Residential Aged Care
After-Hours
Self-Assessment
Tool

phn
EASTERN MELBOURNE

An Australian Government Initiative

How to use this blank plan

The blank after-hours self-assessment tool is designed to be used alongside the after-hours guide. It allows you to document your facility's specific after-hours plan. Ensure all care staff have access to the plan and consider making it available electronically. Determine the most accessible physical locations within the facility for storing the plan, so that staff can easily refer to it during the after-hours period. Remember to review and update the plan regularly.

Additionally, there is also an after-hours facility quick guide template. This template can be used to summarise important information that needs to be quickly and easily accessed during the after-hours period. Consider placing these quick guides in key areas around the facility where staff can readily access them.

Clinical Governance *Aged Care standards 1, 2, 6 and 8*

Key components of Clinical Governance for FACILITY plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
There is a clear process for escalating a resident's care during after-hours, including specific prompts for escalation and assigned responsibilities.				
There are clear plans, processes, and structures for determining how care is delivered, including how residents cultural and spiritual needs and preferences are addressed.				
There is a clear process for monitoring risks associated with after-hours care, and related mitigation strategies.				
The documents that underpin the way we do things in our organisation are accessible and stored in an accessible location.				
A clear process is in place for reporting after-hours incidents, and all staff are trained on it, including how often training is refreshed.				
There is a clear process for communicating to staff about after-hours procedures, including escalating resident care needs.				
There are documented principles that guide the provision of person-centred care for residents during the after-hours period.				
There is a list of key people/documents to consult for resident care needs after hours, such as family, RACH manager, and Advanced Care Plan.				
There is a clear process for documenting facility and individual resident after-hours plans, stored in an accessible location.				
There is a clear process for updating facility and individual resident after-hours plans.				

Key components of Clinical Governance for RESIDENT plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
Each resident has a documented after-hours care plan, including their preferences for primary and secondary contacts and culturally appropriate providers.				
The plan is stored in an accessible location for permanent and agency staff in emergencies				
Principles are documented to ensure that residents have a say in their after-hours care plan				

Workforce *Aged Care standard 7*
Key components of Workforce for FACILITY plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
Documented roles and responsibilities for ensuring resident care in the after-hours, including: - nominated staff for completing comprehensive physical assessment of a resident. - responsibilities of non-clinical staff				
Process for training nominated staff in the use of tools, for assessing and communicating resident care needs in the after-hours, e.g.: - Emergency Decision Guidelines - ISOBAR - Comprehensive physical assessment				
Documented GP preferences for individual resident care in the after-hours.				
List of local services who provide after-hours care, including providers who can support resident's cultural and spiritual needs and preferences.				
If a resident is Palliative, are they linked with a specialist or generalist Palliative care provider, and where is this information collected and stored?				

Key components of Workforce for RESIDENT plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
Documented GP per resident, and preferred emergency contact for after-hours care (if GP unavailable).				
Documented specialist palliative care provider per resident and contact for after-hours care.				
Documented providers per resident, who can support a resident's cultural and spiritual needs.				
Procedure for communicating outcomes of resident care delivered in the after-hours to GP and nominated others.				

Systems and Processes *Aged Care standards 3 and 4*

Key components of Systems and Processes for FACILITY plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
There is a defined process for recognizing and responding to resident deterioration.				
Assessment tools are utilised to assess residents' care needs during the after-hours period.				
There is a process in place to evaluate the effectiveness of after-hours planning, including how well residents' cultural and spiritual needs and preferences are addressed.				
An electronic record management system is used to capture and share information about resident care during the after-hours period.				
Access to non-electronic resident information is ensured in the after-hours, in case of a blackout or other technological issues that may affect electronic systems. Consider where hard copies are stored for quick access for new/agency staff.				

Key components of Systems and Processes for RESIDENT plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
A process is in place to evaluate the effectiveness of delivering after-hours care plans for each resident, taking into consideration their cultural and spiritual identity. This evaluation helps ensure that the care provided aligns with their unique needs and preferences.				
There is a process in place to regularly update the after-hours care plan for each resident. This ensures that the plan remains current and reflects any changes in the resident's needs or preferences over time.				

Local needs and services *Aged Care standards 7 and 8*

Key components of Local Needs and Services for FACILITY plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
There is a clear and accessible list of medical contacts for after-hours care, which includes both preferred and back-up supports. This list provides the necessary information for contacting medical professionals outside of regular business hours when residents require care.				
There is a clear and accessible documented list of local/contracted pharmacies available in the after-hours, including their hours of operation.				
There is a clear process for using onsite Imprest medication system for accessing urgent medication in the after-hours.				
There are a clear and accessible documented list of mental health and behavioural supports available in the after-hours.				

Key components of local needs and services for residents

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
Residents' after-hours care plans document their preferred pharmacy for where scripts are held.				
Residents' after-hours care plans include their preferences for mental health support.				
Residents' after-hours care plans include their individual needs, preferences, and cultural/spiritual considerations (for example Aboriginal and/or Torres Strait Islander, LGBTI, CALD (Culturally and Linguistically diverse, person with disability). The plans also list service providers who can meet their unique needs during the after-hours period.				
Residents' after-hours care plans document who to contact for translation into their preferred language in the after hours.				
Residents' after-hours care plans document if they are for hospital transfer when a resident is palliative.				

Infrastructure *Aged Care standards 5 and 8*

Key components of Infrastructure for FACILITY plan

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
Reliable internet connection is available to support telehealth services for after-hours resident care.				
There is a documented list of emergency contacts for after-hours support, which includes key contacts for electricity, internet, IT and resident documentation software providers.				
There are designated spaces for providing resident care that respects and accommodates their cultural and spiritual needs and preferences. This includes specific considerations for end-of-life care.				

Key components of Infrastructure for RESIDENT plans

Processes and Procedures	In place? Y/N	Detail the actions required and plan to implement:	Date to implement:	Date completed and by (name):
Individual preferences for utilising telehealth services are documented for each resident.				
Resident preferences for the location of after-hours care are documented, considering their cultural, spiritual, and personal needs.				
Resident preferences for hospital transfer when palliated are documented and clear.				

Acknowledgements

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We recognise and value the knowledge and wisdom of people with lived experience, their supporters and the practitioners who work with them. We celebrate their strengths and resilience in facing the challenges associated with their recovery and acknowledge the important contribution that they make to the development and delivery of health and community services.