Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Bupa Stirling |
| **RACS ID:** | 2947 |
| **Name of approved provider:** | Bupa Aged Care Australia Pty Ltd |
| **Address details:** | 41 Fremantle Dr STIRLING ACT 2611 |
| **Date of site audit:** | 29 October 2019 to 01 November 2019 |

**Summary of decision**

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| **Decision made on:** | 05 December 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:** | 12 December 2019 to 12 December 2020 | |
| **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 | | Not Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Not 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 | | Not Met |
| Requirement 7(3)(a) | | Not 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 |
| **Timetable for making improvements:** | By 05 February 2020 | |
| **Revised plan for continuous improvement due:** | By 20 December 2019 | |

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

Site Audit Performance   
Assessment Report

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 Bupa Stirling (the Service) conducted from 29 October 2019 to 1 November 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 contains detailed findings about the performance assessment of the Service against each Quality Standard and the requirements within each Quality Standard. The Quality Standard and assessed requirements are rated as either Met or Not Met.

A Met rating for the Quality Standard means that all requirements of that Quality Standard have been assessed and rated as Met.

A Not Met rating for the Quality Standard means that one or more requirements of that Quality Standard has been assessed and one or more of those requirements have been rated as Not Met.

There will be no rating of the Quality Standard if only some of the requirements have been assessed and those requirements have been rated as Met.

This Report is to be read in conjunction with the Quality 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 | 12 |
| Consumer representatives | 5 |
| General manager | 1 |
| Operations support manager | 1 |
| Clinical care managers | 3 |
| Quality consultant | 1 |
| Nurse advisor | 1 |
| Administrator | 1 |
| Regional director | 1 |
| Registered nurse | 5 |
| Care staff | 14 |
| Hospitality and environmental services staff | 3 |
| Lifestyle staff | 4 |
| Physiotherapist | 1 |
| Speech pathologist | 1 |
| External contractors | 1 |
| Other | 1 |

## 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:

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.

#### Summary of Assessment of Standard 1:

#### The Assessment Team found the service met all six of the requirements under this Standard.

The service demonstrated that generally consumers are treated with dignity and respect, and their identity, culture and diversity are valued. This includes respect for consumer’s privacy and personal information. While there were some examples during the assessment of consumers not being treated with respect, 94% of consumers and representatives randomly interviewed said that consumers are treated with respect most of the time or always and most consumers and representatives interviewed were able to provide examples of how staff act respectfully and understand consumers’ individual preferences. The service was able to demonstrate that consumer’s identity, culture and diversity inform care and services are these are culturally safe for consumers.

The service demonstrated that consumers are supported to live the life they choose and exercise choice and independence, and the service supports consumers to take risks to facilitate this. Staff could explain how consumers are asked about their preferences for care and services, and the service uses a problem-solving approach to respect consumer wishes, while identifying and reducing risks.

The service demonstrated that generally information is communicated to consumers in a way that is clear and easy to understand. Feedback from consumers and representatives around this was generally positive, however some issues were identified regarding communicating with consumers who have difficulties due to a limited understanding of English or hearing difficulties.

#### Requirements:

##### **Standard 1 Requirement 3(a) Met**

The organisation demonstrates that each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

##### **Standard 1 Requirement 3(b) Me**t

The organisation demonstrates that care and services are culturally safe.

##### **Standard 1 Requirement 3(c) Met**

The organisation demonstrates that 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.

##### **Standard 1 Requirement 3(d) Met**

The organisation demonstrates that each consumer is supported to take risks to enable them to live the best life they can.

##### **Standard 1 Requirement 3(e) Met**

The organisation demonstrates that 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 3(f) Met**

The organisation demonstrates that each consumer’s privacy is respected and personal information is kept confidential.

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

#### Consumer outcome:

1. 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.

#### Summary of Assessment of Standard 2:

The Assessment Team found that the organisation meets all five requirements under Standard 2.

Of consumers randomly interviewed, 94% confirmed staff treat them with respect and are kind and caring. Consumers and their representatives confirmed regular contact and care conferences have helped ensure consumers get the care and services they need. Some consumers, whilst unable to recall whether they had formally been involved in the care planning process, were able to discuss staff asking them about their care needs and preferences with documentation sighted reflecting case conferences with consumers and their representatives are occurring. Consumers stated staff and management listen to and respect their preferences. Consumers also confirmed they have access to other professionals such as general practitioners, physiotherapists, dentists etc and referrals occur promptly when required to ensure they get the care and services they need.

Staff could describe how consumers and the multidisciplinary team work together to deliver individualised care and services and how care and services are monitored and reviewed with the consumer and their representative as required. Care and service plans were reviewed by the Assessment Team and all had been regularly reviewed in partnership with the consumer and/or their representative with a system in place to ensure care plans are current and reflect up to date information. Staff demonstrated an understanding of reporting and analysing clinical information and lifestyle information and how this information is documented and informs assessment and care planning processes.

The service initiates discussion about end of life care on admission and provides information on what advanced care planning and end of life care is and what to expect. The service continues to document and seek engagement with consumers and their representatives on their preferences around advanced care directives and/or end of life preferences as some consumers have not yet chosen to participate in this assessment and care planning process.

#### Requirements:

##### **Standard 2 Requirement 3(a) Met**

The organisation demonstrates that 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 3(b) Met

The organisation demonstrates that 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 3(c) Met**

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.

##### **Standard 2 Requirement 3(d) Met**

The organisation demonstrates that 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 3(e) Met**

The organisation demonstrates that 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:

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.

#### Summary of Assessment of Standard 3:

The Assessment Team found the organisation meets six of the seven requirements under Standard 3.

Consumers and representatives generally expressed overall satisfaction with care and with the consultation process and delivery of personal and clinical care. The service has processes in place to ensure safe and effective personal and clinical care is provided in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

Registered nurses are on-site 24 hours a day, seven days a week to assess and oversee clinical care requirements. Staff liaise with the consumer's medical officers and the consumer and/or their representatives, to identify care needs and ensure care is supported and delivered in accordance with consumer’s needs. Specialists, medical officers and allied health professionals are accessed as required and on request of consumers and/or their representatives.

Non-pharmacological strategies are used to assist consumers to maintain their comfort levels. These include massage, repositioning, hot packs, exercise equipment, diffusers/aromatherapy and relaxation music.

Staff were observed to ask consumers about preferences on personal and clinical care interventions including whether the consumer is ready for personal care and notifying consumers of upcoming medical and allied health visits and reviews being undertaken around physical restraint at the time of the unannounced site visit.

Staff said they have sufficient time to provide personal and clinical care and understand consumers personal and clinical care needs and preferences in relation to delivery of care.

The organisation does not demonstrate the effective management of high impact or high prevalence risks associated with the care of each consumer.

* Medications are not effectively managed in line with best practice and compromises the health and wellbeing of consumers.
* Pressure area care does not demonstrate that it is best practice, tailored to the needs of consumers and does not optimise their health and well-being. In addition, pain management and nutrition and hydration management has not being effectively implemented for one consumer.

#### Requirements:

##### **Standard 3 Requirement 3(a) Met**

The organisation demonstrates that 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.

##### **Standard 3 Requirement 3(b) Not Met**

The organisation demonstrates effective management of high impact or high prevalence risks associated with the care of each consumer.

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

The organisation demonstrates that 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 3(d) Met**

The organisation demonstrates that 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 3(e) Met**

The organisation demonstrates that 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 3(f) Met**

The organisation demonstrates timely and appropriate referrals to individuals, other organisations and providers of other care and services.

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

The organisation demonstrates 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: Services and supports for daily living Not Met

#### 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.

#### Summary of Assessment of Standard 4:

The Assessment Team found the organisation meets six of the seven requirements under Standard 4.

The assessment team observed positive interactions between staff and consumers and visitors. Consumers were seen engaging in relaxed conversations with one another and when families visited. Meals were served courteously and consumers were offered preferences.

Most consumers interviewed about their wellbeing gave positive comments about feeling that the service supported their wellbeing and they were happy or content in the service. Several religious organisations visit the service and staff are able to source other spiritual services as needed.

The Assessment Team generally observed kind and caring interactions between staff and consumers which promotes emotional and psychological well-being.

Information about the consumer’s condition, needs and preferences is communicated within the organisation through a range of mechanisms including electronic documentation system, handovers and emails. Where other organisation are involved caring for consumers they are mechanisms to ensure that they have necessary information about the consumer.

Referrals are made to individuals and other services as appropriate.

Whilst the service provides a program of activities, review of lifestyle participation records and interviews demonstrates that some consumers are not provided with things to do that interest them. Some consumers said they do not have things to do that are of interest to them. The service has not made accommodations to ensure that consumers with sensory impairments are able to participate in activities of interest to them.

#### Requirements:

##### **Standard 4 Requirement 3(a) Met**

The organisation demonstrates that 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 3(b) Met**

The organisation demonstrates that services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

##### **Standard 4 Requirement 3(c) Not Met**

The organisation demonstrates that 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.

##### **Standard 4 Requirement 3(d) Met**

The organisation demonstrates that 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 3(e) Met**

The organisation demonstrates timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### **Standard 4 Requirement 3(f) Met**

The organisation demonstrates that where meals are provided, they are varied and of suitable quality and quantity.

##### **Standard 4 Requirement 3(g) Met**

The organisation demonstrates that where equipment is provided, it is safe, suitable, clean and well maintained.

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

#### 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.

#### Summary of Assessment of Standard 5:

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

Consumer experience interviews show that the majority of consumers interviewed said they feel at home in the service. Consumers reported the service is 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 service was observed to be welcoming with individual rooms, which include ensuite bathrooms, are decorated with memorabilia, photographs and other personal items. Consumers’ 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.

Regular environmental audits are conducted to ensure facilities and equipment are maintained. Items that require attention are actioned and results of audits are tabled at relevant staff meetings. Staff reported they are trained in the use of equipment used with consumers, such as mechanical lifters. Policies and procedures 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.

#### Requirements:

##### **Standard 5 Requirement 3(a) Met**

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

##### **Standard 5 Requirement 3(b) Met**

The organisation demonstrates that the service environment:

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

##### **Standard 5 Requirement 3(c) Met**

The organisation demonstrates that furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

### Standard 6: Feedback and complaints Met

#### 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.

#### Summary of Assessment of Standard 6:

The Assessment Team found all requirements of this Standard to be met.

Consumers and representatives generally demonstrated the service encourages consumers and representatives to raise feedback and most of the consumers and representatives interviewed said they have either raised or would feel comfortable raising any issues or complaints. They said they have received information about their right to complain and the process to do this. They also receive reminders on an ongoing basis through consumer meetings and newsletters.

The service has processes in place to ensure consumers and representatives understand the information provided to them including the use of translated materials and interpreters. The Assessment Team observed that information was displayed around the service and a suggestion box was located near the entry to the service.

Staff are given information about complaint mechanisms for consumers and are advised to encourage consumers to raise any issues as they arise. Staff also said there is a mechanism for the management of concerns raised by staff with many staff indicating they would feel comfortable to raise any issues, especially with regards to consumer care.

Management demonstrated feedback is important to them and items are logged and investigated, with representatives involved based on consumers’ preferences. Following resolution and feedback from consumers and representatives, the organisation also trends feedback information with a view to continuous improvement in the service. Many consumers said management had treated concerns they had raised seriously, and they were happy with the outcomes achieved.

#### Requirements:

##### **Standard 6 Requirement 3(a) Met**

The organisation demonstrates that consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

##### **Standard 6 Requirement 3(b) Met**

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

##### **Standard 6 Requirement 3(c) Met**

The organisation demonstrates that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

##### **Standard 6 Requirement 3(d) Met**

The organisation demonstrates that feedback and complaints are reviewed and used to improve the quality of care and services.

### Standard 7: Human resources Not Met

#### 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.

#### Summary of Assessment of Standard 7:

The Assessment Team found the organisation meets four the five requirements under Standard 7.

The organisation has been actively working to ensure that service is fully staffed at all times. However the service is unable to ensure that shifts are always filled and the service has a heavy reliance on agency personnel. Consumers raised concerns about agency personnel who do not know the needs of consumers.

Consumer experience interviews show that 94% of consumers said staff are kind and caring always or most of the time. Consumers reported the staff show love, kindness and are wonderful. Mostly consumers felt staff know what they are doing and explain or follow up on information for them.

The service has a regular training and education calendar which is planned through a gap analysis, observations of staff interactions, staff and consumer feedback. Performance appraisals are completed annually, and the service demonstrated they have all been completed in the past 12 months.

The workforce confirmed they have access to position descriptions, are monitored regarding the completion of mandatory training and have access to additional training and education if they choose. Staff interviewed advised they received induction training and are satisfied with the ongoing support they receive in their roles.

#### Requirements:

##### **Standard 7 Requirement 3(a) Not Met**

The organisation demonstrates that 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 3(b) Met**

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

##### **Standard 7 Requirement 3(c) Met**

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

##### **Standard 7 Requirement 3(d) Met**

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

##### **Standard 7 Requirement 3(e) Met**

The organisation demonstrates that regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.

### Standard 8: Organisational governance Not Met

#### 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.

#### Summary of Assessment of Standard 8:

The Assessment Team found that the organisation meets four of the five requirements under this Standard 8.

The organisation has commenced work to involve consumers in the development, delivery and evaluation of care and services and that they are supported in that engagement. To date this work has mostly involved in increasing control by consumers of resident and relative meetings and the work of a consumer engagement manager whose role is to enhance the engagement of consumers/representatives in the planning, implementation and evaluation of care and services. A culture of safe, inclusive and quality care and services is promoted through documents and education programs.

The organisation demonstrates effective organisation wide governance systems relating to information management, continuous improvement, financial and workforce governance and regulatory compliance. Whilst the service does not always have sufficient staff to cover all shifts and has a heavy reliance on agency personnel, the Assessment Team notes the organisation’s systems for workforce governance have been followed.

The organisation demonstrates that a clinical governance framework which includes antimicrobial stewardship, minimisation of the use of restraint and processes for open disclosure are in place.

Whilst the organisation has risk management processes in place, these processes have not been effective in responding to the ongoing medication management issues and the prevention and management of pressure area injuries in the service. Systems to support consumers live the best life they can have been mostly effective, however some consumers and representatives provided feedback, and documentation, confirmed they do not have activities of interest to them.

#### Requirements:

##### **Standard 8 Requirement 3(a) Met**

The organisation demonstrates that consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

##### **Standard 8 Requirement 3(b) Met**

The organisation demonstrates that 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 3(c) Met**

The organisation demonstrates 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.

##### **Standard 8 Requirement 3(d) Not Met**

The organisation demonstrates 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.

##### **Standard 8 Requirement 3(e) Met**

The organisation demonstrates that 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.