

1990 - No. 425

NURSING HOMES ACT 1988 - REGULATION

(Nursing Homes Regulation 1990)

NEW SOUTH WALES



[Published in Gazette No. 82 of 29 June 1990]

HIS Excellency the Governor, with the advice of the Executive Council, and in pursuance of the Nursing Homes Act 1988, has been pleased to make the Regulation set forth hereunder.

PETER COLLINS
Minister for Health.

PART 1 - PRELIMINARY

Citation

1. This Regulation may be cited as the Nursing Homes Regulation 1990.

Commencement

2. This Regulation commences on 1 September 1990.

Definitions

3. (1) In this Regulation:

"**admission form**" means an admission form referred to in clause 13;

"**approved**" means approved for the time being by the Director-General, either generally or in any particular case or class of cases;

"clinical records" means clinical records referred to in Part 5 of Schedule 1;

"nursing supervisor" means a person holding office or acting as a nursing supervisor in the Department of Health;

"resident's representative" means:

- (a) if the resident is under the age of 14 years - a parent having the legal custody of the resident; or
- (b) if the resident is under guardianship - the resident's guardian; or
- (c) if the resident has died - the executor or administrator of the resident's estate;

"the Act" means the Nursing Homes Act 1988.

(2) In this Regulation, a reference to a particular class of nursing home is a reference to a nursing home that is licensed as a nursing home of that class.

(3) In this Regulation, a reference to a form is a reference to a form set out in Schedule 2.

PART 2 - LICENSING OF NURSING HOMES

Licensing standards

4. (1) For the purposes of section 4 of the Act, the standards specified in Schedule 1 are prescribed.

(2) The licensee of a nursing home must not fail to conduct the nursing home in accordance with the provisions of Schedule 1 applicable to the nursing home.

Maximum penalty: 5 penalty units.

(3) The licensee of a nursing home is not guilty of an offence under this clause if the licensee:

- (a) was not aware of the circumstances giving rise to the alleged offence; and
- (b) could not reasonably be expected to have been aware of those circumstances.

(4) A contravention of a provision of Schedule 1 by any person other than the licensee of a nursing home does not constitute an offence under this Regulation.

Applications for Licences

5. For the purposes of section 5 of the Act:
- (a) the prescribed form of application is Form 1; and
 - (b) the prescribed application fee is \$450.

Classes of nursing homes

6. For the purposes of section 10 of the Act, the following classes of nursing homes are prescribed:
- (a) general;
 - (b) special.

Annual licence fees

7. For the purposes of section 14 of the Act, the prescribed annual licence fee for a nursing home licensed to accommodate a number of persons specified in Column 1 of the Table to this clause is the fee specified opposite that number in Column 2 of that Table.

TABLE

Column 1	Column 2
Number of persons licensed to be accommodated	Licence fee
Less than 40	\$840
40 - 49	\$1,170
50 - 59	\$1,510
60 - 69	\$1,840
70 - 79	\$2,190
80 - 89	\$2,520
90 - 99	\$2,850
100 or more	\$3,190

Transfer of licence

8. (1) For the purposes of section 15 of the Act:

- (a) the prescribed form of application is Form 2; and
- (b) the prescribed application fee is \$450.

(2) The licensee of a nursing home is not to admit a person to a nursing home as a resident on account of age, infirmity, chronic ill-health or the effects of illness unless the nursing home is a general class nursing home.

Maximum penalty: 5 penalty units.

(3) The licensee of a nursing home is not to admit a person to a nursing home as a resident on account of any special disability unrelated to age, infirmity, chronic ill-health or the effects of illness unless:

- (a) the nursing home is a special class nursing home; or
- (b) the admission has been approved.

Maximum penalty: 5 penalty units.

Alterations or extensions

9. For the purposes of section 16 of the Act, the prescribed form of application is Form 3.

Application for review of Director-General's decision

10. For the purposes of section 25 of the Act, the prescribed form of application is Form 4.

Chief nurse of nursing home

11. (1) For the purposes of section 37 (1) of the Act, the prescribed qualifications to be held by a registered nurse who carries out the duties of chief nurse of a nursing home are:

- (a) current registration in New South Wales as a nurse; and
- (b) 5 years' post-basic or post-graduate nursing experience; and
- (c) 2 years' full-time administrative experience in a position of, or more senior than that of, nursing unit manager in a hospital or nursing home,

or such other qualifications as may be approved.

(2) For the purposes of section 37(2) of the Act, the prescribed number of days is 7.

(3) A notification under section 37 (3) of the Act must be in or to the effect of Form 5.

(4) For the purposes of section 37 (4) of the Act, the prescribed particulars in respect of a person who carries out the duties of chief nurse are those required to complete Form 5, together with the person's curriculum vitae and a copy of the person's current annual practising certificate.

Register of residents

12. (1) For the purposes of section 41 (1) of the Act, the prescribed form for a register of residents is a series of forms, each form being in or to the effect of Form 6, completed in respect of each resident and maintained in strict admission date order.

(2) For the purposes of section 41 (2) (e) of the Act, the prescribed particulars to be entered in the register of residents are the particulars required to complete Form 6.

(3) For the purposes of section 41 (3) of the Act, a particular required to be entered in the register of residents must be entered:

- (a) in the case of a particular required to complete Part A of Form 6, at the time of admission of the resident; and
- (b) in the case of a particular required to complete Part B of Form 6, at the time the person ceases to be a resident; and
- (c) in either case:
 - (i) in such manner as may be directed by the senior nurse on duty at the nursing home at the time the particulars are obtained; and
 - (ii) subject to subparagraph (i), by hand or by use of an approved electronic data processing system.

Records

13. (1) In addition to the register of residents, the licensee of a nursing home must keep, in respect of each resident:

- (a) an admission form, in or to the effect of Form 7; and
- (b) such other records as are referred to in Schedule 1.

Maximum penalty: 5 penalty units.

(2) Such records may be kept by hand or by use of an approved electronic data processing system.

PART 3 - MISCELLANEOUS

Evidentiary certificates

14. For the purposes of section 48 of the Act, the following officers of the Department of Health are prescribed officers:

Deputy Director-General;
Executive Director, Service Development and Planning;
Chief Health Officer;
Deputy Chief Health Officer;
Regional Director.

Display of licence

15. The licensee of a nursing home must, at all times while the nursing home is being conducted, cause to be displayed in a prominent place in the entrance foyer or other place readily visible to visitors the licence for the nursing home or a full-size copy of the licence.

Maximum penalty: 5 penalty units.

Information to be furnished with annual licence fee

16. (1) The licensee of a nursing home must, when paying an annual licence fee referred to in section 14 of the Act, furnish to the Director-General:

- (a) a certificate in or to the effect of Form 8; and
- (b) a copy of the chief nurse's current annual practising certificate.

Maximum penalty: 5 penalty units.

(2) If the licensee is a corporation, the licensee must at the same time furnish to the Director-General the following particulars:

- (a) the full name of the corporation;
- (b) the address of the registered office of the corporation;
- (c) the full name, residential address and position of:
 - (i) each current director of the corporation;
 - (ii) the principal executive officer of the corporation;
 - (iii) the secretary or, if there is more than one, each secretary of the corporation;
- (d) in the case of a corporation limited by shares:
 - (i) the types of shares and the number of shares of each type issued;
 - (ii) in the case of a private corporation - the full name of, and the number of shares held by, each shareholder;
 - (iii) in the case of a public corporation - a list of the 20 largest shareholdings and of the full names of the holders of each of those shareholdings;
- (e) if the shares are held by another corporation, the name of the ultimate holding corporation.

Maximum penalty: 5 penalty units.

Resident census

17. (1) The Director-General may, by direction in writing to the licensee of a nursing home, require the completion of an approved census form in respect of each person residing at the nursing home on a date, and at a time, specified in the direction.

(2) The licensee of a nursing home must, within 3 weeks after the date specified in such a direction, furnish to the Director-General the completed census forms to which the direction relates.

Maximum penalty: 5 penalty units.

SCHEDULE 1 - LICENSING STANDARDS

(Cl. 4)

PART 1 - DESIGN AND CONSTRUCTION OF PREMISES

Ambulance access

1.1.1. A nursing home must have adequate access for the emergency transfer of residents by ambulance.

PART 2 - FACILITIES AND EQUIPMENT

Furnishing and equipping of wards

1.2.1. (1) All furniture, furnishings and bed linen provided by a nursing home are to be:

- (a) of approved quality and quantity; and
- (b) suitable for their intended use; and
- (c) comfortable for residents and staff; and
- (d) able to be readily cleaned.

(2) An approved hospital-type bed must be provided for each resident other than a cot resident.

(3) Beds in a ward:

- (a) must have wheels fitted at one or both ends; and
- (b) must have a width of at least 860 millimetres; and
- (c) unless otherwise approved, must be accessible from both sides; and
- (d) must have a firm base.

(4) From 1 January 1996, all beds must be of adjustable height, either mechanically or electrically.

(5) Sufficient cot sides must be provided.

(6) One mattress must be provided for each bed and 1 additional mattress for every 15 beds or part thereof.

(7) Each mattress must be of inner spring, foam rubber or other approved type and must be fitted with a waterproof mattress cover.

(8) Sufficient pillows must be available at all times to enable residents to be positioned as required, taking into account the type of bed adjustment and pillows used.

(9) Sufficient drawsheets and pillow cases must be available at all times to ensure comfortable and hygienic conditions for residents while in bed.

(10) Bed linen is to be in sufficient supply to allow for daily changing for each resident who is confined mainly to bed and for twice weekly changing for each other resident, but additional bed linen must be provided if more frequent changes are necessary.

(11) Towels are to be in sufficient supply to allow for daily changing for each resident.

(12) Bed linen, if wrinkled after laundering, must be ironed.

(13) Blankets of approved material and quality must be provided in approved numbers.

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(14) Electric blankets, if provided, must be of the extra-low voltage type.

(15) Each bed must be provided with at least 1 bedside locker, situated within easy reach of a resident in the bed and having a top surface which has rounded corners and is washable and impervious to liquids.

(16) From 1 July 1991, each bed must be provided with an overbed table which:

- (a) is of adjustable height; and
- (b) is of safe design and robust construction; and
- (c) has washable surfaces impervious to liquids.

(17) At least 1 chair with arms must be provided for each bed and must be made of materials that facilitate the chairs' being kept clean and hygienic, and the chairs so provided are to be of various heights.

(18) At least 1 wardrobe (having hanging space of at least 1600 millimetres in height and 500 millimetres in depth or width) must be provided for each bed for the storage of the clothes of the resident occupying the bed.

(19) Individual draw screens must be provided for resident privacy for each bed in each multiple bed ward and each such bed screen:

- (a) must be of approved, washable, fire-resistant materials; and
- (b) must be suspended from strong overhead tracking; and
- (c) must extend from not more than 450 millimetres above the floor to not less than 1800 millimetres above the floor and 450 millimetres below the ceiling.

(20) Subclauses (2), (3), (4), (5), (9) and (16) do not apply to a special class nursing home:

- (a) if a suitable domestic-type bed is provided for each resident; and
- (b) if pillow cases are provided at the rate of 2 per pillow and draw sheets are provided at the rate of 2 per bed.

Furnishing and equipping of lounge, dining and activities areas

1.2.2. (1) Resident lounge areas in a nursing home are to be furnished with an approved number of appropriate chairs.

(2) Resident dining areas in a nursing home are to be furnished with tables and approved chairs sufficient to accommodate, at any one time, not less than two-thirds of the maximum number of residents that may be accommodated in the nursing home.

(3) Activities areas in a nursing home are to be adequately equipped for therapy and other activities.

Equipping of kitchen and serveries

1.2.3. (1) Adequate food storage containers and food preparation, cooking and serving utensils are to be provided.

(2) Approved eating and drinking utensils of a sufficient number must be provided for the use of residents.

Medical and nursing equipment

1.2.4. (1) Equipment, appliances and materials that are necessary for resident care in the nursing home are to be provided from time to time as directed by the Director-General by notice in writing to the licensee of the nursing home.

(2) Without limiting subclause (1), the following equipment, appliances and materials are to be provided as required in a nursing home:

- all dressings, bandages and general medications (including creams, ointments, antiseptic powders and suppositories) required for good resident care, other than those prescribed by a medical practitioner for a specific resident;
- absorbent chair pads;
- absorbent incontinence pads;
- absorbent sheets;
- approved restrainers;
- approved suction apparatus;
- bed blocks;
- bed cradles;
- catheters;
- colostomy appliances;
- commode chairs;
- containers for personal laundry;
- diabetic sweeteners and other dietary requirements;
- disposable bed pan and urinal covers;
- disposable enemas;
- disposable syringes and needles;
- dressing trays;
- drip feeding equipment;
- face washers;
- mechanical devices for lifting residents;
- mouth-washes;
- naso-gastric tubes;
- oxygen;
- oxygen equipment and flowmeter;
- pharyngeal airway tubes;
- quadruped walkers;
- resuscitators;
- ripple mattresses;
- shampoo;
- shaving requisites;
- sheepskins or similar items;
- shower chairs with toilet seats;
- sterile dressing supplies;
- suture trays;
- surgical gloves (rubber or disposable);
- talcum powder;
- tissues;
- toilet paper;
- toilet soap;

toothpaste and denture cleaning preparations;
urinary drainage appliances;
walking frames;
water-beds;
waterproof sheeting;
wheelchairs;
woollen heel pads.

(3) Without limiting subclause (1), an approved medication trolley must be provided in each clean utility room or other approved area.

Fire blankets

1.2.5. An approved fire blanket must be provided in each kitchen and each nurse station in a nursing home.

Utility rooms

1.2.6. Each dirty utility room in a nursing home must be provided with:

- (a) an approved flusher-sanitiser for emptying, rinsing and sanitising bed-pans, commode-pans and urinal vessels; and
- (b) an approved washer-sanitiser for washing and sanitising denture cups, tooth bowls, sputum cups and washing bowls; and
- (c) mobile soiled-linen containers; and
- (d) a garbage receptacle fitted with a lid.

Open fires and portable heaters prohibited

1.2.7. Open fires and portable heaters must not be provided in areas used by residents unless otherwise approved.

Maintenance of buildings, facilities and equipment

1.2.8. (1) The buildings, facilities and equipment of a nursing home are to be maintained in good repair and operational order.

(2) Without limiting subclause (1), an approved maintenance programme must be current at all times for:

- (a) all mixing valve systems installed in connection with ablution facilities; and
- (b) all air-conditioning, heating, warming and cooling systems and appliances;
and
- (c) all lifts; and
- (d) all fire detection and extinguishing equipment and systems; and
- (e) all sterilising equipment; and
- (f) nurse call systems.

(3) Gas cylinders are to be stored in accordance with the distributor's requirements in cool, dry areas when not in immediate use.

(4) If a designated area is provided for the storage of medical gases, all medical gas cylinders are to be stored in that area when not for immediate use.

PART 3 - STAFFING

Staffing

1.3.1. (1) The nursing and personal care staff of a nursing home are to be sufficient in number and are to have appropriate experience to fully perform the nursing duties necessary for the proper care of residents at all times.

(2) The sufficiency of nursing and personal care staff is to be determined in accordance with the Principles for the Classification of Nursing Home Patients and Repatriation Nursing Home Patients published in Commonwealth Gazette No. GN38 on 4 October 1989 or any subsequent principles so published.

(3) The chief nurse is to cause a register to be kept in which is recorded:

- (a) the name of each person employed in nursing and personal care duties in the nursing home; and
- (b) the residential address of each such person; and
- (c) in respect of each such person who is a registered or enrolled nurse:
 - (i) the nursing qualifications held by the person; and
 - (ii) the registration or enrolment number shown on the person's registration or enrolment certificate; and
 - (iii) the number and expiry date shown on the person's current annual practising certificate; and
 - (iv) a statement that the registration or enrolment certificate and current annual practising certificate have been seen by the chief nurse.

(4) Sufficient domestic and maintenance staff or services are to be provided in a nursing home to carry out the cooking, cleaning, laundering, maintenance and other duties necessary for the proper conduct of the nursing home.

Day care programmes

1.3.2. If, pursuant to section 35 (1) (b) of the Act, the provision of a day care programme for non-residents has been permitted by a condition of a licence, the licensee:

- (a) must provide staff, in addition to the staff specified in clause 1.3.1, sufficient for the purpose of conducting the programme, including the provision of nursing and personal care; and
- (b) must cause a register to be kept in which is recorded:
 - (i) the name of each person participating in the day care programme; and
 - (ii) a daily record of attendance by each person, including the time of arrival at and departure from the establishment.

PART 4 - OPERATIONAL MATTERS

Health care

1.4.1. The licensee must ensure that:

- (a) each resident is given an opportunity to receive appropriate medical care by a medical practitioner of the resident's choice when needed; and
- (b) each resident is assisted and encouraged to make informed choices about the resident's individual care plan; and
- (c) residents are as free from pain as possible; and
- (d) residents are adequately nourished and hydrated; and
- (e) residents are assisted to maintain continence; and
- (f) residents are assisted and encouraged to maintain and, if possible, improve their mobility and dexterity and
- (g) residents have clean, healthy skin consistent with their age and general health; and
- (h) residents are assisted and encouraged to maintain oral and dental health; and
- (i) any sensory losses of residents are identified so that they are able to communicate effectively.

Social independence

1.4.2. The licensee must ensure that:

- (a) residents are given an opportunity to have visitors of their choice and to maintain personal contacts; and
- (b) residents are given an opportunity and encouraged to maintain control of their financial affairs; and
- (c) residents have freedom of movement within and from the nursing home, restricted only for safety reasons; and
- (d) provision is made for residents with differing religious, personal and cultural customs; and
- (e) residents are assisted and encouraged to maintain their responsibilities and obligations as citizens.

Freedom of choice

1.4.3. (1) The licensee must have policies:

- (a) which have been developed in consultation with residents; and
- (b) which
 - (i) enable residents to make decisions and exercise choices regarding their daily activities; and
 - (ii) provide an appropriate balance between residents' rights and effective management of the nursing home; and

- (iii) are interpreted flexibly to take into account the needs of individual residents.

(2) The licensee must ensure that residents and their representatives are given an opportunity to comment or complain about conditions in the nursing home.

Homelike environment

1.4.4. (1) The licensee is to create and maintain an environment at the nursing home that is as homelike as possible.

(2) The licensee must have policies which enable residents to feel secure in their accommodation.

Privacy and dignity

1.4.5. The licensee must ensure that:

- (a) the dignity of residents is respected by the staff of the nursing home; and
- (b) private property is not taken, lent or given to other people without the owner's permission; and
- (c) residents are able to undertake personal activities, including bathing, toileting and dressing, in private; and
- (d) the nursing home environment is free from undue noise; and
- (e) information about residents is treated confidentially; and
- (f) practices at the nursing home support the right of residents to die with dignity.

Variety of experience

1.4.6. The licensee must ensure that residents are assisted and encouraged to participate in a wide range of activities appropriate to their interests and capacities.

Safety

1.4.7. The licensee must ensure that:

- (a) the right of residents to participate in activities that involve a degree of risk is respected; and
- (b) the nursing home design, equipment and practices contribute to a safe environment for residents, staff and visitors; and
- (c) residents, visitors and staff are protected from infection and infestation; and
- (d) residents, visitors and staff are protected from hazards of fire and natural disasters; and
- (e) the security of buildings, contents and people within the nursing home is safeguarded; and

- (f) physical and other forms of restraint are used correctly and appropriately.

Admission and separation of residents

1.4.8. (1) On the admission of a resident to a nursing home:

- (a) a record of the resident's personal particulars and reason for admission must be made; and
- (b) the resident or a relative or friend of the resident must be informed verbally and in writing of:
 - (i) the policy of the licensee in respect of the conduct of the nursing home, including the handling of complaints about the nursing home; and
 - (ii) the procedure for lodging a complaint.

(2) On a person ceasing to be a resident of a nursing home (whether by discharge home, transfer to another institution or death) a record of further personal and clinical particulars is to be made in relation to the person.

(3) The records referred to in this clause are to be made:

- (a) in the register of residents; and
- (b) in the admission form for the patient concerned.

(4) On completion of the admission details, and again on completion of the separation details, the records are to be signed by the chief nurse (or by some other person authorised by the chief nurse for that purpose) and are to be dealt with as follows:

- (a) the register of residents form is to be retained:
 - (i) in a loose-leaf file with all other completed register of residents forms; or
 - (ii) in a bound register of residents; and
- (b) the admission form is to be retained as the front sheet of the resident's clinical record.

Security of accommodation

1.4.9. (1) The licensee must ensure that residents and their representatives are informed verbally and in writing of:

- (a) the terms under which the accommodation is being offered, including costs and services provided; and
- (b) the circumstances in which a resident may be asked to leave or a transfer of accommodation may be arranged; and
- (c) the avenues of appeal against a decision that the resident should leave.

(2) If a resident is asked to leave, the licensee:

- (a) must ensure that the resident (or, if the resident has a representative, the resident's representative) is given sufficient notice to enable alternative accommodation to be arranged; and

- (b) if requested by the resident or representative, must provide assistance in finding alternative accommodation.

Identification of residents

1.4.10. (1) Each ambulant resident in a nursing home who is unable to clearly establish his or her identity to other persons is to have the name of the resident and the name and telephone number of the nursing home:

- (a) marked discreetly, indelibly and legibly on each change of clothing; or
- (b) engraved legibly on a bracelet, anklet or necklace worn by the resident; or
- (c) identified with the resident by other approved means.

(2) A recent photograph of each resident must be kept available within the nursing home.

Restraint of residents

1.4.11. (1) A resident's freedom of movement must not be restricted unless the safety of the resident or other persons is at risk

(2) Except in an emergency, a resident who has a representative must not be mechanically or chemically restrained unless the resident's representative has been consulted and the restraint has been authorised in writing within the previous 6 weeks by a medical practitioner.

(3) A medical practitioner must not authorise any mechanical or chemical restraint unless other reasonably available strategies have been tried and shown to have failed.

(4) Any authority to mechanically or chemically restrain a resident in accordance with this clause must be maintained in the clinical record for that resident.

(5) In an emergency, a resident may be mechanically or chemically restrained on a verbal authorisation given by a medical practitioner to a registered nurse on duty at the time, provided that:

- (a) the verbal authorisation of the use of the restraint is recorded in the resident's clinical record by the registered nurse to whom the authorisation was conveyed; and
- (b) the medical practitioner who has verbally authorised the mechanical or chemical restraint of a resident confirms the authorisation in writing within 24 hours of giving that verbal authority and
- (c) if the resident has a representative - the resident's representative is consulted as soon as practicable about any further restraint that may be authorised.

Notification of missing residents

1.4.12. If a resident is known to be missing from a nursing home, the senior nurse on duty

- (a) must forthwith notify the resident's representative or next of kin and the police verbally of the fact; and

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- (b) must, as soon as practicable, notify a nursing supervisor verbally and in writing of the fact and of the details of the incident.

Resident cleanliness and comfort

1.4.13. (1) All practicable measures (including the prompt renewal and replacement of soiled clothing and linen) must be taken to keep each resident clean and comfortable at all times.

(2) Heating and cooling facilities are to be used as necessary to maintain the comfort of each resident.

Residents' clothing and toiletries

1.4.14. (1) A resident's personal belongings are not to be taken, lent or borrowed without the permission of the resident or the resident's representative.

(2) Any clothing provided by the nursing home for a resident is to be allocated for that resident's sole use and discreetly labelled accordingly.

(3) Toiletries and grooming aids provided by the nursing home for a resident are to be for the sole use of that resident.

Storage and administration of medicines

1.4.15. (1) In this clause:

"drug of addiction" means a substance specified in Schedule Eight of the Poisons List under the Poisons Act 1966;

"prescribed restricted substance" means a restricted substance prescribed for the purposes of section 16 of the Poisons Act 1966;

"qualified person" means a medical practitioner, pharmacist, dentist or registered nurse;

"restricted substance" means a substance specified in Schedule Four of the Poisons List under the Poisons Act 1966.

(2) The chief nurse of a nursing home:

- (a) must store any drug of addiction or prescribed restricted substance in a cupboard that:
- (i) is securely affixed to the premises in a clean utility room or other approved area; and
 - (ii) is constructed in an approved manner with approved materials; and
 - (iii) is fitted with a 5-lever keylock or locking mechanism providing at least equivalent security; and
 - (iv) contains no other goods except drugs of addiction and prescribed restricted substances; and
- (b) must store any other medication in a secure place in a clean utility room or other approved area.

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(3) The chief nurse of a nursing home must ensure that:

- (a) medication stocks and records are regularly inspected by a qualified and responsible person to ensure the proper storage of medication, proper stock rotation, withdrawal of stock that is outdated or no longer required, and proper recording of medication use; and
- (b) written policies and procedures are established for the procurement, preparation, distribution and administration of medication.

(4) Medication must not be transferred from the container in which it was supplied by the manufacturer or a pharmacist to another container, except where transfer to a syringe, infusion bottle or other container is necessary for the purpose of administration of the medication.

(5) A person must not administer a medication to a resident unless the person is a qualified person or the resident.

(6) If a resident administers a medication to himself or herself, a qualified person must check each item of medication before administration.

(7) Except in an emergency, a medical practitioner or dentist must, when authorising the administration of any medication to a resident, legibly record on an approved medication sheet kept in respect of the resident:

- (a) the name and, where applicable, the strength of the medication; and
- (b) the dosage to be administered; and
- (c) the route of administration; and
- (d) the times of day or frequency of administration; and
- (e) the number of doses or period of time for which administration is authorised; and
- (f) the date on which the entry is made; and
- (g) his or her signature.

(8) If, in an emergency, the administration of any medication to a resident has been authorised verbally by a medical practitioner or dentist, the registered nurse to whom the verbal authorisation was given must record on an approved medication sheet kept in respect of the resident:

- (a) the name and, where applicable, the strength of the medication; and
- (b) the dosage to be administered; and
- (c) the route of administration; and
- (d) the times of day or frequency of administration; and
- (e) the number of doses or period of time for which administration is authorised; and

- (f) the date on which the entry is made; and
 - (g) the name of the medical practitioner or dentist; and
 - (h) the signature of the person making the record.
- (9) The records referred to in this clause:
- (a) are to be handwritten in ink by the medical practitioner, dentist or nurse, as the case may be; or
 - (b) are to be recorded in such other manner as may be approved,
- and must be signed in ink by the medical practitioner, dentist or nurse next to or immediately below the name of each item of medication.
- (10) A medical practitioner or dentist who, in an emergency, has verbally authorised the administration of any medication to a resident must confirm the authorisation within 24 hours of giving that verbal authority by signing the entry made pursuant to subclause (8).
- (11) A person must not administer a restricted substance or drug of addiction to a resident except on the authorisation of a medical practitioner or dentist given in accordance with subclause (7) or (8).
- (12) The person administering a medication to a resident:
- (a) must refer directly to the authorisation in respect of that medication on the approved medication sheet; and
 - (b) must, when the medication is given, initial the appropriate place on the approved medication sheet to indicate that the medication has been given.
- (13) Each completed medication sheet is to be retained in the resident's clinical record.

Notifiable diseases

1.4.16. (1) In this clause:

"notifiable disease" means any of the following diseases:

- acquired immune deficiency syndrome (AIDS);
- acquired immune deficiency syndrome-related complex (AIDS-related complex);
- bacterial or amoebic dysentery;
- cholera;
- diphtheria;
- food poisoning;
- hepatitis (Type A, Type B or other);
- legionnaire's disease;
- leprosy,
- lymphadenopathy syndrome;
- meningococcal meningitis;
- plague;
- poliomyelitis;
- rabies;
- scabies;

tuberculosis (all forms);
typhoid and paratyphoid;
typhus (all forms);
viral haemorrhagic fever;
yellow fever.

- (2) If a resident of a nursing home is suffering or is reasonably suspected to be suffering from a notifiable disease, the chief nurse:
- (a) must cause such measures to be taken as are necessary to prevent the transmission of the disease; and
 - (b) must, within 48 hours of definitive diagnosis, notify a nursing supervisor by telephone of the fact; and
 - (c) must, as soon as practicable, send to the Director-General notice in writing, in or to the effect of Form 9, of the fact, ensuring that no personal identification of the resident is included in the notice; and
 - (d) must take such further measures as the Director-General may require.

Hygiene

1.4.17. (1) Adequate facilities, equipment and stores are to be maintained in a nursing home for the effective cleaning and disinfection of the buildings and their fixtures and fittings.

(2) Buildings of a nursing home, together with their fixtures and fittings, are to be maintained in a clean and sanitary condition.

(3) Without limiting subclause (2):

- (a) all furniture, furnishings, fittings, bedsteads and bedding are to be kept in a clean and sanitary condition; and
- (b) eating, drinking or cooking utensils or food storage containers which are cracked, chipped, scored, stained or defective are not to be used; and
- (c) each bed-pan, commode-pan, urinal vessel, wash basin and vomit bowl is to be sanitised after each use; and
- (d) each tooth mug, denture container and sputum mug is, while in use, to be sanitised at least once every 24 hours.

(4) All necessary measures are to be taken:

- (a) to exclude flies and other vermin from a nursing home; and
- (b) to destroy any flies or other vermin that are within a nursing home.

(5) A pan sluice or flusher-sanitiser (but not a toilet facility) is to be used for disposal of the contents of bed-pans, commode-pans and urinal vessels.

(6) Receptacles with close-fitting lids are to be provided for the collection of household refuse.

(7) Household refuse is to be disposed of by the use of a service provided by the local authority or in some other approved manner.

(8) Contaminated waste is to be disposed of from a nursing home in an approved manner.

(9) The grounds of a nursing home are to be maintained in a clean, tidy and safe condition.

Smoking

1.4.18. (1) A nursing home must have a written policy on smoking by residents and staff.

(2) The nursing home policy in relation to smoking must provide:

- (a) that neither residents nor staff are allowed to smoke in wards or dining areas; and
- (b) that, if residents or staff are allowed to smoke within the nursing home, smoking is to be confined to designated areas that allow other residents to avoid exposure to smoke without unduly restricting their activities; and
- (c) that frail residents are to be kept under the direct supervision of a member of staff while smoking.

(3) Each intending resident or relative or friend of the resident is to be informed verbally and in writing of the nursing home policy in relation to smoking.

Animals

1.4.19. (1) Except as provided by subclause (2), birds and animals may, at the discretion of the licensee and with the approval of the Director-General, be permitted in any area of a nursing home occupied by residents.

(2) Birds and animals are not to be permitted in any area of a nursing home where food is stored, prepared or cooked.

Telephones

1.4.20. (1) A telephone (not being coin-operated and not fitted with any locking device) must be available at all times in a nursing home for use by staff in order to deal with emergencies.

(2) At least one other telephone must be provided on each floor in a nursing home for use by residents for both incoming and outgoing calls.

(3) The location of telephones provided for use by residents must take account of the need for access and privacy by residents making telephone calls.

Visiting hours

1.4.21. (1) Subject to subclause (2), residents are to be allowed to receive visitors at any reasonable time.

(2) A medical practitioner or the senior nurse on duty may, if necessary for the care of a resident:

- (a) restrict the hours for visiting the resident; and
- (b) restrict the number of persons who may visit the resident at any one time.

Meal times

1.4.22. (1) Meals are to be served to residents at the following times:

- (a) Breakfast - not earlier than 7.00 a.m.;
- (b) Mid-day meal - not earlier than noon;
- (c) Evening meal - not earlier than 5.00 p.m.

(2) Morning and afternoon tea and supper are to be provided for residents at the appropriate times.

Storage, preparation and serving of food

1.4.23. (1) A kitchen in a nursing home is to be used solely for the purposes of:

- (a) storing, preparing, cooking and distributing food; and
- (b) washing dishes and utensils used in connection with the storage, preparation, cooking or serving of food.

(2) An area of a nursing home, other than a kitchen, is not to be used for the purposes specified in subclause (1), except that:

- (a) a servery may be used for the preparation of beverages and light snacks; and
- (b) a scullery may be used for washing dishes and utensils.

(3) Laundry and waste (other than kitchen waste) is not to be taken through a kitchen.

(4) Meals at a nursing home are to be prepared and served:

- (a) in accordance with a planned menu of not less than 2 weeks which takes account of the dietary preferences of residents; and
- (b) in sufficient variety, quality and quantity:
 - (i) as to be attractive and palatable to and edible by residents; and
 - (ii) as to provide the dietary allowances recommended from time to time by the National Health and Medical Research Council.

(5) Any special diet prescribed or requested for a resident by the medical practitioner in charge of the resident's care is to be provided.

Night-time care

1.4.24. (1) Residents are not to be unnecessarily disturbed during the night, or to be sat out of bed for more than 1 hour before breakfast, except at the specific request of the resident concerned.

(2) Notwithstanding subclause (1), an incontinent resident who requires attention during the night or the early hours of the morning is to be attended to and put back into a clean, dry bed.

Overcrowding etc.

1.4.25. (1) Unless otherwise approved, a resident is not to be accommodated in any part of a nursing home other than a ward.

(2) If in an emergency the number of residents in a ward exceeds the number of residents specified in the licence in relation to the ward, the licensee of the nursing home:

- (a) must, as soon as practicable, cause the excess resident or residents to be removed from that ward; and
- (b) must, as soon as practicable, notify a nursing supervisor by telephone of the fact; and
- (c) must, as soon as practicable, send to the Director-General notice in writing of the fact and of all the relevant details of the circumstances in which it occurred.

Removal of bodies

1.4.26. The body of a dead person must not be left for more than 1 hour in any ward or other room occupied by other residents.

Accidents etc.

1.4.27. (1) If, as a result of an incident occurring in a nursing home, a resident requires medical attention, the senior nurse on duty is to enter the details of the incident on a form in or to the effect of Part A of Form 10 and is to report the incident to the chief nurse and to the medical practitioner attending the resident.

(2) As soon as practicable after receiving such a report, the chief nurse:

- (a) must cause the incident to be investigated and enter the results of the investigation on Part B of Form 10; and
- (b) if the resident was transferred to a hospital, must enter the details of the transfer in Part C of Form 10; and
- (c) if the incident was life-threatening or fatal, must notify the resident's next of kin or guardian and a nursing supervisor verbally of the incident; and
- (d) must forward to the Director-General a copy of the form completed in accordance with this clause; and
- (e) must retain the completed form in the resident's clinical record.

Fire safety

1.4.28. (1) The licensee of a nursing home must have an emergency procedures policy (including contingency arrangements for the transfer of residents where necessary) and must ensure that all staff are familiar with the procedures.

(2) The licensee of a nursing home must appoint a member of the staff to be the fire safety officer for the nursing home and must ensure that the fire safety officer is provided with appropriate training.

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(3) Each means of escape from a nursing home is to be kept clear of obstacles at all times.

(4) Doors and other required fire exits are to be kept in good working order and are at all times to be capable of being opened from the inside by a single-handed action.

(5) Fire detection and extinguishing equipment and systems in a nursing home are to be kept in good order and are to be serviced annually.

(6) Approved fire safety notices are to be displayed in each nurse station and in other conspicuous positions in a nursing home and are to be maintained in legible condition.

(7) All of the staff of a nursing home are to attend approved fire safety training at least once every year.

(8) A record of each such fire safety training, showing the name of each person attending and signed by the training officer, is to be maintained.

(9) All of the staff of a nursing home are to participate in an evacuation exercise at least once every 6 months.

(10) If a fire occurs in a nursing home, the licensee, as soon as practicable after the fire and regardless of whether or not the fire brigade has been called to extinguish the fire:

- (a) must notify a nursing supervisor verbally of the fact; and
- (b) must send to the Director-General written notice of the fact and of all the relevant details of the circumstances in which the fire occurred.

PART 5 - CLINICAL RECORDS

Clinical records

1.5.1. (1) A record of the medical condition of each resident in a nursing home and all medical, nursing and other care provided to the resident is to be maintained by an entry in a resident clinical record system by the appropriate medical, nursing or other health care provider.

(2) Without limiting subclause (1), the clinical record of a resident must include the following:

- (a) the resident's admission form;
- (b) the resident's medical and nursing history, and results of any physical examination, that may be contained in any referral document;
- (c) the resident's social history relevant to the resident's care;
- (d) medical consultation reports;
- (e) the resident's medication sheet;
- (f) a record of planned nursing management, including all treatment and diet orders, which must be regularly reviewed;

- (g) a record of allergies and other factors requiring special consideration;
- (h) progress notes, including:
 - (i) a current principal diagnosis and other significant diagnoses; and
 - (ii) a daily record of all medical and nursing care given in relation to the resident's medical, physical, psychological and social needs and responses; and
 - (iii) a record of any restraint required, the reason for restraining and the time of its application and removal; and
 - (iv) a record of any restriction on access by visitors and the reason for the restriction;
- (i) reports of all laboratory tests performed;
- (j) reports of all X-ray and other medical imaging examinations performed; and
- (k) consent or request forms, where applicable.

Retention of records

1.5.2. (1) The register of residents, together with the residents' clinical records, are to be retained as follows:

- (a) the register of residents must be kept indefinitely,
- (b) clinical records relating to residents aged 18 years or over at the date of last separation must be kept for at least 7 years from the date of last separation;
- (c) clinical records relating to residents aged under 18 years at the date of last separation must be kept until the resident to whom the record relates attains, or would have attained, the age of 25 years.

(2) If the licence of a nursing home is transferred to another person, the transferee is to continue to retain the register of residents and the residents' clinical records in accordance with this clause.

(3) If the licence of a nursing home is surrendered or revoked, the licensee is to deal with the register and records in accordance with the instructions of the Director-General.

Resident access to clinical records

1.5.3. (1) A resident of a nursing home or a resident's representative may, by written application to the licensee, request access to the resident's clinical record.

(2) Except as provided by subclause (3), the licensee of a nursing home must, as soon as practicable after receipt of such an application, make the clinical record available for inspection at the nursing home:

- (a) by the resident or by the resident's representative; or
- (b) by a person nominated by the resident or representative and approved by the licensee.

(3) The licensee of a nursing home may refuse a request by a resident or by a resident's representative for access to the resident's clinical record:

- (a) if the medical practitioner in charge of the resident's care advises that the request should be refused; and
 - (b) if the licensee is satisfied that access by the resident or representative to the resident's clinical record would be prejudicial to the resident's physical or mental health.
- (4) An application under this clause is to be retained in the resident's clinical record.
- (5) If the licensee of a nursing home refuses a request by a resident or by a resident's representative for access to the resident's clinical record, the licensee:
- (a) must inform the resident or representative of the reason for the refusal; and
 - (b) must include in the resident's clinical record a written note of the refusal and the reason given for refusal.
- (6) If the licensee of a nursing home makes clinical records available for inspection under this clause, the resident or the resident's representative is (on payment of a fee, not exceeding the approved maximum fee, determined by the licensee) to be given assistance in the interpretation of test results, findings and comments by a person qualified to do so.
- (7) If a resident or the resident's representative disagrees with the information contained in the resident's clinical record, the licensee must, on request by the resident or representative, attach the resident's or person's own comments in the form of an addendum to the record.
- (8) If a resident or the resident's representative requests particular clinical information (such as test results or details of past treatment) rather than access to the resident's clinical record, the information may be provided by the medical practitioner in charge of the resident's care or, subject to the advice of that medical practitioner, by a registered nurse on the staff of the nursing home.
- (9) A resident or the resident's representative may appeal in writing to the Director-General against a decision of the licensee of the nursing home to refuse access to the resident's clinical record.
- (10) The Director-General may, in determining such an appeal:
- (a) confirm the decision of the licensee; or
 - (b) direct that the licensee grant the resident or the resident's representative access to the resident's clinical record under such conditions as the Director-General may direct.
- (11) A determination made by the Director-General is to be conveyed in writing to the licensee and retained in the clinical record of the resident to whom it relates.

Confidentiality of records

1.5.4. (1) The licensee of a nursing home must ensure that, except as provided by this clause, personal information concerning a resident is not released from the nursing home without consent of the resident or the resident's representative.

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(2) Personal information concerning a resident may be released from the nursing home without consent:

- (a) if the release of that information is required or authorised by law - in the manner so required or authorised; or
- (b) if the nursing home is a defendant in a case involving the resident and the release of that information is required for the defence - to the legal representative of the licensee of the nursing home; or
- (c) to the medical practitioner in charge of the resident's care and, where applicable, any medical practitioner and any nurse consulted on the resident's care; or
- (d) if the resident is transferred to another health establishment - to that health establishment; or
- (e) if the resident is discharged into the care of a medical practitioner or nurse - to that medical practitioner or nurse; or
- (f) if the information is limited to a general statement about the resident's condition and if the resident has not instructed otherwise - to a relative or friend of the resident.

(3) Access to personal information concerning a resident may be granted for bona fide research purposes without consent:

- (a) if a comprehensive code detailing the aims, methods and reasons for the study has been approved by an approved ethics committee; and
- (b) if the person carrying out the research does not remove the records concerned from the nursing home; and
- (c) if the information recorded by the person carrying out the research does not identify the resident directly, and
- (d) if the person carrying out the research gives a written undertaking that the confidentiality of personal information relating to the resident will be protected.

(4) Nothing in subclause (2) or (3) permits the release of personal information concerning a resident where the information consists of a confidential communication between the resident and a medical practitioner.

(5) All clinical records are to be stored in a secure place to which unauthorised persons are not to be permitted to have access.

SCHEDULE 2 - FORMS

Form 1

(Cl. 5)

APPLICATION FOR LICENCE FOR A NURSING HOME

(Nursing Homes Act 1988)

I/We,
(full name of applicant[s])

of
(address of applicant[s])

hereby apply for a licence for a nursing home of the following class[es]

The nursing home will be known as
(proposed name)

and will be situated at
(proposed location)

and will accommodate residents.

The applicant[s] is/are/will be

- * owner[s]
- * lessee[s]

of the nursing home.

I/We attach hereto the following information:

- (1) In the case of an application by a corporation:
 - (a) a copy of the certificate of incorporation;
 - (b) the address of the registered office of the corporation;
 - (c) the full name, residential address and position of:
 - (i) each current director of the corporation;
 - (ii) the principal executive officer of the corporation;
 - (iii) the secretary or, if there is more than one, each secretary of the corporation;
 - (d) in the case of a corporation limited by shares:
 - (i) the types of shares and the number of shares of each type issued;
 - (ii) in the case of a private corporation - the full name of, and the number of shares held by, each shareholder;
 - (iii) in the case of a public corporation - the 20 largest shareholdings and a list of the full names of the holders Of each of those shareholdings;
 - (e) if the shares are held by another corporation, the name of the ultimate holding corporation.

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- (2) If the nursing home is leased, a copy of the lease.
- (3) If the nursing home is proposed to be leased, a description of the proposed lease arrangements.

I/We also forward herewith the prescribed application fee.

.....
(Print name)

.....
(Signature)

.....
(Position)

.....
(Date)

* Delete whichever is not applicable

Form 2

(CI. 8)

APPLICATION FOR TRANSFER OF LICENCE FOR A NURSING HOME

(Nursing Homes Act 1988)

I/We,

(Full name of applicant[s])

of

(address of applicant[s])

hereby apply for a transfer to me/us of the licence for the nursing home known as

.....
(name of nursing home)

at.....

(address of nursing home)

The applicant[s] is/are/will be

* owner[s]

* lessee[s]

of the nursing home.

I/We attach hereto the following information:

- (1) In the case of an application by a corporation:
 - (a) a copy of the certificate of incorporation;
 - (b) the address of the registered office of the corporation;
 - (c) the full name, residential address and position of:
 - (i) each current director of the corporation;
 - (ii) the principal executive officer of the corporation;
 - (iii) the secretary or, if there is more than one, each secretary of the corporation;
 - (d) in the case of a corporation limited by shares:
 - (i) the types of shares and the number of shares of each type issued;
 - (ii) in the case of a private corporation - the full name of, and the number of shares held by, each shareholder;
 - (iii) in the case of a public corporation - a list of the 20 largest shareholdings and of the full names of the holders of each of those shareholdings;
 - (e) if the shares are held by another corporation, the name of the ultimate holding corporation.

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- (2) If the nursing home is leased, a copy of the lease.
- (3) If the nursing home is proposed to be leased, a description of the proposed lease arrangements.

I/We also forward herewith the prescribed application fee.

..... <i>(Print name)</i> <i>(Signature)</i>
..... <i>(Position)</i> <i>(Date)</i>

TO BE COMPLETED BY CURRENT LICENSEE

I/We agree to the transfer of the license to the abovenamed applicant(s).

..... <i>(Print name)</i> <i>(Signature)</i>
..... <i>(Position)</i> <i>(Date)</i>

* *Delete whichever is not applicable*

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Form 3

(Cl. 9)

**APPLICATION FOR APPROVAL TO ALTER OR EXTEND A LICENSED
NURSING HOME**

(Nursing Homes Act 1988)

I/We,
(name of licensee)

of
(address of licensee)

being the holder of the licence (No.) for the nursing home known as
.....
(name of nursing home)

.....
(address of nursing home)

hereby apply for approval to alter or extend the nursing home.

I/We attach hereto the following documents:

- (1) Two copies of a site plan of the nursing home, drawn to scale and showing the lot number and deposited plan number or other relevant particulars which identify the site.
- (2) Two copies of sketch plans of the nursing home, drawn to a scale of 1:100 and showing the dimensions of each part of the nursing home and the use to which each part is to be put (the proposed alterations or extensions to the nursing home are shown by distinctive colouring or cross-hatching).

.....
(Print name)

.....
(Signature)

.....
(Position)

.....
(Date)

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Form 4

(Cl. 10)

APPLICATION FOR REVIEW OF DIRECTOR-GENERAL'S DECISION

(Nursing Homes Act 1988)

I/We,
(name of applicant)

of
(address of applicant)

hereby apply for a review of the decision of the Director-General to

.....
(nature of decision)

I/We enclose a copy of the Director-General's letter notifying the decision,

The grounds for my/our request for review are as follows:

.....
.....
.....

I/We understand that this application will be referred to a Committee of Review, which may make such investigation as it considers necessary in relation to this application before reporting to you. I/We agree, for this purpose, to allow any member of the Committee access to documentation, staff and residents, as judged necessary by the Committee. I/We also agree to relevant documentation held by the New South Wales Department of Health and the Commonwealth Department of Community Services and Health being made available to members of the Committee for the purposes of its investigation.

.....
(Print name)

.....
(Signature)

.....
(Position)

.....
(Date)

Form 6

(Cl. 12)

REGISTER OF RESIDENTS AT A NURSING HOME

(Nursing Homes Act 1988)

NURSING HOME		CODE No	MEDICAL RECORD No
SURNAME	GIVEN NAMES (IN FULL)	SEX M <input type="checkbox"/> F <input type="checkbox"/>	MARITAL STATUS M <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/> SEP <input type="checkbox"/> W <input type="checkbox"/>
USUAL ADDRESS (PLEASE PRINT)	STREET No	STREET NAME	
	SUBURB, TOWN OR LOCALITY		POSTCODE
	COUNTRY OF BIRTH	ABORIGINE <input type="checkbox"/>	BIRTH DATE
		REFERRING/LOCAL MEDICAL OFFICER NAME	AGE
		ADDRESS	
		ATTENDING MEDICAL OFFICER	
		ADMISSION DATE	ADMITTED FROM
		WORK COMP <input type="checkbox"/> MY 3rd PTY <input type="checkbox"/>	HOSP INSUR <input type="checkbox"/>
		DATE OF SEPARATION	TIME
PRESENTING PROBLEM/REASON FOR ADMISSION		MODE OF SEPARATION	
PROVISIONAL DIAGNOSIS		<input type="checkbox"/> Discharge Home <input type="checkbox"/> By Hosp <input type="checkbox"/> Dem/Res <input type="checkbox"/> Psych Hosp/Live	<input type="checkbox"/> Transfer/Discharge to- <input type="checkbox"/> Nursing home <input type="checkbox"/> Other Hosp <input type="checkbox"/> Other Health Care Accom <input type="checkbox"/> Death <input type="checkbox"/> A. Hosp <input type="checkbox"/> No Autopsy
PRINCIPAL DIAGNOSIS (i.e. THE CONDITION WHICH BEST ACCOUNTS FOR STAY IN NURSING HOME)			
OTHER CONDITIONS PRESENT			
CODE FOR AETIOLOGY OF PRINCIPAL DIAGNOSIS (IF APPLICABLE)			
PRINCIPAL OPERATION OR MAJOR PROCEDURE			
OTHER OPERATIONS OR PROCEDURES			
EXTERNAL CAUSE OF INJURY OR POISONING (IF APPLICABLE)		PLACE OF OCCURRENCE	
SELECTED COMPLICATIONS OF HOSPITALISATION			
<input type="checkbox"/> Adverse Effect Anesthetics <input type="checkbox"/> Adverse Effect Other Drugs <input type="checkbox"/> Delirium/Confusion <input type="checkbox"/> Deep Venous Thrombosis <input type="checkbox"/> Fall/Injury <input type="checkbox"/> Wound/Haemorrhage/Infection <input type="checkbox"/> Wound/Infection <input type="checkbox"/> Urinary Tract Infection <input type="checkbox"/> Blood Transfusion Reaction			
TO BE CONSOLIDATED SEQUENTIALLY IN LOOSE LEAF AS REGISTER		CHIEF NURSE ON ADMISSION	OPTION CODE
		CHIEF NURSE ON SEPARATION	

Form 7

(Cl. 13)

NURSING HOME ADMISSION FORM

(Nursing Homes Act 1988)

NURSING HOME		CODE No.	MEDICAL RECORD No.		
SURNAME	GIVEN NAMES (IN FULL)		SEX <input type="checkbox"/> M <input type="checkbox"/> F	MARITAL STATUS <input type="checkbox"/> M <input type="checkbox"/> S <input type="checkbox"/> W <input type="checkbox"/> D <input type="checkbox"/> SEP <input type="checkbox"/> NK	
RELIGION	USUAL ADDRESS (PLEASE PRINT)	STREET No.	STREET NAME		
P.H.S. Card <input type="checkbox"/> Y <input type="checkbox"/> N	PENSION No./TYPE	SUBURB, TOWN OR LOCALITY	POSTCODE	PHONE	
AMBULANCE FUND <input type="checkbox"/> Y <input type="checkbox"/> N	COUNTRY OF BIRTH	ABORIGINE <input type="checkbox"/> Y <input type="checkbox"/> N	BIRTH DATE	AGE	
PERSON FOR NOTIFICATION	RELATIONSHIP	REFERRING/LOCAL MEDICAL OFFICER NAME		PHONE	
ADDRESS	HOME PHONE WORK	ADDRESS			
NEXT OF KIN	RELATIONSHIP	ATTENDING MEDICAL OFFICER		PHONE	
ADDRESS	HOME PHONE	ADMISSION DATE	ADMITTED FROM:		
FUNERAL ARRANGEMENTS <input type="checkbox"/> CREMATION <input type="checkbox"/> BURIAL	WORK COMP <input type="checkbox"/> Y <input type="checkbox"/> N	M.V. 3rd PTY <input type="checkbox"/> Y <input type="checkbox"/> N	HOSP INSUR <input type="checkbox"/> Y <input type="checkbox"/> N	FUND	
UNDERTAKER	DATE OF SEPARATION	TIME	HEALTH FUND No. TABLE		
PRESENTING PROBLEM/REASON FOR ADMISSION	MODE OF SEPARATION				
PROVISIONAL DIAGNOSIS	Discharge Home: <input type="checkbox"/> By Hosp <input type="checkbox"/> Nursing Home <input type="checkbox"/> Own Resid Transfer/Discharge to: <input type="checkbox"/> Other Hosp <input type="checkbox"/> Psych Hosp/Unit <input type="checkbox"/> Other Health Care Accom Death: <input type="checkbox"/> Autopsy <input type="checkbox"/> No Autopsy				
PRINCIPAL DIAGNOSIS (i.e. THE CONDITION WHICH BEST ACCOUNTS FOR STAY IN NURSING HOME)					
OTHER CONDITIONS PRESENT	HAS PATIENT AT ANY TIME SUFFERED FROM	<input type="checkbox"/> T.B. <input type="checkbox"/> DIABETES <input type="checkbox"/> CANCER	FLU VACCINATION Date: _____ CHEST X-RAY Date: _____		
CODE FOR AETIOLOGY OF PRINCIPAL DIAGNOSIS (IF APPLICABLE)					†
PRINCIPAL OPERATION OR MAJOR PROCEDURE	DRUGS ON ADMISSION				
OTHER OPERATIONS OR PROCEDURES	ALLERGIES - DRUGS/OTHER				
EXTERNAL CAUSE OF INJURY OR POISONING (IF APPLICABLE)	PLACE OF OCCURRENCE				
SELECTED COMPLICATIONS OF HOSPITALISATION					
<input type="checkbox"/> Anaphylaxis <input type="checkbox"/> Deep Vein Thrombosis <input type="checkbox"/> Bed Sores <input type="checkbox"/> Wound (Pressure/Healed) <input type="checkbox"/> Wound Infection <input type="checkbox"/> Urinary Tract Infection <input type="checkbox"/> Blood Transfusion Reaction					
TO BE ATTACHED TO MEDICAL RECORD OF PATIENT		CHIEF NURSE ON ADMISSION		OPTION CODE	
		CHIEF NURSE ON SEPARATION			

Form 8

(Cl. 16)

LICENSEE'S ANNUAL CERTIFICATE FOR A NURSING HOME

(Nursing Homes Act 1988)

Name of licensee:

Address of licensee:

Name of nursing home:

Address of nursing home:

Class(es) of nursing home:

Name of chief nurse:

Registration no. of chief nurse:

The nursing home is

* owned by the licensee

* leased from

(name of lessor)

I/We forward herewith:

- (1) The prescribed annual licence fee.
- (2) A copy of the chief nurse's current annual practising certificate.
- (3) If the licensee is a corporation:
 - (a) the full name of the corporation;
 - (b) the address of the registered office of the corporation;
 - (c) the full name, residential address and position of:
 - (i) each current director of the corporation;
 - (ii) the principal executive officer of the corporation;
 - (iii) the secretary or, if there is more than one, each secretary of the corporation;
 - (d) in the case of a corporation limited by shares:
 - (i) the types of shares and the number of shares of each type issued;
 - (ii) in the case of a private corporation - the full name of, and the number of shares held by, each shareholder;
 - (iii) in the case of a public corporation - a list of the 20 largest shareholdings and of the full names of the holders of each of those shareholdings;
 - (e) if the shares are held by another corporation, the name of the ultimate holding corporation.

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.....
(Print name) (Signature)

.....
(Position) (Date)

* Delete whichever is not applicable

Form 9

(Sch. 1.4.16)

**NOTIFICATION OF ILLNESS DUE TO NOTIFIABLE DISEASE AT A
NURSING HOME**

(Nursing Homes Act 1988)

Name of nursing home:

Address of nursing home:

Resident reference No.:

Date of admission of resident:

Disease:

Time and date of apparent onset:

Name of attending practitioner:

I hereby give notice that the resident to whom the above reference number relates is, or is reasonably suspected to be, suffering from the notifiable disease specified above.

.....
(Signature of chief nurse) (Date)

Form 10

(Sch. 1.4.27)

NURSING HOME INCIDENT REPORT FORM

(Nursing Homes Act 1988)

PART A

(1) HOSPITAL CODE (2) DATE OF INCIDENT (3) TIME OF INCIDENT 24 Hr. clock

(4) NAME OF INJURED TRANSFERRED PERSON (5) MED. RECORD NO.

(6) NAME & ADDRESS OF PREMISES AT WHICH INCIDENT OCCURRED (7) AGE

..... (8) SEX: 1 - Male 2 - Female

(9) NAME & DESIGNATION OF WITNESSES(ES) (if applicable)

.....

(10) PROVISIONAL DIAGNOSIS BEFORE INCIDENT

(11) LOCATION OF INCIDENT

(12) MOTOR VEHICLE INCIDENT: 1 - To/From the Establishment, 2 - Out with relatives 3 - Not applicable

(13) INJURY/INCIDENT WAS DUE TO: 01 - Falling from Bed, 02 - Other Falling/Slipping, 03 - Lifting, 04 - Struck by Object, 05 - Defective Equipment, 06 - Medication, 07 - Sharps 08-25 - Medical/Surgical/Obstetric/Neonatal Complication/Other (specify)

(14) BED RAILS: (a) Present. 1 - Yes, 2 - No, 3 - N/A (b) Position. 1 - Up, 2 - Down, 3 - N/A (a) (b)

(15) BED TYPE: (a) 1 - Standard, 2 - High/Low, 3 - Humidicrib, 4 - N/A (b) Position, 1 - High, 2 - Low, 3 - N/A (a) (b)

(16) PART OF BODY INJURED: 01 - Head, 02 - Neck, 03 - Shoulder, 4 - Arm, 05 - Hand, 06 - Leg, 07 - Foot/Ankle, 08 - Back, 09-23 - Other (Specify but do not code)

(17) NATURE OF INJURY/INCIDENT: 01 - Burn, 02 - Lacerations, 03 - Abrasions, 04 - Sprain/Strain, 05 - Bruise, 06 - Puncture Wound, 07-26 - Other (Specify but do not code)

(18) TREATMENT: 1 - First Aid, 2 - Medical, 3 - Hospital Transfer, 4 - None

(19) X-RAY: 1 - Yes 2 - No

(20) FURTHER DETAILS OR COMMENTS INCLUDING BRIEF SUMMARY OF X-RAY RESULT

Signed Date/19..... Position

PART B CHIEF NURSE TO COMPLETE

(1) Has incident been investigated? 1 - Yes 2 - No

(2) What causes were identified? Please specify, do not code

.....

(3) What remedial action has been taken or is proposed? Please specify, do not code

.....

Signed Date/19..... Position

PART C COMPLETE FOR TRANSFERRED PATIENT

(1) Name of receiving hospital (2) Date of transfer D D M M Y Y

.....

(4) Reason for transfer. Please specify (3) Time of transfer 24 Hr. clock

Signed Date/19..... Position

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SCHEDULE 1 - LICENSING STANDARDS

SCHEDULE 2 - FORMS

EXPLANATORY NOTE

The objects of this Regulation are to make provisions necessary or convenient for carrying out or giving effect to the Nursing Homes Act 1988. Apart from machinery provisions, the Regulation deals mainly with licensing standards for nursing homes. These standards include provisions concerning design and construction of premises, facilities and equipment, staffing, operational matters and clinical records.
