



Self assessment

by Dr Lyn Irwin, Research and Quality Analyst

Accreditation is not a one-off event. It consists of a sequence of events that occur during the accreditation cycle. This usually involves: self assessment against a set of standards; preparation and submission of self assessment documentation prior to a site visit; evaluation or assessment by external assessors or surveyors; reporting and feedback on the outcome of the assessment; planning and implementing quality improvements; and internal and external monitoring of performance over time ^{1, 2}.

Self-assessment is a common component of most accreditation systems and business frameworks across many sectors and industries world wide. Accreditation models across Europe, Asia, the United States, Canada, the United Kingdom, Australia and many other regions and countries all require participants to assess their own performance and provide preliminary information and selected documents to the accrediting body prior to an accreditation visit ^{3,4,5,6,7}. In most accreditation systems self assessment is regarded as the starting point for assessment by an external survey team ⁸.







Examples of health related accreditation systems in Australia requiring self assessment prior to on-site visits are the accreditation of acute and sub-acute services by the Australian Council on Healthcare Standards (ACHS)⁴, the accreditation of general practices by the Australian General Practice Accreditation Ltd (AGPAL)⁹ and the accreditation of physiotherapy practices and medical imaging practices by Quality in Practice Pty Ltd (QIP)⁹.

Self assessment is also a common element of accreditation systems outside the health care context. For example, child care providers in Australia are required, as part of the accreditation process, to undertake self assessment and submit a report to the National Childcare Accreditation Council (NCAC)¹⁰. The Australian Business Excellence Framework (ABEF), a leadership and management system used by organisations providing a diverse range of community and welfare services, requires self assessment.

Many organisations and services, including aged care homes, routinely evaluate and monitor their own performance as a means to identify what they are doing well, how well they are doing it, and what they could be doing better.

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Just a word



We have come to the end of the Better Practice series for 2009 and planning is underway for the 2010 series. Dates have been set and are listed on the back page of this issue of *The Standard*.

The success of our Better Practice events is largely due to the sharing of information, experiences (good and bad) from homes across the country. Many delegates leave a Better Practice event thinking, "I could do that too."

Think about how your home could contribute to the Better Practice events as a presenter, by sharing your experiences with others. Your story can help other homes improve and 'think outside the square', for the ultimate benefit of residents.

Main topics will include fostering cultural change through leadership and management transformation;

governance; clinical transformation; and creating a personal plan of action. Others include evidence-based practice; innovative strategies for facilitating and managing change; sexuality; effective resident assessment; implementing a restraint-free environment; various models of care as well as free papers. More detail is on page 7 of this issue of *The Standard*.

A handwritten signature in black ink, appearing to be 'Mark Brandon'.

Mark Brandon
Chief Executive Officer

Masquerade Ball at Warrina Park Hostel, SA

More than 50 residents, staff, volunteers and advocates enjoyed the Warrina Park Hostel's Masquerade Ball with plenty of dancing and socialising. The ball idea came from a resident suggestion and involved all in its planning and preparation.



As an ongoing process it enables organisations to identify their strengths and opportunities for improvement, and provides the basis for planning.

In terms of accreditation, a well conducted self assessment also has many benefits. As outlined above it is regarded as the foundation of the accreditation visit. Preparation of a self assessment by residential aged care homes provides their perspective of their own performance and gives the assessment team information about the home's achievements against the Standards. It allows the assessment team to gain an understanding of a home's systems before arriving on site; this reduces the amount of time that needs to be spent on orientation within the home and also enables assessment teams to notify the home of any further information they may require during the site visit. This assists homes to plan for site visits and ensure all required information or documentation is readily available during the visit.

There is an integral link between self assessment and continuous improvement. By enabling homes to evaluate and monitor their own performance and identify opportunities for improvement, self assessment supports continuous improvement and continual learning.

In summary, self assessment is regarded by many commentators as an important undertaking for all organisations and a critical part of the accreditation process. It has many benefits for an organisation and assists the accreditation process. Under the current accreditation arrangements it is a requirement for residential aged care homes to provide a self assessment of the home's performance to the Agency prior to an accreditation site visit. The completion of the self assessment should be part of the home's routine ongoing self evaluation and continuous improvement activities, and be approached as an opportunity to show what has been achieved against the Accreditation Standards. It provides the home with an opportunity to identify and resolve any 'gaps' in performance and to highlight its achievements.

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Skype brings sisters together

After receiving a request from a resident's nephew in the United Kingdom, Lillian McCrossen, a resident of Maryknoll House in Port Macquarie NSW, will soon be able to see and speak to her sister in the UK via the internet using Skype. The program uses a webcam and allows callers to see and hear each other.

Lillian McCrossen and her sister Ivy have not seen each other for many years. The magic of the internet and some lateral thinking has changed all of that and the sisters will now be able to see and speak to each other as often as they like.

Residents get IT savvy

Following a comprehensive assessment, Trevu House Residential Aged Care in Gawler, SA has been selected as a host venue for a free 'Broadband for Seniors' kiosk for its residents.

'Broadband for Seniors' is an Australian Government initiative to increase the skills of older Australians using computers and the internet.

"What this project means for Trevu's residents is it will provide opportunities for them to learn new skills in using technology which will allow them to increase and broaden their social activities," said CEO Craig Brown.

"Residents will be able to create documents, play challenging games, explore their personal interests and use email so they can stay in touch more with friends and family and even meet some new people."

"It will also open up opportunities for younger family members to get involved," added Craig.

The services will be supported by key staff from Trevu who will train those residents who express an interest to tackle this technology.



Technology unites young and old as Anglican Care residents get Wii fit

Who says technology is just for the younger generation? Not the residents at Anglican Care's Jesmond Grove Hostel in NSW, as they come to grips with a new hi-tech world with the assistance of a group of Year 10 students from Callaghan College Wallsend Campus.



As part of Anglican Care's Nintendo Wii Intergenerational Program, students have been visiting the hostel weekly to teach residents how to use the Nintendo Wii and have a lot of fun along the way – the favourite game among both groups being ten pin bowling.

The objective of the program is to increase interaction between the two generations that involves the sharing of knowledge, skills and experience between young and old, resulting in education, friendship and caring.

Tamarah Marjanovic, one of the students participating in the program, looks forward to her weekly visits to Jesmond and thinks it is a great opportunity to gain experience in working with elderly people, as she is hoping to pursue a career in aged care nursing when she leaves school.

The program is being run in conjunction with Career Links as part of Anglican Care's Adopt-a-School program, with Anglican Care recently being presented with a Career Links Workplace Excellence Awards for its innovative program.

It is anticipated that the program will continue next year and expand to enable the students to teach residents basic computer skills as part of a computer kiosk that is planned for the facility.

'Surfing' can prevent depression

A US study has claimed that spending time on the internet can reduce depression in older people by 20 percent. The survey looked at 7,000 retired Americans over 55. While it did not include residents of aged care homes in the survey, increased internet access was said to help older people connect with sources of social support when face-to-face interaction becomes more difficult.

BETTER PRACTICE IN AGED CARE AWARD

DePaul Villa Aged Care gets HAPPI



The HAPPI program has allowed Mrs Jean Collins to receive additional referrals to physiotherapy and dental services. As a result, she has been able to move from high care to be reunited with her husband in the low care area of the home – a great result and excellent example of how information technology can change the lives of residents.

Photo left to right: Annette Mitchell (Admin Mgr); Barbara Maguire (NUM); Dennis Priede (Director of Clinical Care Services); Julie Madden (Director of Aged Care Services); Sue Falzon (NUM); Jean Collins (resident) and Dr McLaughlin.

A custom designed database building on the Comprehensive Medical Assessment (CMA) has won DePaul Villa in Ashmore Queensland a Better Practice in Aged Care Award and has led to some pleasantly unexpected benefits for the home and its residents.

The Healthy Ageing Positive Partnerships Innovation (HAPPI) program was developed in partnership with GPs and allied health professionals to increase the amount and relevance of information in the CMA, which nurses maintain as a living document by updating it with every change in care needs for review by GPs.

By involving GPs in planning care, they are able to easily make referrals to allied health professionals via Medicare, and using the CMA for referrals and hospital transfers has reduced the risk of mismanagement due to inadequate or inaccurate information.

A range of other reports generated from the CMA provide information to assist in care delivery for GPs, nurses, kitchen staff, and allied health professionals, and have led to some unexpected benefits. Staff morale has been boosted with the provision of more accurate and concise information, less time spent collecting information, and incidents have decreased.

Because of the ease with which students can access information, the home has enhanced its relationships with students and training organisations, and is hosting over 100 students through their studies in medical, physiotherapy or nursing degrees, diploma of nursing and certificate III in aged care this year. This has led to recent graduates making a faster transition to employees as they already have a good understanding of the home through their student placement, and the home no longer advertises for staff.

Some benefits of the program include:

- significant reduction in hospital staff seeking information and time spent by nursing staff collating resident information to send to hospital
- care needs summaries provide staff (and agency staff) easy access to key information on resident care.
- reports can be easily reviewed and updated as resident needs change
- up-to-date information for external providers when required
- GPs can more easily make referrals to allied health professionals
- decreased costs associated with admission and funding assessments.

Something to think about

Relatives of residents – their experience from their point of view

Following an 18 month project by Carers Australia Victoria to explore the experience of friends and family of residents of residential aged care homes, it was discovered that while homes place a lot of effort into ensuring a smooth transition for residents into their new home, friends and relatives felt left behind.

They said they found it difficult to become familiar or stay informed about a home, and found it difficult to build relationships with staff.

Many said they received no information about common feelings family members or friends have as residents move into the home. Few felt they received adequate support concerning their grief, anxiety or fears.

They also struggled with developing and maintaining a new role as a carer within the aged care home, and wanted more reassuring feedback about their family members' progress and wellbeing.

What works

The study found that:

- Informal links with more experienced families within the home were found to be helpful.
- Prior use of respite clearly assisted family members and friends to become familiar with the home.
- Family members and friends who were able to spend time assisting with the resident's care

appeared to have fewer problems and may have developed strong relationships with individual staff.

What works at your home to help family and friends of relatives as their loved one moves into aged care? How do you support their changing role from full-time carer? How do you encourage the development of partnerships between staff, residents and their family and friends, to promote meaningful participation and exchange of information for the benefit of the resident?

What support do you give a resident to adjust to life in your home and how do you involve their friends and relatives in that support? Consider expected outcome 3.4 Emotional support.

Do you want to share how your home addresses this issue well? Send an email to editor@accreditation.org.au with your story.

Want to read more?

www.survivingthemaze.org.au/Assets/pdfs/PolicyDocs/StillLargelyontheOutside.pdf

Seminars and courses

Seminars

The series of one-day seminars to the industry aims to equip key personnel with the skills and knowledge that will improve quality of care for residents.

Four-day assessor courses

The internal assessor course aims to equip individuals with the skills and knowledge to conduct assessments of their own aged care facilities. This course is designed for staff working in the aged care industry who are seeking to develop their skills and knowledge in assessment and accreditation processes.

Organisation-direct training

We can deliver our one-day seminars and four-day assessor courses direct to your staff in your own facility. Our highly-trained facilitators will work with you to minimise disruption to normal operations.

"It was very accommodating of the Agency to do a course for the organisation."

"Very valuable, informative and specific to my current needs. I enjoyed the opportunity to network with my colleagues."

Visit our website www.accreditation.org.au or contact us on 1800 728 589.

	Seminars			Courses	
	Evidence-based practice	Achieving compliance with 1.8 Information systems	Managing risk to avoid non-compliance	Assessor course – four day	Assessment fundamentals (aged care) course – five days
NSW/ACT	9 February, Parramatta	8 December, Bankstown 10 December, Canberra		8-11 February, Parramatta	
Qld		16 December, Brisbane	10 December, Roma 10 February, Townsville		
VIC/TAS	2 February, Wodonga	11 December, Launceston			8-12 February, Box Hill
SA/NT				8-11 February, Glen Osmond	
WA					15-19 February, Mt Claremont

Better Practice 2010

Lock the relevant dates in your diary for next year's Better Practice events.

Adelaide	20-21 May
Hobart	24-25 June
Perth	22-23 July
Melbourne	26-27 August
Sydney	16-17 September
Brisbane	14-15 October

Topics for next year's Better Practice events:

- Fostering culture change through leadership and management transformation
- Fostering cultural change through governance

- Fostering cultural change through clinical transformation
- Creating a personal plan of action
- Evidence based practice: moving it from the bookshelf to the bedside
- Innovative strategies for facilitating and managing change
- Sexuality
- Effective resident assessment – from the routine to the revolutionary
- Overcoming barriers to restraint
- Various models of care.

If you would like to be considered as a speaker at next year's event, go to our website and download the Call for abstracts. Submissions close 4 January 2010

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