

THE JANUS APPROACH[©]



Named after the Roman God Janus

In ancient Roman mythology, Janus is the god of beginnings and endings, transitions, doorways and time. Janus frequently symbolised change and transitions such as the progress of past to future, from one condition to another, from one vision to another, opening a new door and commencing that journey. He represented time, because he could see into the past with one face and into the future with the other.



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The Janus Approach is a philosophy of care, specific to RSL Care SA, that acknowledges residents are unique individuals, who have a variety of personal needs and preferences.

The Janus Approach aspires to continually improve and enhance the quality of life with all residents by transforming the culture of care in our facilities from task focussed to truly person-centred. The approach enables services and care needs to be adapted to meet the priorities and 'picture' of quality of life for each individual resident as well as the group of residents as a whole. Residents of RSL Care SA require care delivery to be person centred and evidenced based ensuring each resident's physical, cultural, psychological, social, sexual and spiritual needs are addressed.

Person Centred Care is not a new concept and has been in practice, in varying forms, for several years. Person centred care provides a set of guiding principles for our actions in the field of care that enable all people in our care to be in relationship with others. These principles are based on a V.I.P.S structure, where each person is Valued, is Individual and unique, is cared for considering the person's Perspective and support the person to be Socially confident.

Janus Approach in Detail

In order to deliver the Janus Approach at RSL Care SA, we have identified speciality areas of care provision which are addressed through the 'Janus Keys'. The leader for each respective 'key' is accountable for maintaining current evidenced based practice and applying this in the performance monitoring of care delivery to the residents of RSL Care SA. We currently have six Janus Keys and have intentionally designed this model so that as the approach matures and the needs of residents' change, additional 'keys' can be added.



THE JANUS APPROACH KEYS

DIGNITY AND PERSON CENTRED CARE

JANUS KEY

The Janus Approach ensures that a comprehensive life history or “Life Story” is gathered for each resident in partnership with the resident and families who wish to be involved. From this life story and with resident and family collaboration, staff are able to determine what quality of life means to each resident. Life stories are taken by staff who have received specific training in this area of assessment and are generally conducted over several weeks as a relationship of trust is built with the individual resident (or family).

Dignity for each resident is promoted through an understanding of their individualised goals of care, personal preferences and individual ‘life story’. Staff are assisted to familiarise themselves with these ‘life stories’ in order to deliver the appropriate care as well as adhere to RSL Care SA principles of dignity. These principles were developed in partnership with residents, representatives, floor staff, management and board of RSL Care SA.

MEANINGFUL AND ENGAGING PROGRAMS

JANUS KEY

The Janus Approach recognises the need for social and leisure time programs as an integral part of daily living, however programs should have purpose through enhancing and strengthening the physical and psycho-social capabilities of the resident and increasing self-esteem and self-worth. Through this Janus Key we ensure that residents have a wellbeing program that is designed to promote each resident’s independence consistent with individual abilities and wishes, thereby promoting dignity and self-respect. Residents have the choice and opportunity to participate, or not, in programs and to change their mind regarding their preferences. Programs may be active or passive, formal or spontaneous according to the requirements of the individual. They may be provided for a group of residents with common interests, or for an individual to support their own personal interests and abilities.

SPIRITUAL CARE AND CONNECTEDNESS

JANUS KEY

The Janus Approach recognises that all residents have spiritual needs which may not always be based on religious belief or lack of belief. Spirituality is the way we seek and express meaning and purpose; the way we experience our connection to the moment, self, others, our work and the significant or sacred. (*Meaningful Ageing Australia 2014*). This Janus Key recognises that the need for spiritual comfort can vary along an individual’s life journey. Needs can change when a resident is faced with emotional challenges and significant sense of loss, which can be associated with a move to a new environment, changed circumstance or adjusting to life in an aged care setting.

Staff gain an understanding of what spirituality means for each individual and support resident’s spiritual care needs. These also include cultural practices, customs and rituals that residents have undertaken throughout their life and are not isolated to a country of birth

THE JANUS APPROACH KEYS

MENTAL HEALTH

JANUS KEY

Mental health illness and disorders are as important as physical care needs and often have as great an impact on physical and social wellbeing. Some examples of mental health conditions experienced by residents within RSL Care SA are depression, anxiety and confusion. These can be suffered by any resident at any time, and individuals respond differently to these conditions and staff work with residents and families to support residents diagnosed with these conditions, ensuring that all staff are aware of how to support residents to achieve the best outcome in-line with the resident’s goals of care.

SEXUALITY AND INTIMACY

JANUS KEY

The Janus Approach recognises that the need for love, affection, physical closeness and contact continues throughout life, including for residents who are living within an aged care setting. People living in an aged care facility will often still have sexual desires and be capable of acting on those desires, as well as having a need to express themselves sexually, however, this may be difficult for residents to disclose as it has always been a topic kept private or only shared with people they trust.

As part of this Janus Key and an individual resident’s quality of life, it is also important to understand the level of intimacy they need or desire. Support to achieve emotional connection and intimacy at any level are developed with the resident (or family), to support each individual resident’s need for intimacy and sexual expression in whichever form this may take.

PALLIATIVE APPROACH

JANUS KEY

The Janus Approach adheres to the Palliative Approach in Residential Aged Care (2005). This approach ensures that residents with life limiting illnesses are afforded quality of life throughout their journey within the residential aged care setting. This Janus Key affirms life and respects dying as a normal process. It neither hastens nor postpones death, but rather aims to enhance the quality of life whilst also positively influencing the course of the illness.

This Janus Key also recognises that there are three very distinct phases of palliation (greater than 6 months to live, less than 6 months to live, and end of life approaching within a week) and ensures that within each phase the resident is provided with:

- Autonomy, dignity, comfort and respect
- Honest, open discussion about conditions and treatment options
- Access to any available evidence-based treatment options
- Effective management of pain and other distressing symptoms
- Quality of life, as defined by them, in the circumstances
- Assurance that any cultural or spiritual wishes will be upheld
- Access to the people they wish to be present

Our staff will meet with residents and families on admission and throughout their admission period to ensure that staff and families have a sound understanding of the type of care the residents wishes to be delivered at each stage of palliation.