

CC6 Complex Care Needs

Purpose

1. To ensure that our participants' complex care needs are identified and met by appropriately qualified nursing staff.

Alignment with Practice Standards

1. Module 2: Provider Governance and Operational Management
2. Module 3: Provision of Supports
3. High Intensity Daily Personal Activities

Legislative Alignment

1. National Disability Insurance Scheme Act 2013
2. Work Health and Safety Act 2011 (Cth)
3. Work Health and Safety Regulations 2011 (Cth)

Key Responsible Executive

Chief Executive Officer

For More Support

Head of Multidisciplinary Care

Policy Statement

1. This policy applies to all registered nurses and care staff.
2. Registered nurses or other relevant health practitioners are responsible for the assessment and planning of care for a participant.
3. Registered nurses or other relevant health practitioners may be assisted in this by other personnel subject to those personnel being properly trained and being supervised and directed by a registered nurse or other relevant health practitioner. Examples of assistance include attending observations, carrying out measurements and compiling information used by a registered nurse to assess participant needs.
4. As set out in the Quality of Care Principles 2014, Schedule 1, Part 3, specific care and service planning activities and care tasks must be carried out by a qualified person. Services encompass:

- c. Initial assessment and care and service planning carried out by a nurse practitioner or registered nurse, and ongoing management and evaluation carried out by a nurse practitioner, registered nurse or enrolled nurse acting within their scope of practice.
 - d. Nursing services carried out by a nurse practitioner, registered nurse or enrolled nurse, or other professional appropriate to the service (for example, medical practitioner, stoma therapist, speech pathologist, physiotherapist or qualified practitioner from a palliative care team), acting within their scope of practice.
5. Such services may include, but are not limited to, the following:
- a. Establishment and supervision of a complex pain management or palliative care program, including monitoring and managing any side effects;
 - b. Insertion, care and maintenance of tubes, including intravenous and naso-gastric tubes;
 - c. Establishing and reviewing a catheter care program, including the insertion, removal and replacement of catheters;
 - d. Establishing and reviewing a stoma care program;
 - e. Complex wound management;
 - f. Insertion of suppositories;
 - g. Risk management procedures relating to acute or chronic infectious conditions;
 - h. Special feeding for care recipients with dysphagia (difficulty with swallowing);
 - i. Suctioning of airways;
 - j. Tracheostomy care;
 - k. Enema administration;
 - l. Oxygen therapy requiring ongoing supervision because of a care recipient's variable need;
 - m. Dialysis treatment.

Procedures

1. Complex care needs are identified through our assessment and care and service planning processes, which are undertaken by registered nurses.
2. Assessed needs for specialised nursing care are met in the prescribed manner pertaining to clinical requirements.
3. Registered nurses monitor the care given to the high care participants and any more demanding nursing such as complex wound and pain management.
4. To assist with the care of complex care needs, we also use aromatherapy care. Applications include pain management, sleep, constipation, respiratory care, and spa bath for relaxation. A degenerative joint blend and a muscular blend are used for pain management
5. We seek appropriate involvement of participant's doctors and specialist referrals.
6. Appropriate clinical monitoring processes are in place and any adverse changes are reported to the participant's doctor or other health and related services, as required.

References to other SAVVY policies

1. CS3.5 Participant Record Management
2. HR4.17 Information Technology

References to other external materials

1. Quality of Care Principles 2014, Schedule 1, Part 3

Supporting documentation

1. Participant files
2. Assessments, care and service plans, incident reports, progress notes, charts

Version Control

1. 1 April 2023 - New Policy Creation