Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Coates |
| **RACS ID:** | 3124 |
| **Name of approved provider:** | Respect Group Limited |
| **Address details:** | Cnr Long Street & James Street ST ARNAUD VIC 3478 |
| **Date of site audit:** | 26 November 2019 to 27 November 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 18 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:** | 29 January 2020 to 29 January 2023 | |
| **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 Performance Assessment report, any response by the provider, and any other relevant information.

The met recommendations made by the Assessment Team in this Performance Assessment report may differ from the findings in the decision.

## Service details

Service name: Coates

Commission ID: 3124

Provider name: Respect Group Limited

Location: Cnr Long Street & James Street ST ARNAUD VIC 3478

Phone number: 03 5477 3300

Email address: jane.snell@respect.com.au

Type/s of service:

* Residential care
* Short-Term Restorative Care

## Publication of report

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

## Introduction

**This is the report of an assessment of Coates (the Service) conducted from 26 November 2019 to 27 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  Representatives | 13  5 |
| Care staff | 4 |
| General manager | 1 |
| Hospitality staff | 4 |
| Lifestyle assistant | 1 |
| Maintenance officer | 1 |
| Registered nurse | 1 |
| Speech pathologist | 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:

2. The organisation:

(a) has a culture of inclusion and respect for consumers; and

(b) supports consumers to exercise choice and independence; and

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found that all six requirements under Standard 1 were met.

All 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:

* All consumers interviewed confirmed that they are treated with respect.
* Three of the consumers confirmed that they are able to continue doing what they used to do such as going out in their motorised buggy to the local shops, drive their own car and attending spiritual services conducted outside of the service.
* All consumers confirmed their privacy are respected, as staff would knock on their doors before entering, assistance with showers are managed in such a way that consumers feel their privacy and dignity is maintained.

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 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.

* The Assessment Team observed staff interaction with consumers, interviews with staff members revealed staff knows the consumers and would deliver service according to consumers’ preferences, ensuring dignity and privacy is maintained.

#### 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:

(i) make decisions about their own care and the way care and services are delivered; and

(ii) make decisions about when family, friends, carers or others should be involved in their care; and

(iii) communicate their decisions; and

(iv) make connections with others and maintain relationships of choice, including intimate relationships.

##### Standard 1 Requirement 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:

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

#### Summary of Assessment of Standard 2:

The Assessment Team found that all five requirements under Standard 2 were met.

The service demonstrated assessment and planning is completed in consultation with the consumer and others they wish to have involved. Of consumers and representatives randomly sampled, 100% agreed consumers have a say in their daily activities most of the time or always. Consumers and representatives confirmed they are engaged in the initial and ongoing assessment and planning of consumers’ care and consumers can readily access other health professionals as needed.

Consumers and representatives gave various examples of how staff ensured consumers received the care they wanted and said they are confident staff respond to consumers’ requests in a timely and appropriate manner. Staff said they engage with other providers to assist in the delivery of care. They described how they use care plan information to deliver safe and effective care and services, including end of life care planning if this is something consumers wish to discuss. Consumers and representatives said they were satisfied with the communication they receive from the service when there is a change in the consumer’s health status.

Staff said they engage with other providers to assist in the delivery of care. They described how they use care plan information to deliver safe and effective care and services, including end of life care planning if this is something consumers wish to discuss. A review of consumers’ care documentation demonstrate regular reviews and clinical care updates are undertaken by qualified staff relevant to the care or services provided. Risks are identified and are regularly reviewed and updated in consultation with the consumer and/or their nominated representative.

Staff showed an understanding of how to identify and report adverse incidents or hazards and management demonstrated how the information is used to inform continuous improvement. The organisation monitors and reviews its performance in relation to these requirements completing audits to monitor services are delivered in alignment with organisational procedures.

#### 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:

(i) is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and

(ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

##### Standard 2 Requirement 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 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:

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

#### Summary of Assessment of Standard 3:

The Assessment Team found that all seven requirements under Standard 3 were met.

The organisation demonstrates that it delivers safe and effective personal and clinical care in accordance with the consumers’ needs, goals and preferences to optimise health and wellbeing. Of consumers and representatives randomly sampled, 100% said consumers always get the care they need, and consumers feel safe most of the time or always. Consumers and representatives said they are confident consumers are receiving care that is safe and right for them saying they are consulted regularly about consumers’ care and the service communicates with them promptly if there is a change in the consumer’s condition.

Management and staff described how they apply knowledge and best practice to ensure care and services meet consumers’ needs and preferences and optimises their health and well-being. Staff were observed to be kind, caring and respectful to the consumers and sensitive to their individual needs and preferences. Staff could describe responses to the changing needs of each consumer, including the need for referrals to other health professionals and sharing of information both within and outside the organisation.

High impact or high prevalence risks associated with individual consumers are identified, assessed and managed in consultation with the consumer and/or their preferred representative. Management described how they are monitoring the use of psychotropic medications in consultation with consumers, representatives, pharmacists and medical practitioners, Management said medication is used only as a last resort and provided details of three consumers who have benefited from a cessation of their psychotropic medication prescription.

Staff demonstrated an understanding of infection prevention and control practices appropriate to their positions and the service is working with other health professionals to ensure antibiotic use is monitored and appropriate. The organisation monitors and reviews its' performance in relation to these requirements completing audits, reviewing incidents and monitoring clinical indicators.

#### 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:

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

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

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

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

The organisation demonstrates that minimisation of infection related risks through implementing:

(i) standard and transmission based precautions to prevent and control infection; and

(ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

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

#### Consumer outcome:

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:

2. 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 that all seven requirements under Standard 4 were met.

Consumers and representatives expressed in various ways satisfaction with the services consumers receive and the range of opportunities available to them. Of consumers and representatives randomly sampled 100% confirmed consumers are encouraged to do as much as possible for themselves, most of the time or always. Consumers and representatives interviewed said they are satisfied staff know consumers’ care needs and preferences and staff interviewed are able to provide examples of how consumers' individuality is respected.

The service provides a program for consumers to participate in activities of their choice and seeks information and suggestions from consumers about future activities. Staff support consumers' religious affiliations and provide individual support to ensure consumers' spiritual needs are met.

Of consumers and representatives randomly interviewed, 100% said consumers like the food most of the time or always. Management said the recently renovated the kitchen has enabled them to prepare all meals freshly on the day. This commenced in July 2018 and feedback from consumers continues to be extremely positive. Consumers have input into the seasonal menu, have a choice of menu at each meal and are offered an alternative if they cannot decide.

The service provides safe, suitable and well-maintained equipment that staff are appropriately trained to use. Staff interviewed said they have access to sufficient and well-maintained equipment to enable them to complete the work effectively. Regular maintenance programs and audits occur to monitor equipment safety and condition. The organisation monitors and reviews its performance in relation to these requirements via stakeholder meetings, surveys, audits and feedback mechanisms.

#### 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:

(i) participate in their community within and outside the organisation’s service environment; and

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

##### Standard 4 Requirement 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 that 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:

2. 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 under Standard 5 were met.

Consumers and representatives randomly interviewed provided various examples that the environment is welcoming and optimises consumers’ sense of belonging, independence, interaction and function. Of consumers and representatives randomly sampled, 92% said consumers felt at home at the service. One consumer said they are starting to feel as this could be home but are not comfortable when other consumers wander into their room. Other consumers expressed their tolerance towards consumers who wander saying it is a bit like having visits from friends.

Consumers and representatives interviewed said they are satisfied staff know consumers’ care needs and preferences and staff interviewed are able to provide examples of how consumers' individuality is respected. Consumers' meetings occur as scheduled and feedback is considered in relation to the living environment.

Management outlined processes to monitor the environment and ensure furniture, fittings and equipment is safe, clean, well maintained and suitable for the consumer. Maintenance provided details of painting and carpet cleaning schedules in place to maintain the living environment. 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 organisation monitors and reviews its performance in relation to these requirements via stakeholder meetings, surveys, audits and feedback mechanisms.

#### 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:

(i) is safe, clean, well maintained and comfortable; and

(ii) 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:

2. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

#### Summary of Assessment of Standard 6:

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

All consumers and representatives considered that they are encouraged and supported to give feedback and make complaints, and that appropriate action is.

For example:

* One consumer who said he had raised issues before, was satisfied with action taken.
* Most of the consumers said they are satisfied with their care and service received living in the service they have no need to complain. However, the consumers indicated they would speak to the manager if there is a need to and were confident it will be followed up.

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 Assessment Team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

The complaints policy addresses roles, responsibilities and timeframes for responding to complaints. A review of the complaint, comments, suggestions register documented many compliments about meals and care delivered. There have been no records of complaints post June 2019. The General manager said there has not been any complaints since a change of cooked chilled meals to freshly cooked meals in the service. The General manager said she regularly chats to consumers and will deal with any concerns before it escalates to a complaint.

#### 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:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found that all five requirements under Standard 7 were met

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

* All consumers interviewed confirmed that staff are kind and caring.
* All consumers interviewed confirmed that staff know what they are doing.
* All consumers interviewed confirmed that they there are adequate staff and that call bell response is timely.
* Several consumers think of staff as their family and staff are like their friends, one said, “can’t speak highly enough of them.”

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.

All staff interviewed said they have enough time to complete their work and there is good communication and teamwork amongst the workforce. Management were responsive to changes as required, by monitoring the number and skill mix of the workforce and consumer acuity, occupancy. The organisation has recruitment processes to ensure quality and experienced staff have the qualifications, skills and knowledge to successfully complete their job. The organisation monitors and reviews staff performance in relation to these requirements.

#### 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.

### 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:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found that all five requirements under Standard 8 were met.

All consumers indicated that the organisation is well run and that they can partner in improving the delivery of care and services.

For example:

* All consumers interviewed confirmed that the service is well run.
* Consumers said they are able to express their choice, suggestions during ‘residents’ meetings such as where to visit in their next bus outing. A suggestion was raised to have the courtyard pergola fitted with blinds, this was objected to by consumers and the idea did not go ahead.
* Three consumers said the General manager is hands on and everything runs smoothly.

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).

The organisation’s governing body is accountable for the delivery of safe and quality care and services and promotes a culture of safe and quality care and service through policy and procedures, staff education and monitoring their workforce performance. The governance and organisational process includes regular management meetings and reports that ensure the governing body monitors performance including financial performance. A risk management framework is in place and a risk register is reviewed by the governing body on a regular basis.

The governance framework includes the ongoing monitoring of continuous improvement, regulatory compliance, complaints, high-impact or high-prevalence risks, and abuse and neglect. The clinical governance framework includes antimicrobial stewardship, minimising the use of restraint and open disclosure. The organisation effectively collects and trends relevant information to support governance.

#### 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 that effective organisation wide governance systems relating to the following:

(i) information management

(ii) continuous improvement

(iii) financial governance

(iv) workforce governance, including the assignment of clear responsibilities and accountabilities

(v) regulatory compliance

(vi) feedback and complaints

##### Standard 8 Requirement 3(d) Met

The organisation demonstrates that effective risk management systems and practices, including but not limited to the following:

(i) managing high-impact or high-prevalence risks associated with the care of consumers

(ii) identifying and responding to abuse and neglect of consumers

(iii) supporting consumers to live the best life they can

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

The organisation demonstrates that where clinical care is provided - a clinical governance framework, including but not limited to the following:

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure