

of the loss and grief they may have about admitting a loved one into a facility, says Bauer.

"It's important for staff to determine what the families' needs actually are. They need to ask them about how they would like to be involved and what ways they can continue to support their loved ones," he says.

"The onus has to be on the staff to make families feel welcome."

GIVING GUIDANCE

Bauer says a common issue is that staff often feel families have unrealistic expectations of them and don't understand their workload. In this way, it's important they engage with families early on to help them understand aged care and how it operates, and be honest about what is possible, he says.

Veteran aged care consultant Pam Bridges says that as people enter residential care older and frailer, staff are more and more likely to be dealing with families. Before they even accept a place in the facility, she says providers need to outline to family the facility's staffing levels, skill mix, complaint processes and mechanisms, fees and charges, and end-of-life care.

Going through these at pre-admission helps families understand how residential aged care works, and will help avoid most types of complaints in the future, Bridges tells AAA.

Further, as many families are in crisis when accessing care, it's also important to continue to reinforce this information.

OPEN-DOOR POLICY

When a resident first moves into a DutchCare facility the organisation makes clear to families that there is an open door to staff and that they are free to come and go like they would at home, says CEO Petra Neeleman.

Further, they also try to match relatives up with other families, so they can get a sense from them of how facility life operates.

"I can tell you that life's good here, but it's much better coming from somebody whose parent is here and who is able to share that," Neeleman tells AAA.

DutchCare has small group living, where residents live in households of around 15 people. Neeleman says this environment fosters closeness. "Relationships are the most important thing we do," says Neeleman. "It's about getting to know people and building up trust, and building up friendships.

"It's about being open and honest, admitting mistakes when we've made them and about listening to changes that they think we should be making."

ALLOWING FAMILIES TO CONTRIBUTE

When family members have previously acted as personal carers, they may not necessarily see that role as having ceased when a loved one enters residential care, and wish to continue assisting with care tasks such as showering or feeding.

Bridges says providers can facilitate this where appropriate, but they need to make sure the family member knows how to do this in the context of a facility.

"They have to adhere to the safety requirements around the equipment that we have in an aged care facility, which is probably quite different to how they used to do it at home," she says.

Neeleman says if a family member wants to continue aspects of care, DutchCare staff will teach them how to appropriately do so.

"Often family members feel powerless when they come into an aged care facility, as do residents, because we don't allow them to do things. Whereas in fact, it's a normal part of life to want to care for the people we love," she says.

Greenwood says while Arcare welcomes some family participation in personal care, it tries to focus on helping former carers to find another role.

To do so, it's important families understand they can make



Arthur Koumoukelis



Daniella Greenwood



Pam Bridges



Petra Neeleman

valuable contributions to facility life, she says. For example, at Arcare, family members often choose to volunteer in the facility, visiting other residents, or helping out at mealtimes.

Neeleman says DutchCare also encourages family volunteering, such as sharing musical skills,

playing board games, or baking for residents.

However, Bridges cautions that depending on what activities volunteers are involved in, providers still need to make sure they do the groundwork.

"For any facility that is using volunteers, there needs to be quite a bit of work done on code of conduct, confidentiality, the outcome standards we have to work to and the legislative requirements around compulsory reporting," she says.

WHEN THINGS GO WRONG

However, while engaging family is important, providers should not lose sight of the fact that their primary responsibility is to the resident.

Arthur Koumoukelis, partner at law firm Gadens, tells AAA that providers can get caught in positions where appeasing family members puts them at risk of breaching their obligations.

He urges providers to understand that rights bestowed on someone as a substitute decision maker (SDM) do not override providers' responsibilities under the *Aged Care Act*.

For example, if an SDM argues for something that is against a resident's interest, such as an inappropriate medication, the facility has grounds to refuse it, he says.

"Just because a person has power, doesn't mean that power is unlimited, unfettered and unsupervised," Koumoukelis says.

Family members and SDMs are obliged to comply with a provider's reasonable direction, says Koumoukelis. If they do not, they have the right to refuse them access to the property, or to enforce that visits are supervised, he says.

Koumoukelis says it's vital that providers clearly define the boundaries of what people can and can't do, have clear complaint processes and educate staff on the law. Further, it's important staff can escalate conflict to a superior, or in extreme cases, a third party.

"Sometimes you need a circuit breaker," he says. "You need to be able to change the dynamics of the conversation."

RESOLVING CONFLICT

When issues arise with families at DutchCare, Neeleman says they invite them in to talk it over with staff.

It's important not to appoint blame, she says, but rather discuss what went wrong, where changes need to be made, and whether they need to give families better or clearer information.

Bridges says building good relationships with families really comes down to organisational philosophy and whether it's clear that open and honest communication is expected, and mistakes are handled in an open and accountable way.

"It's our response that actually makes them believe that we value what they've told us, that we've investigated it and we've done something about it. That's what builds trust. That's the ongoing process," says Bridges. ■

Improving staff-family relationships

In partnership with Alzheimer's Australia, ACEBAC has created a website for staff, families and facilities to access resources on improving relationships, including audit tools.

Go to qualitydementiacare.org.au/project/improving-staff-family-relationships-for-people-with-dementia-living-in-residential-aged-care/