Camberwell Gardens

Performance Report

15 Cornell Street   
CAMBERWELL VIC 3124  
Phone number: 03 9836 9507

**Commission ID:** 3779

**Provider name:** Menarock Aged Care Services (Victoria) Pty Ltd

**Site Audit date:** 17 November 2020 to 18 November 2020

**Date of Performance Report:** 16 December 2020

# Publication of report

This Performance Report **may be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **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** | **Non-compliant** |
| Requirement 7(3)(a) | Non-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 on 8 December 2020.

# STANDARD 1 COMPLIANT Consumer dignity and choice

### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

### Organisation statement:

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

## Assessment of Standard 1

### Consumer outcome

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 Assessment Team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards. As a result, the following were identified:

* The service demonstrated consumers are treated with dignity and respect and it actively promotes a culture of inclusion.
* Staff were observed interacting with consumers respectfully and could discuss their involvement in the promotion of culture and diversity within the service.

Overall consumers confirmed that they are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose.

For example:

* Consumers and representatives interviewed are satisfied staff treat them with respect, support them to maintain their identity and support them to live the life they choose.
* Consumers interviewed confirmed that they are encouraged to do things for themselves and feel heard when they discuss with staff things that matter to them.
* Consumers feel welcome to make decisions about the way they live their lives.
* Through interviews, consumers confirmed that their personal privacy is respected. Consumers said the organisation protects the privacy and confidentiality of their information and they are satisfied with care and services, including personal care being undertaken in a way that respects their privacy.

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

**Consumer outcome**

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

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

For example:

* Of the consumers and representatives interviewed most confirmed they are satisfied they are involved in the planning of the consumer’s care and services.
* Consumers and representatives provided examples of when they were contacted by the service and have had discussions on care planning and subsequent to a change in the consumer’s long-term care needs.
* Representatives said they have been offered a copy of the completed care plan.
* The Assessment Team observed most of the care planning documents sampled had a comprehensive assessment and care planning interventions that reflected the consumers described needs and preferences. Regular and as needed review of care plans was evident and responsive to changing needs, preferences and circumstances.

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

**Consumer outcome**

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.

Of the consumers sampled, the majority consider that they receive personal care and clinical care that is safe and right for them.

For example:

* Consumers interviewed said they get the care they need when they need it. Consumers said staff support them to remain independent with some aspects of their care, which is consistent with their preferences.
* Consumers said care provided by nursing and care staff, is of a high standard and in line with the individual preferences of the consumers. Consumers expressed satisfaction of staff response to their requests for assistance.
* Consumers and representatives said consumers have access to visiting medical officers, allied health staff and other specialists.
* There are registered nurses on duty 24 hours per day, seven days a week, to provide and supervise clinical care.
* During interviews, staff could describe care needs and preferences of individual consumers and the Assessment Team observed staff providing care in accordance with the consumers’ care plans.

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

**Consumer outcome**

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 confirmed 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:

* Consumers confirmed they are supported to do the things they would like to do, including participating in structured group activities and individualised activities within the service. A lifestyle activities program is run each day across the service with a variety of activities aimed at suiting the individual needs of the consumers. The lifestyle team also provides support to those consumers who choose not to participate in the formal activities.
* Lifestyle care planning documentation identifies the consumers’ lifestyle needs and preferences and is updated when the consumers’ needs change. The Assessment Team observed group lifestyle activities in progress as well individual lifestyle activities provided one to one by staff. Lifestyle staff have implemented a program to assist consumers with cognitive impairment to improve or maintain a level of independence with nutrition.
* Spending time with family and friends outside of the service, has been via access to electronic devices and other visitor arrangements. With the visitor restrictions lifted in October 2020, visitors are now welcome to the service, and all visitors follow the service’s infection control measures.
* Consumers interviewed confirmed they are supported to keep in touch with people who are important to them, and the service welcomed back family and friends for scheduled visits.
* Care planning documents reflect the involvement of others in the provision of lifestyle support and services. These include the visits by allied health professionals, family and friends, interaction with representatives of a consumer’s faith and from community organisations.
* Most of the consumers sampled spoke positively about the choice, quality and quantity of the food, however there was some feedback that the variety was limited.

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

### Consumer outcome

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

For example:

* Overall consumers and representatives interviewed stated they feel safe and have a sense of belonging in the service. Consumers stated they consider the service their home. One representative expressed that the service has a feeling of home when she visits.
* Consumers and representatives expressed a high level of satisfaction of the standard of cleanliness throughout the service and are satisfied with the scheduled cleaning of their rooms. Consumers are satisfied the furniture and equipment is clean, comfortable and well-maintained.
* Staff could describe maintenance processes and how they report any issues they identify. Cleaning staff were observed to be carrying out their duties observing consumer’s choice and privacy options. Scheduled audits contribute to the monitoring of compliance with external service agreements and performance.

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

**Consumer outcome**

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.

Of the consumers and representatives sampled, they described in various ways how they are encouraged and supported to give feedback and make complaints, and that appropriate action is taken. For example:

* Consumers and representatives interviewed felt they could provide feedback if they had any issues to raise.
* Information on how to raise a complaint and the process was on display. Feedback forms, complaints information and suggestion boxes were accessible to the consumers and representatives.
* The service monitors and reviews its performance in relation to these requirements. The service obtained and displayed brochures in relation to the Commission in the service’s residential areas in English and other languages.

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 NON-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

**Consumer outcome**

To understand the consumer’s experience and how the organisation understands and applies the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

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

For example:

* Consumers interviewed confirmed that staff are kind and caring in their approach to the timely provision of quality care.
* Overall consumers interviewed confirmed that staff know what they are doing. They are aware that new staff become more familiar with the needs and preferences over time and noted staffing is often consistent.
* Some consumers interviewed believed call bell response times were delayed at times. However, a review of the call bell audit report identified the majority of call bells were answered within a 0 to five minutes timeframe.
* The staffing roster is based on continuity of staffing across the service. Where possible the expanded casual staffing bank supports the timely filling of unplanned leave.
* Consumers, representatives and staff interviewed felt the service was understaffed specifically in the memory support unit.
* The service’s recruitment and selection processes ensure the workforce is competent and staff have the qualifications and knowledge to effectively perform their roles. Staff complete mandatory education and accompanying competencies annually and additional training when needs are identifed. Staff interviewed confirmed attendance at a range of education.
* The service uses a range of processes to monitor staff performance including observation, monitoring incidents, analysis of consumer feedback and a formal annual performance appraisal.
* The service monitors and reviews its performance in relation to these requirements. Regular meetings, audits and consumer surveys are used to ensure consumers receive quality care and services from knowledgeable, capable and caring staff.

The Quality Standard is assessed as Non-compliant as four of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Non-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.*

I have considered the evidence from the Site Audit report and the response received from the approved provider. While the approved provider expressed overall confidence in its monitoring and review of staffing and care and delivery of services, consumers, representatives and staff expressed concern about inadequate staffing within the memory support unit. Several times during the site visit the Assessment Team observed insufficient staff in the memory support unit. The memory support unit had only one or no carer present in the communal area when consumers were present. The response from the provider stated that the requirement to have a care worker in the communal area, at all times, has been reviewed and revoked since the site visit. One consumer experienced two unwitnessed falls in the communal area in November 2020.

The approved provider stated staff from all parts of the service are expected to assist other staff to care for consumers when called upon to do so. However at the site visit the Assessment Team did not observe this in practice. It appeared that staff in the memory support unit were left to care for consumers without assistance when it was required.

I am satisfied this requirement is not met based on the feedback from consumers, representatives and staff and the Assessment Team observations at the site visit. The service was unable to demonstrate it has sufficient staff in the memory support unit to enable 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

**Consumer outcome**

To understand how the organisation understands and applies the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

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

For example:

* The majority of consumers interviewed confirmed that from their perspective the service is well run and is responsive to their changing needs, preferences and feedback.
* Consumers could provide examples of how they are involved in the development, delivery and evaluation of care and services through ongoing feedback and their involvement in care planning reviews.
* The majority of consumers and representatives interviewed said management and staff encourage feedback and seek their opinion on preferred care and services. Management said they continue to work with stakeholders to ensure they feel safe and that their needs and preferences are effectively catered for.
* The service consults with consumers and their representatives in the development, delivery and evaluation of care and some services.
* The organisation’s governing body has systems to promote a culture of safe, inclusive and quality care and service. The governance structure, including committee structure, and monthly reports demonstrate how information is reported to key decision makers within the organisation. This includes information and data relating to continuous improvement, financial governance, workforce governance, regulatory compliance and the management of key incidents and complaints.
* High-impact or high-prevalence risks, and abuse are also identified, managed and reported.
* The clinical governance framework includes antimicrobial stewardship, minimising the use of restraint and open disclosure.
* The organisation has regulatory compliance systems to assist compliance with relevant legislation, regulatory requirements, professional standards and guidelines.

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

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

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

### Requirement 8(3)(b) Compliant

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

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

1. *information management;*
2. *continuous improvement;*
3. *financial governance;*
4. *workforce governance, including the assignment of clear responsibilities and accountabilities;*
5. *regulatory compliance;*
6. *feedback and complaints.*

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

1. *antimicrobial stewardship;*
2. *minimising the use of restraint;*
3. *open disclosure.*

# Areas for improvement

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

* Ensure staffing is sufficient in the memory support unit to enable the delivery and management of safe and quality care and services.