FLUID ERP · USER MANUAL

FLUID Care

Recorded once, at the bedside.

Assessments, the medication round and the S8 register, incidents, restrictive practices, transfers, the funding claim, deposits, the QI quarter and care minutes — each recorded once by the person who was there.

Assessments & risk · eMAR & S8 register · Incidents & SIRS · Restrictive practices · Funding claims · QI & care minutes



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1 About this manual

This manual explains how to run a residential aged-care home on FLUID Care: scoring assessments, giving medicines and signing the S8 register, recording incidents and restrictive practices, transferring a resident to hospital, generating and lodging the funding claim, receipting refundable deposits, and reading the clinical, quality and funding dashboards, reports and matching screens. The worked examples follow Jacaranda Lodge on 30 August 2026.

Who it is for

READER	READ THESE CHAPTERS
Registered and enrolled nurses	3, 4, 5, 6
Carers	3, 5 (the round), 6 (incidents)
Care supervisor / DON	4, 6, 8, 9
Finance	7, 8, 9, 10
Families and substitute decision-makers (provider app)	6 (consent)
Administrators	3, 11, 12, Appendix A

Conventions

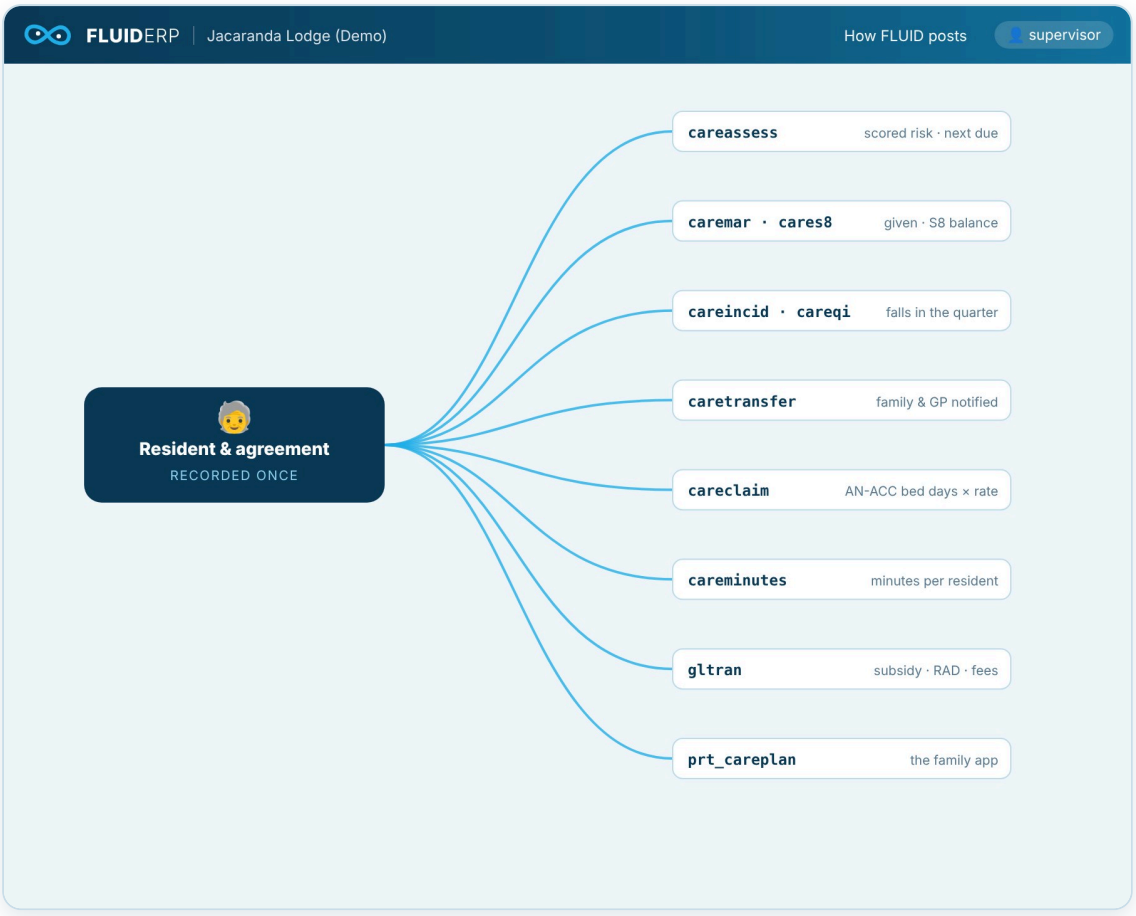
YOU SEE	MEANS
Bold names such as **Shifts**	A tile on the launcher, a screen, a tab or a field label, exactly as it appears in FLUID.
A button with an emoji, e.g. 🚚 **Post the Shift**	A posting button. Posting buttons are aqua; they write to other tables. 💾 **Save** is navy and saves only the record in front of you.
A field marked ƒ	A calculated field. You never type it — the calculation engine fills it from other fields or other tables, and keeps it right when they change.
`mneshift`	The name of the underlying table (collection). Useful when talking to your administrator or reading a report definition.
SH000006, MO000001 …	Record numbers. They are issued automatically by counters and carried on every row a button writes, so you can trace any figure back to the record that caused it.

ABOUT THE EXAMPLES

Residents, assessments, the S8 entries, incidents, restrictive practices, the transfer, claim CLM00002 and deposit AGR00004 follow the Stage 62 Jacaranda Lodge story. The AN-ACC price, NWAU values and some dashboard histories are illustrative, not current government rates. Screenshots come from the FLUID Care demonstration film.

2 How FLUID works: capture once, post everywhere

A clinical or financial event is recorded once, by the person who was there. The resident's banner reads the assessments; the round writes the S8 register and the stock; the incident counts in the QI quarter; the transfer starts leave and tells the family and the GP; the claim reads the agreements; the ledger takes the claim. Nobody copies a figure from one register into another.



One record at the bedside fans out to the registers, the resident banner, the QI quarter, the claim and the ledger.

Three kinds of action

ACTION	WHAT HAPPENS	TYPICAL BUTTON
Capture	A person (or a feed, a file, a phone app) records something that happened — once. It is saved on its own table and gets a number.	💾 Save · a form on the phone · a file import or feed
Post	A posting button reads the captured record and writes every row that follows from it — ledgers, stock, other documents, stamps — each carrying the source number. Most posting buttons are one-way: the record is marked posted and cannot be posted again.	🔐 Sign S8 Register · 🚑 Transfer to hospital · 🏛️ Lodge

ACTION	WHAT HAPPENS	TYPICAL BUTTON
Derive	Calculations keep totals, balances, KPIs, flags and due dates right. Dashboards and reports read those rows directly; nothing is copied into a spreadsheet.	none — fields marked ƒ, dashboards, reports

Rules you can rely on

1. **Nothing is typed twice.** If a number exists in one record, every other table that needs it receives it from the button, not from a person.
2. **A posted record is sealed.** Pressing a posting button a second time writes nothing and says so. To change a posted figure you raise a correcting document (a credit note, a reversal, a correction) — which is itself captured once and posted.
3. **Every row is traceable.** Each row a button writes carries the reference of the record that caused it (for example `ref = CLM00002`). Drill from any dashboard figure to the rows behind it and from there to the source record.
4. **Rules are enforced at the server.** Approvals, segregation of duties, embargoes, seals and signatures are checked by the gateway for every user, not just on screen.
5. **Imports are idempotent.** Files and feeds are keyed so that sending the same data again updates rows instead of duplicating them.

> **READ A POSTING PANEL**
>
> When you press a posting button, a panel lists every table it is writing to, one tick at a time, and ends with a green line such as “Posted — 5 writes to 5 tables from one capture”. That list is exactly what the button changed; the receiving tables show the same reference number.

3 Getting started

Signing in

Open the FLUID app (Windows, Android) or the browser client and sign in with the user name and password your administrator gave you. Each sign-in belongs to a group; the group decides which tiles you see and which fields and buttons you may use.

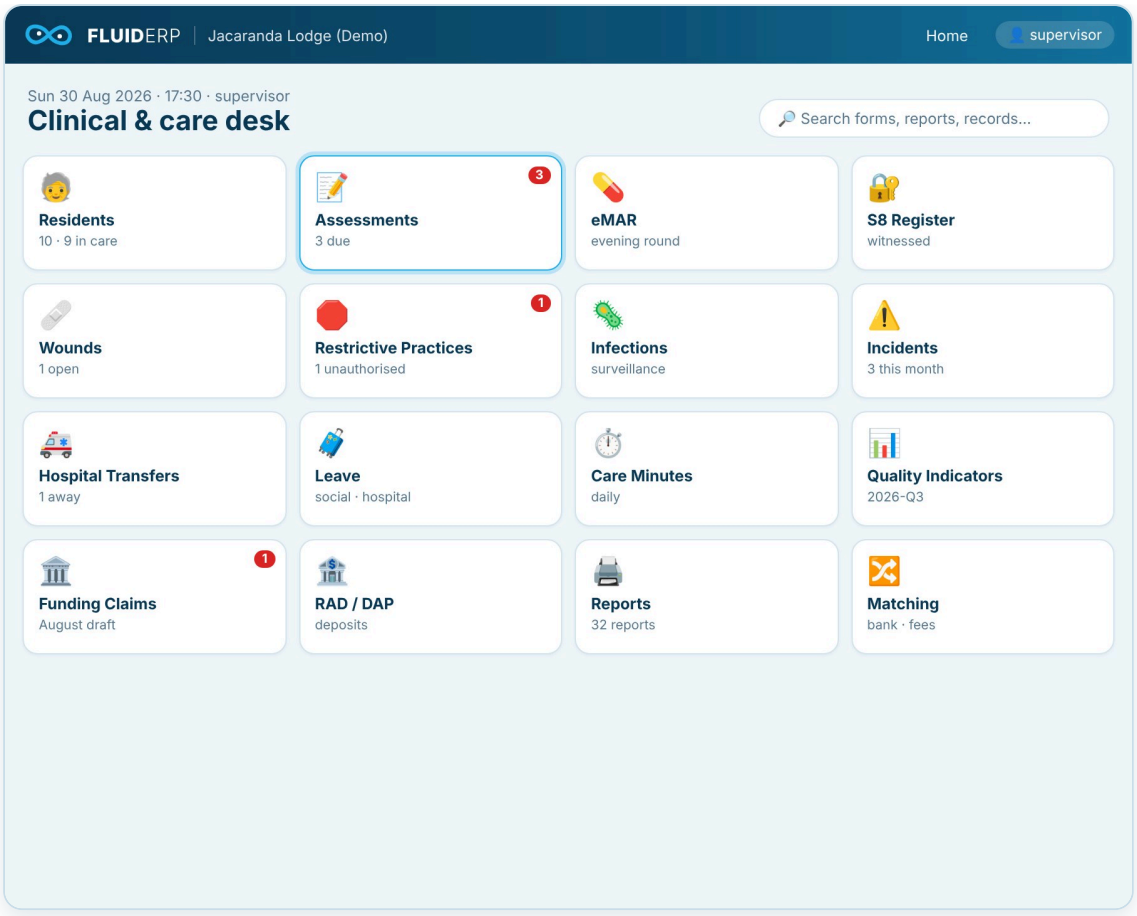
SIGN-IN	GROUP / DESK	USES FLUID TO ...
careadmin	Administrator	Everything; users, configuration
supervisor	Care supervisor / DON	Clinical registers, alerts, QI, care minutes
rn.priya	Registered nurse	Assessments, eMAR, S8 register, transfers
en.tom	Enrolled nurse	eMAR, S8 witness, observations
carer.aisha · carer.liam · carer.grace · carer.sofia	Carers	Round (non-S8), incidents, progress notes
payroll	Payroll	Roster hours (care minutes)
finance	Finance	Agreements, claims, deposits, fees, matching
peter.obrien@example.com	Substitute decision-maker (provider app)	Consent to restrictive practices; family notices
jobs@brightspark-electrical.example.com	Contractor (provider app)	Maintenance jobs

DEMO SIGN-INS

In the demo package staff passwords are the same as the user name; the provider-app family login uses legal123 and the contractor contractor123. Change every password at go-live.

The launcher

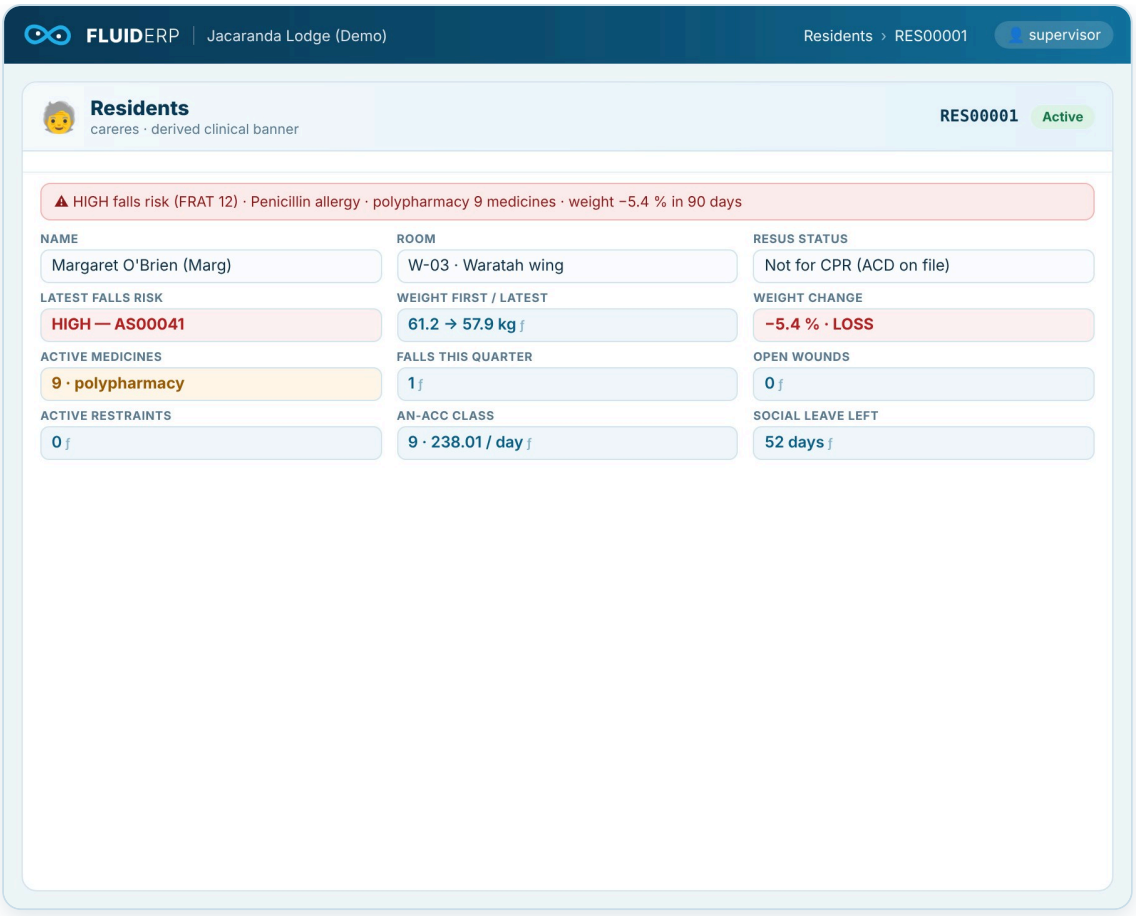
After sign-in you see the launcher: a grid of tiles for the screens, dashboards, reports and matching screens your group may open. A red badge on a tile counts records waiting for you. Use the search box to jump straight to a form, a report or a record number.



The supervisor's launcher: registers, the round, alerts and finance tiles, with badges for what is due.

Anatomy of a screen

1. **Header** — the form name, the table it belongs to, the record number and a coloured **status** pill (for example Closed, Posted · sealed, Approved).
2. **Toolbar** — 💾 **Save** (navy) saves this record. Aqua buttons are **posting buttons**: they write to other tables. Outline buttons recalculate (🧮), print (🖨️) or open related screens.
3. **Fields** — typed fields are white; calculated fields (ƒ) are tinted and read-only. Red, amber and green fields are flags raised by a calculation (expired, due soon, OK).
4. **Tabs** — the record's lines and related records (lines, movements, attachments, signatures). Child rows are saved with the parent.
5. **Banners** — an amber or red banner explains why a record is locked, sealed, embargoed or refused. Read it before calling support; it names the rule.



A resident record: the derived ⚠ alerts banner, latest FRAT, weight trend, medicines, wounds and restraints — read, not typed.

Everyday actions

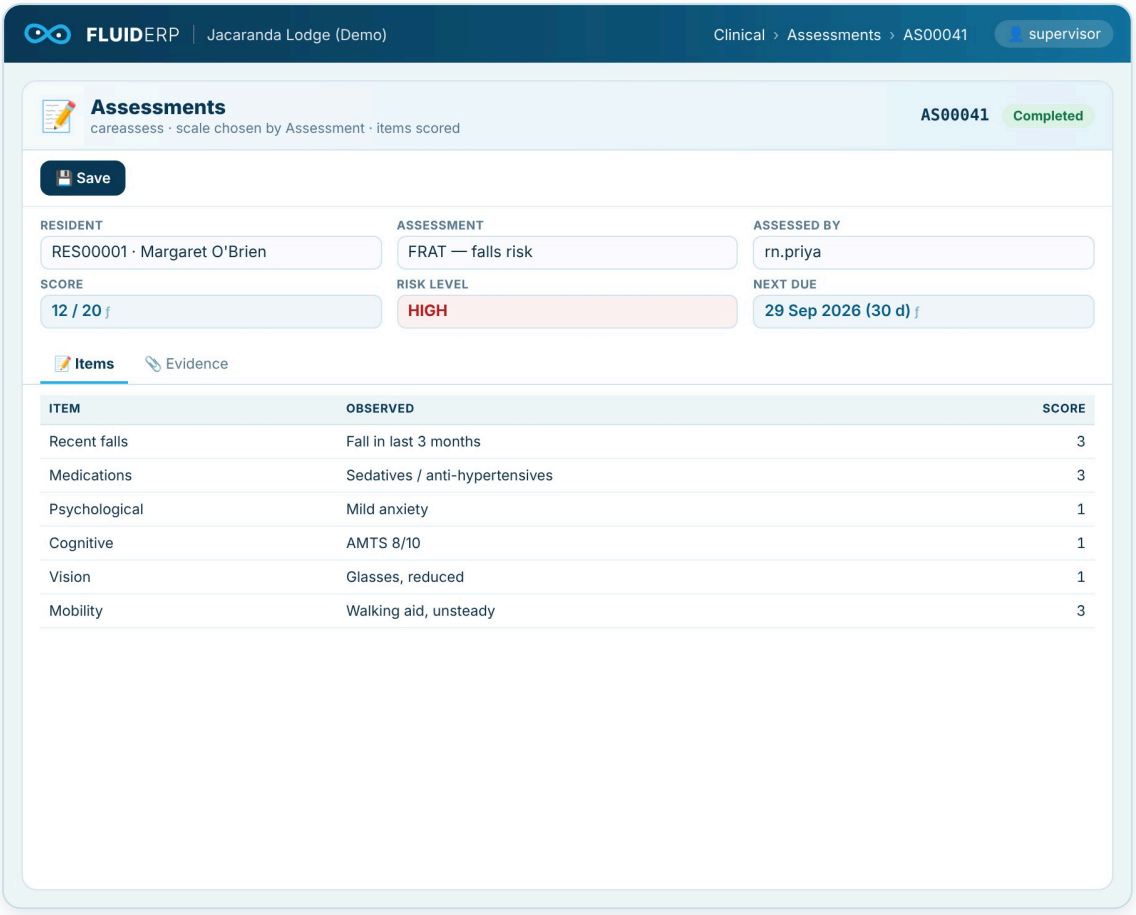
TO ...	DO THIS
Create a record	Open the tile, press ➕ **New**, fill the white fields, press 💾 **Save**. The number is issued on first save.
Find a record	Use the search box on the launcher or the filter row above any list. Record numbers, names and (where enabled) full text are searchable.
Refresh calculated fields	They refresh on save. 🧮 **Recalculate** re-runs them on demand (for example after a related record changed).
Print or save as PDF	🖨️ **Print** opens the printed copy in the document viewer; choose 🖨️ **Print / PDF** for paper or a PDF, or 💾 **Save** for the file.
Work offline (phone apps)	Forms marked as captures keep working with no signal; they wait in the **outbox** and send when you are back in range.

4 Assessments and the resident record

Assessments are scored once. The resident record and the care plan read the latest score; the next review date is calculated.

Score an assessment

Who **registered nurse** | Where **Clinical › Assessments** | Table **careassess**



FRAT AS00041 for Margaret O'Brien: six items scored, total 12, risk HIGH, next due calculated.

1. Open **Assessments** and press **New**. Pick the resident and the scale (FRAT, Braden, MNA-SF, PAINAD, Abbey and others).
2. Score each item. The **total**, the **risk level** and the **next due** date are calculations; you do not add them up.
3. Save. The resident's banner and the care plan pick up the new risk immediately.

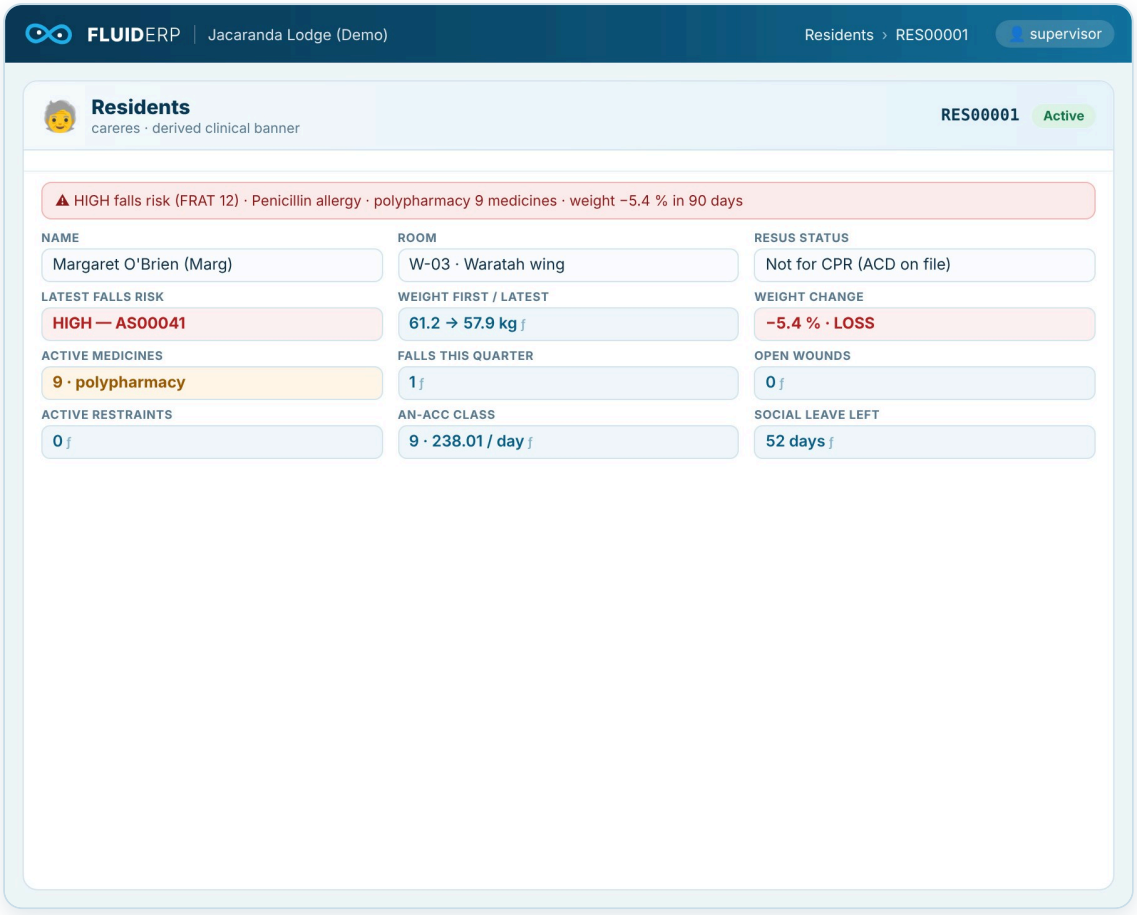
CHECK IT

The assessment shows AS00041 · score 12 · HIGH, and Margaret's banner shows ⚠ Falls risk HIGH.

Read the resident banner

Who **all clinical staff** | Where **Residents › (resident)** | Table **careres**

The ⚠ alerts line on the resident record is built from the registers. To change it, change the register it reads (a new assessment, a healed wound) — never type the banner.



The banner joins the latest FRAT, weight trend, medicines, wounds and restraints.

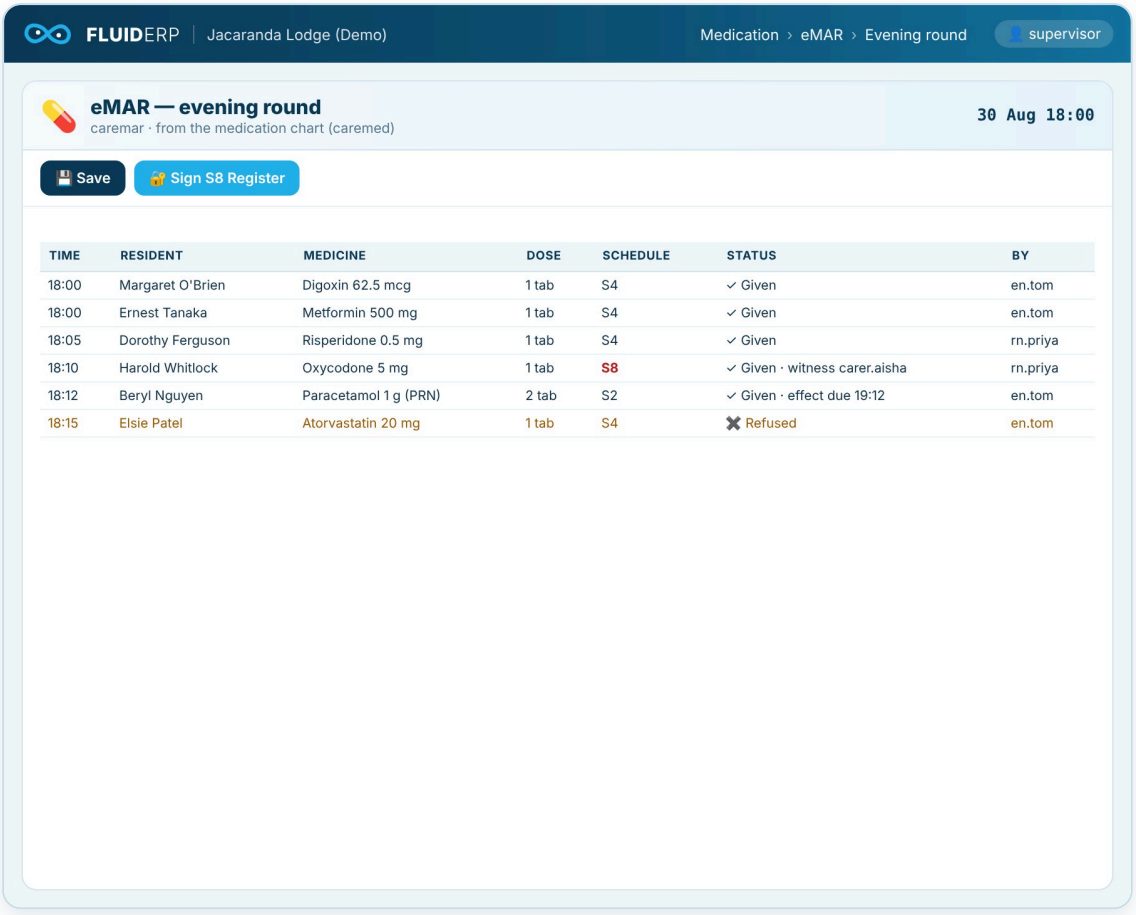
> **TIP**
> The same derived alerts drive the Clinical Alerts dashboard (chapter 8).

5 The medication round and the S8 register

Each dose is recorded once against the chart. Schedule 8 medicines need a witness, and one button writes the register and issues the stock.

Give medicines on the round

Who **nurses, carers (non-S8)** | Where **Medication › eMAR** | Table **caremar**

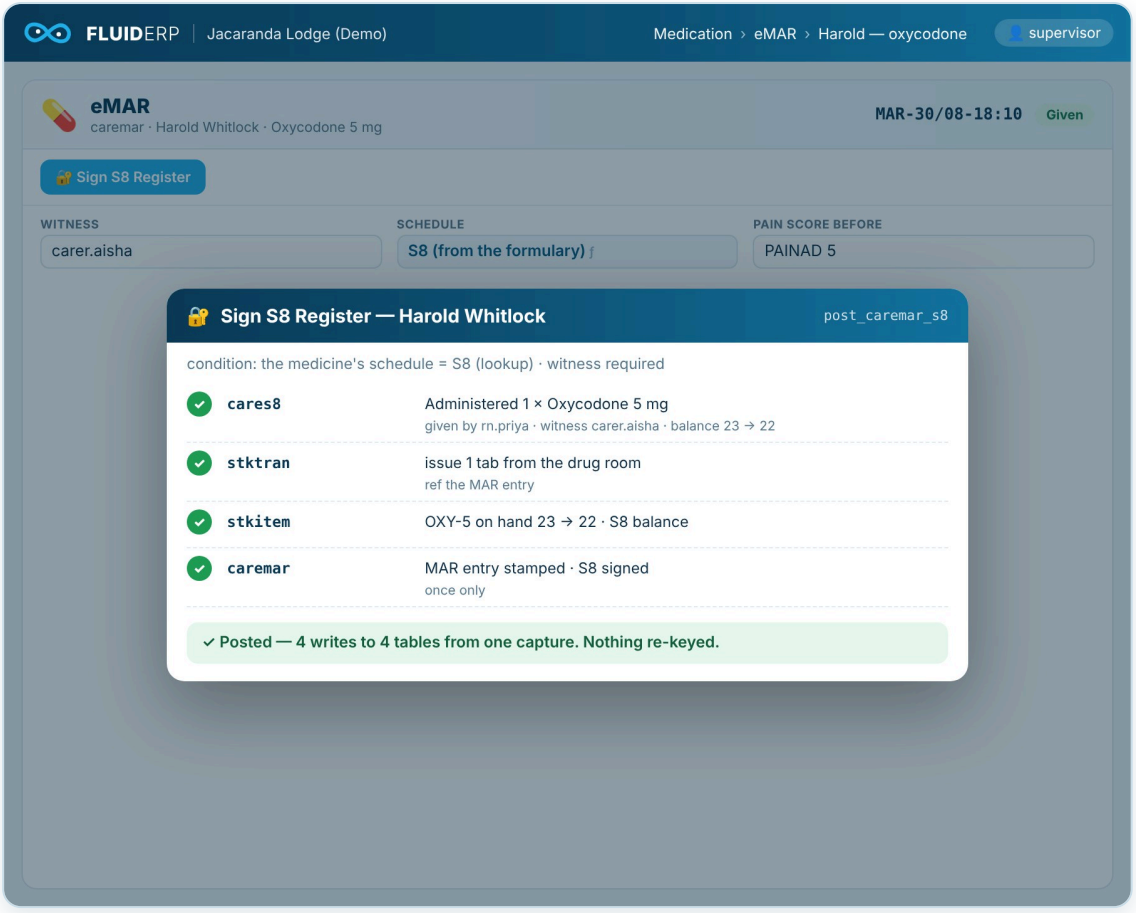


The evening round: each dose ticked Given, Refused or Withheld against the chart.

1. Open **eMAR** for the round. Each resident's due doses are listed from the medication chart.
2. Mark each dose **Given**, **Refused** or **Withheld** (with a reason).
3. A PRN dose asks for its effect later; record it when you review the resident.

Sign the S8 register

Who **registered nurse + witness** | Where **Medication › eMAR › (S8 dose)** | Table **cares8 · stktran · stkitem**



Harold Whitlock's oxycodone: one press writes the register entry, the stock issue and the balance.

1. On the S8 dose, enter the **witness** (a second authorised staff member).
2. Press 🔐 **Sign S8 Register**.

What 🔐 Sign S8 Register writes	`sign_s8_register`
✓ `cares8`	Administered entry with resident, quantity, giver and witness; running balance 23 → 22
✓ `stktran`	Issue of one tablet from the S8 safe
✓ `stkitem`	Formulary on-hand balance
✓ `caremar`	The dose stamped Given with the register line

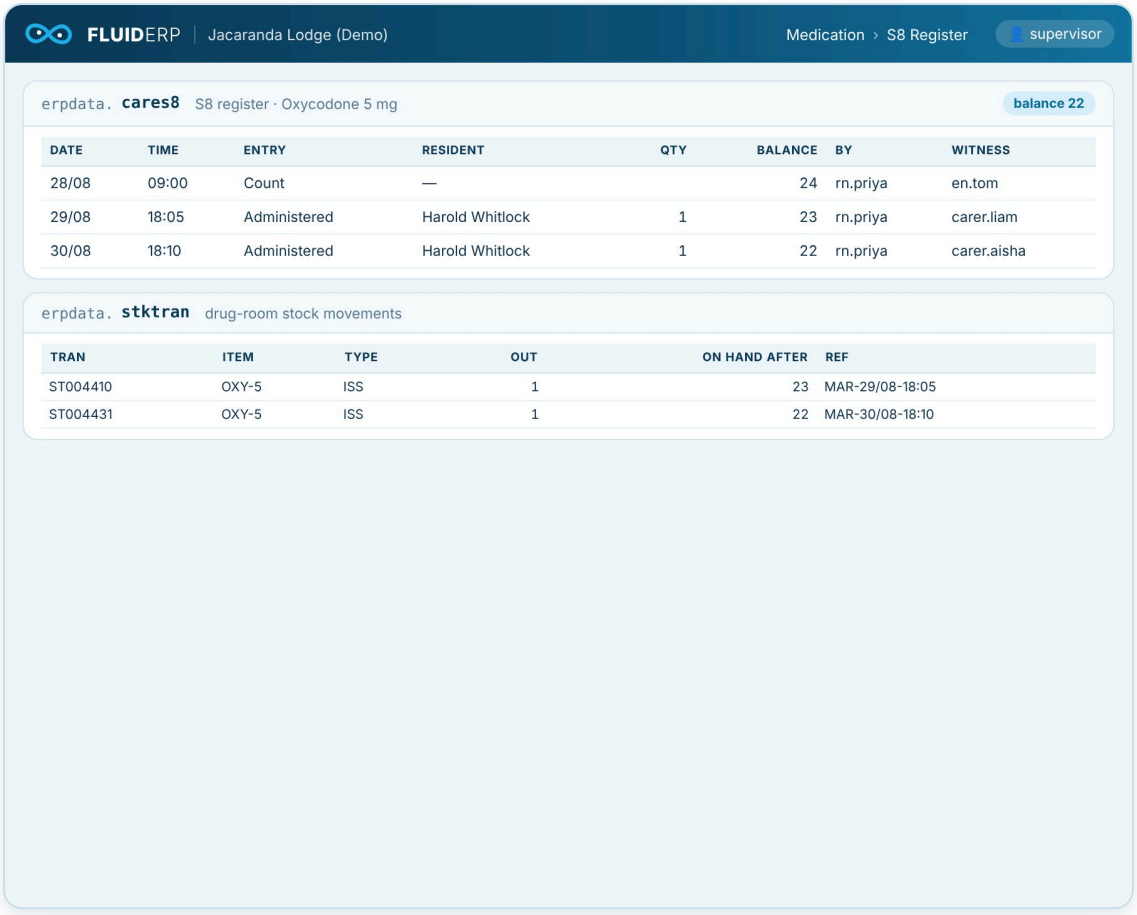
If the system refuses

YOU SEE	WHAT IT MEANS / WHAT TO DO
A witness is required for a Schedule 8 medicine	Enter a witness before pressing the button.
The witness cannot be the person giving the dose	Choose a second staff member.
Already signed — nothing written	The dose has its register line; open the register to see it.

Check the bound register

Who **registered nurse, pharmacist, auditor** | Where **Medication › S8 Register** | Table **cares8**

The register is append-only. A count that disagrees with the balance is recorded as a Count entry with both signatures; it is never corrected by editing an earlier line.



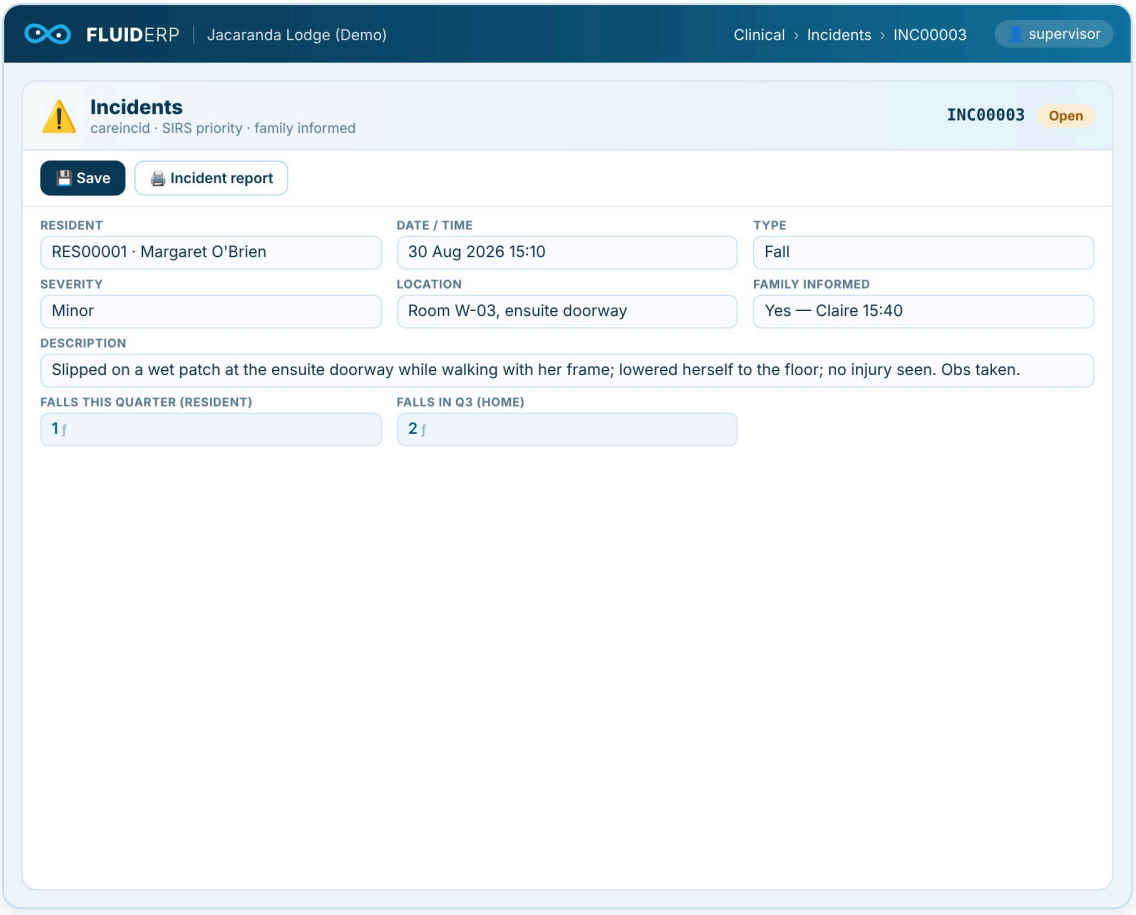
Received, administered, discarded and counts — each with a witness and the balance on every line.

6 Incidents, restrictive practices and transfers

An incident, a restrictive practice or a transfer is recorded once. Counts, flags, leave and notices follow.

Record an incident

Who **the staff member who found it** | Where **Clinical › Incidents** | Table **careincident**

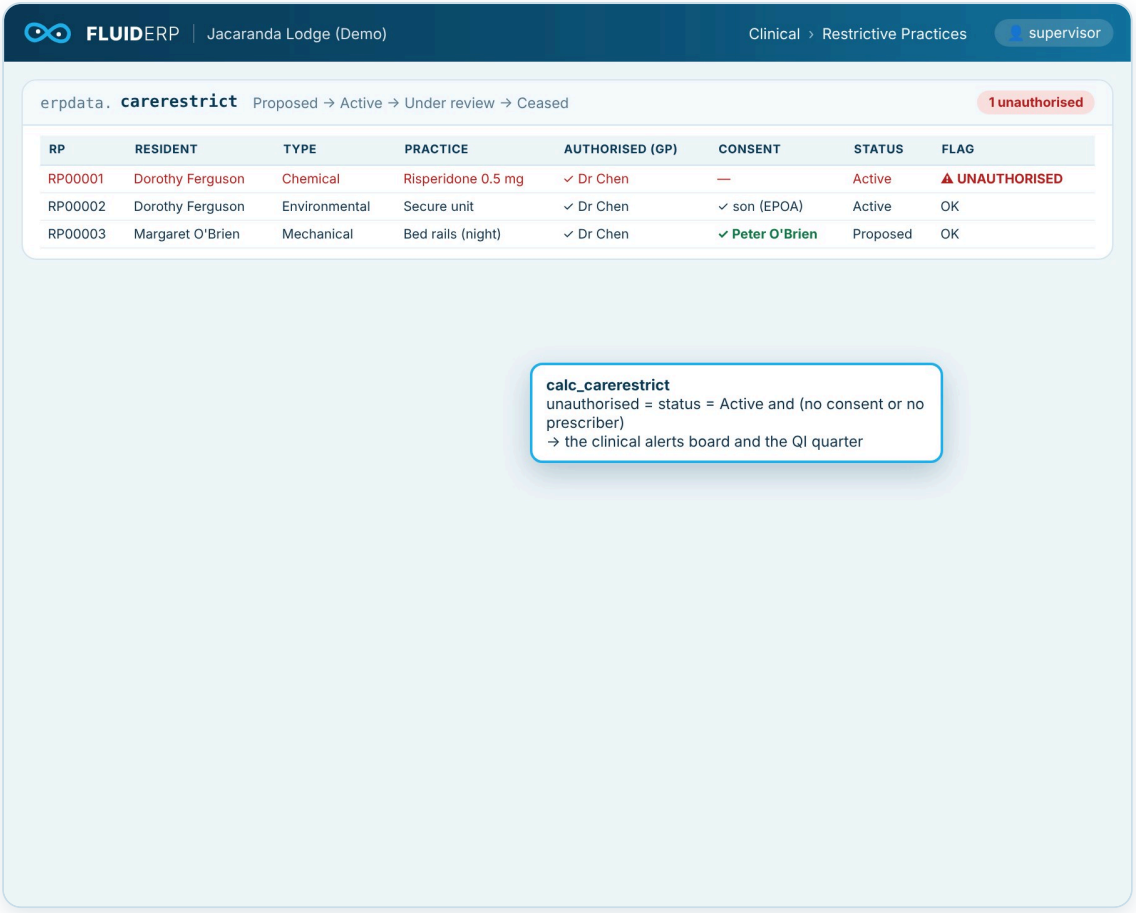


INC00003: Margaret slips at the ensuite door. A SIRS priority incident carries its notification deadline.

1. Press **New** and record what happened, where, when, injury and immediate action.
2. Choose the type (fall, medication, behaviour, absence ...). For a **SIRS** incident set the priority; the notification deadline is calculated.
3. Save. The resident's falls count, the QI quarter and the incident register all read this row.

Keep restrictive practices authorised

Who **supervisor, prescriber** | Where **Clinical › Restrictive Practices** | Table **carerestrict**

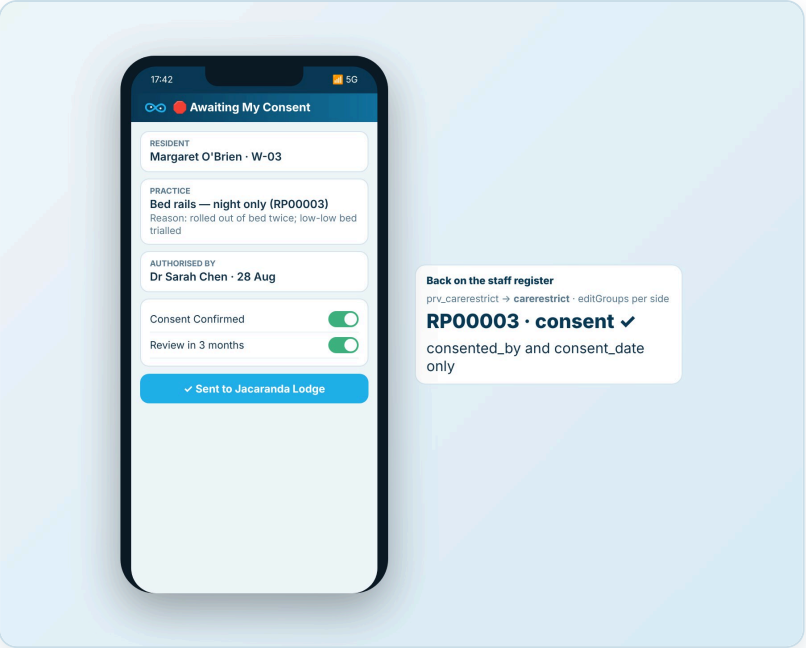


RP00001 (Dorothy, risperidone) is authorised but has no consent — ⚠ Unauthorised, derived.

1. Record each practice with its type, the behaviour support plan, the prescriber's authorisation and review date.
2. The substitute decision-maker's consent is recorded on the provider app (next procedure).
3. The **Unauthorised** flag is calculated: any missing authorisation, consent or expired review turns it red.

Consent on the provider app

Who **substitute decision-maker** | Where **Provider app › Consents** | Table **carerestrict**

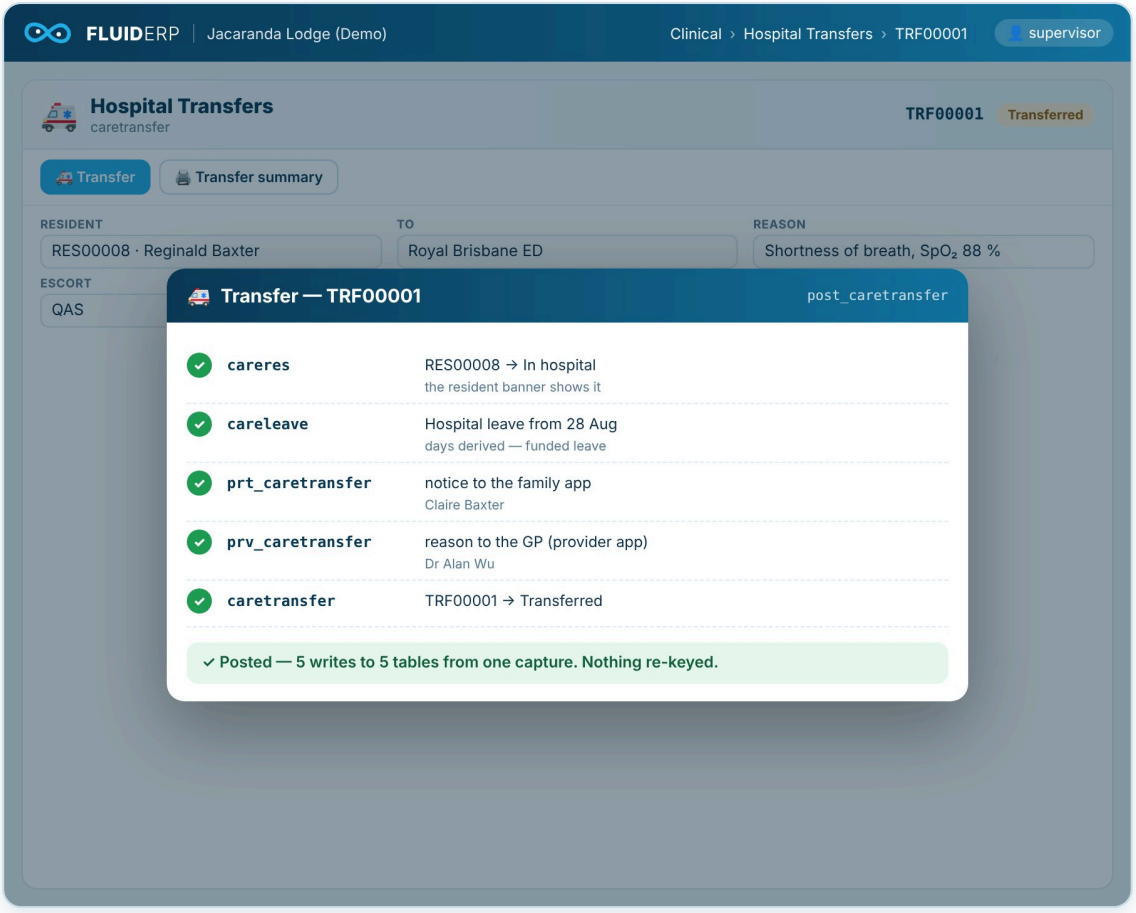


Peter O'Brien ticks Consent Confirmed for RP00003; only the consent fields travel back.

1. Sign in to the provider app.
2. Open the practice awaiting consent, read it and tick **Consent Confirmed**.
3. The staff row updates within a minute. The app can change only the consent fields.

Transfer a resident to hospital

Who **registered nurse** | Where **Clinical › Hospital Transfers** | Table **caretransfer**



TRF00001: Reginald Baxter to hospital — status, leave, family and GP notices in one press.

1. Record the reason, observations and the time the ambulance was called.
2. Press 🚑 **Transfer to hospital**.
3. Print the **transfer summary** for the ambulance (chapter 9).

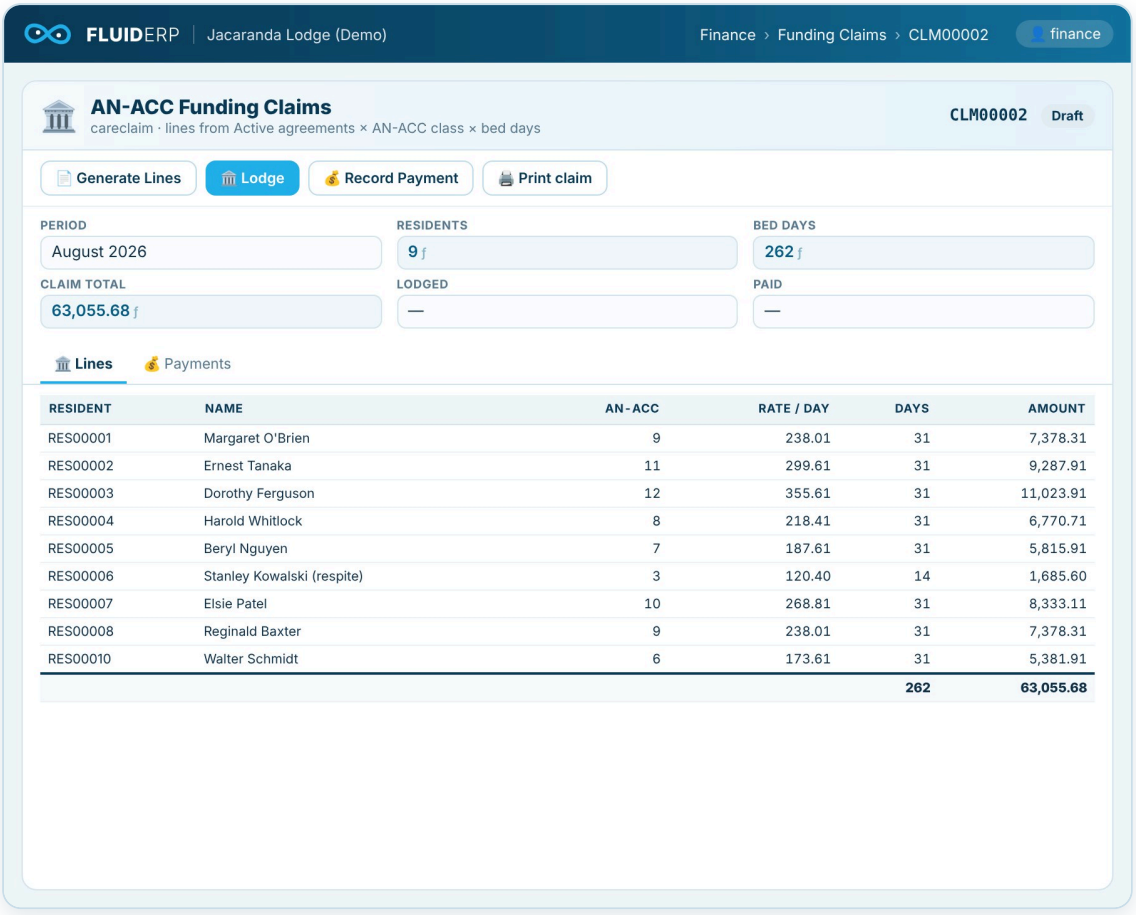
What 🚑 Transfer to hospital writes	transfer_resident
✓ **caretransfer**	TRF00001 → Transferred
✓ **careres**	Reginald → In hospital
✓ **careleave**	Hospital leave starts (still counts for funding)
✓ **prt_caretransfer**	Notice on the family's app
✓ **prv_caretransfer**	Reason to the GP

7 Funding claims, deposits and fees

The claim is generated from the agreements; lodging and payment post the ledger. Deposits are liabilities, not income.

Generate the claim lines

Who **finance** | Where **Finance › Funding Claims** | Table **careclaim · careclaimlines**



CLM00002: nine residents, 262 bed days, generated from the agreements.

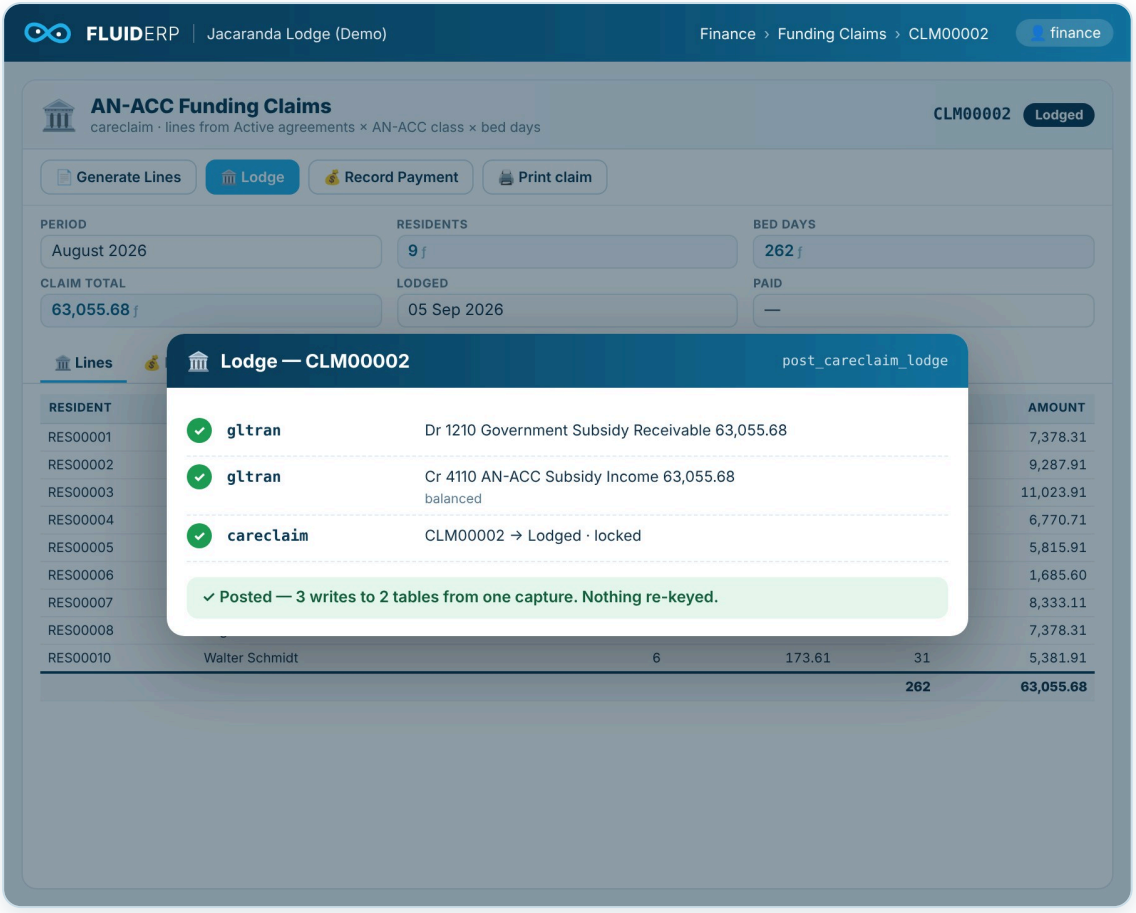
1. Create the claim for the month and press 📄 **Generate Lines**.
2. Every Active agreement for a government-funded or respite resident becomes a line: bed days × the resident's class rate. Private residents are skipped by the rule.
3. Check the total ($63,055.68 in the example).

If the system refuses

YOU SEE	WHAT IT MEANS / WHAT TO DO
Lines already generated — nothing written	Delete the Draft lines first if the agreements changed.

Lodge the claim

Who **finance** | Where **Finance › Funding Claims** | Table **gltran**



Lodging posts the receivable and locks the claim.

1. Enter the **lodged date**.
2. Press 🏛 **Lodge**.

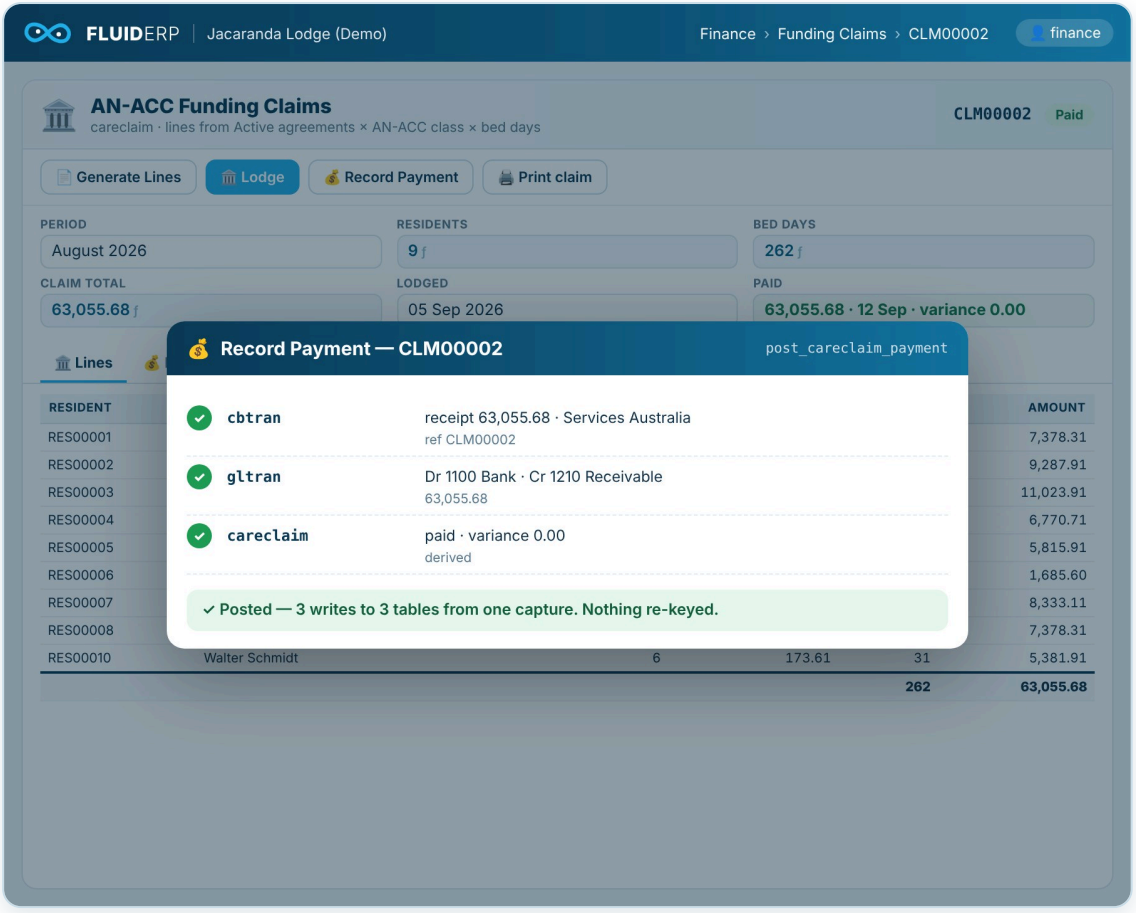
What 🏛 Lodge writes	`lodge_careclaim`
✓ **`gltran`**	Dr 1210 Government Subsidy Receivable 63,055.68
✓ **`gltran`**	Cr 4110 Subsidy income 63,055.68
✓ **`careclaim`**	Status Lodged · locked

If the system refuses

YOU SEE	WHAT IT MEANS / WHAT TO DO
A lodged date is required	Enter the date before lodging.
The claim is locked	Lodged claims are not edited. Raise an adjustment claim.

Record the payment

Who **finance** | Where **Finance › Funding Claims** | Table **cbtran · gltran**

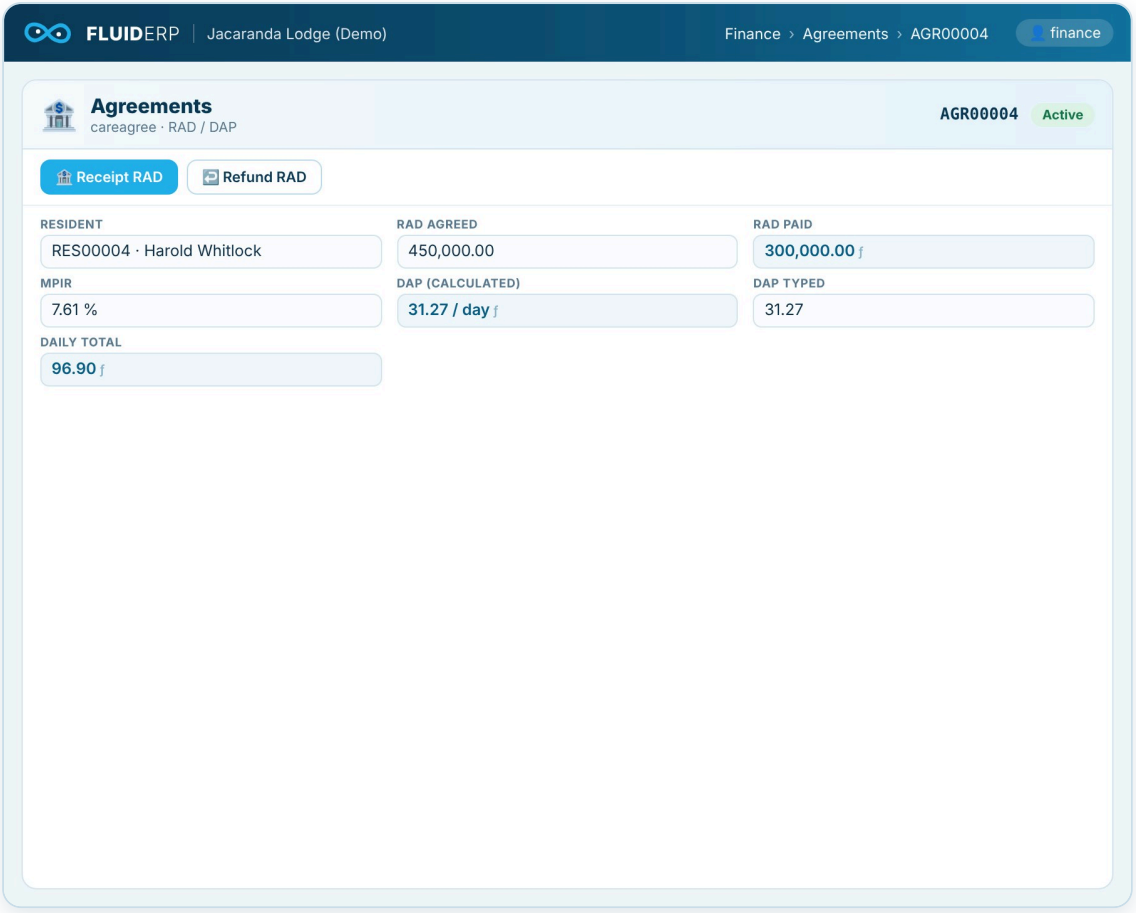


Record Payment writes the cashbook and clears the receivable; the variance is derived.

What 💰 Record Payment writes	pay_careclaim
✓ **cbtran**	Receipt from Services Australia
✓ **gltran**	Dr 1100 Bank · Cr 1210 Receivable
✓ **careclaim**	Paid amount and variance

Receipt a refundable deposit

Who **finance** | Where **Finance › Agreements** | Table **careagree · cbtran · gltran**



AGR00004: a $300,000 RAD to 2510 RAD Held; the DAP on the unpaid balance is re-derived (93.82 → 31.27 a day).

1. Open the resident's agreement and press 🏦 **Receipt RAD** with the amount.
2. The receipt is posted Dr bank · Cr 2510 RAD Held — a liability.
3. The daily accommodation payment is recalculated as (RAD − paid) × MPIR ÷ 365 and flagged if the typed DAP disagrees.

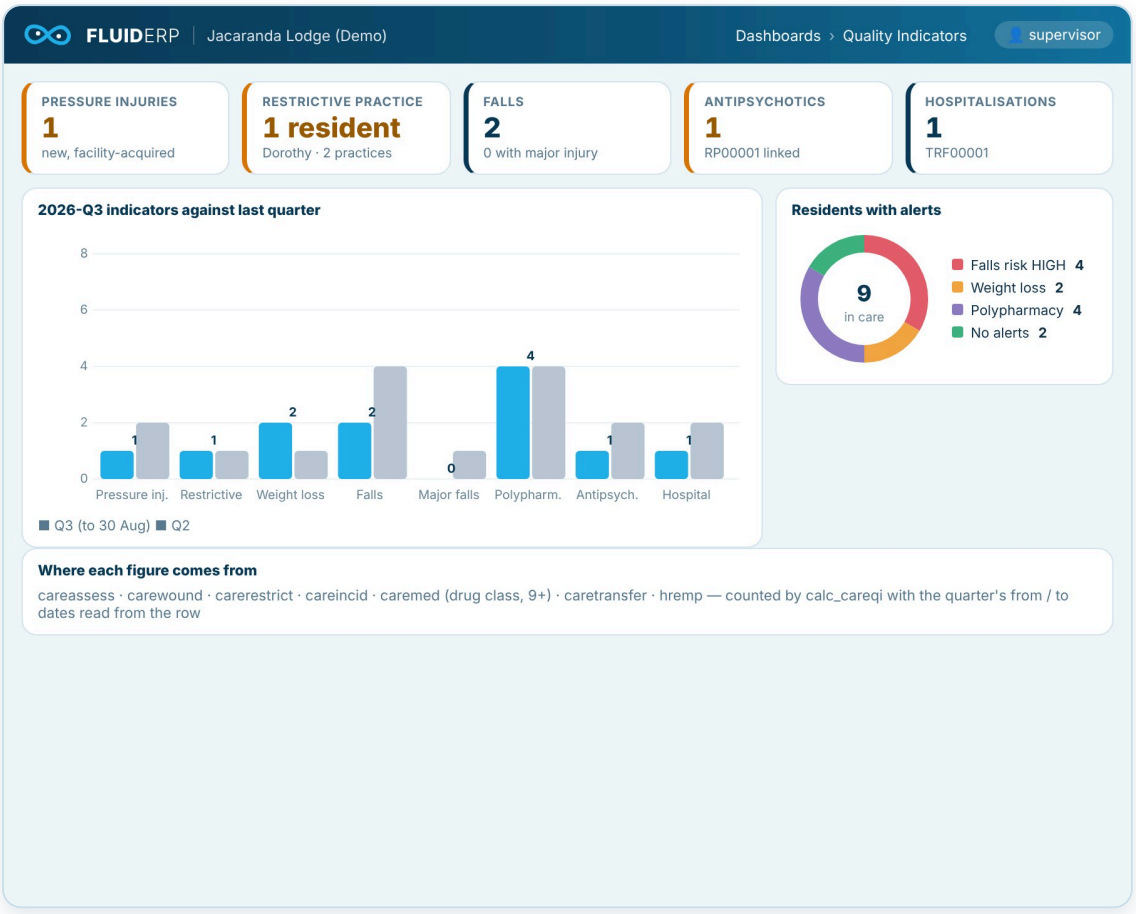
8 Critical dashboards

Four dashboards answer: how is the quarter tracking, are care minutes met, who needs attention today, and what is the funding position.

Quality Indicators

Where **Dashboards › Quality Indicators** | Who **supervisor, DON**

The QI quarter as one derived row: pressure injuries, restrictive practice, weight loss, falls, polypharmacy, antipsychotics, hospitalisations and turnover, counted from the registers between the quarter's dates.



Quality Indicators

What each tile is and where it comes from

Falls
Incidents of type fall in the quarter (and with major injury).
`careincident`

Pressure injuries
New wounds of type pressure injury, by stage.
`carewound`

Restrictive practice
Residents with an active practice.
`carerestrict`

Antipsychotics
Residents on an antipsychotic, linked to their practice.
`caremed · carerestrict`

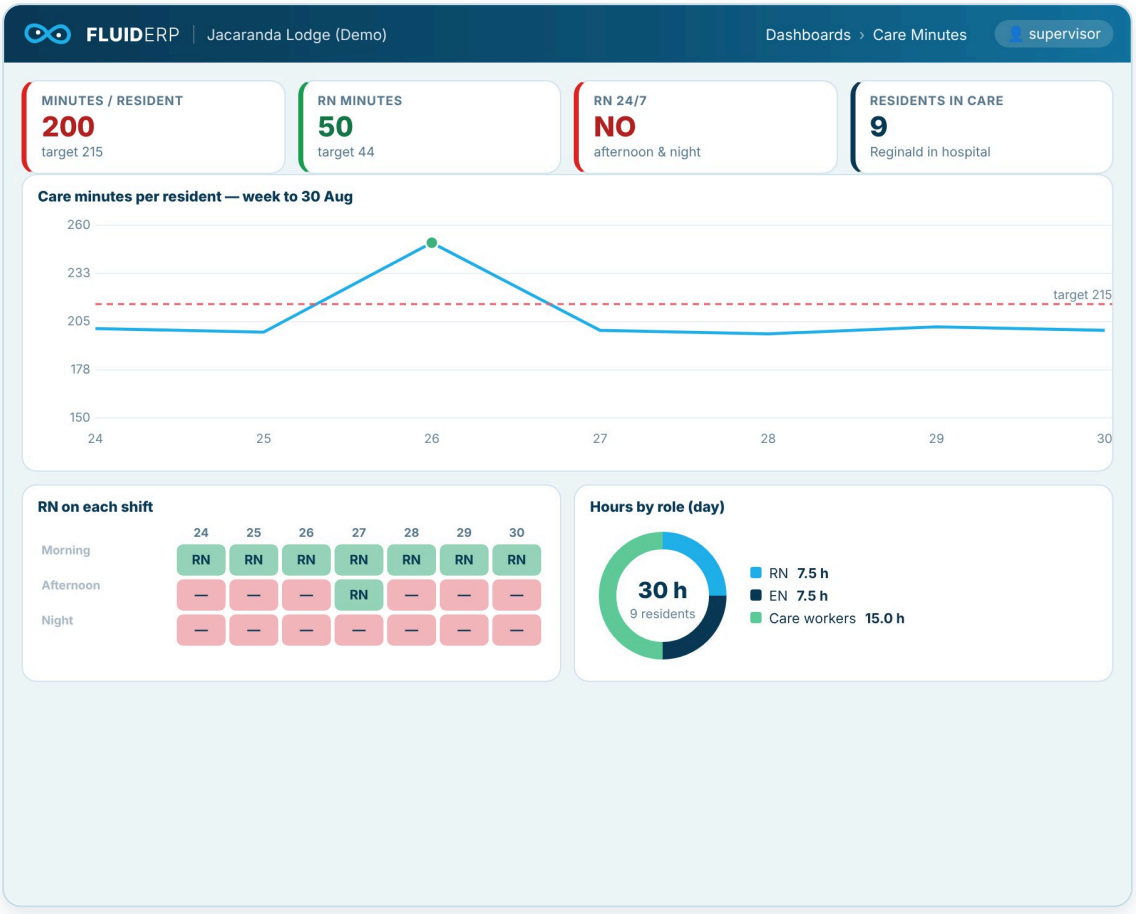
Hospitalisations
Transfers in the quarter.
`caretransfer`

ACT ON IT
The return is ready the day the quarter ends; print it from Reports › QI Quarterly.

Care Minutes

Where **Dashboards › Care Minutes** | Who **DON, payroll**

Daily care minutes from the roster's hours by role and the residents in care, against the targets.



Care Minutes

What each tile is and where it comes from

Minutes / resident
Total care hours × 60 ÷ residents in care (200 against 215).
`roster hours · careres`

RN minutes
RN hours × 60 ÷ residents (50 against 44).
`roster hours by role`

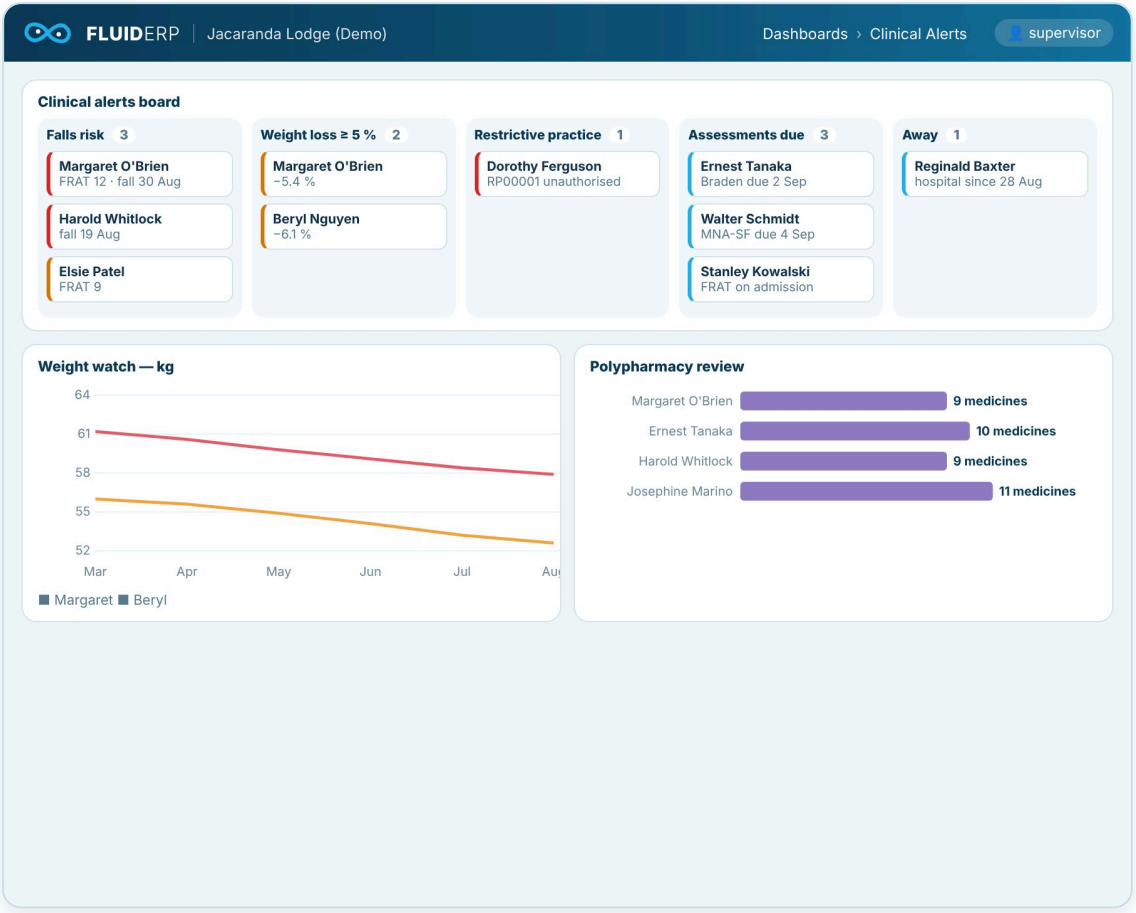
RN 24/7
An RN rostered on every shift, every day.
`roster by shift`

ACT ON IT
A red RN 24/7 flag is fixed in the roster, not on the dashboard.

Clinical Alerts

Where **Dashboards › Clinical Alerts** | Who **supervisor, RNs**

The morning list: derived banners, weight watch and assessments due.



Clinical Alerts

What each tile is and where it comes from

Alerts by type
Residents per alert (falls HIGH, weight loss, polypharmacy).
`careres.alerts`

Weight watch
Residents with a loss over the threshold.
`careweight`

Assessments due
Next-due dates in the next 7 days.
`careassess.next_due`

Funding & Finance

Where **Dashboards › Funding & Finance** | Who **finance, manager**

Claims, deposits held, occupancy and fees from the posted rows.



Funding & Finance

What each tile is and where it comes from

Claim
Lodged and paid this month.
`careclaim`

RAD held
Balance of 2510.
`gltran`

Occupancy
Residents in care ÷ beds (10 of 24 in the demo).
`careres · beds`

Fees receivable
Open resident fee invoices.
`sltran`

9 Reports

The care edition ships clinical, quality, funding and finance reports alongside the core ledger reports.

Running and printing a report

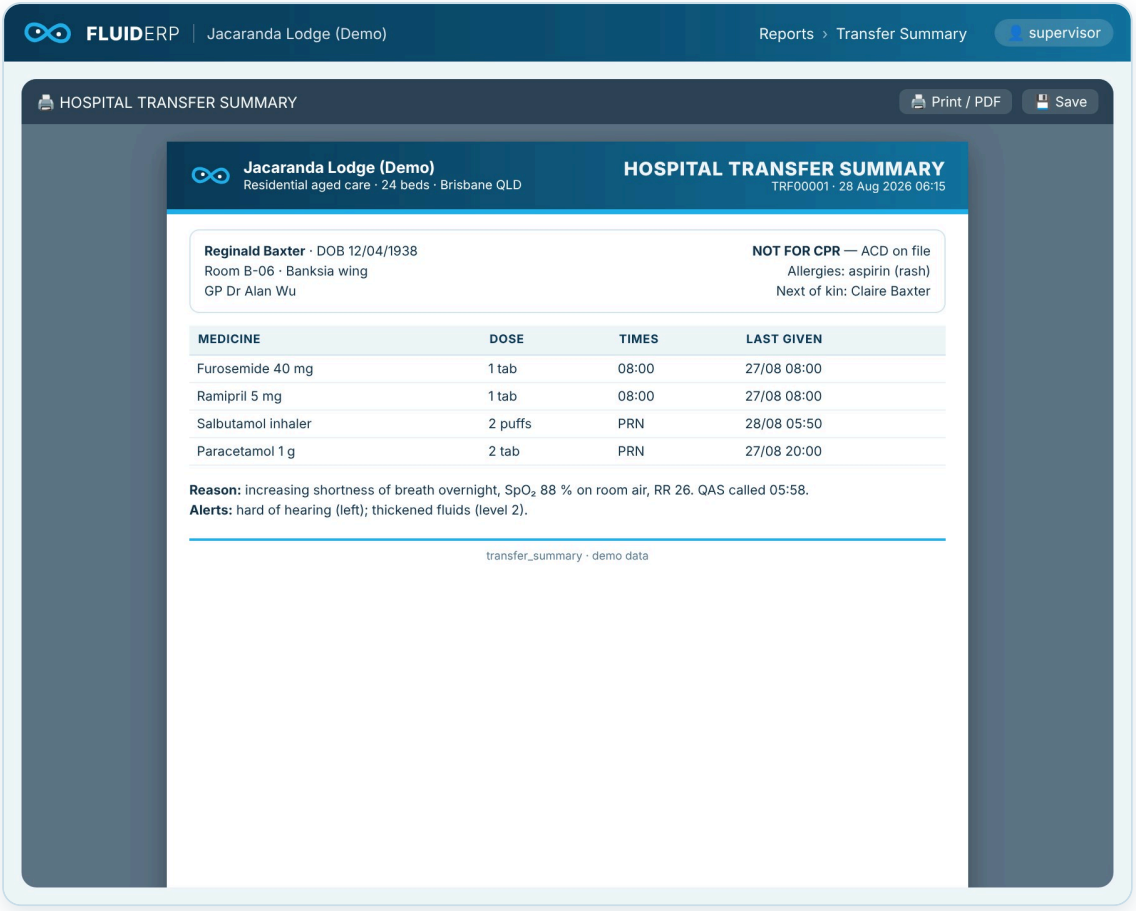
1. Open 🖨️ **Reports** on the launcher (or the report's own tile) and pick the report.
2. Fill the parameters. Required parameters are marked; dates accept `$today`-style defaults and lookups show "value — description".
3. Press ▶ **Run**. The report draws its shape — grid with subtotals, chart, pivot, calendar, Gantt, board or tree — from the live rows.
4. Press 🖨️ **Print** to open the printed copy (letterhead, document header, footer) in the document viewer, then 🖨️ **Print / PDF** or 💾 **Save**. Reports with a file layout also offer 💾 **Export File**.

Report catalogue

REPORT	SHOWS	TYPICAL READER
Transfer Summary	Resus status, allergies, alerts and medicines for the ED	RNs, ambulance
QI Quarterly	The quality-indicator return	DON, regulator
Care Minutes	Daily minutes by role with RN 24/7	DON, regulator
Funding Claim	Claim lines by resident, class and bed days	finance
Assessments Due	Worklist by next due date	RNs
S8 Register	Bound register with balances	pharmacist, auditor
Incident Register	Incidents with SIRS priority and deadlines	DON
Restrictive Practices	Authorisation and consent status	DON, auditor
Trial Balance	Core ledger	finance

Transfer summary

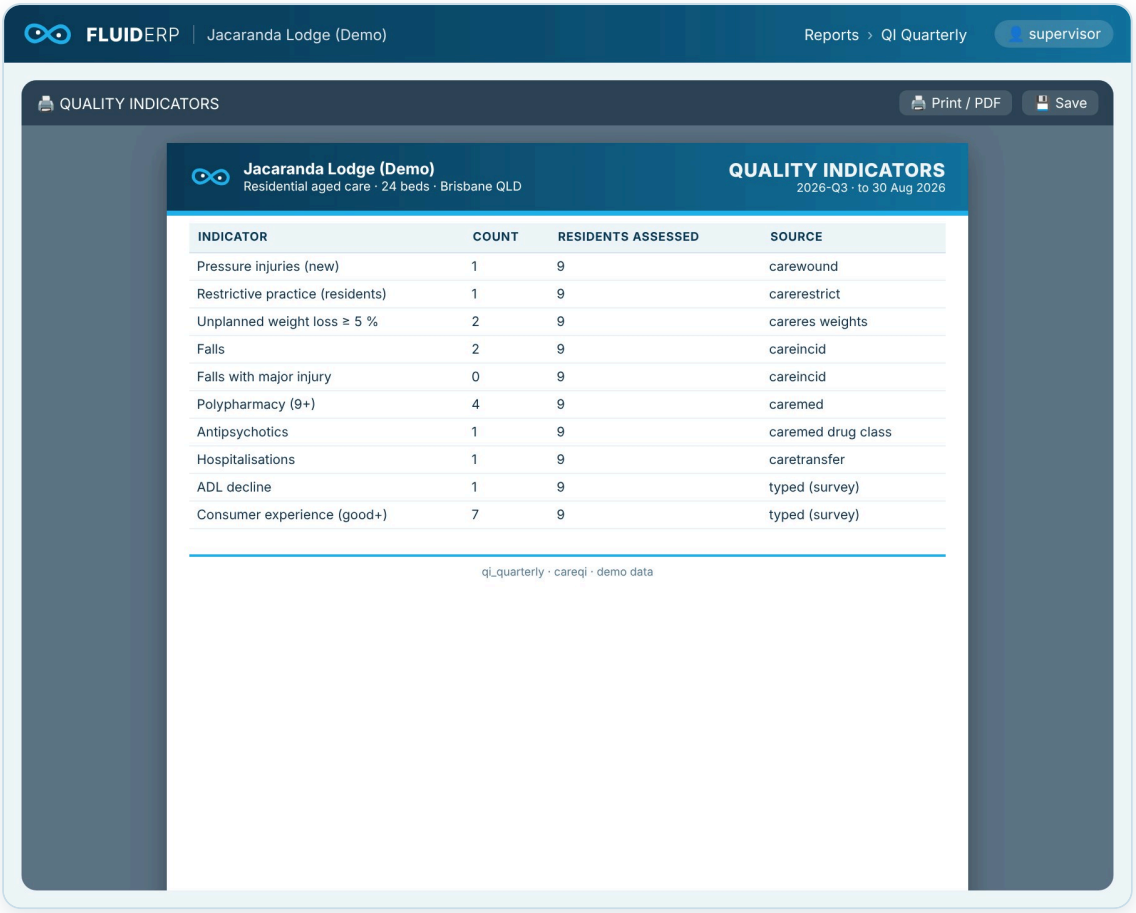
Printed from the resident and the medication chart, with the GP in the header — what the emergency department asks for.



Transfer summary

QI quarterly return

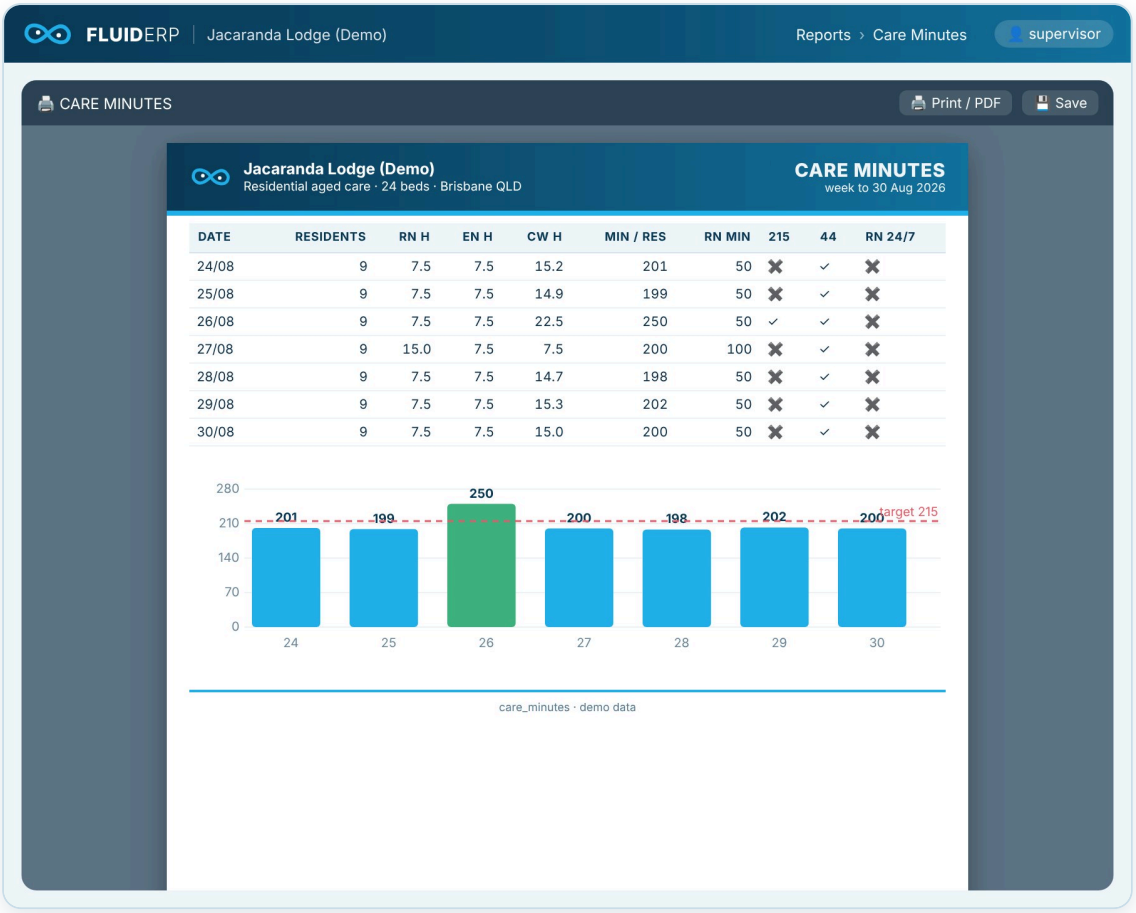
One page per quarter: the derived counts and the typed survey results together.



QI quarterly return

Care minutes report

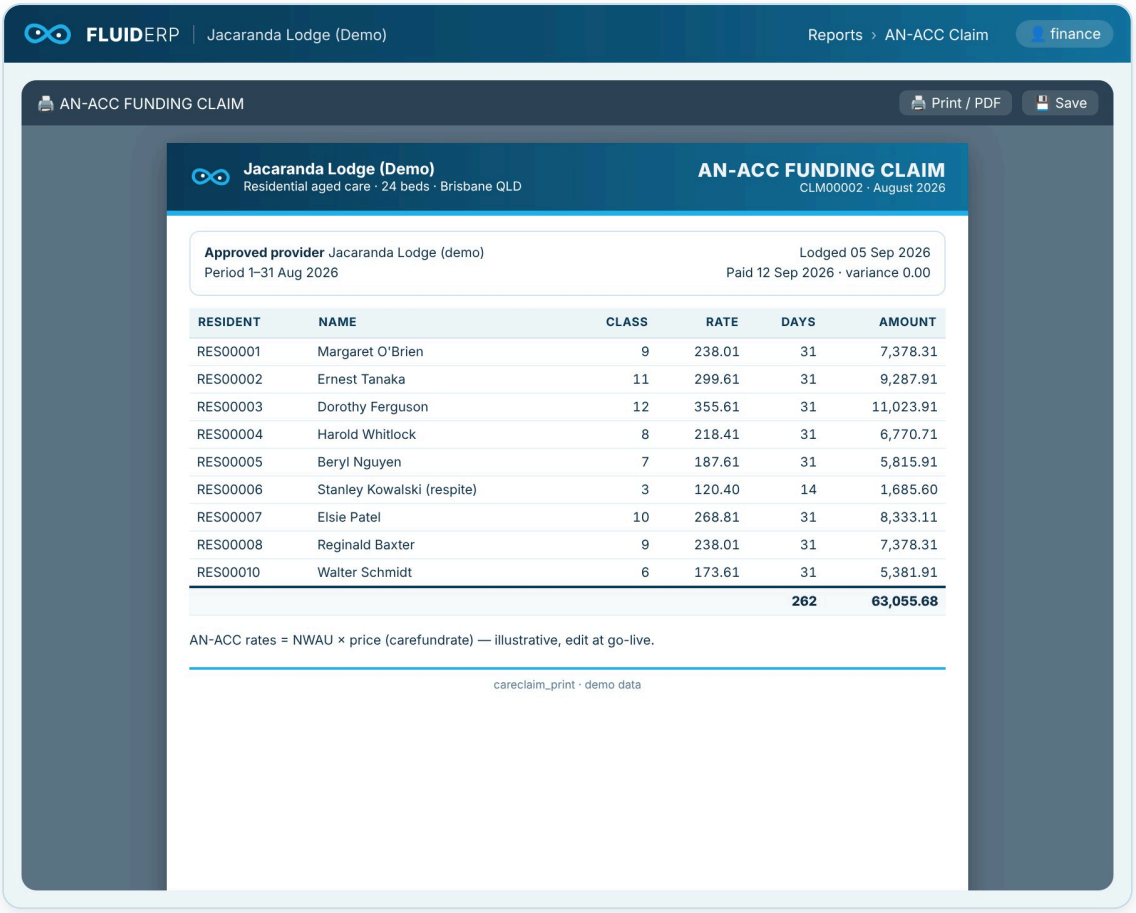
Daily rows for the quarter, with the RN 24/7 column that explains any gap.



Care minutes report

Funding claim

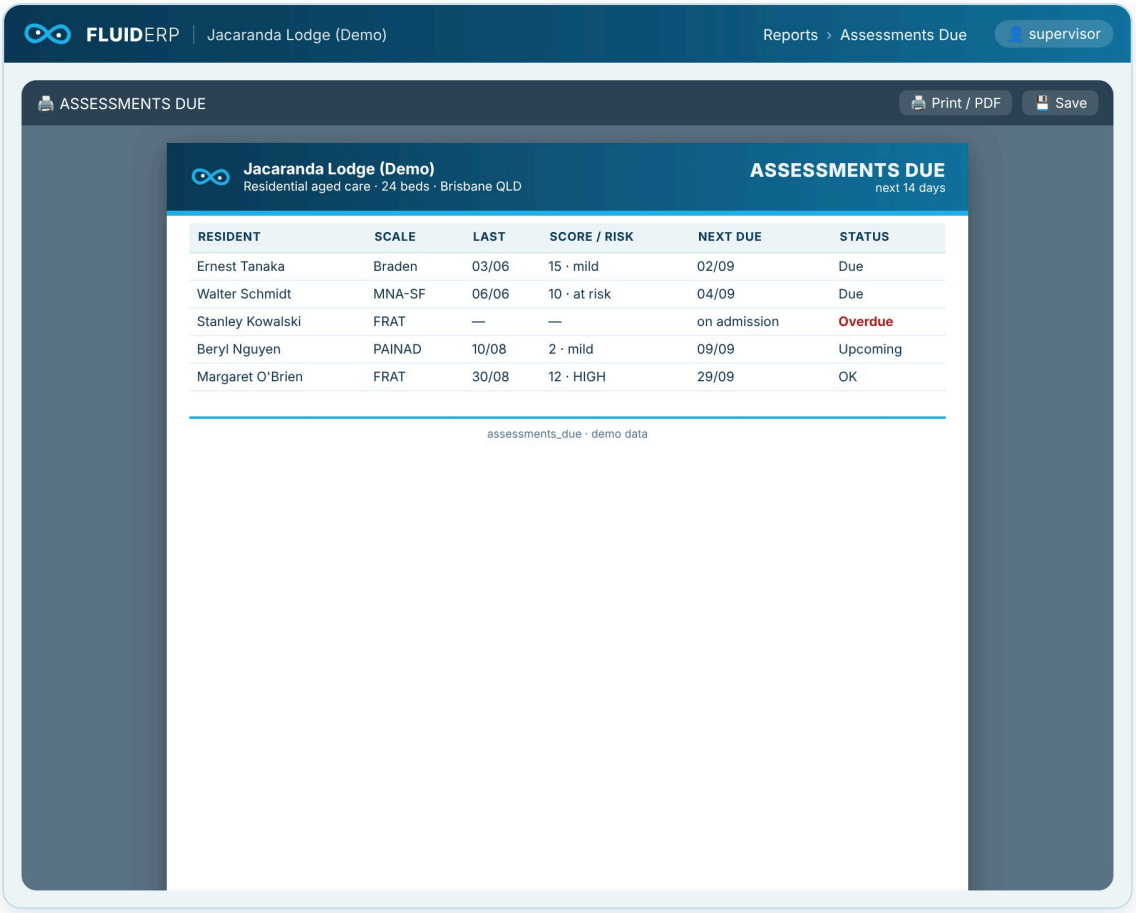
Resident, class, rate, bed days and amount — the same rows as the lodgement file.



Funding claim

Assessments due

Every scale's next due date is calculated, so the worklist is always current.



Assessments due

10 Matching

A matching screen sets two lists side by side — for example bank statement lines and cashbook entries — and pairs the rows that belong together. Matching is a definition (`tblmatchdef`): it names the two sides, the fields to compare, the tolerances and what a confirmed match writes.

How every matching screen works

1. Open the matching screen from its 🔀 tile on the launcher, or with 🔀 **Match** on a form that takes part in it.
2. 🔄 **Auto Match** runs when the screen opens. Rows that meet the rule are paired and arrive **pre-ticked** in green.
3. Read the **summary strip**: how many pairs, how many unmatched on each side, and any outstanding amount.
4. Untick any pair you do not accept. To pair rows by hand, tick one row on each side and press 🔗 **Match Selected**. ✖ on a pair puts both rows back.
5. Press ✔ **Confirm Ticked**. Both sides are stamped (so they never match again), a session record is written, and the reconciliation report opens in the document viewer.

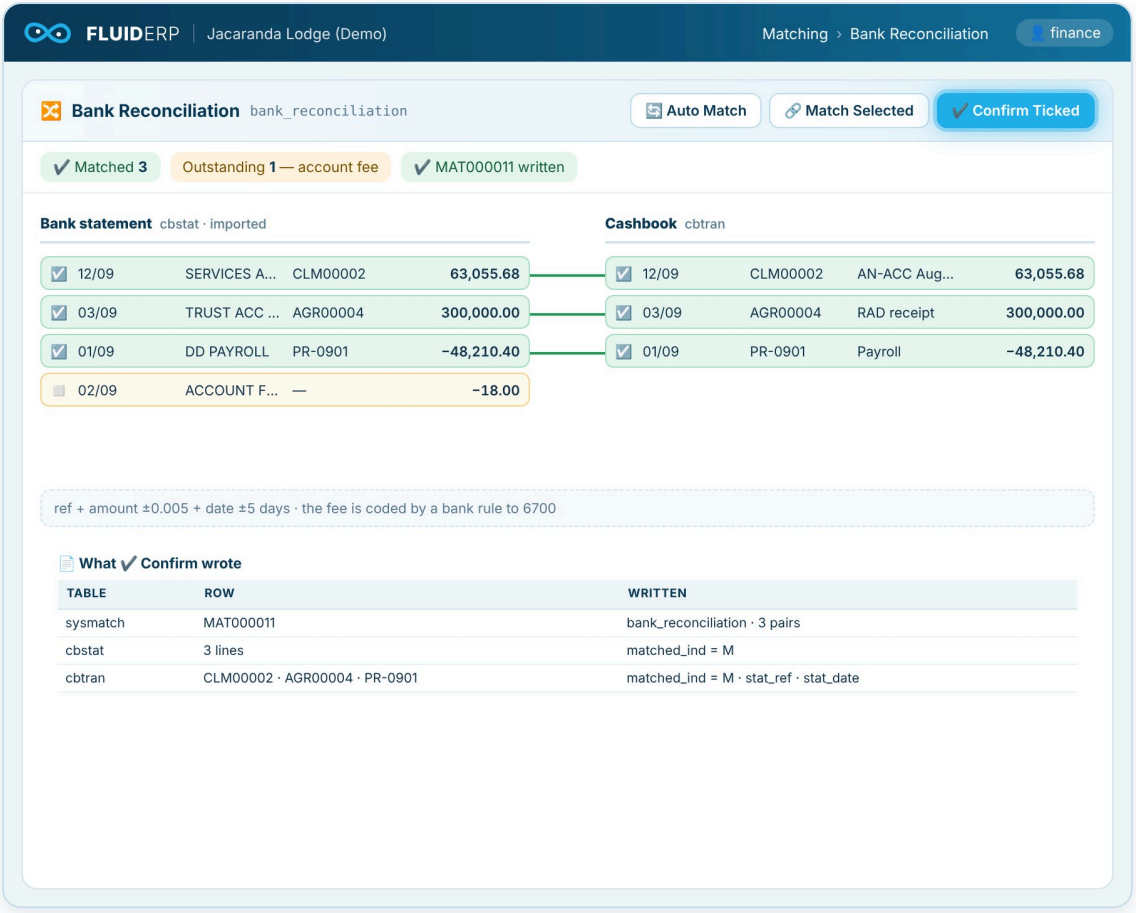
What ✔ Confirm Ticked writes	matching definition · confirm
✓ `sysmatch`	the session header — definition, who, when, number of groups (MAT number)
✓ `sysmatchlines`	one line per row in each confirmed group
✓ `each side`	the stamp field (for example matched_ind = M) and any counterpart fields the definition copies across

UNMATCHED IS INFORMATION

What is left after Auto Match is the exception list: an unexplained bank fee, a payment with no reference, a count that disagrees. Deal with those, not with the hundreds of rows that matched.

Bank reconciliation

Who **finance** | Where **Matching › Bank Reconciliation**



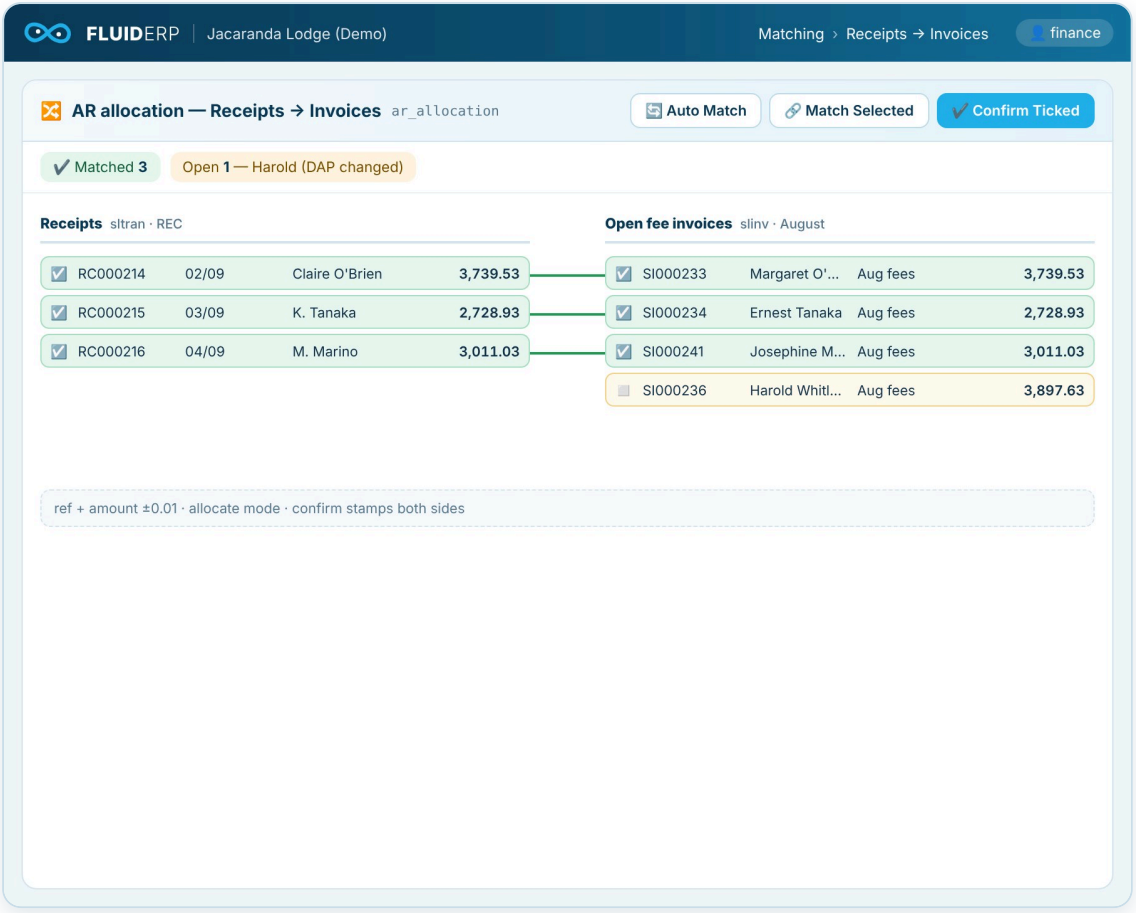
The subsidy payment, the RAD and payroll pair with the cashbook; the account fee is left for a bank rule.

1. Import the bank statement once (cbstat).
2. Press 🔄 **Auto Match**: reference + amount ±0.005 + date ±5 days.
3. Review the pairs and press ✔ **Confirm Ticked**. Code the leftover bank fee with a bank rule.

What ✔ Confirm writes	bank_reconciliation
✓ **sysmatch**	Match group
✓ **cbstat**	Statement lines matched
✓ **cbtran**	Cashbook lines matched with statement ref and date

Resident fees: receipts to invoices

Who **finance** | Where **Matching › Receipts → Invoices**



Three family payments pair with their August invoices; Harold's stays open because his DAP changed.

1. Press 🔄 **Auto Match**; payments pair with invoices by reference and amount, oldest first.
2. Open items are the exception list for follow-up.
3. Press ✔️ **Confirm Ticked**.

11 Messages, refusals and what to do

FLUID refuses an action rather than let a figure go wrong. Every refusal names its rule. These are the ones you will meet on this platform.

MESSAGE (IN SHORT)	WHY	WHAT TO DO
A witness is required for a Schedule 8 medicine	S8 doses need two signatures.	Enter a witness.
The witness cannot be the person giving the dose	Segregation of duties.	Choose another staff member.
Already signed — nothing written	The register line exists.	Open the S8 register.
A lodged date is required	Lodging posts the receivable on that date.	Enter the date.
The claim is locked	Lodged claims cannot be edited.	Raise an adjustment claim.
Lines already generated	Generate Lines runs once per claim.	Delete Draft lines if agreements changed.
⚠ Unauthorised (restrictive practice)	Authorisation, consent or review is missing.	Obtain the missing item; the flag clears itself.
The app can change only the consent fields	Provider-app rights are limited.	Staff change everything else.

12 Data reference and glossary

Tables you will meet

TABLE	HOLDS	WRITTEN BY
careres	Residents and their derived banner	admissions; calculations
careassess	Assessments, scores, risk, next due	nurses
caremar	Doses given, refused, withheld	the round
cares8	S8 register	🔐 Sign S8 Register
stktran · stkitem	Stock movements and balances	buttons
careincident	Incidents and SIRS	staff
carerestrict	Restrictive practices, authorisation, consent	supervisor; provider app
caretransfer · careleave	Transfers and leave	🚑 Transfer
careagree	Agreements, RAD and DAP	finance
careclaim · careclaimlines	Funding claims and lines	📄 Generate Lines; 🏛️ Lodge
gltran · cbtran · sltran	Ledger, cashbook, receivables	posting buttons
sysmatch	Match groups	matching screens

Glossary

TERM	MEANING
AN-ACC	Australian National Aged Care Classification — the funding class of each resident.
NWAU	National weighted activity unit — the class weight multiplied by the price.
RAD	Refundable accommodation deposit — held as a liability.
DAP	Daily accommodation payment on the unpaid part of the RAD.
MPIR	Maximum permissible interest rate used to calculate the DAP.
S8	Schedule 8 (controlled) medicine.
SIRS	Serious Incident Response Scheme.
FRAT	Falls risk assessment tool.
EPOA	Enduring power of attorney (the substitute decision-maker).
Capture	Recording something once — by form, phone app, file or feed.
Posting button	An aqua button that writes rows to other tables from the record in front of you.
Posted · sealed	The record has been posted; the button is one-way and a second press writes nothing.

TERM	MEANING
Calculated field (ƒ)	A read-only field the calculation engine keeps up to date.
Reference	The source record number carried on every row a button writes.
Matching definition	The rule for pairing rows of two tables and what confirming writes.
Session (MAT…)	The record of one confirmed matching run.
Gateway	The server that checks every read and write against the rules for your group.

A Walk it once on the demo package

The Jacaranda Lodge package is installed with the residents, chart, registers and agreements in place at 30 August 2026.

Registered nurse

1. Assessments: score a FRAT for Margaret; see her banner change.
2. eMAR: give Harold's oxycodone with a witness → 🔐 Sign S8 Register; open the register (balance 22).
3. Try signing with yourself as witness — refused.

Supervisor and family

1. Restrictive Practices: RP00001 shows ⚠ Unauthorised.
2. Provider app (peter.obrien@example.com): confirm consent on RP00003; the staff row updates.
3. Hospital Transfers: TRF00001 → 🚑 Transfer; print the transfer summary.

Finance

1. Funding Claims: CLM00002 → 📄 Generate Lines → 🏛️ Lodge → 💰 Record Payment.
2. Agreements: AGR00004 → 🏦 Receipt RAD; DAP re-derived.
3. Matching: bank reconciliation, then receipts → invoices; Trial Balance.

For the administrator

TASK	HOW
Deploy	Import the care package and the provider-app cluster; run the self-test.
Prices	Load the current AN-ACC price and class weights before the first claim; the demo values are illustrative.
Schedules	Calculations every 5 minutes; QI quarter and care-minute rows nightly.
Bridges	Provider-app consent and family notices travel by bridge; check the bridge log after go-live.