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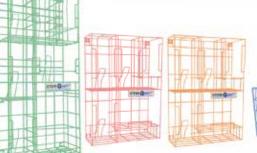
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SCAN ME



FROM THE EDITOR

Welcome to Aged Health's final edition for 2023!

This September, the federal government released the final report on the development of the draft National Aged Care Design Principles and Guidelines, which will be a focal point of the Residential Aged Care Accommodation Framework, scheduled to be implemented in July 2024.

The new set of guidelines hopes to create a more accessible, dementia-friendly and home-like environment for older people, improving their quality of life. While the release may be a few months away, we have already been seeing interesting design innovation in the sector aimed at tackling some of the challenges facing older adults. One such project is voluntary community group Heathcote Dementia Alliance's transportable care villas that feature 'bush-inspired' architectural design and fit-out with the latest in artificial intelligence and assistive technology. Read more about the project on page 28.

Another design feature in this edition is Lutheran Services' Sunshine Coast aged care home transformation involving a nature-inspired project that also tackles malnutrition, an issue that affects around half of older Australians. To learn more about the project, go to page 14.

This edition's lead article details the legal obligations when caring for individuals with diminished capacity, highlighting the obligations related to provision of care to ensure the wellbeing, safety and protection of the rights of vulnerable individuals.

Other topics featured in this issue include: infection, prevention and control in aged care; technology, cloud and other innovative solutions being deployed by providers; the role of meaningful engagement; Al for music therapy and more.

Happy reading, and wishing you all a fun, safe and relaxing festive season!

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JORDAN BRAMIS



aring for individuals with diminished legal capacity in the aged care industry provides avital support network. However, providing aged care services and working with those with reduced legal capacity comes with significant responsibilities.

Whether you are an aged care services professional, an aged care provider or a family member of an individual in care, understanding the obligations regarding the provision of care is essential to ensuring the wellbeing, safety and protection of the rights of these vulnerable individuals.

DEFINING MENTAL CAPACITY

Mental capacity isn't a one-size-fits-all concept; it's highly nuanced and contingent on various factors. An individual may have the mental capacity to make decisions in certain realms, such as personal matters or health care while lacking that skill in more complex domains, for example financial and legal arrangements.

Additionally, mental capacity can be domain-specific, meaning that an individual may be able to consent to a specific short-term procedure, such as a blood test, but be incapable of providing informed consent for a significant medical procedure. Capacity can also fluctuate over time, influenced by factors such as the time of day, medication or alcohol.

- · not comprehending the issues at hand;
- an inability to propose viable solutions;
- failure to appreciate reasonably foreseeable consequences, decision-making rooted in delusions, or
- significant cognitive impairment.

An individual's decision-making capacity may be assessed using formal tools.

APPOINTING A GUARDIAN

When an individual lacks the appropriate capacity to make informed decisions, their family, carer or support person may seek appointment as their legal guardian. In this role, they may be able to or be required to make legal decisions for the individual on their behalf, such as entering into contracts.

However, simply having a disability or being unable to make decisions at a specific time is not sufficient grounds to warrant the appointment of a guardian. An individual must have a demonstrated need to have a guardian appointed and pass various threshold questions before a decision-making body will appoint a guardian. Determining mental capacity and appointing guardians are complex and multidimensional assessments with different legal and medical considerations.

ADVANCED CARE DIRECTIVES

It is essential to determine if an individual has an appointed power of attorney (POA) to oversee their finances/medical directives or if an advanced care directive is in place.

An advance care directive contains information about the individual's wishes regarding their health care and treatment should they be unable to make or convey decisions themselves. A directive written on paper and not witnessed is still legally enforceable. However, signed advance care directives are generally recommended.

Ideally, the individual should make their family, support person or other personal contacts aware of the advanced care directive. If a POA or guardian is appointed, an advanced care directive must be referred to before making medical or health decisions about an individual's treatment or care.

ASSISTED DECISION-MAKING

In some instances, an individual can make decisions with the support of others, a concept known as assisted decision-making. Before prematurely concluding that an individual has a diminished mental capacity, exhaustive efforts should be made to provide the necessary support during their decision-making process.

Appointing substitute decision-makers or guardians should only be pursued as a last resort when all other avenues for support have been explored. Understanding these nuanced aspects of mental capacity is paramount to ensuring the legality and validity of contracts, safeguarding the rights of individuals with varying cognitive abilities.

CAPACITY DECLINE

When assessing capacity decline, it's essential to remember that neither a lack of capacity nor diagnoses alone warrant the appointment of a formal substitute decision-maker or guardian. Autonomy should be prioritised, with capacity being decision-specific. After exploring alternative approaches like supported

IT IS ESSENTIAL TO RECOGNISE THAT CAPACITY IS SITUATION-SPECIFIC AND SUBJECT TO FLUCTUATIONS.



decision-making and identifying specific needs, guardianship orders may be considered for distinct functions.

DUTY OF CARE AND DIGNITY OF RISK

Providers should also remember that they have an overriding duty of care to vulnerable clients. They need to follow all regulations and standards when providing care. Clients should also be given the dignity of taking risks, and providers should not assume diminished legal capacity purely because they do not understand or agree with decisions made by their clients. Therefore, it is the responsibility of the aged care provider to work collaboratively with the individual, respect their decisions and ensure a thorough understanding of associated risks, while striving to maintain the individual's independence and quality of life.

KEYTAKEAWAYS

Working with individuals with diminished legal capacity in aged care carries important responsibilities. It is essential to recognise that capacity is situation-specific and subject to fluctuations.

Disabilities or medical conditions do not automatically imply an absence of decision-making capacity. The essence of working with people with diminished legal capacity lies in acknowledging the intricacies of mental capacity, which can fluctuate. To best assist individuals who may have diminished legal capacity, comprehensive and case-specific assessment should be carried out, prioritising an individual's independence while balancing maintaining a safe quality of life.

Jordan Bramis is a lawyer for LegalVision.



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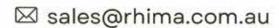
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AMY SARCEVIC

ike their registered nurse (RN) colleagues in emergency care, RNs in residential aged care facilities (RACFs) are the frontline workers responsible for the health and safety of residents.

Unlike their colleagues in emergency care, their environment is much less clinical, making it hard to achieve the same rigour when it comes to infection prevention and control (IPC).

"Aged care facilities are, by definition, considered social care settings, not healthcare facilities," said Professor Ramon Shaban of the University of Sydney.

"They are designed to resemble a home environment to the fullest extent possible. Certainly, that is a positive from an experiential point of view, but in the context of IPC, it can present a challenge.

"There are a lot more communal areas for socialising and eating, for example, which makes much easier to spread infection."

While IPC matters in both settings, its pertinence is amplified in aged care, where users tend to have more health complications.

Around 80% of Australians aged 65 and over live with a chronic health condition and 28% live with three or more, giving them greater susceptibility to communicable disease.

During COVID-19, outbreaks in aged care settings were among the deadliest, with disproportionally high rates of infection and death compared to the general community.

Thankfully, COVID-19 was a turning point for aged care, where a heightened level of IPC rigour is now seen in all facets of the sector.

However, there is still room for improvement, with more than half of Australian aged care facilities reporting a lack of specialist IPC staff and just 23% having a dedicated IPC committee.

TECHNOLOGY CAN HELP FILL THE GAPS

Professor Shaban together with Professor Kate Curtis and their colleagues are hoping to address this issue with a world-first tool, known as HIRAID Aged Care.

Funded by the Medical Research Future Fund, the tool will help nurses make systematised assessments and optimal decisions when managing IPC in residential aged care facilities.

Initially designed for emergency departments (EDs)—where it is now being used successfully—Shaban and colleagues are currently modifying it specifically for aged care settings.

"We are in the process of researching the tool's efficacy in an aged care context. But we are confident that it will help nurses assess



patients in a systematised way and predict adverse, infection-related events — much like it has done in emergency care already," Shaban said.

The tool works by going through patient history, individual patient risk and IPC red flags, and in turn providing a structured interventions and diagnostics framework.

By bringing structure to the assessment process, the tool can also help RNs communicate more effectively with other healthcare professionals.

"Itbrings commonality to IPC management in terms of processes, language and actionable output. Overall this will help nurses provide better care, improving both patients at is faction and their own job satisfaction," Shabansaid.

AVOIDING UNNECESSARY HOSPITAL TRANSFERS

Aside from the lingering aftertaste of COVID-19, a major impetus for this research was to minimise the need for aged care residents to take unnecessary hospital trips.

A 2021 report found that 25% of aged care residents were hospitalised overnight in 2018–19, with respiratory issues relating to influenza, pneumonia and lung disease the most common reason.



Aside from being costly to the healthcare system—with the average cost of an overnight hospital stay totalling \$4680—unnecessary transfers can be harmful to individuals.

Studies have shown that older people are particularly vulnerable to adverse events in emergency departments (ED) and the risk increases the longer they spend there.

Hospital stays, more generally, also come with increased hazards for this age group. These include delirium, malnutrition, pressure ulcers, depression, falls, restraintuse, functional decline, adverse drug effects and death.

Shaban hopes his tool will reduce inappropriate hospital transfers among aged care residents.

"We expect it will minimise adverse events by predicting them early and preventing them using best practice interventions, tailored to the individual and their circumstance," he said.

WITHIN REACH

The tool is currently being developed and will soon move into clinical trials, where it is expected to demonstrate similar results to its ED equivalent.

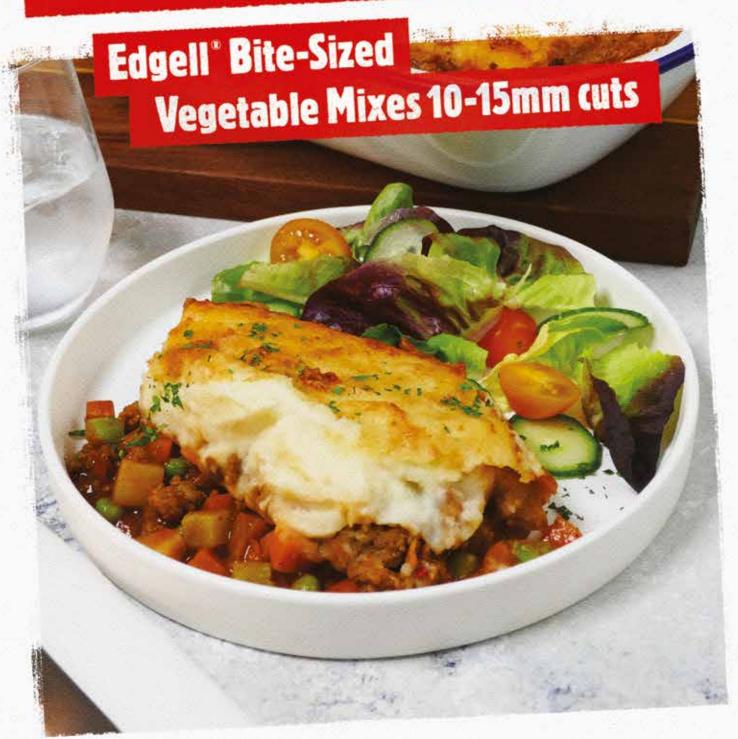
On the proviso that good results are achieved, the tool will then be made available to all residential aged care facilities throughout Australia.

Given the breadth of infection-related hospitalisations currently afflicting the sector, it is hoped the tool will play a key role in raising national standards in the quality of aged care delivery.

"IPC is such an important pillar in aged care, but it is not always given the attention and investment it deserves.

"We hope that HIRAID Aged Care will change that and support nurses with the tools they need to achieve hospital-like levels of rigour in IPC management," Shaban concluded.

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WAY.	12927	Edgell® Bite-Sized Cauliflower, Broccoli & Carrot	6 x 1.5kg (poly bag) = 9kg carton	9 cartons per layer 6 layers per pallet 54 cartons per pallet	Packed in Spain from multiple origins	Cook from frozen	Frozen







utheran Services has completed the first stage of a major \$7.8 million transformation at its Sunshine Coast aged care home. The \$2.8 million Eucalypt project, part of the group's Immanuel Gardens Aged Care in Buderim, saw 20 brand new rooms created, alongside a stunning new servery, residential-style kitchen and adjoining dining area.

Inspired by Australian flora and fauna, the $redevelopment\,sees\,each\,room\,feature\,a\,calm$ $and \, contemporary \, colour \, palette, with \, the \, focal \,$ point of the living areas being new servery and dining areas. As part of the innovative Happy Table initiative, the contemporary design is focused on enhancing the resident dining experience and includes a stylish, restaurantquality servery.

THE JOY OF WHOLESOME FOOD

Lutheran Services Regional Manager Stephanie Wilson said, "Happy Table is really about the joy $of whole some food, delicious\,menu\,choices\,and$ a friendly dining experience. It's an evidence $based\,approach\,to\,delivering\,exceptional\,food$ $and \, dining \, experiences \, that \, tackles \, malnutrition.$ Since good nutrition is the foundation for wellbeing and quality of life, Happy Table is a key initiative for Lutheran Services. Good nutrition can reduce the risk of falls, pressure injuries and unplanned weight loss.

"When you move into aged care, people want to continue to eat the tasty, wholesome food they are used to eating with their own families. Choice is a key. Besides being able to choose from a daily menu, residents are encouraged to give feedback to ensure their favourite foods are served. Boosting nutrition rates is not as simple as white tablecloths and candles, instead it's a complex play of serving delicious food in a welcoming and home-like environment, where people have time to relax and enjoy their experience," Wilson said.

The servery in the kitchen is an important partof creating a domestic, home-like environment, emphasised Wilson. "The design of the servery (>)



DESIGN MATTERS

allows for the same enticing aromas you get with food preparation we all enjoy at home and the relaxed environment and aromas stimulate appetite. The servery allows residents to choose their meal, supporting the Aged Care Standards of consumer dignity and choice."

LOCAL ENVIRONMENT, THE INSPIRATION

"The interiors respond to the local environment. The subtropical garden and bush setting set the scene for a calm and contemporary colour palette. The rooms feature a warm, neutral wall colour and stylish VJ panelling behind the custom-designed timber-look beds. Furnishings, different uses of texture and artwork tie it all together into a harmonious space.

"For residents moving into one of the new rooms, they are able to settle in and make it feel like their home, personalising the purpose-built space to suit their needs now and into the future. Theautonomy provided by our new suites supports the residents to feel independent in their care, boosting their ability to adjust more easily to living in aged care while also meeting their physical requirements with the staff and resources to suit their individual needs," Wilson said.

DESIGN CONSIDERATIONS

This was a significant project for Lutheran Services, with Stage 1 comprising the complete refurbishment and building extensions to Eucalypt, taking some 18 months to complete at a cost of \$2.8m, Lutheran Services' Executive Lead Property & Assets, Emma Hunt, said.

"The key design considerations include addressing the community expectations of single



private rooms with ensuites, and high-quality furnishings in resident rooms and in the community areas that are inviting for residents and their family and friends alike. The design seeks to capture and extend the natural light and leafy bushland setting of the local Buderim environment. The goal was to create a home-like home environment.

"You can't underestimate the value in making something that is domestic in feel and scale. Home-like means residents feel comfortable in the space and family are welcomed. Informal seating areas are part of this overall consideration, dedicated spaces where residents can meet and chat. The dedicated family room provides residents with a private area to catch up with visiting family and friends. The family room includes a lounge room and tea-/coffee-making facilities, TV and outdoor patio area overlooking the bushland setting."

OVERCOMING CHALLENGES

Reflecting on the challenges faced during expansion, Huntsaid, "The Terrace is a fully operational aged care service and undertaking the significant refurbishment project at Eucalypt presented additional onsite challenges

for our construction team. In particular, our onsite contractors needed to be mindful of the hours they could work onsite and considerate of the noise impacts on residents while still maintaining delivery program timelines. A thorough induction process and working closely with the Service Manager at Immanuel Gardens Aged Care was the key to navigating these challenges."

The Immanuel Gardens Aged Care is set amongst a private hilltop retreat with coastal vistas and refreshing breezes in a beautiful country setting on 25 acres. "The refurbishment project of the Terrace building comprises four stages in total, and we are currently out to tender for the balance of the staged works."

Stages 2–4 of the Immanuel Gardens renovation project — valued at $5 \, \text{million} - \text{will}$ commence later this year.

Grey Space was the architect and interior designer partner on the project.



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In the world of aged care, where the well-being of vulnerable individuals is paramount, ensuring food safety has always been a top priority. It's a responsibility that aged care professionals take seriously, and rightfully so. However, the landscape is evolving, and significant changes are on the horizon. Standard 3.2.2A, set to come into effect on December 8, 2023, brings important modifications to the Australia New Zealand Food Standards Code, and it's crucial for aged care facilities to be well-prepared.

Understanding Standard 3.2.2A

Standard 3.2.2A introduces a series of mandatory adjustments aimed at enhancing food safety measures within the food service industry. While these changes impact various sectors, including hospitality and healthcare, they hold particular significance for aged care providers. Let's delve into what these changes entail and how they affect aged care professionals.

- 1. Mandatory Training for Food Handlers Under the new regulations, food handlers are now required to undergo mandatory training. This training ensures that they possess the necessary knowledge of food safety practices. For aged care facilities, this means that all staff involved in food preparation and handling must complete this training to ensure the safety of residents.
- 2. Recertification for Food Safety Supervisors Food Safety Supervisors (FSS) play a crucial role in aged care facilities. They oversee food handling practices and ensure that safety protocols are followed diligently. With Standard 3.2.2A, FSS must undergo recertification to stay up-to-date with evolving safety protocols. This ensures that they have the latest knowledge and skills to maintain food safety standards.
- 3. 5-Year Validity for FSS Certificates A notable change for aged care facilities in

Victoria, Queensland, Western Australia, Northern Territory, South Australia, and Tasmania is the introduction of a 5-year validity period for Food Safety Supervisor certificates. This means that FSS certificates will need to be renewed more frequently to ensure that they align with the latest food safety standards.

4. Enhanced Record Keeping

Comprehensive and accurate record keeping is essential for aged care facilities. The new regulations require businesses to maintain more detailed records related to food safety procedures. This includes documenting various aspects of food handling, ensuring accountability, and providing traceability.

The Impact on Aged Care Professionals

For aged care professionals, these changes signify a heightened commitment to food safety. The well-being of residents is at the core of every decision made within aged care facilities, and food safety is no exception. Here's how Standard 3.2.2A affects aged care professionals:

1. Additional Training Requirements

Aged care facilities will need to allocate resources and time for mandatory training of their food handlers. This training ensures that staff are well-informed about food safety practices, reducing the risk of foodborne illnesses among residents.

2. Continued Education for FSS

Food Safety Supervisors will need to dedicate time to recertification. While this may require some adjustments to schedules, it's a crucial step in maintaining high food safety standards within aged care facilities.

3. Frequent Certificate Renewal In regions where the 5-year validity period for FSS certificates applies, aged care facilities will need to ensure that their FSS certificates are renewed in a timely manner. This keeps their supervisors up-to-date with the latest safety protocols.

4. Enhanced Record-Keeping Protocols Aged care professionals will need to develop and maintain robust record-keeping systems to ensure compliance with the new regulations. This process ensures transparency and accountability in food safety practices.

Getting Prepared

As the December 8, 2023, deadline approaches, aged care facilities should act promptly to align with the new regulations. Compliance is not just a legal requirement; it's an ethical responsibility to protect the well-being of residents.

To assist aged care professionals in understanding and implementing these changes, consider seeking guidance from compliance support officers or experts in food safety regulations. These professionals can provide tailored advice and ensure that your facility is well-prepared for the upcoming changes.

In conclusion, Standard 3.2.2A brings important modifications to the food safety landscape in aged care. While the changes may require some adjustments, they ultimately reinforce the commitment to the well-being and safety of residents. Aged care professionals must stay informed, invest in training and education, and establish robust record-keeping practices to navigate these changes successfully. Compliance is not just about meeting regulations; it's about ensuring the health and safety of those entrusted to our care.

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Aged Care Professionals

will YOU be compliant?



Attention Aged Care Professionals! Big changes are coming to food safety regulations with Standard 3.2.2A. Get ready to enhance food safety practices and protect your residents. Mandatory training, recertification, and enhanced record-keeping are on the horizon. It's not just compliance; it's a commitment to resident well-being

Stay ahead of the curve and ensure your aged care facility is prepared for the December 8, 2023 deadline. Contact our compliance support experts today for personalised guidance and expert advice. Your residents' safety is our top priority. Act now and lead the way in food safety excellence





Lucy Temby, Wellness & Community Engagement Coordinator, Cranbrook Care. Images courtesy of Cranbrook Care.

DESIGNING EXPERIENCES THAT HELP RESIDENTS THRIVE

ith astrong passion formusic and a master's degree in classical voice, aged care was not a straightforward career choice for Lucy Temby, Wellness & Community Engagement Coordinator at Cranbrook Care, a provider of aged care and retirement living residences.

"I always thought I would be a performing musician or work in arts administration; however, life has taken me down a different path," said Lucy, who became a Junior Fellow of Learning and Participation at the Royal Northern College of Music in Manchester, then got involved in community music and started volunteering with a dementia support charity.

"After six months, I was offered the facilitator role — and I haven't looked back."

MUSIC AS THERAPY

While in the UK, Lucy — who also has a Post Graduate Certificate in Person Centred Dementia Care at the University of Worcester — founded a not-for-profit organisation aimed at bringing music into aged care residences and was involved in developing young musicians' skills to connect with elderly residents to develop connection and confidence for both the younger and older generations.

"Iremember the first time I experienced music-making with a group of older adults living with dementia. The only word to describe it is 'magical'. It was so rewarding to see the difference music can have on communication, connection and mood. For me, it was an addictive experience,

and so different to performing in concert halls to audiences you can't see or interact with," Lucy said.

"Once I returned to Australia I worked as a Community Event Planner for a local council, but quickly realised how much I missed working in aged care, so I was thrilled to join Cranbrook Care in 2022 in a role where I can combine my passions for using art and music as therapy to improve wellbeing."

When asked about a typical day at work, she said, "There's nothing typical about my workdays; my role is wonderfully varied as I develop and help implement the Wellness and Community Engagement program across our four aged care residences, working closely with the Leisure and Lifestyle teams.

"On any given day I might go between a couple of our residences to run a music therapy sing-along in our Memory Support area, then head to another residence to facilitate a men's group or meet with the Leisure and Lifestyle teams to run an 'Armchair Archibald' talk about the Art Gallery's Archibald Prize competition."

INTERGENERATIONAL ACTIVITIES

Lucy's passion lies in developing intergenerational programs, such as outings to preschools, an intergenerational pen pal initiative, coordinating visits from local early learning centres or running "our Singing Mamas pilot project, bringing mums and children under five to our centres for group singing sessions".

"I'm also involved with coordinating special events, such as Wine and Cheese Tasting Day, Jazz on the Green, the Winter Music Festival, Grandkids Day or Pets on the Lawn," she said.

Interacting with and caring for older adults is one of the key reasons people are usually drawn to working in aged care, and it's not different for Lucy. "Without a doubt, it's the connections I've developed with residents. My favourite days are those where I spend time with residents and see the positive impact of our programs on their wellbeing. The fantastic thing about my role is that I get to plan, book, coordinate and review our activity programs, but I also spend time face to face with Leisure and Lifestyle staff and residents putting ideas into action."



FROM IDEAS TO ACTION

The best thing about the role is that no two days are the same, according to Lucy. Each day offers an opportunity to be creative and connect with residents. "And the better I know the residents, the more engaging and effective the programs I can develop," she said.

When asked about the inspiration behind the ideas, Lucy said, "I get a lot of inspiration and suggestions from our residents, relatives and the teams who know them best. We also receive ideas from the lovely communities around our residences, and local residents are often keen to get involved. I strive to ensure our programs cater to diverse abilities, needs and preferences, and I'm always looking for new ways to enhance community outreach, family inclusion, intergenerational relationships, art therapy, cultural activities and dementia support programs."

"It is a privilege to work for a company that is excited and supportive of developing newideas, and always open to innovation, improvement and out-of-the-box thinking," Lucy said.

As a part of Cranbrook Care's Wellness and Community Engagement program, Lucy has helped create a range of interesting activities including therapeutic animal visits, sensory gardening programs, an intergenerational story-writing program — where pre-schoolers and residents write and illustrate stories together, a chick hatching program in conjunction with preschools, and musical or sports-related outings — for example, a visit to Sydney Swans' AFL training session and more.

THE BEATING HEART OF COMMUNITY

The intergenerational programs, Lucy said, are highly popular at Cranbrook Care, not only because residents experience joy when interacting with young children, but because of the sense of purpose and value that comes from being a caregiver or respected elder in the community. The music programs and family days are also highly anticipated and very well received by the residents.

"A dedicated Leisure & Lifestyle program is the beating heart of an individual's aged care experience. It's the glue that brings residents together, helps them make friends, brings them into our communal spaces and beautiful gardens, helps them unlock new experiences and interests, and keeps them connected to their sense of self — and the wider community.

"We are fortunate at Cranbrook Care to have exceptional Leisure and Lifestyle teams who know the residents personally and go above and beyond to support each individual to discover activities which genuinely excite them and add value to their daily lives."

FOSTERING HAPPINESS, GOOD HEALTH AND CONNECTEDNESS

"These teams understand the barriers and facilitators to engagement for some of our less social residents, or those at risk of social isolation, and work alongside the wider teams to implement strategies to help them remain happy, healthy and connected. These might include running activities in smaller groups or one-on-one such as pet therapy, music therapy or our laughter care therapy, which involves trained Clown Doctors visiting residents at risk of social isolation on a weekly basis to build rapport."

Lucy has seen significant growth in leisure- and lifestyle-related initiatives and on her watch Cranbrook Care has seen several firsts. "I'm delighted with the early progress of our new Singing Mamas pilot program... I'm also looking forward to our new Christmas Creativity Celebration at the end of the year which will bring residents, staff and relatives together to reflect on the residents' amazing artistic accomplishments throughout the year.

"Looking ahead, we're developing a community volunteer program which will be really valuable, as well as formalising a residents' advisory body at each residence, which will be instrumental in sharing our residents' priorities and helping identify areas where we can create positive change," Lucy concluded.

INTERDISCIPLINARY APPROACH TO CARE



alvary and the University of Sydney are jointly trialling and evaluating a new program to help aged care residents with mild to moderate dementia remain healthy and independent.

The implementation research study-known as the I-CHARP (Interdisciplinary Care Home-based Reablement Program) project-teams experienced occupational therapists and nurses to develop holistic and tailored care plans with and for residents based on their individual needs and goals.

"Many older people in aged care homes live with dementia or a mild cognitive impairment, and there is a perception that there is nothing that can be done to support them to maintain their independence," said Calvary's Senior Medical Advisory for Aged Care, Dr Tony Hobbs.

"Previous studies have shown that simply isn't the case, and this new approach is designed to help residents continue to participate in activities and maintain their independence and function for as long as they can."

Currently, more than 400,000 Australians are estimated to be living with dementia, and with that figure predicted to more than double to 849,000 by 2058, Hobbs said finding ways to help enable people to live their best lives was an important focus.

"With this new approach, we are looking at things like mobility, language, activity and self-care," he said.

Researchers hope the new approach can ultimately be used as routine practice across aged care homes in Australia. "The difference with this approach is getting the occupational therapist involved right at the beginning, bringing a different set of eyes and working with the nurse to do a very comprehensive and holistic assessment."

Professor Yun-Hee Jeon is the project lead and the Susan and Isaac Wakil Professor of Healthy Ageing at the University of Sydney.

"The I-CHARP model builds on the Interdisciplinary Home-bAsed Reablement Program (I-HARP) which successfully helped improve daily independence and slowed further decline among people with mild dementia living in the community."

"The I-CHARP model is unique in that it provides a timely opportunity for interdisciplinary teamwork between registered nurses and allied health professionals in aged care homes. The study is about working in collaboration with aged care partners, co-designing and implementing a model of care that can work in the real-world setting for residents in aged care homes and for providers.

"Reablement is centred on the idea that health and wellbeing of older people, with or without dementia, can be maximised through helping them participate in their daily physical, social and community activities.

"We've seen how it can work in other settings. We had many participants in our previous studies who told us how wonderful it was to have that sort of positive outlook rather than saying, 'Well, you can't do this and you can't do that' all the time," Jeon said.

Calvary is one of two aged care providers partnering in the study across 16 homes. Eligible residents in half of the homes will participate in the 20-week program, with others receiving care as usual, and residents' outcomes will be monitored and compared over the next few years.

Eligible residents at Calvary's aged care home in Ryde in Sydney are currently being enrolled and detailed assessments are due to begin this week. The program will be introduced at Calvary care homes in other parts of the country as the study progresses.

THE WELLNESS CHANNEL

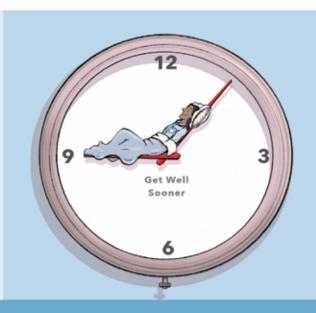
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MANSI GANDHI

As the pace of aged care sector transformation accelerates, leaders and care providers are spearheading innovation and disruption to ensure continuity and quality of care for older Australians.

orkforce shortages, rising demand, regulatory changes and funding pressures are putting mounting pressure on providers, with the 2022-23 data snapshot from the Department of Health and Aged Care suggesting that the number of residential aged care services has dropped by around 32, from 2671 in 2022 to 2639 in 2023.

Regional areas have been reported to be the most affected, with some residential facilities operating at half capacity, primarily due to staffing issues.

Providers are also weathering increased costs for agency staff to fill gaps in their permanent workforces, with industry data showing that agency costs have more than doubled since 2022, from \$7.18 per bed day in March 2022 to \$17.04 per bed day in March 20231, according to the Council for Economic Development of Australia (CEDA). This leads to a significant increase in costs for a sector that is already struggling to make ends meet.

DISRUPTION AND INNOVATION

A relatively new aged care provider, Apollo Care Alliance, founded in 2017, is supporting and de-risking smaller, distressed providers, turning them around in terms of financial performance and helping achieve full compliance and accreditation.

Equity capital specialist John Young was the one who saw the future need for an organisation like Apollo Care, CEO Stephen Becsi told *Aged Health*.

Becsi and Young are two of the founders of the Alliance — the other two being former CEO of Domain Aged Care (now Opal) Barry Ashcroft and Kylie Radburn, former National Care Governance Manager at Aveo.

"As early as 2014, there was real validation through Living Longer Living Better and the Productivity Commission report in aged care that the demand for aged care was going to outstrip supply and that the sector would need to go through significant structural reform," Becsi said.

"Bringing together some successful aged care experts with operational expertise with



NFP, private and governance with experts who understood industry-wide structural reform allowed us to create the right vehicle to leverage a future partially deregulated environment.

"Moving forward 10 years with COVID, removal of licences in July 2024, closing down of nursing homes, tightening of governance and regulations, consolidation of providers etc, John's analysis of the sector was proven to be correct.

However, like most providers, staffing is a massive challenge for the Alliance. "If you were to ask me what's the greatest problem facing the aged care sector, particularly regional markets — I'd say it's staffing," Becsi said.

TACKLING STAFF SHORTAGES

The Alliance is constantly investing in workforce and culture to overcome staffing challenges, Becsi said. This includes provision of handheld mobile devices for every care worker, measuring job satisfaction and productivity across the organisation via proprietary dashboard and innovative staffing models.

For example, earlier this year when the Alliance and The Shelter Collective in Queensland opened affordable homes for women aged over 55, tenants were offered training and employment opportunities as care workers, cooks or cleaners at an adjacent facility.

This offered an extra level of financial security and independence to the tenants while also addressing the number one issue in aged care — staff attraction and retention.



A VIRTUAL OPERATING MODEL

The Alliance already owns a total of nine facilities with a total of around 750 beds across Australia, including regional locations in Queensland, New South Wales and Victoria.

It has replaced the traditional head office with a virtual operating model, supported by a flexible and scalable technology model — key business functions such as human resources, finances, information communication and technology (ICT), culture and performance, marketing and sales support are outsourced to other businesses.

"We do not have any legacy, we're in the cloud... our combined board expertise allows us to drive our organisation in a way that improves quality of care while also increasing productivity and profitability," Becsi said.

Each facility operates like an independent provider, but with operational and financial support of the Alliance, with board of directors from the community and the board of Apollo Care Alliance. The structure allows the organisation to preserve the original constitution and the local brand, Becsi said.

THE 'BALANCED SCORECARD' APPROACH

The Alliance uses the Age-rite platform that allows them to track the wellbeing of its residents, carers, managers and leaders in real time.

Created by the cultural engineering firm Apellon, the platform analyses data to help the organisation identify and focus on activities that increase productivity; create better leaders; improve staff engagement; increase efficiency through better use of resources; and improve quality of care and life for residents.

Separately, there is a 'balanced scorecard' approach, with a strong focus on culture, which is based around four behaviours — put residents first; quality and safety in everything we do; work together, achieve together; and use your resources wisely.

The Alliance recently won two major awards — Innovation of the Year (Productivity) and Trailblazer of the Year — 2023 (for CEO Stephen Becsi) — at the 11th Asia Pacific Eldercare Innovation Awards 2023 in Singapore.

"We're living proof that investors, vendors, carers, residents and their families can successfully co-exist in equitable, profitable and enjoyable alliance," Becsi concluded.

 [&]quot;Aged Care Financial Performance Survey Report (March 2023)" (StewartBrown), https://www.stewartbrown.com.au/images/documents/StewartBrown_-_Aged_ Care_Financial_ Performance_Survey_Report_March_2023.pdf.

DEMENTIA-FRIENDLY COMMUNITIES **ACTION PLAN**



 $ementia\ Australia\ and\ Parliamentary\ Friends\ of\ Dementia's\ new\ action\ plan\ aims\ to\ make\ New\ South\ Wales\ a\ more\ dementia-friendly\ state.$

The plan will harness the broad range of information, tools and supports provided by Dementia Australia, enabling New South Wales parliamentarians to advocate for dementia-friendly communities across their electorates and within parliament.

Developed in consultation with Dementia Australia Dementia Advocates and Dementia Alliances, the plan will roll out over the next 18 months. The ongoing implementation of the Plan will ensure that the needs of people living with dementia, their families and carers remain top-of-mind across the New South Wales parliamentary community.

Dementia Australia CEO Maree McCabe AM said, "The focus of the program has been on grass roots community advocacy, actions and activity to help drive awareness of the disease and to work towards reducing the stigma that is sadly still experienced by many people living with dementia.

"The support of the New South Wales parliamentary community is invaluable in advocating for people living with dementia, their families and carers. The Action Plan was developed in consultation with people living with dementia and their family carers, and I wish to thank all of those who assisted to create the Action Plan."

Parliamentary Friends of Dementia Chair Anna Watson MP, Member for Shellharbour, said "With so many Australians now living with dementia, it is critical that all NSW Parliamentarians support the Action Plan and raise awareness about dementia in their own communities."

Parliamentary Friends of Dementia Co-Chair Dr Michael Holland MP, Member for Bega, said "Governments need to help people with dementia or cognitive impairment as well as their carers to remain at home as long as they wish by supporting them at home and in the community. When the time comes to leave their usual place of residence, we need to deal with the anxiety and discomfort caused to them and their carers."

The Action Plan is intended as a living document allowing for future opportunities and activities to be included over the course of the implementation.

Dementia Australia Dementia Advocate and Vice-Chair of the Dementia Australia Advisory Committee Dennis Frost, who is living with dementia, participated in the initial discussions at New South Wales Parliament in 2022. He said that he hopes the Action Plan will help achieve several important things:

"To raise community awareness about dementia and contribute to reducing the stigma associated with the disease, and to better inform government policies and legislation on the impacts, both negative and positive, on people living with dementia and contribute to making life better for us all."



Wireless devices of today have very different power needs to that of the past, technology has advanced and so have the power requirements.

Duracell's professional battery brand, Procell, has developed a new range of professional batteries with higher capacity and longevity, resulting in less frequent battery replacements and savings on associated operating costs and environmental impacts. Batteries can be a costly outlay for medical companies, having to replace them more often, increases the cost of purchasing more batteries, but also the cost and time of having to replace them. So how can Procell help?

Leading Technology

Through intensive device testing in its labs and working closely with manufacturers, Procell discovered a way to extend battery life, by focusing on the device power needs they were able to develop a dual portfolio of batteries with unique power profiles. All Procell batteries are tested to guarantee the highest quality and reliable performance.



Environmental testing is also conducted to ensure dependable and consistent use.

Batteries can last significantly longer

Increase your battery life and performance with Procell's dual portfolio. Procell Intense for high-drain devices and Procell Constant for low-drain devices. The difference between the two is how they operate, a high-drain device will normally have moving parts and require frequent bursts of high power to function, whereas a low-drain device has less frequent use and no moving parts.

Powering the medical industry

Batteries play an important role in the overall safety, performance, and reliability of many medical devices. Medical devices are increasingly technology focused and the number of battery-powered devices will continue to grow. While there are many advantages to using batteries in medical device applications, such as backup power or portability, having reliable devices is paramount and having long-lasting batteries is essential. Procell batteries have been specifically designed for the professional end-user, including medical practitioners. Procell batteries can be used in a number of medical devices including glucometers, blood pressure monitors, spirometers and pulse oximeters.

Calculate your savings

Procell uses a cost calculator to help you see what you can save on your battery costs, not only the cost to purchase them, but also the cost it takes to replace them. Through market research they have built an online tool that tracks the increased battery life their batteries can deliver against other brands of batteries. This is through the use of device testing with manufacturers.

Latest innovation

Procell have an extensive range of professional batteries, recently they have launched Procell Intense high-power lithium batteries, which have extended battery life and longer end of life notification — CR123 and CR2. Also recently launched are their new Process Intense Lithium coin batteries that have the very best in child safety, a bitterant coating on the coin itself that helps to combat the problems with accidental swallowing, child safe packing and engraved warning symbols.



Duracell Australia Pty Ltd www.procell.com/en-au/



'BUSH-INSPIRED' TRANSPORTABLE CARE VILLAS

he Heathcote Dementia Alliance, a small voluntary community group in rural Victoria, has created a transportable and fit-for-purpose Care Villa for people with dementia and their carers.

Costerfield House features 'bush-inspired' architectural design and fit-out with the latest in artificial intelligence and assistive technology. It is designed to provide a safe environment for people with dementia to live independently and enjoy quality of life, reducing the challenges and pressures on their carers and families.

Latest statistics estimate there are more than 400,000 Australians living with dementia and more than 1.5 million people in Australia are involved in the care of someone with dementia.

According to Heathcote Dementia Alliance President Sandra Slatter, as we age with different types of dementia, visual and mental capacity can deteriorate. "Much thought and planning has gone into the housing design, particularly in the fit-out," she said.

"Forthe past four years, we have researched, held community focus groups, taken advice from experts and above all, listened to feedback provided by carers and people living with dementia.

"Funding for Costerfield House has come via donations from local business, community

groups and community members. Local community members have also helped with various aspects of the fit-out to help keep costs at a minimum. This is a true example of a community-led grass roots initiative," Slatter said.

Costerfield House is a smart home that provides an opportunity for people with dementia to have quality of life and be supported by their families and the community. Everything happens at the touch of a button or an instruction to Alexa, Amazon's voice.

In addition to the specially designed cabinetry and flooring, the Care Villa has camera-free sensors fitted to the home. Alert devices, worn by the person with dementia, combined with artificial intelligence and machine learning algorithms, monitor the person's activities and behaviours in their home environment.

"These sensors discreetly collect data on movement patterns, sleep quality, bathroom usage and meal preparation activities. If the person with dementia has a fall, or the fridge has not been opened by a certain time, a 'red flag' alert is sent to a designated family member or an 'inhome' care provider," Slatter said.

"While Costerfield House has been specially designed for people living with dementia, the design works for people with a range of conditions who require care and support." she said.

Lighting in the home is automatically controlled by the custom circadian rhythm feature which instinctively matches the natural light of the day and supports wellbeing and the body's natural rhythm to improve energy levels and sleep patterns. This ceiling light fixture is fitted with bespoke natural high-quality audio, with a two-way speaker system.

On entering Costerfield House, a swipe of a card opens the door, turns on the lights and TV and the blinds go up. The large front windows stretching the width of the Care Villa ensure an abundance of natural light and a feeling of being in touch with nature.

Automated blinds, both blockout and sheer, are programmed to automatically close in the evening and open in the morning.

The 'wayfinding' design uses colour contrast to help someone with dementia find their way through the Care Villa. There is a distinct line of sight from the front door to the main bedroom where the eye is naturally drawn to a coloured feature wall with a large photo of something that relates to the person with dementia, such as their family members or pets.

To assist people with reduced mobility, shelving spans the width of the Care Villa in place of an institutionalised handrail. A range of textures, through quality furnishings and the timber feature wall, have been incorporated into the design to evoke memories for someone with dementia, aiding familiarity and positive associations.

The vinyl flooring throughout the Villa has been especially chosen because it is water-resistant and low maintenance, and special slip-resistant vinyl flooring has been used in the bathroom.

The kitchen design provides the optimum in functionality, including pull-down shelving, lockable drawers, stone benchtop and splashback, induction cooktop, combination grill, microwave and oven, pull-out pantry and transparent cupboard doors, enabling residents to easily see what is on shelves, plus a space-saving pull-out table for dining.



The main bedroom has been designed with line of sight to the toilet. The wardrobe is another specially designed cabinetry feature, fitted with a pulldown device to enable easy access to clothing for people with accessibility problems. Some doors on the wardrobe are transparent allowing easy visibility of clothing and contents. It is also fitted with LED lighting.

The designer bathroom cleverly masks the accessible shower and toilet. Bathroom features include a heated towel rail and regulated water temperature. Colour is a key feature, with contrasting colour leading into the shower and behind the toilet and the basin to allow for easy identification.

The 'in-home' care provider's room has an electronic access door and features a specially designed desk/bed when not in use, with the desk converting to a double bed. $\hfill \square$

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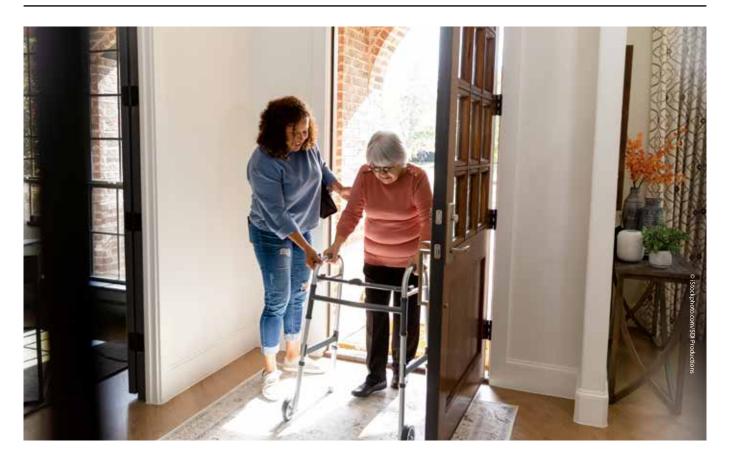
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CAN **SENSORS AND ROBOTS**HELP OLDER ADULTS STAY AT HOME LONGER?



opulations across the world, including Australia, are growing older. In Australia, the number of people aged 65 and over increased by 17% to 4.4 million over the five years to 2022. More than 1.3 million people were using aged care services in the country in 2019–2020, and there is an increasing preference for people to stay in their homes.

Now, a project led by the UTS Institute for Sustainable Futures in collaboration with the NSW Smart Sensing Network and the University of Newcastle's FASTLab seeks to understand older Australians' attitudes to using sensors and robots in their home.

STAYING AT HOME LONGER

Using sensors and robots in the home could be the key to keeping Australia's rapidly aging population at home longer.

This technology could also pose a solution to a recommendation of the 2021 Royal Commission into Aged Care Quality and Safety, which identified a lack of a dequate resources to meet the growing demand for aged care facilities and hospitals.

The project, involving NSW universities, healthcare providers and local health districts, will also survey older Australians' carers, families and healthcare professionals.

"Using sensor-driven technology in the home can help support Australia's rapidly aging population and alleviate the burden on hospitals and aged care resources," Professor Jason Prior from the UTS Institute for Sustainable Futures said.

"However, we don't know what the everyday aging person thinks about using this technology. That's why we are conducting this market research: to give us the insight we need."

USING DATA TO IMPROVE OUTCOMES

Fall-related injury is said to be single largest cause of hospital presentations, with the number of people over the age of 65 who fall increasing, according to the Clinical Excellence Commission.

The Australian Institute of Health and Welfare (AIHW) data suggests that falls are the leading cause of hospitalised injuries and injury deaths among older Australians, making up 77% of all injury hospitalisations and 71% of injury deaths in this age group.

Governments quickly need a plan to support the country's rapidly aging population and sensors can help, said the NSSN MedTech Theme Leader Catherine Oates Smith.

"Sensors can collect data on lifestyle and biometric data, such as activity data and blood pressure readings, and then trigger preventative and urgent alerts. The information picked up by the sensors can be sent to family, carers and telehealth operators so that action can be taken to support the aging

person in their home, instead of them having to go to the hospital or an aged care facility. In the aged care sector, a vital sign alerting system could significantly reduce the number of falls for aging $people, especially \, at \, night, and \, reduce the \, burden$ on carers to do check-ups in person."

THE HEALTHY@HOME INITIATIVE

The project is part of the University of Newcastle-led Healthy@Home(H@H)initiative,which is testing the ideathattechnology can help older people retain a positive sense of identity and independence in their own homes and significantly increase their quality of life, without putting strain on an alreadystretched home-care workforce.

"H@H aims to offer next-generation sensor $technology in a ged \, care, at {\it minimal} \, cost to \, health$ organisations and local health districts, which will enhance aging people's quality of life as they are safely supported in their homes," FASTLab Founder and Director Professor Paul Egglestone said. "We want to use the data collected from the project surveys to help inform industry and government about how to roll out these devices so that our aging population can stay at home longer and reduce demand on acute healthcare services."

BUILDING TRUST THROUGH COLLABORATIVE RESEARCH

Independent Health Consumer Leader and DigitalHealth Expert Advisor Harry Iles-Mann said the $surveys\ are\ an important step\ in\ building\ trust\ in\ sensor\ technology\ through$ collaborative research so that older Australians can stay at home longer.

"We know that older Australians are embracing the role that digital solutions and technology can play improving health and wellbeing," Iles-Mann said.

 $\hbox{``Intrying to innovate, building trust through partnerships and meaningful'}$ engagement with the community is not only an essential step in informing impactful design according to health consumer values — it is fulfilling the right of all Australians to contribute to and actively shape the ways decisions are made about and support their care.

"Reasons why people may reject technology could include problems $with the \, design \, of the \, technology, \, ease \, of use, concerns \, over the \, collection$ of personal information and potential of data breaches and hacks, the researchers said.

A REAL-WORLD TRIAL

The project involves a consortium of 10 Australian innovation companies, $five\,NSW\,universities\,and\,three\,NSW\,Local\,Health\,Districts.\,It\,has\,received$ \$168,000 of funding through the SPHERE Seed Funding Grant Scheme and in-kind industry support of \$221,990.

It's hoped the project outcomes will help guide existing initiatives across academia, industry, and NSW and federal governments, and lead to a real-world trial of technology in aging people's homes.

Other project partners include Tyree Foundation Institute of Health Engineering, UNSW, Central Coast Research Institute, Central Coast $Local\,Health\,District,\,InteliCare\,Holdings\,Limited,\,South\,Eastern\,Sydney$ $Local Health \, District, South \, Western \, Sydney \, Local \, Health \, District, Tunstall \,$ Healthcare, HammondCare, United For Care, NSW Meals on Wheels, Greater Cities Commission, Medical Technology Association of Australia, Aged Care Industry Information Technology Council, Hills Corporate, Vlepis Pty Ltd and D&M Research Pty Ltd.



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Natural, organic lotion

The Dermalux Soft Towel Lotion is a mild, natural, organic lotion for cleansing skin. Developed and manufactured in Australia, the product has been used in hospital and aged care facilities since mid-1980s.

The lotion cleanses and refreshes skin while maintaining skin integrity, without dryness or irritation. The natural ingredients used in the lotion nourish the natural constituents of the epidermis and balances the skin's ph.

Dermalux Soft Towel Lotion is a naturally saponified lotion designed for hospital in-patients, post-surgical, home care or aged care residents. A key feature of the product is its rapid evaporation, which enhances the action of the specially selected emollients to improve skin integrity.

The Dermalux Soft Towel Bath procedure is claimed to offer significant benefits over the conventional sponge bath technique, including: can incorporate aromatherapy and complimentary techniques; is kind to the nurse/carer's hands; is a simple technique to learn; creates a bond between nurse and patient; gives the nurse/carer the opportunity to evaluate and observe the patient; reduces manual handling of patients and associated WHS risks.

The benefits of Dermalux Soft Towel Bath for patients/residents are: improves

skin integrity; increases privacy and comfort; leaves the skin fresh and invigorated; is therapeutically beneficial; and promotes physical and mental relaxation.

The solution does not require any special equipment with minimal training required for staff/ carers.

Whiteley

www.whiteley.com.au

Fall detection and activity monitoring solution

Austco, an international manufacturer of nurse call systems and healthcare communications solutions for hospitals and senior care facilities, has partnered with Vayyar to provide touchless, camera-free fall detection and activity monitoring.

The partnership will bring touchless fall detection and activity monitoring to its global care provider customer base.

The Vayyar Care devices will be integrated directly with Austco's Tacera nurse call platform to power several solutions for different segments of the market: independent living and aged care, remote patient monitoring and dementia/memory care.

The integrated solution will provide fall alerts in all scenarios, including those when a resident or patient is unable to operate a standard alarm system or has neglected to put on a wearable device.

With the ability to 'see' residents in all conditions without revealing personally identifying information, the integrated solution gives caregivers the visibility they need to monitor residents and patients without violating their privacy.

In higher acuity facilities such as skilled nursing and post-acute care, the fall risk can be assessed and mitigated through multifactorial activity analytics and vital signs monitoring, while in memory care, operators will be able to overcome the challenge of residents' inability to report health and wellbeing issues through 24/7 monitoring.

The integrated solution is also designed to enable a suite of automated applications, such as lighting, environmental control and security features, that will reduce risk and enhance comfort for residents in all types of facilities.

Austco Healthcare Limited

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Hand hygiene range

The PrimeOn Hand Hygiene Range is a collection designed to nourish and protect skin while keeping it clean. The collection of hygiene products looks to sustainably attend to the revitalisation and health of skin.

The PrimeOn 500 mL Hand and Body Wash uses a plant-based formula and is enriched with colloidal oatmeal, purifying and rejuvenating skin. The product leaves the skin soft and comes in a 100% recyclable bottle.

The PrimeOn Sanitiser is designed for protection in healthcare environments. ARTG registered, the sanitiser is formulated to produce a non-greasy feel with a citrus scent and is used by hospitals to provide sanitation.

The PrimeOn Moisturiser looks to relieve and rejuvenate skin using a scientific blend of colloidal oatmeal, coconut oil and beeswax. The moisturiser is free from colour, fragrance and parabens.

In addition to the larger bottles, both the PrimeOn Sanitiser and Moisturiser can be found in small, portable 50 mL bottles for travel or on-the-go lifestyles.

MUN Australia www.munglobal.com.au

TACKLING **ANTIMICROBIAL** RESISTANCE



recent study, analysing wastewater samples from several aged care and retirement homes in Adelaide, reported signs of antimicrobial resistance (AMR) in at least one facility.

 $High \, levels \, of \, bacterial \, resistance \, against \, three \, common \, antibiotics - \, ceftazidime, \, cefepime \, and \, common \, antibiotics - \, ceftazidime, \, cefepime \, and \, common \, antibiotics - \, ceftazidime, \, cefepime \, and \, common \, antibiotics - \, ceftazidime, \, cefepime \, and \, common \, antibiotics - \, ceftazidime, \, cefepime \, and \, common \, antibiotics - \, ceftazidime, \, cefepime \, and \, common \, antibiotics - \, ceftazidime, \, cefepime \, antibiotics - \, ceftazidime, \, ce$ $and \, ciproflox a cin-were \, identified \, in \, one \, aged \, care \, residential \, home. \, A \, second \, facility \, recorded \, and \, ciproflox a \, cin-were \, identified \, in \, one \, aged \, care \, residential \, home. \, A \, second \, facility \, recorded \, and \, ciproflox \, according to the interval of the$ above average levels of antimicrobial resistance to gentamicin, putting residents' health at risk.

 $The {\it listed} \ antibiotics \ are used to treat a {\it variety} \ of bacterial infections, including pneumonia, gynaecological, and the {\it listed} \ are used to treat a {\it variety} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ are used to treat a {\it variety} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ are used to treat a {\it variety} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ are used to treat a {\it variety} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ are used to treat a {\it variety} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, including pneumonia, gynaecological, and {\it listed} \ of bacterial infections, gynaecological, gynaecological, gynaecological, gynaecological, gynaecological, gynaecological, gynaecological, gynaecolo$ urinary and respiratory tract infections, and those affecting bones and joints.

University of South Australia microbiologist Associate Professor Rietie Venter, who led the study, said AMR is a concerning trend in aged care facilities.

"Antimicrobial resistance is projected to lead to 300 million deaths worldwide by 2060, and aged care residents are among the most vulnerable due to frequent, inappropriate use of medicines," Venter said.

Although the wastewater study was confined to three sites and 300 residents, the findings suggest a much wider problem, and are a clear warning to aged care facilities to implement stricter policies when it comes to medication use.

 $\hbox{``As well as increasing death rates, AMR can length en illness recovery times, especially for immuno compromised and the context of the c$ people who make up a high proportion of people in aged care homes."

More than 40% of the Australian population (just over 10 million people) had a least one antimicrobial dispensed in the community in 2019, and more than 26.6 million prescriptions were dispensed for antimic robials,according to the Australian Commission on Safety and Quality in Health Care's (the Commission's) fourth Australian report on antimicrobial use and resistance in human health, AURA 2021.

The report noted that there has been a long term high level of inappropriate antimic robial use and multidrug-level of the report noted that there has been a long term high level of inappropriate antimic robial use and multidrug-level of the report noted that there has been a long term high level of inappropriate antimic robial use and multidrug-level of the report noted that there has been a long term high level of inappropriate antimic robial use and multidrug-level of the report noted that there has been a long term high level of the robial use and multidrug-level of the robial use and multresistance in aged care homes, highlighting the importance of effective infection control and antimicrobial stewardship in that setting.

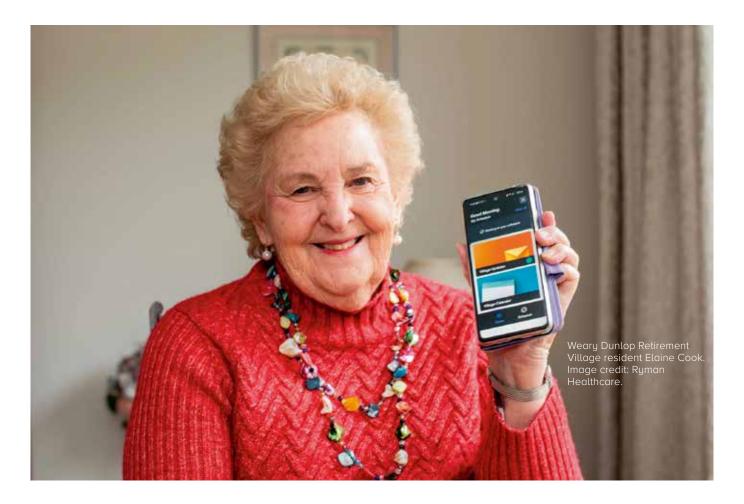
According to the Commission, the general rates of antimicrobial resistance have not significantly changed in the past two years. However, there are exceptions to this, including increasing resistance to ceftriaxone and fluor oquino lones. Both antibiotics are widely used in aged care settings, despite clinical guidelines recommending the company of the comthem as 'last resort' drugs. The rate of inappropriate prescribing for ceftriaxone was the most notable change between 2018 and 2019, increasing from 24.9% to 29.0%, according to AURA 2021.

Accurately monitoring the misuse and overuse of antibiotics in residential aged care homes is challenging, hence the use of wastewater-based surveillance, claimed to be a first for this sector.

"The results of this study highlight the need for ongoing surveillance of residential aged care facilities when it comes to medication use," Venter said.

"Given our aging population, there is a crucial need to regularly monitor these facilities and mitigate the threat of AMR"

The study is published in the latest issue of Microbiology Spectrum.



DESIGN EXCELLENCE RECOGNISED

n app to help residents stay connected, functional furniture and aretirement living project are some of the aged care related projects recognised for design excellence.

Evaluating over 900 entries, the 2023 Good Design Awards reward, recognise and promote the value of design at a local, national and international level.

Dr Brandon Gien, CEO of Good Design Australia and Chair of the Australian Good Design Awards, 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."

SOLUTION TO STAY CONNECTED, INFORMED

Ryman Healthcare bagged the Digital Design Apps and Software Green Tick Award in conjunction with New Zealand-based digital transformation partner Journey Digital for the myRyman Resident app, designed to help residents stay connected and informed.

Developed following 275+ hours of interviews, user testing and codesign sessions with over 150 residents, the app allows residents to create their own schedules, book events and receive reminder alerts.

The solution needed to be inclusive, accommodating the needs of residents with cognitive decline and visual impairments, while ensuring that everyone felt comfortable and confident. More than 74% of independent residents at the 34 villages the app has been rolled out at have access to the app and 98% of those with the app use it weekly, according to a statement by Ryman.

Ryman Healthcare Chief Experience and Engagement Officer Mary-Anne Stone said the award shows the organisation's commitment to codesigning with residents. "Working together, we can better understand how our services can evolve to meet needs and preferences, and how technologies need to work from our residents' perspective, to support those services."

The close partnership between Ryman's technology team and its digital transformation partner Journey Digital was integral to the app's success.

Journey Digital Head of Strategy and Design Amanda Stonex said, "Collaborating with Ryman Healthcare and its residents on the myRyman Resident App has been a remarkable journey. Our focus was a deep empathy for the residents, delivering the highest standards of accessibility, pairing it with a beautiful interface to genuinely elevate the resident experience."

RETIREMENT LIVING

Pavilions Blackburn Lake, a retirement living project developed by the Seventh Day Adventist $Church \, and \, designed \, by \, VIA \, Architects, has \, also$ been recognised at this year's Good Design Awards. The project "tackles multiple challenges in the seniors living sector, such as resident quality of life and community integration", according to the Good Design Awards.

"VIA Architects leveraged principals of human-centric design in their approach to the brief for Pavilions Blackburn Lake. Outdoor common areas and meandering walking paths encourage residents to connect with each other and their surrounding environment while addressing feelings of isolation that are often reported among retirees. The integration of an inner-city-style café breaks down social barriers by connecting residents with the broader community, and the conservation zones throughout the grounds prioritise sustainability while harnessing profound physical, social and mental health benefits for residents. The project exemplifies empathetic design and architecture that responds to its context."

FUNCTIONAL FURNITURE

Brisbane-founded furniture company SYSTM's work in aged care furniture, in collaboration OUR FOCUS WAS A DEEP EMPATHY FOR THE RESIDENTS, DELIVERING THE HIGHEST STANDARDS OF ACCESSIBILITY, PAIRING IT WITH A BEAUTIFUL INTERFACE TO GENUINELY ELEVATE THE RESIDENT EXPERIENCE.

> with Clandestine Design Group, was recognised in the Product: Furniture and Lighting category.

> "The project cleverly responds to design challenges to contribute to a better environment for carers and patients," the Good Design Awards Jury commented.

> "The Jury commends the design team for creating a meaningful solution that clearly demonstrates a deep level of empathy for the most vulnerable people in our society," the Jury said.

> "The genesis of this came from the Royal Commission asking our industry to do better, and we decided to take on that challenge," SYSTM founder and director Ian Reinhardt said in his acceptance speech.

> Brisbane-based Clandestine Design Group is behind SYSTM's industrial design and was also honoured by the Good Design Awards. Clandestine founder and director Neil Davidson said, "We are incredibly proud to be $recognised \ by the \ Good \ Design Awards for SYSTM's \ innovation \ and \ impact."$

> Earlier this year, SYSTM was also named a finalist for Furniture Design of the Year at the Asia Pacific Eldercare Innovation Awards.

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HOW CAN MANAGERS HELP MINIMISE PHYSICAL RESTRAINT USE?



upportive managers can empower frontline staff and play a vital role in minimising the use of physical restraints on care home residents without increasing the risk of falls, according to a new Cochrane Review.

Physical restraints are often used with an intention to prevent falls and fall-related injuries, but the benefits are usually small and come with important negative consequences, according to the study authors. For example, the restriction of movement can have negative implications on physical functioning and mobility, actually increasing the risk of falls and care dependency. The measures can also trigger or increase fear or aggressive behaviour. For this reason, guidelines and experts recommend avoiding physical restraints in residential care settings.

But how can this be implemented in practice? A Cochrane Review, first published in 2011 and recently updated to reflect the latest research, analyses the scientific evidence on interventions and strategies to reduce the use of restraints. The team of authors, led by Ralph Möhler of the University Hospital Düsseldorf, identified 11 studies with a total of 19,003 participants, evaluating different intervention approaches.

Organisational interventions to reduce the use of restraints consist of different components that function as a package — they aim to improve knowledge, skills and strategies to prevent restraint use among both frontline care staff and managers.

The authors found the best evidence for organisational interventions, which were investigated in four studies with a total of 17,954 participants. In three studies, employees designated as 'champions' were trained to develop and implement individual strategies to prevent the use of restraints within their facilities. Managers supported this, including by relieving them of other activities and providing them with sufficient time for their tasks. Such interventions probably reduce the number of residents with physical restraints in nursing homes by 14%, according to the authors.

There was no overall change in the number of residents with falls or fall-related injuries and there was no increase in the prescription of psychotropic medication. In addition, there was no evidence of adverse effects of the interventions. Based on the study data, the authors calculated that the number of residents with physical restraints could be reduced from 274 to 236 per 1000 individuals, if such interventions were implemented. Focusing on changes on the organisational level seems to be important for achieving long-term effects.

Six studies examined educational interventions addressing staff knowledge and attitudes regarding the use of restraints. The results of these studies were inconsistent and some of the studies had methodological limitations. Therefore, no clear conclusion on the effects of educational interventions can be drawn.

"The results of this review show that physical restraints in nursing homes can be reduced without increasing falls or fall-related injuries," Möhler said. "There is no evidence in the reviewed studies that psychotropic medications were prescribed more often. However, education for frontline staff alone doesn't seem to be enough; the support of care home managers plays a decisive role."

VIRTUAL VISITORS: REDUCE ISOLATION AND INCREASE CONNECTIONS WITH TECHNOLOGY



Even prior to the pandemic, many aged care residents experienced loneliness, with up to 40 percent of individuals never receiving a visitor, according to Ken Wyatt, the former minister for aged care. Loneliness and social isolation have been linked to poorer health outcomes. Social isolation in older adults correlates to a higher risk for cardiovascular, autoimmune, neurocognitive and mental health problems like depression and anxiety, according to *The Lancet*.

While a hug or holding a loved one's hand is irreplaceable, the ability to see a familiar face during a conversation may help bridge the gap for aged care residents during uncertain times.

Fostering connections with technology

Smartphones, tablets and web cameras represent convenient ways for aged care residents to connect with visitors virtually through apps and other platforms. While many older adults are tech savvy and can easily navigate the latest technology, others struggle to adapt to these digital tools.

Many residents have difficulty holding small devices or positioning them at a comfortable

height for virtual conversations. Some solutions for positioning technology are cumbersome and take up valuable real estate in already crowded areas that must also accommodate medical equipment.

How to support virtual visitors

Many carts, tables and stands are available to support technology for virtual patient-family interactions. When considering options for your organisation, prioritise these features to support the best experience for aged care residents:

- Height adjustability: Easy adjustment ensures residents can position equipment at the proper ergonomic height for comfort and improved accessibility.
- Infection control: Open architecture designs
 with thoughtful cable management are
 often easier to clean, which promotes more
 frequent wipe-downs.
- Mobility: Lightweight carts and stands can roll anywhere for virtual conversations — the bedside, garden, visitor rooms and more, which gives choice and flexibility.
- Compact footprint: A small footprint allows carts, tables or stands to fit neatly in your facility without adding clutter or competing with important medical equipment.

- Quality: Look for professional-grade options that are built to last with documented cycle testing and competitive warranties that give you confidence in its safety and your investment.
- Versatility: Adaptable solutions can be used for virtual visitors, as well as telehealth consultations with a variety of specialists. Ergotron's broad portfolio of professional-grade healthcare solutions enable aged care residents to connect with virtual visitors while supporting their physical and mental well-being. Reach out to your local Ergotron representative for a consultation on Ergonomic Healthcare Solutions.

Email: robin,burgess@ergotron.com Mobile +61 421080303.

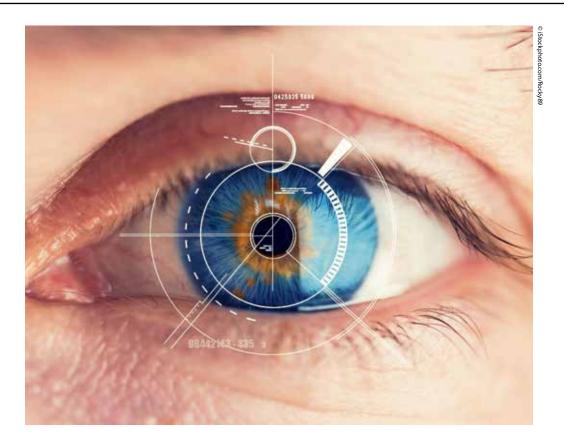
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EYE-TRACKING TECHNOLOGYHELPS ASSESS QUALITY OF LIFE



he Caring Futures Institute is using eye-tracking technology to drive improvements in line with the Royal Commission into Aged Care Quality and Safety's recommendations.

The eye-tracking technology for older people living with dementia in residential aged care facilities will improve the online assessment tools to enable wider collection of self-reported quality-of-care and quality-of-life information from older people, according to senior research fellow Dr Rachel Milte in an article published in *Quality of Life Research*.

The research group at the Caring Futures Institute (CFI) at South Australia's Flinders University has also developed two assessment tools, the Quality of Life – Aged Care Consumers (QOL-ACC) and the Quality of Care Experience – Aged Care Consumers (QCE-ACC), which are being used across the sector.

"Older adults living with a diagnosis of dementia in residential care can find it challenging to respond to traditional text-based questionnaires to rate the quality of life and quality of care they receive.

"By using eye-tracking technology we can collect crucial information about how older people with dementia read and respond to questionnaires, helping to understand how we can better design and adapt these for their needs."

In the study, researchers asked 41 residents who ranged from having 'no' to 'mild or moderate' cognitive impairment to complete a quality-of-life survey while sitting at a computer installed with eye-tracking technology.

In real time, the technology records where participants focus their eye gaze while completing the questionnaire, the text they read and don't read, and parts of the questionnaire they spend the most time looking at.

"This information helps us to design questionnaires which are easier for older people to complete, as well as understand whether they are reading all the key information to give high-quality data for use in assessing quality of care in residential aged care homes."

Milte and her colleague Dr Jyoti Khadka are expanding this research program with funding from an Australian Association of Gerontology Strategic Innovation Grant, to maximise "... self-completion of questionnaires and reduce the need to rely on proxy assessments by family members or close friends, which will support the scalability and cost-effectiveness of the National Aged Care Mandatory Quality Indicator Program."

"We know from research in the disability sector and aphasia (language disorder) research that people with communication difficulties can self-report their own quality of life, if instruments are tailored to their needs and abilities." Khadka said.

The research will develop quality assessment tools that support the inclusion of self-reported quality-of-life and quality-of-care data from people living with dementia. \blacksquare



LifeStyle™ Technology Forever Changed the Way Oxygen Users Live Their Lives

Two decades ago, oxygen users all over the world had two therapeutic options for mobility — gas cylinders or a portable liquid oxygen device. Many lived life tethered to an at-home oxygen source, and were very limited in their ability to travel or maintain a healthy level of activity. That changed with the launch of the first portable oxygen concentrator, the LifeStyle — developed and marketed by CAIRE — dramatically improving the quality of life for oxygen users worldwide.

"For us, pioneering the first portable oxygen concentrator has long been both a point of pride, and an ongoing incentive to continue to innovate and develop those technologies that will ensure clinically efficacious oxygen delivery and an improved quality of life for all of our users around the world," said Earl Lawson, CEO of CAIRE Inc.

Introduced under CAIRE's AirSep® brand, the LifeStyle portable oxygen concentrator was the brainchild of then Vice President of Research and Development, Norman "Norm" McCombs, who modeled the size and weight of the device on his wife's handbag which weighed in at 4.42kg.

Harnessing specialized technology to separate the components of air, the portable oxygen concentrator operates by taking ambient air, filtering and compressing it and then delivering up to 95 percent purified oxygen to the user via a nasal cannula. Operational via battery, electrical, or motor vehicle power, the device allowed the user the convenience of taking their oxygen source anywhere, with the ability to plug-in and recharge extending their time away from home and encouraging them to live an active lifestyle with few restrictions.

The LifeStyle would be the first POC to gain FAA approval for commercial air flights in 2005, paving the way for all POCs that would come after.

McCombs was recognized for his contributions by US President Barack Obama in 2013 who presented him with the National Medal of Technology and Innovation at the White House. The award acknowledged McCombs's development and commercialisation of pressure swing adsorption oxygen-supply systems with a wide range of medical and commercial applications, leading to improved health, substantially reduced healthcare costs and positive impacts on the environment.

The LifeStyle paved the way for the FreeStyle series, and the world's smallest portable oxygen concentrator, the Focus. These products lead the way in innovations in portable oxygen concentrators — lighter weight, expanded settings, clinical features — culminating in today's FreeStyle Comfort. Introduced in 2018, this therapeutic medical device expands on the innovations of the past 20 years — recently outperforming six competitive devices in seven out of eight breathing scenarios through a COPD simulated protocol designed to assess the ability of these devices to effectively deliver oxygen to patients.¹

Equipped with proprietary, smart oxygen delivery technologies, the FreeStyle Comfort is designed to ensure effective oxygen delivery to best support long-term oxygen therapy patients maintain an active, healthy, and fulfilled lifestyle.

UltraSense* technology detects the pressure change in the nasal cannula as the patient takes a breath and ensures that the bolus, or puff of oxygen, is delivered in conjunction with the breath rate, and autoDOSE responsive

technology delivers oxygen automatically even if no breath is detected.

Outside the US, the FreeStyle Comfort comes equipped with autoSAT*, the only technology that is clinically proven to maintain a patient's oxygen saturation over 90 percent during exertion.² Many name brand portable oxygen concentrators are designed to deliver less oxygen as the patient's breath rate increases, while autoSAT maintains the consistent therapeutic dose of oxygen no matter the breath rate.

Additionally, the FreeStyle Comfort can wirelessly connect to the myCAIRE™ telehealth solution uniquely designed for medical equipment providers who want to enhance care for their oxygen users.

About CAIRE Inc.

Global oxygen equipment manufacturer CAIRE Inc. is a leader in pioneering technologies and innovating market solutions in support of longterm health and wellness, as well as industrial applications to benefit commercial enterprise. Join us in celebrating the 20th anniversary of the LifeStyle portable oxygen concentrator the first of its kind and the medical device that forever transformed the lives of those prescribed oxygen therapy. This achievement and our legacy of expertise are cornerstones of CAIRE's time-proven portfolio of brands encompassing respiratory care diagnosis equipment; oxygen therapy devices designed for portable, athome and military use; and turnkey on-site generation solutions for medical, commercial and environmental applications. https://www. caireaustralia com au/

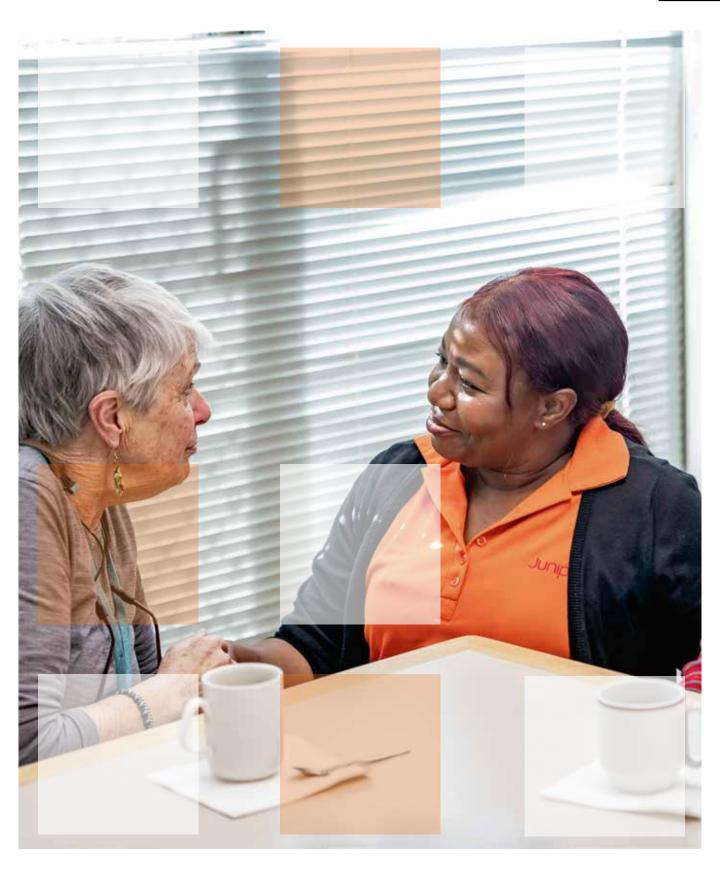


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ADAY

IN THE LIFE



PAMELA NYIRONGA

hen Registered Nurse Pamela Nyironga accepted the award for Excellence in Residential Care as a part of the 2023 WA Nursing and Midwifery Excellence Awards, she was carrying something special with her.

In a serendipitous moment, Pamela had discovered her mum's Zambian nursing registration card alongside the perfect earrings for the special night. "I tucked it in my purse and then when I accepted the award, a little part of her was with me," Pamela said, fondly remembering her mother — who was her inspiration to pursue nursing.

Her mother, a midwife in Zambia, would often solo deliver six babies on a nightshift. She proudly saw Pamela studying for her diploma before she passed away.

"The award has allowed me to believe in myself more. So many people have congratulated me, and some have said it's inspired them to study nursing. I'm honoured and humbled and I really hope it does inspire people to take up nursing in aged care, just like my mother inspired me."

THE NEED TO BE REAL, KIND AND UNDERSTANDING

Pamela often gets told "that's crazy" and "I don't know how you do it" when she explains that she works in aged care. "As an RN in aged care — administering medications, injections and all that goes with nursing — is part of the job. It goes deeper than just nursing. In aged care you need to be real, you need to be kind and take the time to truly understand someone," Pamela said.

"At university they talk about empathy, but it is just a word. What they don't teach you is true compassion and kindness and how to express that."

Pamela's focus on care stems from her career trajectory. She joined Juniper as a multiskilled carer in 2015 working at Juniper St David's Residential Aged Care Home in Perth's inner suburbs, before studying to be an enrolled nurse. She recently graduated as a registered nurse.

She's completed work placements across emergency, orthopaedics, coronary and mental health.

A SECOND HOME

"In hospitals, when you knock off, you just go home. Aged care becomes your second home. Some of the residents at Juniper St David's have been here since I started, and you become attached. In other places it's like a conveyor belt of patients. I love that in aged care there is that connection, that attachment," she said.

"It's so important we take the time to get to know the residents so they feel comfortable. It's really helpful to learn from them and their family about their cultural background so you can weave their stories into their person-centred care plan."

That connection also extends to the team.

THE HANDOVER

"At the start of my shift is handover and meeting with the multiskilled carers, who I have the utmost respect for. You need to know who is in the kitchen, who's cleaning. A cleaner who has been working for 20 years is going to know a lot.

"As an RN you work as a team, on the floor, leading by example. You need to be approachable so when any staff notice changes with our residents, they come and tell you."

MEALTIMES AND BEDTIMES

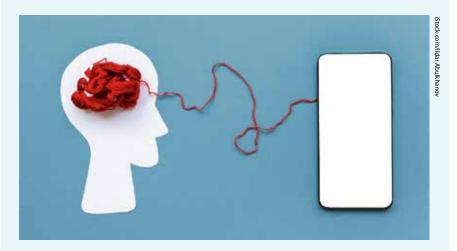
There are two favourite times during Pamela's day at work — mealtimes and bedtime.

"Growing up in Zambia our family would gather around the table and talk about everything. Mealtimes at Juniper St David's takes me right back. You see all the residents together, sometimes we have some residents singing or dancing. I just love that part.

"As a nurse it's also a great place to observe — is someone not eating, are they struggling to swallow, are they in pain. By observing small changes you can take a proactive approach.

"I also love bedtime. Often they'll give my hand a squeeze and say 'you look after yourself when you go home'. It makes me feel so fulfilled."

USING AI FOR MUSIC THERAPY



n app that unlocks the therapeutic potential of music for people living with dementia will receive \$2 million in grantfunding and support from Google's philanthropic arm, to develop wearable sensors and AI-enabled music adaptive systems and undertake a pilot in Australia.

MATCH (Music Attuned Technology – Care via eHealth) aims to address the agitation that can occur in dementia patients when emotional and physical needs go unmet, detecting early signs of agitation behaviours and providing music-based interventions to regulate mood and reduce the likelihood of developing, or the severity of, challenging behaviours.

University of Melbourne Professor Felicity Baker, principal investigator of the MATCH project, said the app has the potential to provide a practical and personalised tool to support dementia patients.

"By combining the known therapeutic benefits of the patients' personally preferred music with wearable sensor technology and AI that creates a bespoke music adaptive system, we will be able to provide early detection and treatment of agitation."

The app's AI system will learn each person's own unique agitation behaviours and positive music interventions, through an improving cycle of detection and interpretation making use of wearable sensors, observation, analysis and music treatment. The dementia patient's preferred music will adapt to synchronise and treat their agitation.

"Even the smallest change in agitation reduces care costs per person, and will reduce the need to use pharmacological interventions that can increase confusion and have other side effects."

The project consists of a training package app for caregivers with curated lists of music to enable targeted music interventions to support care, of which a prototype app has already been developed; and the music-adaptive system being developed with funding from Google.org.

"The music-adaptive system will be integrated within this app. We are looking for residential aged care homes, and people living with dementia at home, to come forward and be involved in testing our app prototype and the development of the music-adaptive system," Baker added.

The University of Melbourne's Prof Lars Kulik, leading the development of the app's Al and the integration of sensor data, said the grant will see the technology developed and introduced in Australia before being expanded globally.

"We will be able to develop a device, similar to a smartwatch, that can monitor movement, heart rate and other biomarkers. Should it detect signs of agitation, the app will play music from a curated playlist designed to soothe and calm them. If the initial music choice isn't effective, it will continue to change tracks until the person's state stabilises."

The project is funded through Google.org's AI for the Global Goals Impact Challenge, which supports organisations through the \$25 million philanthropy challenge for projects that use artificial intelligence (AI) to accelerate progress towards the United Nations Sustainable Development Goals.





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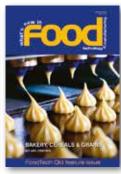


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