Focus Care Solutions

Performance Report

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**Commission ID:** 201286

**Provider name:** Focus Care Australia Pty Ltd

**Quality Audit date:** 17 May 2021 to 18 May 2021

**Date of Performance Report:** 23 July 2021

# Publication of report

This Performance Report **will 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** | **Not applicable** |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

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

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

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

* the Assessment Team’s report for the Quality Audit; the Quality 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 Quality Audit report received 17 June 2021.

# STANDARD 1 COMPLIANTConsumer dignity and choice

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 1

To understand the consumer’s experience and how the service provider understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Consumers, or their representatives, interviewed 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. They said staff are polite and respectful in the way they interact with them, staff know them well including what they like and how they like things done. Consumers are encouraged to do things for themselves, and tell staff if they would like to make changes to their care or choices for example in relation to showering times and meals. They are supported to take risks to enable them to be as independent as possible. They are given information to help them make decisions about their care and services and their privacy is respected during service. Consumers, or their representatives, said that staff know what is important to them and makes them happy. Consumers and representatives were complimentary regarding the staff providing their care and services and the approach by staff and management in supporting their lifestyle choices.

Staff are recruited to meet specific individual consumer’s needs, goals and preferences and to support their chosen lifestyle. Staff interviewed spoke respectfully when discussing how they provide care and services and displayed awareness of consumer rights.

Documentation reviewed and discussion held demonstrate the service has identified the goals, needs and preferences of each consumer, including cultural and social aspects and strategies to support consumer choice and independence.

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.*

Based on the information reviewed I find this requirement Compliant.

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

*Care and services are culturally safe.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

# STANDARD 2 COMPLIANTOngoing 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

Care documentation viewed demonstrated each consumer is a partner in ongoing assessment and planning that helps the consumer get the care and services they need for their health and wellbeing. The service undertakes initial and ongoing person-centred care assessment for each consumer using accredited risk assessment tools. This occurs on commencement of the consumers’ package, is reviewed annually or if the need arises and reflected in the care plan. The assessment and planning has a focus on optimising health and wellbeing in accordance with the consumer’s needs, goals and preferences.

Overall consumers and representatives interviewed confirmed they feel like partners in the ongoing assessment and planning of their care and services. Of the consumers and representatives interviewed 100 percent confirmed they have a say in their daily activities and provided examples of how the service provides assessment and planning to identify and assess consumers’ current needs, goals and preferences, including advanced care planning and end of life planning. Consumers, and their representatives, said they feel safe, and confident staff listen to their goals and preferences and the organisation seeks input from other professionals to ensure they get the right care and services to meet their needs. Consumers, and representatives, knew about their care plan document and said they can access it at any time as they have a copy in their home. Some consumers said the care plan reflects how and when they want care and services provided and this plan was regularly reviewed each year by the care manager for effectiveness.

Staff described initial and ongoing assessment and review processes in line with the service’s processes. Staff could describe how consumers and others who contribute to the consumer’s care including medical practitioners, allied health professionals, carers and family work together to deliver tailored care and services and monitor and review the care plan as needed with the focus on optimising health and wellbeing in line with consumers’ needs, goals and preferences.

Consumer records viewed by the Assessment Team included a range of assessments relating to both clinical and lifestyle aspects of care which are completed in partnership with the consumer and or their representative on commencement, annually and where changes to consumers’ health and wellbeing are identified.

A recently established clinical governance committee and the quality manager oversee the development and review of policies and procedures, ensure clinical audits are undertaken and results reported for discussion and action.

The service has in-house clinical and allied health staff; registered and enrolled nurses, social worker, counsellor and art therapist. The service uses utilises recognised assessment tools and promotes a particular dementia care program.

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.*

The Assessment Team found that for one consumer who lost a considerable amount of weight, a nutritional assessment was not completed. It also found that risks in relation to malnutrition and associated impact on the consumer due to the weight loss was not assessed and strategies to prevent further weight loss were not monitored or discussed with the consumer and/or their representative/family members and medical officer.

In its response the provider submitted information about measures in place to recognise the consumer’s weight loss and referrals for support including an upgrade of that consumer’s home care package. It provided information which indicated that prior to the Quality Audit it undertook a clinical review which recommended referrals to a speech pathologist and a dietician, both of which were subsequently conducted. Reviews by a mental health team were seen to have been undertaken at an earlier time. The provider acknowledged that the follow up from the clinical review could have been expedited, however the provider stated it had taken steps to address that issue, and the referrals were made and reviews undertaken. It has undertaken continuous improvement activities include measuring of previous weights and establishing a referrals register.

I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

# STANDARD 3 COMPLIANTPersonal 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

Care documentation viewed demonstrated each consumer did received personal, clinical care or both personal and clinical care that is right for them, that is best practice, tailored to their needs and optimises their health and wellbeing, and that high impact or high prevalence risks associated with the care of each consumer were effectively managed.

The service generally demonstrated effective management of deterioration or that change in each consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner, and has implemented improvements.

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

The service was able to demonstrate information about the consumer’s condition, needs and preferences is generally well documented and known by staff through the information sheet, and progress notes, and communicated to others where responsibility for care is shared.

The service was able to demonstrate minimisation of infection related risks through implementation of standard and transmission-based precautions to prevent and control infection, and practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

Overall consumers sampled confirmed they are happy with the care and services they receive, on the day and time they choose. Service staff are friendly, professional and know what they are doing.

A range of policies and procedures relating to best practice care delivery were reviewed, such as wound management or restraint minimisation and staff confirmed they were easily accessible.

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.*

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

The Assessment Team found that the service did not demonstrate effective management of deterioration or change in each consumer’s mental health, cognitive or physical function or that it was responded to in a timely manner. In particular, it found that there was no reassessment of a consumer following their return from hospital, and, for another consumer, concerns regarding management of weight loss and anxiety and review of their pain.

In its response the provider submitted information regarding the management of these consumers, including a review of the consumer following return from hospital, discussions with their next of kin regarding management of care needs and provision of related services to that consumer. In relation to the other consumer the provider detailed information about supports provided or facilitated and liaison with the consumer’s next of kin. The provider acknowledged that the follow up from the clinical review could have been expedited, however the provider stated it had taken steps to address that issue and set out the interventions in relation to this consumer. The provider has undertaken continuous improvement activities including review its clinical assessment from and establishment of a referrals register.

I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

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

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

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

# STANDARD 4 COMPLIANTServices and support for daily living

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

Overall sampled consumers considered that they get the services and supports for daily living that are important for their health and wellbeing and that enable them to do the things they want to do.

Person-centred care assessment was evident, which includes identification and assessment of the consumer’s needs, goals and preferences and what support services they require that is important to them to enable them to do the things they want to do. The information was then reflected in the consumer’s care plan. Consumers interviewed stated they were happy with the quality of the meals prepared for them and the care staff discussed their preferences and meal choices each time. Consumers said that staff were meticulous with their hand hygiene when preparing their food.

Where equipment is provided, the suitability, safety and cleanliness of the equipment is monitored, and any issues identified or brought to the service’s attention are attended to in a timely manner. Consumers are supported to obtain the equipment they require for independence and safety.

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.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 4(3)(e) Compliant

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

Based on the information reviewed I find this requirement Compliant.

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

Based on the information reviewed I find this requirement Compliant.

# STANDARD 6 COMPLIANTFeedback 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

Consumers are provided with written and verbal information on how to provide feedback, raise concerns or make a complaint about their care and services. Consumers are provided with information on what they can expect from the service provider in response to their complaint.

Consumers and representatives said they do not have any concerns as they are satisfied with the service’s approach to adapting their care and services in response to their requests or suggestions. They advised they feel free to raise any issues, offer feedback and make suggestions. They said they are comfortable in contacting their care manager or management at any time.

Consumers are provided with written and verbal information on how to provide feedback, raise concerns or make a complaint.

Staff receive relevant training on supporting consumers and representatives to make their opinions known to the service. Care staff are provided with training on the feedback and complaints process and their role in informing the care manager promptly and documenting any feedback on the consumer record. Care managers maintain close communication with the consumer and their representative to ascertain their level of satisfaction on an ongoing basis. Review of the feedback and complaints records shows staff capture information.

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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

Based on the information reviewed I find this requirement Compliant.

# STANDARD 7 COMPLIANTHuman resources

### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

### Organisation statement:

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

## Assessment of Standard 7

To understand the consumer’s experience and how the service provider 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 service delivery schedules, staff qualification and training records.

Consumers and representatives interviewed were complimentary regarding the staff who provide their care and services and said staff always treat them with respect. They said they get the care they need, staff come on time and the staff know how they like to be assisted. Some consumers said staff will go above and beyond for them and adapt care and services to include things that are important to them.

The service demonstrated that staff and management are trained and supported to deliver the outcomes required by these standards and staff have the knowledge to effectively perform their roles in assessment and care planning, best practice personal and clinical care and clinical monitoring and oversight.

Staff interviewed said they have the information they need and resources to enable them to perform their role and they feel supported and valued by the service provider. Staff confirmed they receive ongoing education including annual mandatory training. Staff said performance development occurs for them and they are able to make suggestions for topics to be included in the service’s training and education program.

The service provider monitors the workforce to ensure that there are sufficient appropriately qualified staff to plan and provide safe quality care and services.

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

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*The workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### Requirement 7(3)(d) Compliant

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

Based on the information reviewed I find this requirement Compliant.

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

Based on the information reviewed I find this requirement Compliant.

# STANDARD 8 COMPLIANTOrganisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

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

## Assessment of Standard 8

To understand how the service provider 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 service provider demonstrated that consumers are actively involved in the design of their care and services and feedback from their perspective feeds into continuous improvement activities.

Consumers and their representatives confirmed they are involved in care consultations and are engaged on a day to day basis. Consumer surveys, feedback, suggestions and complaints feed into continuous improvement of care and service delivery. Overall consumer and representative feedback is that consumers receive safe quality care and services and that the personalised focus of the service provider is highly valued and appreciated by consumers and their representatives.

The management team meet regularly, has skilled representation, sets clear expectations for the service to follow and regularly reviews organisational and consumer risks including evaluation of outcomes. There are organisation wide governance systems to support effective information management, the workforce and compliance with regulatory requirements. There is a continuous improvement program in place which identifies areas for improvement and these activities are documented in the service’s continuous improvement log.

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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

### 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*
4. *managing and preventing incidents, including the use of an incident management system.*

Based on the information reviewed I find this requirement Compliant.

### 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.*

Based on the information reviewed I find this requirement Compliant.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.