This resource was funded by a Lotterywest grant, and was a collaborative effort between Carers WA and Advocare Incorporated.

The resource is part of Carers WA and National Disability Service's larger project, ‘A Good Practice Model for engaging carers when their relative moves into supported accommodation’. For further information about the resource or the Good Practice Model, please contact:

Natasha Richards  Patricia Mullumby  
Project Coordinator  Project Officer  
1300 227 377  1300 227 377

We would like to thank the members of the Steering Committee:

Clare Masolin (Board Member – Carers WA)  
Sarah Patterson (Advocare Incorporated)  
Daniel Walsh (Richmond Fellowship)  
Sue Maras (The Centre for Cerebral Palsy)

And the Carers WA staff who have worked on the project:

Rosie Barton (Program Manager – Carers WA)  
Natasha Richards (Project Coordinator – Carers WA)  
Patricia Mullumby (Project Officer - Carers WA)

We would also like to thank Sarah Patterson (Advocare Incorporated) for the development, design and delivery of this resource.
It is no secret that when an older person moves into supported accommodation they experience many complex emotions, and it can be a difficult time. There are many different services and support structures to assist older people through this time, but until now there has been very little to assist their family, friends and carers.

This resource is part of a larger project by Carers WA and National Disability Services, to implement the recommendations of Nulsen Haven’s ‘A Good Practice Model: for engaging carers when their relative moves into supported accommodation’ (2011).

The project will incorporate the development and delivery of training, resources, the development of training champions and the promotion of learning and outcomes at relevant conferences; to improve engagement, relationship-building and support for family members and carers of those entering supported accommodation.

The ‘Support Pack for Families of those entering residential aged care’ was developed as part of this program by Advocare, the peak organisation in the promotion of older people’s rights in Western Australia. This is the first of three resources to be developed, with the following two versions designed for family members of those entering mental health accommodation, and family of younger people with disabilities entering supported accommodation.
Your rights as a family member/friend

"A carer is someone who provides ongoing support, care or assistance to a person with disability or chronic illness (this includes mental illness) or who is frail, without receiving salary or wage (excluding Centrelink and Carers payments) for the care they provide."

What does a carer do?

A carer’s role varies and can include:

- Emotional support
- Transporting the person (e.g. to medical appointments)
- Shopping, preparing meals and household chores and maintenance
- Guidance, organisation and supervision
- Financial management
- Personal care such as assisting with showering, dressing and meals
- Decision making and advice

Although many of these roles will be filled by the support workers once the person you care for enters residential aged care, you are still considered a carer, and your role as carer should still be recognised.

As a carer you have many rights which will be supported by the residential aged care facility of your loved one. This section explains your changed role as a carer now that your loved one has transitioned into residential aged care.

Carers Recognition Act 2004

The Carers Charter is part of the 2004 Carers Recognition Act which recognises the important role of carers, and dictates the level of involvement, consultation and support that should be available to all carers.

Carers Charter

1) Carers must be treated with respect and dignity

2) The role of carers must be recognised by including carers in the assessment, planning, delivery and review of services that impact on them and the role of carers

3) The views and needs of carers must be taken into account along with the views, needs and best interests of people receiving care when decisions are made that impact on carers and the role of carers

4) Complaints made by carers in relation to services that impact on them and the role of carers must be given due attention and consideration
Your rights in each aspect of care

**Assessment**
- Be informed of any upcoming assessments
- Be present at the initial and ongoing assessments
- Contribute information to the assessment
- Be informed of aspects of assessments that affect the carer

**Care**
- Participate in the care of your loved one where appropriate (it may not be appropriate for you to assist with showering but may be appropriate for you to help with meal times)
- Be informed of any changes in your loved one's care needs

**Choices**
- Assist your loved one to be a part of the choices made about them
- Assist your loved one to choose services, times and activities

**Planning**
- Assist in the planning for your loved one's care
- Participate in planning sessions for your loved one's care
- Assist your loved one to plan for their future (see later sheet)

**Complaints**
- Assist your loved one to make a complaint
- Complain on behalf of your loved one
- Seek support for you and/or your loved one to make a complaint
- Complain about the way YOU have been treated
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Rights of the Resident

Every resident in a residential aged care facility has rights and responsibilities. It is the role of the facility to uphold and promote residents’ rights, and the role of the resident to ensure they are fulfilling their responsibilities.

The rights and responsibilities of all residents in residential aged care facilities are protected under the Aged Care Act 1997. If a resident, or their family, identify any instance whereby a resident’s rights are not being respected they have grounds to address the issue or make a complaint.

Charter of Residents Rights

Residents have the right:

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

Q. Mary is a resident of a facility, and doesn’t like the meals being served, so her daughter Sharon, has been bringing her in special meals from home. Recently the facility decided Sharon can no longer bring in food for Mary. Can they do this?

A. No. Mary has the right to decide what she will eat and where it will come from, the facility management can not stop her from accessing food from outside the facility. The staff can advise how long she can store it, and may stop her using communal fridges or having staff reheat the meal.

Q. John is a resident of a facility, and when he moved in, he brought his motorised gopher with him. John has no cognitive impairment and enjoys riding his gopher around town on warmer days. The facility has informed John that he can no longer use his gopher, as he is at risk of an accident. Can they do this?

A. No, John still has the right to make decisions about his own welfare, and be responsible for his own actions. The facility may stop John riding the gopher on the grounds, or ask him to sign a waiver but they cannot remove his gopher, or restrict him from using it off the grounds.

Q. Tom lives in a facility and is having trouble with another resident. He has spoken to the manager who has agreed to address the issue. Can they do this?

A. Yes! The facility manager can discuss any issues Tom is experiencing and has the ability to resolve many concerns quickly and effectively.

Q. Joan has been a resident in a facility for two years, and is unhappy with some aspects of her care. She is worried that if she makes a complaint, the facility could evict her, or she could lose her room. Can they do this?

A. No. Every resident has Security of Tenure, which means their room is their room and they cannot be evicted unless there are extreme circumstances.

Q. Rita has recently entered a facility and the resident in the room next to her is loud and unsettled during the night. Rita requested the manager move the other resident to a different room, but the manager has refused. Can they do this?

A. Yes! Just as Rita has Security of Tenure, so do other residents therefore the manager cannot move the other resident to another room without his or her permission. In this instance, it is reasonable for Rita to request to move to another room and the management to facilitate this move when a room is available. There may be a waiting period for a vacant room, but the management and staff should try to manage the disruption in the meantime.

If you feel that your loved one’s rights are not being respected, or you would like information or advice on a situation you are facing, you can contact Advocare on (08) 9479 7566.
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Leo Buscaglia

Who will be notified in emergency situations?

A resident can nominate their own emergency contact people, but if they have not done so, the facility will follow the Next of Kin Hierarchy:

1. Advanced Health Directive
2. Enduring Guardian (with authority)
3. Guardian (with authority)
4. Spouse or De Facto partner
5. Adult son or daughter
6. Parent
7. Sibling
8. Primary unpaid care giver
9. Other person with close relationship

NOTE: If your loved one has someone they would particularly like to nominate as an emergency contact, they just need to let the facility manager know, and their wishes will be abided by.

The question many carers ask when their loved one has entered a facility is... What now?

It is hard when you have spent years caring for a person to know what your role is now that they are in residential care. You may no longer be responsible for their personal care, medication or meals, but you still have an important and valued role to play in their life, and this is a role that is acknowledged and respected by the residential aged care facility.

This section details the important role that you still have in the life of your loved one, and the tasks that are now the responsibility of the residential aged care facility.
Where do the family and carer fit in?

Showering
This is now the role of the facility staff, however you can participate in discussions about when and how your loved one likes to be showered, and assist by bringing their favourite shower products.

Continence
Changing continence aids is now the role of the facility staff, however you can assist by giving them a history of your loved ones continence and you can have input into which continence aids your loved one prefers, and any other detail.

Emotional Support
Both you and the staff have a role in supporting your loved one, and this is a very important role. Moving to a facility can be frightening for people and they need love and support at this time, more than ever. The benefit of having the staff supporting your loved one is you can rest assured knowing the staff will support your loved one when you are not there.

Meals
The facility is required to provide residents with their meals, and have their menu plans checked by dieticians (ensuring the food is nutritious). You are permitted to bring food in for your loved one including snacks, sweets and even fully cooked meals. Many residents enjoy this, as they feel more at home eating the foods they are used to and enjoy. If you have concerns about dietary requirements, you can talk to the nurse or facility manager.

Activities
Family members are always welcome to spend time with their loved one, participate in the facility’s activities, and engage in cultural or religious practices in, or outside the facility. This role is as important now that your loved one is in care, as it was in the community. The facility’s role in the resident’s activities is to provide activities for the residents which help them to strengthen their bodies and minds, and improve their physical and mental capacity and maintain and enhance their social skills.

Suggested ways you can stay connected to your loved one

Volunteering
Make enquiries to the facility manager to find out how you can volunteer in the facility to assist your loved one, remain close and actively contribute towards their wellbeing and the wellbeing of the other residents.

Taking Your Loved One Out for the Day/ Night
Residential aged care is a home, not a prison. This means you can take your loved one out, or back home for up to seven days with no risk to them losing their place (NOTE: You will need to notify the facility before planning to do so, and the manager will advise you of any forms you need to fill out).

Spending Time in the Facility With Your Loved One
Residential aged care facilities will have visiting times, but family are permitted to stay if their loved one is sick or distressed, as long as there is no disturbance to other residents. Most facilities can also provide a lunch or dinner if you wish to stay and have a meal with your loved one and welcome your involvement in activities. (Speak to the facility manager about their policy and procedures on meals and activities).

Photo Books/ Biographies
The idea behind these books is a lasting keepsake of your loved ones stories, photos and who they are. Many facilities have these available for purchase, or you can make or buy your own. They are wonderful for both the resident and the family.

** This list is not prescriptive, or exhaustive, you are free to discuss any ways in which to stay connected, with the facility staff.
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Support Available

Carers and family members can be heavily impacted by the transition of a loved one into a residential aged care facility and they can often feel high levels of guilt, grief and loss.

Your loved one may not have all of the comforts and freedom they used to have and you, having been the primary carer may start to feel less valued.

These feelings are very common, and there are a range of support services available to you, and your loved one to help make the transition into residential aged care as smooth and comfortable as possible.

Contacts

Carers WA
Carers Counselling Line: 1800 007 332
Email counselling: chat@carerswa.asn.au
Information about any of Carers WA’s other services:
1300 CARERS (1300 227 377)

Advocare Incorporated
(08) 9479 7566
Country callers: 1800 655 566 (free)
www.advocare.org.au

Translating and Interpreting Service (TIS)
131 450
24/7 service
Support For You

Carers WA offers many valuable programs for carers including:

Counselling
Carers WA counsellors are professionally qualified and understand issues relating to your caring role. Counselling services are available over the phone, face to face, Skype or via email.

Carer Participation And Representation
The Carer Participation and Representation Program assists carers to participate on committees and advisory groups involved in health service policy, development, planning and evaluation.

Advice
Carers WA advisory team is there to provide you with assistance or advice on many different caring issues, and to help you navigate through any issues that have arisen in your caring role.

Young Carers Program
The young carers program (for carers up to 26) offers young carers access to specific information, advice, counselling, support and fun camps and activities.

Social Support, Wellness And Education
Everybody needs a break sometimes so Carers WA offers a range of social services, including:

- Morning teas and lunches
- Short break funding
- Male carer groups
- Educational workshops
- Culturally and linguistically diverse carers groups
- Movie events
- Carers retreat
- Beauty, meditation and yoga

Support For Your Loved One

Counselling Services
General counselling - Centrecare – 9325 6644
General counselling - Salvation Army – 1300 36 36 22
Family counselling – Relationships Australia – 1300 364 277

Or, speak to the facility manager for details about their counselling services

Loneliness And Isolation
Feeling alone in the facility is very common, especially for residents whose family are unable to visit frequently. Having a visitor and friend is important in these times, and visitors are available from the Community Visitors Scheme, a service that links residents with volunteers with similar interests and backgrounds.

Details on the most appropriate agency can be accessed from your facility manager or by calling Advocare on (08) 9479 7566

Financial And Legal Support Services
Older Peoples Rights Service – 9440 1663
Financial Counselling Helpline - 1800 007 007
Financial Information Service – 13 23 00
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Complaints

Aged care services are designed to be inclusive and adapt to the needs of the consumer, however no service can be 'one size fits all'. If there is some aspect of the service that is causing distress or concern to your loved one, you have a right to make a complaint or advocate for better service, and there are a number of services available to help you do this.

Advocacy services are ideal when addressing issues with your facility. Advocates offer independent, confidential and free support to help you resolve your concerns.

Advocare's advocates are independent and do not have any relationship with any facility. This independence means the advocate's goal is only to assist your loved one to achieve their desired outcome.

Contacts

Advocare Incorporated
Advocacy, information and assistance to address issues with your facility
(08) 9479 7566
Country callers: 1800 655 566 (free)
www.advocare.org.au

Aged Care Complaints Scheme
Complaints management for residential aged care in Australia
1800 550 552
www.agedcarecomplaints.gov.au
Complaints Resolution Flowchart

Follow the facility’s internal complaints policy*

Issue is resolved

Issue is unresolved

Contact Advocare

Advocate will
- Discuss options
- Identify course of action

Advocate assist you to carry out your decided action

Issue resolved

Issue unresolved

Liaison with Complaints Investigation Scheme

Client chooses no action

* Advocare advises:
Speak to management at the facility first if you can (if you feel uncomfortable or are not able to talk to the facility manager, you can contact Advocare first).

If you are uncertain about making a complaint, Advocare can make a complaint on your behalf, if necessary keeping you and the resident anonymous.

ALLIED SERVICE COMPLAINTS

If your complaint is with regards to the:
- General Practitioner (doctor)
- Ambulance
- Disability Services Commission
- Registered Nurse
- Hospital Service
- Occupational Therapist
- Pharmacist

Contact Health and Disability Services Complaints Office (HaDSCO) - (08) 6551 7600
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Plan for the Future

Future Planning

Having to make decisions on behalf of a loved one who has lost the capacity to do so, can be a stressful and difficult time. You may find yourself asking questions like:

“What would she have chosen?”

and

“Would she have wanted me to do this?”

To avoid stress on family and friends once their loved one has lost decision making capacity, it is advised that all people take steps to plan for their own future, and make their own decisions whilst they can.

There are many different tools to help your loved one prepare, and you can utilise one, or all of the following:

- Enduring Powers of Attorney
- Enduring Powers of Guardianship
- Free legal services

Contacts

Older People’s Rights Service
(08) 9440 1663
www.nsclegal.org.au

Office of the Public Advocate
1300 858 455
www.publicadvocate.wa.gov.au

Public Trustee
1300 746 116
www.publictrustee.wa.gov.au

Future Planning

Having to make decisions on behalf of a loved one who has lost the capacity to do so, can be a stressful and difficult time. You may find yourself asking questions like:

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Enduring Power of Attorney

An Enduring Power of Attorney is a document enabling anyone over the age of 18 years who has legal capacity to give another person or agency the legal authority to make financial and/or property decisions on their behalf. The person making the Enduring Power of Attorney is known as the DONOR and the person appointed as Power of Attorney is the DONEE.

Once the Power of Attorney has come into operation (either the donor has lost capacity or assigned the power) the Donee can:

- Make financial decisions
- Withdraw money from the donor’s accounts
- Authorise the sale of the donor’s property

To make an Enduring Power of Attorney you can download the kit from:

www.publicadvocate.wa.gov.au

Enduring Power of Guardianship

An Enduring Power of Guardianship is a document enabling anyone over the age of 18 years who has legal capacity to give another person or agency the legal authority to personal, lifestyle and treatment decisions on their behalf. The person making the Enduring Power of Guardianship is known as the APPOINTER and the person appointed as Power of Attorney is the APPOINTEE.

Once the Power of Guardianship has come into operation (the appointer has lost decision making capacity) the Appointee can:

- Make lifestyle or treatment decisions
- Decide on where the appointer can live, and in what conditions
- Authorise the appointers entry into aged care or alternate accommodation

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Legal Support

Older people can contact Northern Suburbs Community Legal Centre’s Older People’s Rights Service for assistance with:

- Appointing an Enduring Power of Attorney
- Appointing an Enduring Power of Guardianship
- Preparing legal family agreements
- Reviewing financial documentation before the older person signs

The Older Peoples Rights Service is a free, confidential service to assist older people to prevent and address elder abuse.

Advanced Health Directive

The Advanced Health Directive is a legal document that a person 18 years of age or older, with full legal capacity can complete. It allows the person to provide or withhold consent for specific health care, medical, surgical or dental treatments or procedures, including life sustaining measures and palliative care.

This document is then used if the person is unable to make a treatment decision at the time it is required due to loss of capacity.

www.publicadvocate.wa.gov.au
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Residential aged care is a place for your loved one to receive all of the care and services they need, 24 hours a day, delivered by trained and competent professionals. The services available differ with each facility, but the basic needs of each resident will always be met, to ensure that their stay within the facility provides adequately for their physical, emotional and spiritual wellbeing.

**Extra Care Services**

Some facilities offer ‘Extra Service’ places, which are more expensive, often having a larger Accommodation Bond and a larger Income Tested Fee. Extra services differ with each facility but offer the aforementioned services, and often services such as:

- Extra menu choices
- Wine or beer with meals
- Hairdressing
- Extra and more varied outings
- A bigger room, or a room with a better view
- Recreational equipment in the rooms, such as televisions or stereos

To find out what extra services a facility offers; speak with the facility manager who will be able to explain what services are available for each level of care.
### Services Available to LOW CARE Residents

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<tr>
<th>Service</th>
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<tbody>
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<td>Personal assistance with showering / bathing / continence / eating / dressing / moving and communicating for any resident in need</td>
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### Services Available to HIGH CARE Residents

High care residents have access to the same services as low care residents, as well as:

- **Goods and equipment to assist residents to move themselves**
  - Walkers / crutches and wheelchairs – excluding motorised wheelchairs and custom made aids

- **Goods and equipment to assist staff to move residents**
  - Mechanical hoists, stretchers and trolleys

- **Goods to assist with toileting and incontinence management**
  - Absorbent aids / commode chairs / bed pans / shower chairs / catheters and enemas

- **Basic medical and pharmaceutical supplies**
  - Analgesia / anti-nausea agents / bandages / creams / dressings and emollients

- **Nursing services**
  - Assessment, planning and management of care carried out by a Registered or Enrolled Nurse

- **Medication**
  - Management and distribution

- **Therapy services**
  - Recreational / speech / podiatry / occupational and physiotherapy services

- **Oxygen and Oxygen equipment**
  - Supplied for those who need oxygen on an episodic / short term or emergency basis

**Transport is not a service that aged care facilities are required to provide, so transport to and from medical appointments must be organised externally.**
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One of the aspects of aged care that is confusing to both residents and their families is the cost of their care, and the responsibilities of both the resident and the family with regards to paperwork, paying bills and legal contracts.

Before you, or your loved ones sign any agreements with the facility make sure you have read, and understood the paperwork and what implications it has on not only the resident, but the next of kin as well.

Before moving into the facility you will receive paperwork including:

- Residential Care Agreement
- Fees and Charges Schedule as well as a direct debit or payment agreement
- Information about the services your loved one can expect to receive
Fees and Charges

There are many different fees when entering residential aged care:

- **Basic daily fee** – Payment for accommodation and costs of daily living (currently 85% of the basic aged pension).
- **Income tested fee** – as a contribution towards the costs of care, based on the amount of income or assets a resident has, and their capacity to pay.
- **Accommodation payment** – as a contribution towards the facility's capital accommodation costs.
- **Extra services charge** – only applies to residents occupying an extra service place.
- **Additional service fee** – where the resident requests or agrees to additional services (such as newspapers and hairdressing).

Residents who do not have sufficient assets or income to pay the prescribed fees may be eligible for assistance through Centrelink and can apply for support by filling out the ‘Income and Asset Test’ available at Centrelink, or often at the facility.

If you are having any difficulties paying, or understanding the fees, discuss your concerns with the facility manager.

Accommodation Bonds

An accommodation bond (bond) is an amount a resident may be asked to pay when they require low care services or enter an extra service place. If a resident is entering the facility with higher needs, they will be assessed as a high care resident, and a bond is not required if a resident is entering as a high care resident with no extra services.

A bond is like an interest free loan to the approved provider and, the majority is returned after the resident leaves the facility, or passes away. Accommodation bond prices vary for each facility, and there is no fixed price, although the bond cannot leave the resident with less than 2.25 times the basic aged pension amount.

The bond can be paid in three different ways:

- **Lump sum payment**
- **Fortnightly/monthly payments**
- **A combination of both**

The assessment of the older person’s income and assets includes the value of their home unless it is occupied by:

- A spouse/de facto partner
- A carer eligible for the carers pension who has lived there for at least 2 years
- A close relative who has lived there for at least 5 years or
- A dependent child

Any queries about eligibility and accommodation bonds should be directed to Aged Care Australia on 1800 200 422 or www.agedcareaustralia.gov.au
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This resource was funded by a Lotterywest grant, and was a collaborative effort between Carers WA and Advocare Incorporated.

The resource is part of Carers WA and National Disability Service's larger project, 'A Good Practice Model for engaging carers when their relative moves into supported accommodation'. For further information about the resource or the Good Practice Model, please contact:

**Natasha Richards  Patricia Mullumby**
Project Coordinator Project Officer
1300 227 377 1300 227 377

We would like to thank the members of the Steering Committee:

**Clare Masolin** (Board Member – Carers WA)
**Sarah Patterson** (Advocare Incorporated)
**Daniel Walsh** (Richmond Fellowship)
**Sue Maras** (The Centre for Cerebral Palsy)

And the Carers WA staff who have worked on the project:

**Rosie Barton** (Program Manager – Carers WA)
**Natasha Richards** (Project Coordinator – Carers WA)
**Patricia Mullumby** (Project Officer - Carers WA)

We would also like to thank Sarah Patterson (Advocare Incorporated) for the development, design and delivery of this resource.