Bupa Croydon

Performance Report

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**Commission ID:** 4279

**Provider name:** Bupa Aged Care Australia Pty Ltd

**Site Audit date:** 22 February 2021 to 23 February 2021

**Date of Performance Report:** 13 April 2021

# 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** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

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

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

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

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the provider’s response to the Site Audit report received 19 March 2021.
* the Infection Control Monitoring Checklist.

# 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 considered 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:

* Consumers expressed satisfaction they are treated with dignity and respect. Feedback included that staff always treat them well and they find staff very respectful.
* Consumers felt supported to exercise choice and independence around making care decisions, making connections and maintaining relationships. For example, consumers felt staff understood that maintaining family relationships is of value to them
* Consumers felt supported to take risks and do the things they enjoy doing.
* Most consumers felt their personal privacy is respected. For example, staff always knock on their door prior to entering.

Staff were able to demonstrate they were familiar with consumers backgrounds and preferences. Staff described how they adapt the way they provide care as they become familiar with a consumer’s cultural background and preferences.

Staff were able to describe how the consumer is supported to understand the benefits and possible harm when they make decisions about taking risk, and how consumers are involved in problem-solving solutions to reduce risk where possible.

Care plan documentation reflected each consumer’s individual goals, medical and social needs as well as preferences. They also reflected specific cultural needs and areas where consumers are supported to take risks.

The assessment team observed several visits from family and friends and staff were noted to be actively engaging with visitors in a positive manner.

Staff were observed knocking on consumers doors prior to entering.

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

## Assessment of Standard 1 Requirements

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

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

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

*Care and services are culturally safe.*

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

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

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

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

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

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

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

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

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

# STANDARD 2 COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 2

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

Most sampled consumers considered that they feel like partners in the ongoing assessment and planning of their care and services. For example:

* Consumers and representatives were satisfied with the process of consultation about consumers’ care and services and confirmed that care and services are reviewed when circumstances change.
* Consumers and representatives were satisfied with the degree of interest demonstrated by staff when consulting them about their preferences.

Clinical staff provide consumers and/or their representative with an opportunity to discuss outcomes of assessment and planning with every resident of the day review. Care staff have ready access to consumers’ care plans to facilitate service delivery.

Staff demonstrated an understanding of consumers’ needs and goals, including advance care planning which was consistent with care planning documentation.

Care planning documents demonstrated initial and ongoing assessments and risk assessments that meets the changing needs and preferences of consumers. Care plan’s contained information for consumers including goals, preferences, health risks and individual preferences. Advance care and end of life planning is included in each consumer’s care plan, when required.

Assessment and care planning documents reflect input from consumers and/or their representatives as well as specialists involved in the care of the consumer. These included geriatricians, general practitioners, allied health team, external experts and the leisure, lifestyle team. Assessment and care planning documentation is reviewed regularly and readily available.

Management described the established process for the regular review of care plans.

The service has written policies and procedures that guide staff in the assessment and care planning process, including assisting consumers with advance care planning.

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

## Assessment of Standard 2 Requirements

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

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

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

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

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

*The organisation demonstrates that assessment and planning:*

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

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

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

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

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

# STANDARD 3 COMPLIANT Personal care and clinical care

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 3

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – 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.

Most sampled consumers considered that they receive personal care and clinical care that is safe and right for them. For example:

* Feedback from consumers and representatives in relation to deterioration was mostly positive.
* Consumers felt staff would know what to do in the event their health needs changed.
* Consumers and representatives confirmed they have access to their medical practitioner and/or other health professionals when needed.

Clinical staff were able to describe deterioration, reporting and assessment processes for consumers. Clinical and care staff were able to describe effective non-pharmacological strategies for consumers and how accurate behaviour management reduced the need for psychotropic medications.

Clinical staff could identify individualised risks relevant to consumers and demonstrated how the risks are managed.

The service demonstrated it has effective processes to document and communicate information about consumers’ condition, needs and preferences including verbal and written handover. Clinical staff, allied health professionals and care staff confirmed they are provided with and have access to the information they need.

Care documentation indicates the service delivers effective care in relation to skin integrity, pain management and the appropriate use and review of psychotropic medications. Care documentation reflected specialist recommendations and timely and appropriate referrals.

The service demonstrated an understanding of end of life needs of consumers and showed how this can be applied to individual consumers

The service has written policies and procedures for skin management, wound management and pain management to guide staff practices and ensure that care and services delivered align with best practice principles.

The service has an infection control policy including an antimicrobial stewardship policy and outbreak management plan to guide staff practice. Antimicrobial stewardship education has been provided and staff demonstrated a good understanding of infection prevention measures.

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

### Assessment of Standard 3 Requirements

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

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

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

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

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

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

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

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

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

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

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

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

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

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

*Minimisation of infection related risks through implementing:*

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

# STANDARD 4 COMPLIANT Services and support for daily living

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – 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 the sampled consumers considered that they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do. For example:

* Most of the consumers and representatives interviewed feel supported to participate in the activities they choose and that the service supports them to access interests in the community.
* Consumers provided examples of how they are supported to maintain communication with important people in their life and that their visitors were welcomed whenever they visited.
* Consumers and representatives were satisfied the service provides support to consumers accessing the wider community.
* Most consumers were satisfied with the variety, quality and quantity of food being served

Staff were satisfied they are made aware of changes to consumer needs and preferences during handover. Most referrals are conducted in a timely manner.

Staff described how external organisations are involved to support the emotional and spiritual health of consumers. Leisure and lifestyle staff showed an understanding of sampled consumers’ preferences and interests.

Consumer documentation includes information regarding consumer interests, abilities and the level of assistance required. Monthly activities calendars are displayed in consumers rooms and include a range of activities tailored to the needs of consumers. Menu cards at the point of service ensure consumers receive the correct meals.

Consumers were observed participating in a range of activities, including large group activities. Lifestyle staff were observed providing one on one activities with consumers living with dementia. The Assessment Team observed a range equipment and resources used to support consumers in activities of daily living and incidental activities of daily living.

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 considered that they feel they belong in the service and feel safe and comfortable in the service environment. For example:

* Consumers commented they feel at home and representatives felt welcome when they visit the service.
* Consumers interviewed find the service environment safe, clean and well-maintained.
* Consumers expressed their satisfaction on the cleanness of their environment and furniture and equipment is safe and fit for purpose.

Staff were knowledgeable in the identification of hazards and how to address them. Staff confirmed cleaning and maintenance processes for equipment.

The service has a range of communal areas for consumers to access freely and consumers' rooms are personalised. Consumers were observed moving freely, both indoors and outdoors.

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

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.

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

* Consumers confirmed they feel safe and they are encouraged to provide feedback at any time to the service and were confident action would be taken.
* Consumers and representatives were generally satisfied with the action taken by management in relation to feedback, and that management practiced open disclosure processes in their response.

Staff described how they support consumers and representatives to raise any concerns including how they assisted consumers who have difficulty communicating or cognitive impairments.

Staff were able to describe advocacy and language services available to consumers.

All care staff interviewed were aware of what an open disclosure policy is and how it is relevant to complaints.

Documentation identified how feedback and complaints were actioned and assisted in improving the service. Written material about how to make complaints were observed throughout the service, including feedback forms in each consumers room.

Management demonstrated how action is taken to improve the quality of care and services. Complaint documentation identified prompt action taken by management.

The service has written policies and procedures to guide staff in the identification and management of complaints.

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.

Consumers considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. For example:

* Majority of consumers and representatives said their care needs are met and expressed their satisfaction that staff respond to their call bells in a timely manner most of the time.
* Consumers and representatives said they find staff kind and caring and understood their individual preferences and routines.
* All consumers and representatives said staff know what they are doing.

Interactions between consumers, representatives and staff were observed to be kind, caring and generally respectful.

Shifts are allocated with regular staff available to fill shifts and most shifts are replaced. Management have access to organisational bank staff who can fill vacant shifts at short notice. Rostering shows flexibility to extend shift finishing times while waiting for casual staff to backfill unplanned staff absence.

Staff undergo annual appraisals and are graded according to organisational values and mission statements. Staff are required to complete mandatory education including but not limited to infection control, manual handling and aged care standards. Information indicated management provide feedback in relation to staff performance and clearly communicate expectations.

The workforce is recruited according to established position descriptions which identified scope of practice and other specifications such as professional registrations and competencies.

Management stated they monitor call bell responses to ensure they meet organisational expectations. Where response times do not meet expectations, they are investigated and actioned, as necessary.

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).

Most consumers and representatives considered that the organisation is well run.

Consumers and representatives participate in the development, delivery and evaluation of care and services through various avenues including meetings and surveys. Where a consumer is contributing to the service this was reflected in their care plan.

Management described how the organisation’s board is committed to and promotes a culture of safe, inclusive and quality care

The organisation has effective governance systems in relation to information management, continuous improvement, financial and workforce governance and regulatory compliance.

The organisation provided a documented risk management framework supported by policies and procedures to manage risk.

The organisation demonstrated there is a clinical governance framework that includes minimising the use of restraint, open disclosure and antimicrobial stewardship.

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

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.