



Work Effectively in Aged Care

Assessment 1 of 2

Short answer questions



Assessment Details

This section is for SUT VE Quality and Compliance review and feedback and must be deleted in the student version of the assessment.

SECTION 1		
UNIT OF COMPETENCY DETAILS		
Code	Title	
M00568B	Work effective in aged care	
COURSE AND MODULE DETAILS		
<i>Assessments may be published in more than one course. Add lines for additional courses as needed.</i>		
Course Code (UPed)	Module Number (Order)	Module Code (UPed)
CHCAGE013	14	M00568B
ASSESSMENT TYPE		
Assessment Method: <i>Select all that apply.</i>	Questioning	Choose an item. Choose an item.

SECTION 2
STUDENT INSTRUCTIONS
<i>The following instructions detail the requirements of the assessment and are captured in the LMS assessment page. This includes a description of the student instructions, associated files and submission instructions.</i>
Student instructions
This is assessment 1 of 2 assessments for work effectively in aged care. There is SWLA requirements to be completed for this unit in SWLA block 2.
This assessment requires you to answer 22 short answer questions to test your knowledge required of this unit.
To be assessed as competent, you must complete all tasks in the spaces required.
You are required to download your assessment by clicking on the assessment document icon below (see Let's begin) and upload your completed assessment for submission.
Supporting documents
Not applicable.
Files for submission
Submit the assessment document with all tasks completed in the spaces provided.
Submission instructions

PDF File Submissions

Please save all Word documents as PDF files before submitting.

IMPORTANT: Word documents will **not** be accepted.

Most modern web browsers can open and display a PDF file. If you have an older operating system, however, you may need a PDF reader installed on your device such as the Acrobat Reader, available from Adobe.

Windows: Word 2013 and newer

Choose **File > Export > Create PDF/XPS**.

Windows: Word 2010

1. Click the **File** tab
2. Click **Save As**
 - To see the Save As dialog box in Word 2013 and Word 2016, you have to choose a location and folder
3. In the **File Name** box, enter a name for the file, if you haven't already
4. In the **Save as** type list, click **PDF (*.pdf)**.
 - If you want the file to open in the selected format after saving, select the Open file after publishing check box.
 - If the document requires high print quality, click Standard (publishing online and printing).
 - If the file size is more important than print quality, click Minimum size (publishing online).
5. Click **Options** to set the page to be printed, to choose whether markup should be printed, and to select output options. Click **OK** when finished.
6. Click **Save**.

macOS: Office for Mac

To save your file as a PDF in Office for Mac follow these easy steps:

1. Click the **File**
2. Click **Save As**
3. Click **File Format** towards the bottom of the window
4. Select **PDF** from the list of available file formats
5. Give your file a name, if it doesn't already have one, then click **Export**

For more detailed instructions refer to [Microsoft Support](#).

SECTION 3

ASSESSMENT TASK CRITERIA AND OUTCOME

This assessment will be graded as Satisfactory (S) or Unsatisfactory (US).

To achieve Satisfactory; valid, sufficient, authentic, and current evidence of meeting the criteria must be submitted.

Refer to the mapping spreadsheet for details for this unit.

SECTION 4

ASSESSMENT DETAILS

Please refer to SECTION 2 to confirm how the assessment tools will be built and the methods that will be used to collect evidence i.e., Student's will type answers directly into LMS or will upload of files of completed assessment tasks.

The STUDENT INSTRUCTIONS above will be added directly into the LMS.

All associated files will be accessed via the LMS, as will any Assessor Guides, Matrix, Templates etc.

Students and Assessors have restricted permissions in the LMS. Assessor Guides, including model answers, will be available to Assessors ONLY.

The following pages contain the draft assessment which will be built into the LMS once reviewed. This includes:

- Instructions to students
- Questions /tasks
- Templates /tables where applicable
- Links to supporting files /websites
- Instructions to assessors
- Sample answers /examples of benchmark answers

SECTION 5

STAKEHOLDERS AND SIGN OFF

List all that apply for each of the stakeholder roles below.

UPed Learning Designer/Author name	Eduworks Resources
SUT VE Quality Compliance name	Simon H
Date approved	

Assessment Instructions

Task overview

This assessment task requires you to answer 22 short answer questions. Read each question carefully before typing your response in the space provided.



Assessment Information

Submission

You are entitled to three (3) attempts to complete this assessment satisfactorily. Incomplete assessments will not be marked and will count as one of your three attempts.

All questions must be responded to correctly to be assessed as satisfactory for this assessment.

Answers must be typed into the space provided and submitted electronically via the LMS. Hand-written assessments will not be accepted unless previously arranged with your assessor.



Reasonable adjustment

Students may request a reasonable adjustment for assessment tasks.

Reasonable adjustment usually involves varying:

- the processes for conducting the assessment (e.g. allowing additional time)
- the evidence gathering techniques (e.g. oral rather than written questioning, use of a scribe, modifications to equipment)



However, the evidence collected must allow the student to demonstrate all requirements of the unit.

Refer to the Student Handbook or contact your Trainer for further information.



Please consider the environment before printing this assessment.

Question 1

Read the scenario below and answer related questions. You must answer all the questions.

Scenario: Mrs. Johnson is an elderly resident in a care home who has been diagnosed with dementia. She used to enjoy gardening and taking care of plants in her own home. However, due to her condition, she now requires support in her daily activities. The residential aged care runs many programs for the elderly on a weekly basis such as art classes, exercise programs, excursions etc. You are a carer and your tasks is to provide support and involve and engage Mrs Johnsons in activities based on her needs and preferences.

- a) As a caregiver, describe briefly three (3) support practices within a person-centered approach that you would apply to address Mrs. Johnson's individual needs and preferences while respecting her rights and autonomy.

(Approximate word count 140-150 words)

Assessor note: Sample answer provided below student must select three(3) out of six(6) techniques provided below however the wording may vary.

a) Incorporating Gardening Activities: I would respect Mrs Johnsons autonomy and provide opportunities for Mrs. Johnson to engage in gardening activities, even if it's on a smaller scale. Set up a small garden area within the care home or bring in potted plants for her to care for. This will allow her to maintain her connection with gardening and experience the joy it brings.
b) Individualized Activity Planning: Collaborate with Mrs. Johnson to develop an individualized activity plan that aligns with her interests. This could involve including gardening-related activities in her daily routine or incorporating elements of gardening into other activities.
c) Flexibility and Choice: Offer Mrs. Johnson a range of options and choices when it comes to participating in activities. Allow her to decide which programs or excursions she would like to join, ensuring that they align with her preferences and abilities.
d) Adaptation and Modification: Modify activities to suit Mrs. Johnson's current cognitive and physical capabilities. Break down tasks into smaller, manageable steps, provide visual cues, or offer assistance as needed, ensuring she can actively participate in the activities.
e) Emotional Support and Encouragement: Provide emotional support and encouragement during activities. Praise her efforts and focus on the enjoyment and sense of accomplishment she derives from engaging in activities, rather than solely focusing on the outcome.
f) Meaningful Engagement: Seek activities that hold personal meaning for Mrs. Johnson. For example, if there is an art class, encourage her to create artwork depicting flowers or nature scenes, linking it to her love for gardening.

- b) As a carer, briefly explain how will you assist Mrs. Johnson in exercising her choice?

(Approximate word count 75-85 words)

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

When planning activities, I will present Mrs. Johnson with a variety of options and involve her in the decision-making process and respect her preferences and consider her choices to ensure her wellbeing is maintained throughout her journey. During recreational activities, I would offer Mrs. Johnson a selection of activities and let her choose which one she would like to engage in, whether it's participating in gardening activities, attending an art class, listening to music, or joining a group discussion.

c) As a carer briefly explain how will you support Mrs Johnsons right to self-determination?

(Approximate word count 70-80 words)

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

I would provide Mrs. Johnson with information and support to make decisions about her daily routine. For example, I will discuss with her preferred time to take a shower, allowing her to determine the timing that suits her comfort and preferences. In collaboration with Mrs. Johnson's family and caregivers involve her in decisions regarding her care plan and living arrangements, respecting her right to be involved in determining her own future.

Question 2

Read the scenario below and answer related questions. You must answer all the questions.

Scenario: Mr. Davis is an elderly resident in a care facility who has limited mobility and requires assistance with daily activities. He has expressed a desire to continue engaging in physical exercises and going for walks independently, despite the risk of falls.

a) Briefly explain what duty of care means in the context of aged care?

(Approximate word count 25-35 words)

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

Duty of care refers to the legal and ethical responsibility of caregivers to provide a safe and supportive environment for residents, ensuring their well-being, health, and safety.

b) Briefly explain how a carer can maintain their duty of care while supporting Mr. Davis choice?

(Approximate word count 80-90 words)

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

Carers can conduct a thorough risk assessment to identify potential hazards and implement appropriate safety measures. They can provide mobility aids and ensure the environment is free from obstacles. Regular monitoring, supervision, and assistance during exercises and walks can also help minimize risks while maintaining Mr. Davis's safety. Carers can collaborate and discuss with Mr Davis to use assistive technology such as falls detection device that can be worn on the wrist that can detect sudden changes in movements or impact.

c) Explain what does the term 'dignity of risk' mean in aged care?

(Approximate word count 40-50 words)

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

Dignity of risk recognizes that individuals have the right to make choices and take risks in their lives, even if there is a possibility of harm. It emphasizes the importance of preserving autonomy and dignity while balancing the need for safety.

d) Briefly explain how carer can effectively uphold the dignity of risk while providing support to Mr. Davis to exercise his choice?

(Approximate word count 60-70 words)

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

Carers can engage in open and honest discussions with Mr. Davis about his desire to engage in physical exercises and walks independently. They can assess his capabilities and develop strategies to mitigate risks while allowing him to maintain a level of independence. This might involve providing him with mobility aids, implementing fall prevention measures, and ensuring he receives appropriate supervision and support.

e) Briefly explain five (5) support practices that carer can incorporate to support Mr Davis desire to engage in physical exercises and go for walks independently, despite the risk of falls?

(Approximate word count 195-210 words)

Assessor note: Sample answer provided below student must select five (5) out of eight(8) techniques provided below however the wording may vary.

1. Personalized Exercise Plan: Designing a personalized exercise plan with the help of a qualified physiotherapist or exercise specialist. The plan should consider Mr. Davis's specific mobility limitations, focusing on safe and appropriate exercises to maintain his physical well-being.
2. Supervised Exercise Sessions: Providing supervised exercise sessions to ensure Mr. Davis's safety while encouraging his active participation in physical activities. Caregivers can offer assistance and guidance during the exercises to prevent falls and ensure proper form.
3. Risk Assessment and Safety Measures: Conducting a risk assessment of the walking areas and ensuring that pathways are well-maintained, free from obstacles, and adequately lit. Implementing safety measures such as providing a personal alarm or communication device to allow Mr. Davis to call for help if needed during walks.
4. Assistive Devices: Providing Mr. Davis with appropriate assistive devices, such as walking aids or grab rails, to support his independence while reducing the risk of falls during daily activities.
5. Person-Centered Approach: Adopting a person-centered approach that involves active listening and respecting Mr. Davis's desires and preferences regarding his care. Encouraging him to actively participate in decision-making and allowing him to have a say in the activities he wants to perform independently.
6. Motivational Techniques: Using motivational techniques to keep Mr. Davis engaged in physical exercises and walks, despite the risk of falls. Setting achievable goals, providing positive reinforcement, and celebrating his progress can help maintain his motivation.
7. Regular Check-Ins: Conducting regular check-ins with Mr. Davis to monitor his well-being, address any concerns, and ensure he feels supported and cared for in his pursuit of independent physical activities.
8. Building Trusting Relationships: Fostering trusting relationships between caregivers and Mr. Davis to establish open communication and a sense of security, allowing him to feel comfortable expressing his needs and preferences.

Question 3

Read the scenario below and answer related questions in the table below.

Scenario: Mr. Roberts, an elderly resident in a care facility, has been experiencing instances of verbal abuse from a particular staff member. This abusive behavior has caused distress and discomfort for Mr. Roberts, affecting his well-being and quality of life. Alongside the specific case of abuse, there are broader issues at the care facility, including inadequate staffing levels and poor communication among staff members which has led to overwhelmed caregivers and reduced attention to residents' needs hindering the provision of individualized care support.

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

Question	Answer
a) Identify the type of abuse (Approximate word count 5-7 words)	The type of abuse is verbal abuse
b) Briefly explain the risk area associated with the abuse experienced by Mr. Roberts. (Approximate word count 15-20 words)	Verbal Abuse to Mr. Roberts: The abusive behavior can cause distress and discomfort for Mr. Roberts.
c) Explain two(2) Support Practices that organisation can implement for this risk area identified (Approximate word count 55-65 words)	1. Immediate Intervention: Swift action should be taken to address the verbal abuse, ensuring Mr. Roberts is removed from the abusive environment and provided with appropriate support and counseling.
	2. Implementing comprehensive staff training programs on abuse recognition, prevention, and reporting. This includes educating staff members on appropriate communication techniques and promoting a culture of respect and empathy towards residents.
	3. Establishing clear policies and procedures for reporting suspected abuse, ensuring that all incidents are documented, investigated thoroughly, and appropriate actions are taken.
	4. Encouraging open communication channels for residents, their families, and staff to voice concerns or complaints, providing anonymous reporting mechanisms such as hotlines or suggestion boxes.

<p>d) Identify the two (2) systemic issues in this scenario?</p> <p>(Approximate word count 8-10 words)</p>	<p>Staffing shortage and poor communication are the systemic issues.</p>
<p>e) Briefly explain two(2) areas of risks arising due to this systemic issue?</p> <p>(Approximate word count 55-65 words)</p>	<p>Inadequate staffing levels can lead to overwhelmed caregivers, potentially resulting in compromised care, neglect, and reduced attention to the needs of residents like Mr. Roberts.</p>
	<p>Poor communication among staff members can hinder the proper coordination of care, making it difficult to provide individualized care support and potentially leading to unnoticed or unreported instances of abuse or neglect.</p>
<p>f) Explain two(2) support practices organisations can implement to manage these systemic issues.</p> <p>(Approximate word count 60-70 words)</p>	<p>1. Conducting regular assessments of staffing levels to ensure an adequate staff-to-resident ratio, taking into account the needs and acuity of residents. This helps prevent burnout, fatigue, and potential neglect due to understaffing.</p>
	<p>2. Providing ongoing training and education for staff members, including topics such as effective communication, resident rights, and person-centered care, to address knowledge gaps and improve the overall quality of care.</p>
	<p>3. Improving communication and coordination among staff members through regular team meetings, utilizing technology for efficient information sharing, and promoting interdisciplinary collaboration to ensure a holistic approach to resident care.</p>
	<p>4. Conducting regular audits and evaluations of policies and procedures to identify areas of improvement, ensuring they align with best practices and promote resident well-being and safety.</p>

Question 4

This question has two(2) parts you must complete both the parts.

- a) Identify the types of abuse, then, identify two (2) signs of abuse that you have recognised from the following five (5) situations.

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary.

Situation	Types of abuse	Signs of abuse
<p>Mrs. Parker, an 85-year-old widow, resides in a nursing home. She often complains of feeling anxious and scared. Staff members have observed a caregiver raising their voice at Mrs. Parker, belittling her, and threatening her with isolation if she complains about the care she receives.</p> <p>(Approximate word count 40-50 words)</p>	<p>The type of abuse identified is verbal abuse. Also, emotional abuse is indicative within this situation due to Mrs Parker often feeling anxious and scared.</p>	<p>Frequent expressions of fear, anxiety, or depression by the elder.</p> <p>Verbal threats, intimidation, or humiliation by caregivers.</p>
<p>Mrs. Anderson, 82-year-old women, who lives alone. Mrs Anderson has been diagnosed with moderate dementia with memory loss and cognitive decline. She has a caregiver, Mr. Davis, who helps her with daily tasks. Lately, Mrs. Anderson has been signing over large checks to Mr. Davis for services she doesn't remember receiving.</p> <p>(Approximate word count 70-80 words)</p>	<p>The type of abuse identified is financial abuse as her care giver Mr. Davis, is taking advantage of her vulnerability and potentially manipulating her into signing over large checks for services she does not remember receiving.</p>	<p>Unexplained Financial Transactions: Mrs. Anderson is signing over large checks without a clear explanation or memory of the services received.</p> <p>Manipulation: Mrs. Anderson doesn't remember receiving the services she is paying for, indicating possible manipulation or deceit.</p>
<p>Mr. Garcia, a 75-year-old man with dementia, resides in an assisted living facility. has recently shown signs of sedation, confusion, and unsteady gait. He has been getting hospitalised regularly and a recent audit of his medical records revealed a discrepancy in his medication administration it seems his prescribed medications are irregularly administered.</p> <p>(Approximate word count 70-80 words)</p>	<p>The type of abuse identified is medical neglect due to medication mismanagement. Mr. Garcia's symptoms of sedation and confusion are indicative of the potential overmedication or irregular dosing of his prescribed medication. Frequent Hospitalizations could be possibly due to medication errors or omissions</p>	<p>Noticeable decline in Mr. Garcia's physical and mental or unexplained health decline.</p> <p>Frequent hospitalisation The need for regular hospitalizations indicates that his health condition is deteriorating, possibly due to medication errors or omissions.</p>
<p>Mr. Smith, a 75-year-old resident in an assisted living facility, has recently been seen with unexplained bruises and injuries. He is hesitant to talk about how he got hurt and seems fearful around a specific staff member who is often alone with him.</p> <p>(Approximate word count 30-40 words)</p>	<p>The type of abuse identified is physical abuse.</p>	<p>Mr Smith is visibly afraid when the specific staff member is near him.</p> <p>Unexplained bruises, cuts, fractures, or injuries are common signs of physical abuse.</p>
<p>Mrs. Martinez, an 88-year-old woman, lives in a care facility. She is frequently left in her room for extended periods,</p>	<p>The type of abuse identified is Neglect</p>	<p>Mrs. Martinez, Bedsores, unattended medical conditions, or</p>

<p>and her basic care needs are often ignored. She has developed bedsores and appears malnourished. (Approximate word count 35-45 words)</p>		<p>untreated injuries are clear signs of neglect. Mrs. Martinez, poor hygiene, malnourishment, or dehydration and neglected living conditions and isolation are clear sign of neglect.</p>
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b) List and briefly explain five (5) support practices that organisations can implement to address and prevent abuse in aged care settings?

Assessor note: Sample answer provided below student must select five(5) out of seven(7) techniques provided below however the wording may vary.

(Approximate word count 180-190 words)

<p>1. Comprehensive Staff Training: Provide thorough training programs to staff members on recognizing, preventing, and responding to abuse. This includes education on resident rights, communication skills, conflict resolution, and the importance of maintaining a safe and respectful environment.</p>
<p>2. Reporting Mechanisms: Establish clear reporting mechanisms that encourage staff, residents, and family members to report any concerns or suspected cases of abuse. Ensure that reports are taken seriously, investigated promptly, and appropriate actions are taken to address the issue.</p>
<p>3. Collaborative Care Planning: Involve residents, family members, and relevant healthcare professionals in care planning discussions. This collaborative approach ensures that individual needs and preferences are considered, reducing the risk of neglect or abuse.</p>
<p>4. Staff Supervision and Support: Implement regular supervision and support mechanisms for staff members, including ongoing feedback, performance evaluations, and opportunities for professional development. This helps maintain accountability and fosters a positive work culture that prioritizes resident well-being.</p>
<p>5. Adequate Staffing Levels: Ensure appropriate staffing levels to meet the needs of residents. Sufficient staffing allows for better supervision, individualized care, and the timely identification and intervention in cases of abuse.</p>
<p>6. Resident Empowerment: Promote resident empowerment by encouraging their participation in decision-making processes, respecting their choices, and ensuring their voices are heard. Provide information about their rights, available support services, and avenues to raise concerns or complaints.</p>
<p>7. Continuous Quality Improvement: Establish a culture of continuous quality improvement through regular monitoring, evaluation, and feedback mechanisms. Conduct regular audits, satisfaction surveys, and resident/family meetings to identify areas of improvement and address any systemic issues.</p>

Question 5

This question has three (3) parts you must complete all the parts.

Assessor note: Benchmark answers provided below. Students' answers must align as per sample answers provided below however wording may vary

<p>a. Briefly describe the delegation and supervision requirements for health professionals including nurses in aged care in Australia? (Approximate word count 95-100 words) The delegation and supervision requirements for health professionals, including nurses, in Australia aim to ensure safe and effective healthcare delivery. These requirements involve determining the scope of practice, assessing the competency of individuals involved, and establishing clear communication channels to support effective</p>

delegation and supervision. The Australian Government Department of Health provides guidelines and requirements for delegation and supervision in aged care. These requirements include ensuring that tasks are delegated to appropriately trained and competent staff members, maintaining clear communication channels, and providing adequate levels of supervision to ensure the safety and well-being of residents in aged care settings.

- b. Describe the role of the Nursing and Midwifery Board of Australia (NMBA) in setting delegation and supervision guidelines for Nurses?

(Approximate word count 55-65 words)

The Nursing and Midwifery Board of Australia (NMBA), which operates under the Australian Health Practitioner Regulation Agency (AHPRA), plays a significant role in developing and setting delegation and supervision guidelines for nurses in Australia. These guidelines provide a framework for nurses to understand their responsibilities and boundaries when delegating tasks to other healthcare professionals and when undertaking delegated tasks themselves.

- c. Briefly list five(5) support practices that align with delegation and supervision requirements for health professionals, including nurses, in Australia?

(Approximate word count 100-110 words)

Support practices that align with delegation and supervision requirements for health professionals in Australia include:

- a. Providing thorough training programs on delegation and supervision for both delegating health professionals and delegates.
- b. Establishing clear communication channels to ensure effective and open communication between the delegating health professional and the delegatee.
- c. Assessing the competency and skills of the delegatee before delegating tasks to ensure they are capable of performing the assigned duties safely and effectively.
- d. Offering ongoing training and education to enhance the knowledge and skills of health professionals involved in delegation and supervision.
- e. Creating a supportive work environment that encourages teamwork, mutual respect, and collaboration between health professionals involved in the delegation process.
- f. Implementing a system for monitoring and evaluating delegated tasks to ensure they are performed appropriately and to identify areas for improvement.

Question 6:

There are two parts to this question you must complete both parts.

Assessor note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

- a) Briefly explain the role of safeguarding bodies in the Australian aged care system?

(Approximate word count:55-65 words)

Safeguarding bodies in the Australian aged care system play a crucial role in protecting and promoting the rights and well-being of older individuals. These bodies are responsible for overseeing compliance with legal and human rights frameworks within aged care settings. They provide independent oversight, investigation, and advocacy to ensure the safety, quality, and dignity of care for older Australians.

b) In context of legal and human rights framework. Briefly explain the role and responsibilities of the following safeguarding organisations in Australia?

Assessor note: Students answers must be based on sample answer provided below however the wording may vary.

(Approximate word count:150-200 words)

Australian Human Rights Commission (AHRC)	The AHRC is an independent government agency responsible for promoting and protecting human rights in Australia, including the rights of older people in aged care. Its responsibilities in the context of the legal and human rights framework includes Investigating and addressing complaints related to human rights violations in aged care settings, Advocating for the rights of older people, including their right to dignity, privacy, and freedom from abuse and discrimination and Conducting research and providing guidance on human rights issues in aged care.
Aged Care Quality and Safety Commission (ACQSC):	The ACQSC is the primary regulatory body for aged care services in Australia. It is responsible for monitoring, assessing, and regulating the quality and safety of aged care services. The commission conducts audits, investigates complaints, and takes necessary enforcement actions to ensure aged care providers meet the required standards and comply with legal and human rights frameworks.
Department of Health (DoH):	The Department of Health is a government agency responsible for health and aged care policies and funding in Australia. Within the aged care system, the DoH develops and implements policies related to aged care services. It oversees the allocation of funds to support aged care providers and ensures that the aged care system adheres to the legal and human rights frameworks.

Question 7

This question has three(3) parts you must complete all the parts.

Assessor note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

a. Briefly explain the role of national legislation in Australia in aged care?

(Approximate word count:55-65 words)

The role of national legislation in Australia in aged care is to establish a legal framework that governs the provision of aged care services across the country. This legislation sets out the rights and responsibilities of both aged care

providers and recipients, as well as the standards that must be met to ensure quality and safety in aged care services.

b. What is the role and responsibility of State/Territory legislation in aged care in Australia?

(Approximate word count:40-50 words)

State/Territory legislation in aged care complements national legislation and provides additional regulations and oversight specific to each state or territory. It may address issues such as licensing of aged care facilities, local compliance requirements, and specific provisions for aged care services within the jurisdiction.

c. How do State/Territory legislation and national legislation work together to contribute to upholding legal and human rights in aged care?

(Approximate word count:55-65 words)

Both national and State/Territory legislation contribute to upholding human rights in aged care by establishing legal frameworks that prioritize the rights, dignity, and well-being of elderly individuals. These legislations ensure that aged care services are provided in a manner that respects individual autonomy, non-discrimination, and the right to live free from abuse or neglect.

Question 8

This question has three(3) parts you must complete all the parts of the question.

Assessors note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

a) Briefly explain the role of the Office of the Health Ombudsman in Australia?

(Approximate word count 30-40 words)

The Office of the Health Ombudsman is responsible for handling complaints and concerns related to healthcare service providers. It investigates complaints, facilitates resolution, and promotes transparency and accountability in the healthcare system.

b) Explain how does the Office of the Health Ombudsman contribute to upholding the legal framework in healthcare?

(Approximate word count 35-45 words)

The Office of the Health Ombudsman ensures that healthcare service providers comply with legal requirements, regulations, and standards. It investigates complaints regarding breaches of legal obligations, including issues related to patient care, privacy, informed consent, and professional misconduct

c) Explain the role of the Office of the Health Ombudsman in protecting human rights in healthcare?

(Approximate word count 35-45 words)

The Office of the Health Ombudsman safeguards human rights in healthcare by addressing complaints related to discrimination, violation of patient rights, and breaches of confidentiality. It advocates for fair treatment, respect for autonomy, and equitable access to healthcare services.

Question 9

This question has two(2) parts you must complete both parts.

Assessor note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

- a) Briefly explain the purpose of mandatory reporting within the legal and human rights framework? What legislation governs the mandatory reporting obligations in the aged care sector in Australia?

(Approximate word count 100-115 words)

The purpose of mandatory reporting is to ensure the protection of individuals' rights and well-being. By making it a legal obligation to report certain incidents, it helps to identify and address instances of abuse, harm, or neglect, thereby safeguarding the rights and safety of vulnerable individuals. In Australia, aged care workers have a legal obligation to report suspected or observed cases of abuse, neglect, or exploitation of older adults. This requirement is mandated under various state and territory legislation, such as the Aged Care Act 1997 (Commonwealth), state/territory legislation on mandatory reporting of abuse or neglect, and specific reporting obligations outlined in the Charter of Aged Care Rights.

- b) Explain the significance of maintaining privacy and confidentiality of information in aged care, in accordance with the legal and human rights framework? What legislation governs the privacy and confidentiality of information in the aged care sector in Australia?

(Approximate word count 100-115 words)

Maintaining privacy and confidentiality of information in aged care is essential to uphold the rights and dignity of residents. It ensures that sensitive personal information is protected from unauthorized access and disclosure, respecting individuals' autonomy and right to privacy. The legislation that governs the privacy and confidentiality of information in the aged care sector in Australia is the Privacy Act 1988 (Commonwealth) and the Australian Privacy Principles (APPs). These laws provide guidelines and regulations for how personal information should be collected, used, stored, and disclosed, ensuring that aged care providers handle residents' information with utmost care and compliance with legal standards.

Question 10

Briefly explain the concept of informed and uninformed consent, and why is it important within the legal and ethical frameworks in Australia?

Assessor note: Students must answer the question correctly and in line with the benchmark sample answers provided below however there wording may vary.

(Approximate word count 225-235 words)

Informed consent refers to the process of obtaining permission from an individual after providing them with comprehensive and understandable information about a medical procedure, treatment, or any other intervention. Informed consent ensures that the person fully understands the nature, risks, benefits, and alternatives of the proposed action before making a voluntary and informed decision to proceed or refuse. On the other hand, uninformed consent occurs when an individual provides consent without fully understanding the relevant information or being aware of the potential risks and consequences of their decision. Uninformed consent can occur due to various reasons, such as inadequate disclosure of information

by healthcare providers, lack of comprehension on the part of the individual, or even coercion or pressure to agree to a particular course of action.

The concept of informed and uninformed consent is crucial within the legal and ethical frameworks in Australia as it respects an individual's autonomy, promotes their right to make decisions about their own healthcare, and ensures transparency and accountability in the provision of care. Uninformed consent may be applicable in emergency situations when an individual is unable to provide informed consent due to their medical condition or incapacitation. In such cases, healthcare professionals must make decisions in the best interest of the person, considering their preferences, prior expressed wishes (if any), and consulting with family members or substitute decision-makers when necessary.

Question 11

This question has three(3) parts you must complete all the parts.

Assessor note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

- a) Briefly explain the role of industry standards in the aged care sector?

(Approximate word count 55-65 words)

Industry standards in the aged care sector set out the expected level of quality and safety for services provided to older adults. These standards are developed based on best practices, evidence-based approaches, and input from industry experts. They serve as a benchmark for organizations and professionals, guiding them in delivering high-quality care that meets the needs and expectations of elderly individuals.

- b) Explain the significance of legal and human rights frameworks in the context of industry standards for aged care services in Australia?

(Approximate word count 60-70 words)

Legal and human rights frameworks are essential in the context of industry standards for aged care services in Australia as they provide the necessary guidelines and regulations to ensure the protection and well-being of elderly individuals. These frameworks set the minimum requirements for quality, safety, and ethical practices in the aged care sector, promoting a culture of respect, dignity, and person-centered care.

- c) How does the Aged Care Quality and Safety Commission, as a relevant industry standards body in Australia, contribute to the regulation of aged care services and standards?

(Approximate word count 55-65 words)

The industry standards body relevant to aged care services in Australia, such as the Aged Care Quality and Safety Commission, is responsible for setting, monitoring, and enforcing industry standards. It ensures that aged care providers adhere to the required quality and safety standards, promoting continuous improvement and safeguarding the rights and well-being of older individuals in aged care.

Question 12

This question has two parts you must complete both the parts.

a) Older adults face various challenges related to attitudes and stereotypes towards aging. In the table below briefly provide definition of the terms, one example of attitude and stereotype for each of the terms.

Assessor note: Students answers must be in line with the sample answers provided below however the wording may vary. Students examples of attitude and stereotype may vary the answer will be correct as long as student demonstrate understanding of the distinctions between attitudes and stereotypes.

(Approximate word limit 120-130 words)

Term	Definition	Attitude	Stereotype
Paternalism	A condescending or overprotective attitude towards older adults, assuming they cannot make decisions for themselves or their choices are not in their best interest	Attitude: Deciding what is best for older adults without consulting them.	Stereotype: Older adults are frail and incapable of taking care of themselves
Ageism	Discrimination or prejudice based on a person's age, particularly negative attitudes towards older adults.	Attitude: Believing that older adults are less capable or less valuable than younger individuals.	Stereotype: Older adults are technologically inept and resistant to change.
Stigma	Negative attitudes or beliefs that lead to the social exclusion of individuals or a group.	Attitude: Avoiding interaction with older adults due to societal stigma.	Stereotype: Older adults are a burden on society and should retire to free up jobs for younger generations.
Common Misconceptions	Widely held beliefs that are not accurate or based on factual information.	Attitude: Assuming that all older adults have memory problems.	Stereotype: Older adults are all forgetful and unable to learn new skills.

b) Briefly explain common attitudes and stereotypes that contribute to the dangers of making value judgments about the perceived quality of life for older people?

(Approximate word count 55-65 words)

Attitudes and stereotypes related to the dangers of value judgments for older people often stem from ageism and assumptions about what constitutes a good quality of life for them. This can lead to misconceptions and negative judgments about older individuals' abilities and well-being based on preconceived notions rather than their actual preferences and needs.

Question 13

In the table below are some key concepts and philosophies related to aged care. Complete all question in the two tables below explaining these key concepts and philosophies.

Assessor note: Benchmark answers provided below. Students' wording may vary from the sample answers provided below.

Key Philosophies

(Approximate word count 210-220 words)

Question	Answer
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a) What is the philosophy underlying a person-centred approach?	A philosophy that prioritizes the individual's preferences, needs, and values, placing them at the center of decision-making and care planning. It emphasizes the importance of respecting the person's autonomy and promoting their well-being based on their unique characteristics and desires.
b) How does a person-centred approach benefit older people?	A person-centred approach improves the overall well-being of older people by fostering dignity, respect, and personalized care. It enhances their sense of control and leads to more positive experiences in aged care settings.
c) What is the philosophy behind the empowerment of the person receiving care and what does it mean?	This philosophy focuses on empowering the person receiving care by involving them in decisions, providing choices, and enabling them to actively participate in their care planning and daily activities. It seeks to enhance their sense of control and dignity.
d) How can empowerment benefit older people in aged care?	Empowerment enhances older people's sense of control and self-worth, leading to increased confidence and engagement in their care and daily activities. It fosters a positive care experience and promotes better mental and emotional health.
e) What is the philosophy of Social Role Valorisation (SRV) in the context of aged care?	A philosophical approach that aims to uphold the social value and worth of individuals, especially those who are vulnerable or marginalized. It seeks to promote positive roles and social inclusion, challenging stigmatization and devaluation of certain groups.
f) How can Social Role Valorisation improve the lives of older people?	By valuing and supporting older people in meaningful social roles, SRV helps combat ageism and social isolation. It enhances older individuals' sense of belonging and fosters a positive perception of aging in society.

Key Concepts

(Approximate word count 210-220 words)

Question	Answer
g) What is the concept of contemporary view of aged care?	The contemporary view of aged care promotes active and healthy aging, emphasizing the importance of independence, social engagement, and maintaining a good quality of life as individuals age.
h) How does the contemporary view differ from traditional views of aged care?	Unlike traditional views that often focus solely on medical needs, the contemporary view prioritizes holistic care, including emotional, social, and mental well-being, while encouraging active participation in decision-making.
i) What is the difference between the concept of care and support in aged care?	Care in aged care refers to assistance with medical, physical, and personal needs, such as medical treatments and personal hygiene. Support, on the other hand, includes emotional, social, and practical assistance, empowering older individuals to maintain their independence and well-being.

j) How do care and support complement each other in aged care?	Providing both care and support in aged care ensures that the holistic needs of older individuals are met. While care addresses medical and physical aspects, support addresses emotional and social needs, promoting a better overall quality of life.
k) What is the concept of the risks associated with segregating older people in care settings?	This concept recognizes the potential negative consequences of isolating or grouping older individuals in specific living or care environments. Segregation and congregation can lead to social exclusion, reduced autonomy, and limited access to resources and community engagement.
l) How does congregating older people in specific care facilities pose risks?	Congregating older people in large institutions can create an institutionalized environment, where individual needs and preferences may be overlooked. It can lead to feelings of loneliness, powerlessness, and diminished quality of life. It may also contribute to ageism and reinforce negative stereotypes about older adults

Question 14

In the table below are listed the job roles in aged care. You are required to provide a brief description of the role and the scope of these job roles in aged care industry context?

(Approximate word count 330-340 words total)

Assessor note: Students answers must be based on sample answers provided below however wording may vary.

Job Roles in the Aged Care Sector	Provide brief description of the role	Explain the scope of the role within the aged care sector
Registered Nurse in aged care	Registered Nurses in aged care are responsible for providing medical care, managing medications, conducting assessments, and coordinating care.	Registered Nurses can conduct medical assessments, administer medications, develop care plans, implement treatments, and provide wound care and other medical interventions.
Personal Care Assistant (PCA)	PCAs assist older individuals with daily activities, such as personal hygiene, dressing, eating, and mobility support. They also offer emotional support.	PCAs can assist with activities of daily living, provide emotional support, monitor health status, and report any changes to higher-level healthcare professionals.

<p>Aged Care Support Worker</p>	<p>Aged Care Support Workers provide direct support and personalized care and support to older adults, helping with household tasks, social engagement, and emotional well-being. They can also be recreational workers involved in organizing activities.</p>	<p>Aged Care Support Workers can assist with personal care, support social activities, provide companionship, and facilitate access to community services.</p>
<p>Case Manager</p>	<p>The role of a case manager in aged care is crucial in ensuring that elderly individuals receive comprehensive and coordinated care and support tailored to their specific needs and preferences. Case managers play a central role in managing the care journey of aged care recipients, promoting their well-being, and advocating for their rights and choices.</p>	<p>The scope of the case manager's role is expansive and may vary depending on the specific setting, organization, and individual needs of the aged care recipients. Ultimately, the case manager's primary goal is to enhance the well-being and quality of life of elderly individuals through person-centered, coordinated, and compassionate care.</p>
<p>Allied Health Professionals</p>	<p>The role of Allied Health Professionals in aged care is to provide specialized healthcare services that focus on improving the physical, cognitive, emotional, and functional well-being of older adults. These professionals play a crucial role in enhancing the quality of life and independence of older individuals in aged care settings. Some common Allied Health Professionals in aged care include physiotherapists, occupational therapists, speech-language</p>	<p>Their scope of practice is centered around providing specialized rehabilitation and therapeutic services to support older individuals in maintaining their physical, cognitive, and emotional health.</p>

	pathologists, psychologists/counselors, and dietitians/nutritionists.	
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Question 15

This question has four(4) parts you must complete all parts of the question.

Assessor note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

- a) Briefly explain what do reporting lines refer to in the context of aged care Industry.

(Approximate word count 35-45 words)

Reporting lines in aged care refer to the hierarchical structure that outlines how information, tasks, and responsibilities flow within an organization. It defines who reports to whom and establishes clear lines of communication for effective coordination and decision-making.

- b) What is the role of delegation in providing quality care in aged care facilities?

(Approximate word count 35-45 words)

Delegation is crucial in providing quality care as it allows tasks to be distributed effectively among staff members, optimizing the use of resources and expertise. Delegating tasks ensures that each resident's needs are met promptly, improving overall care delivery.

- c) How is working under supervision implemented in aged care settings?

(Approximate word count 45-55 words)

Working under supervision in aged care means that certain tasks or responsibilities are carried out by staff members under the guidance and oversight of more experienced or qualified individuals. This is especially important for junior or less experienced staff to ensure safe and competent care provision.

- d) Briefly explain the role of interdisciplinary teams in aged care industry.

(Approximate word count 55-65 words)

The role of interdisciplinary teams in aged care industries is to provide comprehensive and holistic care to elderly individuals by bringing together professionals from different fields to collaborate and address the various physical, emotional, social, and psychological needs of older adults. This team-based approach ensures that the complex and diverse needs of aged individuals are met effectively.

Question 16

This question covers the key organisations within the sector, funding and accreditation systems, and the importance of cultural diversity and cultural competency in the aged care industry. Provide answers to all questions listed in the table below.

Assessors note: Students answers must be as per the sample answer provided below however the wording may vary.

Question	Answer
<p>a. List five(5) key organisations within the aged care sector in Australia. (Approximate word count 40-50 words)</p>	<p>Assessor note: student must list five(5) out of nine (9) organisations below.</p> <ol style="list-style-type: none"> 1. Aged Care Quality and Safety Commission (ACQSC) 2. Department of Health (DoH) 3. Aged care financing Authority (ACFA) 4. Aged and Community Services Australia (ACSA) 5. Leading Age Services Australia (LASA) 6. Aged Care Guild 7. Aged Care Industry Information Technology Council (ACIITC) 8. Council on the Ageing (COTA) Australia 9. Dementia Australia
<p>b. Briefly explain how the aged care sector is funded in Australia? (Approximate word count 40-50 words)</p>	<p>The aged care sector in Australia is funded through a combination of government subsidies, user fees, and contributions from individuals. Funding sources include the Australian Government's Aged Care Funding Instrument (ACFI) for residential care and the Home Care Packages Program for community-based care.</p>
<p>c. Briefly explain the accreditation systems and its purpose in relation to aged care industry in Australia? (Approximate word count 100-120 words)</p>	<p>The accreditation system in the aged care industry in Australia is a regulatory process designed to ensure that aged care facilities and service providers meet specified quality standards. Its purpose is to promote and monitor the delivery of high-quality and safe care to older Australians. Through the accreditation system, the Aged Care Quality and Safety Commission assesses facilities and providers to ensure they comply with the Aged Care Quality Standards, fostering continuous improvement and accountability in the provision of aged care services. This system plays a crucial role in safeguarding the well-being and rights of older individuals and maintaining a high standard of care across the aged care sector.</p>
<p>d. Explain why cultural diversity is important in the aged care sector? (Approximate word count 25-35 words)</p>	<p>Cultural diversity recognizes and respects the unique backgrounds, values, and beliefs of individuals from different cultures. In aged care, it is crucial to provide culturally appropriate care, honoring diversity and promoting inclusivity.</p>
<p>e. Explain cultural competency requirement for aged care professionals? (Approximate word count 40-50 words)</p>	<p>The cultural competency requirement for aged care professionals refers to the knowledge, skills, and attitudes they need to effectively work with individuals from diverse cultural backgrounds. It involves understanding different cultural norms, communication styles, and beliefs to deliver culturally sensitive care.</p>
<p>f. Briefly explain how can aged care professionals demonstrate respect for cultural differences.</p>	<p>Aged care professionals can demonstrate respect for cultural differences by actively listening to residents or</p>

(Approximate word count 25-35 words)	clients, valuing their beliefs and traditions, avoiding assumptions, and incorporating cultural preferences into care plan
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Question 17

To answer this question you are required to refer to this report released by Royal Commission into Aged Care Quality and Safety 2021, [Aged Care Royal Commission Final Report: Summary](#) and briefly explain five(5) key issues facing aged care and community support in aged care in Australia.

(Approximate word count 235-255 words)

Assessor Note: The students must access and write the key issues as per the document provided. Students answers must be in line with the benchmark answers provided below however the wording may vary. Students must provide five (5) out of six (6) issues listed below.

1. Quality and Safety of Care: The Royal Commission report highlighted significant concerns about the quality and safety of care provided in the aged care sector. Issues such as substandard care, neglect, abuse, and a lack of adequate regulatory oversight were identified as major challenges.
2. Funding and Financing: The report raised concerns about the funding and financing of aged care services in Australia. It highlighted the need for increased investment in the sector to address the growing demand for services and ensure the provision of high-quality care.
3. Workforce Issues: The report identified workforce challenges as a significant issue, including shortages of skilled staff, low wages, and inadequate training and professional development opportunities. The need for a skilled, compassionate, and well-supported workforce was emphasized.
4. Person-Centered Care and Dignity: The report highlighted the importance of providing person-centered care and respecting the dignity of older adults. It emphasized the need to shift from a task-based approach to a holistic model of care that promotes choice, autonomy, and meaningful engagement for older Australians.
5. Governance and Accountability: The report identified governance and accountability as areas needing improvement. It emphasized the need for stronger regulatory oversight, transparent reporting mechanisms, and robust governance structures to ensure accountability and prevent failures in care.
6. Access and Equity: The report highlighted inequities in accessing aged care services, particularly for rural and remote communities, culturally and linguistically diverse populations, and Indigenous Australians. It called for improved access, cultural competency, and tailored support for diverse populations.

Question 18

This question has six(6) parts. You must complete all the parts.

Assessor note: Students answers must be as per the sample answer provided below however the wording may vary.

<p>a) Define psychosocial disability in the context of ageing? (Approximate word count 35-45 words)</p> <p>Psychosocial disability refers to a condition or impairment that affects a person's mental health and social functioning. In aged care, it refers to the impact of mental health conditions on the overall well-being and daily functioning of older individuals.</p>
<p>b) Explain the impact of psychosocial disability on an elderly person's life? (Approximate word count 45-55 words)</p>

Psychosocial disability can significantly impact the life of an elderly person. It can affect their social interactions, relationships, daily activities, and overall quality of life. It may lead to feelings of loneliness, isolation, decreased self-esteem, difficulties in managing daily tasks, and challenges in participating in social and community activities.

- c) Briefly explain the differences between psychosocial disability and mental health.
(Approximate word count 65-75 words)

Psychosocial disability specifically refers to the functional limitations and impairments in social and daily functioning caused by mental health conditions in the elderly. It focuses on the impact of mental health on an individual's ability to engage in daily life activities. Mental health, on the other hand, encompasses a broader concept of psychological well-being and encompasses both positive mental health and the presence or absence of mental illness.

- d) Describe the episodic nature of psychosocial disabilities in the elderly?
(Approximate word count 55-65 words)

The episodic nature of psychosocial disabilities refers to the fluctuating periods of stability and instability that individuals may experience in their mental health condition. In the context of the elderly, this means that there may be times when their psychosocial disability is more pronounced or active, and other times when they may experience periods of relative stability or improvement.

- e) List five(5) additional or alternate supports that may be required during different periods of episodic psychosocial disabilities in the elderly?
(Approximate word count 215-225 words)

1. Increased monitoring and support: During periods of instability, the elderly person may require more frequent check-ins, monitoring of their mental health status, and closer supervision to ensure their safety and well-being.
2. Adjustments to treatment plans: Treatment plans may need to be modified or adjusted during different periods. This could involve changes in medication dosage, therapy frequency, or the introduction of new therapeutic approaches to manage the episodic nature of their psychosocial disability.
3. Enhanced community support: During challenging periods, it may be beneficial for the elderly person to have access to additional community supports, such as increased participation in support groups, counseling sessions, or peer support networks to help them cope with their condition.
4. Flexibility in caregiving arrangements: Caregiving arrangements may need to be more flexible during periods of episodic disabilities. This could involve increased support from family members, respite care services to provide temporary relief to primary caregivers, or the involvement of home healthcare professionals who specialize in mental health care for the elderly.
5. Collaborative care coordination: During different periods of episodic disabilities, it becomes crucial to ensure effective coordination among healthcare providers, mental health professionals, and support services. This collaborative approach helps to address the changing needs of the elderly person and ensures a comprehensive and holistic support system.

- f) list five(5) ways in which psychosocial disability interact with other disabilities?
(Approximate word count 185-195 words)

1. Impact on physical health: Psychosocial disability can contribute to or exacerbate physical health conditions. For instance, chronic stress and anxiety may worsen symptoms of cardiovascular diseases or autoimmune disorders.

2. **Co-occurrence of mental and physical disabilities:** Individuals with pre-existing physical disabilities may be more susceptible to developing psychosocial disabilities due to the emotional and psychological impact of their physical condition. For example, someone with a spinal cord injury may experience depression or anxiety as a result of their disability.
3. **Cognitive impairment and mental health:** Psychosocial disabilities can intersect with cognitive impairments such as dementia or intellectual disabilities. In such cases, individuals may experience challenges in communication, decision-making, and emotional regulation.
4. **Social interaction and developmental disabilities:** Psychosocial disabilities can influence social interaction in individuals with developmental disabilities, such as autism spectrum disorder. Difficulties in social communication and emotional regulation may further complicate their overall well-being.
5. **Sensory disabilities and mental health:** Individuals with sensory disabilities, such as visual or hearing impairments, may be more susceptible to psychosocial disabilities due to the challenges they face in accessing information, communication barriers, and social isolation.
6. **Substance abuse and mental health:** Substance abuse disorders often coexist with psychosocial disabilities. Substance abuse can either contribute to the development of mental health conditions or be used as a coping mechanism to alleviate distress caused by psychosocial disabilities.
7. **Dual diagnosis:** Dual diagnosis refers to the presence of both a psychosocial disability and a substance abuse disorder. These conditions can interact and complicate treatment and recovery processes, requiring integrated and specialized interventions.

Question 19

This question has two(2) parts you must complete all the parts.

Assessor note: Students must answer all the questions correctly and in line with the benchmark sample answers provided below however there wording may vary.

- a) What is the purpose of an individualized plan in the context of aged care?
(Word count approximate 55-65 words)

The purpose of an individualized plan in the context of aged care is to provide personalized support and care to older individuals based on their unique needs, preferences, and goals. It aims to enhance their quality of life, promote independence, and address any physical, emotional, or cognitive challenges they may be facing.

- b) List eight (8) key contents commonly found in an individualized plan in the context of aged care.
(Approximate word count 280-290 words)

Assessor note: Student must provide eight (8) out of nine(9) options given below in the sample answers however the wording may vary.

1. **Personal Information:** This section includes relevant personal details of the elderly individual, such as their name, age, contact information, medical history, and any specific cultural or religious considerations.
2. **Health Assessment:** An assessment of the individual's current health status, including any chronic conditions, disabilities, or medical needs. This helps in determining appropriate healthcare interventions and support services.

3. **Care Goals:** Clearly defined goals that the elderly individual aims to achieve with the help of the care plan. These goals may focus on maintaining or improving physical health, managing pain, enhancing mental well-being, promoting social engagement, or any other areas relevant to their overall well-being.
4. **Care Needs:** Identification of the specific care needs of the individual, including assistance with activities of daily living (ADLs) such as bathing, dressing, eating, mobility, medication management, and any specialized care requirements.
5. **Care Services and Interventions:** Details of the services and interventions that will be provided to address the individual's care needs. This may include in-home care, nursing services, physical therapy, occupational therapy, social activities, or any other relevant support services.
6. **Medication Management:** Information about the medications the individual is taking, including dosage, frequency, and any special instructions. This section may also include details about medication administration, monitoring, and potential interactions.
7. **Personal Preferences:** Consideration of the individual's personal preferences, choices, and routines to ensure that the care plan aligns with their lifestyle and values. This may include food preferences, cultural or religious practices, preferred activities, and social interactions.
8. **Communication and Coordination:** Details about the communication and coordination processes among the care team members, including family members, healthcare professionals, caregivers, and any other involved parties. Clear lines of communication are crucial for effective implementation and monitoring of the care plan.
9. **Safety and Emergency Measures:** Protocols and guidelines for ensuring the safety of the elderly individual, including fall prevention strategies, emergency contact information, and instructions for handling medical emergencies or adverse events.

Question 20

In the table below are current terminology used in aged care in Australia. Your task is to provide a brief meaning of each of the terms listed in the table.

Assessor note: Students answers must be as per the sample answers provided below however the wording may vary.

Question	Answer
What does Commonwealth Home Support Programme (CHSP) mean? (Approximate word count 30-40 words)	The Commonwealth Home Support Programme (CHSP) is a government-funded program that provides entry-level support services to help elderly individuals remain independent and living in their homes for as long as possible
What are Home Care Packages? (Approximate word count 55-65 words)	Home Care Packages are government-funded packages that provide a range of care and support services to older adults who wish to continue living in their homes. These packages are tailored to individual needs and may include services such as personal care, nursing, domestic assistance, and social support.

Define Residential Aged Care. (Approximate word count 40-50 words)	Residential Aged Care refers to long-term care provided to older adults who require higher levels of support and cannot live independently in their own homes. It includes accommodation, personal care, meals, and 24-hour nursing and support services in a residential facility.
What does Transition Care mean? (Approximate word count 35-45 words)	Transition Care refers to short-term care and support services provided to older adults after a hospital stay to help them recover and regain independence. It assists individuals in transitioning from hospital to home or an aged care facility.
What is Respite Care? (Approximate word count 30-40 words)	Respite Care offers temporary and short-term care services to support carers who need a break from their caregiving responsibilities. It provides temporary relief while ensuring the well-being of the care recipient.
Define Palliative Care. (Approximate word count 30-40 words)	Palliative Care is specialized care provided to older adults with life-limiting illnesses to manage symptoms, improve quality of life, and provide emotional and spiritual support for both the individual and their family.
Define Advance Care Planning. (Approximate word count 30-40 words)	Advance Care Planning involves discussions and decisions made by older adults about their future care preferences and treatment choices, ensuring that their values and wishes are respected in the event they cannot make decisions themselves.
What is meant by Ageing in Place? (Approximate word count 30-40 words)	Ageing in Place refers to the concept of older adults continuing to live in their own homes and communities for as long as possible, with the support of appropriate care and services to meet their changing needs.

Question 21

This question has five(5) short scenario based on risk assessment framework. You are required to read the scenario and answer the questions providing step by step application of risk assessment frameworks in correct order for each of the scenarios.

You must complete all the questions.

Assessor note: Students must provide step by step application of risk assessment framework in the correct order as applicable to each of the scenario as per the sample answer provided below however the wording may vary.

<p>a) Scenario 1- Jane, a personal care worker, is assisting Mr. Smith, an elderly resident with limited mobility. On one of the occasions Jane notices that there is a loose rug on the floor of Mr Smiths room. Provide four(4) steps Jane will need to follow as per the risk assessment framework to mitigate the risk. (Approximate word count 160-170 words)</p> <p>1. Identify the Hazard: The hazard in this scenario is the loose rug on the floor in Mr. Smith's room.</p>

2. Assess the Risk:

Likelihood: The likelihood of a trip or fall is high as Mr. Smith has limited mobility and may have difficulty avoiding the loose rug.

Severity: The severity of the risk is moderate to high, as a fall could lead to injuries and negatively impact Mr. Smith's well-being.

3. Implement Control Measures (provide three controls):

- Remove the loose rug from the floor to eliminate the risk of tripping.
- If removing the rug is not possible, secure it with anti-slip materials or tape to prevent it from moving.
- Inform the relevant staff members or management about the hazard and the actions taken to address it.

4. Monitor and Review:

Regularly check the room for any new hazards or potential risks.

Observe Mr. Smith during care routines to ensure his safety and well-being.

Encourage open communication with Mr. Smith and other residents to report any safety concerns promptly.

- b) Scenario: Mark, a care worker, arrives at Mrs. Johnson's home to provide care services. He notices that the hallway is dimly lit, and Mrs. Johnson uses a walker. Provide four(4) steps Mark will need to follow as per the risk assessment framework to mitigate the risk.

(Approximate word count 210-220 words)

1. Identification of Hazards:

- Dimly Lit Hallway: The dim lighting in the hallway poses a risk of tripping or falling, especially for Mrs. Johnson, who uses a walker for mobility.

2. Risk Evaluation:

- Likelihood: The risk of tripping or falling is moderate, as the dim lighting may hinder Mrs. Johnson's visibility while using her walker.
- Severity: The potential severity of a fall for Mrs. Johnson, considering her age and use of a walker, is high, as it may lead to injuries.

3. Implementing Control Measures (provide three controls):

- Improve Lighting: Mark should address the dimly lit hallway by suggesting Mrs. Johnson install brighter lights or use additional lighting fixtures to improve visibility and reduce the risk of accidents.
- Remove Hazards: Mark should also ensure that there are no obstacles or clutter in the hallway that could further hinder Mrs. Johnson's movement.
- Provide Nightlights: Mark can recommend using nightlights along the hallway to assist Mrs. Johnson during nighttime movements.

4. Monitoring and Review:

- Mark should regularly check the lighting in the hallway during his visits to Mrs. Johnson's home and assess if the control measures are effective in reducing the risk of falls.
- If necessary, Mark should discuss any concerns about the hallway's safety with Mrs. Johnson's family or caregivers to ensure ongoing safety and implement additional measures if required

- c) Scenario: Mary is a carer responsible for assisting Mr. Johnson, an elderly resident in a residential aged care facility, to engage outside of his regular setting. Mr. Johnson enjoys spending time outdoors and has expressed a desire to visit the local botanical gardens to enjoy the natural surroundings and fresh air. Provide the four(4) steps Mary will need to follow as per the risk assessment framework to mitigate the risk.

(Approximate word count 235-245 words)

1. **Identification of Hazards:** Mary identifies potential hazards associated with the outing, such as uneven pathways, slippery surfaces, extreme weather conditions, and potential allergens in the gardens.
2. **Risk Evaluation:** Mary assesses the likelihood and severity of the risks, considering Mr. Johnson's physical abilities, any mobility challenges, and the potential impact of the weather on his health and well-being.
3. **Implementing Control Measures(provide three controls):** To ensure Mr. Johnson's safety and enjoyment during the outing, Mary takes the following control measures:
 - Check the weather forecast to choose a suitable day for the visit, avoiding extreme temperatures or adverse weather conditions.
 - Use a wheelchair or walker, if necessary, to provide adequate support and reduce the risk of falls on uneven pathways.
 - Mary communicates with the aged care facility's staff and seeks consent from Mr. Johnson and his family before planning the outing. She informs other staff members about the outing plan and updates them on Mr. Johnson's well-being during the trip.
 - Bring along a first aid kit and Mr. Johnson's necessary medications in case of any medical emergencies.
 - Be mindful of any potential allergens in the gardens and ensure Mr. Johnson's allergies are considered when planning the outing.
4. **Monitoring and Review:** Throughout the outing, Mary keeps a close eye on Mr. Johnson's well-being and comfort. She periodically checks his hydration levels, makes sure he is not feeling fatigued, and provides necessary breaks if required. Mary also monitors the weather conditions and is prepared to modify the outing or return to the facility if weather conditions worsen.

d) Scenario: Maria, a recreational worker, is planning an activity with Mr. Brown, an elderly resident in an aged care facility. The activity involves gardening, as Mr. Brown has expressed an interest in gardening and has some prior experience in it. Maria wants to ensure that the activity is enjoyable and safe for Mr. Brown while taking his individual needs and preferences into consideration. Provide the four(4) steps Maria will need to follow as per the risk assessment framework to mitigate the risk.

(Approximate word count 185-195 words)

1. **Identification of Hazards:** Maria starts by identifying potential hazards associated with gardening. These may include exposure to extreme weather conditions, potential tripping hazards, and using gardening tools.
2. **Risk Evaluation:** Maria evaluates the likelihood and severity of risks for Mr. Brown. She takes into account Mr. Brown's physical abilities, mobility, and any health conditions that may impact his participation.
3. **Implementing Control Measures(provide three controls):** To ensure Mr. Brown's safety during the gardening activity, Maria implements several control measures:
 - She schedules the activity during favorable weather conditions to avoid exposure to extreme heat or cold.
 - Maria selects an accessible area in the garden with even surfaces to prevent tripping hazards.
 - She provides Mr. Brown with gardening tools that are lightweight and easy to handle.
 - Maria encourages Mr. Brown to take breaks as needed during the activity to avoid overexertion.
4. **Monitoring and Review:** Throughout the activity, Maria closely monitors Mr. Brown's well-being and enjoyment. She keeps a watchful eye on any signs of fatigue or discomfort and makes adjustments as necessary. After the activity, Maria seeks feedback from Mr. Brown to understand his experience and identify any areas for improvement.

e) Scenario: John is a support worker responsible for providing care and assistance to residents in a residential aged care facility. One of his key responsibilities is to support residents with their medication administration. Today, John is assigned to assist Mrs. Brown, an 80-year-old resident who takes multiple medications for various health conditions. Provide the four(4) steps John will need to follow as per the risk assessment framework to mitigate the risk.

(Approximate word count 280-290 words)

1. **Identification of Hazards:** John identifies potential hazards related to medication safety, including:
 Incorrect medication administration due to similar-looking medication packages.
 Incorrect dosage if medications are not properly labeled or organized.
 Adverse drug interactions if there is a lack of coordination between different healthcare providers.
2. **Risk Evaluation:** John evaluates the likelihood and severity of potential risks associated with Mrs. Brown's medication management. He considers her medical history, the complexity of her medication regimen, and her cognitive ability to adhere to the prescribed medication schedule.
3. **Implementing Control Measures(provide three controls):** To ensure medication safety, John implements the following control measures:
 - He double-checks each medication against Mrs. Brown's prescription, ensuring accuracy and verifying the correct dosage.
 - John organizes Mrs. Brown's medications using a medication organizer with labeled compartments for each day and time of administration to prevent confusion.
 - He maintains clear communication with Mrs. Brown's healthcare providers to coordinate her medications and avoid potential drug interactions.
 - John communicates with Mrs. Brown, her family, and the facility's healthcare team to ensure that everyone is aware of her medication schedule, potential risks, and control measures in place. He encourages open dialogue and addresses any concerns or questions raised by Mrs. Brown or her family.

John is prepared for emergencies related to medication, such as an adverse reaction or accidental overdose. He knows the location of emergency medical supplies and contacts, including the facility's nurse or on-call medical professionals.
4. **Monitoring and Review:** John regularly monitors Mrs. Brown's response to the medications and observes any potential side effects or adverse reactions. He keeps detailed records of medication administration and any changes in Mrs. Brown's health to communicate with the healthcare team and update her care plan as needed.

Question 22

In the table below name three (3) types of restrictive practices and briefly describe the parameters of use for each of the restrictive practice?

Assessor note: Students must provide three(3) out of four(4) options as per the answers below however the wording may vary.

(Approximate word count 210-220 words)

Type Of Restrictive Practice	Parameters of use
Physical restraints: This can include the use of bedrails, chair alarms, or other devices to prevent a person with dementia from getting out of bed or chair.	Physical restraints should only be used as a last resort when less restrictive alternatives have been explored and documented in the resident's care plan. They should be used for the shortest duration possible and regularly reviewed for necessity.
Chemical restraints: This involves the use of medications, such as antipsychotics or sedatives, to control behavior or calm a person with dementia.	The use of chemical restraints should be based on informed consent or medical necessity. They should not be used for staff convenience or as a form of punishment. Regular reviews by healthcare professionals are essential to minimize their use.
Seclusion restraint: also known as involuntary seclusion or physical isolation, is a restrictive practice used in some healthcare settings, including aged care facilities,	Seclusion should only be used in exceptional circumstances when there is a risk of harm to the resident or others. Its use should be monitored and

to separate a person from others against their will. It involves confining an individual to a specific area or room, often alone, with restricted access to others and their surroundings	subject to a documented plan, with clear criteria for ceasing seclusion and assessing its effectiveness.
Environmental restraints: This can include the use of locked doors or gates to prevent a person with dementia from wandering	Environmental restraints should only be used for specific safety reasons, such as preventing wandering or protecting residents from harm. Their use should be justified, regularly reviewed, and documented in the resident's care plan.

Assessment checklist:

Students must have completed all short answer questions within this assessment before submitting. This includes:

1	22 short answer questions to be completed in the spaces provided.	<input type="checkbox"/>
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Congratulations you have reached the end of Assessment 1!

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