



Australian Nursing Home

Foundation Limited

澳華療養院基金



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# ANNUAL REPORT 2012-2013

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# Our Philosophy

## Australian Nursing Home Foundation

The Foundation was formed “to establish a charity founded and endowed for the purpose of taking care of the sick, elderly and needy people of the Australian Community...” By <sup>1</sup> following the traditional Chinese heritage of “Honouring and Respecting the Seniors of the family”, the organization adopts the Confucian precept of “Love, Serve and Respect our neighbours’ Elders as our own”, our staff are committed to pursue the highest standard of care; to ensure the needs and rights of the clients under our care are met and provided in secure, comfortable and home-like environment.

1.Excerpt from the Deed of Trust of Australian Nursing Home Foundation registered on 25 February 1980 in New South Wales of Australia



### Our Mission

“Commitment to becoming the model provider for high quality and culturally competent aged care.”

#### Our Values

##### Integrity

To be ethical, respectful, honest and trustworthy in our dealings with people.

##### Care & Compassion

Showing compassion and love by caring for and nurturing the whole person – physical, social, emotional and spiritual.

##### Professionalism

Have appropriate knowledge and skills to achieve the highest level of standards in our practices and comply with professional standards and regulatory requirements, do the right thing.

##### Respect

Treating people with Dignity and Respect.

##### Teamwork

Work as a team, embrace diversity and respect differences.

##### Equity

Acting justly and fairly, ensuring equity of access to care and accommodation, including for those in poverty or need.

##### Rights

Individual’s rights to privacy, dignity and confidentiality is recognised and respected; individuals are entitled to exercise choices and control over his/her lifestyles whilst not infringing on the rights of others.

##### Innovation

Embrace innovation and knowledge to achieve quality services, to cope with the change and think outside the box.

##### Stewardship

Responsible for the people and resources entrusted to our care, we strive to make decisions that preserve and enhance the benefit for present and future generations.



# Chairman's Report

## ANHF Chairman—Ellen Louie

I am pleased to report that 2013 has been another year of good solid growth for ANHF.

We continue to make changes and improvements to advance ANHF's culture and excellence. As we endeavour to uphold the reputation and legacy of our predecessors and go on to fulfil the need for quality age care services, our reputation within the age care industry and the community continues to grow.

*Significantly we were successful in securing a grant of another 109 home care packages. This is in addition to the 91 packages which are already in place. This will mean that more of our elderly will be supported to stay in their own homes longer with greater control and choice.*

During the year we completed the upgrade and renovations to one of our residential facilities, Chow Cho Poon Nursing Home at Earlwood, to provide a better environment to both our staff and clients.

The Board remains focused on ensuring the governance of ANHF is strong and effective. This year we reviewed and recommissioned the Audit and Risk Committee and the Remuneration Committee. I take this opportunity to thank our external Audit and Risk Committee members Kevin Yong, Shane Campbell, and Philip Poon and in the Remuneration Committee, Rosie McLaughlin for their expertise and contributions.

On behalf of the Board, I wish to thank our dedicated staff, led by our much respected CEO Ada Cheng. Our staff is the backbone of our organisation. Everyone who works at ANHF makes a valuable input and plays a vital part in our success and development, from the care workers, managers, executive staff and everyone in between. We acknowledge the efforts and commitment our staff put in to ensure the elderly clients receive the support and assistance they need every day and in helping to fulfil the strategic plan and vision set down by the Board. Without them ANHF would not be able to provide the excellent service for which it has become renown.

During the year ANHF implemented a number of appointments to its senior management team notably the appointment of the Residential Services Director and Community Services Director. These appointments were designed to facilitate the continued clinical and regulatory development and future expansion of ANHF.

We also like to express our appreciation to the volunteers who generously donate their time and to our supporters, donors and sponsors, all of whom help to ensure the services we provide to our elderly clients are the best standard of care possible.

I would also like to thank my fellow board members, Mei Mei Tse, Monica Chu, Andrew Gock and Bernard Tse, for their hard work and dedication to govern the organisation and for their time which as volunteers they give so generously to ANHF.

It is likely that many changes will occur in the near future in the provision of aged care. In April this year the then Federal government launched the 10 year reform plan for the aged care industry called Living Longer, Living Better. These reforms will be implemented in the next few years and will not only mean changes in the way we provide services to our ageing population but also to the manner of aged care funding. We look forward to these challenges and changes ahead and working to continue to deliver high standard aged care services to the Asian ageing community.



**Ellen Louie**  
Chairman, Australian Nursing Home Foundation

## Board of Directors

### Australian Nursing Home Foundation



**Ellen Louie , Chair ANHF**

Ms. Ellen Louie's professional background is in the legal sector. Ellen has practised as a solicitor for over 25 years in the Sydney CBD and currently has her own law practice. She holds a Bachelor of Laws and Masters of Law from the University of Sydney. Through her family Ellen has been associated with the Foundation since its inception and has been the Foundation's legal advisor for many years. Ellen officially joined the Board of Directors and Trustees in July 2009. Ellen recognises the difficulties and problems faced by the elderly, particularly those from non speaking English backgrounds and the constraints imposed by their language and diet, and the growing demand for aged care. There is a need to help the elderly live their lives joyfully and to the fullest and to support and assist their families. Ellen hopes to continue the good work and legacy established by her predecessors and the dedicated and loyal staff and volunteers of the Foundation. Her vision as Chairman is for the Foundation to be able to provide total integrated quality and cost efficient aged care to the Chinese elderly in all areas of Sydney and to be a leading provider in aged care. Ellen is a member of the Remuneration and HR Committee, and also the Governance Committee.



**Mei Mei Tse, Vice Chairman ANHF**

Mrs. Tse joined the Board of Directors and Trustees in 2002. She is the Director of Public Relations and event organiser of all fundraising activities. Since 1990, Mei Mei has been the Director and Public Relations executive with the Australian Society of Performing Arts and played an active role in raising funds for building the Chow Cho Poon Nursing Home and other community organisations. Mei Mei is also the Director and Treasurer of the Lee Yuen Chinese Opera and Drama Association since 1996, and the executive committee member of the Institute of Traditional Chinese & Popular Music Association in 2010. Her dedication, integrity and extensive network of community liaisons are invaluable to the Foundation. Mei Mei share the vision of ANHF and takes pride to be part of ANHF team, with the support of the board members, staff and the Chinese community, she will try her best to raise funds and resources to continue the pursuit of excellence in the provision of quality culturally appropriate care for the Aged. Mei Mei is a member of the Remuneration and HR Committee.



**Monica Chu, Hon Secretary ANHF**

Mrs. Chu graduated with a Bachelor degree in Commerce major in accounting. She joined the Board of Directors of ANHF in January 2008 and became a Trustee of the Foundation in 2009 and Board Secretary in 2008 to date. Her other commitments within the Chinese Community include: Treasurer of Wayin Network (1999), Chairman of the management committee of the Chinese Catholic Community Homes Ltd. (2003-2005), President of the Lions Club of Sydney Pacific Inc. (2010) and Council Chairman of the Australian Chinese Charity Foundation Inc.(2009 to 2012). It is her wish that ANHF's "ageing in place" concept will continue to thrive and expand. For now in the immediate future, it is important for the organisation to reflect on the lessons learned and consolidate the administration and financial structure for further long term expansion of ANHF's services to the community. Mrs Chu takes pride in the dedication, teamwork and integrity of ANHF's senior management and its frontline staff. It is most rewarding for her to witness the appreciation and happy faces of the ANHF elderly service recipients and their carers. Monica is a member of the Remuneration and HR Committee, and also the Governance Committee.

## Board of Directors

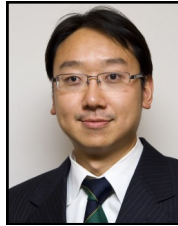
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### Australian Nursing Home Foundation



**Andrew Gock, Treasurer ANHF**

Andrew graduated from the University of Technology in Sydney with a Bachelor of Business (Majoring in Accounting and Sub-Major in Information Systems). He is a CPA in public practice, specialising in the provision of accounting and taxation services. He is also an Authorised Representative to Count Financial Limited and offers financial planning in his practice. Andrew joined the Board of Directors, as Treasurer and Trustee, in February 2010. His aspiration is to ensure that the legacy of the original founders and past trustees of ANHF is sustained and enhanced for generations to come. The original mission was "to establish a charity founded and endowed for the purpose of taking care of the sick, elderly and needy people of the Australian community". Prior to joining the Board of Directors, Andrew assisted the ANHF with their accounting requirements. Through this initial involvement, Andrew has witnessed the dedication and professionalism and enthusiasm of the staff and volunteers of the ANHF. Andrew Gock said, "It is a privilege to be involved with ANHF. I believe ANHF is one of the best aged care facilities offering specific culinary and cultural needs to our elderly Chinese community. ANHF is blessed to have so much support from the community and all levels of Government. I aim to listen and continue to serve the Chinese community through my entrusted position and work with the ANHF". Andrew is also a member of the Audit and Risk Committee.



**Bernard Tse, Director ANHF**

Dr. Tse is a registered general practitioner in NSW. He has been a visiting doctor at eight nursing homes in the inner west of Sydney. He is a member of the Medication Advisory Committee of Bernard Chan Nursing Home and Chow Cho Poon Nursing Home since 2004 and recently LCACC. He takes great joy in being able to serve the elderly members of our society, looking after their health and helping them live life to the fullest. ANHF has been providing high quality care for older people in the Australian Chinese Community for over 30 years. The dedication and care of the staff has earned its excellent reputation and strong support in the community. Dr Tse is honoured to serve with an organisation of such distinctions. Dr. Tse is also a member of the Audit and Risk Committee at ANHF.

# CEO's Report

## ANHF CEO — Ada Cheng

I look on the achievements of ANHF over the past 12 months with great pride as a time of growth and achievement. Together with the Board, management, staff and volunteers, of ANHF, we had another year of substantial improvements.

### Service Expansion

We are also excited to see the great expansion of our Home Care Services in 2013 which we hope will enable us to provide the same level of service that we currently provide at our aged care facilities in the comfort of the home where possible. With the newly allocated 109 packages, we have extended 4 levels of packaged care services to older people of Chinese and Indo-Chinese backgrounds living in all Metropolitan Sydney areas. Our home care upholds the principles of person-centred and consumer directed care which brings comfort and peace of mind to both care recipients and their carers.

Our service expansion into the community sector since 2006 continues to deliver growth and innovation. This implies not only growth for us as an organisation, but it is even better advancement in care for our residents, service users and their carers as we are able to provide continuum of care via an increasingly comprehensive and cohesive range of services in integrated settings. The opening of the new dementia respite day care centre within the dementia wing of Lucy Chieng Aged Care Centre, Hurstville is a showcase of successful integration between residential and community services. This alleviates the stress of the carers whose loved ones are on the waiting list of the dementia wing and prevents immature institutionalisation.

### Upgrades of Physical Environment

Our aim at ANHF has always been to provide excellence in care to our aged and with this in mind we have spent over 6 months in upgrading Chow Cho Poon Nursing Home which included expansion of the Activity Room and Staff Room, internal and external refurbishment with new paint works, new furniture, fixtures and equipment. Upgrades of the home not only benefit our residents who are most proud of, but also provides a better environment for our staff as well as the relatives who have entrusted us with the care of their loved ones. We are committed to continuing these upgrades throughout ANHF facilities in accordance to our asset management plan as it is our belief that this is what our customers deserve.

### Finance

ANHF is a financially secure organisation with more than \$22 million/year income and substantial cash reserves. We have been steadily growing and diversifying over the past 5 years responding and adapting to both changing community needs and government policy. Though our core business remains in aged care, ANHF operations includes residential aged care, a growing community division, and social housing. Not relying on a single service model or income stream ensures the organisation will remain resilient to any additional changes in the future.

- ANHF has a healthy cash position of \$5.9 million in cash Reserves.
- ANHF has a strong Assets to Liability position of \$46million: \$8 million, i.e.: net assets of \$37 million.

### Strategic Plan 2013-18

Our Board and executive team have worked out a 5 year Strategic Plan 2013--2018. The Board recognises that strong strategic planning processes are essential for the future of ANHF and we set a historical milestone to have a bottom-up strategic planning process with all management team committed in a strategic planning process to re-define our vision, mission and values. As great regulatory changes from the Aged Care Reform - "Living Longer Living Better" unfolded before us, it is imperative that we identify challenges and opportunities which will enable us to deliver the services our residents and service users choose. The plan clearly set out what we want to achieve as an organisation over the next five years with the following

#### 6 Strategic goals: -

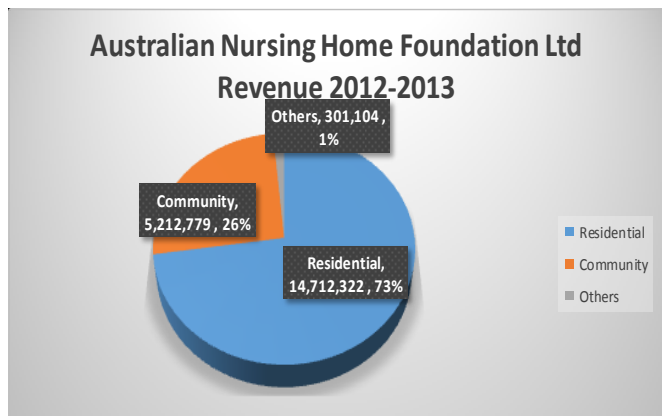
1. Business Sustainability
2. Develop and deliver innovative, quality services which are consumer led and focused
3. A Competent and Committed Workforce
4. Achieve Sustainable organisational growth
5. Build capacity to influence social issues and strengthen recognition of ANHF as the model providers of aged care for CALD communities
6. Establish Quality Management System

The Plan will be supported by specific business plans of each service units which will be the result of extensive work by our many dedicated staff within the organisation. Our executive team has committed to provide quarterly report to the Board of our progress towards the strategic plan.



# CEO's Report

- At June 30 2013 the serviceability of future obligations remain strong and the outlook for ANHF positive.



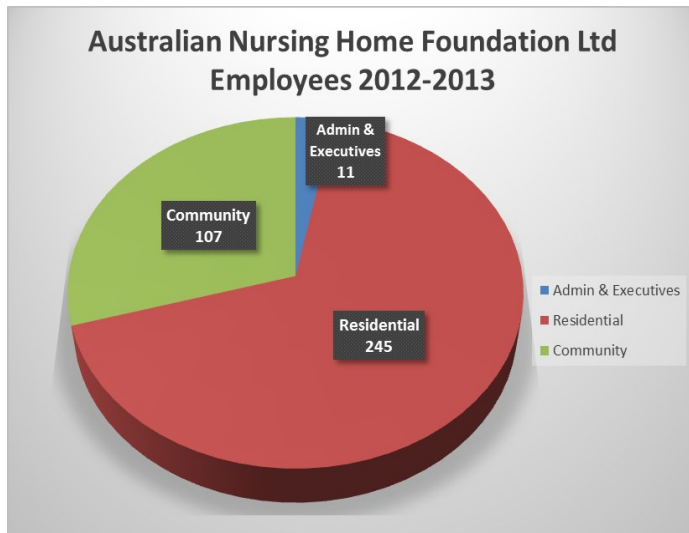
Our Finance and Administration Team is ever-expanding to cater for the increasing workload due to the rapid expansion of aged services in both community and residential sectors.

## Technology

Constant changes to our information systems impact our daily operations at ANHF. We are constantly looking for better systems and better ways to manage the ever changing technological environment. This year has seen the implementation of the Office 365 system, providing staff with more flexible tools in accessing information. Also, our offices have upgraded the computer systems across Community Services, and Head Office.

## People

Whilst I am obviously grateful for the achievements of the management team, I am proud of the frontline workers who work daily with us. I know personally that they are all dedicated and committed to our residents and service users who are entrusted into our care. I know that everything they provide on a daily basis goes far beyond what I could ever ask of them. Without each and every one of these dedicated staff, ANHF could not have become what it is today.

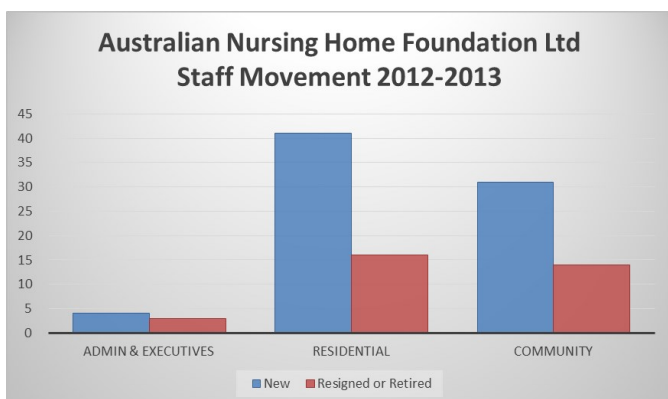


I would also like to take this opportunity to thank our Principal Director of Nursing, Mrs Celia Chik who retired in May 2013 and passed on 10 years of solid good work which laid the strong foundation of our quality care system. I welcome our Director of Community Services, Mrs Xuyen Tang, Mrs Melissa Loustau, Home Care Manager and Ms Sinny Tsai, Director of Nursing of Bernard Chan Nursing Home and Ms Grace Chan, Community Services Manager and brought with them valuable experiences. I also thank the senior management team who steer ANHF on a day-to-day basis towards the many milestones in excellence that have been achieved. Their commitment to absolute unwavering excellence together with their dedication is clearly seen in the care delivered to our residents and service users each and every day.

Finally to all the relatives and family members who have entrusted their loved ones to our care I assure you of our utmost attention and dedication to your loved ones at all times.

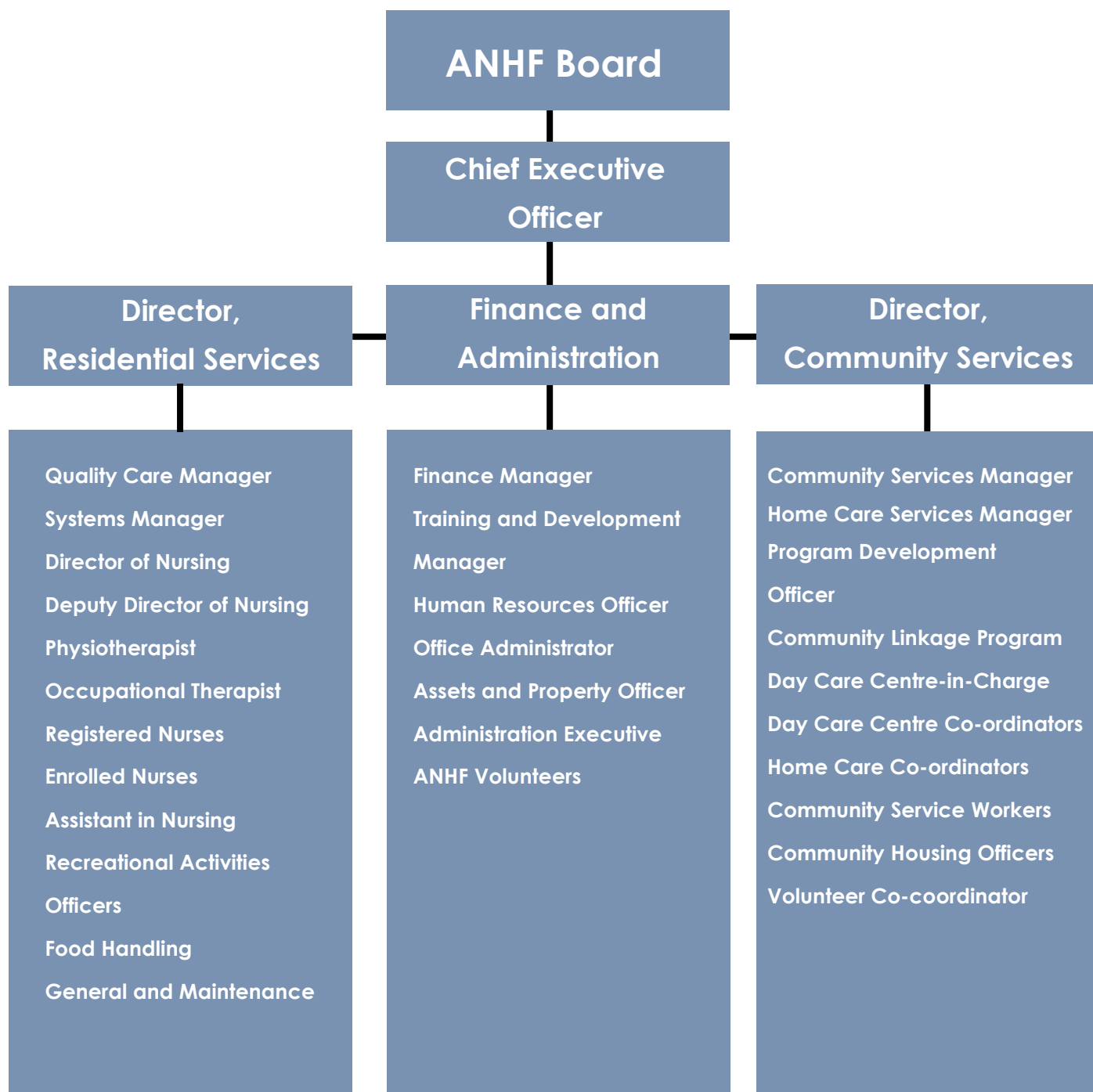


**Ada Cheng**  
Chief Executive Officer



# Organisational Structure

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# Strategic Plan 2013-2018

Strategic Goals	Strategic Imperatives	Focus Areas
Board and Governance	Optimise ANHF governance structure to provide strategic directions.	<b>Accountability of performance.</b> <b>Compliance with relevant laws and regulations.</b> <b>Financially prudent.</b> <b>Planning, development and business growth.</b>
1. Business Sustainability	1.1 Income Management.	·Occupancy management. ·Aged Care Funding Tools (ACFI). ·ACFI Monitoring. ·Prudential and Bond Management. ·Debt Control.
	1.2 Cost Management.	·Supplier's management. ·Processes and systems in place. ·Quality supplier. ·Supplier Non-conformance: process. ·Stocktake and Minimum Order Cycle.
	1.3 Asset Management.	·Develop of a ten (10) year capital, property replenishment and development plan.
	1.4 Technology Management.	·Improve service efficiencies and effectiveness. ·Prioritised implementation for Information and Communications (ICT) Strategy.
	1.5 Risk Management.	·Safe and risk controlled organisation by having systems in place.
	1.6 Long-Term Viability.	·A financial framework including capital, maintenance and operational viability, report to the Board each 6 months.

# Strategic Plan 2013-2018

Strategic Goals	Strategic Imperatives	Focus Areas
<b>2. Develop and deliver innovative, quality services which are consumer led and focused</b>	2.1 Adaptable and innovative service delivery.	<ul style="list-style-type: none"> <li>·Consumer led and customer focused</li> <li>·Develop feedback management systems</li> </ul>
	2.2 Quality, accessible and affordable services and accommodation.	<ul style="list-style-type: none"> <li>·Review service fees and charges and consumer's and carer's feedback.</li> </ul>
<b>3. A competent and committed workforce</b>	3.1 Right People in the right position at the right time - attract and retain staff, building knowledge, skills, attitudes and leadership capabilities.	<ul style="list-style-type: none"> <li>·Effective human resource management systems, staff surveys and feedback mechanisms.</li> <li>·Flexible work practises, reward and recognition strategies.</li> </ul>
	3.2 Build the capacity of staff via effective education and training.	<ul style="list-style-type: none"> <li>·A sufficient supply and stability of suitably qualified and skilled staff.</li> </ul>
<b>4. Achieve sustainable organisational growth</b>	4.1 Property Redevelopment	<ul style="list-style-type: none"> <li>·A costed, viable 10-year rolling Property Development Plan.</li> </ul>
	4.2 Acquisition Strategy	<ul style="list-style-type: none"> <li>·An Acquisition Strategy - incorporates a comprehensive due diligence model.</li> </ul>
	4.3 New Service types that meet future needs	<ul style="list-style-type: none"> <li>·Enabling model of care, transitional care, chronic disease, dementia and palliative care.</li> </ul>

# Strategic Plan 2013-2018

Strategic Goals	Strategic Imperatives	Focus Areas
<b>5. Build capacity to influence social issues and strengthen recognition of ANHF as the model providers of aged care for CALD communities</b>	5.1 Establish collaborative relationships with regulatory and statutory bodies and government departments / agencies.	Collaborative relationships with all regulatory and statutory bodies.
	5.2 Foster partnerships with other aged care providers and government departments / agencies.	<ul style="list-style-type: none"> <li>·Communicate with funding bodies and other aged care providers about new service developments and identify opportunities for new aged care development.</li> <li>·Promote and encourage culturally competent models of care.</li> <li>·Develop Strategic Alliance - Establish Brokerage.</li> </ul>
	5.3 Promote ANHF 's reputation and brand	<ul style="list-style-type: none"> <li>·Use of technology to enhance our brand and existing marketing material.</li> <li>·Long term collaborative relationships with Chinese media and press.</li> </ul>
<b>6. Establish quality management system</b>	6.1 Improving efficiencies of key internal processes	·Review management systems and implement identified improvements: Payroll.
	6.2 Expanding communication methods to staff, residents/clients and families	·Use of a wide range of communication tools, equipment and technology.
	6.3 Promote ANHF 's reputation and brand	<p>Develop and implement updated ANHF website, printed brochure and newsletter, and social media strategy.</p> <p>Establish long term collaborative relationships with Chinese media and press and increase media coverage in promoting ANHF services and successful achievements and quality care</p>



# Residential Services

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## Principal Director of Nursing—Celia Chik

**With the commitment of a team of experienced professional staff, ANHF has been able to move fast forward once again in meeting all new changes in regulatory requirements and the increased demand of aged care services in the community as well as achieving continuous improvement in the qualities of services delivered.**

### Senior staff movements and appointments

To enable us in becoming an even more efficient community care service provider, a new position of Director of Community Services was created in January 2013, and Ms Xuyen Tang who has many years of community care management experience was appointed to the position.

The vacant position of Home Care Service Manager was filled by Ms Melissa Loustau, an experienced community care package coordinator in May this year.

Ms Ping Zheng was appointed to the new Quality Care Manager position in September 2012. She oversees the care standards and qualities in our residential facilities, monitors and reviews the ACFI claim processes to ensure our claims for government funding are valid and appropriate.

When the previous Director of Nursing of Lucy Chieng Aged Care Centre (LCACC) Mr Peter Fung resigned in August 2012 due to personal reasons, the Director of Nursing (DON) at Bernard Chan Nursing Home Ms Rosie Cheung accepted the offer to be transferred to LCACC.

Ms Sinny Tsai, an experience care manager was then recruited in January 2013 to take up the DON position at Bernard Chan Nursing Home after the Acting DON Ms Maggie Wong requested to resume her original DDON position.

We are very pleased that we were able to include another expertise in our clinical care team this year with the appointment of Ms Jessie Loh to be our part-time in-house Dietician. Also, we have developed a contractual relationship with Aged Care Nutrition Services which now provide further support to our Dietician and training for our staff.

Volunteers play an important role in our organization and Ms Tracy Yang our Volunteer Coordinator, appointed in February 2013 manages the activities of our volunteers.

### Residential Facilities

#### Regulatory Compliances

During this financial year, our facilities have demonstrated their abilities in meeting regulatory compliances as always :

- All three facilities have passed the annual audits by the NSW Food Authority with grade “A” rating.
- Chow Cho-Poon Nursing Home had achieved the three year Accreditation after a 2 day site audit by the Accreditation Agency in July 2012.
- The unannounced spot checks at the three facilities by the Accreditation Agency during this financial year were uneventful, all three facilities received excellent audit reports from the assessors with very minimal actions required for improvement.
- The result obtained in the ACFI validation conducted by the Department of Health and Ageing at LCACC was encouraging, none of the 14 residents ACFI validated was downgraded as a result.

#### Diagnostic Reviews

In December 2012, Ms Deb Charlton, an experienced aged care consultant was engaged in conducting Diagnostic reviews on our three residential facilities. This review was focused on the residents ACFI claims, staff roster, HR management, financial status and forecast at each of the facility. Ms Charlton gave recommendations for action at the end of each review. We found her review and recommendations beneficial in assisting us to strengthen our management competency.

# Residential Services

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## Improvement in ACFI claim

- To ensure staffs' knowledge and competency in making valid and appropriate ACFI claims, refresher training session on ACFI were conducted during the period November 2012 to January 2013 for RNs and Cert IV AINs and our Quality Care Manager has taken up the role as ACFI Co-coordinator.
- ACFI reviews conducted on all residents with lower than average benchmark funding –residents of all three facilities have reached the benchmark average funding per day in January 2013 after the review and re-assessment.

## iCare system re-implementation plan

The iCare software system used in our facilities has been further developed since its introduction in our system a few years back. iCare refresher training session for relevant staff was conducted in March 2013.

Our Quality Care Manager and the Systems Manager have since structured the iCare re-implementation Plan so all relevant staff can utilize the full functions of the system in their daily work.

## Risk Management

Much has been achieved in this area:

- Risk Management training for executive staff was conducted in April 2013.
- A Disaster Committee was formed – the Disaster Management Plan, Residents Evacuation Plan were reviewed and updated.
- The ANHF Emergency & External Services Contact List was revised and updated.
- A more effective Fire Evacuation Training session was planned and delivered.
- More than 10 management staff received training in Return to Work Program in July 2012.

## Formation of Centralised Committees

To facilitate better understanding and cooperation of special teams of staff at the three facilities, the following centralized Committees were formed in 2013:

1. Lifestyle Committee
2. Infection Control Committee
3. Catering Committee

Each of these facilities meet two to three times a year when they can share their ideas, experiences, strategies and resources so the same consistent quality care standards are achieved in all three facilities.

# Residential Services

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## Community Care Services

### Regulatory Compliances

- Stanley Hunt Day Care Centre and Community Aged Care Packages South East Sydney went through the Quality Reporting Process with excellent result in December 2012.
- Community Housing – result from the annual registration assessment was pleasing and ANHF's Community Housing provider status sustained.
- So Wai Lifestyle Recreation Centre – excellent report on the quality of services delivered in the Centre. Actions are recommended to refine and reinforce the process of managing and monitoring the brokerage service providers.

### New Program

- The funding for the Community Partners Program (CPP) ended in June 2012. Our organization was granted a new funding to establish the Community Linkage Program (CLP) through the Aged Care Service Improvement and Healthy Ageing Grant. The focus provided by the program are very similar to those we provided in CPP which is about supporting Chinese and Vietnamese communities to have better understanding and access to aged services. The CLP services have been extended to the Vietnamese community down to Wollongong and to the Chinese community up to Newcastle.
- We have been invited by the UNSW Dementia Collaborative Research Centre to conduct a research program – the Lifestyle Engagement and Activity Program (LEAP) for the elderly who are receiving home care services in their own home. Our Occupational Therapist Ms Carol Sin will be in charge of this program as educator and champion which started in June this year.

It's been a great pleasure working for ANHF in the past ten years. I must acknowledge the great support I have received from the Board, our CEO Ms Ada Cheng, the executives and all the staff who had assisted me in everyway in fulfilling my duties. I feel very relieved when I departed ANHF because I knew that whatever I have been doing are now in capable hands. May I here wish all the best for the organization and the staff working there.



**Celia Chik**

Principal Director of Nursing  
(Retired in May 2013)

**Director of Nursing—Sinny Tsai**

**Deputy Director of Nursing—Maggie Wong**

**Bernard Chan Nursing Home (BCNH)** Staff work together as a team to improve our residents' quality of life and to provide a culturally and linguistically service approach to our residents and clients. This creates a homely environment and creates feelings of happiness living in BCNH. The new leadership team led by Ms Sinny Tsai - Director of Nursing and Ms Maggie Wong - Deputy Director of Nursing will lead our service to continual improvement and to build up a positive and proactive team.

## Achievements

### Report on Spot Check/Audits

- Food Authority Audit on 09/08/2012 – Result: A.
- Accreditation Agency Unannounced Assessment Contact on 05/03/2013 – Assessment module 2 – Incident management – Passed with good result.

### CQI successful stories

- Improve catering services to residents— a variety of biscuits are served during tea time.
- To provide a safe environment for residents and staff and to provide outside activities in the garden.
- To improve stock control and timeframes—store room relocation provides better access and management of stock.
- To maintain a clean environment at all time—spring cleaning of resident's room breathes freshness into the home.

### Physical improvement

- Provide convenient computer access to staff so electronic records can be easily maintained and reduce paper work. A new computer has been placed.
- Upgrade administration office's equipment to provide efficient administration working time.
- Provide a variety of daily activities for residents—purchase of a new TV and DVD player.
- Provide better infection control—upgrade of sanitiser in west utility room.

### Difficulties encountered and successfully managed

- To release staff for long service leave, annual leave and unpaid sick leave – successfully recruit casual staff in all levels: RN/AIN/Catering/GS with human resource officer assistance to relief staff's leaving and to maintain daily roster running.

### Newly introduced in the past 12 months

- Monday to Friday 4 hours bed making position – To assist bed making and to provide AINs having time to do hygiene program for residents.

### Number of staff attend the accredited courses run in the organisation

- 2 staff had attended the Diploma of Management in 2013.
- 1 staff had attended the Certificate IV in Leisure and Health in 2013.

## Staff Service Milestones

**1 staff member is completing 20 year's service**

**15 staff members are completing 15 year's service**

**16 staff members are completing 10 year's service**

### Result in QPS satisfaction survey

- 13 residents returned satisfaction survey - Result is 85.17%. Overall, the survey indicated that the dining room area can be improved with increased circulation and make better use of the outdoor spaces. The dining room area, the garden and outdoor living area have been restructured and areas improved.
- 14 relatives (family) returned satisfaction survey - Result is 84.03%. Compared 2011 to 2012, relatives satisfaction index increased from 78% to 84%. Overall, the survey indicated that the staff are friendly, supportive and helpful to the residents and relatives.

## Catering Improvement Committee

A fresh Catering Improvement Committee team was formed during the year and relevant Food Safety Training was provided. This team brings a commitment to ensuring the catering standards are always maintained.

### Achievements

We achieved "A" grade during the audit by Food Safety Authority in August 2012.

#### Improvement

- A new dishwasher was installed.
- A new rice cooker and food warmer was purchased.
- Exhaust filter is now serviced regularly by an external contractor.

#### In-service training

All catering staff receive at least 2 training targeting food handling practices.

Catering meetings are held twice a year following the catering training.

## Work Plan for Catering 2013-2014

We will continue to maintain high standards and good quality in catering, aim to achieve "A" grade in every Food Safety Audit.

Continue staff development, more training to new catering staff and enhance their knowledge of food handling.

## Work Health and Safety Committee

ANHF and the Work Health Safety Committee take active steps to identify and control risks that we face in the workplace. We ensure all employees and visitors are not exposed to risks that affecting their health and safety.

### WHS Committee Meetings

Three monthly meeting are conducted after every workplace inspection.

During our quarterly CQI meetings, WHS Sub-Committee provides valuable suggestions and feedback with regards to WHS issues.

Our agenda includes:

1. To address new and old issues of concern.
2. Review accident/incident report for the past 3-months. Formulate action plan to target problem area that needs immediate attention.
3. Document improvements and achievements.

### Hazard / Risk Register / Risk Control Action Plan

Finding ways of eliminating hazards or controlling the risks is our goal to reduce workplace injuries/illness. Every staff is responsible to identify potential risk in and around the nursing home. Everyone can make an entry in the risk register, make suggestion for appropriate action or discuss issue with management and WHS Committee. An action plan will be formulated to tackle issue identified in order to maintain a safe environment.

## Work Plan for WHS in 2013-2014

1. Staff education to reduce the number of accident among staff and residents.
2. Minimize the risk of injury to nurses. Remind them to be careful when handling residents with aggressive and challenging behaviour.
3. Adapt a multi-factorial approach in prevention of falls.
4. Continue to identify and report hazards/risk in order to reduce workplace injury/illness.
5. Encourage staff to identify and report problem area.
6. Encourage to communication with management to maintain an effective consultation process.
7. Upkeep a good maintenance program for all equipment to ensure safety.



### Service Outlook in 2013-2014

- To provide quality food and better service in catering department.
- To monitor ACFI assessment and to claim optimal level of funding.
- To build up a positive and proactive team.
- To deliver quality service of consumer led and customer focused.

**We would like to acknowledge the following staff who spent extra efforts in building the quality of our services:**

Catering Improvement Committee—Maggie Wong

Infection Control Committee—Betsy Tang, Josephine Jong

Work Health and Safety—Jay Yao



**Director of Nursing—Attie Cheng**

**Deputy Director of Nursing—Hilda Fan**

**Chow Cho Poon Nursing Home (CCPNH)** initiates and fosters an attitude of continuous improvement in our work practice. In order to becoming the model provider for high quality and culturally competent aged care, regular audits / surveys and meetings are conducted to identify areas for improvement.

## **Achievements**

### Report on Spot Check / Audits

- Food Authority Audit on 26/10/2013 – Result: A
- Accreditation agency Assessment Contact – Passed with good result.

### CQI successful stories

- ACFI claiming funding from \$118 per resident per day to \$160 per resident per day within 4 month time frame.
- New Administration Assistant position was created to provide administrative and clerical support for the efficient operation of the nursing home.
- National Electronic Resident Agreement software was purchased and is in use to ensure accurate and timely completion of the required documentation and in handling the process of generating resident agreements as required by the Aged Care Act 1997.
- Coles Online shopping has been established. Quality of supply and consistency of delivery maintained.

### Physical Improvement

- Renovations of the Activity Room and Staff Room were undertaken with improvements to the overall environment internally and externally. New plantation boxes were installed giving the home a refreshed outlook. The refurbished home has received positive responses from residents, staff and families alike.

### Staff Education and Training

- One RAO will attend the Cert IV in Leisure and Life Style Training course in 2013.

### Result in QPS Resident Satisfaction Survey

#### QPS Satisfaction Survey Report

- 7 residents were involved in QPS Satisfaction Survey. Overall, accommodation & living area is the lowest score during renovation period. Section of survey will be completed after renovation.
- Relatives (Family) Satisfaction Survey. Result is better than average.

## **Work Plan for 2013-2014**

- Install photo frames on residents' door/wall as per residents' suggestion for improvement
- To establish teleconference system between head office and residential facilities including Chow Cho Poon Nursing Home.

## **Quality Assurance**

Chow Cho Poon Nursing Home is committed to maintain and ensure contemporary care to residents and to improve the knowledge and skill of staff. The following activities were conducted during the year to serve the purpose.

### Quality Programs

We achieved satisfactory results and consistently scored above 85% when benchmarked against the other 129 facilities in Australia through QPS.

- Residents satisfaction survey—83.3%
- Relative satisfaction survey—88.76%
- Staff satisfaction survey—85.61%

### Staff Competency Tests for staff: knowledge and skills

The topic on “Caring Residents in Extreme Weather” is a newly developed item. This is a response to the department guidelines released last year. The topic has been given as an in-service training and then tested upon the staff under-standing. 100% competency was achieved for all tests.

### Other Audits

Besides the regular crucial audits, there are some new tools we have started this year to monitor the standard of our services as per discussion in the last Training and QA Meeting. They are the Electrical Safety Audit, Maintenance Audits on Prevention and Corrective Action.

## Audit Section of Compliance

Physical and Chemical Restraint Audit	100%
Residents Care Review	100%
Environmental Audit	100%
Maintenance Audit—Corrective Action	100%
Maintenance Audit—Prevention Action	100%
Pain Management Audit	100%
Infection Control Survey	98.9%
Thermostatic Mixing Valve Water Temperature	98.78%
Residents Questionnaire	97.5%
OHS Workplace Inspection	96.4%
Electrical Safety Audit	94%

Competency Test Item	Participants	Test Results
Hand Washing (Knowledge and Skill)	63	Competent
Demonstrating use of Mechanical Lifter (Skill)	38	Competent
Chemical Safety (Knowledge)	59	Competent
Fire and Emergency (Knowledge)	57	Competent
Manual Handling (Knowledge)	58	Competent
Code of Conduct (Knowledge)	57	Competent
Aged Care Issues (Knowledge)	58	Competent
Caring Residents in extreme weather	56	Competent

## Catering Improvement Committee

Catering Improvement Committee Meetings have been held twice within these 6 months. Attendance rate was over 75%. Most of the staff members attended the meetings in their own time. Regular communication and consultation are maintained. Issues of concerned have been discussed and followed up.

### Improvements

- Some audit forms and check lists were reviewed and updated to suit needs and regulatory compliance. 2 new forms were developed to ensure quality of food delivered.
- External temperature gauge was installed to the existing dish washer in September 2012 for easy monitoring of the rinsing cycle temperature.
- Cessation of the use of un-accredited food supplier. All suppliers are recognized by the NSW Food Authority since February 2013.
- The floor of the walk-in-freezer was tiled at the end of March to prevent further cracking of the old concrete floor.
- Regular twice a year formal in-service training for catering staff is available from the Nurse Educator since May 2013 before the committee meeting commences.
- Mounted on wall new hot water boiler was installed in the kitchen for easy access for hot water on 24.5.5.2013.

### In-service Training

- All Catering staff had attended the Hand Washing competency test in April and May with 100% competency.
- Training topic on Food Safety Handlers for Vulnerable People by Giselle Brand, a dietician and Food Scientist, was arranged at LCACC on 4.26.2013 for all involved staff with good participating from our home.
- Cleaning and Sanitization on Food Services was conducted by CNE on 9.5.2013 locally in our home.

### Formation of ANHF Food Safety Committee

Regular twice a year Food Safety Committee meeting was conducted on 9.1.2013. The committee was chaired by the Principle Director of Nursing. Attending members are all Catering Coordinators of the 3 residential facilities the System Manager and the Quality Care Manager. The Committee continues to work to ensure the food safety practice of ANHF.

### **Service Outlook in 2013 – 2014**

- To maintain food safety compliance and pass the audit scheduled before 26.10.2013.
- To liaise with The Third Party Auditor for the next coming Food Audit to ensure consistency in quality, effectiveness and compliance.
- To provide good quality food service by maintaining effective communication with residents, care workers, catering staff and personnel from the Food Safety Committee.

### **Staff Service Milestones**

**10 staff members are completing 20 year's service**

**11 staff members are completing 15 year's service**

**9 staff members are completing 10 year's service**

**We would like to acknowledge the following staff who spent extra efforts in building the quality of our services:**

Catering Improvement Committee—Hilda Fan

Infection Control Committee—Kimberly Wong

Work Health and Safety—Evelyn Chan

**Director of Nursing—Rosie Cheung**

**Deputy Director of Nursing—Tammy Poon**

**Lucy Chieng Aged Care Centre (LCACC)** is stepping into the third year of operation. A new management team was formed in October 2012 led by a new DON. In the previous year's annual report, our Acting DON mentioned a few achievements we would like to accomplish in the next financial year. I am glad to report that all had been achieved as expected:

- Duty statements of Cleaners, GS and Catering Staff were reviewed and better defined. Support service provided are more efficient and well received by residents and staff.
- Recruitment of more casual staff in all levels - More casual staff were recruited, particularly AINs and GS staff.
- High standard of care is ongoing.

#### Other Major Achievements

- ACFI Funding remains in good level as reflected in quarterly reports of QPS Benchmarking.
- Successfully passed Food Authority Audits on 14/12/2012 (B rating) and on 19/04/2013 (A rating).
- Commendable results obtained in unannounced visits from the Accreditation Agency on 30/01/2013 and on 23/07/2013.
- Commencement of Respite Day Care operation in Dementia Wing (June).

#### Dementia Care

- With the support of Senior Management, efforts were made and successfully accommodated 3 residents into dementia care in June.

#### **Data of Interest**

- There are 72 permanent staff members and 18 casual relief staff members totalling 90, with an average age of 47.
- Staff are keen to participate in education sessions, by internal or external speakers.
- Two RNs successfully completed Diploma in Front-line Management. Currently 7
- AINs are engaged in Aged Care Cert IV training. Two RAO staff members are completing Cert IV in Leisure and Lifestyle course.

#### **Catering Improvement Committee**

There have been a few relocations of Catering staff to other ANHF facility. More Kitchen Hands were recruited and all were keen to attend related internal in-services and workshops.

#### **Achievements**

The Food Safety audit conducted in December 2012 and April 2013 and achieved "B" grade and "A" grade respectively.

#### Improvements

- Door lock for entry door of kitchen installed.
- Purchased and replaced all resident meal plates.
- New Vegisan pump for sanitizing melons installed.
- New under sink filtered water tap installed.

#### Staff Education

1. Food Safety Handlers for Vulnerable People training was held in April 2013
2. ANHF Food Safety Policy training was held in March 2013
3. Catering meetings are held every 6 months.

#### **Work Plan for Catering in 2013-2014**

To continue to educate staff to improve and increase food handling knowledge and skills.

To standardize 6 weekly rotational meal menu.

To stock more new meal plates.

To replace water jugs with matching tumblers for all residents which are more appropriate for Aged Care.



## Work Health and Safety Committee

From July 2012, the WH&S committee took an active role in identifying and managing risk in workplace, providing staff, residents and visitors a safe environment at the premises.

### WHS Committee Meeting

- Three monthly meeting are conducted after every workplace inspection.
- During quarterly CQI meetings, WH&S committee discuss WH&S issues to promote and maintain a safe working environment. The agenda includes :
  - Review accident/incident report in the past 3 month's
  - Report WH&S Workplace inspection for the past 3 month.
  - Hazard/risk identification, and risk control action plan to target problem that needs immediate attention.
  - Follow up old issue and address new issues of concern.

### Hazard / Risk Register / Risk Control Action Plan

Our approach to reduce injuries or illness at the workplace is to identify ways to eliminate or maintain risk. Staff are responsible for identifying potential risk within the facility. Any staff can write an entry in the risk register and suggest appropriate action or discuss issue with WH&S committee and management. An action plan will be formed to tackle the issue.

### Staff Consultation

When staff identify any work health and safety issue, they should report it to management. Staff consultation provides a channel for representatives of different position to exchange idea and make recommendation. CQI log and staff consultation form are available for staff to raise any issue. Management and staff can then work together to develop a solution.

## Work Plan for WHS in 2013-2014

1. Continue to educate staff to reduce the number of accident in the facility
2. Maintain consultation involving management, staff, GPs and resident's family to reduce the number of preventable fall.
3. Continue to identify and report any WH&S risk in the workplace to reduce injury.
4. Identify WH&S risk that will affect the mental health of staff. For example, stress due to work, atmosphere in workplace. Provide training to staff to reduce those

## Staff Service Milestones

**1 staff member is completing 20 year's service**

**5 staff members are completing 15 year's service**

**2 staff members are completing 10 year's service**

## Service Outlook in 2013-2014

- To plan for more cost effective staffing roster
- To promote person-centre care.
- To review current standard to suit the Aged Care Reform commencing in July 2014.

**We would like to acknowledge the following staff who spent extra efforts in building the quality of our services:**

Catering Improvement Committee—Tammy Poon

Infection Control Committee—Jenny Tsang, Mei Yee Lee

Work Health and Safety—Andie Lo, Sarah Chen

# Compliance and Audit

## Systems Manager—Marven Chin

### Policy and Procedure Manuals

Our commitment to providing high quality of care and services to our residents and stakeholders in a way that is consistent with our organisation mission, vision and values. Establishment of clinical care policies that provide directions on the diverse needs of the higher level of resident care, and continue to meet all legislative requirements.

Policy and procedure development and review are an ongoing process as part of the commitment to continuous improvement. We sought input from all relevant people inside the organisation, and consult external experts for advice and suggestions as required. We use legislative guidelines, evidence utilisation, and collaboration to produce policies and procedures that are in line with best practice. All work is to be up to date to ensure it meets compliance and accreditation standards.

During the year, 29 policies and procedures were reviewed and revised. And a total of 8 new policies and procedures were developed:

1. Policy - Asset Management
2. Policy - Medication Administration by Cert III AINs at Aged Care Facility for Low Care Residents
3. Policy - Use of Recording Devices in Workplace
4. Policy - Use of Personal Care in Service Delivery
5. Policy - Workplace Bullying
6. Procedure - Recruitment and Employment
7. Procedure - Use of Inhaler & Spacer
8. Procedure - Use of Nebuliser

### System Audit for Residential Facilities

On top of the various internal QA activities carried out by each home, we have scheduled System Audit activities for all three homes to assess and monitor the quality of care and services we provide against legislated Accreditation Standards.

During the year, total 32 systems audits were conducted for the three homes. 11 system audits were done at BCNH, 12 at CCPNH, whereas LCACC had 9. Discrepancies identified at time of audits were discussed, reported and followed up.

Examples of rectified actions taken including but not limited to the following:

- New and revised policies and procedures are replaced in Policy Manuals and accessible to all staff.
- Annual competency tests on medication management are conducted for all nursing staff.
- Resident care plans are reviewed and evaluated regularly or when required as per organisation policy.

- Resident files, progress notes, laboratory reports are being filed as per Filing Sequence.
- Revised Comments & Complaint Channel are replaced and on display through the homes.
- Stock and supplies are stored neat and tidy, with correct labelling in store rooms.
- Assessments, forms are completed in a correct and appropriate way.
- All significant electric appliances are tested and tagged annually.
- Centralised Contract agreement management in the Head Office.
- Professional registration for allied health professionals are collected and maintained in staff personal file.
- Contracts / agreements with external contractors are renewed and maintained in office before expiry.

### Food Safety Program

The Food Safety Manual sets up a clear procedure and practice for our homes to manage food safety, to identify hazard and establish controls that will prevent, eliminate or reduce hazards to an acceptable level.

Our Food Safety Committee meets every 6 months or as required to enhance strategic focus in the food safety program for our homes in order to ensure the provision of safe and suitable food for all our residents. Each year the catering department of each home has separate check(s) by food safety auditor from the NSW Food Authority. During the year, all three homes achieved 'A' grade in the last food safety audit.

### Support Visits by Accreditation Agency

During the year, all three homes received a 1-day Assessment Contact visit by the Accreditation Agency. The support visit could be either announced or unannounced. Support visit by the Accreditation Agency for CCPNH was conducted in December 2012, LCACC in January 2013, whereas BCNH was in March 2013. All three homes achieved compliance with all unscheduled visits criteria within the accreditation standards with no significant concerns identified.

# Community Services

## Director of Community Services—Xuyen Tang

In January, I joined ANHF as the new Director of Community Services with ANHF. It has been a very rewarding 6 months to lead a great team of dedicated staff and volunteers in providing high quality care to the elderly Chinese and South East Asian Community in Sydney. I am honoured to be able to build on the good work and successes that my colleagues have produced in the past.

It is with great pleasure that I present you the annual report of each Department namely Community Services (Day Centres, Community Linkage Program, Chinese Dementia Hotline), Home Care, Housing and Volunteer coordination.

### Some of the significant achievements in 2012-2013

- Improved process and systems across all programs to reduce un-necessary administration workload and achieve cost savings in program management for Home Care
- Successfully reviewed HACC & NRCP program management structure to achieve a balance budget, with reduced deficits.
- Increased vacancies and services outputs across all programs
- Secured business growth through funding submissions and successfully identified new business opportunities.
- Introduced innovations through software technology and knowledge management framework
- Developed and formalised the Repairs and Maintenance Guidelines and After Hour Emergency Contact procedure flow chart for Community Housing
- Fostered open communication and transparency within/amongst teams.

### Challenges Faced

- Managing change in response to Government Aged Care reform Living Longer, Living better.
- Keeping a good balance between managing growth, consolidating and improving systems/processes and attending to government and client expectations.

### Service Outlook in 2013-2014

- Build greater efficiency through technology and process improvement.
- Promote a culture of continuous improvement, innovations and team work.
- Benchmark high quality care standards through evidence based service model.
- Position ANHF as a market leader in Aged and Community care.
- Strengthen professional development and a supportive workforce.

Our Service truly would not be able to operate without the hard work of all the dedicate staff and volunteers. I sincerely thank them for making it possible for ANHF to continue to demonstrate excellence in the field of Community Care.

To my colleagues in Residential services, Finance, HR, Training and Development, Administration, Assets and Property Officer, I thank you for your partnership, support and forbearance.

I am grateful for the confidence, trust and generosity of the Board for me and my Team. I am in particular thankful for the leadership and support of our CEO Ada Cheng.

Last but not least, I wish to thank our clients for their participation and valuable feedback throughout the year.

I look forward to another exciting year in 2013-2014.



**Xuyen Tang**

Director of Community Services

### Community Services Manager —Grace Chan

**Centre based day care** provides older people an opportunity to make friends, socialize with one another and participate in different programs that help to maintain their health and wellbeing. It also gives their carer a break.

The ANHF Centre Based Day Care (CBDC) services are funded by the National Carer Respite Program (NRCF) and the Commonwealth Home and Community Care (HACC) Program. These are some highlights in 2012-13:

- The ANHF CBDC services completed our first Quality Review based on the Community Care Common Standards. The ANHF services received very positive feedback, and the Review process also provided a great opportunity to improve our sub-contractor management process.
- The Hurstville Day Respite Centre, So Wai Lifestyle Activity Centre and Stanley Hunt Centre deliver almost 37,700 hours of centre based day respite to 97 Chinese carers through the NRCF.
- Our ANHF CBDC team together with our sub-contractors deliver over 53,000 hours of services, 10,000 meals and 14,000 trips to more than 280 older people from culturally and linguistically diverse backgrounds in the Inner West, South West and South West regions of Sydney through the Commonwealth HACC Program.
- The ANHF CBDC services participates in a range of joint events for older people accessing the centres and their carers. These include the joint Dragon Boat Festival Celebration, Moon Festival Senior Luncheon, Carer Pampering Program, etc.

### Hurstville Respite Day Care Centre

The Hurstville Respite Day Care Centre was the new addition to the ANHF Community Service Team through the NRCF in June 2013. Within the first month since inception, our new service delivered 272 hours of centre based day care to 12 Chinese carers of people with dementia in the Dementia Ward at the Lucy Chieng Aged Care Centre.

Establishing a respite service within a residential care setting presented many challenges. One particular lady had an unpleasant experience in a residential care facility previously and was very suspicious when she first came to the centre. Our coordinator worked closely with her carer to comfort and support this lady. Now she would dress herself up nicely and wait for our bus to pick up her at her front door. When being asked about where she was going, she would answer with a big grin on her face, "I am going to the CLUB to meet with my friends!"

### Greenfield Park and Chester Hill Day Care Centre

The ANHF CBDC services in South West Sydney area are funded by the Commonwealth HACC Program, and operates from Greenfield Park and Chester Hill Community Centres, Fairfield City Council. The Chinese CBDC services are delivered in Greenfield Park on Tuesdays and Chester Hill on Fridays. The Vietnamese CBDC services run in Chester Hill on Wednesdays and in Greenfield Park on Thursdays. The Centres delivers over 6,100 hours of services to 40 frail aged Chinese people and over 6,100 hours of services to 46 frail aged Vietnamese people.

The Greenfield Park Day Care Centre was also used by Parks Community Network, one of our sub-contractors, on Monday for the Arabic communities and Friday for the Assyrian communities. The services deliver over 4,500 hours of services to 32 older people last year.

Older people experienced a lot of loss and grief, in particular, the loss of a life time partner. It often led to depression, isolation, and adversely affected their physical health. One lady came to our centre after the loss of her husband. Our team was able to support her individually as well as providing the opportunities to gain support from her peers and improve her coping skills and resilience through our education and activity programs.

### Stanley Hunt Centre

The Stanley Hunt Centre in Ultimo opens five days a week. Through the NRCF, the Centre provides over 26,500 hours of respite day care services to 40 working Chinese carers in the past year. In addition, the Centre also provides over 4,900 hours of CBDC services to 21 old people with dementia from Chinese backgrounds through funding from the HACC Program.

### Case Study

The centre farewelled one gentleman with terminal illness last year. While he was receiving treatment, he wished to come to the centre to see his friends. With the support of our staff and coordinator, he was able to come to the centre for a shorter period on the day he felt better. He celebrated his birthday with all his family and his friends at the centre a few days before he passed away. His family was very appreciative of how the centre support them through such difficult time and helped to maintain their father's quality of life to the end.

### So Wai Lifestyle Activity Centre

The So Wai Lifestyle Activity Centre in Burwood operates six days a week from Monday to Saturday. The ANHF Chinese CBDC services operates on Monday, Wednesday, Friday and Saturday, and the ANHF Vietnamese CBDC services operates on Thursday. Through the NRCP, the Centre provides over 11,000 hours of respite day care services to 48 Chinese carers of people with dementia in 2012-13. The Centre also provides over 7,900 hours of CBDC services to 36 older people with dementia from Chinese backgrounds and 2,934 hours of services to 12 older people with dementia from Vietnamese backgrounds.

On Tuesdays, the So Wai Lifestyle Activity Centre also hosted the Korean CBDC services conducted by one of our sub-contractors, the Australian Korean Welfare Centre. Last year, the service delivered over 2,000 hours of CBDC services to 16 frail older people from Korean background.

### Carers Support Group

#### Stanley Hunt Centre

The Stanley Hunt Centre delivers 4 Carer Pampering Programs in 2012-13. The Chinese New Year Celebration in February, education session in July and Christmas Celebration in December are attended by carers using services in the centre. The Carer Picnic in April are also attended by carers using other ANHF centre based day care services.

#### So Wai Lifestyle Activity Centre

The So Wai Centre continues to run a monthly carer support group for carers of people with dementia in the past year. Each meeting attracted around 20 carers. The group provides carers an opportunity to obtain information from a range of speakers and to provide mutual support to one another.

### Services Delivered by Sub-Contractors

The ANHF was also the lead agency for a number of other CBDC services funded by the Commonwealth HACC Program. Whilst the Australian Korean Welfare Association and Parks Community Network used the same premises as our ANHF team, others operated completely independently. These other sub-contractors included Co.As.It., St Basil's Home and Tripoli and Mena. Altogether, these three organisations delivered over 12,000 hours of services to frail older people and people with dementia in their communities.

Many seniors from our sub-contracted services expressed their appreciation of the services in helping them maintain independence and quality of life through letters, poetry and paintings. It was very encouraging to see our partnership with other community organisations had made such a difference in these seniors' life.

### Community Linkage Program

The ANHF Chinese and Vietnamese Community Linkage Programs (CLP) are funded through the Aged Care Service Improvement and Healthy Ageing Grant Program. They aim to promote aged care services to older people, their families, carers and the wider Chinese and Vietnamese communities.

The CLP team plays a very important role in linking the seniors and their families to aged care services, breaking the myths and misunderstanding about services in the communities, and helping services to become more culturally and linguistically sensitive and competent. The team will continue to work closely with ANHF services, other aged care providers and the media to improve access to support and services for older people and their carers in our communities.

### Chinese Dementia Helpline

The Chinese Dementia Helpline was a partnership project with Alzheimer's Australia. The Helpline offered older people, their families and carers, and service providers information on dementia and services for people with dementia and their carers. The Helpline was operated by a trained volunteer. In the last year, the Helpline was able to assist callers to gain information and understanding on dementia, assessment, identifying and managing dementia, and access to services in different geographic areas.

#### Some highlights of the CLP included:

- The team was able to promote aged care services and ANHF services through a wide range of media, including newspapers, radio and television.
- The team produced a 3 episode TV series introducing residential care, home care and centre based day care services. The series were broadcasted in TVB and rebroadcasted due to its popularity.
- The team delivered 55 Chinese information sessions reaching over 1,200 people and 22 Vietnamese sessions reaching over 500 people.
- The team also delivered 9 workshops to over 200 service providers to enhance their capacity to support older people from Chinese and Vietnamese backgrounds.
- The team was able to work with service providers in Newcastle to meet the needs of the local Chinese communities and in Wollongong for the Vietnamese population.



We would like to acknowledge the following Centre In-charge staff in building the quality of our services:

**Centre In-Charge:** So Wai Lifestyle Activity Centre—Eliza Chan  
Stanley Hunt Centre—Annie Kung

**Day Care Co-ordinators:** Hurstville Respite Day Care Centre—Bridget Tam  
Greenfield Park / Chester Hill Day Care Centre—Kathy Tai  
Vietnamese Day Care at So Wai—Marilyn Dang  
Vietnamese Day Care at Greenfield Park / Chester Hill - Tam Do



### Home Care Services Manager —Melissa Loustau

**ANHF Home Care Services** has been providing high quality culturally and linguistically specific community aged care services to the Chinese and Vietnamese communities since 2007. The home care packages are individually tailored, planned and managed and aims to assist older people to stay at home, enabling them to live independently and enjoy a high quality of life for as long as they wish.

2012-13 has seen ANHF Home Care Services further consolidate as it continues to improve the lives of Individuals and their families in the Chinese and Vietnamese communities. We managed 91 home care packages servicing five regions in Sydney: South East, Western, South West, Inner West and Northern regions. Of these packages, 65 are Community Aged Care Packages (CACPs), 14 EACH (Extended Aged Care at Home Packages) and EACHD (Extended Aged Care at Home Dementia) and 12 Consumer Directed Care High and Low Care (CDC). These 91 clients were supported by our team of dedicated staff: 4 Home Care Service Coordinators, 1 Office Administrator and 35 Home Care Employees.

In October 2012, the office was centralised at Campsie. This has improved team communication, efficiency, client and staff support and substantial savings in administration.

#### Achievements

- Home Care Services led by previous manager Linda Ho, has successfully gone through the Quality Reporting Process in 12/2012 with excellent results.

- CM3 has been utilised in payroll, rostering and assisting in reporting.
- After hour on call procedures have been set up.
- ANHF is working with The Dementia Collaborative Research Centre at the University of New South Wales in the research project *The Lifestyle Engagement Activity Program (Leap for Life)*. This project provides training for our staff and engages our clients in activities which improve their quality of life.
- Home Care Services maintained a strong focus on professional development, training and education of our staff.

#### In 2012-13, staff attended the following trainings:

1. Leap for Life Training
2. Mandatory Training – Manual Handling, Fire Safety
3. 3 Care Staff are participated in Certificate III in Aged Care
4. 2 Service Coordinators participated in Certificate IV in Frontline Management
5. Consumer Directed Care Conference

#### Case Study

Mrs. Chan (pseudonym used) lives alone in a DOH unit. She is very isolated and all her family is in Hong Kong. In recent months, she has become quite confused.

In May 2013, it was reported to us by our care staff that Mrs. Chan had been refusing service for a couple of times and she had been unwell for a few weeks. A site visit indicated that she had not been taking her medications and her medications were all mixed with some really old medications. The client also appeared to be quite confused and stated that it had been a while since she was last seen by her GP. We asked her how we could better support and she eventually agreed to accept service from her usual care worker and for us to take her to see her GP during her service visit.

After the home visit, the coordinator contacted her GP, her family in Hong Kong and her housing manager. We raised our concerns about Mrs. Chan as she was getting increasingly confused and she had been missing her medications for weeks. She cannot afford to do that as she has chronic health issues. We also addressed a few issues

about her living environment with her housing manager.

Service Coordinator kept monitoring client's condition. When next service was due, we found out that client refused to see her GP, we contacted the GP and requested a home visit. GP stated to us that there was nothing he could do as Mrs. Chan is so confused there is no way he can make client take her medications so there is no point for him to see her.

A day later, as Mrs. Chan's condition further deteriorated to that of life threatening status, she was not able to get out of bed. We contacted her GP again who eventually agree to visit Mrs. Chan. The client was admitted into the Intensive Care Unit within a short time. We worked with the hospital and contacted her family in Hong Kong, who was able to make arrangement to come within days.

In the end, not only that client recovered fully from this episode, her family is now staying in Australia to care for her while still keeping our service. It was through staff and all relevant parties working together in a collaborative manner that such exceptionally good outcome was able to be achieved for Mrs. Chan.



## Continuous Quality Improvement

Home Care Services commitment to Continuous Quality Improvement is reflected in our efforts in continuously evaluating and reviewing our practices and workflow which has resulted in the following changes:

- New Travel Claims guideline had been implemented. The care staffs' travelling time between clients is now capped at 15mins and travelling mileage is worked out using Google Maps. As a result, care staffs' travel cost has been reduced significantly.
- The majority of our clients now pay their fees by direct debit. Clients were initially reluctant but now only a small numbers are paying by cheques and cash.

## Challenges and Difficulties

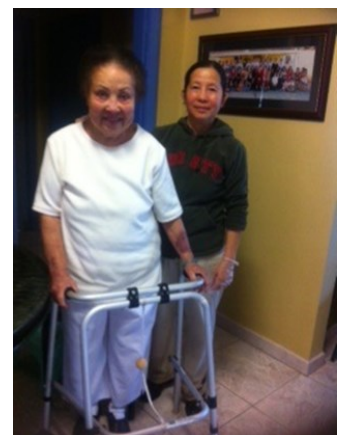
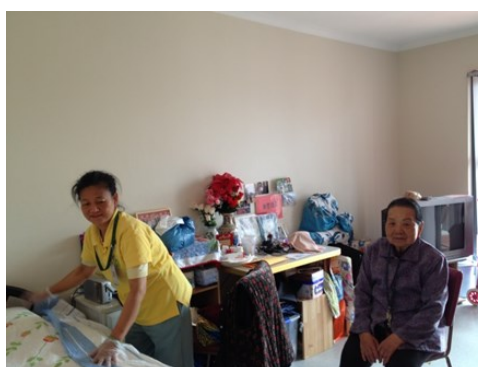
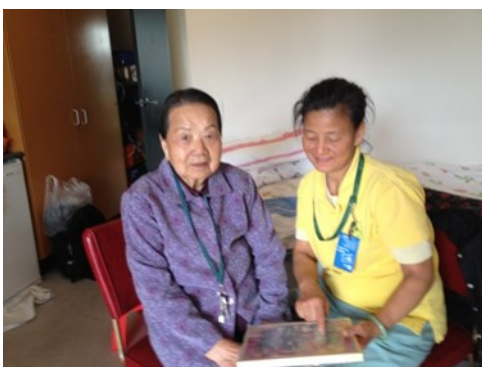
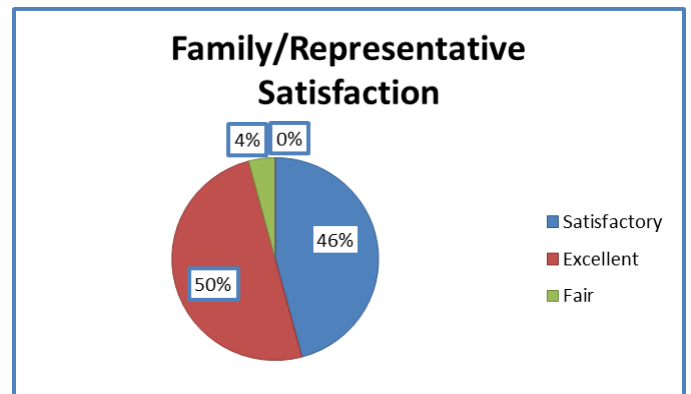
- CM3 was not fully utilised. Having only a single user licence has limited our ability to take full advantage of this software.
- Medicare claims subsidy for one client was not paid for over two years, due to a minor error when entering the client into the Medicare system. This was eventually rectified, after countless follow ups with Medicare.

## Data of Interest:

- In May 2013, Client and Family/Representative Satisfaction Surveys were carried out. For both surveys, over 96% of clients and Family/Representative that completed the survey rated the service as either excellent or satisfactory.

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### Service Outlook in 2013-2014

- With the newly allocated 109 new home care packages in the 2012-13 Aged Care Approvals Round (ACAR) in 3 regions: 27 in the Inner West, 40 in the South East and 42 in Northern Sydney regions, our main focus for this year is implementation of such packages. They will be delivered with the principals of Consumer Directed Care (CDC).
- Our service delivery model, policy and procedures will have to be reviewed to ensure the principles of CDC are evident and to make way for the implementation of Consumer Directed Care across the existing home care packages by 1<sup>st</sup> July 2015.
- Reviewing the functions and may purchase new computer software in meeting our business needs in performing the following functions: client and staff management, financial management of packages, rostering and reporting and working on implementing this software.
- Retaining and managing our current workforce: to meet the increasing workload of 109 packages. To manage staffs' travel cost and at the same time to have adequate staff to cover the service of such a widespread area.
- Identify strategies to cater for the growing number of older people with complex care needs alongside being diagnosed with dementia or memory loss. The need on developing and providing training for staff to manage such complex care needs.



**We would like to acknowledge the following Home Care staff in building the quality of our services:**

**Co-ordinator:** Lilian Cao, Wendy Lim

**Registered Nurse:** Linda Ho  
Wendy SM Lam

**Administrative Officer** Raymond Wang

### Community Housing Officer —Iris Ng

#### Community Housing at Poplar and Jones St

Our motto “Love, Serve and Respect our neighbor’s Elders as our own” has very much reflected our approach to support our Community Housing tenants. It is reflected through our continued resources granted for extra support services, through our volunteers’ valuable contributions and through innovative project to connect our tenants together. It is very rewarding to note how our tenants have had a stronger sense of belonging and mutual support amongst each other in our safe, secure and cultural appropriate living environment.

#### Achievements

##### Make it happen

- **BUILD / Property inspection** - Our appointed contracted /builder is appointed to undertake an annual property inspection in Jones Street complex with 47 units and common areas. The property inspection is carried out 4 times per year. A building report is given to Management for scoping and addressing repair and maintenance issues.
- **LIVE / Switch to digital TV** - An upgrad to shared TV antenna systems program was completed in Jones Street complex in August 2012. Now, Jones Street complex are digital-ready properties. Our tenants in Jones Street now benefit from the program and are able to switch to digital TV.
- A master antenna upgrade program in Poplar Street is currently underway.

- **LEARN / Environmental friendly** – Environmental Educators from The Ethnic Communities’ Council of NSW was invited to conduct numerous of interactive workshops, educational talks and a biodiversity outing under ‘SMilers’ project funded by City of Sydney Council. Environmental Educators provided informative resources in relation to waste reduction and recycling issues as well as supply of veggie nursery. We have created our very first community garden at Poplar Street.
- **PLAY / ‘The Doorway’** – Pursuing the community development, we are pleased to announce that ‘The Doorway’ project is funded by City of Sydney Council. The project was kicked off by a fun and vibrant ‘Master Chef’ in April 2013. There were over 70 participants from our both sites of community housing tenants, VIP guests, staff and volunteers.
- **STAY HEALTHY / ‘Stepping On’** – is designed to build confidence and reduce falls program for older people who live in the community. The program is facilitated by allied health professionals. Tenants have had informative materials and are introduced adapted exercises.

#### Service Outlook in 2013-2014

- Offering a regular phone call service operated by our friendly volunteers to monitor tenants needs and to support them to keep community contact.
- Seeking possible funding for our tenants in participating in new forms of technology experiences in a changing society. We aim at empowering our Chinese seniors for exerting control and for developing competence, mastery in accessing information.
- Taking steps to be more energy efficient in Jones Street complex, this enables ANHF Community Housing identified specific opportunities to improve our energy use and save money.

### Community Housing Officer —Rebekah Kwan

#### Lucy Chieng Gardens

It has been 3 years since Lucy Chieng Gardens opened in 1<sup>st</sup> June 2010. All the rooms are now occupied. Currently there are 38 tenants, including 4 couples, 30 female and 8 male. Most tenants enjoy living in LCG as they can enjoy their own life while communicating with residents of the same cultural background. One of the compliments from our residents was the well-managed, clean and safe environment.

#### Achievements

- To celebrate the 3<sup>rd</sup> anniversary of LCG, a series of activities were arranged to provide opportunities for tenants to display their memorabilia, sharing thoughts on these treasured items was a wonderful chance to know one another more. The notice board was a vast pool of pinned up notes on the communal care and support that streamed among individual residents who live all under one roof.
- The 'Stepping On' program for LCG tenants organised by Carol Sin (ANHF Occupational Therapist) will start in August 2013. The 8-session program kicked off with 'Introduction', then 'Exercise and Moving about Safely', 'Home Hazards', 'Vision and Falling, Footwear', 'Calcium and Vitamin D', 'Medication Management and Mobility Mastery Experience', 'Review and Plan Ahead'.
- Other health professionals such as the physiotherapist, occupational therapist, dietician and a pharmacist had been invited to conduct information sessions. The average attendance was 20 to 25.
- Funding submission: A \$3,000 ClubGRANTS application was submitted on 26 April 2013, the project title being 'Positive Journey'.
- The project recognises the benefits of positive thinking and volunteering in improving mental health of isolated elderly people.
- Staff Training: Rebekah Kwan completed a Diploma of Management in June 2013.

#### Activity / Program

Regular programs: birthday parties (first Monday every month), - ceased on 7 May 2013), Health Monitoring Program (visit by Dr Tse on alternate Tuesdays)

The above are conducted to enhance the quality of life and well-being of tenants by providing different activities / programs which encouraged networking and social interaction.

Information session: Conducted to meet the needs of tenants who were very interested in acquiring information that was related to their physical well-being and their needs to catch up with issues related to their daily life.

Topics: 'Depression', 'Problem Gambling Guide', 'NSW Government Energy Saving Plan' and 'How to Vote as an Australia Citizen'. Guest speakers included health professionals, bilingual environmental educator, and community officers were invited.

#### Service Outlook in 2013-2014

- Identify resources to subsidize shopping trips and outings.
- Make good use of external funding resources to run programs to foster mutual support and positive ageing.
- Improve staff knowledge and skills in delivering quality service through appropriate trainings.



## Volunteer Coordinator —Tracy Yang

### Volunteer Service

Volunteers are an integral part of our organisation and play an important role in the development and provision of our quality services. ANHF has established a volunteer management system for recruiting, training and developing volunteer skills in different service areas. Newly recruited volunteers are required to sign a Confidentiality Agreement, undergo a Police Record Check and attend the same orientation program as our staff. The program is conducted by the Training and Development Manager and the content includes the introduction of the organisation, history, services, Work Health & Safety, as well as mandatory training in manual handling, infection control and fire evacuation.

### Achievements

National Volunteer Week is Australia's largest celebration of volunteers and volunteerism. To respond, a Volunteer Appreciation Night was organised on Friday 17 May 2013 at the Eight Restaurant. This annual event was held to show our appreciation to every volunteer's valuable contribution. Certificates of appreciation are presented to all volunteers. Each volunteer receives a lapel pin as a souvenir. Spouses of volunteers are also invited to attend the celebration. Without their support and understanding, our volunteers would not be able to assist in our services. 45 volunteers and 17 spouses, together with board members, senior executives and staff from all service units, made up a total of 8 tables. All participants enjoyed beautiful food, fun games and a lucky draw.

Regular meetings and in-service training are organised to maintain the knowledge and skills of volunteers by individual service units. A training session on Communication with Elderly People was conducted by Elsie Chan, Education and Training Officer of First Light Care during the volunteer meeting at the Volunteer Appreciation Night.

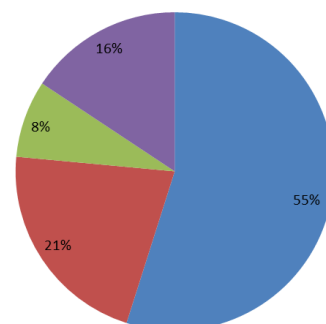
New volunteers are recruited through the Chinese media, the Community Care Information Expo and the Ashfield Volunteer Expo 2013.

### Data of Interest

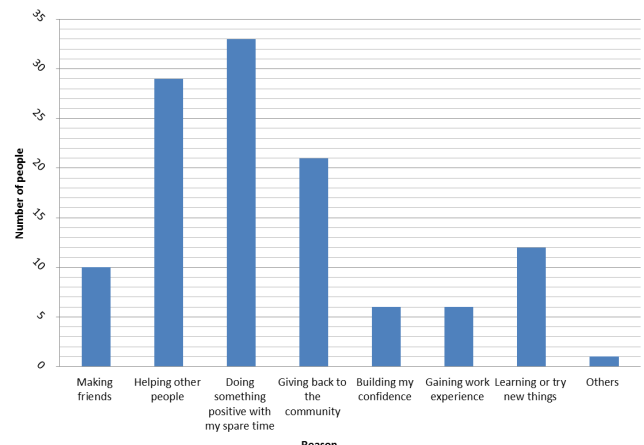
**256** Total number of volunteers  
**61** New volunteers recruited in 2013  
**107** Number of active volunteers  
**22** Number of casual volunteers  
**16-84** Age range of volunteers  
**13,124.90** Total number of service hours provided.

How long have you been in our volunteer service?

■ Under 5 years ■ 5-10 years ■ 10-15 years ■ No response

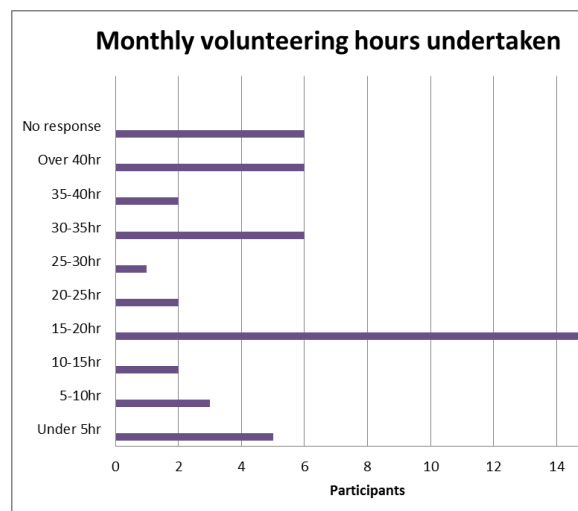


Main reason to be a volunteer



A volunteer satisfaction survey was conducted to identify needs of volunteers and obtain feedback for service improvement.

The most common length of time that volunteers undertake is between 15 to 20 hours. There are 4 participants that have done volunteer work for ANHF more than 40 hours monthly.



### Service Outlook in 2013-2014

- More effort will be put on promoting volunteer services throughout the Chinese media, ANHF website, mainstream services and organisations such as local volunteer networks, Centrelink job seeking program, local libraries, community centres and local schools.
- Volunteers will be encouraged to attend external training where appropriate.
- Bilingual training will be organised during volunteer meetings.
- More emphasis will be put on communication among volunteers, service supervisors and the volunteer coordinator.
- Annual performance evaluation for volunteers will be conducted to assist our volunteers to perform at their greatest potential and also to obtain feedback and suggestions for improvement of our services.





# Our Teams

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**Catering Committee Team**



**Staff Development Day**



**Retirement of Principal Director of Nursing**



**Community Care Workers Team**



**Head Office Team**



**Community Services Team**

# Quality Assurance and Training

Clinical Nurse Educator —Barbara Wong

## Staff Training and Development

During 2012 to 2013, numerous training programs were conducted to our residential care and community care staff by internal and external educators. Internally, these included the staff orientation program, mandatory training, in-services training, tool-box talk, utilization of Aged Care Channel, competency tests and assessments. Externally, many staff completed nationally recognized qualifications through the programs ANHF conducted in partnership with other Registered Training Organisations (RTO's).

### Data of Interest

**19** Staff completed Cert III in Health Support Services

**13** Staff completed Cert III in Aged Care

**7** Staff completed Cert IV in Aged Care

**14** Staff completed a Diploma in Management

**9** New assessment form was generated

**108** In-services sessions conducted

**38** Training sessions conducted by external trainers

**16** Registered Nurse seminar held

**6** Tool Box Talk sessions

**13** Staff completed Cert III in Aged Care

Various competency tests are conducted. Assessments are carefully planned; prepared, delivered; coordinated and recorded. This is aimed to provide opportunity for staff to constantly develop their skills and knowledge. The following is the list of competency tests undertaken:

Competency Test	
1	Hand washing procedure
2	Code of Conduct
3	Fire and Emergency Skills Knowledge competency (QPS)
4	Orientation Knowledge Competency (QPS)
5	Oral medication administration
6	Use of inhaler and spacer
7	Using nebulizer
8	Instillation of eye drops
9	Application of topic cream
10	Infection Control Knowledge competency test (QPS)
11	ANHF-work injury management procedure
12	Code of Conduct-2013- General Knowledge/Use of Recording Device in Workplace/Workplace Bullying
13	Caring for elderly in extreme hot weather
14	Elder abuse and reportable incidents
15	Food safety program-cleaning and sanitation
16	Residents with swallowing difficulty
17	Transfers of Client to and from a wheelchair
18	Setting APD machine

## Service Outlook 2013-2014

- ANHF strives to promote a culture of continuous learning. Workplace English Language Literacy (WELL) Program in partnership with TAFE is under preparation and different Nationally recognized qualification courses will commence in coming year.

### Physiotherapist — Fifi Lai

#### Residential Lifestyle Committee

2013 has been a busy year in the Lifestyle Department for the three homes as our creative team designed, facilitated and coordinated our fun and amazing jam-packed programs.

All activities are designed to meet and challenge the all-round needs of our residents, covering all these aspects: physical, social, cultural, spiritual and emotional.

#### Achievements

- Paperwork for RAOs has been streamlined to allow for more floor time.
- The Swap program was successful with RAOs experiencing different working conditions in different facilities and adapting their programs accordingly.
- The morning gentle exercise program is now a routine that residents look forward to every morning in all homes.
- The Master Chef program is very successful with lots of positive feedback from residents and their families. In-house High Tea has been added to the program.
- The Intergenerational Program is successful with visits from MLC school and Macquarie University Hong Kong students as well as Wesley Church children group.
- There has been an increase in the number of volunteers providing a much needed extra pairs of hands to carry out the activities.
- The opening of the Hurstville Respite Day Care has benefitted our dementia residents as they enjoy participating in their programs.
- More electronics are used to enhance mental stimulation to our residents, e.g. the use of MP3 to record relatives' voice for residents, and electronic photo frame for family photos as well as games from Wii machine.
- We continue to evaluate our programs to accommodate residents' requests; e.g. extra bus trips, increase foot massagers, increase variety of nutritional meals served in consultation with the Dietitian and, also adjusting the opening times of the garden gate to the cooler and warmer months accordingly.

#### Service Outlook 2013-2014

- Increase leisure activity such as chair dancing and resources, e.g. musical instruments and DVDs.
- Adopt the use of iPads.
- Recruit more volunteers with specific skills to conduct small interest groups e.g.: craft, Chinese chess or Calligraphy.
- Display monthly program in each resident's room to encourage better participation in programs.



**Diversional Therapy Department** aims to provide quality care for residents, facilitates and coordinates leisure and recreational activities which are designed to support, challenge and enhance the physical, social, cultural, spiritual, emotional and psychological well-being of the residents who may experience barriers to their leisure and recreational pursuits.

### Large Group Activities

- Morning Tea Chatting
- News Reading
- Bingo/Hoy/ Puzzle
- Craft/Drawing
- Sensory Activity
- IQ quiz/Story-Telling
- Cooking Demonstration
- Sing-along
- Mental Stimulation
- Gentle Exercise
- Games

### Festival Celebrations

- New Year
- Lunar New Year
- Australia Day
- Lantern Festival
- Easter (Easter egg given to each resident)
- Anzac Day (reminiscence story told and Anzac biscuits tasting)
- Mother's Day (Special Luncheon, dim sum supplied)
- Volunteer's Week
- Dragon Boat Festival
- Mid Autumn Festival
- Winter Solstice
- Christmas

### Special Events

- Nursing Home Anniversary Celebrations
- Valentine's Day
- International Women's Day
- Seniors week, (food tasting)
- Qing-Ming Festival, (We provided flowers for remembrance)
- International Nurses Day, (Residents helped to make an appreciation cards for the nurses)
- Melbourne Cup
- Master Chef Performance

### Special Entertainment

- Karaoke performance by Ms Elizabeth Tse & Ms Amy Ko, Ms Regina Ma & Friends; Ms Nancy Ho & Friends, Ms Linda Chan and Ms. Josephine Jong regularly.
- Burwood Salvation Army Karaoke and dancing performance, social activities and games bi-monthly.
- Social activities, Chinese opera karaoke performance by Ms Maggie Wong & Ms Ada Leung on a regular basis (粵韻之友).
- Movies, Chinese opera, Musical Performance (CD/DVD), Chinese TV .



# Occupational Therapy

## Occupational Therapist —Carol Sin

### Occupational Therapy

#### The LEAP Program

In 2013, the Lifestyle Engagement and Activity Program (LEAP) for Home Care Services customers commenced. The program combines the suitable elements of activity programs in home care settings, including how to assess for, tailor and deliver activities and deliver activities; and components of programs such as physical activities, Montessori activities, music therapy and humor therapy.

As one of the partner organizations of the University of NSW (UNSW), we have received valuable support from the research staff at UNSW in implementing the program. The managers of the Home Care Service have received direct training provided by the research staff and all the home care workers have received 3 sessions of LEAP training provided by the Occupational Therapist. Buddy shifts at LEAP clients' home are also conducted individually for each LEAP care workers. The program will be continued next year.

#### Assessments

All clients of the day care centers and customers who are receiving the Level 3 or Level 4 care packages are assessed by the Occupational Therapist. The assessment tools are developed from the Modified Barthel Index (MBI), the Mini-Mental State Test (MMST) and other clinical observation tools that cover the areas including: physical, cognitive, self-care and home environment. Recommendations have been given to the customers and their families drawn from the assessment results.

#### Individual Treatment

Individual treatment such as: motor training, cognitive training, and training on Activities of Daily Living (ADL) are provided for the clients in the day care centers or the residents living in the residential facilities.

#### Equipment Prescription

After being assessed by the Occupational Therapist, rehabilitation equipment such as: wheel chair, shower chair, and toilet surround are prescribed by the Occupational Therapist for customers of homecare services who are in need.

#### Home Modification

For some customers of homecare services, home modifications including: handrail installations, shower hose modifications, bathroom modifications are conducted by the Occupational Therapist to ensure the customers to continue to live at home safely and indecently.

#### Educational Program

Educational sessions for clients, carers and staff are conducted; and supported by the physiotherapist, the dietitian, and other health care professionals. A new falls prevention program in LCACC Nursing home and Poplar Street Community Housing have commenced during the year. Residents and families have given very positive feedback towards the program.

### Service Outlook 2013-2014

- The LEAP for Life will be continued as a part of the home care services. Customers of the home care services will perform more social and recreational activities in the community through goal setting and implementation of the care plans of the home care packages.
- In 2014, the falls prevention program will be continued for residents living in the other residential facilities.



## ANHF Supporters & Donors

Australian Nursing Home Foundation wishes to acknowledge and thank the following individuals and organisations for their continued support. Your support assists the Foundation to care for our elderly.

ABC Tissue Products	Dr. Eileen Ong	John Wong	S.Y.K Pang
Ada Cheng	Elizabeth Tse	Julie Shukor	Selina Leung
Albert Yen	Ellen Louie	Kenneth Nga	Semy Chan
Alexander Yuen	Emily Chang	Ky Non Du	Serkin Pty Ltd
Amen Kwai Ping Lee	Emily Chong	Lai Tat Victor Leung	Shui Lin Lau
Andrew Gock	Emily Yuen	LCACC residents	So Wai centre
ANSA Investment Pty Ltd	Ernie Kum Yuen	LCG Residents	Sonia Ong
Barbara Wong	Ettason Pty Ltd	Li Lian Guan	Sooi Lin Tye
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Brad Chan	Greenfield Park & Chester Hill clients	Mr Ping Tan	Therese Tong
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David Yau	Hong Chau Nhi	Quoc Xuyen Lam	Winnie Muoi Chen
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Deng Rui Ming	Humphrey Yu	Ronald Kha	Yu Wing Leung
Dr Francis Chung	Jap Jong Tjhun's family	Rosita Chan	Yu Wing Leung
Dr Fung Cheung	Jodie Wang	Royal Umbrella Thai Rice	國際社會福利協會中華
Dr James Yu	John Lee	皇族牌泰國香米	民國總會
		S & H Chu	