Avoca Hostel

Performance Report

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**Commission ID:** 3266

**Provider name:** Maryborough District Health Service

**Site Audit date:** 7 December 2021 to 10 December 2021

**Date of Performance Report:** 20 January 2022

# Performance report prepared by

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# 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 Commissioner’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.
* the provider’s response to the Site Audit report received on 30 December 2021.

# 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 consumers’ 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 feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Overall, sampled consumers consider they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. For example:

* Consumers and representatives said staff treat consumers with dignity and respect and value consumer identity, culture and personal privacy.
* Consumers and representatives described how staff value consumer culture including how cultural considerations influenced the delivery of care by staff.
* Consumers and representatives are satisfied information is current, accurate, timely and communicated in a way they can understand.
* Consumers and representatives said they are supported to exercise choice regarding care and services.

Staff could describe consumers who want to take risks and how the consumer is supported to understand the risks. Staff also described how consumers are provided with information.

Staff described how they support consumers to make connections inside and outside of the service and to maintain relationships with family and friends. Staff are aware of key relationships for individual consumers and described how they support these relationships.

Consumer care planning documents include information about individual preferences and the people who are important to them.

Staff were observed to be treating consumers with respect and understood their individual choices and preferences.

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 consumers’ 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, sampled consumers consider they feel like partners in the ongoing assessment and planning of their care and services. For example:

* Consumers and representatives described how care and services are planned around what is important to them. Care planning is discussed with representatives and with others that consumers wish to be involved in their care. However, consumers and representatives said they do not recall being offered a copy of care plans.

Staff describe how consumers, representatives, health professionals and other organisations contribute to consumer care and how they work in collaboration to develop a tailored care and services plan.

Care plans are used as the basis of care delivery. They are reviewed monthly and when circumstances change or when incidents impact on the needs, goals or preferences of consumers. Care planning documents demonstrated consumers, representatives and others are involved in the development of care planning.

Care plans reflect the current goals, needs and preferences of consumers and include advance care wishes.

Care planning documentation demonstrates relevant assessment and risk identification which reflect the current goals, needs and preferences of consumers. Staff know what is important to consumers in terms of how their care is delivered, including consumer risks and strategies to ensure safe and effective care.

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 consumers’ experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed and staff were asked about how they ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

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

* Consumers and representatives said consumers feel safe and risks related to their care are effectively managed.
* Representatives are satisfied comfort and care is provided by staff at the end of a consumer’s life.
* Consumers, representatives and staff described how changes in consumer health are identified and responded to.
* Consumers and representatives are satisfied referrals are made to health professionals when needed. Care planning documentation confirmed referrals to health professionals and other services occur.

Staff are responsive to changes in consumer health and well-being. Documentation indicates identification, monitoring and appropriate care is provided to consumers when changes occur.

Care planning documents demonstrated management of high impact or high prevalence risks associated with the care of each consumer are mostly effective.

The service demonstrated that each consumer receives personal and clinical care that is effective and safe, optimises their health and well-being, is tailored to their needs and is best practice. The Assessment Team found that care planning documents demonstrated consumer wound care, skin integrity and pain is managed to meet individual needs and aligned with best practice principles.

Consumers who require the use of restrictive practices are assessed and monitored and generally reviewed according to regulatory requirements. Consultation with representatives occurs.

The service’s electronic care documentation system provides adequate information to support effective and safe sharing of consumer needs with staff and others involved in the care of the consumer.

The service has an infection control policy and framework, COVID-19 outbreak management plan and an antimicrobial stewardship plan. Staff are provided with various education topics related to infection control and were observed adhering to infection control practices. The service has a COVID-19 infection control screening process for all staff, visitors and consumers.

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

Overall, sampled consumers consider they get the services and supports for daily living that is important for their health and well-being and enables them to do the things they want to do. For example:

* Consumers and representatives said consumers are supported to achieve their individual goals and their needs and preferences are met, allowing them to be independent, as healthy as possible and have a meaningful quality of life.
* Consumers and representatives described how consumers are supported to maintain their emotional, spiritual and psychological well-being.
* Consumers are satisfied with the support received to participate in activities within the service and the outside community, as they choose.
* Overall, consumers were happy with the flavour, volume, and variety of meals.

Lifestyle staff described how they work with external organisations to help supplement lifestyle activities offered within the service. Staff are knowledgeable in relation to consumer preferences regarding services and supports, including dietary needs.

Consumer preferences regarding how they wish to be supported are documented and communicated to those providing care and services.

The service supports consumers to maintain social and personal connections. Individual consumer interests are documented within lifestyle care documentation, and staff understand consumer preferences.

The service has systems and processes for communicating information about consumer conditions, needs and preferences both within the organisation and with others where the responsibility for care is shared.

The service has systems and processes in place to include consumers in the development of the menu and to provide feedback on the quality of the food provided.

The Assessment Team observed that consumers and staff have access to safe, clean and well-maintained equipment.

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 team also examined relevant documents.

Overall, consumers consider they feel they belong in the service and feel safe and comfortable in the service environment. For example:

* Consumers and representatives said the service is clean and well maintained, and consumers can access outdoor space and all areas of the service.
* Consumers generally feel at home in the service as they can have their rooms decorated with personal items of significance.

Scheduled and reactive maintenance are completed and an effective cleaning schedule is in place and maintained.

An extension to an existing dining area was under construction and had been securely blocked off to ensure the safety of consumers, staff and visitors to the service.

The Assessment Team observed the service to be welcoming and that it offers a range of communal spaces that optimise consumer engagement and interaction. The service was clean and uncluttered, enabling consumers to move freely. The gardens and external areas were well maintained and free from clutter and obstruction.

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 team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

Overall, sampled consumers consider they are encouraged and supported to give feedback and make complaints, and appropriate action is taken. For example:

* Consumers said they are satisfied with how complaints are managed internally and would be comfortable making written complaints or raising them verbally.
* Consumers said they usually raise issues at meetings, discussion follows, and actions are taken on the spot to resolve issues to the satisfaction of the consumer group. Overall, consumers and representatives who provided feedback or lodged a complaint were satisfied with the process used to resolve issues.
* Consumers are confident in the support they receive to provide feedback and complaints.

Staff were aware of external advocates to assist consumers. Brochures providing details of external advocates, the charter of aged care rights, and how to make complaints to the Commission were available.

Staff had a consistent understanding of the service’s feedback and complaint processes. Management described using open disclosure principles in the handling of complaints including working collaboratively with consumers and representatives and apologising when necessary.

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.

## Assessment of Standard 7

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 staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Overall, consumers consider they receive quality care and services when required. They said staff are knowledgeable, capable and caring. For example:

* Consumers provided mixed feedback on whether the workforce number and mix enables safe and quality care. While some consumers were satisfied with staffing numbers, others felt the service was understaffed. Consumers stated staffing levels did not affect the care received.
* All consumers interviewed described in various ways that staff are kind, caring and gentle when providing care.
* Consumers felt staff are sufficiently trained and skilled to provide care.

Nursing staff described the high care needs of consumers at the service, and that on some days, it was difficult to keep up. Most care staff advised that while they complete all their required tasks, at times they are rushed.

The service demonstrated their workforce is recruited, trained and equipped to provide consumers with care and services, and support is available for staff when requested. Staff are satisfied with the quality of training provided by the service.

Both management and staff described a system of informal review where feedback is given to staff regularly. Staff said they received a formal performance assessment on the anniversary date of their employment.

The Assessment Team observed positive staff interactions with consumers.

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).

Consumers said the service is well run and expressed satisfaction with the management team and were complimentary about the open approach to sharing information. For example:

* Consumers described how they are actively engaged in the development, delivery and evaluation of their care and services; and are supported in that engagement through consumer meetings.
* Consumers are satisfied discussions take place in an open and transparent manner.

Management demonstrated how they review the effectiveness of risk management systems and detailed risk-based improvements made as a result of identifying areas of potential risk.

The organisation has a set of principles that guide clinical care, including working in partnership with consumers to empower them to be active decision-makers, and to provide clinical care designed to promote the health and well-being of consumers.

The organisation’s governing body is accountable for the delivery of services and promotes a culture of safe, quality care and services through established policies and procedures, staff education and the monitoring workforce performance.

There is a clear and well-defined continuous improvement system informed by consumer feedback and complaints, incident analysis and service audits.

The service has a board and governance committee to support oversight in relation to a number of governance issues including regulatory compliance, clinical governance, antimicrobial stewardship and the use of restrictive practices. A range of policies and procedures are available to guide staff 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.