

Partnering with Consumers Case Study:

Person-centred care at Braidwood Multipurpose Service

Person-centred approaches and consumer partnerships

Listening to consumer voices is an important part of enabling safe and high-quality health care. By working together, consumers and health service organisations can help improve the delivery of health services, health outcomes and the experience for patients, their carers and family members.

Person-centred approaches and strong consumer partnerships underpin the Partnering with Consumers Standard in the National Safety and Quality Health Service (NSQHS) Standards. This case study is one of four, designed to align with *Partnering with Consumers: A guide for consumers*. It focuses on initiatives to

strengthen person-centred care as part of the redevelopment of a multipurpose service to co-locate aged care and acute services. This case study explores:

- A** Involving consumers in the planning and design of the new multipurpose service
- B** Engaging with individual residents and their families to share decisions about the move
- C** Creating more opportunities for resident choice, connection and person-centred care
- D** Outcomes, learnings and future directions.

Snapshot of Braidwood Multipurpose Service

Where



Braidwood Multipurpose Service (MPS) is located in the Southern Tablelands of NSW, on Walbunga country, part of the Yuin nation. Braidwood is a small, rural town of approximately 1,700 people, 85% of whom speak English at home.

What



Braidwood MPS is a 45-bed facility providing an integration of hospital, community health and aged care services including Aboriginal health, chronic disease, diabetes, drug and alcohol, mental health, nutrition and dietetics, palliative care, radiology, social work, speech pathology and women's health. The redevelopment included new in-patient rooms (five acute beds and a three-bed emergency department with dedicated ambulance entry) as well as 37 single room residential aged care beds.

Whom



Braidwood MPS serves the population within a 70 km radius of the facility. Most residents are local to the area and have lifelong memories of the small hospital that was on the site for the last 150 years.

Overview

Braidwood MPS is a focal point for this small rural community who have a strong sense of connection to the service.

'Braidwood is the only Health Service for an area of 70km radius, and it is very, very important to this Community.'

– Chair of the Consumer and Carer Council

A Involving consumers in the planning and design of the new multipurpose service

Funding was made available for a new co-located multipurpose service at Braidwood, to be built on the site of the existing hospital. The new multipurpose service would be the new home for low-level care residents and high-level care residents, who had previously lived in separate buildings, cared for by separate staff.

Residents, their families and the community were involved in the planning and design of the new service, from the initial architectural drawing stages, through to completion of the build. From the outset, the goal was to involve consumers in the development of the new service as well as the execution of the move itself.

Planners, site managers, nurses, allied health, asset management and kitchen staff all worked together with residents to achieve these goals over a period of two years. Specific engagement strategies included:

- Forming a Community Consultation Committee that held regular meetings and had a designated Facebook page
- Holding regular resident meetings in the low-level care facility, and resident and family meetings in high-level care
- Monthly meetings with residents and the hospital management team, as well as making other opportunities to meet with project manager/change facilitator
- Evening sessions with community members to discuss buildings, plans, gardens and progress with the build
- Meetings with the Dementia Clinical Nurse Consultant and Falls Prevention Co-ordinator to ensure the new facility was dementia-friendly and safe for residents at high-risk of falls
- Consultations with community groups who had a vested interest in the facilities including the historical society, gardening groups, artists and curators of housed artworks.

B Engaging with individual residents and their families to share decisions about the move

Ensuring a smooth transition to the new MPS facility for residents, who had previously lived separately in a low-level care/independent living centre and a high-level care residential aged care wing, was a priority from the outset.

In addition to the involvement of residents and their families in the planning and design stages of the redevelopment, a person-centred approach was used to engage with individual residents. This ensured what was important to each resident and their family was understood and could be accommodated during the transition. This process recognised existing ties to the old, and identified ways to honour these, while fostering ties to the new.

Residents and their families helped co-design the transition to the new facility and were encouraged to chat with the Health Service Manager and Nurse Manager at any time. This was supported by regular walk-throughs of the building as it progressed, tours as it neared completion and displaying drawings of the new MPS facility in existing buildings.

Nursing staff worked with residents to understand and respond to their concerns about leaving their familiar surroundings and moving to a larger, more modern facility. This included by:

- Developing updated and detailed care plans with residents and their families to capture their needs
- Facilitating individualised room selections, supported by walk-throughs of the new facility. Residents and their family members were able to identify three room preferences before a draw took place to allocate rooms
- Supporting residents with packing and moving, maintaining plants and arranging the relocation of planters and water features that residents had near their rooms, to the new facility
- Consulting residents about which artworks they would like transitioned to the new facility and where they would like them to be located
- Supporting residents to choose artwork to display at the door of their new room and selecting images that had personal meaning for their name display. As well as personalising the space, this also helps residents with memory problems locate their room by finding their painting.

Residents were treated with dignity and respect during the transition program and felt empowered by being involved in choosing their new room. Being able to take their personal possessions to the new facility, helped to retain familiar features, supported integration and was a great talking point. The care taken by staff in relocating these items also acknowledged their significance.

'My family chose room 9 for me, my farm is just over that hill'

– Resident

The role of artwork had a particular importance in the small community as many of the art works were donated or made by local residents and there is a strong tie to those who live in Braidwood. Having the artworks reframed by a local framer and hung throughout the new facility corridors, lounges and dining areas created links between the old and new spaces.

C Creating more opportunities for resident choice, connection and person-centred care

Having heard what mattered most to residents and their families, the design and transition teams then made improvements that would support resident choice, connection and person-centred care:

- Lounge and communal areas were designed to be homely and inviting, incorporating quality furniture from the old facility to bring familiarity and homeliness to the new facility. Residents had input on the new furnishing colours and designs. To balance the white walls in the new facility, colours chosen by residents were introduced to corridor room recesses, which also serve as a navigation aid
- When residents identified they would like to be able to do their own laundry, a resident's laundry room and clothesline was added during the final planning stage, to support their continued independence
- The courtyards in the new facility were co-designed with residents and built with the assistance of the gardening club to allow placements of their own ornaments, birdbaths, garden furniture, pots and plants. Braidwood Men's Shed built raised flower beds to allow residents to access gardens and continue to pursue their interest in gardening. The original hospital signage that greeted visitors on entry to the hospital, was placed in the new facility garden, facing the new building
- There was a lot of nostalgia felt toward the rose bushes planted at the old hospital, which had been donated over the years. Cuttings were made and the rose bushes taken to a local horticulturalist for safekeeping until they were replanted at entrance to the new facility
- When residents said they wanted access to equipment to cook their own meals, changes were made so that they could have mini fridges, kettles and microwaves in their rooms. There is also an oven, microwave, as well as tea and coffee making facilities in the main dining room that residents can use with their families. Other, smaller dining areas were also created to allow greater choice and flexibility.

D Outcomes, learnings and future directions

The final move took place in August 2020, with acute patients and residents receiving high-level care moving at midday, to enjoy lunch in the new dining room while their families set up their rooms. On moving day, staff and families all left the old hospital and travelled the few metres up the road to the new facility. Three days later residents from the independent living/low-level care facility moved in.

By taking a person-centred and collaborative approach, the transition to the new facility was smooth, with minimal stress to residents and high levels of satisfaction. Central to the approach of the new facility is the principle of ageing in place – ensuring that, no matter how precarious their health, the town's older people can still hear and feel all that has become important to them, can look at the sky and know where they are, and can be visited by people who know their stories.

'(One of the residents) had spent the best part of three decades living and making art in the old schoolhouse. He made the decision to move into the permanent care building adjacent the hospital. He now paints ... in time to classical music at Braidwood [MPS] and locals drop off paints and canvases.'

– Resident's family member

A strengthened person-centred model of care is in place and observable in the way:

- Each resident is now consulted about their meal choices daily and their meals served in a communal dining area or their room, according to their preference. There are no set rules for dining and there are different areas within the facility for residents who need to have quieter meals, or for those who would like to have less distraction and noise, in a more café-like environment
- Nursing staff now focus on one resident each day (the 'resident of the day') in which all aspects of care planning are reviewed with the resident and their family. Care plans are now discussed with and signed by the resident and family and are reviewed every three months with the GP. Weekly case management meetings are held to discuss issues that arise with care planning or behaviours that require involvement from aged care nurse practitioners, dementia and delirium clinical nurse consultants or older people's mental health services
- All residents with dementia have an individualised behaviour support plan developed by nursing staff in partnership with the resident and their family. These are reviewed every month and families are invited to participate so that it is a collaborative effort.

A key learning has been that staff (including management) need to be prepared, adaptable, and keep an open mind to new experiences and ideas that could enhance the lived experience of residents. Old ways of doing things can sometimes become stale or stifling and need to be reconsidered.

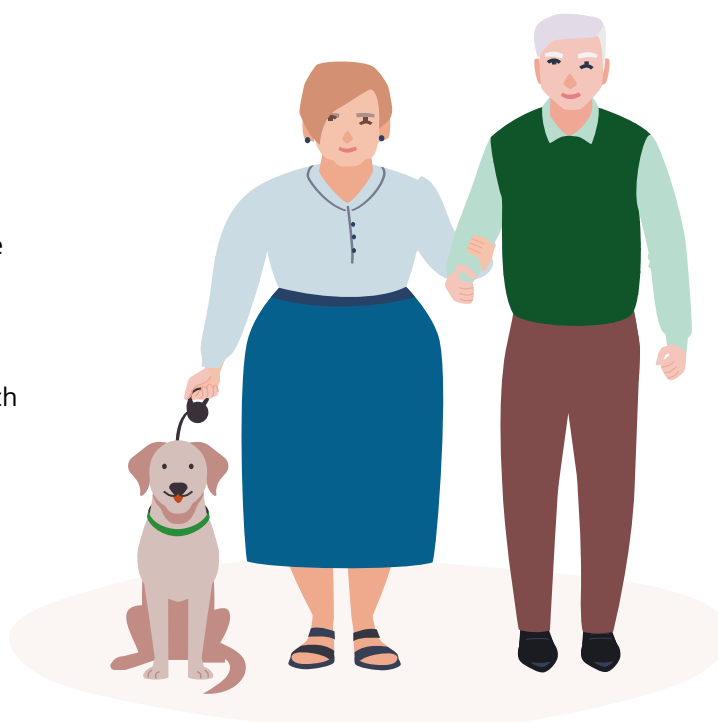
The focus has moved on from settling into the new facility, integrating new staff and supporting teamwork, to focusing on how to improve care for each person living in the facility, with particular emphasis on integrating residents with dementia into the care model.

'We are changing our focus from nursing tasks to nursing care.'

– Nursing staff member

Looking to the future, there are many new priorities, as well as projects and improvements underway as Braidwood MPS strives to make the experience for residents the best it can be, including:

- Considering how to develop paths in the garden with more sensory aspects for residents with dementia, and meandering courses through gardens which are safe for those who may wander
- Continuing to partner with consumers and have monthly residents' meetings and weekly 'morning chatters' over a cup of tea with the social worker, which everyone is welcome to attend
- Partnering with the other MPS's in the district; Bombala and Delegate to exchange ideas and processes, collaborating between facilities to improve residents' quality of care
- Employing a clinical nurse educator for the aged care nursing staff to enable greater focus on aged care health and wellbeing and build the capacity of staff to provide improved care
- Informing and educating staff about dementia through Dementia Training Australia helping them understand the issues and ways to support residents with cognitive impairment
- Building a ramp to the outdoor areas so residents with dementia can access them more easily, an area for sensory care for residents with more advanced nursing care needs, and activities that stimulate and support healthy minds
- Completing a quality improvement project reviewing the Aged Care Quality Standards and admissions process to provide more individualised care.



Find out more

Further information and resources on person-centred care, partnering with consumers and the NSQHS Standards can be found here:

- [Partnering with Consumers: A guide for consumers](#)
- [Person-centred care](#)
- [The NSQHS Standards](#).

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