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Australia's leading aged services magazine

Summer 2023 | www.accpa.asn.au

LOOKING AHEAD WITH RENEWED CONFIDENCE

**ACCPA NATIONAL
CONFERENCE 2023
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BIGGEST EVENT!**

IN THIS ISSUE

- ▶ The importance of supporting your leaders, and how to do it
- ▶ How to recognise loneliness and the role of pets in aged care
- ▶ Innovative strategies to address workforce challenges
- ▶ One year on from the AN-ACC
- ▶ What the closing of 3G means for your retirement village
- ▶ The ramifications of risk: adapt the design, don't remove the opportunity

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new \$800 million
investment in older
Australians**

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Aged & Community Care Providers Association

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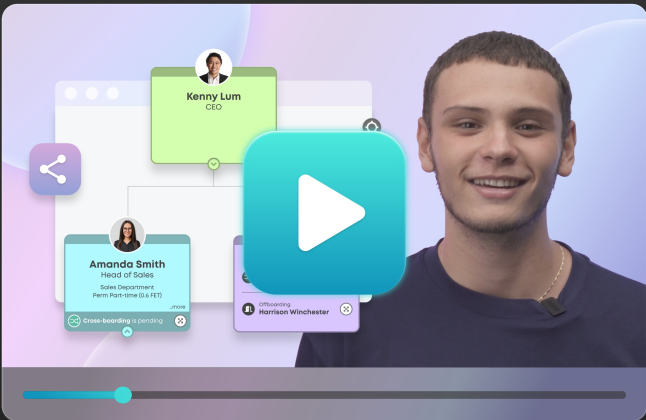
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EDITOR'S NOTE

Welcome to our summer issue of *Aged Care Today* – the official magazine of the Aged & Community Care Providers Association (ACCPA). It's been a year of achievements and success in aged care, always looking ahead, with an eye on the prize of a better ageing experience for all Australians. This magazine is all about showcasing the amazing work, the dedication, the innovation, and the continual striving to do better, in Australia's aged services industry. We're delighted to present articles from policy makers, leaders, innovators and influencers in aged care, including Minister Mark Butler and Commissioner Janet Anderson. Our original and unbiased content is curated exclusively for aged care providers. Enjoy the read, and happy holidays.

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Cover shot:
ACCPA CEO Tom Symondson addresses delegates at the ACCPA National Conference 2023 in Adelaide.

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More features such as downloadable HCP consumer statements & the ability to request rescheduling of services will be available in Dec 23/Jan 24.

Leadership change for ACCPA in 2024

ACCPA Chairman set to step down



At the recent Aged & Community Care Providers Association (ACCPA) National Conference, I announced that the new year would mark my last on the board.

It is not a decision I have made lightly.

I am proud to have stood at the forefront of an industry that has consistently demonstrated exceptional leadership during these transformative times in aged and community care.

The timing of my decision to step down at the 2024 Annual General Meeting is because by that point we will have reduced our board size from 15 to 11.

It will be the right time.

Early in 2024, the board will embark upon a process to find my successor.

Our greatest asset will always be our members and our collective strength.

In an era marked by shifting demographics, changing expectations, and the evolving landscape of healthcare, our sector has proven it can adapt and innovate.

Our members show their strong leadership skills every single day in their unwavering dedication to improving the lives of older people and the communities they serve.

At ACCPA, we are no exception to the rule that 'change is the only constant', and I have seen this organisation grow from strength to strength during the past 18 months.

After many years of effort, we have created a single peak body with more than 1,000 members from every corner of the nation and 120 staff serving our sector.

I have been incredibly honoured to serve as chair of ACCPA.

I extend my thanks to everyone who has been a part of the journey so far and am confident that I am leaving a fantastic team capable of facing the challenges ahead.

We are immensely proud our ACCPA National Conference has grown to become the largest of its kind in Australia – and I hope members found it engaging, insightful and productive.

The conference, held in Adelaide in late October, was a wonderful opportunity to bring the whole sector together, for members to collaborate, to learn and to support one another.

The strength of our sector was on display with more than 2,000 registrations – a significant increase from last year.



Dr Graeme Blackman AO at the ACCPA National Conference this year.



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With a theme of the ‘Age of Change’, the conference featured three full days with more than 150 speakers, 171 trade booths and five networking functions.

It was the single biggest gathering of industry leaders, experts and visionaries, all committed to embracing reform and striving to better the lives of older Australians.

The 85 speaking sessions covered a wide range of issues – from governance and leadership, through to cutting-edge technologies, workforce solutions and the sector’s long-term viability.

Finding solutions to the long-term sustainability of the aged care sector was a focal point.

Delegates reflected on the rapid pace of change since the handing down of the Royal Commission into Aged Care Quality and Safety Final Report and its 148 recommendations – a pivotal moment for aged care in Australia.

Demographer and futurist Bernard Salt outlined challenges and opportunities, including the expected growing demands of the baby boomer generation needing care as they age.

We also appreciated the thought-provoking engagement of conference Master of Ceremonies, Tony Jones, a Walkley

Award winning journalist, and the words of keynote speaker Samuel Johnson OAM.

Aged Care Minister Anika Wells and a panel discussion on the future sustainability of the sector, featuring members of the Australian Government’s Aged Care Taskforce, provided numerous insights for delegates.

The importance of aged care now has the attention of the broader Australian community.

Since the report, the sector has seen multiple reforms, including two pieces of new legislation, with a new Aged Care Act on the horizon.

Now is the time to consider the next generation of aged care service delivery in Australia.

It will take all of us – Government, providers, workforce and carers together with families and representatives – to find creative solutions and ways forward that meet the individual care needs for all older Australians.

Dr Graeme Blackman AO FTSE FAICD
Chairman
Aged & Community Care Providers Association

Insights from the UK

Key learnings from the Global Ageing Network conference



As we embark on an age of change and reform in Australian aged care, I was recently lucky enough to have the opportunity of observing the UK’s care system.

In September, I was proud to represent our sector at the biennial Global Ageing Network (GAN) conference in Glasgow. The conference provided a fantastic opportunity for providers and advocates from across the globe to come together to share experiences and ideas.

For me, it also provided a chance to engage with my equivalents from more than 20 nations including the UK, USA and Canada as well as from across Europe, Africa and Asia. After the COVID years, this type of international cooperation is so important to building better aged care sectors in all of our countries for the benefit of older people wherever they live.

As well as the conference, I got to spend time looking mainly at the UK’s aged care system which was a real eye opener.

In England (Scotland, Wales and Northern Ireland run their own systems), it is local councils, not the government, who fund and oversee aged care provision. What that translates to is more than 150 councils in England with responsibility for aged care.

They set prices for beds and for home care which can vary massively from one council to the next, meaning residents in rooms next to each other may be funded at different levels based on which council they come from.

They decide who is eligible to receive publicly funded care and who is not, and they negotiate directly with providers.

Now, this wasn’t completely alien to me. Before coming to Australia in 2011, I worked in local government in London. As a loyal public servant, I saw many advantages to this system – but I must say that with the benefit of distance and experience, they were harder to find.

A major part of the problem is that councils have seen their government funding cut by almost half as a result of more than 10 years of so-called ‘austerity’. And other income sources (local taxes and fees), have simply not kept up.

That means that a council today is drastically poorer than it was in 2009. Given they also provide services such as

public housing, road maintenance and transport, disability services and children’s services, you start to get a sense of how different things are, and why our sister sector might be struggling.

The loss of government money has fallen on the shoulders of residents, consumers and their families who are expected to pay substantially more for their care than here in Australia. Many older people with even very modest income and assets are expected to pay the entire (yes, entire!) cost of their care in both residential and home-based settings.

This leads to predictable issues such as people waiting far too long to seek care and all of the problems that come with that. While we have advocated for increased contributions by residents and consumers who can afford it, the UK has taken that to a distressing extreme which we would not want to replicate.

So while we definitely don’t want to apply the UK’s funding models, what can we learn from our friends across the world? I would point to two areas: commissioning and regulation.

Unlike our federal government, which only pays for and regulates care, the English local councils are expected to actively commission services. That means they are supposed to identify areas of need, plan for current and future demand and ensure the sector in their area is working well.

How well they carry out that role is a topic of current debate in the English care sector, but the idea is a good one which we could afford to learn from, given the significant challenges of market failure in Australia.

England’s regulatory model (overseen by the national Care Quality Commission) also has some interesting learnings from an Australian perspective. It is simpler and provides greater room to innovate than our own, with fewer legislated requirements and less red tape.

Ultimately, no international system can simply be replicated in Australia, but we have to keep our eyes and minds open to learnings from overseas – even if that is simply what not to do!

Tom Symondson
Chief Executive Officer
Aged & Community Care Providers Association





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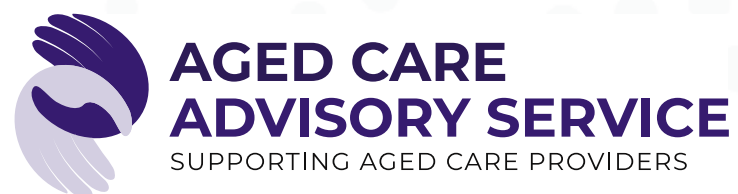
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- Our interim management and clinical management services provides a solution that allows providers to focus on recruitment without pressure to “fill a role”.
- Care Planning and Assessment services can provide you with experienced RN resources to rectify identified gaps, whilst transferring sustainable skills and processes to your team.
- Additionally, these services can be used to provide coaching, and mentoring should you identify a team member who needs support to step into a more senior role, or who has skills gained in a non-aged care setting.



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Australian Government makes another investment in older Australians

New \$800 million vaccination program a boost to health and wellbeing



Our commitment to the health and wellbeing of older Australians continues, with new protections against shingles and COVID-19.

The Albanese Government continues to take steps to improve the lives of older Australians and starting 1 November we have taken a huge leap forward.

We're investing over \$800 million to provide nearly five million Australians with the best protection against shingles.

Everyone aged 65 years and older, First Nations people aged 50 years and older and people with specific medical conditions can get a free shingles vaccine to protect themselves from this debilitating virus.

This will be one of the most comprehensive and widely available shingles vaccination programs in the world.

Shingles is caused by the varicella-zoster virus, which also causes chickenpox. After you have chickenpox, the virus stays inactive in the nerve cells near your spine and when it becomes active again it causes the painful, blistering shingles rash.

We don't know why the virus reactivates, but with this new vaccine we can help prevent it.

Two doses of the vaccine dramatically reduces your risk, and provides around 10 years of protection.

It usually costs up to \$560 but for almost five million people, we're making it free.



Minister Mark Butler MP at a carer's event in Findon, South Australia.

Without the vaccine, one in three Australians will develop shingles, and while it usually only occurs once, some people can get repeat infections, especially those with a weakened immune system.

For one in five people with shingles, it leads to severe nerve pain known as post-herpetic neuralgia that can last months or even years. In some cases, it may be permanent.

Almost everyone knows someone who has had shingles and the debilitating pain that shingles and its complications can cause. It's particularly frustrating to see people suffering when it is something we can prevent.

The vaccine is safe and effective and will be free for those eligible through the National Immunisation Program.

I would encourage everyone who is eligible to talk to their health

professional about getting vaccinated. For providers of residential aged care, consider offering vaccination within your homes, to make it easy for residents to access this important vaccine.

We also know that COVID-19 remains a real concern for many older Australians, including those living in residential aged care homes.

Being up-to-date with COVID-19 vaccinations is very important. A booster dose is urged for people aged over 75.

All adults can get a booster if it's been six months or more since your last COVID-19 vaccine or confirmed COVID-19 infection – whichever was most recent.

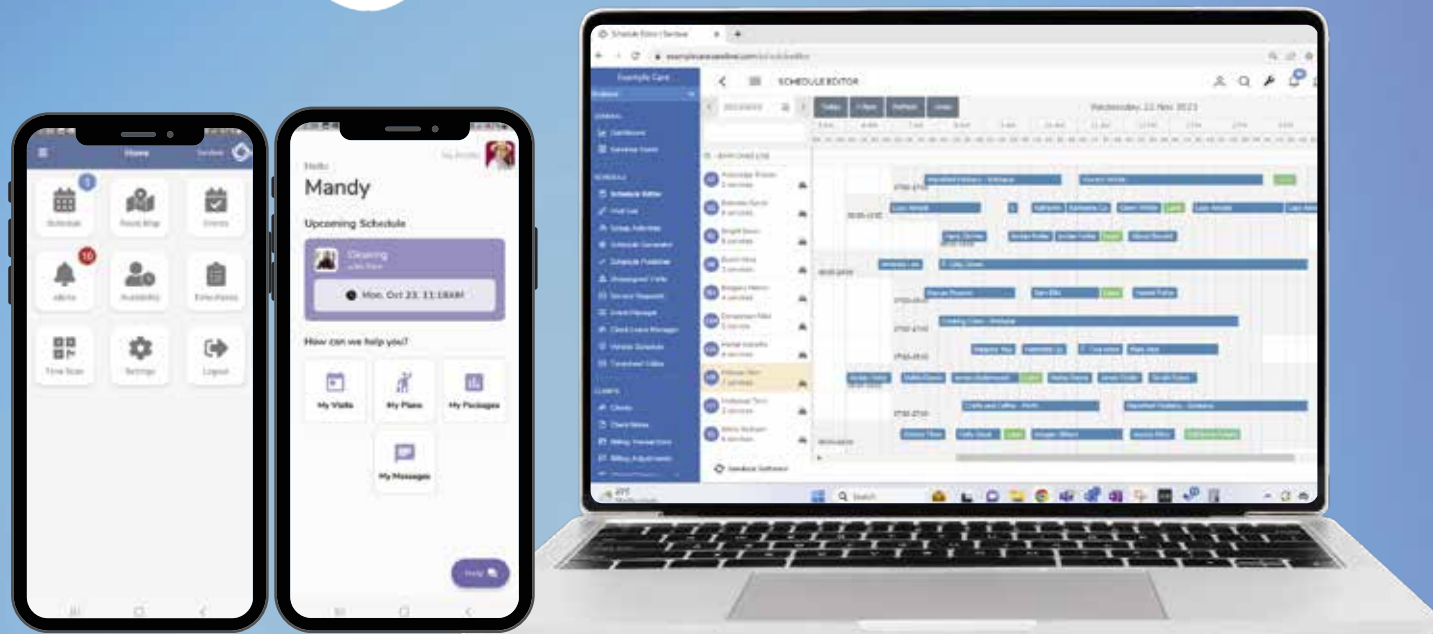
We have also announced a new Aged Care Outbreak Management Supplement to help residential aged care providers plan for and manage outbreaks.

The supplement will be paid through current arrangements and means providers will no longer have to apply for COVID-19 grants.

This support, combined with vaccinations, antiviral treatments, and well-trained and dedicated aged care workers will continue to keep Australians in aged care homes safe.

It is all part of the Albanese Government's ambitious plans to improve aged care and make healthcare more accessible and affordable, including for older Australians.

The Hon Mark Butler MP
Minister for Health and Aged Care



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Reflecting on the success of the Governing for Reform in Aged Care Program

Producing positive outcomes for leaders, consumers and the sector



As the Governing for Reform in Aged Care Program enters its next phase in 2024, the Aged Care Quality and Safety Commission reflects on the success of the initiative to date, and thanks participants and delivery partner KPMG for their commitment to its success.

The Program, led by the Aged Care Quality and Safety Commission, supports the Australian Government's aged care reforms.

The Program is designed to improve the safety and quality of care received by older Australians by supporting governing body members and executives to strengthen their organisational and clinical governance capability, adopt new mindsets, and work collectively to enact critical reforms.

Participants can select Program learning activities allowing in-depth learning into critical leadership and governance challenges and apply these to their own unique context.

Since the Program officially began in March 2022, approximately 6,500 leaders across more than 900 providers have enrolled.

Program participants have collectively completed over 25,000 learning activities ranging from webinars to podcasts, coaching sessions, virtual workshops, online learning modules and more.

Feedback from participants to date indicates that the Program has strengthened their capability and



Commissioner Janet Anderson PSM giving a presentation at the ACCPA National Conference 2023.

understanding of good governance and leadership practices.

One participant said, "This Program has provided a way to ensure we all hold a solid understanding of the standards and the principles underpinning the reforms. The standards are strongly reinforced through all aspects of the program, bringing them into more meaningful action."

Another of the 6,500 learners said, "We have implemented many of the Program templates throughout our reporting and documentation at the Board level. This has enabled us to have robust discussions and has led to several continuous improvement activities that have had excellent benefits to the residents' care, safety and wellbeing."

Participants agree that the interactive learning activities offer enormous value.

Virtual workshop participants reported that they found these activities to be informative, enlightening and engaging,

and especially appreciated the practical strategies and tools they could take back and implement with their teams.

The Program's coaching sessions have also been a beneficial learning activity for participants.

A participant commented that their involvement in the coaching sessions increased their knowledge and confidence in being a board member, while another stated that the coaches provided a safe space for participants to speak freely about their processes and practices.

Given the success of the Program and the positive feedback received, the Commission is excited to announce that from 1 January 2024, Program resources and activities will be available to anyone working in the aged care sector who would like to strengthen their governance and leadership skills.

As the Program enters this next phase, the Commission would like to thank the governing body members and executives across Australia who have participated to date and who have so energetically supported the collective capability uplift across the aged care sector.

If you are interested in starting or continuing your learning journey with the Governing for Reform in Aged Care Program in 2024, visit www.gfr.agedcarequality.gov.au.

Janet Anderson PSM
Commissioner
Aged Care Quality and Safety
Commission

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Enabling innovation to transform the future

The disruptive ideas that can help create
world-leading models of aged care



When we turn our thoughts towards the future, we are likely to see sophisticated new models and exciting technology to help care for our older Australians.

However, at the core of excellence in care delivery, is truly understanding our clients and tailoring care to what they want and need, partnering with our clients and future clients to co-design the services of tomorrow.

A relationship-based care approach, which incorporates building relationships, having familiar faces delivering the care and focusing on meaningful activities, will continue to lay the foundation for the aged care of tomorrow.

What may change is how we are able to deliver more in these areas. Will emerging technology and artificial intelligence relieve our carers of task-based activities leaving more time for meaningful engagement with our clients?

Will residential aged care funding support the small home model, enabling smaller cohorts of people to live together in a six-to-ten-bedroom home? We have seen the success of a small home model in our Bourke home however the costs are currently prohibitive to achieve for all aged care recipients.

So, the question then turns to how can we achieve this model in our existing residential care homes? And will models such as assisted living continue to expand?

Historically, as our knowledge and technology evolve, so does our ability to manage health conditions and diseases. Thus, it will not be unexpected that some of the conditions that adversely impact our existing clients may be mitigated in the future.

Whiddon are currently partnering with DNANudge and MyDna to expedite new ways of managing medications and treating infections. We are also partnering with the University of Sydney to explore reablement for people living with dementia. And there are numerous examples of ongoing research that will continue to improve health outcomes for our residents.

However, it is likely that the current health challenges of today will be replaced with new conditions or as we are seeing, the impact of mental illness, social isolation and loneliness will increase. Therefore, the focus on connecting with people and their communities needs to continually improve and innovate.

We know that the preference of older people generally, is to continue to live in the comfort and familiar setting of the family home. With this said, as health and acuity declines, accessing the community is hindered and this is further compounded by changes in family structure. As a result, the benefit of an extended home life is often outweighed by the impact of social isolation and loneliness.

There are emerging models on how to connect people such as community circles and volunteer programs in addition to existing and emerging technology as a medium for connection. What will this look like in the future?

Further, what will our workforce of the future look like? How will they be enabled to deliver best care?

We know from our own research that employees are increasingly attracted to organisations that have a purpose they can connect with. We also know that Gen Z, millennials, and today's emerging workforce are looking for purpose to underpin their careers. Enabling employees to connect to that purpose in real and meaningful ways and to have more connection with our clients are key to attracting and retaining employees.

With the increasing ability to use technology and artificial intelligence to enable truly data-driven decision making, we will see an increase in early identification of client decline with speedier interventions, enabling better outcomes for clients and more time spent on delivering relationship-based care.

Telehealth will continue to play a significant role in supporting access to health services. There are leaps and bounds being made in remote monitoring technology, helping us identify issues in real time remotely with earlier interventions to improve outcomes.

At the end of the day, care and services co-designed with older Australians and delivering true connection, meaningful relationships and purposeful activities is the foundation of excellent aged care, whether it is today or in the future.

What will change is the design, technology and artificial intelligence that will support the delivery of these care services. Providers that have these important pillars of care embedded while also embracing a healthy appetite for innovation, are best placed to champion aged care into the future.

Alyson Jarrett
Deputy CEO, Whiddon

ACCPA National Conference shines in 2023

01

The challenge of change for a better tomorrow

The eyes of the aged services industry were firmly on Adelaide, when our second ACCPA National Conference descended on the southern state 25-27 October 2023, with a buzz of excitement and a desire to learn, grow and transform.

Attracting more than 2,000 delegates, there were representatives from across Australia from residential care, home and community care, and retirement living sectors, keen to learn about how they can facilitate a better ageing experience, and be part of the ‘age of change’.

“We landed on ‘age of change’ as our theme this year, because the aged services industry is still in a state of flux post the Aged Care Royal Commission report and recommendations, and many providers are still trying to understand how to navigate new legislation and reforms,” said Susie Tillotson, ACCPA’s Head of Learning and Events.

“There is a genuine desire among providers to embrace change, learn how to implement the new reforms, and provide better quality care and a really satisfying ageing experience for people who require aged care services.



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“But the sheer number of reforms can be overwhelming, and there are many challenges the industry is facing, in particular with workforce shortages and falling revenue, which is why we wanted to focus on specific support for this, through our ACCPA National Conference, in 2023.”

Delegates had the opportunity to hear from the Minister for Aged Care the Hon Anika Wells and the Shadow Minister for Health and Aged Care the Hon Sen Anne Ruston, along with many thought leaders and experts in their field, including Samuel Johnson OAM, Bernard Salt AM and Dr Gill Hicks AM MBE.

We were also delighted to have secured Tony Jones, a Walkley Award winning journalist, as Master of Ceremonies.

Key topics included financial sustainability, workforce, digital transformation, innovation and the built environment. There were specific sessions on residential care, home care and retirement living, along with everything from governance to housing, leadership to palliative care.

In order to broaden delegates’ understanding of the user experience, there were consumer-centred sessions such as how to build trust and engage with older people as active



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participants in the aged care system, and how to be truly inclusive in relation to culture and identity.

There were numerous plenary sessions, presentations, panel sessions, and fishbowl conversations to engage and inspire, as well as an exhibition hall where delegates could connect with more than 170 suppliers of products and services to the aged services industry.

Pre-conference activities included a masterclass on closing the cultural gap and an opportunity to visit HammondCare’s new dementia cottage at Daw Park in Adelaide.

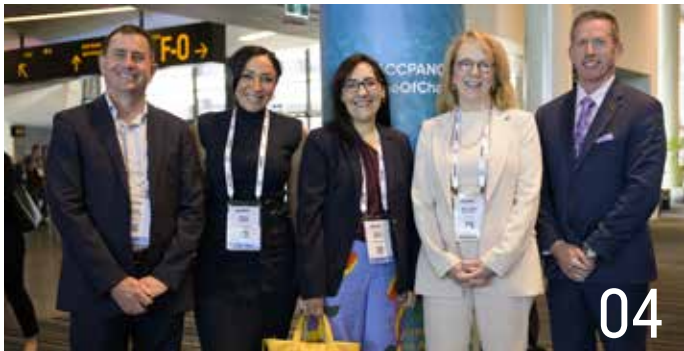
While open to all industry representatives, there were also special opportunities for ACCPA members, such as the ACCPA Pre-Budget Submission Member Engagement Workshop with Anne Liddell, ACCPA’s Head of Policy, to help ACCPA develop our submission to Treasury.

“We’re thrilled to be able to offer Australia’s aged services industry a high quality event, that not only aims to engage and inspire our aged care leaders, but also offers them an opportunity to connect with one another, and build personal networks to support them in the important role they play in our communities,” said Susie.

“While there’s a lot of work that goes on behind the scenes, and some very long days for staff, it’s an entirely worthwhile experience for everyone, and the feedback we get from our conferences is always incredibly positive, showing us the importance of our conference program for aged care providers.”

Linda Baracioli, *Aged Care Today* Editor and Communications Advisor, Aged & Community Care Providers Association www.conference.accpa.asn.au

- 01 The trade hall, with more than 170 suppliers, proved popular.
- 02 Networking over breakfast.
- 03 Delegates were delighted to hear from Aged Care Minister Anika Wells.
- 04 Delegates were eager to network with one another.
- 05 Leaders in aged care, ACCPA CEO Tom Symondson, Aged Care Minister Anika Wells and ACCPA Chairman Dr Graeme Blackman AO.
- 06 The latest innovations in aged care were on display.
- 07 Panel discussions offered a more intimate experience for discussions.
- 08 The *innovAGEING* innovation hub offered new ideas.



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A new Act for a new era

The promise of a new rights-based Aged Care Act

The expected commencement of the new Aged Care Act – 1 July 2024 – will mark a new chapter in the aged care reform landscape.

It has been more than 25 years since the current *Aged Care Act 1997* (Cth) came into effect and since then we have seen significant momentum in aged care reform – including the *Living Longer Living Better* reforms and of course, the Royal Commission into Aged Care Quality and Safety.

The Royal Commission's first recommendation was for the current Aged Care Act to be replaced with a new Act. Recommendations 2 and 3 respectively called for the new legislation to specify a list of rights of people seeking and receiving aged care, and a series of principles that should guide the administration of the Act.

Aged & Community Care Providers Association (ACCPA) understands the Department of Health and Aged Care has been working to develop an exposure draft of the new Aged Care Act, expected to be released for public consultation in late 2023.

In August-September 2023, the Department consulted on eight proposed foundation elements for the new Aged Care Act, including a Statement of Rights, Statement of Principles, definition of high quality care, and a new duty of care and compensation pathways, among other elements.

The new Aged Care Act is also expected to incorporate a new regulatory model, among other key reforms.

ACCPA supports a rights-based approach for the new Aged Care Act – in-principle this is the way forward we should all be able to agree on.

But it is imperative that providers are adequately funded and supported to implement the reforms and deliver the desired outcomes – without this, a rights-based approach cannot effectively, nor meaningfully, be put into practice.

Indeed, responsibilities for providers under the new Aged Care Act must be clear, and able to be implemented efficiently and effectively.

The new Aged Care Act is expected to contain a Statement of Rights for care recipients. ACCPA supports this concept – but it is equally important there is alignment between the rights in this Statement and the level of care providers are funded and able to deliver.

The Statement of Rights should be simple, clear, and implementable, and the Government should have a

responsibility to support the Statement of Rights to be delivered.

We all have the same goal – for older people accessing Australian aged care services to be at the centre; for their rights to be respected and upheld. Older people are at the heart of what our sector does. In order to deliver the best possible outcomes for them, aged care providers must be sufficiently supported – through funding, resources and training.

Providers need sufficient transition time to plan for and implement the changes, and ideally go beyond to explore innovative care models. ACCPA hopes the new Aged Care Act facilitates a streamlined approach to implementation – to detract from unnecessary time spent managing administrative complexity and duplication.

We also want to see that the new Aged Care Act recognises the need for an efficient and sustainable sector that attracts and retains a sufficiently trained and available workforce – and that the new Aged Care Act helps to enliven this.

And we cannot forget these reforms are not occurring in a vacuum. The sector is operating in a significant transformation landscape of many reforms and will continue to do so for the foreseeable future.

To navigate this – for the benefit of the entire sector, and ultimately the older people at its heart – we need a sector implementation plan from the Government.

This should be developed in partnership with the sector and outline timeframes including required actions for aged care providers.

The plan should be communicated across the sector and provide information on how the changes relate to other aged care reforms to ensure reforms are synchronised and structured to adapt to a changed and changing aged care sector.

For the benefit of older people and the sector as a whole, it is important this reform is done right – with sufficient time, support, and funding for aged care providers to deliver optimal outcomes.

**Keelie Bormann Policy Advisor and
Deidre Gerathy Senior Policy Advisor,
Aged & Community Care Providers Association**
www.accpa.asn.au; www.health.gov.au/our-work/aged-care-reforms/aged-care-legislative-reform/a-new-aged-care-act



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Transform your meetings with the new ACCPA Governance Portal

Continuing to expand support for aged care providers

Strengthening provider governance is a key pillar of the aged care reform agenda, and the Aged & Community Care Providers Association (ACCPA) is committed to supporting implementation of these important changes.

The majority of the reforms came into effect from 1 December this year for providers approved before 1 December 2022, and we know some of you are still coming to terms with the new expectations and requirements.

Our goal is not only to ensure the concerns and challenges of aged care providers in relation to these changes are escalated to Government, but also to offer services and programs that contribute to building capability to achieve good governance outcomes.

With this in mind, we recently launched the ACCPA Governance Portal – the digital tool supporting good governance.

Developed specifically for the aged care sector, the ACCPA Governance Portal is a private and secure online hub to help you manage governing body and committee meetings efficiently and effectively.

Suitable for all aged care providers as well as retirement living and seniors housing operators, the Portal brings a new level of sophistication and ease to fulfilling your governance responsibilities.

Powered by Convene, the Portal supports everything from scheduling meetings with an in-built conflict checker, to storing, sharing and collaborating on important files, managing updates to documents, assisting with voting and creating minutes.

Providing an overview of governing body tasks, the Portal can even track actions and alert the user with updates, plus it includes high-level encryption and 24-hour support, for added peace of mind.

“With the sweeping reforms in aged care, it’s very important that providers find the administration of governance as easy as possible,” says Amanda Allen, ACCPA’s Head of Services.

“We know the increased requirements can seem overwhelming for aged care providers, which is why providing a tool that helps them manage governance meetings in a very efficient, effective and transparent manner, is incredibly useful.”

This new offering comes on the back of a suite of resources which ACCPA has developed to help aged care providers understand the changes and implement strategies for good governance.

“With the increased accountabilities of the governing body across multiple operational areas arising from the reforms, we are committed to helping our members and the wider aged services industry build their understanding of the reform agenda and their governance capacity,” says Amanda.

“We’ve developed a framework that describes good governance in aged care across the three governance domains – corporate governance, operational governance and clinical governance – as well as tools and templates for providers to use.”

Resources for ACCPA members include:

- ACCPA Governance Framework
- Governance Reforms Implementation Guide

- Key Personnel Check and Declaration
- Key Personnel Register
- Quality Care Advisory Committee Terms of Reference sample
- Consumer Advisory Committee Terms of Reference sample
- Aged Care Governance Manual
- Towards Good Governance Workplan
- Skills assessment
- Skills matrix.

ACCPA members who require more individualised support can contact our free Member Advisory Service for answers to all questions, while our Consultancy Service can provide bespoke training and mentoring to governing bodies on their role, responsibilities of members, implementation of the reforms, risk management, and more.

In addition, ACCPA’s two quality related systems offer policies, processes, best practice guides and assessments to support governance practice.

The ACCPA Governance Portal is offered as an annual subscription with pricing based on the number of anticipated users. ACCPA members receive a 20 per cent discount with a further discount available for rural or remote providers and users of other ACCPA subscription services.

Contact quality@accpa.asn.au for more information or to arrange an obligation-free demonstration.

Linda Baraciolli, Aged Care Today Editor and Communications Advisor, Aged & Community Care Providers Association
www.accpa.asn.au

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Giving in-home aged care providers a helping hand

ACCPA establishes new Support at Home Advisory Service

With preparations for the Support at Home initiative underway, Aged & Community Care Providers Association (ACCPA) has recognised the need to establish an advisory service to Support at Home service providers.

Support at Home is the new aged care program to be implemented 1 July 2025, to provide in-home and community care services for older Australians.

Merging several existing programs into one, Support at Home will replace the Home Care Packages (HCP) Program, the Commonwealth Home Support Programme (CHSP), Short Term Restorative Care (STRC) Programme, and residential respite programs.

The Support at Home initiative is one way the Australian Government is actioning recommendations from the Royal Commission into Aged Care Quality and Safety final report, to improve care delivered to older Australians requiring support services to stay at home.

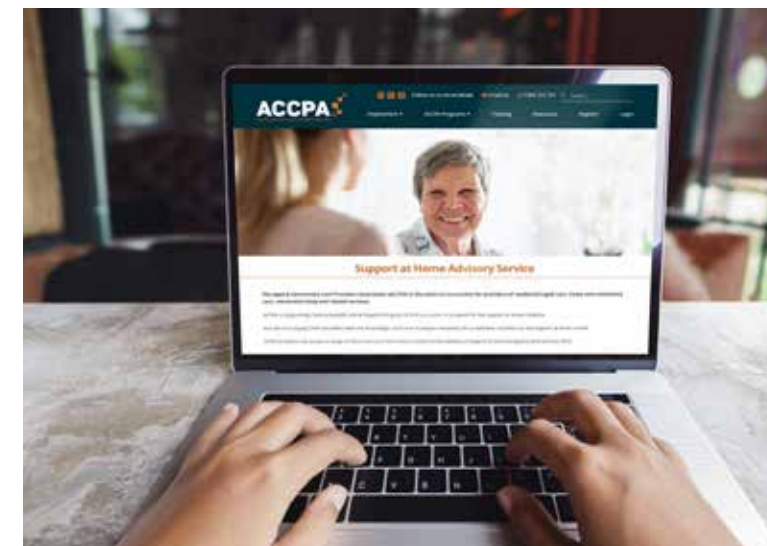
What we know, is with yet another reform, Support at Home service providers will benefit from a helping hand to navigate the changes.

ACCPA is dedicated to supporting the sector by delivering a range of practical services as we work alongside providers to help them understand exactly what the new Support at Home program means, and what they will need to do to prepare their business.

Our new online Support at Home Advisory Service, which sits on our Aged Care Workforce Hub website, is designed to equip providers with the knowledge, tools and strategies necessary for a seamless transition to the new model.

We understand that each Support at Home service provider has unique strengths, challenges and operational contexts, so we've ensured the Support at Home Advisory Service helps you create tailored strategies to maximise your ability to work through the changes.

User-friendly and easy to navigate, the Support at Home Advisory Service acts as a compass, to guide Support at Home service providers through these complexities by offering clear explanations, step-by-step guidance and strategies for effective implementation.



Our Support at Home Advisory Service offerings include:

- advice and support on service delivery, reporting requirements, provider manual interpretation, current reforms and training products
- advice on funding opportunities and business transition
- a resource library
- advice on ACCPA member services
- Community of Practice (CoP) for providers, offering networking opportunities and general discussion
- ACCPA Sector Support & Development support and consultation.

The tools available include a series of webinars designed to respond to top-of-mind questions about the new program, with subject matter experts providing a reform update followed by providers discussing what they are doing to get the transition right.

The Support at Home Resource Library offers downloadable guides, sector updates and the latest information for providers and their clients.

Providers can access essential information and tools efficiently, particularly in areas of compliance and quality service provision.

The Support at Home Advisory Service doesn't only address the current changes; it equips providers with a forward-thinking mindset.

Providers can also use it to help them gain skills to adapt to future changes and continue delivering high-quality services in a dynamic person-centred aged care landscape.

**Alexandra Harrison, Information Coordinator,
Aged & Community Care Providers Association**
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1. Beeckman D et al (2020) Best practice recommendations for holistic strategies to promote and maintain skin integrity. Wounds International. Available online at www.woundsinternational.com

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New training for retirement living managers

ACCPA's Retirement Living & Seniors Housing Program fills a niche

The roll out of aged care reform is bringing changes to care options and increasing complexity as older people explore home care package options and access additional services to supplement their independent living arrangements.

Older Australians are also becoming more discerning regarding options for retirement living and seniors housing, with particular expectations around lifestyle and recreation, technology supports, as well as wellness offerings.

This new reality, along with the predicted increase in dementia and complexity of some chronic health conditions, is creating challenges for management across aged care.

Operational managers need to be knowledgeable, adaptable and resourceful, and also have the ability to effectively communicate with residents and families, to maintain a harmonious living environment and meet expectations of quality care.

While in the past there has been a focus on managers of residential care, the shift in preference and demographics means that managers of retirement living and seniors housing are being called on in new ways, and can benefit from specialised support.

In response to demand, Aged & Community Care Providers Association (ACCPA) developed the Retirement Living & Seniors Housing Program – a series of modules exclusive to leaders, managers and front-facing employees employed in the retirement living and seniors housing sector.

The modules can be undertaken in any order and the program provides an opportunity for networking and sharing of key issues, concerns and questions.

Questions to ACCPA industry specialists can be submitted ahead of each workshop delivery, which allows the opportunity for creating individualised content.

The program consists of three modules, each one with three workshops. Content is delivered by subject experts, including Bruce Williams, Dianne Herr, Dementia Australia and 4Links and will run at separate times throughout 2024.

Participants who complete all three modules in the Retirement Living & Seniors Housing Program will receive 22 Continuous Professional Development Points, which reflect both an investment in self and your commitment as leaders and managers.

Essential Tools of Management (Module 1)

The three workshops in Module 1 aim to:

- explore the practical models of management that align daily priorities and actions to strategic goals, while maintaining and growing an effective team and learning culture
- unpack the strategic actions and daily practice to maintain motivation, to ease workloads and how the application of sound planning and execution releases time for personal wellbeing
- inform operational managers of the advantages in applying an asset management approach (this one is delivered by CEO Bruce Tustin, from 4 Links who has 30 years' experience in wealth technology sector).

Feedback from Module 1 suggests it delivered immediate benefits, with Administration Officer from SwanCare, Sarah Wentworth, saying, "Thank you for a great session. I have already printed off the material and book list. I utilised what I gained from attending yesterday's session during a challenging conversation yesterday at work."

While Module 1 has concluded, a second offering is available via Expression of Interest and is planned for April-June 2024.

Building Resilience and Understanding Others (Module 2)

Module 2 commences 1 February 2024 and covers the following workshops:

- ‘The Empathy Advantage: Self Awareness and Social Skills’ (1 February 2024) workshop aims to teach people how to understand and effectively manage emotional states, both our own and other people”, in order to work better with others, manage stress, make intentional decisions and take consistent meaningful action.
- ‘Understanding Dementia’ (13 March 2024) will be delivered by Dementia Australia, to provide an overview of dementia, including signs and symptoms and an understanding of how dementia affects the brain and behaviour.
- ‘Psychological Safety and Self Care’ (23 April 2024) will outline the key principles of a positive workplace culture, and why it is important that organisations and those that manage others provide a psychologically safe workplace culture. Participants will gain insights into how to support staff needs, values and strengths, and the array of benefits for staff and the workplace

Service Delivery for Positive Outcomes (Module 3)

Module 3 commences 5 June 2024 and covers the following workshops:

- ‘Service Excellence and Customer Experience’ (5 June 2024) which unpacks the difference between customer experience and customer service, to help participants communicate in ways that improve customer outcomes, engagement and satisfaction, deepening trust and promoting loyalty.
- ‘Complaints Investigation’ (16 July 2024) is delivered by Diane Herr and introduces a solution-focused approach to complaints and the key elements that enable complaints to be resolved.
- ‘Managing Conflicts & Disputes’ (29 August 2024) is the final workshop in the current training program, which explores conflict dynamics and conflict conversations, equipping managers with a deeper understanding of the best strategy to apply to work confidently through appropriate steps to resolution.

Tegan Roberts, Manager – Learning & Professional Development – Services & Sector Capacity, Aged & Community Care Providers Association www.accpa.asn.au/professional-development



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Supporting all leaders, by offering choice
New and improved leadership programs for the aged care sector in 2024

Humans are unique and complex, with different personality variances, influenced by individual socialisation and a vast array of life experiences. As a leader, understanding others is the key to building a productive and harmonious team.

Aged care leaders carry the responsibility to build the capacity of their teams, drive key deliverables to ensure that organisations are profitable while meeting compliance and legislative requirements, and most importantly delivering on the service promise of quality and safe care.

Seasoned leaders may recount their leadership journey as fraught with insecurity and being often overwhelmed with the investment required to transform teams, cultures, and service provision. This is why leadership training is so important.

Leadership requires a growth mindset, and a firm commitment to lifelong learning in the pursuit of building healthy relationships with others, while also acknowledging the need to be immersed in a supportive network of peers.

So, where do you start your learning journey to fuel motivation for your career as an aged care leader?

In 2024, Aged & Community Care Providers Association (ACCPA) is offering a range of choice, to meet the needs of leaders, at all stages of their experience, growth journey and career aspiration.

Foundational Leaders Program

New in 2024, the Foundational Leaders Program is an ideal introductory program for leaders who are beginning their journey or who may not have previously engaged in self-directed learning or formal leadership training.

Consisting of six live online workshops delivered over an 18-week period, participants are introduced to the essential skills for effective operational management in a nurturing learning environment building strong networks that sustain them post program.

Individual coaching sessions are available to manage existing challenges or build upon an identified area for improvement, as indicated by Care Industry Leadership Capability Assessment Tool (CILCA360) assessment undertaken prior to commencement of the program.

The program is delivered by Cheryl Edwards, ACCPA Head of Member Support & Advisory, who is a Registered Nurse with over 36 years of experience in residential aged care management in smaller, larger and not-for-profit providers, in both corporate and operational roles and in leadership development.

Cheryl holds qualifications in management, work, health and safety, and is a workplace trainer and assessor.

Leadership Accelerator Program

The hugely popular Leadership Accelerator Program consistently rates 4.5 to 5 stars from participants across all levels of leadership.

Ideal for busy people, it delivers a fast-track, practical and accessible learning experience, underpinned by leadership theories.

The program is a ‘pick and pack’ model which offers maximum flexibility, with six different modules delivered over a three-month period.

Participants can choose to select the whole program, with or without the CILCA360 tool or select individual modules to support ‘just in time’ performance development.

The Leadership Accelerator Program can be purchased and run as an exclusive program for providers who have more than 18 leaders and provides a confidential setting to build team and organisational capability.

Smaller providers may like to consider teaming up with another provider or gather teams located in another state or territory, to reach the required numbers for an exclusive program.



Network Building



Leadership Training



Specific Resources



PD Workshops & Masterclasses



Mentoring & Coaching

The program is delivered by leadership guru, Bruce Williams, who loves to help people understand how other people think so they can “work together with less stress and more yes”.

Bruce has delivered adult education, coaching and leadership programs for over four decades and is an accomplished speaker and facilitator with an engaging and humorous presentation style.

Bruce is Judging Chair for the Sunshine Coast Business Awards, part-time academic with the University of the Sunshine Coast, and is the founder and spokesperson of the USC Starfish Program, while also mentoring young entrepreneurs in The DeLorean Project and Generation Innovation.

Next Level Up Program

Launching in 2024, Next Level Up is tailored for aspiring leaders who are committed to advancing their leadership journey.

With insights contributed by seasoned executive leaders from various sectors, along with networking opportunities and exclusive professional development, Next Level Up offers a pathway to conquering your next leadership challenge.





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We’re delighted to have supported hundreds of aged care leaders over the past year, people like Anne Butler, Meals Service and Marwal Centre Manager from BASSCare.

“I am thoroughly enjoying the leadership sessions and getting so much out of it. Bruce is a wonderful presenter with so much knowledge and wisdom to impart,” said Anne of her experience during the Leadership Accelerator Program.

Whether you’re after a gentle supportive guide, an accelerated experience to deep dive into the core practices of leadership or you’re ready for the next level up, ACCPA’s leadership programs will provide the tools and insights to grow and sustain yourself and your team as leaders of the future.

**Tegan Roberts, Manager
Learning & Professional Development,
Aged & Community Care Providers Association
www.accpa.asn.au/professional-development**

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Building capacity in aged care nursing

The important role played by nurse educators

Residential aged care is increasingly supporting the most frail and vulnerable older people in our communities – many of whom have complex care needs and co-morbidities. We now have the mandate for a Registered Nurse on-site 24/7 and there are more people ageing at home who require the assistance of aged care nurses. It is important that the sector continues to build capacity to meet the increased demand.

This is why the Aged & Community Care Providers Association (ACCPA) developed our Nursing Transition to Practice Program, to provide meaningful, practical training and education to nurses interested in a career in aged care.

It’s about investing in the future of the aged services industry, especially for Graduate Registered Nurses and Graduate Enrolled Nurses within their first year of practice, or Registered Nurses who have recently moved to aged and community care.

Fundamental to our training are nurse educators. They play a vital role in teaching, mentoring and inspiring the nurse participants to build the foundations for safe, quality aged and community care.

All ACCPA’s nurse educators are Registered Nurses employed by ACCPA to teach and provide pastoral support to the nurse participants.

Our experienced team of seven nurse educators are located across Australia and bring more than 100 years of collective experience in the health and aged care sectors.

Each one shares a deep passion for the wellbeing of older Australians, a strong desire to make a positive impact on the sector, and a demonstrated commitment to a career in aged and community care.

Bringing a diverse range of specialist knowledge and skills to the program, our nurse educators are experts in their field and in the content they deliver.

As opportunities for open communication outside of the formal learning environment are proven to significantly improve educational outcomes, our nurse educators conduct professional development sessions with nurse participants on a weekly basis.

The participants can also get involved in clinical conversations and other engaging interactions throughout the length of the program.

Our experienced nurse educators are also responsible for participant and organisation engagement to assist the nurse participants to meet their learning goals.

Providing pastoral support keeps everyone connected and actively engaged in the program, which is particularly important in an online learning environment.

Our programs differ from other programs in that our focus is on practical issues including professional development, clinical practice and leadership responsibilities. Aboriginal and Torres Strait Islander culture-specific topics are also covered.

ACCPA’s Nursing Program Lead, Bronwyn Doyle, has a long and varied career in nursing and midwifery and has held senior and executive roles within Queensland Health for over 25 years as well as 13 years working in the university sector.

Bronwyn says, “The nurse participants have direct access to our nurse educators and are continuously supported throughout the program. Most importantly, they take the time to mentor the nurse participants.

“Our nurse educators are also directly involved in their communities,

participating in meaningful opportunities to support aged and community care organisations. Regular site visits to participating organisations and attending events enables real connections to be made.”

ACCPA’s nurse educators are available to support the nurse, their mentor and the partnering organisation throughout all our nursing programs. We’ve found this is instrumental in the successful delivery of our programs and critical for long-term staff retention.

Program partner Ozcare, which have successfully helped 89 nurse graduates to date, say the online learning approach and mentoring have been hugely beneficial to their operations.

“We absolutely love the ACCPA Nursing Transition to Practice Program here in Toowoomba,” said Tanya McCulkin, Facility Manager at Ozcare Toowoomba.

“It has provided a pathway for our Graduate Nurses for the past few years that they wouldn’t ordinarily have access to, and a practical and supportive learning environment to put all that knowledge into real-time practice in the workplace under the guidance and support of trainers and mentors.

“I don’t know of many other workplaces or professions that provide this level of development for newly graduated employees. It is something we are really proud of.”

ACCPA is proud to be an innovator in providing support to new graduates so they can attain skills and provide complex, quality care to older Australians.

We are keen to help build capacity in the sector, and invite providers to find out more about what we offer.

**Alexandra Harrison,
Information Coordinator,
Aged & Community Care
Providers Association
accpa.asn.au/nursing**



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Aged Care is the Place to Be

A new aged care employment pathway

The Aged & Community Care Providers Association (ACCPA) 'Aged Care is the Place to Be' project will be delivered throughout wider Queensland following a successful bid to the Queensland Government's Growing Workforce Participation Fund.

This employment pathway program aims to attract and induct currently underrepresented cohorts in the aged care workforce, including those aged 15 to 24 years and people identifying as Aboriginal or Torres Strait Islander.

The project will support the aged care sector's workforce by assisting aged care providers in wider Queensland (in eligible locations) to attract young individuals into entry-level jobs and ensure better support for new workers.

A key element of the program is the development of industry-endorsed micro credentials designed to address skills gaps across the aged care sector.

ACCPA will co-design and deliver a suite of accredited and non-accredited learning and development training products to prepare and upskill new entrant aged care workers in service provider environments.

Candidates will be initially invited to an industry-specific innovative induction short course to highlight the benefits and realities of working in aged care and help people self-assess whether they may be the 'right fit' for the role.

Prospective employees will be able to gain a general foundational awareness of the position, and the aged care sector more broadly, to support them to become 'interview ready' and increase their employability.

This industry-specific approach to induct those who have experienced a period of unemployment, will give each participant confidence while they engage and navigate through their potential role with an aged and community care employer.

Our aim is to help them understand the behavioural attributes and role expectations of aged care workers as well as the Aged Care Quality Standards and legislation that governs the sector.

While providing individuals with basic skill levels is required to deliver quality aged care services, it's equally important to dispel fears or concerns people may have about being a care worker, and to help prospective workers understand what qualities may make them the 'right fit' for the role.

Participants will attain a digital badge for employers to recognise that will certify their attendance in industry induction.

By inducting participants into the aged care workplace environment, organisations will have an increased confidence to employ people by addressing their concerns of taking on employees with no previous relevant work experience or qualifications.

Through the program, employers will also receive free access to this induction for their at-risk employees from target cohorts.

In addition, learning and development training options will be available for employers to enhance the skills of their aged care workforce and ensure better support for new workers in the sector.

The Aged Care is the Place to Be program will foster beneficial partnerships with industry to build longevity and sustainability in the workforce and facilitate industry-led solutions to employment shortages and retention challenges.

ACCPA looks forward to rolling out this 12 month project in early 2024, and we encourage interested aged care providers located in Queensland to reach out to us for more information.

**Alexandra Harrison, Information Coordinator,
Aged & Community Care Providers Association
employment.agedservicesworkforce.com.au**

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A WA game-changer set to go national

Offering the latest aged care vacancy information, for better aged care placements

According to the World Health Organisation, by 2058 people over the age of 80 will triple in Australia. Additionally, the Australian Institute of Health and Welfare states that of the patients aged 65 and over who present to the emergency department, 52 percent are subsequently admitted to hospital compared to 28 percent for all patients.

With the current and future need to emphasise efficient patient flow and discharge planning in the hospital system, a new innovation aims to alleviate the stressors that attribute to ramping and bed block issues in these acute hospital environments.

Known as 'Vacant Beds', this innovative solution was designed in collaboration with WA Health and the Aged & Community Care Providers Association (ACCPA), and is currently transforming the way aged care placements are made from public hospital sites in Western Australia.

WA Health Executive Director Kayla Calladine said, "The WA Department of Health's partnership with the aged care sector and ACCPA has supported an industry-led solution that is making a real difference to our hospitals and health system.

"Staff in our hospitals are no longer spending hours or days calling aged care homes searching for vacancies – the information on bed vacancies is now at their fingertips.

"This means patients can be supported with timely and accurate information about discharge options, improving choice and control for older patients and their families."

Vacant Beds addresses the often chaotic and fragmented process

of securing a suitable aged care placement for older patients and future aged care residents.

For discharge nurses and social workers, the task can be akin to searching for a needle in a haystack, involving countless cold calls, outdated spreadsheets, and a myriad of additional variables to consider – resulting in delayed discharges and frustrated healthcare providers.

Vacant Beds is changing all of that. This initiative is a central portal that brings together aged care providers, offering an overview of bed availability. The key goal is to provide accurate and reliable information, thereby simplifying the process of finding the most appropriate aged care placement.

ACCPA State Manager WA Liz Behjat said, "ACCPA are delighted to be an integral part of the Vacant Beds project. The elegance and the simplicity of the program make it incredibly user friendly.

"Our ACCPA members already have a massive burden of reporting but Vacant Beds is so simple and delivers outstanding results. It's a win-win for everyone involved."

Southern Cross Care (WA) is already using the platform. Their Chief Executive Officer Clare Grieveson said, "Vacant Beds provides a simple way for consumers and social workers to connect with providers who have places available.

"It is incredibly important that consumers are provided with choice when they are considering their aged care needs and options. Vacant Beds supports providing consumers with the right information for them to make an informed choice."

So, how does Vacant Beds work?

1. **Upload.** Aged care providers can conveniently upload their vacancy

information via a pre-designed spreadsheet template into the Vacant Beds portal. This process is designed to be quick and hassle-free, saving time and effort.

2. **Search.** Hospital staff can then log in to the portal. They input their desired location, set a target radius, and apply any relevant filters, such as specific room and care requirements. This dynamic search function ensures that the results are tailored to the unique needs of each patient.

3. **Select.** Hospital staff are presented with a user-friendly and print-friendly list of the most relevant room vacancies based on their criteria. This means no more sifting through endless options that don't quite fit the bill. It's about finding the right match in a matter of seconds.

4. **Contact.** Once the options are made visible, the hospital staff or patient's caregivers can make direct contact with the aged care provider using the details provided to Vacant Beds. This streamlined communication process minimises delays and ensures that the transition from hospital to aged care is as seamless as possible.

The collaborative effort is transforming the way hospital staff and aged care providers connect to serve the best interests of older Australians – translating to increased occupancy rates for providers and improved outcomes for the residents and older patients who deserve the best care.

This innovative program is already making waves in Western Australia, with 90 per cent of aged care providers registered with the Vacant Beds portal – and the long term aim is to roll it out nationally.

Allie Adamson, Product Owner, Vacant Beds
www.vacantbeds.au



Recognising the outstanding individuals, teams and organisations who make the retirement living, aged and community care sectors shine.

Opa!

Providing culturally appropriate care Greek-style

“Living here is marvellous,” says 83-year-old John Stournaras, when asked about life at Sydney’s Greek Orthodox Community Home for the Aged, and it’s all the information you need, to know when something is good.

“I especially like the Greek food, the outings and the women,” he says with a grin, referring to his carers, the women who dedicate their lives to supporting older Greeks in Sydney.

Established in 1992 in Sydney’s Earlwood, the not-for-profit aged care home supports Greek migrants as they age, providing Greek-specific culturally appropriate care.

About 70 per cent of staff members are Greek-speaking, while the remainder have picked up some of the language and an understanding of the culture.

“It’s very important to have Greek-speaking people on staff because for our 48 residents, English is their second language. The language helps build a strong connection between residents and staff,” says Facility Manager Katerina Kouris.

“What we endeavour to do, is help our residents maintain their lifestyle, which is deeply rooted in Greek culture, just as though they were still living in their own homes.

“Through our lifestyle program, activities, religious services, cuisine and the way we communicate, right through to the pictures on the walls, our focus is on engaging with our residents through Greek culture.

“We make sure we’re on the right track with monthly focus group meetings with residents, and three-monthly catch ups with family members.”

Lifestyle Team Leader Evergenia ‘Virginia’ Savva is herself a new Australian, having lived here for 10 years, and is well placed to understand Greek culture, traditions and spirituality.

“We run outings twice a week with the residents, which are often things they said they would like to do or ideas that I’ve presented that they would like to explore,” says Virginia.

“We go out for coffee, picnics, lunch, the beach, shopping, or other things. Sometimes we’ll sit in a park and people watch, and enjoy the fresh air and sunshine.

“At the Home, our lifestyle program includes Zumba, Chair Yoga for residents with limited mobility, Friday cooking days, we celebrate significant religious festive days, we have live classical music with Manjia playing the piano and violin, singing and dancing, and we always invite feedback and suggestions on what to include next.”

Recently the aged care home bought a vintage ice cream cart from Marketplace, which they restored with the help of the residents and named ‘Ra Ta Ta’ in memory of a beloved resident. Filled with delicious treats and of course ice cream, it is now a permanent feature.

“For us, with the outings, it’s about minimising risk as much as possible, while allowing our residents the freedom and choice to continue experiencing the things they most enjoy,” says Quality Compliance & Risk Manager Diana Rizos.

“We conduct a thorough risk assessment for every outing and make sure it’s as safe as possible, we make sure we have enough supervision and that the venues we visit are accessible. We need to balance the dignity of risk because outings are very important to our residents.

“We also ensure our higher needs residents such as those living with dementia in our Special Care Unit are integrated into our activities as much as possible.

“For those residents who need a more one-to-one approach, they request personalised outings and assistance which we provide.”

Katerina says there is a great sense of pride in the Home, among staff and residents.

“We’re proud to deliver care and lifestyle services that are progressive, broad-minded and free-thinking, always modelling an authenticity and reliability based on trust, honesty and consistency for our seniors living out their twilight years, in a person-centred and culturally appropriate way,” she said.

“We aim to spread a genuine love and affection for every resident, and we have an open door policy, they just drop in all the time to say hello, which speaks to how much they feel at home with us.”

The Greek Orthodox Community Home for the Aged has been nominated as part of ACCPA’s ‘You are ACE!’ campaign, which recognises excellence across residential aged care, home and community care, retirement living and seniors’ housing.

Linda Baracioli, *Aged Care Today* Editor and Communications Advisor, Aged & Community Care Providers Association
www.goc.com.au/index.php/en/hostel; www.accpa.asn.au/ace

John Stournaras behind the restored Ra Ta Ta Gelato Cart.



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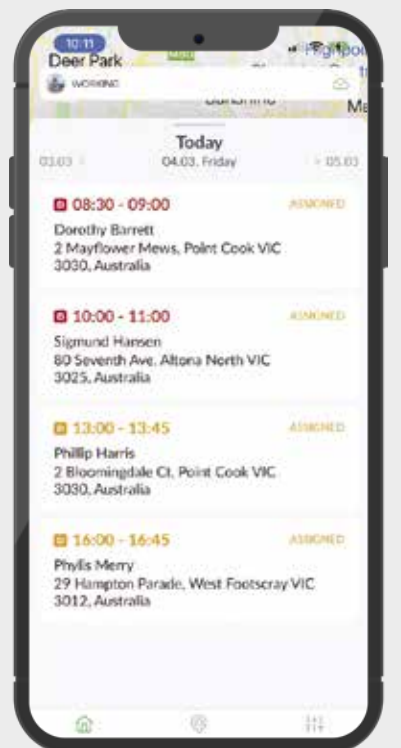
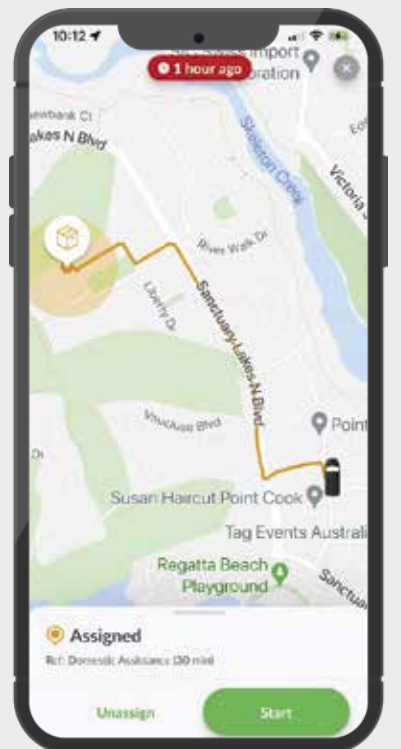
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The value of dementia- friendly communities

It's up to all of us

Imagine being treated differently just because you have been diagnosed with a disease like cancer or heart disease.

This is often the reality for people living with dementia, their families and carers and can have significant consequences on their lives.

Despite increasing awareness and dementia being the second leading cause of death in Australia, results of a recent Ipsos Dementia Australia Report show that almost a third of Australians find people living with dementia frightening.

This fear leads to stigma and discrimination which can have a real and distressing impact on people living with dementia, their families and carers.

This is devastating. Australian and international studies show that stigma and discrimination associated with a dementia diagnosis can discourage people from seeking health care, and can also reduce social engagement with family, friends and the broader community. This can have serious consequences for the physical, cognitive and psychosocial health of the person living with dementia.

Dementia is a largely invisible disease and what we can't see, we may not understand. What we don't understand we are often afraid of and then avoid.

Dementia Australia research from 2020 shows 81 per cent of those with a loved one living with dementia felt that people in shops, cafes and restaurants treated people with dementia differently.

These results are alarming. We are talking about our parents, grandparents, friends and neighbours.

As well, the Ipsos survey shows the belief that dementia is a normal part of ageing has risen from 27 per cent in 2012 to 34 per cent in 2023 and 61 per cent of people would rather not think about dementia – up from 46 per cent in 2012.

It's time to change this narrative. With more than 400,000 Australians living with dementia and two in three people with dementia thought to be living in the community, we're encouraging everyone to act now to make our communities more dementia-friendly. That's why the theme for this year's Dementia Action Week (18-25 September) was 'Act Now for a Dementia-Friendly Future'.

The way we respond, communicate and interact with a person living with dementia has an enormous impact on their day-to-day life, and we can all do more to make sure people living with dementia remain included and accepted in their own community.

Inspiring our communities to become more dementia-friendly – where people living with dementia are supported to continue to live their lives in the communities they know and love, and where they are supported to continue to contribute to those communities – can be so simple yet empowering for all involved.

Some simple actions include:

- Ask people living with dementia, their families and care givers what they need to assist them to live well in their communities.
- Learn more about dementia and how to support people living with dementia in your community at dementia.org.au/dementia-action-week.

Act Now for a
**Dementia-
Friendly future**



**Dementia
Action Week**

18-24 September 2023

- Access our dementia-friendly toolkit and sign our pledge to commit to making your business or organisation more dementia-friendly.

While dementia education for the aged care workforce is essential, it's also important for the wider community to learn more about dementia and how to become more dementia-friendly.

Communities that are dementia-friendly are better communities for all of us. They have less fear and a greater understanding of dementia, less stigma and discrimination and more support for people living with dementia to live well in their community for longer.

Each dementia-friendly community is unique but may include inclusive groups, such as social, sporting, recreational or community groups, volunteering and paid employment opportunities for people living with dementia, or community events and activities such as community sessions where community members can sign up as a 'Dementia Friend'.

It's important that the communities in which we live are dementia-friendly so that people living with dementia have access to the services, supports, activities and spaces to which every Australian is entitled.

It's up to all of us to bring about this change. By everyone better understanding dementia, we can eliminate discrimination and its impacts.

**Maree McCabe AM, CEO,
Dementia Australia**
[www.dementia.org.au/
DementiaActionWeek](http://www.dementia.org.au/DementiaActionWeek)



Community health and wellness services for ageing at home

Southern Cross Care's centres making a difference

In her speech at the national conference of the Aged & Community Care Providers Association, Minister for Aged Care, Anika Wells, stated that population numbers in all age groups are increasing, with most hoping to age at home.

To make this a reality, community health and wellness services need to expand, to be able to provide quality services to all, in order to keep up the health and fitness levels required for independent living.

The purpose of community health for older adults is to provide services that allow people to live in their homes longer, supported by allied health services, such as physiotherapy, exercise physiology, occupational therapy, dietetics, podiatry and social work, among others.

Community health services aim to reach and support the individuals with the greatest risk of poor health outcomes and the greatest economic and social need.

The Australian Government has created many financial packages to support ageing at home, including the provision of allied health within the Commonwealth

Home Support service list or paid for by the home care package.

The purpose of these services is to provide evidence-based, person-centred, best-practice care, delivered with a case-to-case model that guides individual clients towards the best health pathways.

A great example of a positive health modifying program is Southern Cross Care (SA, NT & VIC) Inc. (SCC) community-facing, health and wellness services that provide prevention, reablement and restorative care for older Australians.

SCC Health & Wellness incorporates evidence-based and best-practice approaches into a service model that has significant benefits for its clients and their caregivers.

Across SA and NT, SCC has six Health & Wellness Centres that offer both on- and off-site services, five Respite Cottages, a social engagement program 'Out and About', a Telehealth program for South Australia, as well as a growing Community Transition Care Program and a wait-listed Short-Term Restorative Care program.

Programs and services offer a wide front door for entry or referral, including self-referral, My Aged Care or through

the individual's GP, and support multiple funding streams to minimise the out-of-pocket cost to the client.

No matter how clients are referred or through which funding stream, SCC uses comprehensive assessment and multidisciplinary case conferencing to guide allied health engagement, and takes a client-centred approach to service prescription.

While SCC Health & Wellness boast nine different allied health disciplines on their staff, a primary focus is to engage people into exercise pathways. Out of a total of more than 1,250 one-to-one allied health services per month, just under 40 per cent of these are through exercise physiology.

Across South Australia and the Northern Territory, the service has been well received in the community with over 3,000 clients at an average age 79.6 years, over 4,500 individual group exercise presentations per month and 6,000 respite hours delivered.

Dr Tim Henwood, SCC's Group Manager Research and Development, presented data from their extremely successful Short Term Restorative Care (STRC) program at the Victorian HealthCare Week in October.

Their model is clinician-led, and focused on restoration through an intensive delivery of allied health and therapy.

Across the program, clients receive an average of five services per week, which during the second half of the program are predominantly progressive strength, conditioning and balance exercise.

Sessions have a strong focus on health literacy, chronic disease management, discharge planning, falls prevention and functional independence.

Program evaluation of 157 participants (average age 80.2 years) between admission and discharge showed a 45 per cent improvement in function (measured by the Short Physical Performance Battery) accompanied by reduced depression, anxiety and frailty prevalence.

Dr Henwood is a strong advocate for active healthy ageing in the community and says "exercise is the only answer to prolonging independence". There is an abundance of research evidence to support this statement.

"For ongoing health and wellbeing among community-dwelling older Australians, we need an equation of improved health literacy for clients, their family and caregivers; person-centred, individualised allied health; financial support for clients to initially engage; as well a range of activities to support adherence," he says.

"Health and wellness services that include allied health and exercise therapy offer a proven countermeasure to health issues often seen in home care clients, including frailty and loneliness.

"A multidisciplinary care plan offers prescribed and meaningful physical, social and mental health engagement.

"Multidisciplinary allied health teams' expertise must be part of all care planning if aged care providers truly want to prevent the health decline, or reable clients towards independence."

Dr Henwood encourages community care and home care providers to familiarise themselves with the existing funding pathways for allied health,



Dr Tim Henwood says allied health programs are proven to support health and wellbeing in older Australians.

which can provide significant health improvement independent of age, disease or disability, as verified by their STRC program evidence.

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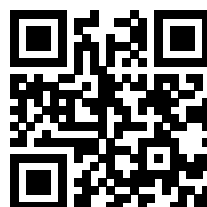
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How to monitor weight loss in aged care

Important tips for aged care providers

Commonwealth-subsidised residential aged care homes across Australia are governed by the National Aged Care Mandatory Quality Indicator (QI) Program where homes must measure and report on five quality indicators, one of these is unplanned weight loss.

For older people, having regular weigh-ins is a fundamental part of their healthcare journey. Weight loss can be the first, and sometimes the only indicator of poor health.

The cause of unintentional weight loss and malnutrition

Unintentional weight loss may stem from a number of factors:

- **Anorexia** – as we age, the body experiences sensory changes which can impair appetite. Reduced physical activity, disease, pain and an overall physiological reduction in energy needs can also reduce one's appetite.
- **Physical illness** – residents may experience nutrition impact symptoms (such as nausea, vomiting, diarrhoea, fatigue or reflux) which can impact their oral intake, while illnesses and diseases can carry a higher demand for nutrients, such as cancer, cardiac or respiratory failure or poor healing wounds.
- **Cognitive illness** – dementia and cognitive decline is a determinant to oral intake as residents may be unable to identify hunger or fullness cues, mealtimes and how to feed themselves. They may also be active wanderers who find it difficult to sit down and eat at mealtimes.
- **Dependence on others** – a physical or cognitive decline in health can

increase the dependence on others to help with feeding.

- **Poor oral intake due to dislike** – although menus at residential aged care homes are diverse, it is impossible to please all individual tastes and preferences at each meal. Food refusal due to dislike of the food is common, which in turn prevents residents from meeting their daily nutrition needs.
- **Swallowing and chewing impairments** – a lack of dentition, ill-fitting dentures, refusal to wear dentures and impaired swallowing (dysphagia) may require a resident to transition to a modified texture diet or fluids.

Screening for unintentional weight loss and malnutrition

If a resident is no longer being weighed, there are other ways we can assess their nutrition status:

- **Food and Fluid Charting** – If a resident has had a decrease in their daily food intake, is refusing food, not attending the dining room for meals, complaining of poor appetite or unable to complete their meal, mark these as red flags and report them to your dietitian.
- **Clothing** – If you notice a loose watch band or ring, having to tighten a notch on a belt, a baggy jumper or pants that won't stay up, these are all signs of weight loss and should be reported to the dietitian.
- **Calf Circumference** – Measuring calf circumference is a good way to assess muscle mass which can be quick to deplete in malnourished residents. A circumference less than 35cm for males and 34cm for females is indicative of muscle loss and should be reported.

■ **Functionality** – A decline in residents' mobility, pace, strength, independence (unable to feed or shower themselves anymore) and alertness can be signs of muscle loss. You may want to ask your physiotherapist or occupational therapist to conduct strength tests such as the chair-stand test, arm curl test or a hand grip strength test.

■ **Nutrition impact symptoms** – Identify any nutrition impact symptoms that may be impacting the resident's oral intake such as nausea, vomiting, reflux, diarrhoea, mouth sores, poor fitting dentures, poor appetite, fatigue and dry mouth.

How to improve malnutrition rates and prevent unintentional weight loss

Staff of aged care homes have a major role to play in combatting malnutrition – whether through ensuring routine weight recording and malnutrition screening is completed, preparing and providing nutrient rich foods and fluids, identifying non-weight weight loss indicators, or appropriately assisting residents with feeding.

An OSCAR Care Group Dietitian can assist with ongoing staff training about food fortification techniques, malnutrition screening and assessment, creating a positive mealtime environment and nutrition support to combat nutrition impact symptoms and poor appetites.

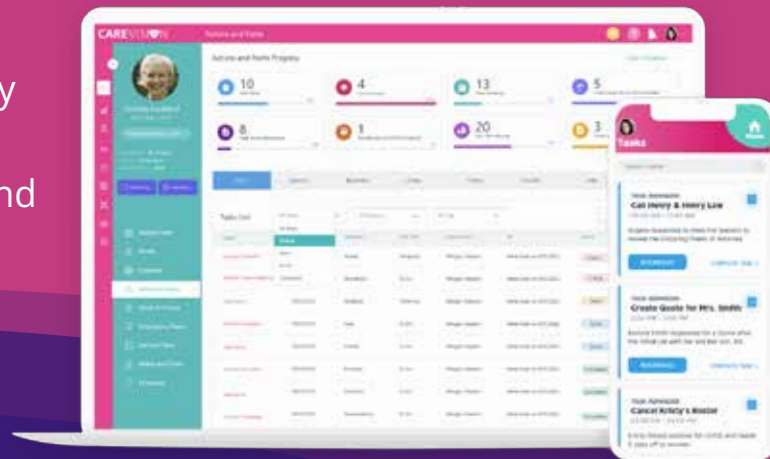
In addition, we undertake seasonal menu reviews to ensure the meals provided are not only delicious and inviting, but also meeting nutrition targets to minimise the risk of residents losing weight.

Dietetics Team, OSCAR Care Group
www.oscarcaregroup.com.au

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New program helps with oral health care

Smile Friendly training for
aged care workers

Daily management of a resident's oral health is an important part of Aged Care Quality Standard 3 – Personal and Clinical Care.

As a result, there is increasing pressure on residential aged care staff and managers to support better oral health for their residents, but where are the resources to assist them do this?

The Australian Dental Foundation visits hundreds of aged care homes and has witnessed the increasing expectations faced by staff. Foundation chairman Dr Greg Miller said it was caused by a combination of factors.

"Increasingly older Australians have their natural teeth, sometimes in combination with dentures. There is also a growing body of evidence that poor oral health contributes to poor general health and conditions such as heart disease, diabetes and arthritis. It can also lead to specific illness, such as aspiration pneumonia," he said.

"As people get older, their need for oral health care increases. Older people more commonly experience certain oral health diseases and related problems as they become less able to self-manage and self-report with age due to issues of cognitive impairment, physical frailty, functional dependence, and comorbidities.

"Good oral hygiene, early treatment and maintenance can help ensure they can enjoy all aspects of their life and age positively. It includes having functional teeth, an appropriately moist mouth and most importantly, not being in physical pain or discomfort from active oral disease or ill-fitting dentures."

The Foundation has developed a partnership program called Smile Friendly, which is being rolled out to residential aged care homes.

Staff are encouraged to complete a questionnaire, undertake training and ensure regular dental visits for their residents from the Foundation's clinicians.

The free program is being rolled out nationally and is a partnership between the Foundation and either stand-alone homes or multi-home operators that are asked to nominate a 'Smile Friendly Hero' for each site to assist in maintaining the commitment to oral health care.



Australian Dental Foundation dentist Dr Ramya with Allity Walkerville resident Joan.

"It's a brand new program to assist residential aged care providers. We've only just launched it but we are already receiving a number of inquiries. It's a very practical tool with training for staff, either in person or by video module," Dr Miller said.

"No one is expecting staff to be dentists but there are some simple ways they can help their residents to maintain their oral health. They can assist with brushing and identifying issues so there can be early intervention.

"It's also good to have an understanding of the interaction between certain medications and oral health. For example, Xerostomia – or dry mouth – is a side-effect of several medications, and a dry mouth increases the incidence of decay.

"Knowing about these things can help staff to manage oral care for particular residents."

The Foundation's Aged Care Dental Program supports the management and prevention of oral conditions for seniors in aged care homes and residential living complexes, where oral disease is often prevalent from limited access to a traditional dentist.

As a not-for-profit charity, the Foundation offers a total dental solution on a cost-recovery basis for residents, operating as a fully functional mobile dental team with portable dental equipment.

Afshan Rani is the Clinical Nurse Leader at Allity Walkerville where the Foundation visits regularly to treat residents. She says Smile Friendly is an initiative that is helping her staff to feel confident about managing residents' oral health needs.

"Confidence and knowledge are needed to manage oral health here at Allity. Having some simple tools at our disposal and then having the backup of the clinicians at the Australian Dental Foundation and their regular visits are of great value for us, our residents and their families," she said.

Aged care providers can find out more about the free Smile Friendly program by emailing sa@dentalfoundation.org.au.

Australian Dental Foundation
www.dentalfoundation.org.au

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The legacy of Polio in Australia

Supporting people ageing with Post-Polio Syndrome

The COVID-19 pandemic has been a stark reminder of how quickly diseases can move within and between countries. This was the case with Poliomyelitis ('Polio'), which was one of the most feared diseases in the world in the early 20th century.

Between the 1930s and 1960s, up to 40,000 Australians were formally diagnosed with Polio. However, it is thought that up to 200 times more people were infected during the same period. This has implications for aged care.

Australia is now home to some 73,000 Polio survivors, many of whom live with symptoms and chronic conditions attributable to their original infection.

Australia is also home to younger people who contracted Polio overseas and who, in the coming years, will need support for various chronic conditions related to their infection.

A recent report captures the findings from a workshop hosted by the Australian Association of Gerontology (AAG), Post Polio Victoria and Celebrate Ageing in late 2022.

Recognition at last: People ageing with Post-Polio Syndrome describes the challenges experienced by those ageing with Post-Polio Syndrome (PPS) – who were represented at the workshop – and recommends ways service providers could better support their needs.

PPS is a condition that affects Polio survivors decades after their infection. Its symptoms, which compound the chronic repercussions of the original infection, are typically experienced as muscle weakness and atrophy, chronic fatigue, pain and respiratory problems.

Those living with PPS are also more likely to experience increased sensitivity to cold, difficulties with swallowing and poor sleep. As such, PPS can have a significant impact on overall health and wellbeing, and the capacity for older adults with PPS to age well.

Despite the number of people ageing with PPS, and its significant long-term effects on their health and quality of life, health and aged care providers generally know little about it.

As a result, patients' symptoms and experiences are often poorly recognised and understood, often at a time when effective and appropriate health care and social support are most needed.

Polio survivors want health practitioners to listen, recognise PPS and offer an empathetic, sensible approach to the managing each person's symptoms, without misattributing them to 'normal ageing'.

A major concern for Polio survivors relates to much needed supports in community care.



Each discussion group at the post-Polio workshop included a person living with PPS.

Although PPS symptoms vary from person to person, the types of support they often need include equipment to assist with mobility and ventilation, and the modification of living environments to support independence at home.

However, accessing these supports is made more challenging due to age-related eligibility criteria. Under the NDIS, people have access to greater funded supports but only if they apply prior to turning 65.

Once a person is aged over 65 years then the only option is to apply for aged care funding via My Aged Care, and there is less provision for assistive technology and home modifications, often resulting in early entry to residential care.

As detailed in the report, Polio survivors also have specific messages for aged care providers. These include:

- Be aware that Polio is still around and that a large number of older Australians are ageing with PPS
- Remember that disability and ageing are different; disability often involves equipment and resources for adjustment that aged care often cannot provide
- Be as creative as possible in the design and delivery of services, and draw on different funding and support options
- Optimise telehealth and other virtual services, to promote access and inclusion
- Recognise that many Polio survivors experience post-traumatic stress disorder associated with the isolation during their childhood.

Above all, providers should recognise that Polio is not a textbook disease – the physical, social and financial impact of Polio is different for each person, and they are experts on their own needs.

Dr Amber Mills, AAG Policy and Research Manager,
Australian Association of Gerontology
www.aag.asn.au



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Life after stroke

Getting the best from rehabilitation

Stroke is one of Australia's leading causes of death and disability. More than 400,000 Australians of all ages are currently living with stroke, and by 2050 that number is projected to rise to 800,000.

People who have survived a stroke may face many challenges sensing, moving, thinking and communicating.

Most people who have had a stroke will live with some visible or invisible consequences, but research shows that the kind of care they receive can make all the difference.

Families, communities, support organisations and aged care providers all play an important role in supporting those who've experienced a stroke. Recovery can take a long time, and support needs to be ongoing.

At the Florey Institute, we've been working to improve outcomes for people with stroke for many decades.

Clot busting and clot retrieval treatments for people with acute stroke due to a clot are now 'usual care' and have made a huge difference to patient outcomes.

The important message to access these interventions is to get to hospital FAST. This acronym is coined from the symptoms of stroke – drooped face, difficulty raising arms and slurred speech, as well as it being time-critical to get medical attention.

We have also been testing different approaches to improving rehabilitation environments, services and interventions to help improve outcomes for people affected by stroke.

We know that while recovery can continue for months or even years after stroke, there is a period after stroke in which the brain seems to be most receptive to positive change. This appears to be in the first five to six weeks, and lessens over time.

This is not to say that positive changes are not possible later, but it does emphasise that what happens in the first few months after stroke is important. Below we outline just a few areas of research we've been exploring to improve outcomes for people with stroke.

The rehabilitation environment

Stroke rehabilitation environments are critical spaces for recovery but have received little attention. In fact, rather than encouraging stroke survivors to be active, many facilities inadvertently encourage them to stay in their rooms, often in bed and alone.

This isolation can have serious consequences at a time when the goal is to optimise engagement, activity, practice

of lost skills to optimise recovery. Instead, hospital environments should provide:

- a positive and stimulating environment
- communal spaces and destinations that encourage people to get up and be active
- access to and a view of the outdoors
- personal control over their environment and activity.

NOVELL Redesign

We've been working with stroke survivors, families, clinicians, architects, designers and researchers to rethink and redesign how rehabilitation environments and service models work to support the goal of rehabilitation, that is, better recovery for patients.

The NOVELL Redesign project has successfully generated a new model for redesigning rehabilitation spaces, that can extend to other healthcare environments. As an open, Living Lab, our goal is to influence government, policy makers and others to make positive change to these environments.

Based at the Florey Institute of Neuroscience and Mental Health in Melbourne, the team has been considering current guidelines and evidence-based rehabilitation architecture, and applying rigorous research and cutting-edge technology to visualise, test and refine new designs in a virtual facility. (Find out more here: novellredesign.com/project)

Earlier rehabilitation after stroke

For many years, and still in many countries, the start of rehabilitation is delayed or access to some form of rehabilitation is poor.

We have spearheaded research that aims to find the safest and most effective type and amount of rehabilitation to kick start recovery of mobility very early after a stroke.

Around 80 per cent of people who have a stroke have problems with moving and walking. We are trialing different early mobility training protocols in 42 hospitals in seven countries.

With more than 530 patients in the study so far, our goal is to roll out the best clinical protocols across the world.

Professor Julie Bernhardt,
Co-leader of The Florey's Stroke team,
Leader of the AVERT Early Intervention Research Program
www.florey.edu.au/research/stroke/



Julie Bernhardt and her team are working towards better rehabilitation for stroke patients.

Four steps to best-in-class continence management

Maintaining quality of life in aged care

Continence management refers to the strategies and practices used to manage and improve bladder and bowel control. It's important to note that the 'best' practices may vary based on an individual's specific condition, preferences and overall health. However, there are several clear steps to ensuring that continence management is done thoroughly and supports the best outcomes for individuals as well as staff.

1. Assessment

A thorough assessment will help you understand the underlying causes and factors contributing to continence issues.

Understanding the types and causes of incontinence is crucial for effective continence management.

Types include stress, urge, overflow, functional and mixed incontinence.

Causes may include muscle weakness, nerve damage, certain medications, medical conditions and lifestyle factors.

There are several components to ensure a thorough diagnosis:

- detailed medical history
- physical examination
- voiding/bladder diary
- assessment of toileting habits
- assessment of pelvic floor muscles
- neurological assessment
- assessment of lifestyle factors.

2. Individualised care plan

Use your assessment to develop a personalised care plan, taking into account the person's lifestyle, preferences and goals.

A quality continence care plan should include:

- **Individualised goals.** Knowing what you want to achieve is vital.
- **Behavioural and lifestyle modifications.** Encourage healthy habits like maintaining a balanced diet, regular

exercise and managing weight to support overall health and reduce the risk of continence issues.

- **Pelvic floor exercises.** Teach and encourage pelvic floor exercises to strengthen the muscles that control bladder and bowel function. These exercises can be beneficial for both men and women of all ages.
- **Bladder training.** Implement bladder training techniques to gradually increase the time between voiding, helping the bladder hold more urine and improve control.
- **Fluid and dietary management.** Adequate fluid intake will minimise bladder irritation while maintaining hydration. Promote a high-fibre diet, ensure adequate water intake and regular bowel movements to prevent constipation and maintain bowel control.
- **Scheduled toileting.** Establish a regular routine for toileting to assist in managing bladder and bowel habits.
- **Use of appropriate incontinence products.** Provide information and guidance on using appropriate incontinence products such as pads, liners or protective underwear to manage incontinence and maintain dignity. Use breathable products to assist with skin health.
- **Medication management (if required).** Consider medication management, including medications that may help control symptoms of incontinence. Understand medications that might impact continence symptoms, and consult a healthcare professional for appropriate advice.

- **Education and counselling.** Offer education and emotional support to the individual and their caregivers, addressing concerns and providing guidance on continence management techniques.

3. Regular monitoring and adjustments

Setting a timeline for review and adjustments is critical to staying ahead of oncoming changes and the individual's response to interventions.

Recognising and responding to continence care changes including things like Incontinence Associated Dermatitis (IAD's) involves regular assessment and monitoring, prompt adjustment of care and or aids based on the changes.

When assessing for changes it is important to listen to the individual, family members and the observations of care staff.

Setting up continence care meetings on a regular basis provides a forum to discuss health changes, pad use changes, leakage skin issues and other concerns, with those who know the individual's patterns the best.

Working closely with healthcare professionals and involving the individual and their caregivers in the decision-making process is crucial for successful continence management.

4. Communication is critical

Effective communication with all parties involved is critical to ensuring the best outcomes. This involves:

- sensitivity and empathy when discussing incontinence
- providing education and information to the individual and their caregivers
- addressing concerns and answering questions
- collaborating with a multidisciplinary team for comprehensive care.

Using systems and processes such as wet bed audits, additional pad forms and communication forms can assist with the recording of observed changes in voiding output and other health changes.

A regular inspection of these communications can assist in making changes before they become a problem.

By following these practices, aged care providers can provide high-quality and personalised continence management to individuals experiencing incontinence, ensuring best quality of life outcomes for individuals, improving staff workload, and making a sensitive subject more comfortable for everyone.

Karen Fuller, TENA Services Marketing Manager, Essity Australasia
www.tenaprofessional.com.au

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Managing arthritis for healthy living

Effective treatment is key

Few conditions impact the daily lives of so many people around the world as arthritis. Such is the burden of its life-limiting symptoms that the global health community has set aside a special day to shine a light on how we can help reduce its impact on those who suffer its symptoms.

International Arthritis Day was on October 12 and reminded us that almost four million Australians grapple with various forms of arthritis. Projections indicate that this number will rise to 5.4 million by 2030, highlighting the urgency of managing the unique challenges faced by this community.

Arthritis presents in different forms, including osteoarthritis, rheumatoid arthritis, psoriatic arthritis, gout, lupus, fibromyalgia and spondylitis. Osteoarthritis, the most common, is a degenerative disease that occurs when the cartilage between the bones in the joints wears away, causing pain, swelling and stiffness.

Rheumatoid arthritis is less common but can be even more painful. It causes a person's immune system to attack and inflame joints rather than using inflammation to get rid of infection or prevent disease.

The most common symptoms of arthritis are:

- chronic pain, which can lead to depression and sleep disturbance
- loss of mobility, which can lead to a loss of independence
- fatigue and weight loss
- disability from reduced mobility, avoidance of activity, falls, depression and anxiety, sleep impairment and isolation
- inability to work or perform daily tasks.

Effective treatment and ongoing management of pain is crucial, including the use of medications.

Arthritis treatment often involves taking multiple medications, often at different times of the day, which can be confusing and overwhelming. Added to that, all medications have potential side effects, especially when used long-term – a situation common for people with arthritis. So using a system that reduces the risk of medication confusion, error or missed doses will offer peace of mind.

In 1985, I invented the world's first multidose blister pack (the Webster-pak®) which revolutionised medication management in aged care homes, and led to dose administration aids being widely used in residential and community-based care environments.

Their use is proven to increase the chance that medications are taken accurately, in a timely manner, and reduce the risk of potential side effects, and they have become a crucial treatment platform for people with arthritis.

Complementary medicines are commonly used, but they have varying degrees of evidence and impact on symptoms. Product and dosing quality can also vary so it's important that the patient's doctor or pharmacist is consulted to ensure treatment is tailored and effective.

There are also non-medication treatments for the pain and lack of mobility issues surrounding arthritis. Physical therapy can help improve muscle strength around joints and improve mobility. Organisations such as Arthritis Australia promote activities like yoga and tai chi.

Likewise, a healthy diet that includes fruits, vegetables, starchy foods, high protein content food, milk and dairy products, olive oil and fish can also be beneficial.

Aids or tools are also available to support daily chores around the home, such as



Managing arthritis medications can be supported with multidose packs like Webster-pak®.

specially designed grips to make it easier to open bottles. Or devices like the Pil-Bob® which I invented, with inspiration from my late Mum, to make it much easier for weak and painful hands to remove pills from the blisters.

Although we have an international day to promote the burden and treatment of this common yet insidious disease, every day is a good day for aged care providers to learn more about living better with arthritis.

As an aged care provider caring for people with arthritis, it's important to take the following steps to enhance health and wellbeing:

- Seek advice from a doctor with expertise in arthritis to create a personalised treatment plan, in collaboration with residents who live with this condition.
- Ensure medications are delivered as prescribed and report any side effects to the treating doctor. (You can simplify medication management with tools like the Webster-pak and Pil-Bob to ensure you take the correct doses at the right times.)
- Help residents maintain a healthy lifestyle with proper nutrition, exercise and stress management.

Gerard Stevens AM,
Founder and Managing Director,
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Elevating safety in aged care and healthcare settings

In the world of aged care and healthcare, safety is paramount, and ensuring the safety of your hands and those under your care is crucial.

The demand for reliable protective gear is unceasing, and maintaining a sterile environment is paramount for the protection of staff and residents.

Now, a new glove dispensing innovation is helping to meet this need.

"The Bastion Progenics cuff first glove dispensing system is providing a solution to cross contamination and infection control," says Scott Joyce from Bastion Pacific.

"Cross contamination is a growing concern where glove use and adherence to hand hygiene are required.

"International studies have shown that gloves and glove boxes can be a source of contamination that can spread pathogens between aged care workers and residents which can contribute to wound infections and other healthcare associated infections."

The Bastion Progenics Cuff First Glove is certified by Health Analysis & Critical Care Point (HACCP) certified and listed by the TGA, making them ideal for use in aged care and healthcare settings, and also in the food preparation areas of these facilities.

The gloves are available in various formats including nitrile, powder and latex-free, and vinyl for an effective barrier against biological contaminants.

The system dispenses only one glove at a time, cuff first, which eliminates touching the glove's finger and palm areas.

Designed so the opening of the box is not touched, there is no potential for bacterial contamination with the box opening.

This keeps the box and gloves sterile, and unused gloves cannot be reinserted into the box, reducing the risk of cross contamination by 96 per cent, while the acrylic wall mounted dispenser bracket keeps the gloves away from contaminated surfaces.

As the gloves have an ambidextrous fit and are dispensed individually, they offer cost savings of up to 30 per cent.

The Bastion Progenics system also has eco-credentials with the packaging design reducing cardboard wastage by up to 50 per cent compared to traditional glove packaging.

Exceptional barrier protection

Made from high-quality nitrile material, which is renowned for its excellent barrier properties, these gloves offer superior



resistance to chemicals, punctures and pathogens, offering the peace of mind you need when dealing with potentially hazardous substances or in a high-risk environment.

Long cuff design

The long cuff design provides additional coverage and protection of your wrists and forearms, a valuable feature which ensures your entire hand and lower arm remain shielded from harm.

Enhanced comfort and dexterity

Offering a balance between protection and usability, the gloves are fully textured for excellent wet and dry grip, an important feature that makes it easier to handle slippery objects and medical instruments, and in scenarios where precision is required.

Ideal for aged care settings

Aged care homes rely on gloves to provide the highest level of care and safety to staff and residents. Whether assisting with daily living activities, wound management or infection control, caregivers need gloves that they can trust.

Maintaining health standards in kitchens

Food safety is non-negotiable, especially when caring for vulnerable older people. The use of quality gloves helps to maintain the highest hygiene standards in food preparation, preventing cross-contamination and ensuring the safety of both residents and staff.

For those responsible for maintaining safety and hygiene standards in their daily operations, and the safeguarding of your hands and those under your care, these gloves and their innovative delivery system offer the optimal blend of protection, comfort and versatility.

Daniel Seldon, Managing Director,
Aussie Pharma Direct
www.aussiepharmadirect.com.au

LGBTI Ageing and Aged Care.

Silver Rainbow aims to build the capacity of aged care services to provide an inclusive and welcoming environment for lesbian, gay, bisexual, transgender and intersex (LGBTI) older people.

Silver Rainbow provides workforce training and support to aged care organisations to adopt inclusive policies and practices.

We work with aged care services to customise programs to suit their needs. This includes support to meet requirements of the Department of Health and Aged Care LGBTI Specialisation Verification.

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Silver Rainbow is led nationally by LGBTIQ+ Health Australia and delivered by our network of training partners in each state and territory. Silver Rainbow is funded by the Department of Health and Aged Care. For more information contact: education@lgbtiqhealth.org.au



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Be prepared for the bushfire season

Plan to care for your staff, your clients and your residents

For the first time in eight years there are two major weather events coming together that will increase the chance of bushfires this 2023-24 season – meaning aged care providers need to be prepared.

The Bureau of Meteorology (BoM) has formally declared both an El Niño event in the Pacific Ocean to Australia's east, and a positive Indian Ocean Dipole (IOD) to the country's west. Basically, one makes it hotter and the other drier.

It means that providers need to manage the safety of their staff delivering in-home care in bushfire-risk locations and support the safety of their clients. Residential aged care providers need to have an action plan should they be required to evacuate.

CFA Chief Officer Jason Heffernan said it is vital older Australians and aged care providers prioritise their bushfire plan.

"CFA offers a lot of training and advice for people and organisations in the aged care field to help that industry be fire-ready," he said.

"It is important to think ahead and be prepared to keep you and your loved ones safe."

Caring for your staff

To improve the safety of your staff, CFA recommends that aged care providers mandate CFA's free online training module Bushfire Safety for Workers (www.cfa.vic.gov.au/workers). Although Victorian-based, and ideally suited to Victorian providers, it has key messages applicable across Australia. This training can be completed yearly or every second year, and your staff can download a certificate upon completion.

It's also important for providers to have policies and procedures in place to reduce the risk to staff working in bushfire-risk locations over summer,

particularly in relation to home care workers. This may include travel restrictions based on the Fire Danger Ratings over summer, particularly restricting travel to bush areas on Extreme and Catastrophic rated days.

Providers should ensure their staff have access to bushfire warnings. In Victoria this is through the Vic Emergency App, in New South Wales it's the Hazards Near Me App in NSW App, or find the relevant app in your state or territory.

Think about how your staff can check-in with you on high-risk days, so you know they are safe. In bushfire-risk areas, they will need to take extra precautions while conducting their home visits. For example, if things go wrong and they become trapped in a car during a fire, they will need a woollen blanket to shelter under inside the car, as well as sufficient water to stay hydrated.

However, we don't want people trapped in cars as cars don't provide much protection from radiant heat. Instead, think about how you can manage appointments with clients in high-risk areas, so they are early in the morning or another day (depending on the risk).

Also remember that the safety procedures you decide to implement this season need to be well understood by your staff.

Caring for your clients

It's important your staff have a conversation with your clients about what they will do and what gaps there are in their planning, especially for those people living in bushfire-prone locations.

Older people need to think about their capability and resources. This is one of the challenges for people as they age, to be able to understand their capability. It matters for people to reflect on this and consider their health and what they can physically manage in the heat of summer.

Fighting a fire requires at least two fit and determined adults who are physically and mentally able to work in arduous and difficult conditions for many hours. The fire services recommend leaving before a fire starts as the safest option.

Some people find bushfire planning overwhelming, so our advice is to start with some easy actions such as. Encourage your home care clients to do the following to prepare:

- Have a bag packed and ready to go in case of an emergency.
- Ensure their house and contents insurance is up-to-date.
- Organise a place to go if they need to leave home on a high-risk day.

Caring for your residents

For residential aged care operators, some of already having experienced evacuations due to bushfires in recent years, a plan is paramount.

Evacuating large numbers of residents is a challenge. You need a plan of where to transport residents in an emergency where they can receive a similar level of care, and how you will transport them.

You need to be prepared to manage the effects of heat when evacuating people who are older and frail, as heat and smoke can be very dangerous to people already experiencing health conditions.

It's also important to have conversations with residents, family members and loved ones, so that everyone understands your evacuation plan and is ready to provide support and cooperation.

If aged care providers want to get in touch with us to help them with their bushfire safety procedures, they can email us at communityprograms@cfa.vic.gov.au.

Country Fire Authority, Victoria
www.cfa.vic.gov.au

Challenging the ageist stereotype

Aged care providers have a role to play



How do you feel about getting older? What words do you associate with being older? How do you feel about older people?

These are the questions that led to the creation of EveryAGE Counts, Australia's national coalition to end ageism.

We asked many people across Australia these questions. What we heard, with some exceptions, was a barrage of negativity, fear and trepidation. Getting older for many of us is associated with death, decline, dependence and dementia. It tends not to be a time of life we look forward to. But it can be a third of our lives.

Many of us see older people as difficult, troublesome, forgetful, a burden – much of which is reinforced by media and day to day rhetoric. In our western culture, we value youth, beauty and strength, none of which we associate with older people. We devalue older people and this time of our lives.

Research over several decades shows that ageism against older people comes from these negative attitudes and beliefs about what it means to be, and to get, older.

Ageism is stereotyping, discrimination and mistreatment based solely upon age. Ageism is neither benign, nor harmless.

It's a big problem because it impacts on our confidence, quality of life, job prospects, physical and mental health, control over life decisions, and the way we are viewed by society. Ageism limits choice and undermines rights, dignity and self-esteem of older people.

It divides us in ways that lead to harm, disadvantage and injustice and erodes solidarity across generations.

Ageism is pervasive and highly tolerated. It has three key aspects: how we think (assumptions and stereotypes), act (discrimination, mistreatment) and feel (prejudices and biases). Ageist norms operate across our society, attaching a lower value and greater stigma to older life than any other part of the life course.

These negative social views about ageing and older people can be carried into aged care services by the workforce, family members, decision makers and older people themselves, reflecting values and attitudes in the broader Australian community.

Another important feature of ageism is that it treats all older people as if they are the same, despite great diversity based on chronological age, gender, cultural and linguistic backgrounds, economic backgrounds, locations, sexual

identity, personal history, physical and cognitive health, quality of life preferences, and much more.

We see this homogeneous view of older people play out again and again in cultural stereotypes, media images, policies, program delivery and even in research methodologies.

But for those of us who are, or who work with older people, we know the great diversity of experience, backgrounds and preferences older people bring. We also know how much older people contribute and have to offer.

So, it is up to each of us to shift the prevailing narratives about ageing and to challenge these stereotypes and assumptions. We all have a role to play. We are all getting older.

While individuals can make a difference within their own networks, aged care providers can have broader impact in the lives of the numerous people to whom they provide services.

One of the most powerful evidence-based strategies to combat ageism is intergenerational contact. Research tells us that the more intergenerational contact we have, the less likely we are to hold ageist views.

Intergenerational interventions typically bring together older and younger people and encourage cross-generational bonding, reduce intergroup prejudice, stereotypes and ageism. These have been implemented by many aged care providers in Australia, with benefits for both older and younger people.

The World Health Organisation has a new publication *Connecting Generations* (www.who.int/publications/i/item/9789240070264), which is intended for anyone who is using or wishes to use intergenerational practice to combat ageism and promote learning, understanding and mutual respect among generations.

It is a very practical guide which can be used by aged care providers, offering many case studies, tips and examples.

EveryAGE Counts has also has many free resources to help start conversations and challenge thinking around ageing, which could be useful for staff training.

Ultimately, what we want is a society that stands against ageism, and we encourage every individual to visit www.everyagecounts.org.au and take the pledge to end ageism.

Join us at EveryAGE Counts to build a society where every person is valued, connected and respected regardless of age.

Marlene Krasovitsky and Robert Tickner,
co-Chairs, EveryAGE Counts
www.everyagecounts.org.au

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Who's missing from your aged care services?

OPAN's new free training program putting diversity into the DNA of providers



Australia's aged care system should be accessible to all older people, according to the Older Persons Advocacy Network (OPAN).

That's why the Charter of Aged Care Rights calls for service providers to actively affirm older people's rich and diverse life experiences.

"A person-centred approach that enables people from diverse backgrounds to thrive in residential aged care and home care settings is essential," says OPAN CEO Craig Gear.

"It also makes good business sense, because providers can expand their services into different communities, or they can differentiate themselves from others."

But sometimes it takes extra support to understand how to best cater for people with specific needs.

This is why OPAN is working on a number of projects that target older people who face specific barriers to person-centred aged care.

Many older people in LGBTQI+ communities, for example, fear being forced back into the closet when they enter a residential aged care home.

Older people from culturally and linguistically diverse groups experience isolation and trauma when they are unable to communicate with staff.

There is no limit to the number of barriers an older person might face.

We know older veterans are impacted by extended periods of separation from friends and family. Military service also increases the likelihood of exposure to trauma.

Aboriginal and Torres Strait Islander elders experience high rates of disability, homelessness and financial disadvantage.

Many live in rural, regional and remote communities with limited access to services.

Intergenerational trauma further impacts Aboriginal and Torres Strait Islander peoples' experience of aged care. Many have a deep mistrust of institutions as a result of past experiences.

OPAN's 'Who's Missing? Planning for Diversity' project was developed in response to Recommendation 30 'Designing for diversity, difference, complexity and individuality' in the Aged Care Quality and Safety Commission's final report.

Face-to-face workshops and eLearning modules are designed to help aged care providers identify older people in their community who would like to access aged care services but who are missing out.

The training will be supported by state-based diversity educators who will facilitate collaboration and co-learning between peers.

Reflecting the intersecting communities it aims to support, workshops will focus on delivering the right tools to support each specific community or type of service provision.

The ultimate goal is to ensure older people from diverse and marginalised backgrounds feel:

- welcome, valued and safe
- listened to and understood
- that their identity, choice and individual preferences are supported.

"At a macro level, this means embedding diversity within a service provider's DNA through its governance frameworks, policies and procedures," says Craig.

"By explicitly addressing diversity in the recruitment process, for example, a service provider can ensure staff are aligned with the values of the organisation from the start.

"Explicitly acknowledging an older person's diverse life experience during the intake process also puts an organisation on the front foot in terms of service delivery.

"For example, as part of onboarding, education around inclusive language ensures older people – and support workers – feel valued and understood."

OPAN's free Planning for Diversity training is aimed at managers and staff members responsible for quality improvement, service planning or compliance. Workshops are currently running in New South Wales, and enrolments for the ACT and the Northern Territory are also open.

The series includes two face-to-face workshops, an online session and access to a Community of Practice. Participants will also receive workbooks, diversity resources and a certificate of completion.

Older Persons Advocacy Network
www.opan.org.au/diversity-education

The need for connection and meaning

Recognising and responding to loneliness in older people



Image courtesy of Meaningful Ageing Australia.

There is no one ‘type’ of older person. Older people are diverse. If we are to truly support older people and ensure quality of life and quality of care outcomes, then we must also be prepared to have conversations and take the actions that matter most to each unique individual.

In this time of transition in the sector, particularly at a regulatory level but also in terms of our awareness of the significance of the concepts of identity and belonging, emotional wellbeing can be a cornerstone of the aged care transformation in Australia.

We should aim to create an environment of care – whether at a community level or in a residential setting – where seniors genuinely feel at ease as well as at home.

One of the biggest risks to manifesting such an environment is loneliness.

Loneliness, both the state and the feeling, can be amplified by our external world (including how, for example, care homes are designed) and it can be exacerbated by mental health states, past trauma, and neurodiverse conditions.

It can be perceived *by others* incorrectly projecting themselves onto a situation and finding they would be lonely ‘if it were them’; and it can be hidden too easily from others because of feelings of shame and embarrassment.

Then there is the fact that many of us need periodic aloneness to reset and recharge (and some of us need much more of that than others).

In other words, not all loneliness is the same. There are different kinds. And different reasons for feeling or being lonely.

Do your staff understand what contemplative aloneness looks like for every faith and culture?

Do your staff understand how different individuals can have wildly different tolerances to an increase in lack of mobility or speech or sight?

Do your staff understand how to recognise loneliness – and whether it is social, emotional or existential?

For those who work in aged care, it is important to know how to have conversations about the circumstances and situations that might lead to loneliness for every individual in their care.

It can be difficult for people to honestly answer the direct questions of ‘how are you feeling?’ and ‘are you lonely?’ especially absent of a trusted relationship.

It is even more difficult, without support and preparation, to know how to recognise and respond appropriately – and without patronising someone – especially if that person is not someone who is used to yielding or who does not even understand that the discomfort or distress they are feeling is a type of loneliness.

For example, emotional loneliness can be experienced as a lack of connectedness to what is most important (which might not even be about being with other people) whereas existential loneliness is not so much about a lack of connectedness but rather being in a state of *separateness* from others and the world, including the natural world and a sense of creativity and wonder.

It is only social loneliness that is about a lack of human-to-human connections. But if the social loneliness is the lack of particular type of person, then no amount of social interaction would satisfy that which is not there. An example of this might be for a Buddhist who has a strong personal faith and practice but who no longer belongs to a sangha and feels this lack of connection. Unless you know and perceive this you would not easily recognise it.

It is important therefore for staff to be able to identify what is most important and fulfilling to someone. One of the important ways to do this is through conversation and relationship and a willingness to listen and learn.

This approach works even better if staff are able to reflect on what is important for them and their own fulfilment and connection. (If we are to truly respect our diverse sector and be wholly inclusive then we must include in our efforts both older people and the staff who care for them.)

To help engage your staff on this important topic, Meaningful Ageing Australia has created practical resources aimed

at building staff capability so they can integrate emotional support and spiritual care into their day-to-day work.

Self-reflection work like that facilitated by ‘Map of Meaning’ and conversational support tools like ‘ConneCTo’ can enable both staff and older people.

The all-Australian ConneCTo tool acknowledges that spirituality is not just about religion, and that spirituality can be expressed through connectedness in one or more of five domains. We consider it a core building block in understanding and delivering spiritual care.

ConneCTo invites both staff and the older people they care for to reflect on their connection with themselves, with others (including cultural community), with nature, with creativity, and with ‘something bigger’, which can include faith and religion.

This allows staff to address what an older person needs to *belong* and feel *connected*. It also means staff have an understanding of what might be the result if a person is *not able* to maintain these connections and can recognise that state and respond quickly by offering a relevant kind of comfort and problem solving how to help.

Jacquie Molloy,
Senior Projects & Leadership Communications,
Meaningful Ageing Australia
www.meaningfulage.org.au



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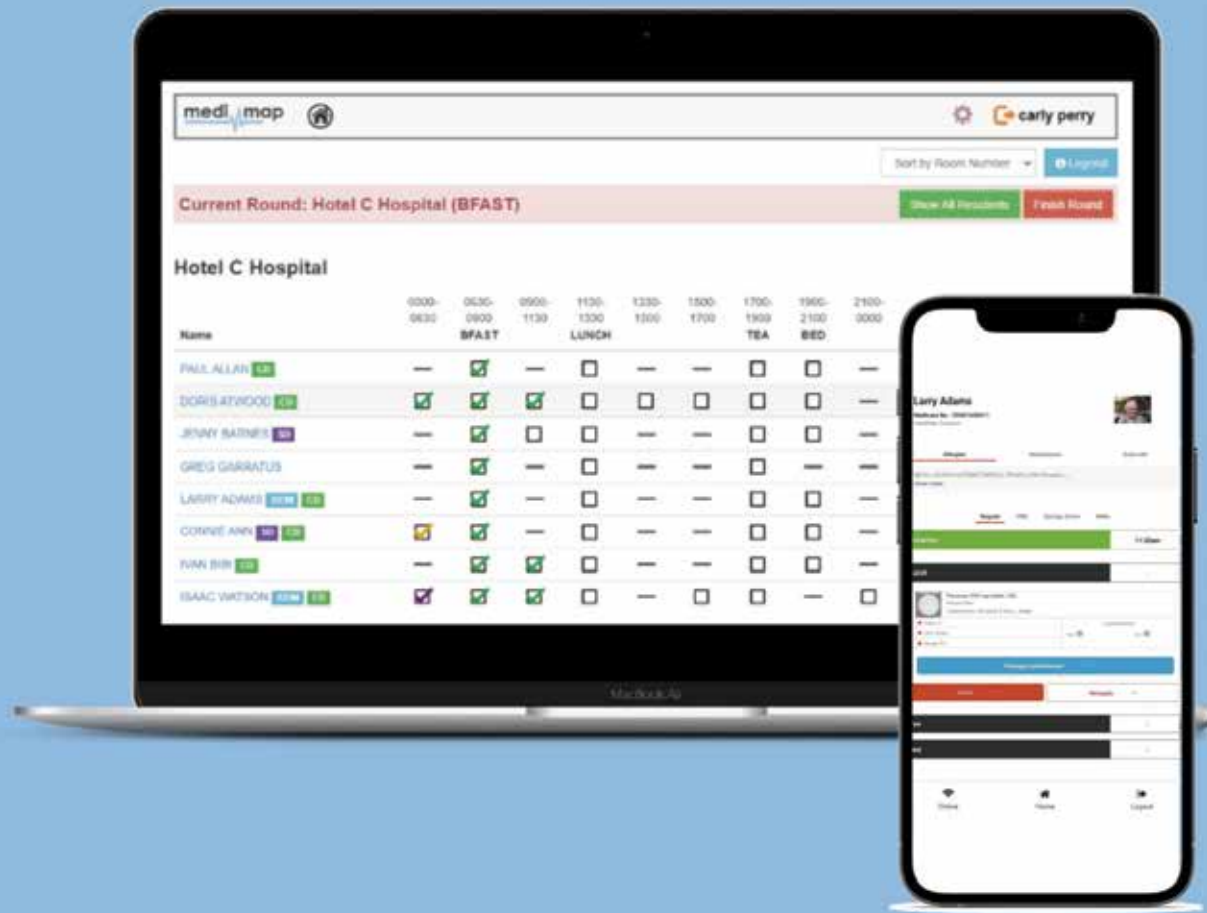
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Paul says having his dog Bonny with him at Lifeview Willow Wood makes him happy all the time.

Lifeview honoured with pet-friendly award

Going the extra mile to support wellbeing in residential aged care

Lifeview, in Melbourne, has been honoured for its commitment to helping residents maintain their relationship with their pet.

The pet-friendly residential aged care provider was awarded the Bob Harvey Award, a new initiative from the Society for Companion Animal Studies.

The award is a tribute to the memory of Bob, who fought to stay with his beloved dog, Darcie, in aged care. It recognises and honours care homes, hospices and care facilities that go the extra mile to preserve the vital bond between humans and their pets.

All four of Lifeview’s homes – Argyle Court in Chelsea, Emerald Glades, The Willows in Wheelers Hill, and Willow Wood in Cranbourne – are pet-friendly.

“At Lifeview, we allow pets to move in with their owners. It makes that transition easier, because you give up a lot to move into aged care, you should not also have to give up that relationship you have with your beloved pet,” Lifeview CEO Samantha Jewell explained.

“Our pets have been our companions for many, many years, and to have to give them up is really sad and heartbreaking.”

Australia has one of the highest pet-ownership rates in the world, with 69 per cent of households having pets.

According to the RSPCA, there are 3 million more pets in Australia than there are people, yet only 18 per cent of aged care homes allow residents to keep a pet.

Companion Animal Network Australia (CANA), which nominated Lifeview for the Bob Harvey Award, conducted a

survey earlier this year titled *Status of Pets in Aged Care*, which revealed an overwhelming 98 per cent of respondents rated the importance of access to pets in aged care as either “very important” (14 per cent) or “vitally important” (84 per cent).

Lifeview Willow Wood resident Paul Debar, who lives with his dog Bonny at the Cranbourne home, said his relationship with his pet was “the best medicine for me”.

“She is my buddy,” he said.

“Having Bonny makes me happy all the time. Without her it’s totally different and you drag your feet around, you’re grumpy, you’re miserable. When you have your dog, it brings so much joy to you.

“Everyone (other residents) wants to pat her. They all fall in love with her. She puts a smile on a lot of people.

“I see what Bonny does for me. I think the rules should change to see more facilities allow more pets.”

Willow Wood nurse Jaimee-Lee Devey brings her dog, Archie, into work as Lifeview is also a pet-friendly workplace.

Resident Mel Andrews looks after Archie throughout the day, taking him for walks throughout Willow Wood and its gardens.

“I love him dearly,” Mel says.

“I don’t have him as often as I’d like. He knows my place really well. Apparently, he races through about three corridors to get here.”

Other residents regularly interact with Mel and Archie as they make their way around the home.

“There are of course rules around bringing pets into work, but those pets brighten the residents’ days,” Samantha explained.

“Having animals around really lifts the vibe of the home, even those living with dementia, it brings back memories of a pet they may have had.

“It makes everybody happy and smile. That is really what we want to see, we want people to be as happy as possible each day and bring back good memories.”

Jaimee-Lee explained the positive impact she had seen firsthand from Archie’s interactions with residents at Willow Wood.

“There will be days where residents will be going through some personal or hard times, where I find if I sit and spend some one-on-one time with them and give them emotional support from myself, it’s not as effective as when I have Archie,” she said.

“He just gives them that affection. He will jump up on their laps and have a cuddle and give them a sneaky little kiss, and I feel that interaction between the resident and the dog is more effective – it’s therapeutic.”

Lifeview’s policies around pets ensure the resident can continue to care for their pet, including walking, feeding and providing veterinary care.

“We believe it’s a great policy to have and we encourage other providers to do so, too,” said Samantha.

Cody Winnell, Executive Manager – Marketing & Communications, Lifeview
www.lifeview.com.au

Keeping the culture alive

How Co.As.It. is supporting CALD communities in Brisbane and the Gold Coast

Multicultural activities are an integral part of Co.As.It. – the Italian Association of Assistance to older Italian migrants in Australia, which also supports people from other CALD (culturally and linguistically diverse) backgrounds.

In Brisbane, Co.As.It. CEO Dina Ranieri underscores the reality of multicultural living in Australia, and says it's important to recognise culture in the opportunities created for older people.

"The 2021 Census flagged that, collectively, Queenslanders spoke more than 190 languages other than English at home, reported an affiliation with one or more than 110 religions and came from more than 220 countries and territories," she said.

"One of our aims is to embrace this diversity by offering a wide range of opportunities for our clients across the vast CALD community in Brisbane and the Gold Coast."

At Brisbane Co.As.It., Dina gathers with coordinators and the marketing team for a brainstorming session on what activities and celebrations would be of benefit to our CALD community.

The annual calendar includes staples like International Women's Day, wine and cheese nights, Euro Concerts to celebrate Queensland Seniors' Month (1 to 31 October each year), and an Art Exhibition hosted at Amici House – Co.As.It.'s Community Hub in Bracken Ridge.

Many other cultural events are part of the Italian Language Centre, which is a division of Co.As.It.

The festivities take into consideration cultural backgrounds and aim to ensure everyone feels welcomed and included, and we regularly seek participant feedback so that future events are planned according to people's preferences and choices.

The multicultural initiatives promoted by Co.As.It. go beyond the annual events, prompting clients from the most varied backgrounds to embark on fortnightly bus trips. These social outings provide an opportunity to meet new friends while visiting interesting places.

One special example of how diversity must be embraced occurred last December when we hosted our first Art Exhibition at Amici House with paintings created by NDIS (National Disability Insurance Scheme) participants and other community members who attend art classes at the Centre.

Hundreds of guests turned out for the exhibition to celebrate the artistic flair of clients ahead of the Christmas holidays, and due to its success, we are now running it as an annual event.



Co.As.It. Care Services Coordinator South Coast Rita LaRocca with Gilda LaRocca, who is a client of Co.As.It. and is also Rita's mother, at Co.As.It.'s Euro Concert on the Gold Coast in 2023.

In early March, Co.As.It. honoured International Women's Day 2023 at the Greek Club, with guests enjoying a fabulous brunch, fashion parade curated by Laura Churchill and raffle prizes. We were delighted that this event attracted Brisbane's Lady Mayoress, Nina Schrinner, and the Minister for Education, Minister for Industrial Relations and Minister for Racing, the Hon Grace Grace.

The proceeds from the event – which has been in Co.As.It.'s calendar for 13 years – went towards our Dementia Support & Mind-Wellness Services.

"We encourage and facilitate community access to these activities, keeping in mind that often participation may not be easy due to cultural and language difficulties if not for an agency that supports them," says Dina.

In October this year, the Euro Concert's second edition celebrated the CALD community bonds, highlighting Queensland Seniors' Month. The event included several presentations, including one delivered by Co.As.It.'s Occupational Therapist Patricia Lapsley, which focused on the importance of exercise, food and social connections.

Connie Riga attended the event for the second year in a row. She couldn't contain her excitement after the band played European classics and set the dance floor on fire.

"What I like most about the Euro Concert is that it brings everyone together. Nowadays, especially for older people, getting out and being socially active with everyone is vital. That's why I brought my sister along this year," says Connie.



Mind Wellness Team Rita Cooney and a client at the Euro Concert, Brisbane, 2023.

Attending the event for the first time, Teresa Lahme celebrated the opportunity to have the community together again on a high note.

"It was a beautiful and informative event. The older generations need to be involved in gatherings like the Euro Concert – this is what we need in our community and what we need to keep going on," says Teresa.

"I will definitely come back next year. It is priceless to see people making new friends and meeting up again with friends from the past."

Between July and August, Co.As.It. was part of one of the most important events in the city: the Brisbane Festival. Amici House hosted free dance workshops in collaboration with the Common People Dance Project and a free kazoo workshop. The participation spotlighted the organisation's dedication towards the community.

Dina Ranieri emphasised that their events allows seniors in the community to come together and celebrate the importance of wellbeing, friendships and socialising.

"It is important to keep the CALD community engaged with their community but also engage them with all other general activities. Socialisation is most important for older members as it reduces isolation, improves mental health and overall wellbeing," says Dina.

"Our involvement in the Brisbane Festival was an extension of our work, to highlight the importance of having a community hub like Amici House, where many locals come together and join worthwhile activities. We participated because we are seen as a neighbourhood centre and wanted to showcase our model."

Juliano Oliveira,
Marketing and Creative Content Officer, Co.As.It.
www.coasit.asn.au



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Augmented Reality captivates young minds and seasoned souls

Another example of ECH's focus on intergenerational opportunities

In a heart-warming collaboration of young minds and experienced individuals, Year 5 and Year 6 Mitcham Primary STEM extension students connected with ECH Community Day Program participants in a bid to bridge generational gaps.

The South Australian retirement living and home care provider is committed to delivering various opportunities that involve older adults and the younger generation due to ongoing wellbeing benefits for everyone.

For one morning, the students introduced about 50 ECH volunteers and participants at the Cumberland Park Community Centre – known fondly as The Cumby Crew – to their digital creations.

Augmented Reality games are based in real-world settings which users can control. Over two school terms, the students designed games that involved getting people to use parts of their bodies to move characters on the screen.

Mitcham Primary School principal Scott Greenshields says the Years 5 and 6 students gained valuable learnings from the experience of designing activities with a much older end-user in mind.

"The benefit for our students is engaging with senior people to showcase their projects and to give feedback that will allow them to look at their programs and adjust them accordingly," says Scott.

The Cumby Crew participant Marie says she has learned so much in her journey with technology.

"Today was absolutely fantastic. Five years ago, I couldn't turn a computer on, but now I can do a lot more. For older people, I think they should get more involved, and it will encourage them."

ECH Chief Executive Claire Scapinello says collaborations such as this between Mitcham Primary and the Cumberland Park Community Centre create meaningful community connections which are essential to overall health and wellbeing.

"Each week, the ECH Community Connections Team ensures bonds are built and friendships are formed to encourage participants to try new activities such as craft, macramé, art, sewing, cooking, gardening, or even music and dance," says Claire.



ECH Community Day Program participants and Year 5/6 Mitcham Primary School STEM students recently met up where the students tested their augmented reality games on the program participants in an intergenerational activity.

"This particular collaboration between young minds and seasoned individuals saw the invaluable exchange of knowledge and experience.

"While the primary school students have been able to fine-tune their technological skills, the Cumby Crew have been presented with an exciting window into the future."

Mitcham Primary School is keen to continue this within their ongoing education program and the ECH Community Connections team is thrilled to have this as part of its ongoing programming as well.

This is not the only example of intergenerational activities occurring at ECH.

ECH's collaboration with ECHOES Montessori integrating the childcare centre right at the heart of the ECH Encore Apartments complex, at Modbury, provides ECH clients regular opportunities to interact with the centre's young clients on a daily basis.

Plus, a newly formed partnership with Green Leaves Bowden is making sure ECH clients build relationships and look forward to connecting socially.

"ECH's focus on intergenerational activities is so important because they contribute to a richer, more inclusive community and provide so many valuable opportunities to learn and grow for both older adults and the younger generation," Claire says.

Charlie-Helen Robinson,
Communication Advisor, ECH
www.ech.asn.au

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Creative workforce strategies addressing sector-wide shortages at Benetas

Bucking the trend

As an industry, we are all acutely aware of the impact that workforce shortages have had on our sector's ability to meet the growing demand of an ageing population.

In October, the Committee for Economic Development of Australia (CEDA) released its *Duty of Care: Aged-Care Sector Running on Empty* report recommending three strategies to fix workforce issues.

One of the recommendations called for the prioritisation of aged care worker housing in regional areas as well as options for rental assistance. While this is very much a sector-wide issue, Benetas has continued to focus on strategies to help attract and retain staff in a sector that is struggling to retain its workforce.

During the height of the COVID-19 pandemic, Benetas converted four unused accommodation units in Bendigo into short-term employee accommodation. Of the many lessons learned from the COVID-19 pandemic, it was the importance of our healthcare workers including those working in aged care, to have suitable housing close to their workplace.

At the time, ensuring comfortable and convenient housing for our team members, while also minimising the risk of transmission of the virus to their families and our residents, was a key focus of our COVID-19 response.

Unsurprisingly, even after the COVID-19 risks and restrictions have eased, the units have been continually full.

This strategy has not only made it easier for employees working at our neighbouring St Laurence Court aged care home at Eaglehawk, it has since helped attract and retain our workforce in the area.

Benetas has also provided employees with letters to show local real estate agencies and to engage with agents about the importance of their work.

The letters are designed to highlight how crucial aged care workers are to the local area and to the residents they care for. Since the letters were introduced, most real estate agents have been open to the idea of prioritising housing for aged care staff.

Benetas is exploring other ways to address workforce issues, by focusing on how we can help our team members to build a career with us.

Our SPARK traineeship program has been in place since 2019, allowing participants to complete on-the-job training while they undertake a Certificate 3 in Individual Support.

During the training they learn and gain confidence and when they finish their traineeships, they continue their employment as fully trained and qualified personal care workers.

A total of 47 have completed the program over the past four years, including 37 in residential aged care and 10 in community home care, with a completion rate of 58 per cent.

Following a successful pilot, we recently rolled out our Manager Skills Training Program, which supports foundational and ongoing skill and capability development for all employees at a manager or team leader level.

The program is delivered through short learning modules and helps ensure key management processes are well understood and implemented.

Last year, we established a new Talent Acquisition team, focused on attracting and retaining team members and building talent pools for the future.



Sandra Hills OAM says creative strategies are essential in the face of workforce challenges.

In partnership with our Residential and Community Health and Care leaders, this team has attended and presented at local job fairs, exhibitions and recruitment events.

The events generated numerous applicant leads from qualified health professionals and students interested in joining our team.

In August 2022, Benetas team members presented to nursing students from Federation University about career opportunities in aged care. They talked about their career journey and experience, their passion for the aged care sector and the unique career pathways available to nursing students.

We have also partnered with Aged & Community Care Providers Association (ACCPA) to deliver the Transition to Practice education program focused on supporting graduate and experienced Registered Nurses and Enrolled Nurses to transition into aged care. As part of the program, participants attend weekly education sessions and work closely with senior Benetas nurses.

Addressing sector-wide shortages is no quick fix. It needs government and sector-wide collaboration to address the systemic issues facing our industry.

As demand for our services continues to increase, we need to create some capacity in the system for innovation to enable providers to work together and our amazing workforce to grow their career in aged care.

Benetas is committed to working internally, with fellow providers and with government to find new ways to attract qualified and passionate people to the industry in the long-term.

Sandra Hills OAM
Chief Executive Officer, Benetas



Experience Genuine Care

PALM Scheme – Pacific Workers
from Health+ People



MINIMISE RECRUITMENT COSTS

Deal with one provider who can service all your recruitment needs.

CONSISTENCY OF CARE

Foster meaningful connections between your residents and caregivers, and create an environment that nurtures and supports well-being.

BUILD A CULTURE OF RESPECT

Pacific Australia Labour Mobility (PALM) Scheme candidates bring a cultural heritage rooted in profound reverence for elders. They carry a strong sense of pride in representing their families and nations, translating into the development of dignified care practices for your residents.

CONTAIN TURNOVER

Stabilise your workforce by placing candidates for up to four years.

FEDERAL GOVERNMENT FUNDING AVAILABLE

Strengthen your capacity to care and upskill PALM Scheme candidates while they work for you, including Certificate III (Individual Care).

SOURCE QUALIFIED CANDIDATES

Our candidates are qualified in Aged Care, Individual Support, Community Services, Disability Support, Hospitality, and Catering. They are motivated, eager to learn, and ready to make a positive difference.

Make a profound impact on your aged care facility!

Contact Health+ People at 1300 247 823 to unlock the potential of the PALM Scheme or to discuss your specific needs and explore the comprehensive solutions we can provide.

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PALM scheme helping regional Australia

Quirindi Care Services solves staff shortage issue with exceptional results

Eloura Aged Care – which operates within Quirindi Care Services (QCS) in New South Wales – has solved the critical issue of staff shortages with an out-of-the-box approach, employing five qualified aged care staff from the Pacific Islands and Timor-Leste.

QCS sought help from Health+ People who specialise in filling gaps in the Australian workforce when local workers are unable to be sourced, using the Pacific Australia Labour Mobility (PALM) scheme.

After the ‘Great Resignation’ across aged care during COVID-19, QCS found themselves requiring a secure workforce.

“At Quirindi, we have struggled with the same staff shortages that we are seeing across the board in aged care,” said QCS General Manager Kim Riley.

“We aim to be a residential aged care facility that provides quality care, therefore we needed to increase staffing.

“Our staff are the key ingredient essential for us to achieve our mission statement – to provide a place where older people feel at home, safe and valued.”

Kim explained that out-of-the-box thinking was necessary to build her team.

“We wanted to provide our residents with a familiar roster of staff, it’s so important for our residents to get to know and trust the people who are caring for them, but despite recruitment drives we were not able to secure our workforce locally, so we tried something new,” she said.

“Finding the PALM program has been a blessing, not only are these ladies qualified, but they are amazing at what they do, they are so happy to be working

in Australia and have sacrificed so much to be here with us.”

Conversations between QSC and Health+ People commenced in November 2022, starting with an audit of how many staff were required and with which skills, and afterwards it unfolded like any other recruitment process.

“Oxana (from Health+ People) organised a short-list of candidates to interview, who she interviewed personally on our behalf, using our standard interview questions. After watching these recorded interviews with Oxana’s help we were able to select the appropriate candidates,” Kim said.

When asked why there is such great need for the PALM program, Health+ People’s General Manager Oxana Reed replied, “Aged care is not an attractive industry for our young people and the pool of Australian workers who want to do this job is very shallow.

“While we do have some wonderful aged care workers joining the industry, who have the right skillset and personal attributes, the workforce in Australia isn’t sufficient to meet supply.

“Anyone who’s interacted with Pacific Islanders can agree, you can just feel the compassion, it seems to be ingrained in their culture and in their upbringing, so it makes a lot of sense to invite them to work in Australia, through the PALM scheme.”

FOR QSC, eliminating the turnover of staff prevalent in aged care particularly since COVID-19, has been a huge benefit.

“We have created a more efficient workplace, better employee morale and of course, our residents are much happier when they have familiar faces looking after them,” Kim said.



“The wage for the PALM workers’ role here supports between seven and eight people in their home countries, which is spent on establishing businesses, education and housing.

“So it’s a win-win, for everyone.”

The new staff members also appreciate feeling valued.

“After we introduced ourselves to the residents, they were so welcoming and grateful to us for helping them,” said Registered Nurse Benedita Maria Dos Reis, who is from Timor Leste and has worked at Eloura since August.

Kim said employing these staff through the PALM Program has helped improve the standard of care at Eloura – but it’s not just in terms of the one-to-one relationships being forged, it’s also taken the stress off existing staff.

“The ladies are already such a huge part of our Eloura family and our residents love hearing about their families and lives back home,” she said.

“All our staff are essential to helping us achieve our mission statement – to provide a place where older people feel at home, safe and valued – and caring for our staff helps enormously.

“Since having the five ladies arrive, we have employees who will enjoy their first holiday in two years, because we now have a secure workforce.”

Health+ People
www.healthpluspeople.com.au



SAVE THE DATE
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ADELAIDE OVAL

ariia Aged Care Research & Industry Innovation Australia

Flinders University

Australian Government Department of Health and Aged Care



visit ariiaconference.com.au to register your interest

This year's ARIIA Conference was an event winner at the 2023 Australian Event Awards!

Set up as the first event of its kind to bring together the whole aged care ecosystem to talk about positive ageing.

This is what you said:

"Best conference I have attended in all my years working as a health professional."

"One of the best conferences that I have been to. Equal parts education and inspiration. I want more of this stuff."

"Best-aged care conference I have attended in 16 years."

"Great conference! Seriously looking forward to the next one!"

After such a success we are preparing for our next event so please scan the QR code and keep up to date.



Support their career

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Now you can support your employees to progress their career while working, by studying the Certificate III in Individual Support (Ageing) through TAFE NSW. With a combination of classroom-based, online and workplace learning, students can manage their study around work commitments.

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Access world-leading dementia education for your staff

Make sure your service is at the forefront of innovation to address the challenge of dementia

Age care providers need to be at the forefront of innovation to ensure they provide the highest standards of care to people living with dementia.

By encouraging your staff to continue to build their knowledge of dementia, you can promote best-practice care and demonstrate the importance you place, as an aged care provider, on a highly trained and educated workforce.

The rising prevalence of dementia impacts individuals and the community, including care and social systems.

According to Alzheimer's Disease International, in 2015 there are over 55 million people worldwide living with dementia and this number is estimated to reach 139 million in 2050 – all of

whom will require specialised care, in order to support quality of life.

If you want to enhance your team's knowledge and expertise in the field of dementia, the Master of Dementia offers a comprehensive program.

Delivered completely online by the University of Tasmania's Wicking Dementia Research and Education Centre, the Master of Dementia focusses on four core domains:

- neurobiology of dementia
- community and public health approaches to dementia
- policies and systems in dementia
- health and social care in dementia.

Dr Kathleen Doherty convenes the Wicking Dementia Centre's Translational Research group and is the coordinator

of the Master of Dementia program, which includes the Graduate Certificate and Graduate Diploma of Dementia.

"As expectations increase around quality of care, and decision-making affecting people living with dementia, new opportunities will become available for those with advanced studies in dementia," she said.

"With the increasing prevalence of this condition in our community, I encourage aged care providers to promote the Wicking Dementia Centre's courses to staff who want to be at the forefront of change in the way we approach dementia."

As managers, it's important to support your staff with ongoing learning, especially in relation to complex

conditions like dementia, which can have a devastating impact on quality of life.

By studying with the Wicking Dementia Centre, your staff will join a community of highly motivated professionals who are passionate about making a positive difference to the lives of people living with dementia.

Our students come from many backgrounds, each bringing their own experiences and expertise to the program – whether they’re new to nursing or aged care, or whether they’ve been in the sector for years.

“I’d like to effect positive change for people living with dementia and their families through up-to-date knowledge and tools in both my work and in my personal life,” said one student.

Another who has been involved in nursing for more than three decades, said they’re keen to upskill.

“Being involved in nursing for 35 years, I know that the role of a nurse still requires growth through knowledge to improve its value and input in the health care system. I want to evoke change in the community so to assist people living with dementia to have expert supports they deserve too,” they said.

Postgraduate education for your staff is an important way to continue to offer quality care to older people who required

aged care services, and expand the services you provide, and it’s particularly important when it comes to conditions like dementia.

Ongoing education also helps keep your employees engaged so they can develop their careers.

This can, in turn, assist with staff retention and help your organisation to be an employer of choice.

“The Wicking Dementia Centre can provide your staff with the tools to translate knowledge about dementia into practice,” said Dr Doherty.

“The rising prevalence of dementia is creating new challenges and a pressing need for change in the way our systems and practices support people who live with dementia.

“Encourage your staff to apply to study with us and equip themselves with the expertise to lead transformation, based on the latest evidence.

“They will join an international community of highly motivated professionals in our postgraduate dementia program.”

Wicking Dementia Centre
www.utas.edu.au/wicking; www.utas.edu.au/study/dementia-postgraduate



Aged Care Services Workforce Hub

Building skills and capacity in aged and community care

employment.agedservicesworkforce.com.au



The importance of training your workforce in the face of change

Because staff are your greatest asset

It’s common for organisations to refer to their workforce as their greatest asset. The sentiment captures a reality for aged care providers, particularly in-home providers, where the workforce is essentially the organisation.

Services and activities delivered to clients create the interactions that represent the aged care provider and shape its image. When clients assess how well a service aligns with the necessary Aged Care Quality Standards, they primarily consider whether their expectations were fulfilled through their interactions with your staff.

Through the experience of working with numerous clients at Lorraine Poulos Associates (LPA) – a leading home care training and consultancy services specialist – we know that a significant portion of the funds allocated to providers goes towards compensating the individuals who not only manage the business but are, in fact, the driving force behind its operations.

Any major asset requires initial establishment costs as well as maintenance and improvement expenses. A workforce likewise requires investment to maintain and improve the assets to maximise the effectiveness of operations, both in the present and into the future.

The approach aged care providers take in training can make a huge difference to the long-term efficacy of your team.

For example, ensuring they are well-prepared and informed about upcoming and actual changes mandated by the aged care reform can help individuals make the necessary adjustments during any transition period.

Workforce training can be administered through different methods, such as in-person sessions or online delivery.

Incorporating a blend of training methods and adapting the formality of training injects variety and sparks interest in the expected value it provides, replacing monotony and complacency.

Training content can be organised formally or informally, and this choice often hinges on the priorities set by the organisation.

The content itself, demonstrates a provider’s commitment to a well-rounded learning experience, while a focus on carefully curated training will ensure it aligns with your strategic objectives and need for specific areas of skill development.

The choice between a proactive and a reactive training approach is crucial in determining how well employees grasp and integrate the training content.

Proactive training involves preparing employees in advance for future challenges, ensuring that they are equipped with the necessary skills and knowledge. In contrast, reactive training is often a response to issues or shortcomings that have already emerged.

The key challenge here is that reactive training may not always align with the long-term goals and strategic direction of the organisation. This can result in a disconnect between what the training aims to achieve and how employees perceive its value.

When organisations invest in structured and planned training, it underscores the importance they place on enhancing their workforce’s capacity. Employees are not just seen as individuals performing tasks; they are recognised as valuable assets who can contribute significantly to success. This investment demonstrates a commitment to providing employees with the skills, knowledge and support necessary to excel.



As providers reconsider their greatest asset, they should explore strategies for retaining the valuable talent they’ve invested in. Maintaining a stable and proficient workforce not only allows for the reinforcement and modelling of a desired organisational culture but also enables newer recruits to learn rapidly.

Moreover, long-standing members can be identified for further development and progression, harvesting expertise and resourcefulness. This approach makes succession planning increasingly feasible, demonstrating a forward-looking investment in the organisation’s future well before the need becomes evident.

Employees are more likely to remain with an employer that demonstrates a genuine interest in their holistic development, recognising their increasing value in skills, experience and adaptability over time.

Your commitment to workforce training and development is not only an investment in your ability to deliver quality aged care today, but also into the future.

David Flemming, Senior Consultant, Lorraine Poulos and Associates
www.lorrainepoulos.com.au

Whiddon set to transform dementia care with new microlearning program

Continuing to innovate is part of the solution

Award-winning care provider Whiddon has launched an innovative Dementia Microlearning Program aiming to redefine dementia care by addressing the Behavioural and Psychological Symptoms of Dementia (BPSD). Whiddon is a key participant in the program funded by Aged Care Research & Industry Innovation Australia (ARIIA) in collaboration with Flinders University.

Providing care across regional areas of New South Wales and Queensland, Whiddon proudly stands as the only residential home care provider in NSW to adopt this tailored microlearning model.

The 12-week Dementia Care Microlearning Program will engage 2,000 members of Whiddon’s dedicated care employees – from registered nurses, assistants in nursing, community care and support services employees, to ancillary support staff.

The initiative follows four successful pilot trials conducted in June and July this year.

The evidence-based program utilises the award-winning Forget Me Not® mobile learning application to deliver five-minute learning activities, offering practical insights into the challenges faced by aged care workers when delivering dementia care.

A recent study by the Aged Care Workforce Industry Council demonstrated the effectiveness of microlearning, with 91 per cent of participants preferring the spaced repetition approach, and 82 per cent finding it more productive than traditional eLearning modules.



Dale Feeney (left), Deputy of Care Services at Whiddon Laurieton, with a Whiddon resident.

The microlearning modules adopt an encouraging ‘coaching’ approach, allowing the program to meet the unique needs of each employee.

The repetition of micro-learning content, facilitated through the Forget Me Not® application, emphasises the importance of consistent and practical scenario-based application of clinical information within a dementia care setting.

Alyson Jarett, Deputy CEO of Whiddon, emphasises the significance of moving away from traditional methods in dementia education, stating, “As the way we care for people living with dementia continues to mature, evidence-based strategies that support residents and

clients to maximise their quality of life remain paramount.

“At Whiddon, we believe initiatives such as the Dementia Microlearning Program have the potential to transform the way we approach dementia care.”

The need for an improved approach to dementia education is highlighted by an estimated 400,000 Australians currently living with the condition. This number expected to skyrocket to over 800,000 by 2058.

Dementia care is of high importance at Whiddon, where 50 per cent of residents across its 23 aged care homes are living with a dementia diagnosis.

A 2022 ARIIA survey identified dementia as a priority topic across the aged care sector. The reliance on pharmacological responses has hindered best-practice dementia care, with non-pharmacological responses used infrequently due to a lack of workforce knowledge.

The Dementia Microlearning Program aims to bridge this knowledge gap, providing valuable insights for frontline responsive behaviour management.

Alyson says ongoing employee education is vital to achieve the best outcomes.

“With many of our Whiddon residents living with dementia, we identify employee education in dementia care as a priority, so that all our team understand the disease and its impact.

“This, combined with our relationship-based care approach, focus on

suitable environments, and a culture of learning and reflective practice, ensure we can best support people living with dementia in our care.”

Whiddon’s award-winning MyLife Model places relationships at the core of great care.

The MyLife model integrates care for residents’ social, emotional, and physical needs and is underpinned by a strong relational approach, fostering meaningful relationships for better outcomes and highly personalised care.

The real-world impact of the MyLife model and the potential of the Dementia Microlearning Program at Whiddon become apparent through the experiences of Registered Nurse and Deputy Director of Care Services, Dale Feeney.

Caring for residents with dementia at Whiddon Laurieton on the NSW mid-

north coast and serving as the primary caregiver for her husband Peter, diagnosed with dementia in 2019, Dale speaks passionately about the positive aspects of supporting individuals with dementia.

Dale emphasises, “Dementia does not mean the end of life.

“There are still adventures to be had, life to be lived. It’s how we support people to achieve this and to be positive about it in the process.”

With a commitment to transforming care, Whiddon is responding to the needs and leading the way for a more compassionate, informed and supportive future of individuals living with dementia now and into the future.

Whiddon
www.whiddon.com.au

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Would you like to build capacity in your aged care leaders but don't have the time? Then choose an accelerated learning approach.

The Leadership Accelerator Program can be completed in just three months – with an investment of just 12 hours.

For leaders in operational, clinical and corporate roles, this practical program is delivered as two interactive two-hour workshops each month – or you can purchase modules individually.

Upon completion, your leaders will have a deeper knowledge of key criteria and skills outlined in the Australian Aged Care Leadership Capability Framework – along with a renewed mindset and fresh enthusiasm.

Don't wait until your leaders are overwhelmed and exhausted, give them a helping hand today.

The Leadership Accelerator Program has been developed by Aged & Community Care Providers Association specifically for the aged care sector.

Leadership Accelerator Program

- Six two-hour workshops
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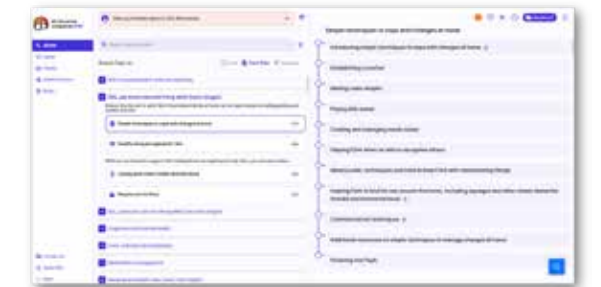
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LEADERS ENABLING LEADERS

Dementia care excellence in practice

A partnership between Astley Care and My Dementia Companion



Creating practical and structured prompts across all Care Plan domains supports our staff to develop quality care

Dementia is the second most common cause of death in Australia, impacting half a million Australians and 1.5 million caregivers, and is growing rapidly as our population ages. This highlights the urgent need for enhanced dementia care within the sector.

Astley Care is dedicated to enabling clients to lead fulfilling and independent lives in the comfort of their own homes, having made significant investments in workforce education and training.

Bridging the gap between training and practice

As indicated by the Royal Commission findings and the new Draft Aged Care Quality Standards, implementing effective dementia care demands tangible solutions that bridge the divide between training and day-to-day practice.

At Astley Care, we believe that attaining dementia care excellence means our staff deliver best practice care as part of their daily care, while receiving coaching beyond the training room.

We tackled this challenge through our innovative partnership with My Dementia Companion (MyDC).

Untangling the dementia journey to support intake and questions from families

Being a client-centric organisation, the intake process is crucial in establishing initial connections with clients and understanding their needs.

The ongoing relationship is strengthened as we address new questions and changing needs. Challenges arise with the intricate and complex nature of dementia, and the fact that the workforce often lacks a clinical background.

To bridge this care gap, we adopted My Dementia Companion's world-first comprehensive dementia journey, integrated as part of the MyDC PRO app.

The PRO app allows our staff to quickly create a unique dementia map for each client to plan and guide them through their care. The app enables quick search for care strategies solutions when issues arise, ensuring timely and practical support.

Streamlining care planning

Developing comprehensive care plans is fundamental for quality care and regulatory compliance, yet it can be complex and time-intensive.

This arises from the wide-ranging nature of dementia care, making it challenging to incorporate various permutations of recommendations into standardised care plan templates.

Creating prompts to facilitate structured discussions across all care domains is highly beneficial, exemplified by the PRO

app's Care Plan feature. For instance, when addressing daily living, prompts can guide discussions and provide solutions on topics like establishing routines, cooking safety, memory challenges and aids, as well as implementing accessible wayfinding signages, among other considerations.

This approach ensures a structured and consistent framework for our staff.

Effective documentation and evidencing care

Documenting care can be a challenge, particularly when our primary focus is on delivering care. The PRO app allows us to offer personalised care solutions with only three clicks, while creating a comprehensive record of these actions.

These records serve as tangible evidence of the care provided, particularly for the additional efforts we put forth under the Dementia and Cognition Supplement.

Furthermore, the distinctive client journey map generated in the app promotes smooth collaboration among our team members.

It also helps our responses to clients and their families are professional, thorough, consistent, and of the highest quality.

MyDC PRO as an industry tool

Streamlining workflows is crucial, especially in dementia care given its inherent complexity and the vulnerability of our clients.

We encourage our peers in the aged services industry to consider practical support measures for their staff.

You can begin by embracing the dementia journey concept, or alternatively develop your own tools to provide guidance and prompts for your team.

For those interested in MyDC PRO, contact My Dementia Companion to empower your workforce in achieving excellence in dementia care.

Laura O'Reilly, General Manager and Katie Stuart, Care Coordinator, Astley Care Nan Yu, CEO/founder, My Dementia Companion www.astleycare.com.au; www.mydementiacompanion.com.au

Strategic workforce planning

Leveraging data-driven insights and AI to bring the employee experience to life

The aged care workforce crisis presents a prime opportunity for industry transformation – commanding us to align strategy to tangible outcomes, re-design our workforce, and implement proactive strategies that pave the way for a resilient and sustainable future.

In the dynamic landscape of the aged care sector in Australia, the key to exceptional service delivery lies in understanding and optimising the employee experience.

By harnessing the power of employee experience data (EXD) and the growing realm of artificial intelligence (AI) technologies, providers can revolutionise their workforce planning strategies with deeper understanding, effective gap analysis, best-practice benchmarks and predictive analytics to deliver a people strategy with meaningful impact.

The state of aged care in Australia

Australia, like many developed nations, is facing a rapidly ageing population. Considering growing skills shortages, this demographic shift poses a significant challenge for the aged care sector, demanding innovative solutions to ensure the attraction, retention and development of a capable workforce to support the delivery of high-quality patient care experiences.

Organisations are increasingly recognising the invaluable insights that can be gleaned from EXD, coupled with the transformative capabilities of AI.

This synergy empowers organisations to make informed decisions, enhance employee engagement and drive productivity by revolutionising workforce planning – creating a more agile and responsive organisational environment capable of delivering strategically aligned outcomes.

The evolving landscape of workforce planning

Gone are the days of relying solely on historical data and intuition for workforce planning. With the advent of AI, organisations can now tap into the wealth of data generated within their own organisation and that of benchmarks within the broader aged cared ecosystem.

EX data encompasses a wide range of information, including feedback from surveys, performance evaluations, sentiment analysis, and even data from collaboration tools.

This multifaceted data is a treasure trove of insights that can be harnessed to anticipate future needs and align resources strategically.



Hayley Goodman says the fusion of EXD and AI can transform workforce planning.

Unlocking employee engagement and retention

One of the most significant benefits of utilising EXD and AI in workforce planning is the ability to boost employee engagement and retention.

Supporting the shift towards continuous feedback models over traditional annual surveys, by analysing patterns in employee feedback, organisations can identify key drivers of engagement, areas for improvement, and potential red flags requiring timely intervention.

For example, sentiment analysis tools can detect shifts in employee sentiment, allowing proactive intervention to address concerns before they escalate. This not only fosters a more positive work environment but also leads to higher retention rates, saving organisations significant costs associated with turnover.

Anticipating future skills requirements

In an era of rapid technological advancement, staying ahead of the curve is imperative for organisational longevity. AI coupled with survey data and sector benchmarks and demographics can analyse both internal and external factors to predict future skill requirements.

Utilising and analysing individual employee data, AI can identify skill gaps and recommend tailored training opportunities.

This not only enhances employee engagement, but ensures organisational visibility of the right skill sets in place for the right time to meet evolving provider demands in the contemporary care landscape.

Integrating this with data on market trends, broader sector developments and technological advancements supports organisations to proactively invest in training and development programs to ensure they remain competitive in tight labour market conditions.

This strategic foresight when leveraged appropriately, can prevent talent shortages, and can position the organisation as an employer of choice.

Enhanced diversity and inclusion efforts

EXD and AI can be instrumental in driving diversity and inclusion initiatives. By analysing data related to hiring, promotions and workplace experiences, organisations can identify areas where inclusivity efforts may be falling short.

This data-driven approach provides a clear roadmap for targeted interventions, ensuring that diversity and inclusion become a strategic imperative of both workforce planning and organisational culture initiatives.

Embrace a new approach in your workplace

The fusion of EXD and AI represents a powerful force in contemporary workforce planning, moving the approach from reactive to proactive to enable the execution of organisational strategy.

By combining and leveraging these technologies, organisations can gain unparalleled insights into their workforce, enabling them to make informed decisions that drive productivity, engagement and ultimately, the quality of patient care outcomes and bottom-line results.

Providers that embrace this synergy will emerge as agile, forward-thinking leaders in the sector – offering the opportunity for best-practice workplace experiences for our people and quality of life for our ageing population.

Above & Beyond Group can enable providers to become an employer of choice with our new aged Care EX Workforce Planning Program. Reach out to find out more.

Hayley Goodman –
People & Organisational Performance Consultant at
Above & Beyond Group
www.aboveandbeyondgroup.com.au



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Attract

Engage

Retain

Develop

Transform



Three essential people management metrics to track

Moving from 'gut feel' guesswork to savvy strategy

Data makes the business world go round, but HR has generally been slow to embrace the potential presented by workforce data and analytics.

This is changing.

Today, HR leaders are drivers of workplace culture, strategic decision-makers, and adept at designing systems of work that impact everything from customer satisfaction to the bottom line. The uptake in data-driven decision-making has made this possible.

If your organisation suffers from high employee turnover or disengaged workers, there's a good chance those challenges could have been diagnosed and remedied long before they became a potential derailers for your business – all thanks to data.

Qualitative and quantitative data allows you see the root causes of issues, rather than just the symptoms.

From absenteeism and tardiness reports to staff engagement and turnover rates, workforce management and HR management technology can provide rich insights that paint a transparent and vivid picture of your workforce.

While the sophistication of HR data usage varies widely between organisations, the following three metrics are important foundational building blocks to improve both the employee experience and business performance.

1. Attrition rate

The attrition rate is the rate at which people leave an organisation. We know that staff turnover is a major issue for aged care providers.

Complispace's 2021 report, *A Perfect Storm: What's Driving Australia's Aged Care Staffing Crisis*, revealed that 65 per cent of workers intend to leave the industry within the next five years.

Understanding the reasons for attrition can lead to informed decisions about how to improve it. Here are some questions to consider when analysing your attrition rate:

- Are people leaving voluntarily or involuntarily?
- Is attrition in line with broader seasonal trends (such as December being the most common month for people to leave a job)?
- What insights are your exit interviews providing?
- Are there trends in terms of job role, location or department?

It's easy to jump to incorrect conclusions about attrition. For example, you might assume that people are leaving because they are burnt out. That may be the case, but there might be different issues at play, such as bullying and harassment, or a lack of training and career development.

Data-driven decision-making means having a laser focus on which business activities to invest in, so you avoid fixing the entire engine when you've simply got a flat tire.

Another related metric is new hire turnover. Jobvite's *Job Seeker Nation Study* suggests if you've just hired 10 new employees, chances are that three of them will quit within the next 90 days. In a tight market, first impressions really can make a difference, so understanding why people are leaving within their first few months can shed light on your recruitment and onboarding practices.

2. Sentiment analysis

The saying "happy employees mean happy customers" is true, and employee satisfaction is even more crucial in care environments. Relying on annual or bi-annual engagement surveys isn't enough.

If you want a detailed picture of how happy your employees are, sentiment analysis is your superpower. Sentiment pulse surveys are a more effective way to gather real-time insights.

Sentiment analysis tools can help you spot opportunities for re-engagement, such as gaps in team communication and misalignment to goals.

Showing that the voice of employees is being listened to and acted upon is an essential ingredient when building a culture of trust.

3. Performance tracking

Performance management is the link between how workers are assessed, engaged, developed and rewarded.

By tapping into progress towards performance goals in real time, you can quickly identify training, motivation and productivity issues.

Performance data helps identify trends over time. For example:

- Is there a time of year when people naturally dip in productivity?
- Do major company changes or operational updates improve or detract from teamwork?
- Does a drop in quality of work for one employee have a ripple effect on nearby team members?

Strategic HR is only possible when you lean on savvy technology that takes the guesswork out of your people management – and that's ultimately a win-win for your business and your frontline workers.

Humanforce
www.humanforce.com

The NEW ACCPA Governance Portal

Supporting good governance in aged care

Are you an aged care provider in need of governance support?

ACCPA has partnered with Convene to develop the ACCPA Governance Portal – a private, secure online hub for managing your governing body and committee meetings.

Key features:

- High-level encryption
- 24-hour support
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- Drag and drop files to create agendas
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Pricing is based on number of users for an annual subscription and ACCPA members receive a 20% discount

The ACCPA Governance Portal is powered by Convene

Contact quality@accpa.asn.au for more information and a free demonstration

Changes to work health and safety regulations

The importance of supporting psychosocial health and mental wellbeing in your workforce

Aged care is an industry that comes with a heavy emotional load. Individuals who are drawn to working in this sector are typically dedicated, empathic, patient, adaptable and compassionate.

These are incredibly important characteristics for those looking after a vulnerable population who require care and support. But it may be argued that these qualities put aged care employees at high risk of being impacted by psychological and social hazards.

Compared to physical injuries, psychological injuries take longer to heal, require more time off work and have a higher financial cost. Physical injuries themselves, especially chronic pain, can lead to secondary psychological injuries.

As such, it is especially important that the mental health of aged care workers is considered when assessing the safety of a workplace.

In the aged care sector, the focus is on the safety and wellbeing of older Australians. However, this care cannot be provided if the health of those giving the care is not maintained.

While aged care workers are generally resilient, often facing hardships without complaining, putting other's needs before their own, and being resigned to working in an industry where resources are limited, their role comes with the heavy burden of responsibility.

According to Worksafe Victoria and the National Ageing Research Institute, aged care employees may be at risk of stress, occupational violence, emotional exhaustion, burnout, insomnia, compassion fatigue, depression, anxiety and compromised physical health.

In line with this, in July 2023 Safe Work Australia made changes to work health and safety regulations, and employers are now responsible for managing psychosocial hazards in the workplace.

This means organisations are required to identify psychosocial hazards, then eliminate or minimise them, and reduce the risk to workers that these hazards may bring about. The changes bring the management of psychosocial health in line with physical health, and highlights the importance of protecting workers' mental wellbeing.

Some hazards that may result in harm to employees in the aged care sector include:

- intense responsibility
- long work hours
- reduced job control
- poor change management
- caring for individuals with high needs who may be cognitively impaired or have behavioural issues

- a heavy administrative burden, including documentation and clinical handover
- a sustained emotional effort.

Aged care providers should work collaboratively with their staff to identify psychosocial hazards, and put strategies and control measures in place to reduce risk to employees. They are required to document incidents, and regularly review the workplace to ensure they are compliant with legislation, and their workers are protected.

People at Work (www.peopleatwork.gov.au) is an Australian government website that provides valuable information on creating a psychologically healthy and safe workplace. The People at Work process is a five-step procedure to manage psychosocial hazards, which includes a free and validated psychosocial risk assessment survey that can be used to help guide the process of ensuring a workplace is mentally healthy.

Strategies organisations can implement to minimise the risks caused by psychosocial hazards include:

- support from supervisors and senior staff
- the availability of debriefing and counselling for employees
- a stress management policy

- the reduced need for overtime and heavy workloads
- clear communication and processes for change
- ongoing training and education for staff
- a process for managing aggressive or violent patients
- an effective crisis management process
- adequate security, such as a process for ensuring the building is locked at night, a visitor's logbook, and mandatory duress alarms for staff
- ensuring employees work in pairs
- the provision of support following the death of a patient or exposure to a traumatic event
- the promotion of self-care and sleep hygiene within the organisation.

Extending the focus of care to staff within the aged care sector will ensure a healthy and solid foundation from which care can be provided. It is one way of recognising the value of aged care workers, and acknowledging that the qualities they possess are as important to protect as they are to have.

Deborah Shand, Clinical Psychologist and National Psychology Services Manager, Rehab Management (part of Arriba Group)
www.rehabmanagement.com.au

Foundational Leaders Program

Coaching for new and emerging aged care leaders

At ACCPA, we're always looking for ways to help aged care leaders thrive.

Our Foundational Leaders Program is a new offering for leaders at the beginning of their journey in the aged care sector.

This ideal introductory program will welcome aged care leaders into the industry, in a nurturing and supportive environment, and point them in the right direction for success.

Participants will receive industry-specific coaching, as well as the opportunity to connect with peers and expand their support network.

There are six online workshops (modules) delivered over 18 weeks, plus the invaluable Care Industry Leadership Capability Assessment (CILCA360), which will give participants insight into their own unique strengths and capabilities.

Six modules:

- Organisational Culture
- Communicating with Confidence and Empathy for Maximum Engagement
- Strategic Habits and Armour of Self Care
- Clinical Care Provision and Reform
- Embracing Change, Future Proofing and Managing Risk
- Business Acumen

To find out how we can support your leaders email training@accpa.asn.au or see us at www.accpa.asn.au/professional-development





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☎ 1300 419 119

✉ team@providerassist.com.au

💻 providerassist.com.au

AN-ACC: one year in review

An analysis of industry trends

With one year passed since the establishment of AN-ACC funding, in this analysis we will investigate industry trends from 1 October 2022 to 30 September 2023 from our MyVitals dataset.

Variable AN-ACC funding and rate change

The average variable AN-ACC funding per resident at Oct-2023 is \$134.35, a \$21.96 Increase from Oct-2022. However, \$14.53 of this increase is due to the additional funding introduced by the 1 July AN-ACC Starting Price increase.

Our data shows that Cost of Revenue Turnover (CRT) – where funding declines due to appropriately classified residents departing at higher funding than new admits – has increased each quarter.

While this might appear to indicate reclassification initiatives cover CRT, we believe this is not representative of effective reclassification programs across the industry, but rather evidences the significant underfunding that existed when AN-ACC started.

This time last year, AN-ACC was new and many shadow assessments were quite old and needed reclassification by the time 1 October arrived. As a result, residents were departing on lower AN-ACC than they should have.

In addition, our funding audits, when extrapolated to the industry, show the industry is still underfunded by about \$546.3m.

Care minutes

Some providers are still divided about strategies to adopt the mandatory care minute requirements.

We believe that resident care and outcomes should always be the priority in this area, and that ensuring you are appropriately funded for the care you need to deliver is the foundation of being able to do this.

The Australian Government, through its Department of Health webinars, has been very clear in saying a failure to meet care minute targets will not be viewed in isolation, but as a source of intelligence that helps them build a picture of risk. They also said they expect providers to have a plan to manage the root cause of not meeting their care minute obligations, to eventually meet the required targets.

We, and the Government, are under no delusion about the complexity of attracting a skilled workforce in the current climate, and an agency solution to meet the requirements is certainly not sustainable.

On the surface at least, we are seeing that regulatory action will not be taken on care minutes alone, so long as you are

compliant in other areas and have a workforce strategy in place to work towards meeting the requirements.

Occupancy

There has been an overall decline in the overall occupancy rate of residential aged care since the 2015-2016 financial year.

However, there has been an uptick of 3.4 per cent in permanent occupancy, to 85.3 per cent, during this period. Permanent occupancy is at 89.1 per cent when including respite beds.

Resident workflow

Since October 2022, initial classifications have increased 16.3 per cent, departures have increased by 24.1 per cent and reclassifications have increased by 11.6 per cent.

In Quarter 4 2022 the average annualised loss per departure was \$9,950 while in Quarter 3 2023 the average departure loss was \$15,400. To counter this loss a robust reclassification program must be in place.

The gross daily impact of CRT on clinical revenue since October 2022 is as follows:

- additional \$3.87m daily funding from initial classifications
- loss of \$5.16m daily funding from departures with initial classifications
- additional \$1.12m daily funding from reclassifications
- overall net loss of -\$177.7k of daily funding, or on average -\$220 per day for a facility (the equivalent of funding for one resident).

This can be rectified through an active reclassification workflow. Due to the newness of AN-ACC, we suggest that departed residents during this period may have been under classified, and so, expect the cost of CRT to grow, resulting in an even larger shortfall.

Take a closer look

The highlighted challenges may be impacting your organisation, but are masked by the low starting point at the beginning of AN-ACC and the significant rate change.

We encourage aged care providers to reflect on the first 12 months of AN-ACC, and what that means for your business.

To help you, Provider Assist has prepared a First 12 months of AN-ACC Report – reach out to request one for your organisation.

Peter Morley, CEO & Co-owner,
Provider Assist
www.providerassist.com.au

Key ESG considerations for FY24

Climate and nature disclosures

Environmental, social and governance (ESG) is a holistic view of sustainability that extends beyond just environmental issues. While it is now considered ‘business as usual’ for organisations globally, recently there has been a steady stream of new regulatory requirements under the ‘E’ of ESG.

Two of these key regulatory movements are likely to impact organisations in Australia, and aged care providers should be prepared.

Mandatory climate impact disclosures

On 23 October 2023, the Australian Accounting Standards Board released the draft Australian Sustainability Reporting Standards (‘ASR Standards’).

These are the Australian adoption of the International Sustainability Standards Board (ISSB) Standards released on 26 June 2023, which were released to create a global baseline for climate and sustainability reporting.

The ASR Standards will apply to for-profit and not-for-profit entities.

In the consultation paper released by the Australian Government on 27 June 2023, concerns were raised about whether these standards should apply to not-for-profits due to the significant financial and resourcing requirements to meet these mandatory disclosures.

The AASB has confirmed that the standards will apply to not-for-profits but with a cap on the extent of the disclosures required.

Accordingly, all organisations that meet the reporting thresholds will have to disclose material information (i.e. information that could reasonably be expected to influence decisions of the users of financial reports) about their climate-related risks and opportunities that could reasonably be expected to affect the entity’s cash flows, access to finance or cost of capital over the short, medium or long term.

Organisations will be required to comply with the ASR Standards through a phased-in approach based on meeting the compliance thresholds as outlined in the Consultation Paper. (See Table 1.)

Table 1: The ASR Standards will be phased-in over several years.

Year of application	Criteria
FY2025	Entities required to report under Chapter 2M of the Corporations Act that fulfill two (2) of the following criteria: ■ Consolidated revenue: ≥ \$500 million ■ Consolidated gross assets: ≥ \$1 billion ■ ≥ 500 employees AND entities required to report under Chapter 2M of the Corporations Act that are a ‘controlling corporation’ under the NGER Act and meet the NGER publication threshold.
FY2026	Entities required to report under Chapter 2M of the Corporations Act that fulfill two (2) of the following criteria: ■ Consolidated revenue: ≥ \$200 million ■ Consolidated gross assets: ≥ \$500 million ■ ≥ 250 employees AND entities required to report under Chapter 2M of the Corporations Act that are a ‘controlling corporation’ under the NGER Act and meet the NGER publication threshold.
FY2027	Entities required to report under Chapter 2M of the Corporations Act that fulfill two (2) of the following criteria: ■ Consolidated revenue: ≥ \$50 million ■ Consolidated gross assets: ≥ \$25 million ■ ≥ 100 employees AND entities required to report under Chapter 2M of the Corporations Act that are a ‘controlling corporation’ under the NGER Act.

Two of the key disclosures that reporting entities will need to make under the ASR Standards are:

1. Total greenhouse gas emissions, separated into Scope 1, Scope 2 and Scope 3 emissions. There is a one-year reprieve from reporting on Scope 3 emissions.
2. Climate resilience assessments against at least two possible future climate states (i.e. future global temperature rises).

One of these must be 1.5 degrees of global warming above pre-industrial levels.

Nature impact disclosures

Recently, the Taskforce for Nature-Related Financial Disclosure Standards (‘TNFD Standards’) were released as a risk management and disclosure framework to assist organisations with assessing their impacts, dependencies, risks and opportunities pertaining to nature and how it is strategising, measuring, managing and targeting improvements in this space.

For example, under the TNFD Standards, organisations must describe their nature-related dependencies, the impacts that their organisation has on nature and the risks and opportunities that nature has on their business model, value chain, strategy and current and financial planning.

The TNFD Standards are voluntary at this stage. However, we are expecting disclosures based on the TNFD Standards to be made mandatory in the not-too-distant future and incorporated in a similar way to the ASR Standards.

Act now

The focus on the environmental impact of organisations, and associated regulations, is moving fast.

Our key message is: if you are likely to be required to comply with mandatory disclosures, start preparing now.

Aged care organisations have complex supply chains and operations, often across multiple sites, which can make the data gathering side of these disclosures time consuming and costly.

To help with your planning and preparation, getting the right advice and support is essential.

The ESG Team at Cowell Clarke – awarded the Australian Law Awards winner for the Commercial Team of the Year in 2023 – can assist you in assessing your compliance requirements and helping you develop a reporting plan.

Emma Peters - Associate Director & Alexandra Kenny - Associate, Cowell Clarke Commercial Lawyers
www.cowellclarke.com.au

Cowell Clarke is your reliable Modern Slavery and Environmental, Social and Governance (ESG) Partner in Aged Care.

With the incoming changes to the *Modern Slavery Act 2018* (Cth) and broader ESG-related regulatory reform, stay informed about new ESG obligations, mandatory reporting criteria and how ethical and sustainability-related supply chain risks impact the aged care sector.

Cowell Clarke combines expert legal advice and automated due diligence technology to ease the compliance burden and streamline reporting.

Key Risk Areas for Aged Care



Impending mandatory climate and sustainability disclosures



High risk supply chains for modern slavery including cleaning, linen and labour hire



Greenwashing (and other forms of corporate whitewashing)



Modern slavery reporting compliance obligations



Whistleblower policies and compliance



Contact us: cowellclarke.com.au/contact

Embracing ‘moneyball’ insights for aged care

A new take on AN-ACC metrics

As a Founder of Mirus Australia, I have been fortunate to gain invaluable insights throughout my career. The lessons I learned while working at US tech company IBM (SPSS) in the early 2000s, including my experience collaborating with the Oakland Athletics, have provided me with a unique perspective on the aged care sector’s transformation.

The ‘Moneyball’ phenomenon in baseball, which revolutionised the traditional player recruitment process, was based on empirical analysis of player performance, and it’s a concept that I believe holds significant promise for the Australian National Aged Care Classification (AN-ACC) model introduced just a year ago. One quote by Billy Beane resonates profoundly with the current situation in the aged care sector:

“We need to change the way we think about the game.”

AN-ACC, now intricately tied to mandated care minutes and funding, necessitates a shift in our approach, just as ‘Moneyball’ did for baseball.

Our sector is now navigating a new landscape where care minutes and funding are closely linked, and the conventional methods of revenue maximisation are no longer sufficient. We must shift our focus towards a more data-driven approach, with a deep emphasis on workforce management and a keen eye on AN-ACC metrics.

To successfully transition into this new era, we need to restructure our business units and promote collaboration among admissions, rostering and funding teams. This approach allows us to develop business scenarios based on

both historical data and predictive AN-ACC data.

The key is to gain control of empirical data and use it as the foundation for our operational planning, ultimately placing us in control of AN-ACC.

AN-ACC Forecasted Assignments (AFA)

One of the critical AN-ACC metrics introduced is the AN-ACC Forecasted Assignments. This metric measures the percentage of consumers with forecasted AN-ACC classifications at a service, enabling providers to predict their care requirements accurately by having a complete data set.

An organisation’s AFA should always be set as close to 100 per cent as possible. Implementing a ‘Moneyball’ approach in a new world of aged care metrics entails using data analytics to enhance our predictive capabilities.

By analysing an empirical data set across our services, we can make more precise forecasts, thereby optimising resource allocation and care delivery.

Predicted vs. Achieved Rate (PvAR)

The Predicted vs. Achieved Rate is a pivotal metric that assesses the accuracy of a service’s AN-ACC predictions in relation to the assigned outcome by the Department’s Assessment Management Organisations.

Our aim should be to maintain a high PvAR, indicating that we are effectively aligning our resources and workforce with the actual care needs of our residents. Achieving this alignment requires unwavering commitment to data-driven decision making and an ongoing process of improvement, but it also allows for the business to model forward looking



Robert Covino is encouraging the aged care sector to take a ‘Moneyball’ approach to AN-ACC.

scenarios on ‘off claim’ AN-ACC data with a high degree of certainty.

If your PvAR is 98 per cent, then your decision scenario is 98 per cent accurate. You are now in control of AN-ACC.

Entitlement Efficiency Rate (EER)

The Entitlement Efficiency Rate is a critical measure that quantifies the achieved margin on a service’s government-funded care entitlements. It reveals how efficiently financial resources are managed in the context of the direct care time being provided.

Maximising the EER necessitates having a strong PvAR, cost-effective roster delivery and strategic resource allocation. The goal is to deliver exceptional care and remain compliant to care minute targets without overspending, thereby maximising your EER.

In closing, the ‘Moneyball’ approach, which transformed baseball, now offers a guiding light for the aged care sector, particularly in the context of the AN-ACC model. By embracing these new metrics and adopting a data-driven approach, providers can ensure they are in control of their operations and compliance.

Just as ‘Moneyball’ changed the game of baseball, we have the opportunity to reshape aged care for the better. By harnessing the power of data analytics, fostering collaboration across business units, and aligning resources with care requirements, we can ensure care quality, efficient workforce management and financial prudence.

Ultimately, this transformation benefits both providers and the elderly individuals for whom we provide care.

Robert Covino, Co-Founder, Mirus Australia
www.mirusaustralia.com

Managing your costs in an inflationary environment

How to maximise every dollar

Now, more than ever, the need for aged care providers to develop a culture of cost reduction is paramount. Supply chains have experienced major disruption, and on top of service impacts, all organisations are feeling the pain of inflationary cost pressures.

It’s not all doom and gloom in relation to cost management, but managing costs in an inflationary environment does require action. The alternative, doing nothing, will guarantee your costs will continue to rise sharply for the foreseeable future.

Actively managing your cost base will help to ensure that you are maximising your ability to deliver improved care outcomes for your residents and clients.

Ensure you have the right suppliers in place

A good starting point is to review your expenditure, quality and service levels across your key suppliers of goods and services. Kick-off projects to test the market for better pricing or alternate supply.

Issue a Request For Proposal (RFP) to potential new suppliers and ensure you’re comparing ‘apples with apples’. Remember to evaluate the total cost of each alternative, including extra costs such as freight and storage.

Build supplier relationships

Once you have found the right supplier(s), it’s important to develop a productive relationship to ensure all parties benefit. In difficult times, suppliers look after customers with whom they have built quality relationships.

To maintain a positive working relationship, set up regular times to meet, and discuss issues in an open and honest way.



Agree on a standard ordering process, adhere to payment terms, and keep track of suppliers’ performance through agreed Key Performance Indicators (KPIs).

Negotiating and managing contracts

Whether re-negotiating with existing suppliers or commencing new agreements, it’s critical to document requirements and KPIs where appropriate.

Along with the quality and service you specify, the following contractual elements can impact overall costs:

- volume rebates
- delivery costs
- payment terms
- minimum order fees
- agreed future cost increases.

Explore cost optimisation

Once good supplier relationships have been established, you’re ready to discuss cost optimisation. By listening, collaborating and compromising, you can develop partnerships that ultimately lead to a win-win for all involved.

Seek supplier ideas to reduce waste or substitute for cheaper alternatives, and ask them what new technology is available.

You can also reduce delivery frequency to reduce freight costs, ask for bulk discounts or early payment terms,

and increase volume discounts by consolidating your product range.

Control what you can control in your organisation

You may have the cheapest supplier and great supplier relationships, but in a tough trading environment, you need to also be looking internally to control processes and behaviours more effectively.

Review inventory levels and ensure you are using everything that is ordered, and work to prevent maverick or unapproved spend that can result in wastage.

Sacrificing quality to save costs can be counterproductive, but in some cases you don’t need the best quality product, and it’s important to identify where savings can be made.

Centralise disparate purchasing and warehousing functions, to achieve savings in staff, processes and technology, and get your entire team to adopt a mindset of savings.

Get expert advice

As one of the world’s leading cost management specialists, Expense Reduction Analysts (ERA) are experts in optimising our clients’ supply chain and processes, finding innovative suppliers and providers to meet our clients’ needs.

ERA operates in over 60 countries with a network of more than 700 consultants, delivering expertise in a wide range of business expenditure categories.

If you could use specialist support in reviewing and managing your supplier costs, please get in touch.

David Rounsevell, Managing Director – Expense Reduction Analysts, Asia Pacific
www.expensereduction.com

Maximising home care profitability

Uncovering hidden opportunities

The Quarterly Financial Snapshot of the Aged Care Sector (QFS) and the Aged Care Financial Performance Survey (ACFPS) provide interesting insight into the financial performance of the home care sector.

While aged care organisations are focused on the critical and complex issues in the residential sector, many are overlooking the opportunities to increase cashflow in their home care businesses.

The ACFPS indicates the average home care organisation is generating an operating result of 4.9 per cent of revenue (or 7.2 per cent in the QFS which has a more comprehensive dataset). The average top quartile performance is achieving 14.6 per cent.

Within the ACFPS dataset, these results suggest that the average organisation could be producing around \$100,000 additional cashflow for every million they earn in revenue.

However, many home care businesses are underperforming. The fundamental problem is that many aged care organisations are geared to focus on the more critical and complex problems in the residential sector. This leaves the home care business without senior executives specialising in home care performance, and without bandwidth to understand and address the opportunities.

Many organisations make the mistake of being satisfied with their home care performance simply because it is not making losses or believe that a result of around 5 per cent is acceptable. It is therefore not high on their list of priorities to address.

Yet, the path to achieving this additional cashflow is not as complex as it is in the residential care sector.

Home care businesses are not capital intensive. They are human resources

businesses, that thrive in an environment of good culture and business process.

Achieving additional cashflow is therefore about investing in good leadership, business intelligence, processes and culture. Our experience is that for most organisations, it is low hanging fruit that is not being exploited.

Pride Living has undertaken several reviews of home care businesses and has identified a number of drivers of financial success.

In most cases, organisations have maintained discipline around the challenges that they understand. These include overhead costs, pricing and care management costs. These are easily identifiable line items on traditional profit and loss statements.

The real action however in the home care business is in the gross margin. There are many items that can affect the gross margin and there is a complex interplay between them. Some of these factors include:

- travel
- overtime
- broken shifts
- demand and supply management
- skills matching
- budget utilisation.

The gross margin in the home care sector, unlike in most businesses, is the creation of individual decisions made by a relatively small number of schedulers on a moment-by-moment basis.

These are not highly paid employees with a strategic view of the impact of these decisions, nor an in-depth knowledge of the underlying legislation that they must comply with in order to control cost and risk.



Jason Howie says there's a lot of opportunity for home care providers to expand revenue.

Consequently, the approach to leadership, culture and business process has a significant impact on the results that are achieved.

In a recent engagement, Pride Living undertook a review of a home care package business for an organisation with revenue between \$50-\$100m.

We were able to identify around \$14m of profit opportunities that required a change to management approach, some investment in business intelligence, some policy development and a bit of restructuring. In other words, simply a more disciplined approach to their 'Business as Usual' processes.

This is by no means an unusual result from a home care business review.

There are many businesses that are indicating they are unwilling to address their home care businesses until they have more clarity around the home care reform program. This however is a mistaken approach.

There is no reform program that has been proposed or implemented in any of our human services markets in Australia in the past 20 years where businesses do not benefit from efficient business operations.

We recommend getting the business machinery in your home care businesses working as efficiently as possible as a prerequisite to entering the next phase of the home care industry journey.

The more efficient and profitable you are, the more flexibility you will have regarding how you address the specific market-based challenges created by the reform program.

Jason Howie, Partner – Strategy & Governance, Pride Living
www.prideliving.com.au

The importance of wage reviews

Prevention is better than cure

In 2022, the Fair Work Ombudsman performed over 4,000 investigations in Australia resulting in the recovery of approximately \$532 million of unpaid wages and entitlements.

While recent media has focused on large retailers and hospitality, the issue of wage underpayment appears to impact all sectors of the economy, including aged care.

We have seen several media reports relating to underpayments in the aged care sector as recently as September 2023 and we expect instances of underpayments to rise, attributable to factors including but not limited to:

- The application of the 15 per cent wage increase to aged care workers from June 2023.
- The complexity of navigating the various Awards and Enterprise Agreements.
- The nature of aged care employment which includes a large casual workforce, as well as the requirement for shift work giving rise to loading, shift penalties and allowances.

Often underpayment issues emerge because of:

- A misinterpretation of the appropriate Award or Enterprise Agreement (Wage Instrument) to apply, or assessing the Enterprise Agreement under the incorrect Award, rendering the better off overall test irrelevant.
- A misinterpretation of the critical elements of the prevailing Wage Instrument.
- An underinvestment in time and attendance or payroll technology, meaning it does not capture the required data to appropriately characterise the shift hours and associated allowances that may apply.

Employers have a responsibility to ensure they are applying the correct industrial instrument to avoid unknowingly paying employees under the incorrect regime.

A wage review should include an assessment of whether the correct industrial instrument is being applied, and each employee's classification within the industrial instrument, to ensure that employees are receiving the appropriate base rate, based on the work being performed and other attributes, such as time in their role and certification and qualifications obtained.

Once a review of industrial instrument coverage and employee classification is done, only then can employers review the mechanics of how they are applying the critical elements of the prevailing Wage Instrument, such as application of overtime, allowances, shift penalties and loadings which will



all be unique to the Wage Instrument (and potentially to each classification within the industrial instrument).

The common issues we see with these elements of pay relate to an underinvestment in the payroll team, by under resourcing or lack of experienced personnel, which is a key indicator of high risk for non-compliance.

As more wage underpayments are publicly brought to light, businesses should be assessing whether their payroll processes and procedures are sufficiently sophisticated to correctly interpret and implement relevant Wage Instruments.

Businesses that don't, not only face the prospect of having unknowingly underpaid their employees, but also a costly recalculation exercise to overcome shortcomings in their data to calculate backpay in a defensible and cogent manner.

As always, prevention is better than a cure. In order to ensure your payroll system is effective and accurate long-term, it's important to be diligent about the following undertakings:

- Perform an end-to-end review of your payroll function and identify any potential competency gaps, such as technology, staff competence or information.
- Map how payroll information flows from function-to-function, including responsible employees, potential bottlenecks or where an absence of review exists.
- Perform annual and periodic reviews of relevant Wage Instruments and examination of adherence to primary clauses.
- Perform random sample checks of payroll outcomes, to confirm calculation basis and accuracy.
- If required, perform a full payroll audit.

McGrathNicol's payroll specialists assist in early detection of any potential issues within your payroll function and in streamlining payroll processes, making them appropriate and efficient for business requirements.

Siobhan Hennessy and Janine Thompson, Partners, McGrathNicol
www.mcgrathnicol.com



Investment strategies for seniors' living organisations

A comparative case study

Having the right investment strategy is critical for long-term financial viability and business success.

Here we look at two hypothetical seniors' living organisations who both had balance sheet reserves of \$5 million five years ago.

One decided to invest in term deposits and the other utilised an investment portfolio. The organisation that chose the investment portfolio took a conservative approach with a 60 per cent allocation in more defensive assets such as bonds and a 40 per cent allocation in more growth targeting assets such as company shares.

Over that period, we've had several global events that have negatively impacted markets including geopolitical tensions between the US and China, presidential elections, COVID-19

lockdowns, Russia's invasion of Ukraine as well as soaring inflation and the corresponding rising interest rates, all of which impacted investments.

Term deposit only

As you would expect, the term deposit investor maintained their initial investment of \$5 million. They also received \$321,000 of income, an average of \$64,000 per year; however, this was not evenly distributed.

Back in July 2018, the Australian interest rate was set at 1.5 per cent which meant the income from term deposits was higher. For the first financial year an average term deposit investor would have received \$109,000; however, as interest rates fell, this dropped, hitting a low of \$22,000 in 2020/21.

Interest rates are now much higher with the current cash rate at 4.1 per cent which means income streams have

picked up, but it's still not at the level of investment markets or inflation.

Conservative investment portfolio

The conservative investor in comparison did much better, earning an extra \$121,000 of income as well as \$542,000 in capital growth. The income was smoother over that period because of the diversification across different income generating investments.

However, the value of the capital did fluctuate, and this is a common characteristic. It is therefore critical your board gets comfortable with the idea of some capital losses over shorter time periods prior to investing. This will help protect you from crystallising losses unnecessarily in the future.

It is also important to note that not all investments are equal. The blend of assets can be changed to meet your board's risk tolerance. Investment

portfolios on the stock market will be affected by market downturn, but then bounce back over time.

The rise and fall of the value of portfolio depends on the proportion that is in growth assets, with conservative investment portfolios being less affected, with 40 per cent in growth assets.

If we take the Global Financial Crisis as an example, Australian equities had a peak to trough loss of almost 50 per cent. In comparison, the conservative portfolio only fell by 10 per cent.

It is important to note that while equities are more volatile, they also have much higher expected returns over the longer term. They therefore have an important role to play in most investor portfolios and it's why the longer you intend to invest for, the higher allocation you can look to include. It is then a question of whether that level of risk over the shorter term is tolerable.

Get the right advice

At Perpetual Private, our expert advisers can help you ensure the assets on your balance sheet are put to work in a way that is suitable for your organisation.

We specialise in investment governance and management for senior living organisations and have been earning the trust of our clients for more than 130 years.

We pride ourselves on our long-standing client relationships and will always strive to provide you with reassurance that your assets are in safe hands so that you can focus on what you do best.

**Anthony Hamawi, Manager,
NFP and Aged Care, Perpetual Private**
www.perpetual.com.au/seniorliving

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www.accpa.asn.au/professional-development



Keeping retirement villages connected as 3G phased out at Bolton Clarke

Responding to the risks and opportunities through communication, collaboration and coordination

With the 3G network being decommissioned at the end of June 2024, aged care providers need to prepare their sites to maintain the tech features that support health and wellbeing, and facilitate a smooth transition to 4G.

This is something Bolton Clarke have been working towards over several years. When the closure was announced in October 2019, we recognised the impact and risks on resident safety in our 38 retirement villages located across Australia, and set about taking action.

Not just about avoiding problems, we also saw it has an opportunity to add additional features to benefit our residents and village managers.

As a result, we created a Digital Independence team to respond to these risks and opportunities. This is our story, the experiences and the learnings from our 4G upgrade project.

Key considerations

The main concerns in relation to the closure of the 3G network were:

- working within a limited timeframe and ensuring completion well before the deadline, to avoid log jams due to high demand from other aged care providers.
- hardware could become a challenge due to demand and potential supply, with disruption of supply chains due to global events.
- considering the whole range of devices that might need attention, such as fire alarms, security systems and cameras, front gates, lifts, EFTPOS machines, telemetry and other communications channels.

The challenges were not the technology

The introduction of 4G meant our current 3G resident alarms would no longer work. The problem looked like a technical

one but as the program developed, the communications and processes became more and more important.

Of course, the technology had to be 4G alarms and link to a 24x7 Emergency Response Centre, but residents flagged other things as important.

Fast answering of their calls to the Emergency Response Centre, being mobile in the community while still connected to the Emergency Response Centre, and not having the annoying monthly test calls, were issues we sought to address with the Bolton Clarke InTouch solution.

With these concerns met, the rollout started. Again, the technology was not the most important element for the project milestones and timings.

Involving village residents

The team found that getting agreement from the village residents took time and involved a special resolutions or resident committee approval (depending on state-based legislation).

Many residents in the villages had a background in business with broad business experience that they applied in their committee roles for the benefit of the village community. They brought professional concerns and it was important to collaborate with them to gain support.

Clear communications with the residents avoided future misunderstandings and the need for multiple visits. The team ensured residents had information about:

- line of sight coverage distances for the pendants
- battery life length on mobile alarms
- pressing alarm button for over 0.5 seconds to activate
- the need for 24x7 alarm monitoring in the community
- confidence to contact the Emergency Response Centre.

The initial process for residents signing contracts on 'signing days' took several days for each village and additional time to organise. The process was changed to allow DocuSign and for the resident to be able to sign on the day of installation, saving time and offering convenience.

The team also found additional time was needed to organise contractors to remove old alarms and make any related repairs to residents' units.

Another early challenge was getting the requirements clear for common areas such as pools, barbecues and toilets, which resulted in a smooth process for installation.

"The transition to install was smooth and the residents had little disruption," says a Bolton Clarke Village Manager from the Gold Coast.

"The install included the pool, shared areas, toilet and community centre. The residents have benefitted due to monitoring of falls and speed of response to an emergency. The monitoring has improved the safety & wellbeing of our residents."

An opportunity for future improvements

The most interesting discussions were with residents and villages about future needs and what they wanted. We needed

to ensure the solution could deliver these because the residents' views were paramount rather than technology for technology's sake. Some future suggestions:

- InTouch Plus – Smart Home monitoring
- option for smoke alarm integration using fire alarm sound with Alarm Voice Extender
- automated blinds
- integration with Google for home automation
- IPS - Internet Service Provider for the village
- robotics
- telehealth to help residents stay independent in the village.

For villages embarking on a 4G upgrade project engagement, processes and communications are just as important as the technology.

Our Digital Independence team is now offering assistance to other organisations undertaking 4G upgrades. Reach out to them if you need help.

Anthony Bacon, Digital Product Manager – Operations, Bolton Clarke
www.boltonclarke.com.au



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Technologies for better care

Evidence-based learnings from user-led design sessions

There’s no doubt that technology is helping providers address challenges faced by the aged services industry, and none more so than those that impact care.

Based on our user-led design sessions with operators, one theme emerges strongly – technology supporting a desirable workplace for nurses and carers.

Workforce shortages coupled with the regulatory burden for 24/7 registered nurse minutes mean operators are focused on staff retention through desirable work practices and environments.

Our work with operators highlights the role that care monitoring technologies play, and emphasises the importance of getting it right and the risks of getting it wrong, when it comes to workflows and processes that support nurses and carers.

Demands of *ad hoc* and episodic care

Our collaboration has highlighted a need for a shift in the way care is administered, managing the demands of both *ad hoc* and episodic care effortlessly.

This transition allows carers to seamlessly move from attending to one resident’s needs to the next. A central triaging of help calls with voice response eliminates interruptive aspects of care delivery, such as residents inquiring about the timing of their scheduled care.

Simple rules governing suppression and prioritisation reduces overall workload, and the transition ensures that the nearest and available carers are promptly notified of *ad hoc* care needs, streamlining the entire process.

Knowing, not data, is valuable

The concept of ‘knowing’ or ‘situational awareness’ is vital. An appropriate care response will bring together the carer’s understanding of the residents’ routines and patterns with insights from sensors, including bed exits, wandering, fall detection, sleep patterns and vital signs.

Coordinated with the deployment of the nearest and available staff and carer apps with real-time information about the resident they are about to visit, this enables a personalised, informed and speedy response.

Quieter facilities with fewer alarms

For staff working in an older facility with traditional call buttons, they might be responding to dozens of alarm events, and if



Technology like eevi Care’s dashboards and real-time reporting can be a game-changer.

you add traditional bed sensors, floor pads, and the like, this might rise to hundreds of noisy events – culminating in a lot of dinging of pagers and annunciators.

But no one wants to work in a noisy environment, or live in one.

If carers are working with remote care monitoring, with flexible rules-based suppression, you can manage alarm volumes down to a minimum and provide quieter response and delivery.

Carer apps on phones minimise the noise for residents and carers alike. Alarm events are triaged, nearest carers dispatched to help, and all subsequent alarms and events suppressed until the care delivery has completed.

This equates to quiet, calm care.

Reporting and record keeping

Operators need meaningful reporting and record keeping, not only for regulatory compliance and care minutes but also for the improvement of services and ability to offer proactive care.

User-led design sessions have highlighted the need for user-friendly record-keeping systems, simplified dashboards and real-time information that enhances data accuracy and accessibility, ultimately benefiting residents and care operators alike.

Technology driving change

These evidence-based learnings underscore the pivotal role of technology in keeping aged care workers engaged and in the workforce.

From seamless management of *ad hoc* and episodic care, to creating quieter environments and delivering insightful reporting, these key learnings pave the way for enhanced, efficient care delivery.

In the face of rising demands for higher standards of care, declining profitability, and workforce shortages, inaction is a costly choice.

The aged care sector is embracing new approaches, with technology serving as a driving force for this transformation. We welcome the opportunity to collaborate and drive this positive change.

David Waldie, Founder & Managing Director,
eevi
www.eevi.life

Eight must-haves of digital transformation

The success factors for aged care

This is an exciting time as the aged care reforms are taking effect – and digital transformation will be essential for any organisation seeking to remain financially sustainable.

Digital transformation is not new. Industries such as finance, manufacturing and retail are all examples of where digital transformation has reshaped entire businesses, helped improve efficiencies, scaled and improved profitability.

The delays of the health and aged care sectors to use many of the now well-proven technologies are understandable. We are dealing with people’s lives so there is no room for error on critical issues that could jeopardise safety.

There are also compliance and regulatory requirements, including security, privacy and confidentiality, that are essential and non-negotiable.

But we can learn a lot from the industries that have gone before us.

1. Digital transformation is a journey and not a project

Successful companies embed their digital adoption as an ongoing process. When a digital process is seen as a project with an end date, it is likely to not be sustained and maintained.

A good example is the implementation of electronic health record software. After the initial training and the celebration that it is now ‘live’, the process doesn’t stop.

There will need to be a plan to support new updated versions and improve compliance features requiring further training, organisational policy and process adjustments, and updates to the software, a designated person to oversee the new system and an appropriate budget.

2. Understand the organisational goal and design for that

A single clear goal is critical. It makes it easy to gain support from your team if there is a clear vision and why.

The goal drives decisions and sets up the measures needed to succeed.

It helps to make it SMART – specific, measurable, achievable, relevant, and time-bound.

3. Don’t let the technology dictate how

There are many exciting devices available with many features. However, this doesn’t last and the novelty of the tech will eventually wear off if there isn’t a clear link to why the technology is in place and how it achieves the organisational goal.

4. Choose the best technology that will help to achieve that goal

How does the choice of technology now help the organisation for the future?

A formalised technology assessment process in the transformation plan will help align the technology to the goal.

Consider the data provided, security, privacy and compliance to the sector requirements, user experience, deployment ease, integration, reliability, value, and interoperability with existing or other planned systems.



5. Have a governance process to support the journey

Consider a governing structure to support the journey; it's aim and membership. Experience has demonstrated that in health and aged care, a successful team includes a clinician, a technologist (ICT or CIO) and the operational manager.

Having at least two Digital Technology Leads (DTL) who are working alongside the teams at the point of care or the point of change, for any implementation, is essential.

Consider how complaints, risks, barriers to adoption, and resources are going to be managed. What will be the relationship of this group to the governing board, the older person, and what opportunities are there to engage the organisation's consumer advisory council in this process?

6. Plan for change to the operational model

Introducing a new process, new data to review, a system to manage, or a new way of working will disrupt the current operating model. Analysing this impact and planning for this change is critical.

Will there be new revenue opportunities and billing required? Are case conferences, clinical reviews and escalating risks going to change? Will there be adjustments to existing roles in the organisation with different responsibilities?

Plan for this change and the communication needed so that the goal of the transformation can be fully realised.

7. Embed the principles of change management as business as usual along the journey

The primary reason to resist change is through the fear of the unknown. There are a number of change management principles to follow but at their core it is to motivate, inspire and lead, listen to and address concerns.

Remove any barriers to the frontline staff and engage the team in the process. Provide short term wins and milestones along the journey and keep building. You can't over communicate. Share the vision.

8. Start small, review regularly and keep iterating while scaling

Starting with a small implementation will provide excellent lessons to incorporate into the next stage. Creating a plan that grows from past learning will manage the risks and improves the experience of the journey reducing as much uncertainty as possible.

Contact Talius for more information and a free technology assessment guide.

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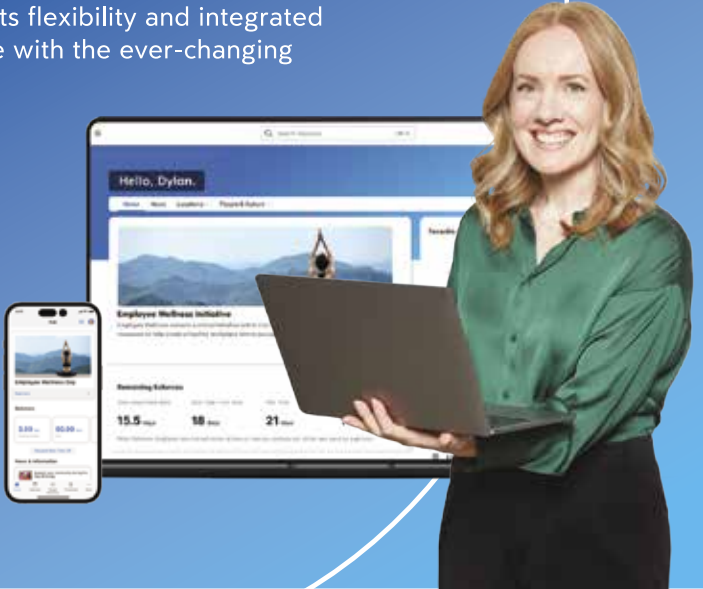
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IT Project Manager, Lutheran Aged Care Albury

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Aligning technology selection with workforce needs

How your choice of system can impact your workforce and business goals

Many businesses in the aged services industry are currently considering how they will walk the tightrope to find a balance between embracing new technology and upskilling an already overwhelmed workforce.

The technology skills shortage

There are many technology solutions available to support aged care businesses across clinical care, human resources and payroll, client management, finance, and reporting and analytics.

These systems have some obvious benefits, including meeting the ever-increasing number of compliance obligations. Shifting business processes from being archaic, manual and sometimes overly complicated to instead reflect best practice, resulting in increased efficiencies, is also an important outcome.

On the flip side, technology, while familiar to some, can be very foreign to others. With a workforce made up of people from diverse regions, backgrounds and education experiences, the level of technological skills across the aged services industry varies widely.

The correlation between skills shortages and business goals

We work with a range of software vendors at Kx2 and one of our partners, Ceridian, a global provider of HCM Cloud Software, has some great insights on skills shortages in their 2023 Executive Survey: *The power of mobilising the boundless workforce.*

The survey responses highlight the growing complexity crisis that is being faced by businesses across many industries. While it can be said that all of the workforce challenges highlighted in the survey are extremely relevant

to aged care, the important take-away when it comes to incorporating new technologies is that it adds yet another layer of complexity to an already challenged workforce.

What can be done?

The aged services industry must engage some new strategies to land in a position where they can gain the benefits of updating their systems and processes to meet best practice and compliance requirements without negatively impacting an already limited pool of overwhelmed workforce resources.

According to Ceridian's survey, a focus on “proactive upskilling and reskilling” will be vital, with 32 per cent of respondents in Australia and New Zealand identifying technology skills as one of the most lacking in their organisation.

How to beat resistance to new technologies

In our experience, Kx2 has seen that choosing the right fit software that is user intuitive and has a simple, visual-based user interface is key to getting user adoption in industries like aged care.

Generally, software providers are rising to meet these needs, but it's the ones going further by providing innovative, tailored benefits that contribute to improving the workforce's personal situations that can really make a difference to transforming technology resistance in your organisation.

New offerings across various human resources and payroll software platforms, such as allowing staff to draw down on a percentage of wages as soon as they finish an approved shift, earning cashback rewards, and real-time shift payments help put money in people's pockets faster – an ever-increasing need with the current cost of living pressures.

Attracting and retaining talent

A partner we spoke to recently, indicated the uptake of these personalised benefits is small but growing, with this provider seeing around 10 per cent of employees currently using their innovative offering.

The flow-on effect should result in attracting and retaining a workforce who are then willing to take on the technology learning expected across the organisation, in order to access these personal benefits.

It's possible for businesses to gain the benefits of implementing new technologies in harmony with upskilling their workforce, so long as part of the strategy considers what your workforce wants and needs.

In the current economy, anything that helps reduce the cost-of-living crunch people are feeling will be well sought after and should attract those who are willing to learn how to tackle technology to gain access to those benefits.

Which software is the right fit?

Differing levels of technological skill sets across the workforce in the aged care sector can make it challenging to achieve user adoption of new technology.

Businesses in the industry risk ongoing turnover if this aspect is ignored.

But where do you start and what do you look for?

Reach out to us at Kx2 Management Group to get help with finding the sweet spot for your organisation – your workforce and your business will thank you for it.

Karen Keynes (KK), Co-Founder,
Kx2 Management Group
www.kx2mgtgroup.com

How asset management software can deliver quality aged care services

Helping your staff focus on caring not administration

Communities put a lot of faith in aged care facilities and services providing their mums, dads, grandparents, aunts and uncles with positive experiences and personalised care.

But the Australian aged care system has come up against a lot of challenges – including lack of funding, increase in demand, everyday compliance and governance, and disparate technology systems – making it even more difficult for workers to deliver a high-quality level of care.

The Aged Care Royal Commission report, released in 2021, aimed to address the challenges. One of their recommendations was around ICT architecture and investment in technology and infrastructure aimed at enabling better services for older people.

Essentially this means residential aged care homes need reliable, efficient back-office IT solutions, so workers can focus on what they do best.

One example of how technology can eliminate the administrative burden is through management of assets – including leisure spaces, medical equipment, fleets and utilities – which are a key component of service delivery.

Managing the sheer number of assets within facilities as well as their regular movement is no easy task, can be time-consuming and requires a high attention to detail. We see this too often taking workers away from doing their number one job: caring for their residents.

Integrated asset management software helps aged care providers spend less time managing multiple data systems and more time delivering high-quality care.

Systems typically feature asset tracking, work order management and

maintenance scheduling, helping improve the efficiency of operations, reduce operating costs and wastage, streamline business processes, and manage compliance through improved asset visibility, accuracy and efficiency.

From day-to-day operations to long-term asset planning, asset management software enables providers to look at the full cost and performance of every asset so resources can be put to best possible use.

It can aid in understanding the maintenance expenditure required to ensure assets meet statutory compliance and performance obligations while making sustainable decisions about equipment to make sure they can continue to provide the best patient and resident care effectively. It also helps providers understand the future costs of maintaining facilities at a granular level, resulting in more certainty and fewer surprises.

Aged care providers can keep track of the maintenance needs and costs of equipment, facilities and other physical assets but also manage contractor work including planned inspections, scheduled maintenance and reactive work.



Better contractor management means more visibility into what work is assigned to contractors, when those contractors are coming on-site to complete the work, knowing that they've done the job, verifying that the job has been done properly and then issuing payment.

Asset management software can help providers successfully meet long-term capital objectives on time and within budget by identifying projects early on and controlling a project throughout its full lifecycle.

This helps allocate the necessary capital spend across the relevant investment portfolios to ensure the services they plan to implement get delivered as a result of the upgrade or acquisition of assets – including effective control and management of costs across projects and delivering projects to a standard within risk profile and agreed timelines.

Due to the aged care industry being so highly regulated and competitive, providers are under increasing revenue and compliance pressure. The seamless tracking, monitoring, and reporting capabilities of asset management software help providers to maximise eligibility for available funding.

Providers are going to need more space, more staff and more facilities to cater to the increase in our ageing population, and they are going to need it soon.

The significant demand and growth the aged care industry is likely to see in years to come means providers will likely need to construct new facilities and be able to efficiently and cohesively manage project budgets, estimations, forecasting and cost tracking.

At TechnologyOne, we empower over 160 health and community services organisations with our software.

Our customers have found that our Enterprise Asset Management solution, particularly Project Lifecycle Management, has supported them in planning for the future and delivering new facilities, under budget and before deadlines. This has been crucial for aged care providers working with tight budgets and limited time.

TechnologyOne's Enterprise Asset Management enables aged care providers to focus on better health outcomes for patients, reduce operating costs and wastage, and manage compliance through improved visibility, accuracy and efficiency.

We've seen our product help numerous aged care managers overcome operational challenges, and we encourage all providers to consider how asset management software can help them deliver better services.

Technology One
www.technologyonecorp.com

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The ramifications of risk

Adapt the design, don't remove the opportunity

As architects who work across a range of sectors, we enjoy the experience of designing specifically for the very young, as well as the very old – childcare and aged care, to put it simply.

There is a core similarity to designing an environment for a specific cohort of people who are in some ways defined by the physical, mental or emotional capacity prevalent in that cohort and for the workers in that environment who support those people.

There are many things that we consider in the design of childcare which are equally applicable and valuable to aged care and which, indeed, are valuable to all inhabitants of our built environments.

Biophilic interaction, natural light, intuitive way finding, controlled stimulation, choice and perceived safety are all things that have been spoken about significantly in both aged and childcare but are equally relevant to the design of a workplace, an airport or a retail centre.

In mainstream environments there is typically a duty of care to users and occupants by the employer, the service provider and the building owner. We've all seen the proliferation of waivers and indeed the limitations on initiatives due to insurance in our daily lives – but for the median in the population, life has not been so wrapped in cotton wool.

Society does not categorise the median of the population as vulnerable and so we accept that with choice, opportunity and challenge, there will also be risk.

When it comes to the care of cohorts who society categorises as vulnerable, then risk is addressed differently. Blame rather than consideration is the first response and regulation is the result.

Childcare has travelled this journey and come out the other side to start engaging with nature play and everyday risks for the benefit of developing young minds, with research showing more outdoor time is linked to improved motor skills and higher rates of health and wellbeing. Climbing trees and even consuming some dirt, can be good for kids.

Aged care is starting the journey because paradoxically at the same time as there is a greater focus on control of risk than ever before, we are embracing quality standards about choice and freedom.

The industry is navigating a new paradigm which is focused on enabling and engaging the lives of older people while

at the same time regulating out potential risk, and decisions are now being made around the design and operation of residential care environments balanced between accessibility, potential risk and the need to avoid restraint.

Such as, do we have a door?

Because for some it could pose a risk, which could lead to the need for restraint and so instead, we choose a window. And then, for the same reasons, a window which is limited in opening to 120mm.

And so, the outcome changes from 2m of natural light with fresh air, access to gardens and biophilic benefits, to a window with a sill that only opens 120mm.

It's easy to see how the process evolves to an outcome that completely limits opportunities for any resident in order to avoid risk for some.

The good news is that with design thinking, we can have the best of both worlds.

A fully glazed door can be fitted with a sashless slider. It can operate as a glass door. It can be shut and operate as a window. The window can be locked off in different positions so that it can open to different extents, and with a small amount of management effort, the whole suite can present with or without a door handle so that it is legible as a door, a door/window, or simply a window.

Design offers the ability to adapt.

If a sink poses a risk for a proportion of residents, don't take it away from everyone. Rather, develop a joinery design which allows it to be concealed for the instances where it is not suitable, but accessible, enabling and life-enhancing for the instances where it is.

These are two very basic examples, and yet they are two decisions made in multiple projects we experience, where potential risks are managed by removal rather than adaptable design.

There is an opportunity right now to rethink how we approach risk with a philosophy of allowing it where appropriate and designing a way to manage it when needed.

We are probably not advocating for eating dirt in residential care, but for those where it is a manageable risk, designing for the choice to walk on it would be nice.

Mario Dreosti,
Managing Director, Brown Falconer
www.brownfalconer.com.au

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LIFTING HAS NEVER BEEN EASIER

The Raizer II Lifting Chair is the new and improved truly single-handed solution to lifting someone who has fallen with ease and dignity.

Faster, stronger, and more stable than traditional inflatable lifting cushions, the Raizer II Lifting Chair is an ideal solution for transferring someone who has fallen to a sitting or standing position.



Easy to Assemble

4 identical legs and 2 identical back rests ensure correct assembly every time.



Cleaning Friendly

Sleek surfaces make it possible to disinfect more easily.



Remote Control

Purpose built storage cavity for remote, moulded to the side of seat casing. Emergency stop button is more intuitive.



Adjustable Seatbelt

Independently adjustable seatbelt placed on the back rest ensures improved upper body stability when lifting fallen person.



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JD Healthcare Group seeks out the best and most innovative medical devices available from around the world to ensure maximum staff safety and optimum patient outcomes.



Designing the future of aged care

A commercial furniture perspective

The demographics of the global population are shifting. The world is seeing a significant rise in its ageing population, leading to a demand for specialised care services and infrastructure.

This brings forth a unique challenge and opportunity for architects, designers and managers of residential aged care homes.

They are the ones tasked with creating spaces that not only resonate with aesthetic appeal but are also safe, functional and tailored for this demographic. In this context, the role of Workspace Commercial Furniture in the built environment becomes paramount.

Understanding the ageing population's needs

The primary step in this design journey is a comprehensive understanding of the older person's evolving needs.

With age, physical challenges become more pronounced – from mobility issues to sensory reductions.

Design and furniture choices can either mitigate these challenges or exacerbate them. Often, it is the minute details, like the ergonomic features of furniture, that provide solace.

In addition, moving into an aged care home can evoke feelings of uncertainty, especially when leaving behind the familiarity of one's family home. Recognising this sentiment is crucial during the design phase.

Furniture has the ability to comfort people through the transition and remind people of home – having the freedom to hand-pick customisable pieces and the option to select your choice of fabrics and timber stains helps to make this a seamless process.

These subtle design choices can have a profound impact on enhancing the overall experience for aged care residents.

Commercial furniture: beyond aesthetics

In the aged care sector, commercial furniture transcends mere aesthetics. Its primary role is functionality, followed by safety and then visual appeal. Rounded edges, ergonomic designs and specific material choices can prevent injuries and enhance comfort.

Chairs for use in aged care are designed with adjustable heights to ensure people's feet can touch the ground comfortably, and tables have rounded corners to prevent potential bruises.



The Carlyle Premier Health in South Australia is one of Workspace's projects that exudes old-world charm.

Seating with lumbar support is another important design feature, which directly addresses the common issue of back pain among older people, allowing for longer seating periods and promoting more interpersonal interactions.

Flexibility and adaptability

The evolving trend in the industry leans towards flexibility. Modular furniture pieces, customisable based on residents' needs, are increasingly finding favour.

Modern care facilities are adopting innovative approaches, such as the inclusion of modular furniture. This furniture can be reconfigured to create communal areas during the day and more private spaces in the evening.

This adaptability fosters both individual autonomy and a communal sense of belonging for the residents.

Material choices and longevity

Material choices for furniture in aged care homes are pivotal. Selections need to ensure comfort, safety and durability.

Soft, breathable fabrics offer comfort during prolonged contact. Simultaneously, non-slip materials and finishes can prevent potential falls, while spill-resistant and easily cleanable surfaces offer a practical solution.

Technological integration

Today's furniture designs also incorporate technology. Recliners with built-in massagers, beds with adjustable firmness, or chairs with heating elements provide therapeutic benefits. Such integrations go a long way in improving the overall wellbeing of aged care residents.

The convergence of commercial furniture design and the built environment in aged care is not an afterthought. It is a conscious decision to elevate the quality of life of our older loved ones.

As this demographic grows, the synergy between these two elements will further solidify, championing holistic spaces that offer dignity, comfort and wellbeing to aged care residents.

Workspace Commercial Furniture
www.workspace.com.au

My home, your home, our place

Could co-located housing be part of future ageing in community?

Australia urgently needs solutions to respond to the challenges of ageing well in a society increasingly under pressure from compounding social, economic and political factors.

‘Ageing in community’ is consistently championed as the supreme objective in keeping older people active and engaged in society.

This makes sense socially to maintain quality of life for people as they age. It also makes sense politically to curb costs associated with higher levels of residential aged care, which often accompany frailty and dependence.

However, constrained workforce numbers and a shortage of appropriate and affordable housing in which to age, are presently conspiring to inhibit wholesale ageing well.

In-home care is optimal when the physical environment easily facilitates needed support activities. It also works best when older people have their own home.

In many cases, existing house environments are not conducive to care delivery and further, many older people are increasingly without secure housing.

A significant proportion of the older population is living in housing not conducive for ageing well and is increasingly under threat of low housing security.

But the lack of housing should not be the reason a person enters residential aged care, and there are alternatives.

A rethink about types of housing, tenure models and the support ecosystem itself is needed if ageing in community is to be championed and realistic.

The aged and community care sector could potentially play a key and expanded role in reaching and supporting the broader ageing cohort where they live by developing and supporting new housing typologies and care approaches.

While the Aged Care Royal Commission formally recommended the ‘small house model’ as a consideration for residential aged care design, it is important to recognise that other well placed, appropriately designed housing can uphold independent living and maintain older peoples’ place in the community for longer.

One such housing concept is ‘My home, Your home and Our place’, an alternative model of integrated housing and support arranged around key functional relationships.

This potential and conceptual co-located housing model is designed around 12 performance principles, emerging out of



Living in a micro-community has many benefits for older people.



The co-located housing concept ‘My home, Your home and Our place’ is designed to support social connection and sense of community in affordable homes.

my PhD research into the potential nature of future housing for an ageing Australia, modest dwellings and the premise of formal care and mutual support.

The 12 performance principles are:

- need
- normality
- autonomy
- connection and community
- proximity and privacy (domain)
- formal and mutual care

- relatable scale
- physical design
- evolution and sustainability
- financial accessibility
- security of tenure
- responsibility.

The study indicated both a need and a desire for new urban- and suburban-based housing typologies arranged around collective living and mutual support as possible concepts for ageing in the future.

The outcomes of this research and potential implications for housing typology design has been presented in a number of wider industry forums.

The housing model speculated here is similar and yet different from ‘co-housing’, another model garnering serious interest from some older cohorts.

Co-housing is generally formed around a group of individuals mutually mobilising through a common desire to live together with shared principles.

The co-located housing model described here could be developed and managed by a housing and support type organisation responsible for curating disparate individuals, without prior connection, into micro-communities.

This model could equally be established, through partnerships between community aged care and housing service providers as well as governments, seeking more embedded support into mainstream Australian communities.

The basic supposition is that clusters of modest, one- or two-bedroom dwellings, co-located on suburban or urban sites (perhaps currently zoned for detached or lower densities) and intentionally arranged to facilitate formal care and mutual support, could offer real opportunities for the ageing population.

These clusters could be repeated in suburbs or regions to offer some economies of scale to housing entities and service providers.

Intergenerality could be maintained, and ageing within the broader community potentially realised, with typologies such as these, through more gently dense and unobtrusive ways.

Australia needs to consider whether an intentionally arranged co-located housing model and support ecosystem, such as this, should be part of a new, more comprehensive narrative around normalised ageing in community.

Dr Matthew Hutchinson, Architect and Senior Executive, Integrating Living
www.peddlethorp.com.au; www.eprints.qut.edu.au/134162/

Your helping hand to compliance



Choose a quality system that works for you

Remaining compliant with changing regulations and legislation has become vital for aged care and disability operators, but it's hard to manage alone.

An easier way is to use an outsourced quality management and compliance system – slashing the time it takes for recording and reporting.

ACCPA has endorsed two reliable, robust and effective quality systems – so your workforce can focus on the caring, not the paperwork.

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- Supports operations through best practice and compliant guidance to all staff
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- Internal audits program with targeted audits focusing on areas of risk
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Award-winning sustainable and hygienic furniture for aged care homes

Australian innovation SYSTM gets prestigious honour for furniture design



The first of its kind, SYSTM furniture comes apart for thorough and hygienic cleaning, or to update upholstery, reducing costs and environmental footprint.

When founder and director of award-winning furniture manufacturer SYSTM, Ian Reinhardt, was approached by an aged care home early in his 30-year furniture manufacturing career, he was initially quite surprised.

At that stage, no specific products were made for the aged care sector.

"There was a huge gap in the market for furniture that had a domestic feel made by good manufacturers," Mr Reinhardt said.

Mr Reinhardt was soon contacted by a second aged care home and the rest, as they say, is history.

After many years as an industry leader, working hard to create functional, sustainable and attractive furniture for the aged care sector, SYSTM has received the "Best in Class" Award in the 2023 Good Design Awards – Australia's highest honour for design and innovation.

The Good Design Awards are Australia's peak international design awards, evaluating over 900 entries, and are renowned for recognising architectural excellence and the critical role good design plays in creating a better, safer and more prosperous future.

Good Design Australia CEO and Australian Good Design Awards Chair Dr Brandon Gien said, "To be recognised with an Australian Good Design Award tells the world this project not only represents design excellence, but it also surpasses the criteria for design innovation and design impact".

SYSTM's innovative work in aged care furniture, in collaboration with Clandestine Design Group, was named the ultimate winner in the Product: Furniture and Lighting category after only launching in May 2023.

Ian said that the SYSTM team was delighted to receive the design award.

"On a personal level, it is nice to be recognised – for the product to be

legitimised by independent people and to perhaps take it to a global audience," he said.

SYSTM, the first of its kind, is a direct response to the Aged Care Royal Commission's findings indicating that aged care residents' independence, dignity, and mobility were not priorities.

"The genesis of this came from the Royal Commission asking our industry to do better, and we decided to take on that challenge," said Ian.

SYSTM's innovation lies in its ability to dismantle easily for thorough and hygienic cleaning and on-site upholstery with its unique propriety key and bolt design. With a few clicks, furniture can be reupholstered on-site with no professional help required, and cleaning has been enhanced with access to every area of the chair.

While optimising hygiene and comfort, SYSTM reduces environmental and monetary waste by significantly extending the chair's life.

Ian has already turned his mind to a broad range of industry sectors that will also benefit from SYSTM's innovative design.

"Our revolutionary design is better for people, the planet and budgets. And perfect for commercial and hospitality environments, healthcare settings and residential living," he said.

Brisbane-based Clandestine Design Group is behind SYSTM's industrial design and was also honoured by the Good Design Awards. Clandestine Design Group is no stranger to high-quality and impactful design, with thirteen Australian International Design Awards of Excellence issued by the Australian International Design Awards.

Clandestine Design Group founder and director Neil Davidson said the team behind the furniture was incredibly proud to be recognised by the Good Design Awards for its sustainable and stylish range.

"Traditionally, furniture design has been focused on the needs of the

factory, with high speed, staple, glue and screw assembly techniques making things efficient for manufacture, but the end result is an in-use furniture experience and product lifespan that is difficult to clean and maintain," Neil said.

"As a result, product life cycles are short, there is a lot of waste, and procurement has typically favoured the manufacturing sector rather than the aged services industry and the older Australians who rely on it.

"SYSTM furniture flips the script and concentrates the design effort on the needs of aged care management, personnel and, of course, our family and relatives in aged care."

Earlier this year, SYSTM was named a finalist for Furniture Design of the Year at the Asia Pacific Eldercare Innovation Awards.

SYSTM and Clandestine Design Group
www.systm.au;
www.clandestinedesigngroup.com/cdghome

Ian Reinhardt (right), Founder and Director of SYSTM and LifeCare Furniture and Neil Davidson (left), Founder and Director of Clandestine Design Group and Industrial Designer behind SYSTM, are passionate about their product and the benefits it will bring the aged care sector.



1. St Vincent's Care Services Kew 2. Little Sisters of the Poor Northcote 3. Homestyle Tarnet 4. Chirside Views Aged Care 5. BASScare Morgan Glen Iris

This year, smith+tracey architects celebrate 75 years of practice. During this period we have developed a major presence and awareness within the seniors living, aged care, community and education sectors. We welcome the opportunity to continue our contribution in achieving better designed outcomes for senior living environments.

smith+tracey architects

75 ARCHITECTS
SINCE 1948
Years
www.smithtracey.com.au

Building Connection and Community:
The SeniorsChannel is revolutionising
lifestyle and entertainment for Seniors.

In an era where technology shapes our lives, addressing the unique needs of seniors is paramount. Enter The SeniorsChannel, a groundbreaking interactive streaming platform that encourages seniors to engage, connect and interact.

Many people are worried about the high levels of social isolation, loneliness, and depression among elderly residents in aged care. However, did you know that almost half of seniors who live at home keep their TV on all day for companionship? As our society faces the challenges of an aging population, The SeniorsChannel provides a powerful tool to help combat the negative effects of social isolation and improve the overall well-being of our seniors.

The SeniorsChannel offers carefully curated and diverse content that not only entertains but also fosters meaningful connections. From a virtual social community hub and live-streamed events to interactive games, exercises and

Visit www.theseniorschannel.com or phone 0432567406 for more information



educational programs, this platform has redefined the landscape of senior entertainment and lifestyle programs.

“My life’s work is to bring joy to seniors, everywhere, every day” says The SeniorsChannels CEO and founder Julie Hogarth-Williams.

The SeniorsChannel will co-design with aged care providers in February 2024 before launching in April.

Core Capabilities Unify Home care and Residential Care

The Aged Care Reform train keeps chugging in terms of consultation and laying out the roadmap. To thrive in the next wave, Providers must get five things front and centre when it comes to consumer-facing risk.

1. Understand clearly which consumers experience the greatest degree of risk (harm-inducing) and build these into your business systems and people awareness systems.

This means being able to determine consumer vulnerability.
 - a. Living on their own
 - b. Rural and remote with limited-service options
 - c. Few or no family or friends
 - d. Cognitive impairment and are unable to problem solve or ‘speak up’ for themselves
 - e. Have responsive behaviours which may impact on are provision (e.g. aggression, sexual disinhibition, purposeless wandering)
 - f. Links to any of the nine Special Needs groups as outlined in the *Aged Care Act 1997*.
2. Understand the foundations of ‘capacity and substitute decision making’ for each consumer. No health and aged care system will ever support ‘consenting to neglect’. Providers will need to ramp up consumer health literacy and awareness and shift to a rights-based approach built around consumer needs, goals and preferences.

Anchor
Excellence

3. Have solid processes for clinical risk (High impact/ High Prevalent risk) – the main focus ones include (irrelevant of program type);
 - a. Pain Management
 - b. Falls prevention and management
 - c. Skin Integrity and pressure injury prevention and management
 - d. Complex care risks including (not limited to) diabetes, chronic disease, dementia affecting the ability to navigate dignity of risk decision making
 - e. Nutrition and hydration
4. Consumer deterioration recognition and response systems – very clear clinical pathways which are easy to follow and execute
5. Policy and practices that enable the entire workforce to recognise risks of neglect, abuse and exploitation and have clear processes for the escalation of those risks which include appropriate control measures.



“Saying Sorry” when things go wrong is one of the most important actions an organisation can take.

It humanises an event. It puts the person at the centre of your response. It often leads to a sense of satisfaction and trust that it won’t happen again.

However, it is often met with fear of litigation, or the “insurer doesn’t support it” or is conducted in a way that worsens the issue.

To find out more visit <https://www.ansvar.com.au>

Ansvar has brought together experts to guide your organisation through “Open Disclosure”.

It is a practical approach to take action and to share important information between your board, management and staff to support your approach; because getting it right and doing it well is so important in so many ways.

St Luke’s Care clients benefitting from HUR rehabilitation equipment

‘In February 2023, Jules took a significant step towards regaining strength and improving overall fitness by joining the Active Life Studio at St Luke’s Care. Following four surgical procedures in two years, Jules experienced a substantial loss of strength and wellbeing. The HUR equipment, featured at the studio, has been instrumental in this transformation. Not only is it effective, but its user-friendly design enhances the overall experience. Our Physiotherapist at the Active Life Studio ensures tailored exercises that consider her condition and align with personal goals. This individualised approach coupled with the HUR technology has played a pivotal role in Jules’ progress.

Since embarking on this fitness journey, Jules and the physiotherapists have witnessed an improvement in strength. Her continued ability to actively engage in daily activities that she cherishes is a testament to the positive impact of these circuit classes. Jules looks forward to further improving her fitness through the classes offered by the Active Life Studio’.

For more information visit: www.slc.org.au



Soodox™ Soothe & Protect Barrier Cream

Maintaining healthy skin is crucial for overall health and well-being. Soodox™ Soothe & Protect Barrier Cream is an excellent preventive measure against skin irritation caused by occupational exposure to irritants. This is where barrier creams are effective, now available is Soodox™ Soothe & Protect Barrier Cream which is Australian made, 100% natural, paraffin and fragrance free. It is gentle enough to use on the most sensitive areas - incontinence rash, skin folds, under breasts, bedsores, and chafing. This cream is highly recommended for use before and during work, as it forms a lubricating film on the skin, preventing water depletion in the skin’s outermost layer.

This protective effect may help prevent irritant contact dermatitis and allergic contact dermatitis, which are common conditions that often result from moisture depletion. It is essential to choose a product that is suitable for your skin type and needs, Soodox™ Soothe & Protect Barrier Cream is the perfect choice!

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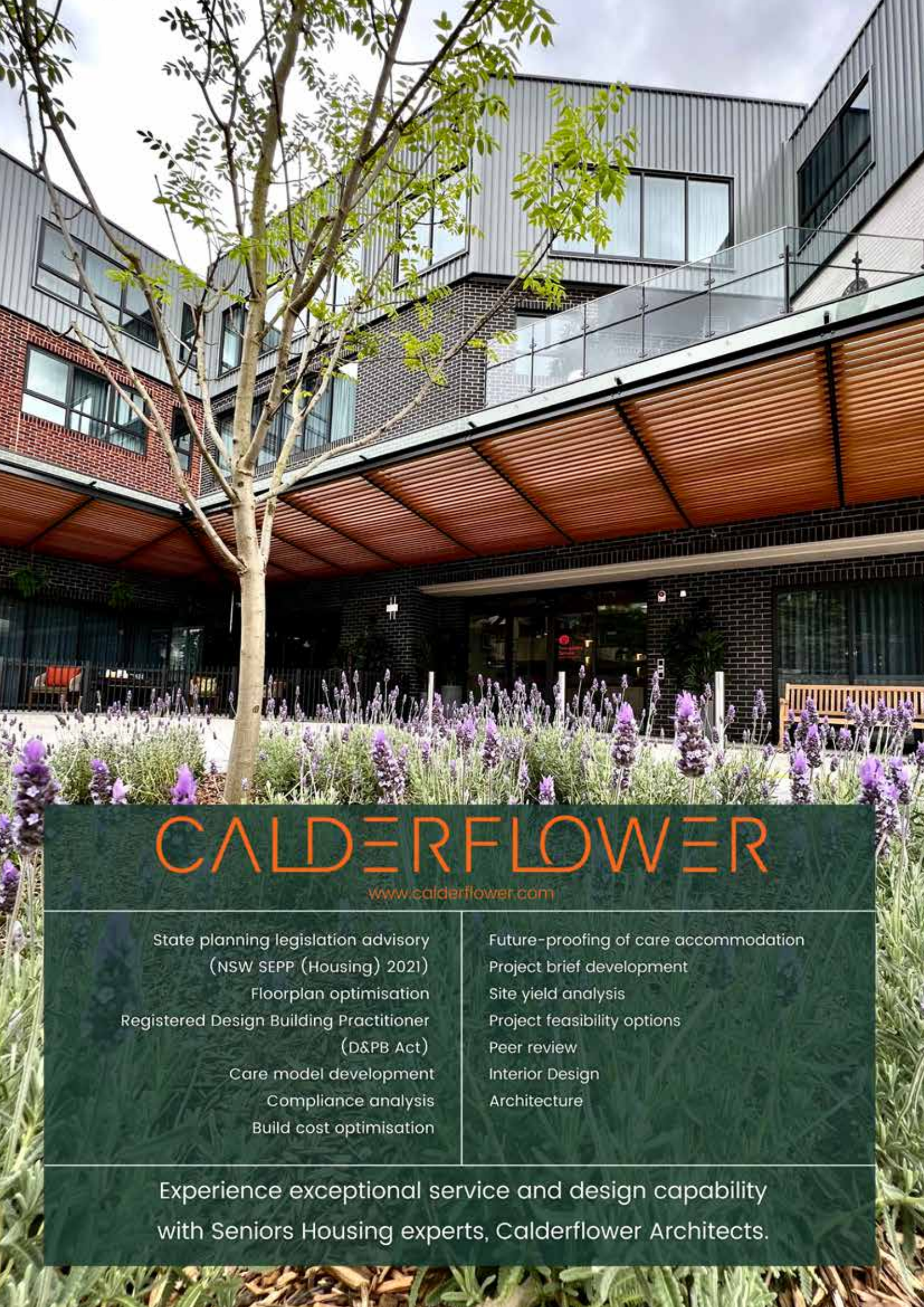
Industry icon evolves and enters a new era as NeRA Cloud, with features that greatly improve the resident agreement process

NeRA Cloud is the next evolution of resident agreement software, offering providers sophisticated features in a more connected, productive and secure environment.

Introduced in 2006, NeRA software set the industry benchmark by transforming the resident agreement generation process. NeRA still plays a pivotal role in helping hundreds of providers produce compliant legal agreements successfully.

To look at how you can keep your aged service moving forward using NeRA Cloud, visit www.e-tools.com.au or contact e-Tools Software to schedule a free online demonstration on 03 9573-3277.

The move to cloud technology marks the start of a new era. Providers can access data securely from anywhere, using either a smart device or computer. Combined with advanced functions powered by cloud technology, NeRA Cloud will have a positive impact on workplace efficiency, outcomes for residents and the provider’s bottom line.



CALDERFLOWER

www.calderflower.com

State planning legislation advisory
(NSW SEPP (Housing) 2021)
Floorplan optimisation
Registered Design Building Practitioner
(D&PB Act)
Care model development
Compliance analysis
Build cost optimisation

Future-proofing of care accommodation
Project brief development
Site yield analysis
Project feasibility options
Peer review
Interior Design
Architecture

Experience exceptional service and design capability
with Seniors Housing experts, Calderflower Architects.