Arcare Hillside

Performance Report

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**Commission ID:** 3569

**Provider name:** Arcare Pty Ltd

**Site Audit date:** 3 August 2021 to 6 August 2021

**Date of Performance Report:** 10 September 2021

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

## Assessment of Standard 1

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation for alignment with the feedback, and testing staff understanding and application of the requirements under this Standard. The Assessment Team also examined other relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Overall, consumers consider that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the lives they choose.

Consumers confirmed are treated with dignity and respect and their individual identity, culture and diversity is valued. Consumer and representative feedback demonstrated consumers feel supported to maintain relationships and to exercise choice and independence in relation to decisions about their care and connections with others. Consumers expressed satisfaction with the information they receive being current and up to date and gave examples of how this supports choice as part of their daily lives. Consumers said they feel comfortable and confident their personal privacy, including the confidentiality of personal information, is respected.

Staff demonstrated knowledge of individual consumers’ needs and preferences enabling them to provide care and services in line with consumers’ wishes. Staff demonstrated how consumer information is stored securely and the confidentiality of personal information is maintained. Clinical and care staff described how risk assessments are completed for consumers who wish to take risks and how the service supports them to understand the impact or potential harm that may result.

Processes, supported by organisational policies and procedures, are in place to ensure care documentation reflects consumers’ choices. Individual consumers’ care plans contain strategies to support relationships with key people in their lives.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

1. *make decisions about their own care and the way care and services are delivered; and*
2. *make decisions about when family, friends, carers or others should be involved in their care; and*
3. *communicate their decisions; and*
4. *make connections with others and maintain relationships of choice, including intimate relationships.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

### I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

### Organisation statement:

1. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

## Assessment of Standard 2

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewing their care planning documents in detail, asking consumers about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.

Overall, consumers consider that they feel like partners in the ongoing assessment and planning of their care and services. Consumers and representatives said they are involved in assessment and care planning, and staff explain consumers’ care. Consumers said they feel a part of care planning and they are supported to seek care through other organisations as they need. Consumers and representatives said they have been provided with a copy of the consumer’s care plan or are able to access it if they wish.

Staff said they know what is important to consumers from the care files, and reported they support consumers to engage in care planning.

Assessments are comprehensive and identify any risks to consumers’ health and well-being, and inform care plans with individualised care strategies to manage risk, and deliver safe and effective care. Consumer care files were reviewed and found to have advance care plans which document individual consumers’ preferences and values at the end of life. Ongoing partnership and engagement of representatives and consumers was demonstrated through documentation of case conferences, phone calls, face to face consultation and three-monthly care plan evaluations. Recommendations and issues arising from these discussions are updated in care plans and progress notes.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

1. *is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and*
2. *includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.*

### Requirement 2(3)(d) Compliant

*The outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.*

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 COMPLIANT Personal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers. Consumers and representatives were interviewed and consumers’ care plans and assessments were reviewed. Staff were asked about how they ensure the delivery of safe and effective care for consumers. The Assessment Team also examined other relevant documents.

Overall, consumers consider that they receive personal care and clinical care that is safe and right for them.

Consumers and representatives provided positive feedback about the clinical and personal care consumers receive and said it meets consumers’ needs. Consumers and representatives said consumers are able to access medical practitioners and other providers of care when they need to, and the service supports them to do this. Representatives said the communication where care is shared is of a good standard.

Staff were able to identify risks to individual consumers and how they provide care which minimises or prevents these risks. Information provided was in line with consumers’ care plans. Staff described infection control measures relevant to their roles, and provided examples of practical strategies they use to minimise infection transmission and antibiotic use. Although no consumers were identified as recently or currently receiving end of life care, staff were able to describe practical care strategies which focus on consumer dignity and comfort.

Care planning documents demonstrated care is best practice and aligns with policies related to clinical governance, is tailored to individual consumer needs and safe and effective in optimising consumer wellbeing. Care files were sampled in relation to the risk of falls, compromised nutrition and medication management. They demonstrated evidence of assessment of high-prevalence or high-impact risks to the consumer and preventative strategies to manage these. Care files provided evidence the service recognises deterioration in the physical or mental condition of consumers, and responds in a timely manner. Care planning documents demonstrated consumers are referred to other professionals and services and receive input that is timely and appropriate.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

*The needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.*

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

### Requirement 3(3)(e) Compliant

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

1. *standard and transmission based precautions to prevent and control infection; and*
2. *practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.*

# STANDARD 4 COMPLIANT Services and support for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers. – The Assessment Team made observations and asked consumers about the things they like to do and how these things are enabled or supported by the service. Staff were asked about their understanding and application of the requirements and the Assessment Tean also examined relevant documents.

Overall, consumers consider that they get the services and supports for daily living that are important for their health and well-being, and that enable them to do the things they want to do.

Consumers and representatives confirmed consumers are offered a range of activities which meet their needs within the service. These include both individual and group activities which are coordinated by lifestyle staff. Consumers were able to describe how they keep in touch with people who are important to them and these relationships are recorded in their care plans. Consumers and representatives are satisfied with the quality, variety and quantity of the meals. However, some consumers who dine in their rooms, gave feedback meals have been cold and the service is putting strategies in place to address this issue. Consumers and representatives are satisfied the service provides support to consumers to access the wider community, and that referrals to external services are made in a timely manner.

Staff are satisfied they are made aware of changes to consumer needs and preferences in a timely manner. Staff have access to appropriate equipment when it is needed and described established systems for cleaning and servicing of equipment in line with manufacturers’ instructions.

A lifestyle activities program is run on weekdays across the service, with a variety of activities aimed at suiting the needs of individual consumers. Lifestyle staff also provide support to consumers who choose not to participate in organised, group activities. Care planning documentation identifies consumers’ lifestyle needs and preferences and is updated when consumers’ needs change. The Assessment Team observed group lifestyle activities in progress as well individual lifestyle activities provided by staff.

Consumers’ care planning documents reflected the involvement of others in the provision of lifestyle supports. The lifestyle coordinator described how they work with external organisations to help supplement the lifestyle activities offered within the service.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*Each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

1. *participate in their community within and outside the organisation’s service environment; and*
2. *have social and personal relationships; and*
3. *do the things of interest to them.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

### Organisation statement:

1. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

## Assessment of Standard 5

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The Assessment Team also examined relevant documents.

Overall, consumers considered that they have a sense of belonging in the service, and feel safe and comfortable in the service environment.

Consumers commented they feel at home, and representatives said they feel welcome when they visit the service. Consumers provided feedback they find the service environment safe and well-maintained, and there are multiple, shared indoor and outdoor areas in which consumers and their visitors can interact. Consumers expressed their satisfaction on the cleanness of their environment and that furniture and equipment is safe and fit for purpose.

Observations confirmed furniture, fittings and equipment are safe, suitable and well-maintained.

The service ensures preventative and reactive maintenance occurs. Staff were able to describe how requests for maintenance are submitted and actioned. Staff explained how equipment is cleaned before and after use.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

*The service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.*

### Requirement 5(3)(b) Compliant

*The service environment:*

1. *is safe, clean, well maintained and comfortable; and*
2. *enables consumers to move freely, both indoors and outdoors.*

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANT Feedback and complaints

### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

### Organisation statement:

1. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

## Assessment of Standard 6

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The Assessment Team also examined the complaints register and complaints trend analysis, and tested staff understanding and application of the requirements under this Standard.

Overall, consumers consider that they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken.

The majority of consumers interviewed, who have not made formal complaints, stated they are comfortable raising concerns about care and services and feel confident action will be taken. Consumers who have raised concerns with management said they are satisfied with management’s responses. However, two representatives have not been satisfied with responses to their concerns to date, and management is continuing to work with them and the consumers, to resolve the issues. Consumers and representatives are satisfied with the available ways of resolving complaints and said they can raise complaints by filling in a feedback form, raising issues at the ‘resident’ meeting or by talking to the manager. Consumers said staff talk to them when something goes wrong and they are happy with the way the service responds to incidents.

Management said complaints data are reported to the Board and the quality team for monthly review. The residential service manager reviews complaints daily, and follows up on staff actions in response to issues relevant to the individual consumer. Management said the service reviews complaints and uses the information to make improvements in the provision of care and services.

The service has written materials and information displays which inform consumers and representatives about how to make complaints and access advocacy and language services.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANT Human resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

1. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Overall, consumers consider that they get quality care and services when they need them, and from people who are knowledgeable, capable and caring.

Consumers and representatives confirmed staff are respectful, kind and caring and said staff are available most of the time when they need them. Consumers and representatives confirmed the service’s staff know what they are doing in relation to consumers’ personal care needs. However, less positive feedback was provided in relation to agency staff. Consumers and representatives said, while they feel staffing numbers could be better, staff do the best they can to ensure consumers are assisted in a timely manner.

Management described how staff are recruited to meet the requirements of their roles and how they support and monitor staff competency. Management said the organisation has mandatory training modules including manual handling, hand hygiene and infection control, identifying elder abuse and preventing pressure injuries. Management explained how they use regular feedback from consumers to identify staff training needs.

Staff confirmed there is ongoing monitoring and review of the performance of each staff member. All staff stated they have attended, or are scheduled to attend a performance appraisal with the residential service manager.

The service has recruitment processes in place to ensure quality and experienced staff have the qualifications, skills, and knowledge to successfully complete their jobs. The service demonstrated the workforce is recruited to specific roles, qualified, trained and equipped to undertake these roles and supported to deliver quality outcomes for consumers. The service monitors and reviews staff performance in relation to the requirements of the Quality Standards.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

*The workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.*

### Requirement 7(3)(d) Compliant

*The workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.*

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANT Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff, and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services as assessed through other Standards.

Overall, consumers consider that the organisation is well run and that they can partner in improving the delivery of care and services.

A representative who provided feedback in relation to governance said the service is well run and provided examples of how they had been involved in the design of the consumer’s room.

Management provided examples of the ways in which consumers are engaged in the design, development and evaluation of care and services.

The service has an effective incident management and reporting system which captures relevant information and identifies risks to consumers and their care. Analysis of incidents and other clinical data identifes trends and the relationship of these to the Quality Standards. The service demonstrated the Quality Standards are promoted and communicated to staff and consumers.

The organisation demonstrated it promotes safe and inclusive care which is of high quality. It showed accountability for service delivery through evaluation of outcomes, and actions in response to feedback and clinical and incident data. The organisation provided evidence which demonstrated effective, organisation-wide systems of governance. The organisation has an effective incident management reporting system which captures relevant information and identifies risks to consumer care. The organisation provided policies relevant to antimicrobial stewardship, open disclosure and the minimisation of ‘restraint’ or restrictive practices. These policies and staff interviews provided evidence of a clinical governance framework which supports safe care and best practice.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can.*
4. *managing and preventing incidents, including the use of an incident management system.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.