Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Glenara Lakes |
| **RACS ID:** | 8068 |
| **Name of approved provider:** | Southern Cross Care (Tas) Inc |
| **Address details:** | 390 Hobart Road YOUNGTOWN TAS 7249 |
| **Date of site audit:** | 23 October 2019 to 25 October 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 22 November 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:** | 27 December 2019 to 27 December 2021 | |
| **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 Glenara Lakes (the Service) conducted from 23 October 2019 to 25 October 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 | 15 |
| Consumer representatives | 3 |
| Management | 3 |
| Clinical staff | 5 |
| Care staff | 3 |
| Hospitality and environmental services staff | 6 |
| Lifestyle staff | 2 |
| Visiting service providers such as allied health professionals | 1 |
| Other | 1 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 1:

The Assessment Team found all requirements under Standard one were met.

Consumer experience interviews show that 100% of consumers and representatives randomly interviewed agreed that staff treat them with respect all or most of the time. Of the consumers and representatives sampled 100% of consumers said they are encouraged to do as much as possible for themselves most of the time or always and 100% said staff explain things to them most of the time or always.

The organisation uses feedback, surveys and consumer meetings to confirm that consumers are satisfied that staff treat them with respect and help them maintain their identity and live the life they choose.

The service demonstrated that consumers are treated with dignity and respect. Staff were observed to interact with consumers in a way that promoted dignity and respect. Staff are provided with training opportunities in relation to privacy and dignity and respect.

The service promotes the value of others and diversity through staff training, in the range of activities it offers and in delivery of care that is tailored to the person. Staff were observed discussing the day's activities and inviting consumers to attend. Staff were able to identify consumers who wish to undertake activities which may involve a degree of risk and ways they monitor and review this.

Consumers said the service protects the privacy and confidentiality of their information and are satisfied care and services, including personal care, are undertaken in a way that respects their privacy. Staff were able to describe ways they maintain privacy during care delivery and how they make consumers feel respected and comfortable. The service also demonstrated how electronic management systems support the protection of confidential information including consumer information, consistent with documented 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 all requirements under Standard two were met.

Of consumers and representatives randomly sampled, 100% agreed they have a say in their daily activities most of the time or always. Consumers reported feeling safe and confident that staff listen to their goals and preferences, and that the service gets input from other professionals to get the right care and services to meet their needs.

Staff could describe how consumers and others who contribute to the consumers care (including health professionals) work together to deliver care and service plan and monitor and review the plan as needed.

Staff could describe how consumers and others who contribute to the consumer’s care (including health professionals) work together to ensure assessment and planning has a focus on optimising health and wellbeing in accordance with the consumer’s needs, goals and preferences.

Consumers, representatives and staff described how care and services are reviewed regularly, when there is a change to their health or wellbeing status, needs or preferences. The organisation is responsive with their communication with consumers and seeks their input to update the care and services they are receiving. Each of the consumers care profile reviewed by the Assessment Team evidenced plans have been reviewed. The Assessment Team are satisfied that advance care planning and end of life planning forms part of care planning. This was evidenced by staff knowledge and review of documentation for a consumer who recently received palliative care in the service.

Staff demonstrated an understanding of incidents and how these were identified, documented and reviewed by the service, to inform continuous improvement. The organisation monitors and reviews its performance in relation to these requirements. The assessment and care evaluation process is monitored and informed by processes such as audits, meetings and feedback.

#### Requirements:

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

The organisation demonstrates that assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.

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

The organisation demonstrates that assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.

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

The organisation demonstrates that assessment and planning:

1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and
2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

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

The organisation demonstrates that the outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.

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

The organisation demonstrates that care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

### Standard 3: Personal care and clinical care 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 all requirements under Standard 3 were met.

Of consumers and representatives interviewed and those randomly selected to participate in the consumer experience, 100% responded that they feel safe all of the time or most of the time and 87% said they get the care they need most of the time or always. However, in reviewing high impact high prevalence risks to consumers, the Assessment Team noted that the service’s monitoring of pain and potential cross infections were inconsistently monitored for effectiveness. In relation to monitoring of pain, management said that they will continue to provide ongoing support and education for care staff. In relation to potential environmental cross infection, management said they would engage an external infection consultant to monitor potential environmental risk factors.

Staff could describe how they ensure care is delivered according to consumers’ preferences and is right for them. Staff were able to identify inherent risks of consumer choices and supported them by explaining the risks to them in a manner that the consumer understands monitoring and observation of the consumers.

Each of the care plans reviewed by the Assessment Team showed care delivery of care including end of life strategies. Care plans and associated documents reviewed consultation from other healthcare professionals that guided staff in complex nursing care. Where applicable authorised decision makers (including public advocates) is documented.

#### 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) 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 all requirements under Standard four were met.

Of consumers and representatives interviewed and those randomly selected to participate in the consumer experience report, 100% said they that they are encouraged to do as much as possible for themselves most of the time or always. 80% of consumers said that they like the food all of the time or most of the time. The remaining 20% of consumers provided examples of why they had selected some of the time. Management continue working with consumers through food satisfaction surveys with results used to enhance consumers’ dining experience.

Consumers, representatives and staff provided examples about how the service promotes emotional, spiritual and psychological wellbeing. The service provides a comprehensive activities program for consumers to participate in and actively seeks information from consumers about additional individual activities in which they would like to partake. Staff described how they identify and provide one to one engagement for consumers who prefer to stay in their room. The service has a café providing beverages and light refreshments for the enjoyment of consumers and visitors.

The service demonstrated that is makes timely referrals to other community organisations and allied health services.

The service provides safe, suitable and well-maintained equipment and that staff are appropriately trained to use.

#### 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 requirements under Standard 5 were met.

Of consumers and representatives randomly sampled for the consumer experience interview, 100% said they feel safe most of the time or always and 87% responded that they get the care they need most of the time or always. Of consumers and representatives interviewed, 73% agreed that they feel at home at the service always or most of the time, while a small proportion of consumers said that the service is not their home, however they stated that they felt safe at the service and that they try the best to make feel like home. Management indicated that they will continue work towards developing strategies so that all consumers feel at home.

The service environment was observed to be welcoming with individual rooms decorated with memorabilia, photographs and other personal items and is clean and well maintained. The service has preventative and reactive maintenance schedules.

The service is well appointed, and the layout of the service enabled consumers to move around freely. Fittings and signage assist consumers to navigate the service. Consumers had ready access to tidy outdoor areas with gardens, paths and outdoor settings that enable free movement and rest areas.

Consumers reported that the service is well maintained and kept at a comfortable temperature. They have access to a range of equipment and furnishings and felt safe using them. They have access to quiet rooms to meet with family and friends and are encouraged to use all areas of the service including the outdoor areas, and the onsite library.

#### Requirements:

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

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

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

The organisation demonstrates that the service environment:

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

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

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

Of consumers and representatives randomly sampled 100% said staff follow up when they raise things most of the time or always. Consumers described their access to feedback forms and the range of feedback provided. Consumers said they are satisfied with management’s responsiveness to feedback and they said they are kept fully informed when things change.

Consumer feedback is sought through feedback forms, meetings, care reviews, surveys and verbally. Staff described times they have addressed a concern for a consumer and outlined how they would listen and resolve complaints if they could. Senior staff were aware of the open disclosure framework. Information on how to make a complaint including information in different languages was made available at the service. Feedback is recorded, responded and collated feedback forms to review trends, discussed at meetings and identify improvements opportunities.

The organisation monitors and reviews its performance in relation to these requirements. The service obtained and displayed brochures in relation to the Commission in English and other languages at the entrances to the service. Improvements are identified as a result of feedback such as improvements in food service.

#### 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 that all requirements under Standard seven were met.

All consumers and representatives randomly sampled said they receive the care they need; staff are kind and caring and that staff know what they are doing, either always or most of the time.

The organisation continuously monitors and reviews their roster to reflect current and changing consumer care needs. The organisation provide staff with orientation and induction to introduce new staff to the service. The education program ensures staff complete mandatory training and provides support to all staff with additional specialised education. The organisation has provided education regarding the Aged Care Quality Standards for all staff to become aware of and to apply new learnings. A training needs analysis is completed, and the service develops an education calendar that meets the needs of the staff at the service.

During the site audit the Assessment Team observed various interactions between consumers, their representatives and staff that were respectful, kind and caring. The service seeks feedback from consumers and their families informally and by regular surveys that seek feedback on how well services are delivered. The organisation has recruitment processes to ensure quality and experienced staff who have the qualifications, skills and knowledge to successfully complete their job.

The organisation monitors and reviews its performance in relation to these requirements. The service seeks feedback from consumers and their families informally and by regular surveys that seek feedback on how well services are delivered. The organisation has a team that oversees staff education and an education calendar is developed. The organisation has a process to support staff to develop and monitor their performance and work satisfaction.

#### 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 that all requirements under Standard eight were met

Consumers and representatives interviewed said management and staff encourage feedback and seek their opinion on care and services. Of consumers and representatives randomly sampled, the majority said the home is well run, most of the time or always.

The organisation’s governing body is accountable for the delivery of safe and quality care and services. They engage and consult with consumers and their representatives in the delivery and evaluation for care and services. The organisation’s governing body 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 reports that ensure the governing body monitors performance including financial performance.

The governance framework includes the ongoing monitoring of continuous improvement, regulatory compliance, complaints, high-impact or high-prevalence risks, and abuse and neglect. The Charter of aged care rights was displayed. 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.

The organisation monitors and reviews its performance in relation to these requirements. Monitoring occurs through feedback, meetings and reporting mechanisms.

#### 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.