



MDHS
Inspiring Health

RESIDENTIAL COMMUNITIES INFORMATION

Everything you need to know about our residential communities

MARYBOROUGH | AVOCA | DUNOLLY
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Welcome to Maryborough District Health Service (MDHS)

Welcome to your new home at Maryborough District Health Service.

We hope that you enjoy living here. Moving from one home to another can be exciting and challenging at any stage of life however moving to residential care more so. Together with yourself and your family we aim to assist you with your transition into residential care and welcome your participation in this process and throughout your time with us.

MDHS provides a team of skilled, qualified staff. The care team consists of Registered Nurses, Enrolled Nurses and Personal Care Workers. Other staff include qualified cooks, maintenance, cleaning and Allied Health staff.

To support you to keep your independence whilst

living at MDHS, we encourage you to continue your community and social activities as you would in your previous home. We welcome visitors, family and friends.

This handbook, along with your signed Agreement and Enquiry Pack, will provide you with the information that you need to settle in, but please ask staff members for assistance with any other queries that you may have.

If English is your second language, access to an interpreter will be arranged as desired through the Australian Institute of Interpreters & Translators Inc.

Thank you for joining the MDHS community. We look forward to being able to share this stage of your life with you.

RESIDENTIAL CARE PHILOSOPHY

At Maryborough District Health Service, we acknowledge the personal and financial investment you have made in joining our community.

We respect the uniqueness of each person in our community and acknowledge the contribution each has made throughout their life.

We recognise the importance of all relationships within Maryborough District Health Service and commit to maintaining a homelike environment based on the Montessori philosophy with respectful partnerships, purposeful and meaningful engagement, choice, flexibility and enabling environments.

At Maryborough District Health Service our values are:

**Genuine, Respect, Excellence,
Accountability and Togetherness.**

Goal for residents:

"I am supported to live each day with purpose, choice & comfort."

Actions:

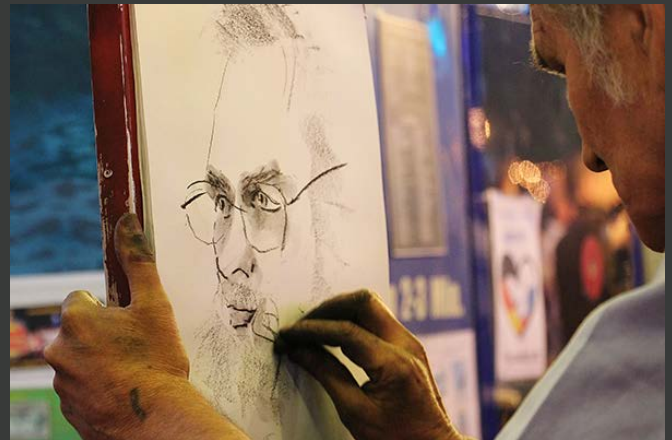
1. Staff respect and encourage my abilities
2. I am supported in my decision making
3. I am engaged in activities meaningful to me.

Goal for families:

"I am respected, valued and recognised."

Actions:

1. I feel welcomed and supported
2. I am listened to and my opinion is valued
3. I am included in decision making



MONTESORRI PROGRAM BACKGROUND

A Montessori approach provides a vehicle for shaping a purposeful, meaningful community in which people with dementia can live and enjoy quality of life.

We aim to circumvent disability by creating a community where people are enabled, engaged, supported to be independent and this begins and ends with choice.

Montessori is an innovative approach to dementia care that can be adopted for individuals, for groups and as a philosophy of care. Based on the original pioneering work of famed childhood physician Dr Maria Montessori, adapted by Dr Cameron Camp for people living with dementia.

- Meaningful roles and routines based on what we know about the individual's interests and level of ability
- Places emphasis on an environment that supports memory loss and respects the person
- To enable individuals to be as independent as possible, have a meaningful place in their community, have high self-esteem, have the chance to make choices, and meaningful contributions to their community.

Quality of life is largely defined by what activities are available and being able to tap into a person's spared abilities.

Getting to know you

When you become a resident we need you to give us the name of a nominated contact person; this is usually your next-of-kin, and second contact person. On admission we document these details and keep them in your file. If your nominated contact person is going away for a length of time, contact details should be made available to staff or, details of a nominated contact person for this period.

To assist us to get to know you, a staff member will take you through a range of questions and assessments. Please feel free to provide as much information as you desire. We will use this information to form a detailed care plan for your time with us. This plan enables us to know how to keep you active, independent and safe in our aged care facilities.

We will regularly evaluate your care plan and communicate with you and your family or representative about your care and any changes that may occur. Your care plan includes your special needs including spiritual and cultural needs.



Moving into your room

It is important for you to feel comfortable in your new room. You are welcome to bring in small pieces of furniture, photographs and mementos to help you feel at home.

You may also choose to bring in your own doona and cover, bedspread or blankets to make your room more homely. (Family will need to be responsible for laundering these.) Family members and friends are welcome to help arrange your belongings in your new room.

Whilst the rooms are spacious, they may be smaller than those in your previous home. Staff members will be able to assist you to determine which of your pieces of furniture will fit safely into your room. Care is taken to ensure rooms are

clutter free as a cluttered room is a falls risk.

Maintenance staff will assist with hanging of pictures and can be contacted via the Nurse Unit Manager. Blu-tac, drawing pins and screws are unable to be used.

You are also welcome to bring in electrical equipment, including televisions, which will be checked by Building & Services staff for safety before being placed safely in your room. (When watching television late at night or with the volume loud, please wear earphones so other residents are not disturbed.)

Your room is cleaned daily from Monday to Friday at a time that is most convenient.

Room allocation

To provide you with appropriate care, room changes may sometimes be required; however this will be discussed with you and your representative if the need arises.

It is important that you feel secure in your room in your new home and we work with you to ensure this happens. If you request to move from one bedroom to another it will be considered if:

- the move is at your (or your family's) request;
- you agree to move after being fully consulted;
- the move is necessary on genuine medical grounds; and/or
- the move is necessary in order to carry out repairs or improvements to the room. You have the right to return to the room if it is still functioning as a room for residents following any repairs or improvements.

Valuables

MDHS' insurance policy excludes insurance cover for your valuables, so we suggest that your valuable items are safely stored elsewhere to prevent unforeseen losses.

We encourage only small amounts of cash or valuables be stored in your room. On admission, your valuables can be photographed and registered by staff with your (or your family member/representative's) assistance.

Money can also be put in a Trust Account so petty cash can be made available for paying daily necessities, for example a haircut. Again, we keep a record of these amounts and suggest that it be kept to a minimum. It is important that hearing aids, dentures and personal items are named as no responsibility is taken for personal items lost or accidentally damaged.

Privacy

Staff members respect your privacy and will not enter your room without knocking or alerting you to their presence, unless they are concerned for your wellbeing. Please inform staff if you do not wish to be disturbed at any stage.

Photo identification is used for medical charts and documentation. Your consent is required to enable us to use your photo for other publications.

Mail

Mail for residents is sorted as soon as it arrives and is delivered to you. Your mail should be addressed with your name to the specific residential community at which you are a resident.

RESIDENT RIGHTS & RESPONSIBILITIES

As a resident you have the right to:

- full and effective use of your personal, civil, legal and consumer rights;
- quality care appropriate to your needs;
- full information about your state of health and about available treatments;
- be treated with dignity and respect and to live without exploitation, abuse or neglect;
- live without discrimination or victimisation and without being obliged to feel grateful to those providing your care and accommodation;
- personal privacy;
- live in a safe, secure and homelike environment and to move freely both within and outside MDHS without undue restriction;
- be treated and accepted as an individual and to have your individual preferences taken into account and treated with respect;
- continue your cultural and religious practices and to retain the language of your choice, without discrimination;
- select and maintain social and personal relationships with any other person without fear, criticism or restriction;
- freedom of speech;
- maintain your personal independence, which includes a recognition of personal responsibility for your own actions and choices, even though some actions may involve an element of risk which you have the right to accept and that should then not be used to prevent or restrict those actions;
- maintain control over, and to continue making decisions about, the personal aspects of your daily life, your financial affairs and possessions;
- be involved in the activities, associations and friendships of your choice, both within and outside MDHS;
- have access to services and activities which are available generally in the community;
- be consulted on, and to choose to have input into, decisions about the living arrangements of MDHS;
- have access to information about your rights, care, accommodation and any other information which relates to you personally;
- complain and to take action to resolve disputes;
- have access to advocates and other avenues of redress;
- be free from reprisal, or a well-founded fear of reprisal, in any form for taking action to enforce your rights.

As a resident you have the responsibility to:

- respect the rights and needs of other people within MDHS and to respect the needs of MDHS as a whole;
- respect the right of staff to work in an environment free from harassment;
- care for your own health and wellbeing (as far as you are able); and
- inform your medical practitioner about your relevant medical history and your current state of health (as far as you are able).

Meals

MDHS prepares delicious and nutritious meals daily for our residents. Breakfast, lunch and dinner are served in our shared dining room and we encourage you to attend this social time with other residents. If you are unwell, a tray may be brought to your room.

The menu changes daily and seasonally. There are a number of options provided at each meal. Staff are happy to discuss your nutritional needs and personal preferences to ensure that you enjoy your meals. You have the opportunity to provide feedback about the menu directly to the kitchen staff at quarterly residents' meetings or to the Food Monitor. Where there are specific issues that need to be addressed, staff will be happy to assist you to resolve them.

Meals are served at approximately the following times:

- Breakfast - 8:00 am
- Morning tea - 10:00 am
- Lunch - 12:00 noon
- Afternoon tea - 2:30 pm
- Dinner - 5:00 pm

A light supper is provided for all residents as requested.

You are welcome to drink alcohol responsibly, unless your doctor advises against this for medical reasons. "Happy hour" is held once a week with provision of moderate amounts of alcohol.

Family and Friends are welcome to have a meal with you for a small nominal fee. Please inform the residential community 24hrs prior, if you wish to enjoy a meal in the nursing home.



Calling for Assistance

Qualified staff members are available to you at all times and can be easily identified by their MDHS identification badge.

All rooms and bathroom have a nurse call buzzer to notify staff if help is required. This buzzer is usually located by the bed in your room and in the bathroom.

Food safety

It is a requirement of Food Safety Regulation that all food brought in by family members and friends must be recorded in the Food Records Book. This is to minimise the potential incidence of food borne illness to residents from the supply of raw and/or cooked food brought in externally by resident's families and/or friends.

Food must be in a sealed container, labelled, dated and refrigerated. Food will be discarded 48 hours after being received or if it is outside the use by date. MDHS does not accept donated food.

Preventing falls

Strategies used to reduce your risk of falling include:

- keeping your surroundings uncluttered and safe, and providing you with falls prevention information;
- assessing your risk of falling and discussing the results with you and your family or representative (your risk of falling will be reviewed every 2-3 months or if your health condition changes);
- developing a care plan suited to your needs and organising other health professionals if necessary (such as Physiotherapist, Occupational Therapist or Dietitian) to manage the cause of you being at risk of falling; and
- Use of falls prevention equipment.

Residents' meetings

Residents' meetings are an opportunity for you and your family or representative to discuss how your life in residential care is going. The meetings are chaired by the Nurse Unit Manager and all residents are encouraged to join in the discussion. The minutes of the meeting are made available to residents and are emailed/mailed to your family/representative.

Skin care

During your stay, staff will do regular skin inspections to ascertain your skin care needs. The aims are to prevent pressure sores, care for fragile skin and to treat any wounds in a timely manner.

Information on pressure prevention is available for you and your family and MDHS use specialised equipment for residents assessed as high risk.

Telephone & internet

We encourage all of our residents to maintain regular contact with family and friends.

As a resident at MDHS you are most welcome to have a phone installed in your room. This phone is connected as a private line, just as it would be if you were in your own home. You, or your Power of Attorney, will need to apply to Telstra, as if you were making a new connection (staff are not able to do this for you). You are responsible for all costs associated with your plan. A mobile phone may be a better option than a fixed line. Please contact the Ward Clerk to assist you with this process.

Residential have access to the internet to enable you to communicate with family and friends via email to receive news and photos. You can even have your own Facebook page or see and talk to your family via a program called Skype.

Voting

If you are currently on the electoral role and wish to continue to vote, we will arrange for the Electoral Commission to change your voting address. Electoral Commission representatives will also set up a mobile polling booth at MDHS facilities during elections to enable you to vote.

If you no longer want to vote, please let your Doctor know so that the Electoral Commission can be informed and your name removed from the Electoral Roll (as this does not happen automatically).

MARYBOROUGH RESIDENTIAL COMMUNITY

We are a 45 bed home comprising of 43 permanent beds and 2 transitional care beds. As a resident you will be cared for by compassionate, qualified nursing staff with a registered nurse on every shift.

We believe in the importance of maintaining privacy, dignity and independence and strive to build respectful and trusting relationships with residents, their family and friends. We encourage and promote resident and family involvement in decision making and care planning.

We will also support you as a resident to continue to be involved in meaningful activities and to continue to enjoy the things that make you happy.





AVOCA RESIDENTIAL COMMUNITY

Avoca is one of the three residential communities managed by MDHS. Consisting of a 30 bed community that provides permanent and respite care.

Our team consists of compassionate qualified staff. Every shift has at least 2 registered nurses rostered, ensuring every resident receives the best quality care.

Our staff tailor provision of care around the personal needs & requests of individual residents in line with the Montessori program.

Our kitchen provides home style delicious cooking, with meals prepared onsite, catering for special dietary requirements. Families are welcome to join their loved ones for a meal or cup of tea with freshly baked snacks.

Avoca has lots of Cafes and scenic drives by the river and to vineyards that family members can be enjoyed with their loved ones.



DUNOLLY RESIDENTIAL COMMUNITY

Dunolly is one of the three residential communities that are managed by Maryborough District Health service (MDHS). We are a small community with 19 single rooms located 20 minutes from Maryborough with surrounding bushland and beautiful gardens.

As a resident you will be cared for by compassionate, qualified staff who are committed to providing excellent care and support to maintain your physical, social and cultural needs.

Our aim is to create a community that supports purposeful engagement, choice, dignity, respect and independence for all residents living here.

As a resident you are encouraged to bring familiar personal items and appropriate furniture with you so your room is individualised and aides your transition into your new home.

Residents' Lifestyle communal areas

Please use these rooms at any time - take time over a cup of tea to have a chat and get to know your new neighbours.

There are large televisions in the communal rooms for you to enjoy with others. Many social and physical activities take place in the lounge during the day with staff members and local community members.

Your family, friends & visitors

Your family members and friends are very important people and we hope that they feel welcome to visit you in your new home. As a safety measure it is important for them to sign in/out of the community via registers at front entrances. This enables us to know who is in the building in case of emergency.

Visitors are welcome at any time. However, we do ask that they respect the need for staff to care for you at certain times. If staff politely ask your visitors to leave your room for a time, we hope they will understand.

Children are especially welcome and we encourage them, along with family and friends, to participate in activities and events and become involved in the life of the nursing home on a regular basis.

We encourage both you and your family or representative to play an active role in planning your care. Situations often arise when we need to get in touch with your family or representative. Please advise us of any changes of address or telephone numbers of your family members or representative.

Whilst we will do whatever we can to care for you, we are unable to transport you to your appointments. Family or friends are invited to transport you to appointments and will be contacted by staff to assist with this where appropriate. Costs for ambulance transfers are the responsibility of the resident and families (taking into account pensioners and concession card holders receive free transport, as well as ambulance subscribers).

Lifestyle & Leisure Program

MDHS offers numerous activities for you to participate in and welcomes any suggestions you may have for entertainment. Our aim is to work with you to facilitate whatever activity you wish to undertake.

At MDHS we provide a resident-centred Lifestyle Program with group and individual activities designed around your interests to provide social, recreational and interactive activities to benefit all residents.

Going out

We thoroughly support all residents participating in life outside MDHS but need to be aware of your movements to ensure that you are safe.

Please let a staff member know when you are planning to leave and the time of your planned return. Ensure that the Client Leave Book, located near the entrance opposite the Nurses' station is signed by you or an escort before you leave and upon return.

Provide staff with a contact name and number so that you can be contacted if staying elsewhere overnight. You can have 52 nights away from the community each year to visit friends or family. Please inform a staff member if meals are going to be affected by your excursion. We are happy to store meals for you to be eaten on return if desired.

External doors are locked at 8pm daily, but you are welcome to return later. Please use the doorbell at the main entrance to notify staff if you return later than this time. Each community has a security alarm and surveillance system that operates 24 hrs a day, seven days a week.

Feedback

At MDHS, we welcome all feedback that helps us improve the service we provide to you and your family. We see feedback as an opportunity to review our service delivery.

If you do have a concern, please first talk to the Nurse Unit Manager or the Nurse in charge to see if the matter can be resolved. If you or your family does not receive a satisfactory outcome you can contact the Director of Clinical Services for resolution.

There are feedback forms and information in the reception area including the Aged Care Complaints Resolution Scheme Information brochures, which outline how you and your family can make a formal complaint. Forms can be completed and placed in a "Suggestion Box", which are located throughout MDHS.

Please feel free to consult with the Nurse Unit Manager at any time. If you wish, you may have a relative or friend represent you in any discussions. We also encourage your feedback at Residents' and Relatives' Meetings.

We are serious when we say that your feedback is important to us. It ensures that the nursing home is meeting yours and your family's needs and expectations.

Fire drills

Fire drills will be held regularly. These may be checking of the alarms and shutting of the fire doors or pretending to evacuate to the designated area. Staff will be present to assist.

In the event it is decided to evacuate the premises, evacuation packs are compiled for each resident. This includes change of clothes, continence aids and other care requirements. Staff may ask you for a set of clothes for this pack which is regularly checked to ensure currency of needs.

Clothing & Laundry

Basic linen (towels, sheets, blankets, face washers) are supplied at MDHS. Personal laundry services are provided for clothing that can be machine-washed. We advise families/friends to wash woollen and other special clothes/items.

Special laundering will also be required where you have provided your own blankets, bedspreads or doonas. Staff will happily assist you to organise this laundering and you will be responsible for the cost of special laundering.

All personal clothing requires labelling which the health service will arrange prior to or on admission.

To reduce the risk of falls it is important to have well-fitting shoes and slippers. Clothing needing replacing or repair will be identified and relatives informed.

Toiletries

MDHS provides basic toiletries for you, you are free to purchase preferred products of your own. Please check these preferred toiletries regularly and replace them when needed. Staff will assist you to order preferred toiletries directly from local pharmacies which will be placed on your pharmacy bill or your family may wish to purchase these and bring them in. Other requirements such as the supply of continence aids can be discussed with staff after your admission or when signing your Resident Agreement (as a fee may apply depending on the level of care you require).



USEFUL CLOTHING GUIDE

The following lists are a useful clothing guide. They will help you know what clothes to have and how many of each item.

Women

- ☐ 10 nightdresses
- ☐ 3 cardigans
- ☐ 10 pairs of knickers
- ☐ 10 singlets
- ☐ 6 bras (preferably closing in front)
- ☐ 10 outfits (e.g. blouses/tracksuits/shirts)
- ☐ 2 pairs of slippers (well-fitted, not backless)
- ☐ 1 pair of non-slip walking shoes
- ☐ 2 dressing gowns
- ☐ 10 pairs socks/knee high stockings (no tight bands)
- ☐ 1 sun hat
- ☐ 1 winter coat

Men

- ☐ 10 pairs track pants/trousers (stretch fabric)
- ☐ 10 polo shirts (stretch fabric)
- ☐ 10 singlets
- ☐ 10 pairs pyjamas
- ☐ 10 pairs socks (no tight bands)
- ☐ 10 pairs underpants
- ☐ 2 pairs slippers
- ☐ 3 cardigans/jumpers
- ☐ 1 pair of non-slip walking shoes
- ☐ 2 dressing gowns
- ☐ 1 sun hat
- ☐ 1 winter coat

OTHER SERVICES

Doctor / General Practitioner

Doctors are available to residents through the Clarendon, Nightingale, Tristar and Dunolly General Practice Clinics. You are able to choose to be treated by any of the doctors at these Practices, all of whom have been through a rigorous checking process (known as Credentialling & Privileging) to practice at MDHS.

You may continue to consult your doctor of choice, provided that the doctor will come and visit you in the nursing home. Specialist referral will be arranged as required. Most doctors visit the nursing home weekly and on request. An "on call" doctor is available after hours, as required.

Pharmacy

Residential Communities are serviced by local community pharmacies and you can choose which pharmacy you select to provide you with medications.

On admission, please bring with you all your medication including tablets, mixtures, aerosols, vitamins, herbal preparations, lotions, creams, eye drops, etc (prescribed and otherwise) that you are currently taking.

If you or a family member have any over-the-counter preparations, we ask that you consult with nursing staff before taking them, as some might interfere with other prescribed medications (for example cough mixture).

Scripts are filled at the local pharmacy and supplied to the nursing home. Residents are responsible for the cost of their medication.

Hairdressing & Beauty Therapy

We encourage you to use your hairdresser of choice as you did prior to moving into residential care. If you prefer, an appointment can be made with a visiting hairdresser at a minimal cost.

Allied Health

The following services are available to all residents and are included in the care costs: Physiotherapy, Occupational Therapy, Speech Pathology, Podiatry, Welfare, Dietetics.

Other services available on request (and may incur a cost to the resident) include: Optometry, Dental Services, Hearing Services, Hairdressing, Beauty Therapy, Complementary Therapy and Naturopathy. Our staff will arrange appointments for you as requested.

Visiting Services

MDHS Residential Communities have visiting services available for residents. These services can be organised by staff or alternatively, residents may choose to access external services.

Hearing Aids are available if required following a consultation with the Australian Hearing Association.

Annual eye tests can be arranged and spectacles upgraded or repaired when necessary.

If you require new dentures they can be obtained through the Public Hospital Dentist at a minimal cost (once the Dentist has submitted an application). If you have existing dentures, these must be identified prior to your admission.

Religious Services

We encourage you to maintain your spiritual wellbeing. Please continue to practise your religious faith with your local church as you desire.

We also welcome to our nursing home representatives of different denominations who visit our residents. A Pastoral Care Worker visits regularly and is available on request. Services are conducted regularly and residents' family and friends are invited to attend also.

Ministers of Religion can be contacted as requested.

Prospective Resident Checklist

To assist us with your application for Residential Communities at MDHS please provide the following information.

- ☐ After visiting MDHS facilities, contact the Wait List Coordinator (WLC) to discuss your preferences
- ☐ Follow up the request for an Income and Asset Assessment with Centrelink and return a copy of the results to the WLC
- ☐ Provide a copy of any Powers of Attorney in place
- ☐ Update the WLC of any changes to your condition, or if an offer is accepted elsewhere

Other Request

Name:

Date:

For prospective residents who are currently admitted patients with MDHS, your first choice of community may not always be available. In this event, one of your other preferred facilities will be offered.

Your financial decisions can affect your Pension, Aged Care Fees and Taxes.

The Australian Government has a free information service through Centrelink.

To make an appointment call 132 300 or ring the My Aged Care information line on 1800 200 422.

We advise that you seek expert financial information from your solicitor, accountant or family advisor to help make decisions that are best for you.

- ☐ Cost of Residential Care bed fees
(covers basic cost of living)
- ☐ Means-tested Care fee
(additional fee towards the cost of care that some people may be required to pay depending on your assets/income)
- ☐ Accommodation Payment
(exempt, part or full, based on your assets/income)
- ☐ Payment of fees and charges
(by direct debit/transfer of pension to MDHS)
- ☐ Handout of fees and charges
- ☐ Information on facilities
- ☐ Out of pocket expenses / label all belongings / incidentals
- ☐ Doctor to provide cover at residential community / your current pharmacy

OFFICE USE ONLY

☐ ACCR on shared drive

I have met with the Residential Community Liaison Officer and the above information has been explained to me. I have received this Accommodation Fees & Cost Information booklet to keep for my reference.

Resident (or representative)

Name:

Signature:

Residential Admissions Officer

Signature:

Accommodation Fees & Cost Information

What do I have to pay?

Under the Aged Care Act 1997, aged care facilities are required to undertake Aged Care Accreditation.

The Australian Aged Care Quality Agency conducts unannounced visits and each three years a review against all 44 outcomes required for the home to remain compliant. This ensures all aged care facilities meet a minimum level of standards of care.

At MDHS we aim to achieve this and more, and are grateful for feedback and family participation towards achieving a high standard of care.

The National Standards Accreditation is another accrediting process that also encompasses aged care as part of the review; however the Aged Care Accreditation is the main accreditation process for our residential communities.

Costs for residential aged care fall into three categories;

1. Basic Daily Care fees

The basic daily fee covers living costs such as meals, power and laundry.

The basic daily fee is set at 85% of the single person rate of the basic Age Pension. The daily care fee is indexed in line with the Aged Pension and Consumer Price Index.

There are special circumstances, for example, ex-prisoners of war may have the basic rate of the basic daily fee paid by the Department of Veterans' Affairs.

Your basic daily fee will be indexed on 20 March and 20 September each year in line with increases to the Age Pension. The Department of Human Services will let you know when the increases occur.

2. Means Tested care fees

This is an additional contribution towards the cost of care that some people may be required to pay. The Department of Human Services will work out if you are required to pay this fee based on

an assessment of your income and assets, and will advise you of the amount. Please note that if you are a member of a couple, half of your combined income and assets are considered in determining your means-tested care fee, regardless of which partner earns the income or owns the asset. There are annual and lifetime caps that apply to the means-tested care fee. Once these caps are reached, you cannot be asked to pay any more means-tested care fees. Any income-tested care fees you have paid in a Home Care Package prior to moving into an aged care home will also contribute to your annual and lifetime caps.

3. Accommodation payments

Depending on your income and assets assessment, you will be required to pay one of the following:

- the full amount of your accommodation costs;
- a contribution to your accommodation costs (the Australian Government will pay the rest);
- no costs - if your income and assets are below a certain amount, The Australian Government will pay the full amount of your accommodation costs.

You can choose to pay your accommodation costs by using:

- a lump-sum style called "refundable accommodation deposit";
- rental-type payments called "daily accommodation payment"; or
- a combination of both.

If MDHS has asked you to pay an accommodation payment, you will have 28 days from the day you entered care to decide your payment method.

You must pay your accommodation costs by the rental-type payment method until you decide on your ongoing payment method.

If you believe you will face financial hardship in paying your residential communities costs, you can apply to the Department of Health & Human Services to be considered for financial hardship assistance.

How can I estimate my fees?

You can call My Aged Care on 1800 200 422 to help you estimate the fees and charges you may have to pay towards your residential aged care. Before you call you should have your financial information ready, especially details of your various forms of income and assets. Alternatively you can visit the My Aged Care website at www.myagedcare.gov.au and access the fee estimator calculator.

Financial advice:

You may want to consult with a financial adviser about your finances. There are various government services and resources that can help you obtain appropriate financial advice. It's a good idea to do some research to see what options work best for you.

Accreditation processes

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Mandatory Reporting

Under legislation, Residential Aged Care providers are obliged to report to police and to the Department of Social Services any reportable assaults as defined in the Aged Care Act 1997 (section 63–1AA) within 24 hours.

Reportable Acts include:

- unlawful sexual contact with a resident of an aged care home; or
- unreasonable use of force on a resident of an aged care home; or
- any instance of missing residents (when they are absent and MDHS is unaware of any reason for absence).

Palliative Care & Advance Care Planning

Good palliative care is important and involves consultation and team approach from the Doctor, nurses, Allied Health, family and residents.

Staff are trained in palliative care which includes the use of painkillers as well as other ways to relieve pain and suffering. Specialist advice is available through the Health Service.

Staff and Doctors are also trained in Advance Care planning.

Advance Care planning involves making decisions about care you want in the future when you may not be able to tell someone or make these crucial decisions for yourself.

This plan gives guidance to the health professionals about how you wish to live out your life.

After admission, if you do not already have an Advance Care Plan staff will approach you and your family to meet and discuss the concept of Advance Care Planning. Subsequent meetings will allow you to form your ideas and ultimately your Advance Care Plan.

This care plan may be changed at any time by yourself, if you are able to do so, or by your Medical Power of Attorney.

MDHS Residential Communities

Maryborough

(03) 5461 0341

Avoca

(03) 5465 1202

Dunolly

(03) 5468 2900

MDHS Campuses

Maryborough Campus

(03) 5461 0333
75-87 Clarendon Street
PO Box 155
MARYBOROUGH VIC 3465

Avoca Campus

(03) 5465 1202
10 Templeton Street
PO Box 75
AVOCA VIC 3467

Dunolly Campus

(03) 5468 2900
20 Havelock Street
DUNOLLY VIC 3462

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Helpful Contacts

Residential Community Liaison Officer

(03) 5461 0483

My Aged Care

The Australian Government's website for people to find up-to-date information about Australia's aged care system and services.
1800 200 422
www.myagedcare.gov.au

Centrelink

132 300
www.humanservices.gov.au

Department of Veterans' Affairs (DVA)

133 254
1800 555 254 (If calling from regional areas phone)
www.dva.gov.au

National Aged Care Advocacy Program

1800 700 600
www.health.gov.au/agedcareadvocacy

National Dementia Helpline

1800 100 500
131 450 (Interpreter Service)
www.fightdementia.org.au

Aged Care Complaints Commissioner

1800 550 552
GPO Box 9848, in your capital city
www.agedcarecomplaints.gov.au



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RESIDENTIAL COMMUNITIES
INFORMATION