Accreditation Decision

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

**Service and approved provider details**

|  |  |
| --- | --- |
| **Name of service:** | Casa D'amore Apartments |
| **RACS ID:** | 5752 |
| **Name of approved provider:** | Queensland Rehabilitation Services Pty Ltd |
| **Address details:** | 34 Park Street COORPAROO QLD 4151 |
| **Date of site audit:** | 10 September 2019 to 13 September 2019 |

**Summary of decision**

|  |  |  |
| --- | --- | --- |
| **Decision made on:** | 21 October 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:** | 03 December 2019 to 03 December 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Met |
| Requirement 3(3)(e) | | Met |
| Requirement 3(3)(f) | | Met |
| Requirement 3(3)(g) | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Requirement 4(3)(a) | | Met |
| Requirement 4(3)(b) | | Met |
| Requirement 4(3)(c) | | Met |
| Requirement 4(3)(d) | | Met |
| Requirement 4(3)(e) | | Met |
| Requirement 4(3)(f) | | Met |
| Requirement 4(3)(g) | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Met |
| Requirement 5(3)(c) | | Met |
| Standard 6 Feedback and complaints | | Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Met |
| Requirement 6(3)(d) | | Met |
| Standard 7 Human resources | | Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Met |
| Requirement 8(3)(e) | | Met |

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

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 Casa D'amore Apartments (the Service) conducted from 10 September 2019 to 13 September 2019.**

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

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

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

This Report is to be read in conjunction with the 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** |
| --- | --- |
| Café coordinator | 1 |
| Care coordinator | 1 |
| Care support staff | 17 |
| Client relations consultant | 1 |
| Clinical manager | 1 |
| Consumers/representatives | 25 |
| Executive assistant | 1 |
| External contractor – mobile x-ray technician, fire system technician | 2 |
| Hairdresser | 1 |
| Head chef | 1 |
| Hospitality manager | 1 |
| Hospitality and environmental services staff | 3 |
| Lifestyle coordinator | 1 |
| Lifestyle staff | 1 |
| Maintenance manager | 1 |
| Management support | 1 |
| Manager – operations | 1 |
| Manager – quality | 1 |
| Physiotherapist | 1 |
| Registered nurse | 5 |

## 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 has met all six requirements under Standard 1.

Consumers and their representatives randomly interviewed:

* 94% said that staff treat the consumers with respect most of time or always.
* 94% said that staff encourage the consumers to do as much as possible for themselves most of time or always.
* 88% said that staff explain things to the consumers most of time or always.

Consumers/representatives reported the consumer is able to make decisions about their life, even when it involves an element of risk. Consumers/representatives described the ways that the consumer’s personal and social connections are supported both within and outside the service. Consumers/representatives said the service protects the privacy and confidentiality of consumers’ information, and they are satisfied that care and services, including personal care, is undertaken in a way that respects consumers’ privacy.

Staff could provide meaningful examples of how they help consumers make choices, including by giving consumers accurate information and options to inform their choices. Staff were observed interacting with consumers respectfully and were able to identify consumer’s individual preferences and interests.

The service promotes the value of culture and diversity in a wide range of activities it offers consumers and in the delivery of personalised care. Management utilises care consultation, meetings, audits and surveys to gather feedback from consumers and representatives to ensure consumers are satisfied that staff treat them with respect, support them to maintain their identity and live the life they choose. The service also demonstrated how electronic and paper documentation is protected to preserve confidentiality of consumer information, consistent with policies and procedures.

#### 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) Met

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 the service has met all five requirements under Standard 2.

Consumers and their representatives randomly interviewed:

* 94% said that the consumers have a say in their daily activities most of the time or always.
* 100% stated the consumers get the care they need most of the time or always.

Consumers/representatives said their direct engagement in the initial and ongoing assessment and planning of the consumer’s care helps the consumer to get the care and services they need. Consumers/representatives reported feeling safe and confident that staff listen to the consumer’s goals and preferences, and that the service seeks input from other professionals to ensure the consumer gets the right care and services to meet their needs. Consumers/representatives reported that the consumer’s care and services are regularly reviewed and when there is an incident or the consumer’s care needs change, the service communicates with them and seeks their input to update the care and services they are receiving.

Staff could describe how consumers’ feedback is taken into consideration and how others who contribute to the consumer’s care (including medical officers, allied health professionals, medical specialists and representatives) work together to deliver a tailored care plan and review the plan as needed.

Review of assessments and care plans showed generally they had been regularly reviewed with changes made as required. Staff demonstrated an understanding of adverse incident events and how these were identified, documented and reviewed by the service, to inform continuous improvement. Registered nurses showed an awareness of consumer’s individual advance care planning and had access to documented end of life directives.

#### 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 identify 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 service has met six of seven requirements under Standard 3.

Consumers and their representatives randomly interviewed:

* 100% said that the consumers always feel safe.
* 100% said that the consumers get the care they need either always or most of the time.

Consumers/representatives gave various examples of how staff ensured the care provided to the consumers was right for them. This included regularly seeking feedback from consumers/representatives about the consumer’s care, the way it is delivered and through involving visiting medical officers and other health professionals in care planning/delivery. Consumers/representatives interviewed were satisfied when there has been a deterioration or change of a consumer’s condition this would be recognised and responded to in a timely manner including utilise timely and appropriate referrals to individuals and other health care organisations and providers.

Registered nurses could describe how they ensure care delivery is best practice, their opportunities for continuing education and how they ensure that information is shared both within the organisation and with others outside the organisation. Registered and care staff demonstrated an understanding of precautions to prevent and control infection.

Review of consumer files indicated general delivery of safe and effective personal and clinical care. This included care delivery reflecting attention to the needs and preferences of consumers including when they are at the end of their life. However, the Assessment Team identified the service did not demonstrate effective management of high impact and high prevalence risks such as pressure injury and pain associated with the pressure injury for each 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 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 service has met all seven requirements under Standard 4.

Consumers and their representatives randomly interviewed:

* 94% said consumers are encouraged to do as much as possible for themselves most of the time or always.
* 88% said they like the food here most of the time or always. A small proportion said they like the food some of the time. The service is working with the consumers to identify ways in which their experience may be improved.

Consumers and their representatives expressed satisfaction that they are supported in their emotional and spiritual care, interests, and social and personal relationships.

The service demonstrated how they provide safe and effective services and support for daily living that optimise the consumer’s independence, health, well-being and quality of life. Staff could demonstrate ways consumers’ emotional, spiritual and psychological needs are supported. Staff demonstrated shared understanding of consumers’ individual preferences and interests. Staff described how consumers are supported to participate in leisure interests, have relationships and access to the community. Staff provided examples of consultation and referral to other organisations to ensure consumers live the best life they can. The service demonstrated how information regarding consumers’ condition, needs and preferences is generally communicated in a timely and appropriate way. The service demonstrated how meals are provided to meet individual consumer’s needs and preferences and to ensure suitable variety, quality and quantity are provided. The service demonstrated where equipment is provided, it is safe, suitable and well maintained.

Management could demonstrate the services and support for daily living provided at the service are monitored and generally reviewed, and improvement are made where needed.

#### 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) 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 that all three requirements in relation to Standard 5 are met.

Of consumer and their representatives randomly interviewed,

* 100% said consumers feel safe at the service most of the time or always
* 94% said that consumers feel at home in the service most of the time or always.

Consumers and representatives expressed satisfaction that the service environment is welcoming, clean, well maintained and comfortable. Consumers and representatives gave examples of how they can move freely both indoors and outdoors and come and go from the service.

Observation of the service showed it was clean, tidy and safe to access all areas. Furniture and equipment were clean and arranged to support consumers of varying needs. Consumers moved freely throughout the service and interacted freely with both staff and fellow consumers. Staff directed and assisted consumers to mobilise as required.

Staff demonstrated knowledge of maintenance processes and stated equipment was sufficient, kept in good working order and appropriate to consumers’ needs. The service demonstrated fittings, furniture and equipment are maintained regularly and as required.

The service demonstrated it monitors and reviews the living environment, fittings, furniture and equipment to ensure a safe and comfortable service environment and to identify risks or concerns.

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

#### Summary of Assessment of Standard 6:

The Assessment Team found that all four requirements in relation to Standard 6 are met.

Of consumers and their representatives randomly interviewed 100% said staff follow-up when they raise things with staff most of the time or always.

Consumers and representatives indicated they are aware of internal complaint and feedback methods and are comfortable accessing them if needed. Consumers are generally aware of external complaint methods and advocacy services. Where feedback has been provided most of the consumers and representatives advised of satisfaction with the process of addressing their concern along with the application of open disclosure.

Staff demonstrated knowledge of how to assist consumers and representatives access internal feedback processes. Staff were generally aware of external complaint methods and advocacy services. The service demonstrated information on internal and external feedback methods and advocacy groups in communicated to consumers and representatives. The service demonstrated feedback is received from a range of internal and external avenues and is responded to and actions taken; identified improvement opportunities are fed into the continuous improvement plan and actioned.

The service demonstrated feedback processes are generally monitored and reviewed to ensure staff and consumers are aware in internal and external feedback methods, improvements for individual consumers are sustained, and that opportunities for improvements are identified through tally sheets and management monitoring.

#### 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 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 service has met all five requirements under Standard 7.

Consumers and their representatives randomly interviewed:

* 100% reported that the consumers the care they need most of the time or always.
* 100% stated the staff are kind and caring most of the time or always.
* 100% stated the staff know what they are doing most of the time or always.

Consumers and/or their representatives interviewed said they were generally satisfied with number and mix of members of the workforce. They reported satisfaction in relation to the quality of service provided by staff, and recent improvements in management and staff. Consumers stated they get the care and services they need most of the time or always; staff are kind and caring, and the service is well run.

The service provided evidence of various practices it has implemented to demonstrate how it meets the requirements of this standard. For example:

There is a process to manage the allocation of staff levels and staff mix across each shift with arrangements to manage staff planned and unplanned leave. Staff are informed of the organisation’s values through information booklets and position descriptions. The qualifications of members of the workforce such as registered nurses and allied health practitioners are monitored. New employees attend orientation and induction. A performance review framework is in place for each staff member.

There are processes to identify staff training needs. The training program includes compulsory training delivered by the service’s organisation and by external organisations. Staff are trained and supported to ensure the outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan. Staff are trained in the management of high impact or high prevalence risks with a variety of topics such as open disclosure, antimicrobial stewardship and restrictive practices.

The performance of all members of the workforce is assessed, monitored and reviewed. Issues identified during performance review are addressed.

The service’s plan for continuous improvement and other records indicate management monitors the service’s performance in this standard, and recent improvements were implemented to meet the requirements of the Quality Standards.

#### Requirements:

Standard 7 Requirement 3(a) 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 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 the service has met all five requirements under Standard 8.

Of consumers and their representatives randomly interviewed 100% reported that the service is well run.

Consumers and/or representatives interviewed are satisfied with the delivery of quality care and services.

The organisation provided evidence of various practices it has implemented to meet the requirements of this standard including:

There are organisation-wide governance systems. The organisation has developed a strategic plan and governance framework. There are processes to enable consumers, consumer representatives and staff to provide feedback. There are processes to collect and report relevant data with information disseminated through the regular meetings that are held at all levels of the organisation.

There are processes to monitor the service’s performance. Risk management systems and practices are in place. The organisation has a clinical governance framework. Governance systems include monitoring the accountability of the organisation’s governing body. The risk management system and practices apply to consumers.

The service’s plan for continuous improvement and other records indicate management monitors the service’s performance in this standard and recent improvements were implemented to meet the requirements of the Quality Standards.

#### 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) 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.