Banyula Lodge

Performance Report

39 Medowie Road   
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**Commission ID:** 0524

**Provider name:** Bushland Health Group Limited

**Site Audit date:** 10 March 2020 to 13 March 2020

**Date of Performance Report:** 22 April 2020

# Publication of report

This Performance Report **may 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** | **Non-Compliant** |
| Requirement 3(3)(a) | Non-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.
* the provider’s response to the Site Audit report received 7 April 2020.

# 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 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 confirmed that 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:

* All consumers were generally satisfied with the way staff treat them and felt respected and valued at the service. Consumers said staff are always respectful when speaking to them and delivering care. However, one consumer said they did not feel their culture was recognised and valued.
* Consumers interviewed said they felt their privacy is respected and their personal information is kept confidential. Consumers stated the information they receive helps them make decisions about the things they would like to do and eat.
* Consumers were observed to be happy and engaging in all interactions throughout the Performance Assessment. They were knowledgeable regarding their rights and responsibilities and felt comfortable expressing their concerns to management.
* The service demonstrated they have a good understanding of the requirements for this standard. Staff members were able to articulate good examples of where consumers where treated with respect and dignity, provided culturally safe care, information was communicated in a timely manner and dignity of risk was supported. Care planning documents reviewed showed consistency in the information documented, were reviewed regularly and reflected the care provided. The organisation has a responsive monitoring system to ensure care is provided in a safe and inclusive manner.

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.*

Based on information submitted by the approved provider I find that it is compliant with this requirement. In its response it provided information about the consultations undertaken and measures put in place prior to the site audit regarding a named consumer. Those measures are ongoing however they indicate exploration of and cogent actions toward recognition of that consumer’s identity.

### 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 sampled consumers confirmed that they feel like partners in the ongoing assessment and planning of their care and services.

For example:

* Overall the consumers and their representatives interviewed confirmed that they are involved in the consumers’ assessment and planning process and they are aware they can access their care and services plan if they wish. The consumers and their representatives confirmed this is generally completed at consumers case conferences when they review all aspects of the consumers care plan.
* However, the Assessment Team received feedback from a consumer and two representatives regarding the consultation and engagement process by the Registered Nurses. For example:
  + The Assessment team received feedback from one consumer in regard to having not been consulted regarding their increased pain levels and their ongoing care. This information has been considered under Standard 3 requirement 3(3)(a)
  + One representative explained they were not informed in regard to a consumer’s medical test results and medical officer’s visits. The representative said they had previously asked to be informed of any changes.
  + One representative advised they did not receive the appropriate information from a Registered Nurse to make an informed decision about the care their mother received at the time and were not informed when the consumer was transferred to hospital.
* A review of the consumers care planning and assessment documentation identified the Registered staff review the care plans three monthly or when needed. The consumers’ care plans sampled demonstrated the assessments and care plans are generally reflective of the current care needs of the consumers.

The organisation demonstrates they have a review process in place, whereby the Registered Nurses speak with the consumers or their representatives and review the consumers care. However, one consumer said they were not consulted in regard to changes in their care. And two representatives said their directions are not always followed and they are not kept informed about changes in the consumers health, test results and Medical Officer visits.

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.*

I find that the approved provider is compliant with this requirement. The approved provider acknowledged an instance where a representative was not notified of treatment given to a consumer or when transferred to hospital, however I consider these were isolated events. There was evidence of adequate communication with the representative on other occasions. While that representative stated that had they been informed about the treatment they may have given different directions on care, I have not identified any deficits in that consumer’s clinical care

The assessment team identified an instance in relation to another consumer who had concerns about the level of communication with them, however I have not identified any instances where the level of communication with that consumer’s representative was inadequate.

### 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 NON-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 – 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 did consider that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers confirmed their pain management and wound management has been adequately managed by the staff and Medical Officers, although one consumer stated they had pain.
* Four representatives confirmed that the consumers get the care they need, and they are notified of any changes immediately.
* Three representatives confirmed that the consumers have access to a Medical Officer or other health professionals when they need it. They confirmed the Nurse Practitioner is a great benefit for the consumers as they are on site weekly.
* A review of the consumers care plans identified generally safe and effective care is being delivered by the staff. The care plans identified the consumers’ current care needs and their goals is included in the care plan. When needed the care plan have been adjusted and updated to reflect the consumers’ health needs and changes in their goals and preferences
* Although the staff was able to demonstrate effective management of wound, restraint and the majority of consumers with pain management, the Assessment Team identified that the pain of one consumer, particularly during a period of escalation in that pain, was not effectively monitored and managed.

The Quality Standard is assessed as Non-compliant as one (1) of the seven specific requirements have been assessed as Non-compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Non-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.*

I find that the approved provider is non-complaint with this requirement. An instance was cited in which a consumer with a history of chronic pain experienced an escalation of that pain for a period of approximately one (1) week. I do not consider that this consumer’s pain was effectively monitored or managed during this period. The approved provider acknowledged that a new pain assessment or pain chart was not completed at that time. I note the approved provider’s submission that during this period the consumer was given pharmaceutical pain relief on five occasions and on four of those occasions its effectiveness was evaluated and recorded to be effective. However, on one occasion its effectiveness was not recorded. Further, the consumer advised the assessment team that during the period of escalation in their pain they were unable to undertake an activity they enjoyed and which they were normally able to due to the pain, and stated they had a lot of pain when spoken to the assessment team. In addition, I do not consider that the consumer was referred to his doctor for review of his pain in a timely manner. The consumer was seen by their doctor approximately nine days after the escalation of the pain, at which time additional pain relief was charted.

While I acknowledge that the consumer had chronic pain and complex medical issues leading to that pain and appeared to have had their pain managed over a period of several months and up to the time of its escalation, I do not consider the response to this escalation was commensurate with the situation.

I note the approved provider’s acknowledgement of issues in relation to use of pain charts and recording the effectiveness of as required medication, and it is implementing measures to address this, including conducting pain education for all staff to reinforce its policy on pain management.

### 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 – 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 did confirm that they 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.

For example:

* Consumers interviewed confirmed that they are supported by the service to do the things they like to do.
* Consumers interviewed confirmed that they are supported to keep in touch with people who are important to them.
* Feedback from consumers interviewed included meals provided are of a suitable quality, variety, and quantity and are provided in a safe pleasant environment. Consumers are able to give feedback about the quality of the food and any special requests to staff and management at meal times.
* The service demonstrated they have a good understanding of how to provide lifestyle supports for consumers to ensure they are living the best life possible. Consumers said they were confident and satisfied the service provides them with the supports they require to do the things they want to do, participate in activities not offered at the service and maintain relationship that are important to them. Staff understand what safe and effective services are, how consumer preferences are to be communicated to other providers responsible for sharing consumer care, the appropriate use of equipment and timely referrals. Consumers said they were satisfied with meals at 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 team also examined relevant documents.

Overall sampled consumers indicated that they feel they belong in the service and feel safe and comfortable in the service environment.

For example:

* Consumers interviewed confirmed they feel safe at the service. They stated the staff respected them and are confident they know what they are doing.
* Consumers stated they feel welcomed at the service and they are happy with their living environment. One consumer said the staff were her family now and they look after her very well.
* Consumers interviewed stated the service is very clean and the staff are friendly and helpful when cleaning their rooms. They also said staff will respect their privacy and return later to clean if they are being provided with care.
* The Assessment Team observed the service is clean and has clear signage throughout, structural strategies to support most consumers to mobilise independently indoors and out. There is adequate lighting, heating and cooling, a comfortable atmosphere and appropriate noise levels and pathways around the service are level and safe. The service has systems in place to ensure equipment is serviced regularly and maintained in optimal condition. Pest control and chemical logs are kept up to date to ensure the service is free from contamination and the environment is safe for consumers.

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

For example:

* Consumers interviewed advised they felt comfortable and confident with being able to make complaints. They advised they feel the Management Team has an open-door policy, they feel listened to and management act upon resolving complaints raised in a timely manner. Consumers identified they can raise concerns through a number of ways including: in confidence; directly with management; through family; at consumer meetings and forums; through staff or by using an advocate.
* Consumers interviewed stated when complaints have been raised with the management team they have worked in consultation with the consumers and their families to resolve the complaint. As a result, consumers have seen changes have been made within the service.
* The service has an electronic system for logging complaints. This allows the organisation quality and management teams to monitor and review complaints and discuss these trends with the service’s Management Team at regular management meetings. The register showed the service receives far more compliments than complaints. Overall compliments were about the kindness and caring of staff. Complaints were seen to be addressed in a timely manner and the management were able to describe patterns in the complaints data. Overall consumers and representatives who have raised concerns formally said they are satisfied with how this process operates at both service and organisation levels.

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

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

For example:

* Overall consumers and representatives consistently identified staff are kind and caring in their interactions with consumers. They said the majority of staff know what they are doing when they provide care and services. That they are respectful towards consumers and considerate in maintaining consumer privacy and dignity. Consumers and representatives said there is adequate staff numbers.
* The Assessment Team observed staff in the service were busy but they did not appear rushed and interactions were overall respectful, kind and caring.

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 sampled consumers indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* Consistently consumers (and representatives) said they believe the service is well run by the organisation and the current management team. Consumers were able to speak to how they are involved in decision making around all aspects of care and service. This includes in care planning, in identifying needs specific to them and in setting goals for what they want to do. The service has commenced a process where consumers and representatives have increased involvement in the operation of the service. This includes through such means as consumers being active participants in recruitment, taking part in forums and meetings, and sitting on committees.
* Management described corporate governance as the key aspects of organisational structure, business performance monitoring and management arrangements. The aim of which is to ensure the organisational design reflects and delivers the Quality Standards within the framework of a business model but focused on the Bushland Health Group vision and values of serving those in need. This requires the business to be run effectively and in partnership with key stakeholders but primarily consumers.

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.*

### 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

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

**Standard 3 requirement 3(3)(a)**

*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.*

* Ensure that each consumer gets safe and effective clinical care including, but not limited to, timely and effective monitoring and management of pain, in particular when pain increases or escalates