Accreditation Decision and Report

**Decision to re-accredit service following a site audit**

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | BaptistCare Warabrook Centre |
| **RACS ID:** | 0515 |
| **Name of approved provider:** | BaptistCare NSW & ACT |
| **Address details:**  | 12-24 Casuarina Circuit WARABROOK NSW 2304 |
| **Date of site audit:** | 16 July 2019 to 19 July 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 20 August 2019 |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. |
| **Decision:** | To re-accredit the service under section 41 of the Rules. |
| **Further period of accreditation:** | 27 September 2019 to 27 September 2022 |
| **Assessment of performance with the Aged Care Quality Standards** |
| Standard 1 Consumer dignity and choice | Met  |
| Requirement 1(3)(a) | Met  |
| Requirement 1(3)(b) | Met  |
| Requirement 1(3)(c) | Met  |
| Requirement 1(3)(d) | Met  |
| Requirement 1(3)(e) | Met  |
| Requirement 1(3)(f) | Met  |
| Standard 2 Ongoing assessment and planning with consumers | Met  |
| Requirement 2(3)(a) | Met  |
| Requirement 2(3)(b) | Met  |
| Requirement 2(3)(c) | Met  |
| Requirement 2(3)(d) | Met  |
| Requirement 2(3)(e) | Met  |
| Standard 3 Personal care and clinical care | Met  |
| Requirement 3(3)(a) | Met  |
| Requirement 3(3)(b) | Met  |
| Requirement 3(3)(c) | Met  |
| Requirement 3(3)(d) | Met  |
| Requirement 3(3)(e) | Met  |
| Requirement 3(3)(f) | Met  |
| Requirement 3(3)(g) | Met  |
| Standard 4 Services and supports for daily living | Met  |
| Requirement 4(3)(a) | Met  |
| Requirement 4(3)(b) | Met  |
| Requirement 4(3)(c) | Met  |
| Requirement 4(3)(d) | Met  |
| Requirement 4(3)(e) | Met  |
| Requirement 4(3)(f) | Met  |
| Requirement 4(3)(g) | Met  |
| Standard 5 Organisation’s service environment | Met  |
| Requirement 5(3)(a) | Met  |
| Requirement 5(3)(b) | Met  |
| Requirement 5(3)(c) | Met  |
| Standard 6 Feedback and complaints | Met  |
| Requirement 6(3)(a) | Met  |
| Requirement 6(3)(b) | Met  |
| Requirement 6(3)(c) | Met  |
| Requirement 6(3)(d) | Met  |
| Standard 7 Human resources | Met  |
| Requirement 7(3)(a) | Met  |
| Requirement 7(3)(b) | Met  |
| Requirement 7(3)(c) | Met  |
| Requirement 7(3)(d) | Met  |
| Requirement 7(3)(e) | Met  |
| Standard 8 Organisational governance | Met  |
| Requirement 8(3)(a) | Met  |
| Requirement 8(3)(b) | Met  |
| Requirement 8(3)(c) | Met  |
| Requirement 8(3)(d) | Met  |
| Requirement 8(3)(e) | Met  |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 48 of the Rules.**

The Commission makes the decision taking into account this site audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this site audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of BaptistCare Warabrook Centre (the Service) conducted from 16 July 2019 to 19 July 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Service against the Aged Care Quality Standards (the Quality Standards) in accordance with the Aged Care Quality and Safety Commission Rules 2018.**

This report details the findings of this performance assessment and contains a detailed report about the performance of the Service against each Quality Standard assessed and the requirements within each Quality Standard assessed rated as either, Met or Not Met.

For a ‘Not met’ finding, the Assessment Team has provided information about why the requirement was Not Met.

This Report is to be read in conjunction with the Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Consumers and representatives | 27 |
| Representatives | 7 |
| Residential manager | 1 |
| Care Team Manager / RN | 4 |
| Registered nurse | 1 |
| Diversional therapist and lifestyle staff | 3 |
| Manager of care development unit | 1 |
| Education advisor | 1 |
| Endorsed Enrolled Nurse (EN) | 2 |
| Care staff including and non EN care supervisor | 18 |
| Roster clerk | 1 |
| Cleaning staff | 2 |
| Hairdresser | 1 |
| Occupational therapist (contract) | 1 |
| Chaplain | 1 |
| Care leader administration | 1 |
| Administration | 1 |
| Laundry staff | 1 |
| Catering assistant | 2 |
| Dietician (contract) | 1 |
| Nurse practitioner | 1 |
| Chefs | 2 |
| Cleaning supervisor | 1 |
| Cleaning staff | 2 |
| Property asset manager (organisation) | 1 |
| Maintenance supervisor | 1 |
| Maintenance administrator | 1 |
| Hospitality services manager (contractor) | 1 |
| NSW QLD Operations manager (contractor) | 2 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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:

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

#### Summary of Assessment of Standard 1:

The Assessment Team found that the organisation has met all six requirements in relation to this Standard.

Consumer experience interviews show that 100% of consumers agreed that staff always or most of the time treat them with respect. Consumers reported that their choices, preferences, likes and dislikes, hobbies and interests were identified and supported by the service in various ways to live the life they choose.

Staff were able to provide various examples of how they acknowledge and support the identity, culture and diversity of the consumer. Consumers reported that their culture and religious needs are met, and staff support them to continue relationships both within and outside the service. Staff were observed to interact with consumers respectfully and could readily identify consumers’ individual preferences and interests. A wide range of activities are available at the service that reflect the diverse backgrounds and preferences of the consumer.

Consumers reported they can make decisions about their life, even when it involves risk. Staff confirmed they support and encourage consumers to undertake risky activities and help consumers make these choices.

Regular feedback is obtained from consumers and their representatives and includes an anonymous complaint system. The organisation provides information to consumers and their representatives in several formats including newsletters, correspondence, posters and regular meetings and actively promotes a culture of inclusion.

Consumers and their representatives were satisfied their personal care is undertaken in a respectful way and their dignity valued.

#### Requirements:

##### Standard 1 Requirement (a) Met

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

##### Standard 1 Requirement (b) Met

Care and services are culturally safe.

##### Standard 1 Requirement (c) Met

Each consumer is supported to exercise choice and independence, including to:
i) make decisions about their own care and the way care and services are delivered; and
ii) make decisions about when family, friends, carers or others should be involved in their care; and
iii) communicate their decisions; and
iv) make connections with others and maintain relationships of choice, including intimate relationships.

##### Standard 1 Requirement (d) Met

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

##### Standard 1 Requirement (e) Met

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.

##### Standard 1 Requirement (f) Met

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

### Standard 2: Ongoing assessment and planning with consumers Met

#### 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:

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.

#### Summary of Assessment of Standard 2:

The assessment team found that all of the five requirements related to Standard 2 were met.

Consumer experience interviews show that 73% confirmed that they have a say in their daily activities most of the time or always. Most consumers were able to explain how they have been involved in case conferences and review of their care plans.

Staff could describe how consumers and others who contribute to the consumers care (including medical practitioners, allied health professionals and family) work together to plan and review tailored care. Staff demonstrated understanding of adverse incidents and how these were identified, documented and reviewed by the service to inform continuous improvement.

The service has a system for regular and responsive reassessment and planning of care and services including consideration of risks to the consumers health and well-being. An additional round of case conferences and review of care plans is occurring to provide each consumer and their representative an opportunity to adjust and sign their care plan.

Assessment and planning identifies and addresses the consumers current needs. On most of the consumer files reviewed, the service identified goals and preferences of the consumer in each area of the care plan. Over 80% of consumers at the service have chosen to complete advanced care directives.

The registered nurse or care team manager communicates the outcomes of assessments and recommended care plan through timely discussions and case conferences.

#### Requirements:

##### Standard 2 Requirement (a) Met

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.

##### Standard 2 Requirement (b) Met

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.

##### Standard 2 Requirement (c) Met

Assessment and planning:
i) 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
ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

##### Standard 2 Requirement (d) Met

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.

##### Standard 2 Requirement (e) Met

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: Personal care and clinical care Not Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

#### The Assessment Team found that all requirements in relation to Standard 3 excluding 3. 3 (a) were met.

Consumer experience interviews show that 93% of consumers indicated they get the care they need most of or all of the time and 100% of consumers responded they feel safe all or most of the time.

Staff were able to describe how they can easily access policies, their opportunities for education, and how they ensure information is shared both within and with others who partner in providing care.

Timely referrals occur to medical practitioners, specialists, allied health professionals and spiritual leaders.

A nurse practitioner visits the service regularly and reviews consumers who are unwell and assists with management of palliative care. Consumers end of life wishes are documented and staff are respectful of the consumers wishes. Care staff and the services chaplain provide emotional support and guidance to the consumer and their family during palliative care.

Care staff demonstrated an understanding of infection control, including regular handwashing.

The assessment team was not satisfied that care is best practice and optimises well-being. Consumers consistently across three of the four areas of the home noted that staff are very busy and were able to give examples of how this impacts on their personal care.

Consumer experience interviews show that 80% of consumers said that staff explain things to them most or all the time and 20% indicated staff are rushing and don’t take the time to explain things some of the time. 13 % of consumers said they are not encouraged to do as much as possible for themselves as staff are rushing.

This was further evidenced by observations of consumers remaining in bed for extended periods. Some of the staff acknowledged that they adjust the care delivered when they are busy and this impacts on consumers. Incidents are analysed, and care adjusted, however some incidents are not reported through the incident system. Some documentation of monitoring and care delivery was inconsistent with policy and care plans.

#### Requirements:

##### Standard 3 Requirement (a) Not Met

Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:
i) is best practice and
ii) is tailored to their needs and
iii) optimises their health and well-being.

##### Standard 3 Requirement (b) Met

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

##### Standard 3 Requirement (c) Met

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

##### Standard 3 Requirement (d) Met

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.

##### Standard 3 Requirement (e) Met

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.

##### Standard 3 Requirement (f) Met

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

##### Standard 3 Requirement (g) Met

Minimisation of infection related risks through implementing:
i) standard and transmission based precautions to prevent and control infection; and
ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

### Standard 4: Services and supports for daily living Met

#### Consumer outcome:

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:

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

#### Summary of Assessment of Standard 4:

The Assessment Team found that all seven requirements under Standard 4 were met.

Consumer experience interviews show that 73% of consumers agreed they have a say in their daily activities always or most of the time; 87% agreed they are encouraged to do as much as possible for themselves always or most of the time; and 80% of consumers agreed they like the food always or most of the time. Consumers generally reported they receive supports for daily living that meet their needs, goals and preferences that optimise their independence, well-being and quality of life.

A range of assessments are completed for consumers on entry and on an ongoing basis to identify their preferences for services and lifestyle activities to ensure their independence, health and wellbeing and quality of life is supported.

Emotional and spiritual support is provided by an on-site chaplain who provides regular services and individual visits with consumers/ representatives.

The organisation adequately demonstrated that it supports consumers to connect with other supports and people outside the service. Consumer care plans included detailed reviews about important social and personal relationships for consumers and how they wished to be supported to maintain these relationships.

The organisation seeks advice from consumers about activities that are of interest to them and has a regularly updated lifestyle activities calendar. Information and feedback from consumers and others responsible for their care is regularly reviewed and monitored to ensure services are safe and effective.

The organisation effectively demonstrated that it makes timely referrals to other organisations and care specialists when required and provides meals of a suitable quality, variety and quantity and follows up on feedback.

Safe, suitable, clean and well-maintained equipment was observed throughout the organisation.

#### Requirements:

##### Standard 4 Requirement (a) Met

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.

##### Standard 4 Requirement (b) Met

Services and supports for daily living promote each consumer’s emotional, spiritual and psychological wellbeing.

##### Standard 4 Requirement (c) Met

Services and supports for daily living assist each consumer to:
i) participate in their community within and outside the organisation’s service environment; and
ii) have social and personal relationships; and
iii) do the things of interest to them.

##### Standard 4 Requirement (d) Met

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

##### Standard 4 Requirement (e) Met

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

##### Standard 4 Requirement (f) Met

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

##### Standard 4 Requirement (g) Met

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

### Standard 5: Organisation’s service environment Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

The Assessment Team found that the organisation has met all three requirements in relation to this standard.

The service was observed to be welcoming with individual rooms (including ensuite bathrooms) decorated with memorabilia, photographs and other personal items. Consumer’s bedrooms, bathrooms and other areas of the service are clean and well maintained. The layout of the service enabled consumers to move freely around with suitable furnishings and fittings. Corridors are wide, with good visual access and minimal distracting stimulation providing a safe environment for consumers.

Consumer experience interviews show that 87% of consumers said they feel at home most or all of the time. Consumers reported that the service was well maintained, clean and kept at a comfortable temperature, are happy with the furniture and fittings, have the equipment they need and have access to outdoors areas where they can spend time with their families or friends.

The organisation regularly sought feedback about how the service environment, furnishings and fittings could be improved and made more welcoming through feedback systems including meetings.

Regular environmental audits are conducted against a checklist to ensure facilities are maintained. Items that require attention are actioned and the results of the audits are tabled at the work health and safety meeting. Policies and procedure describe the system for purchasing, servicing and maintenance of furnishing and equipment. Environmentally related risks to consumers are taken into consideration prior to any purchase.

Staff reported they are trained in the use of equipment such as mechanical lifters

The cleaning contractor confirmed that services were delivered as arranged.

#### Requirements:

##### Standard 5 Requirement (a) Met

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

##### Standard 5 Requirement (b) Met

The service environment:
i) is safe, clean, well maintained and comfortable; and
ii) enables consumers to move freely, both indoors and outdoors.

##### Standard 5 Requirement (c) Met

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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:

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.

#### Summary of Assessment of Standard 6:

The Assessment Team found that all four requirements under Standard 6 were met.

Consumer experience interviews show that 93% of consumers said staff follow up when you raise things with them always or most of the time. Consumers generally reported they can provide feedback and make complaints and generally have confidence that appropriate action will be taken.

There are mechanisms to facilitate consumers and interested persons to provide feedback or make a complaint. The organisation has a ‘have your say’ form which is freely available which can be placed in confidential suggestions boxes available throughout the service. Consumers also participate in regular surveys.

Brochures, posters and booklets are available throughout the service promoting and explaining the internal and external complaint mechanisms available to them.

Consumers have access to advocates, language services if required and other methods for raising and resolving complaints. Staff receive regular training in supporting consumers to provide feedback and make complaints.

The organisation demonstrated that appropriate action is undertaken in response to a complaint, however, an open disclosure process is not always fully covered when things go wrong.

Feedback and complaints are reviewed and investigated and used to improve the quality of care. Meeting minutes demonstrate that feedback and complaints are a standard agenda item. The organisation has a complaints log and can demonstrate how the complaints are used to improve services within its continuous improvement plan.

#### Requirements:

##### Standard 6 Requirement (a) Met

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

##### Standard 6 Requirement (b) Met

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

##### Standard 6 Requirement (c) Met

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

##### Standard 6 Requirement (d) Met

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

### Standard 7: Human resources Not Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found that all requirements in relation to Standard 7 excluding 7. 3 (a) were met.

# Consumer experience interviews show that 83% of consumers said that staff know what they are doing and 93% of consumers responded that staff are kind and caring most of the time or always.

The organisation demonstrated they ensure staff interactions with consumers are kind and respectful of each consumer’s identity, culture and diversity. Consumers provided various examples of what this meant to them. Interactions between consumers representatives and staff were observed to be kind, caring and respectful.

The organisation demonstrated the workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. New staff are satisfied with the orientation and support provided. There is a comprehensive education program that uses a variety of mediums to support understanding, including a suite of competency assessments.

Education attendance is monitored. Regular individual work performance reviews are conducted for each staff member.

Consumers consistently across three of the four areas of the service commented that staff are very busy and were able to give examples of how this can impact on them on a daily basis. Consumer experience interviews show that 13 % of consumers said they are not encouraged to do as much as possible for themselves as staff are rushing. 80% of consumers said that staff explain things to them most or all the time and 20% of consumers said staff are rushing and don’t take the time to explain things some of the time. One consumer commented they don’t feel confident with agency staff. The service does not use a documented orientation for agency staff, however staff do provide an informal orientation and buddy with a regular staff member.

Some staff interviewed commented that they are very busy and sometimes they have to adjust the personal care to accommodate this.

The organisation has a system to identify and adjust staff numbers when workloads are increased, however did not demonstrate this is applied.

#### Requirements:

##### Standard 7 Requirement (a) Not Met

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.

##### Standard 7 Requirement (b) Met

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

##### Standard 7 Requirement (c) Met

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

##### Standard 7 Requirement (d) Met

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

##### Standard 7 Requirement (e) Met

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

### Standard 8: Organisational governance Not Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found that all requirements in relation to Standard 8 excluding 8. 3 (e) were met

Consumer experience interviews show that 93% of consumers agreed or strongly agreed that the place (service) is well run. The organisation demonstrates that consumers have a say in the care and services provided via meetings, forums and feedback mechanisms. Consumers and their representatives are involved in case conferences with the multidisciplinary team annually or when the need arises. The service is yet to engage a consumer in the design, delivery and evaluation of care and services, however they are engaged on a day to day basis.

The governing body meets regularly and has skilled representation. The board sets clear expectations in its strategic plan for the organisation to follow and regularly reviews organisational and consumer risks including outcomes.

There are organisation wide governance systems support effective information management, the workforce and compliance with regulatory requirements. There is a continuous improvement program in place which identifies areas for improvement and these activities are documented in the organisations plan for continuous improvement. Financial governance at the organisation includes budgeting processes, financial statements, delegations of authority and publishing accommodation pricing and key features information.

There is a clinical governance framework in place in the form of committee and reporting structures. Management uses a range of monitoring processes such as audits, quality indicators and incidents to monitor consumer outcomes and identify and manage clinical risks.

The organisation is in the primary stages of implementing antimicrobial stewardship with many clinical staff not understanding the requirements and consumers receiving antibiotics without positive pathologies.

Open disclosure was not well understood by staff and the organisations policy did not reflect all the concepts outlined in the open disclosure framework and standards.

The organisation actively reviews the use of restraint by regularly reviewing psychotic and antipsychotic medication usage as well as the use of physical restraints such as bed rails, concave mattresses and low beds.

#### Requirements:

##### Standard 8 Requirement (a) Met

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

##### Standard 8 Requirement (b) Met

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

##### Standard 8 Requirement (c) Met

Effective organisation wide governance systems relating to the following:
i) information management
ii) continuous improvement
iii) financial governance
iv) workforce governance, including the assignment of clear responsibilities and accountabilities
v) regulatory compliance
vi) feedback and complaints

##### Standard 8 Requirement (d) Met

Effective risk management systems and practices, including but not limited to the following:
i) managing high-impact or high-prevalence risks associated with the care of consumers
ii) identifying and responding to abuse and neglect of consumers
iii) supporting consumers to live the best life they can

##### Standard 8 Requirement (e) Not Met

Where clinical care is provided - a clinical governance framework, including but not limited to the following:
i) antimicrobial stewardship
ii) minimising the use of restraint
iii) open disclosure