved in supporting LRC residents; and
- families/friends/advocates of residents.

The Practice Guide will be reviewed and updated annually to ensure that any further clarification sought by stakeholders regarding the Regulations or the Licence Conditions are included as required.

ADHC intends to make a language and format accessible version of this document for LRC residents.

2 Interpreting the Regulations

The objective of the Regulation is to place obligations on Licensees and Licensed Managers of LRCs relating to:

- minimum standards required, and facilities to be provided, for the health, comfort, safety and proper care of persons residing at residential centres for handicapped persons;
- the qualifications and experience of persons employed at residential centres for handicapped persons; and
- The making and keeping of records in respect of residential centres for handicapped persons.

Comments from interested parties made during the *Youth and Community Services Regulation 2010* remake consultation process identified the need to clarify expectations in relation to a number of obligations. It is the intention of this document to provide that clarification. As circumstances require, it will be updated.

This Practice Guide provides guidance for the application of the *Youth and Community Services Regulation 2010*, in order to assist operators of LRCs to understand what is required of them.

NOTE: the Practice Guide does not provide legal commentary and cannot be used to avoid any obligations created by legislation. Proprietors should seek their own legal advice where required.

Clause 5 Sleeping Facilities

To clarify the requirements under Clause 5 Sleeping Facilities

(b) *a mattress that is suited to the bed and is clean and comfortable:*

- A mattress that is suited to the bed means a mattress that is correctly sized for the bed frame or base and designed for the type of support the bed provides. For example, if a bed has a woven wire or spring wire mattress support, the mattress should provide adequate support for a sleeper and allow even distribution of the sleeper's weight to avoid causing the mattress support to sag such that comfortable sleep is not possible.
- A foam mattress would not be acceptable on a bed with wooden slats.
- A mattress that is comfortable means a mattress that is suited to the needs of the resident to ensure their comfort and is appropriate for any health condition the resident may have.

(c) bed clothing and linen that is suited to the bed and is clean, in good repair and changed weekly (or more frequently if necessary to maintain cleanliness):

- Bed clothing that is suited to the bed means that it should be correctly sized to the bed so that sheets, blankets and other coverings can be securely tucked under the mattress to prevent normal sleep movement dislodging them and exposing the sleeper to discomfort. Bed clothing that is in good repair means that there are no tears, holes or fraying edges that are un-repaired. Any repairs should maintain the integrity of the fabric and its thermal performance.

(e) a bed-side cabinet that can be locked by the resident:

- A bed-side cabinet that can be locked should be a cabinet with a drawer and a cupboard and be of a reasonable size to allow storage of personal items, such as books, writing paper or a radio. The cabinet should be of such a height that items on its top can be easily reached by a person lying on the bed.
- Where a person has a single room with a door that is lockable and can be locked and unlocked by the occupant alone (with only the Licensed Manager having access to any pass or master key), the requirements of the regulation would seem to be met without the provision of a separate locked cabinet.

Clause 6 Clothing and Toiletries

To clarify the requirements under Clause 6 Clothing and toiletries

(a) have a supply of personal clothing and footwear that is adequate to allow for laundering and repair:

- An adequate supply of personal clothing to allow for laundering means sufficient clothing is available for the individual to change their entire outfit at any time. For example, this might indicate one outfit for current wear, two outfits being laundered and two outfits available in the individual's wardrobe, as a minimum. Should the individual concerned have needs that require multiple changes of clothing each day then the supply of personal clothing will need to be increased to suit the need of the individual.

(b) be encouraged to wear clothing and footwear suited to climate and seasonal conditions,

- Each individual should have a range of personal clothing from which they are encouraged to choose that meet varying climate and seasonal conditions.

(c) be provided with a toothbrush, toothpaste, soap, toilet paper and a supply of bath towels and face washers that is adequate to allow for laundering:

- A supply of bath towels and face washers that is adequate to allow for laundering would mean that a resident would have one dry towel and face washer available each day and be able to obtain a clean and dry towel and face washer as reasonably required. For example, towels and face washers might be generally laundered weekly, but this should not limit a resident's access to clean and dry replacements for a soiled towel or face

washer. If the laundry cycle could not provide this, then a resident should have more than two towels and face washers available.

- The type of toiletries provided should be based on individual choice and need. For example, dandruff shampoo, appropriate body cleaner for dry skin, toothpaste for sensitive teeth or sanitary hygiene items.

Clause 7 Meals

Each resident must be provided with:

(a) meals of adequate variety, quality and quantity served each day at times that are appropriate and generally acceptable to both residents and the management of the licensed premises, and

(b) meals that accommodate any special dietary requirements of the resident, and

(c) access to adequate refreshments outside of meal times.

- The intent of this clause is that residents have a diet that maintains their health and is varied, palatable to eat and flavoursome.
- Ensuring meals and serving times are appropriate and generally acceptable to residents means that management should give residents the opportunity to have input into planning meals and refreshments and when they are served and that they reflect the changing nature of people's tastes and requirements. Timing of serving meals must take into consideration individual resident activities.
- Adequate variety, quality and quantity indicates that residents must be able to, if they choose, consume each day the portions of fresh food including fresh fruit, fresh vegetables, grains (including baked goods) and protein (whether animal, dairy or vegetable in origin), recommended for health in the [Dietary Guidelines for Australian Adults](#), dated 10 April 2003 published by the National Health and Medical Research Council.
- Variety of food indicates that residents do not have to eat the same food at each meal, or at each type of meal (e.g. each breakfast, lunch or dinner, etc.) or have the same dishes presented more than once a week. Reasonable variation in menus could be achieved by a fortnightly change in menus with seasonally appropriate dishes prepared.
- Adequate refreshments outside meal times could be provided by ensuring residents have access to fresh water, tea and coffee facilities, chilled drinks, fresh fruit, and baked goods such as purchased biscuits, cakes and other baked goods, dairy snacks (e.g. yoghurt, flavoured milk) etc. Suitable refreshments should be provided to meet the individual needs of residents, for example, residents on a diet plan would not be provided with an inexhaustible supply of biscuits and residents trying to limit their caffeine intake would not be offered an inexhaustible supply of coffee.
- For good practice on adequate meals and dietary requirements, ADHCs Ensuring Good Nutrition Policy and Practice Guidelines are available on the ADHC website under [doing business with us/ licensed residential centres](#).
- Additionally, NSW Health offers a free support resource called the *Get Healthy Information and Coaching Service* www.gethealthynsw.com.au which provides a confidential telephone service that helps people make lifestyle changes in relation to:
 - healthy eating
 - being physically active, and
 - achieving and maintaining a healthy weight.

Clause 9 Personal Storage Space

To clarify the requirements under Clause 9 Personal storage space:

(1) Each resident must be provided with the following:

- (a) wardrobe space for the storage of personal clothing and belongings,*
- (b) a container for the storage of personal laundry,*
- (c) a towel rail of a size that enables the drying and storage of towels and face washers.*

(2) Each item specified in subclause (1) must be in a location that is convenient for the use of that item by the resident.

- Wardrobe space should be adequate for the resident's actual clothing, or a reasonable collection of clothing appropriate for the local climate and climates the resident is exposed to by travelling. A wardrobe should be located within the same room as a resident's bed.
- A container for the storage of personal laundry means an identified laundry basket/hamper for residents to deposit clothes and other items such as towels and face washers requiring laundering.
- A towel rail for the drying and storage of towels and face washers is not required in instances where laundering occurs on a daily basis. Notwithstanding this, a clean supply of towels and face washers must be available to residents at all times.
- Provision of specified items being in a location that is convenient for the use of that item by the resident means being located in their bedroom.

Clause 10 General Storage Space

To clarify the requirements of Clause 10 General storage space:

(1) the licensed premises must have shelving and cupboard space that is appropriate for the storage of the following:

- (a) recreation and education supplies,*
- (b) linen,*
- (c) food,*
- (d) cooking and eating utensils,*
- (e) luggage,*
- (f) cleaning materials,*
- (g) outdoor equipment.*

(2) Food and cooking and eating utensils must not be stored together with any other types of items.

- It is expected that all of the above items be stored separately in appropriate locations throughout the premises.
 - Recreation and education supplies are to be stored in a location accessible to residents and the identified recreation area/s.
 - Food, cooking and eating utensils are to be stored in the kitchen/dining area.
 - Cleaning materials and outdoor equipment should be stored in a fashion that protects residents from potential harm from exposure to these items.
 - Luggage belonging to individuals must be safely stored to avoid theft.

It is expected that all items supplied for the use of residents such as eating utensils, be kept in clean and sound condition in compliance with local government health and safety requirements. More information on food standards can be found at www.foodstandards.gov.au.

Clause 11 Medication

To clarify the requirements of Clause 11 Medication:

(2) Written directions from any medical practitioner who prescribes a resident with psychotropic PRN medication must be obtained. The written directions must be kept with a file relating to the resident and must contain the following details:

- (a) the circumstances under which the medication may be given to the resident,*
- (b) the procedure to be followed for administration of the medication,*
- (c) the circumstances under which a further dose may be administered and the required interval between doses,*
- (d) the maximum dose that may be given,*
- (e) the circumstances under which a medical practitioner should be contacted in relation to the administration of the medication.*

- For guidance, Licensees and Licensed Managers can refer to the ADHC [Behaviour Support Policy Version 1.0 January 2009](#) available on the ADHC website. This outlines practices in the provision of behaviour support services to people with a disability. The policy promotes a positive approach to behaviour support and recognises that quality support should be informed by good practice and sound research, consistent with a contemporary disability services approach, legislative requirements, and evidence-based practice. The policy also provides information in relation to the use of restrictive practices such as the administration of psychotropic medication.
- **Appendix 1** offers a sample template for the administration of medication.

Clause 12 Safety and Health

To clarify the requirements of Clause 12 Safety and Health:

*(1) A register containing the dates of any fire evacuation drills carried out at the licensed premises must be maintained, **Appendix 2** to this document provides a sample Fire Drill Record template.*

(2) Each resident must be supplied with such medical (including mental health) and dental treatment as is necessary in a timely manner.

(3) Each resident must receive assistance in accessing any health services that the resident requires or wishes to access.

- Licensees and Licensed Managers can be guided by the NSW Health's *Medication Handling in Community-Based Health Services/Residential Facilities in NSW – Guidelines* which provides guidelines for handling of medication by persons employed in community-based health services and in residential facilities such as group homes, boarding houses and hostels (nursing homes excluded), available on NSW Health website at www.health.nsw.gov.au/policies/PD/2005/PD2005_105.html

*(6) An effective infection control program must be maintained at the licensed premises, **Appendix 2** to this document provides *Infection Control Guidelines for Licensed Residential Centres*.*

- To provide guidance in relation to infection control, the Infection Control Guidelines for Licensed Residential Centres is at **Appendix 3**.

*(7) There must be a suitable and fully stocked first aid kit at the licensed premises and at least one member of the staff on duty must hold qualifications (of a type approved by the Chief Executive) in the administration of first aid, **Appendix 4** offers a sample *First Aid Kit Check List*.*

Australian Red Cross is the Senior First Aid course provider approved by ADHC. Australian Red Cross provides training in both metropolitan and regional areas. Between October 2010 and October 2011, ADHC has established a funding program to support LRCs staff to receive initial Senior First Aid training. To access this funded training, the completed form at **Appendix 5** must be emailed to firstaid@redcross.org.au with a copy also sent to Janice.Denehy@facns.nsw.gov.au. Licensees and Licensed Managers are responsible for subsequent training.

Clause 13 Residents not to be Abused or Neglected

To clarify the requirements under Clause 13 Residents not to be abused or neglected:

- All paid and unpaid workers in ADHC operated and funded non-government services that have contact with adult people with a disability are to adhere to ADHCs [Abuse and Neglect Policy and Procedure](#). This document applies to ADHC staff undertaking monitoring activities within the LRC or performing Case Management duties for LRC residents.
- Licensees, Licensed Managers and staff of LRCs should use the following policies and procedures as a minimum standard of practice:
 - [ADHC Abuse and Neglect Policy and Procedure](#)
 - [ADHC Behaviour Support Policy](#)
 - [Interagency Protocol for responding to Abuse of Older People](#)

Clause 14 Protection of financial affairs of residents

To clarify the requirements under Clause 14 Protection of financial affairs of residents:

(1) A receipt for any money received from or on behalf of a resident (including details of the purpose of the receipt of money or payment) must be issued to the resident and a copy of all such receipts kept.

- This receipt must be provided in an accessible format suited to the individual needs of the resident and as required an explanation of the receipt is provided to the resident or person appropriately authorised acting on their behalf.

(2) Each resident must be given support so that the resident has the opportunity to independently operate his or her bank account and manage his or her financial affairs.

- This means that where a resident has the capacity to independently operate his or her bank account they should be encouraged to do so by the Licensee, License Manager or other staff. At times the resident may require support in making arrangements so that he or she can independently operate their bank account such as assistance with transport to and from the bank or holding of bank documents such as passbooks and bank statements. Where the resident identifies the need for such support, it is acceptable for the Licensee, Licensed Manager or other staff to provide this support.

(3) In the event that a resident is unable to operate his or her bank account or manage his or her financial affairs, the resident must be given support in arranging for such assistance as is required to operate the account or manage the affairs (including support in making an application to the Guardianship Tribunal for a Financial Management Order where necessary):

- This means that residents who are able to manage their own financial affairs should be supported to do so, however, residents who are unable to manage their own financial

affairs should be supported by the Licensee and Licensed Manager to obtain an independent authority to provide financial management.

NOTE: ADHC, with the NSW Trustee and Guardian is seeking an agreed approach for financial management referrals. Further guidance to operators will be provided as it comes to hand.

- Where a resident is under the Public Trustee it is envisaged that payments of Board and Lodging will be made directly from the Trustee to the Licensee.

(4) A resident must not be assisted by the Licensee, Licensed Manager or other member of staff of the licensed premises in operating his or her bank account or managing his or her financial affairs:

- This means that the Licensee, Licensed Manager or other staff member must not undertake banking activities such as withdrawals on behalf of the resident. It is acceptable for residents to store bank books, key cards and other valuables securely in a safe on the premises operated only by the Licensed Manager so long as these can be accessed by the resident on request.
- The Licensee, Licensed Manager or other staff may provide transport for and accompany residents visiting the bank, Centrelink or other financial institution.
- An arrangement must be made by the Licensee and/or Licensed Manager with the appointed Financial Manager in relation to the distribution of “comfort” money. Written details of this arrangement must be provided to each resident in a format that is suitable to the individual needs of the resident.
- A Licensee, Licensed Manager or other staff may not become a Centrelink authorising person or organisation to enquire or act on behalf of a resident.

Clause 15 Protection of interests of residents

To clarify the requirements under Clause 15 Protection of interests of residents

(1) Each resident’s need for privacy and confidentiality must be met.

- Any information relating to residents should be stored in a locked cabinet. Residents must be provided with the opportunity to access this personal information as required.

(2) Each resident must be given the opportunity to make decisions about daily events and activities that he or she participates in (provided that such decisions do not unreasonably infringe on the health, comfort, safety or proper care of other residents).

- For guidance on how residents can be supported to make decisions Licensees, Licensed Managers and staff of LRCs can refer to the following policies and procedures:
 - [ADHC’s Decision Making and Consent Policy and Procedures](#)
 - [NSW Attorney General’s Capacity Toolkit](#) which provides general capacity principles and guidelines on assessing a person’s capacity to make legal, medical, financial and personal decisions.
- In some cases, a resident may need the assistance of an advocate to have matters explained to them and to assist them to make an informed decision. Residents are to be provided information about, and assisted to access, external agencies to assist them with this process if necessary.

(3) *A resident must be provided with information on support services, advocacy services or other service or information providers (such as legal service providers and disability rights and support organisations):*

- Providing a resident with information means that the resident must be able to understand the information provided. If a resident has trouble reading, or understanding written information, then the information should be provided through an advocate, interpreter, or in a format that is suitable to the residents' individual needs or choice. Support service phone numbers should be displayed in a common area at the premises.
- Providing a resident with information on support services, advocacy services and other service or information providers means in the first instance, that Licensees, Licensed Managers and staff of LRCs ensure that where possible this information is provided directly by the services to whom the information relates. Where a resident does not have direct access to such services the Licensee, Licensed Manager and staff of the licensed premises should assist the resident to contact the relevant services for information (including documents accessible to the resident) suited to the resident needs.

(4) *A resident who wishes to access any such service must be assisted (and not obstructed in any way) in accessing those services (whether the service provider consults with the resident at the licensed premises or any other place outside of the licensed premises).*

- Under the Regulation, all service providers and/or advocates have right of access to LRC residents who have requested such services.
- Assisting a resident to access any such service at the licensed premises means making available the designated room as required by licence condition 2.6 for residents to receive guests in private or any other appropriate place within the licensed premises where a meeting can occur in private.

Licence condition 2.6 states: *A room, separate from leisure and recreation space shall be available for residents to receive guests in private. This room should be furnished in a comfortable manner.*

- The availability of a private phone in the designated guest room is a suggested mechanism to ensure residents have a private space and the means by which they can access external agencies.
- Assisting a resident to access any such service outside of the licensed premises means assisting the resident to organise transport if required, and/or to ensure the resident is available and ready for any prearranged meetings between the resident and any such service.
- 'Not obstructed in any way' means a Licensee, Licensed Manager or staff of the LRC must ensure that they or any other party do not obstruct (block, hinder, get in the way of, frustrate, interfere with) the interaction between a resident and any service or its representative.
- Community Visitors have a right of access to LRCs and LRC residents under the *Community Services (Complaints, Reviews and Monitoring) Act 1993*. Any act to obstruct, hinder or restrict the access of a Community Visitor can be dealt with under the provisions of the *Youth and Community Services Act 1973*. Specifically under Licence Condition 1.3 which provides that "*the Licensee and the Licensed Manager shall comply at all times with the Conditions, applicable to them, and to relevant legislation.*" Compliance with this condition includes compliance with the *Community Services (Complaints, Reviews and Monitoring) Act 1993*.

Clause 16 Procedure for dealing with complaints

To clarify the requirements under Clause 16 Procedure for dealing with complaints

(1) *Any complaint received relating to the provision of services at the licensed premises must be dealt with fairly, promptly and confidentially.*

- Licensees and Licensed Managers are encouraged to establish a complaint policy which is made available to all residents to ensure that they understand and are aware of how they can make a complaint and how it will be dealt with. For guidance on complaint handling refer to the ADHC [Boarding House Complaints Handling Guidelines and Procedures](#) this document is an adjunct to the ADHC [Feedback and complaint handling: Principles and Guidelines](#), which is the current process for managing feedback and complaints within ADHC. Additionally, refer to the NSW Ombudsman's publication titled 'Effective Complaint Handling' available via the [NSW Ombudsman's website](#) under Guidelines for community service providers.
- Residents and representatives of residents, including advocates, are free to raise and have resolved with the Licensee and Licensed Manager or an external agency, including ADHC, any complaint or dispute they may have about the LRC without fear of retaliation.
- Residents are to be provided with an explanation (spoken and written on how to make a complaint and the process used to resolve them) and to have matters explained to them, which may address aspects of their complaint in some circumstances.
- Licensees, Licensed Managers and staff are encouraged to listen carefully to a complaint to be able to assist the resident, or to consider any changes that might address the complaint.
- In some cases, a resident may need the assistance of an advocate to properly make a complaint, and to have matters explained to them, which may address aspects of their complaint in some circumstances. Residents are to be provided with information on external agencies to assist them with the complaint process.
- A suggestion box is a good system that encourages residents and their advocates to provide feedback and become involved in the LRC.
- The availability of a private phone in the designated guest room (licence condition 2.6) is a good mechanism to ensure residents have a private space and the means by which they can access external agencies to assist them with complaint processes.
- Licensing staff shall view the Complaints Procedure/Policy and interview residents to ascertain if complaints are being addressed by the Licensee and Licensed Manager.

(2) *A person making a complaint must not suffer any retribution as a result of making the complaint (such as discharge from the premises or restricted access to the premises or a resident).*

- This means that a Licensee, Licensed Manager and staff of an LRC must comply with the relevant legislative requirements applicable to Community Service Providers including LRCs under Section 47 of the *Community Services (Complaints, Reviews and Monitoring) Act 1993* (Protection of complainant against retribution) which states:

'(1) A person who takes or threatens to take detrimental action against another person because that other person or any other person:

- (a) makes, or proposes to make, a complaint to a service provider, an Official Community Visitor or the Ombudsman, or
- (b) brings, or proposes to bring, proceedings before the Tribunal, or

(c) provides or proposes to provide information, documents or evidence to an Official Community Visitor, the Ombudsman or the Tribunal, is guilty of an offence.

Maximum penalty: 50 penalty units or imprisonment for 12 months, or both.

- (2) It is a defence to a prosecution for an offence under this section if it is proved:
- (a) that the action referred to in subsection (1) on which the prosecution was based was taken or proposed in bad faith, or
 - (b) that any material allegation was known by the person making it to be false.
- (3) In this section, **detrimental action** means action causing, comprising or involving any of the following:
- (a) injury, damage or loss,
 - (b) intimidation or harassment,
 - (c) discrimination, disadvantage or adverse treatment in relation to employment,
 - (d) dismissal from, or prejudice in, employment,
 - (e) prejudice in the provision of a community service,
 - (f) disciplinary proceedings.

Clause 18 Staffing Arrangements

To clarify the requirements of Clause 18 Staffing arrangements

(1) *An adequate number of persons must be employed as staff at the licensed premises and*

(2) *An adequate number of staff must be on duty at the licensed premises at all times:*

- “Adequate” staffing means that the number of staff on duty must be sufficient to meet the needs of the residents. The current range of licensed capacity is from 2 to 105; therefore staffing levels will be different at each premises.
- “Adequate” staffing will be assessed by ADHC on a case by case basis and reviewed regularly in the course of its monitoring. ADHC will assess that staffing levels have changed in accordance with the changing needs of the resident population.
- Capacity of the premises is not the only determinant of whether a staff member has to be present during the day and night. All premises where the residents are known or assessed as having high or complex needs shall require a staff member to be present at all times.
- In cases where the residents have capabilities to react and cope with an emergency (as in a number of small premises, or premises which form part of a ‘cluster’ with a low licensed capacity), ADHC may determine that a staff member may not need to be present at all times. In these instances, ADHC may expect a staff member to be present at times during the day when residents need support. In this instance, where the staff are not present on the premises, but are elsewhere within the ‘cluster’ ADHC would expect there is a working telephone, Vitalcall system or intercom connection so as to alert the staff member in case of an emergency.
- The Screening Tool for Entry to Licensed Residential Centres currently prevents the entry of residents to LRCs with high support needs requiring 24 hour support.

(3) *The staff employed at the premises must have the knowledge and skills required to exercise the functions that they are employed to exercise and must be competent in exercising those functions, and*

(4) *The staff employed at the premises must have appropriate knowledge and skills in the provision of residential services.*

- The following prompt questions may be used to determine the suitability of staff employed at the LRC. It would be expected that all staff be able to affirmatively provide this information:
 1. Do you have a First Aid Certificate? Evidence of qualifications/training.
 2. What is your understanding of your responsibilities as a staff member at an LRC?
 3. What is your understanding of the services available to people with a disability and how to access them?
 4. What value could you bring to the residents of this LRC to enhance their lives in a positive way?

If such questions are going to be provided as examples for determining the suitability of staff, it will be necessary to also provide the expected/acceptable answers to such questions.

(5) All staff employed at the premises and exercising functions relating to the care of residents must be fit and proper persons to be concerned in the care of residents.

- Staff providing functions relating to the care of residents must be able to demonstrate:
 - how to respond effectively in an emergency;
 - their commitment to enhancing the lives of all residents through positive interaction with external service providers, such as advocates and family members;
 - respect for the rights of individuals residing within the LRC and their respective stakeholders;
 - respect for the needs of residents and in the way they interact with residents; and
 - their status as law abiding citizens without a criminal record or history of criminal activity. Licensees and Licensed Managers can obtain criminal record checks through:
 - *the local police station* at a cost of \$52; or
 - *CrimTrac* if more than 500 checks per three years (www.crimtrac.gov.au); or
 - *NSW Businesslink* at a cost of \$37 per employee or \$15 per volunteer, or
 - any other pre-employment screening 'broker', which you can find by searching the internet.

Further information on criminal record check processes can be obtained from NSW Businesslink on 02 9765 3399.

Clause 19 Screening Tool for Entry to Licensed Premises

The Screening Tool for Entry to LRCs was developed as part of the Boarding House Reform Strategy announced by the Government in October 1998. The Screening Tool was implemented to prevent inappropriate placement of high need residents into LRCs.

The Screening Tool has assisted and will continue to assist with a Government objective to change the profile of the population in LRCs to one of lower dependency, i.e., people whose accommodation and support needs are able to be satisfied through the kind of support offered in LRCs.

To clarify the requirements under Clause 19 Screening tool for entry to licensed premises

(2) A resident whose health or psychiatric condition significantly deteriorates after being assessed in accordance with a screening tool must be assessed in accordance with the screening tool following the deterioration. If it is determined that the resident is not suitable to remain a resident,

arrangements must be made for the relocation of the resident to appropriate alternative accommodation within one month of the determination:

Significant deterioration means that any resident whose conditions changes to the point where they require any additional support with daily living skills, such as walking, dressing, personal care, accessing the community or feeding themselves. It also relates to the residents' behaviour, for example, if they become a risk of harm to themselves or others.

Clause 20 Resident Information Register

To clarify the requirements of Clause 20 Resident Information Register, **Appendix 6** to this document provides a resident profile template.

MEDICATION ADMINISTRATION FOR MONTH OF: _____ NAME _____

Appendix 1

Medicare Number _____

DATE	AM <i>Medication and Dose</i>	LUNCH <i>Medication and Dose</i>	PM <i>Medication and Dose</i>	SIGNATURE of Staff Administering Medication	PRN <i>Medication and Dose</i>	REASON FOR PRN	RESIDENT'S RESPONSE TO PRN	SIGNATURE of Staff Administering Medication
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
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13								
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RECORD OF STAFF SIGNATURE/Initials

NAME	INITIALS

Fire Drill Records for: Name of Establishment Your Address

Person conducting the drill:

Date of the drill:

Time of the drill:

Notification method used: eg verbal notification /fire alarm

Staff and residents participating:

Number of occupants evacuated:

Special conditions simulated:

Problems encountered:

Time required for accomplishing complete evacuation:

INFECTION CONTROL GUIDELINES FOR LICENSED RESIDENTIAL CENTRES

The most effective way to ensure infection control is to treat all bodily fluids as though they are infectious. Gloves must be worn wherever there is a likelihood of coming into contact with bodily fluids.

Personal Hygiene

- Wash hands at the beginning and end of each service and before and after eating, drinking, smoking and going to the toilet
- Wash hands before handling food
- Wash hands following handling garbage or disposing of waste
- Wash hands after blowing the nose or coughing if you have a cold or flu, or after touching a cold sore
- Check for cuts and abrasions on exposed parts of the body and cover with a waterproof dressing.

Frequent and effective hand washing is the single most important aspect of Infection Control

- Social 10-15 seconds using soap and water (suitable for all routine procedures and for food handling)
- Aseptic 1-2 minutes using antiseptic skin cleaner (following contact with blood or body fluid).

Use of Disposable Gloves

- Powdered latex gloves must not be used
- Staff must wear disposable gloves for any tasks that may bring them into contact or the risk of contact, with blood or bodily fluids or with an infectious skin condition, or when applying ointments. **Dispose of gloves after use by double bagging and wash hands thoroughly.**

Good Practice Cleaning Procedures

- Wear rubber gloves to safely undertake general household tasks e.g. cleaning wet areas, using chemicals etc
- Ensure gloves are clean and in good condition
- Rubber gloves used for cleaning bathrooms and toilets are not to be used in other areas
- Keep the cleaning cloths used for the bathroom separate from other household cleaning cloths and wash after use
- Items and surfaces are to be washed and scrubbed to remove all visible contaminants and then a disinfectant used according to the instructions set out on the label of the particular product
- Appropriate household chlorine bleach may be used as a disinfectant with the bleach freshly diluted in water to give 1% solution (i.e. 5mls bleach to 500mls water).

Linen

- Wearing disposable gloves, place all soiled linen directly into a laundry basket or laundry bag
- Do not place soiled linen on floor, bench tops or bedside tables
- Keep soiled linen away from clothing and clean linen.

Laundry

- All staff handling dirty laundry should wear gloves (*all used linen should be treated as potentially infectious*);
- Routine washing procedures are adequate for linen or clothing
- Full wash cycle and drying cycle should be completed

- Do not overfill washing machine or dryer
- Soaps and detergents loosen soil and have anti-microbial action
- If hot washing has been selected on a machine, appropriate hot water detergent must be used
- Blood soiled articles should be washed in cold water for removal of blood and then washed in hot wash to eliminate any potential pathogens. Remove any solid matter using paper towels or tissues
- If the hot wash cannot reach the temperature of 71 degrees Celsius (160 degrees Fahrenheit) a commercial sanitiser should be used with the detergent to neutralise germs.

<i>The use of gloves does not eliminate the need for hand washing</i>
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Infectious diseases

Transmission of an infectious disease may occur through one or more diverse pathways including physical contact with infected individuals. These infecting agents may also be transmitted through liquids, food, body fluids, contaminated objects, and airborne inhalation. Transmissible diseases which are transmitted through contact with an ill person or their secretions, or objects touched by them, are especially infective, and are sometimes referred to as contagious diseases. To reduce the spread of infections ensure;

- A quiet room convenient to bathing and toilet facilities should be available for use as a sick or quiet room
- A person suspected of having an infectious disease should rest in the quiet room until seen by their doctor. This will reduce the risk of the infection spreading to other residents
- Staff must ensure they follow good hygiene practices and wash hands before and after attending to the sick resident. Disposable gloves must be worn at all times and disposed of appropriately
- The quiet room must be kept clean at all times paying particular attention to disinfecting table tops, door handles, bed heads.

FIRST AID KIT CHECK LIST

Item	Quantity Required	Quantity on Hand	Comments / Condition
ADHESIVE DRESSING STRIPS - for minor wounds (e.g. Band-aids)			
ADHESIVE DRESSING TAPE 2.5cm and 5 cm - secure dressings	1 each		
NON-ADHERENT DRESSINGS 7.5cm - for cuts, burns etc	2		
GAUZE BANDAGE 5cm	1		
GAUZE BANDAGE 10cm	1		
EYE PADS – sterile - to protect damaged or injured eye	2		
TRIANGULAR BANDAGES – minimum 90 cm for sling or bandage	4		
WOUND DRESSINGS sterile, non-medicated large - for major bleeding wounds	3		
SAFETY PINS various sizes - to secure bandages	1 packet		
STERILE EYEWASH SOLUTION 10ml single use ampules or sachets	6		
SWABS – pre-packed antiseptic for cleaning minor wounds	10		
SCISSORS 12.5cm Blunt, short nosed - cut dressings/bandages	1		
SPLINTER FORCEPS - for removing splinters (tweezers)	1		
RESCUE BLANKET – silver space blanket to maintain body temp	1		
PLASTIC BAGS s,m and l, - for amputation or ice packs	1S, 1M, 1L		
DISPOSABLE GLOVES - avoid contamination	4		
FIRST AID PAMPHLET	1		

Additional Supplies:

Item	Quantity Required	Quantity on Hand	Comments / Condition
RESUSCITATION MASK	1		
EYE GOGGLES – for protection from splashes	1		
REGISTER OF INJURIES – requirement of Workplace Injury Management and Workers Compensation Act 1998	1		
NOTEPAD & PENCIL	1		
DISPOSABLE SPLINTER PROBES	5		

RED CROSS FIRST AID COURSE — ENROLMENT FORM

For ADHC, Ageing Disability and Home Care, Department of Family and Community Services
Licensed Residential Centre special pricing
 Please complete and email this form to: firstaid@redcross.org.au or fax to: 1300 440 813

1. FIRST AID COURSE REQUIRED:

FACE TO FACE TRAINING (Do not book online. Special pricing only available via this form)

http://www.redcross.org.au/ourservices_acrossaustralia_firstaid_default.htm

Course Name

Price

SFA* - 2 days

\$130

SFA Refresher – 1 day

\$105



Course Location:		Course Date:	
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*Senior First Aid – Level 2

2. PARTICIPANT DETAILS:

Member Name:		Email Address:	
Name of Licensed Residential Centre:		Address:	
Phone:		Fax:	

3. PAYMENT:

For Red Cross Use only

Ageing Disability and Home Care, Department of Family and Community Services, NSW

ADHC Central Office Reference: 23124539

Invoice to: *Ageing, Disability and Home Care, Department of Family and Community Services*

Janice Denehy
 Level 8
 83 Clarence Street
 Sydney NSW 2000

For assistance in enrolling in a course, or for any extra information please call 1300 367 428 during business hours

Senior First Aid – Level 2 **Refresher** and CPR **Refresher** training: Please note that it is a prerequisite to hold a current Senior First Aid – Level 2 or CPR certificate at the time of completing the applicable Refresher Course. Evidence of certificate currency will be required either prior to or on the day of training.

Cancellation Policy: A 50% cancellation fee will apply if a booking is cancelled within five working days before the commencement of the course. More than 5 days, an administrative fee may apply. If participant has booked but cannot attend, the booking can be transferred to another participant. Please advise Red Cross. No refund will be given if a student fails to attend or complete a course. If Australian Red Cross must cancel a course, a full refund will be given.

RESIDENT'S PROFILE

IDENTIFICATION

Resident's name:
Date of birth:
Height:
Weight:
Eye colour:
Hair colour:
Cultural background:
Language spoken:
Religion:
Pensioner or benefits number:
Does the resident have a Legal Guardian or Person Responsible?
Does the resident manage his or her own financial affairs?
Does the resident have a Financial Guardian?

HEALTH

Medicare number:
Does the resident have any special dietary requirements (list them)?
Has there been any previous allergic reaction to foods?
Is any assistance required for personal care?
Has there been any serious illness?
Have there been any sensitivities or allergies to any medication (list)?
Is assistance required in taking or administering any medication?
Have there been any sensitivities or allergies to any foods (list)?
Support (e.g. access, personal safety) considerations when participating in the community?

CONTACT DETAILS OF PERSONS OF IMPORTANCE:

NEXT OF KIN:

Name	
Relationship	
Address	
Phone number	
Language spoken	

LEGAL GUARDIAN/PERSON RESPONSIBLE:

Name	
Legal Guardian or Person Responsible.	
Address	
Phone number	

DOCTOR: (add to table as required)

Name	
Address	
Phone Number	

ADVOCATE

Name	
Address	
Phone Number	

FINANCIAL GUARDIAN:

Name	
Address	
Phone Number	

FRIENDS: (add to table as required)

Name	
Address	
Phone Number	

COMMUNITY TRANSPORT:

Contact Name	
Phone Number	

SUPPORT SERVICES: (add to table as required)

Name	
Contact Person	
Phone Number	