Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Infinite Care Mount Lofty, Toowoomba |
| **RACS ID:** | 5765 |
| **Name of approved provider:** | Infinite Aged Care (SEQ) Pty Ltd |
| **Address details:** | 69 Stuart Street HARLAXTON QLD 4350 |
| **Date of site audit:** | 06 November 2019 to 08 November 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 11 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:** | 15 January 2020 to 15 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 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 Infinite Care Mount Lofty, Toowoomba (the Service) conducted from 6 November 2019 to 8 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 | 24 |
| Consumer representatives | 5 |
| Management | 2 |
| Clinical staff | 6 |
| Care staff | 5 |
| Hospitality and environmental services staff | 5 |
| Lifestyle staff | 2 |
| Visiting service providers such as allied health professionals | 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 the service has met all six requirements under Standard 1.

Consumer experience interviews show 100% of consumers agree staff always treat them with respect. The service uses informal and formal feedback mechanisms such as meetings, complaints processes and case conferences to ensure consumers are satisfied staff treat them with respect and support them to maintain their identity and live the life they choose.

The service demonstrated consumers are treated with dignity and respect and the service actively promotes a culture of inclusion. Consumers described the ways their social connections are supported both inside and outside the service. Staff were observed to interact with consumers respectfully and provided examples of individual consumer’s preferences and interests. The service promotes the value of culture and diversity through staff training, in the wide range of activities it offers for consumers with diverse backgrounds, and in celebrating and acknowledging days of significance to the consumers. Consumer preferences are respected and incorporated into care delivery.

Consumer experience interviews show 100% of consumers agreed staff explain things to them and they are encouraged to do as much as possible for themselves always or most of the time. Consumers said they feel heard when they tell staff what matters to them and they can make decisions about their life, even when it involves an element of risk.

Staff could provide meaningful examples of how they help consumers make choices, including by giving consumers clear and accurate information and options to inform their choice.

Consumers said the service protects the privacy and confidentiality of their information, and they are satisfied their care and services, including personal care, are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of consumers. The service demonstrated how electronic and hard copy information 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 the service has met all five requirements under Standard 2.

Consumer experience interviews show 100% of consumers always have a say in their daily activities. Consumers and representatives said they are involved with the initial and ongoing assessment and planning of their care and services to ensure it meets their needs. Consumers reported feeling confident staff are aware of their individual preferences. The service consults with specialists and allied health professionals to ensure consumers receive the appropriate care and services to suit their needs.

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 a tailored care and service plan and monitor and review the plan as needed.

The service’s monitoring system identified consumer’s individual advance care planning and end of life planning is generally captured for all consumers currently residing at the service. Consumers and their representatives said they are consulted when there is a change in consumers’ healthcare needs and documentation indicates consumers or representatives are consulted about individual consumer needs, goals and preferences.

Consumers reported their care and services are regularly reviewed and when something goes wrong, or their needs or preferences change, the service communicates with them to seek their involvement in determining the care and services they receive. Each of the care plans reviewed showed plans had been regularly reviewed.

Staff demonstrated a shared understanding of reporting incidents to qualified staff, which are investigated and reviewed; new interventions or strategies implemented to minimise the risk of reoccurrence are discussed with the consumer and representative.

#### 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 the service has met all seven requirements under Standard 3.

Consumer experience interviews show 100% of consumers get the care they need always or most of the time.

All respondents to a consumer experience interview said they always feel safe. Consumers and representatives gave various examples of how staff ensure the care provided to consumers was right for them. This included regularly asking them about their care and the way it is delivered and through involving consumers in discussions regarding alternative care options available.

Staff could describe how they ensure care is best practice, their opportunities for continuing education and how they ensure information is shared both within the organisation and with others outside the organisation. Care staff demonstrated an understanding of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics. Staff could also identify the highest prevalence risks for different cohorts of consumers and how incidents were used to inform changes in practice.

Each of the care plans reviewed indicated the delivery of safe and effective care. This included the review of consumers who had received end of life care which demonstrated their wishes and preferences had been considered and respected. A focus on pain relief, review of pain management strategies and close involvement of family and others was evident.

The organisation demonstrated they have a suite of policies and procedures underpinning the delivery of care and how they review practice and policies to ensure they remain fit-for-purpose, informed by advice from consumers and other experts.

#### 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 the service has met all seven requirements under Standard 4.

#### Consumer experience interviews show 100% of consumers are always encouraged to do as much as possible for themselves.

#### The service demonstrated it supports consumers to connect with others outside the service. Consumers stated they were supported to go on outings, and this resulted in them being able to participate in their community outside the service environment to do things of interest to them.

#### Consumer experience interviews shows 100% of consumers enjoy the food always or most of the time.

#### The service demonstrated how meals are provided to meet individual consumer’s needs and preferences and to ensure suitable variety, quality and quantity are provided.

#### Consumers interviewed said they are satisfied with the service they receive especially in relation to supports for daily living and their physical care. Consumers said they usually had someone to talk to when needed and staff were available to provide emotional support. Consumers also said they were satisfied with the activities offered at the service and were able to provide advice about activities of interest to them within the service.

#### The service could demonstrate how information regarding consumers’ condition, needs and preferences is communicated in a timely and appropriate way. Staff gave meaningful examples of how information about consumers is collected and shared and demonstrated their knowledge of consumer’s individual needs and preferences in relation to activities, pastimes, food and independence.

#### The service demonstrated consumers and staff are supported by equipment, which is safe, suitable, clean and well maintained by staff at the service and external contractors. Management could demonstrate the services and support for daily living provided at the service are monitored and reviewed, and improvements are made where needed.

#### Requirements:

##### **Standard 4 Requirement 3(a) Met**

The organisation demonstrates that each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.

##### **Standard 4 Requirement 3(b) Met**

The organisation demonstrates that services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

##### **Standard 4 Requirement 3(c) Met**

The organisation demonstrates that services and supports for daily living assist each consumer to:

1. participate in their community within and outside the organisation’s service environment; and
2. have social and personal relationships; and
3. do the things of interest to them.

##### **Standard 4 Requirement 3(d) Met**

The organisation demonstrates that information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.

##### **Standard 4 Requirement 3(e) Met**

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

##### **Standard 4 Requirement 3(f) Met**

The organisation demonstrates that where meals are provided, they are varied and of suitable quality and quantity.

##### **Standard 4 Requirement 3(g) Met**

The organisation demonstrates that where equipment is provided, it is safe, suitable, clean and well maintained.

### Standard 5: Organisation’s service environment Met

#### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

The Assessment Team found the service met all three requirements under Standard 5.

Consumer experience interviews show 100% of consumers feel at home at the service most of the time or always.

The service was observed to be welcoming, clean and well maintained with appropriate furniture, fittings and equipment. Consumers display photographs, memorabilia and other personal items in their rooms. Displayed signage assists consumers find their way around the service and there is ready access to outdoor living areas including areas with seating and tidy gardens. Paths and handrails enable free movement throughout the service.

Consumers said:

* The service was well maintained and kept at a comfortable temperature.
* They have access to a range of furnishings and equipment suitable to their needs and felt safe using them.
* They have access to outdoor living areas, gardens, and lounge areas to use as a quiet space to meet with family and friends.
* They are encouraged to use all areas of the service including an activities area where social gatherings, games and church services are held.

Consumer experience interviews show 100% consumers always feel safe at the home.

Policies and procedures described systems for the purchase, service and maintenance of furnishings, fittings and equipment. There are risk management processes to ensure environmental related risks to consumers are identified and managed. Staff interviewed confirmed their understanding of the systems and maintenance arrangements. Management confirmed the service environment is a standing agenda item for regular Board Committee Meetings where any emerging risk or maintenance issues are discussed.

#### 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 the service has met all four requirements under Standard 6.

Consumer experience interviews show 100% of consumers agreed staff follow up when they raise things with them most of the time or always.

Consumers interviewed were unable to provide examples of complaints or feedback that has been provided to the service however consumers said they feel safe and comfortable giving feedback and/or making complaints and are confident any issues raised with be dealt with by management in a timely manner with their involvement. A review of meeting minutes identified consumers had provided feedback, been consulted with and the feedback actioned. Consumers reported they were happy with the outcomes of this feedback.

The service demonstrated consumers and/or representatives are aware of, understand how to, and are encouraged to, give feedback and make complaints.

The service demonstrated consumers and/or representatives have access to advocates, language services and other mechanisms for raising and resolving complaints.

The service demonstrated appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong. The organisation further demonstrated feedback and complaints are reviewed at Board Committee Meetings and used to improve the quality of care.

#### Requirements:

##### **Standard 6 Requirement 3(a) Met**

The organisation demonstrates that consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

##### **Standard 6 Requirement 3(b) Met**

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

##### **Standard 6 Requirement 3(c) Met**

The organisation demonstrates that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

##### **Standard 6 Requirement 3(d) Met**

The organisation demonstrates that feedback and complaints are reviewed and used to improve the quality of care and services.

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found the service has met all five requirements under Standard 7.

Consumer experience interviews show 100% of consumers get the care they need; staff know what they are doing and are kind and caring, always or most of the time.

The service demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identify, culture and diversity. Consumers provided examples of staff engaging with them regarding their everyday care and service needs. Consumers said staff know their individual care needs and preferences and consumers feel supported by staff. Interactions between staff and consumers and other providers of care to the service were observed to be kind, caring and respectful. The service monitors human resources processes and practices through undertaking regular audits and surveys. A review of the electronic management system identified the audits and surveys have been undertaken in accordance with organisational requirements.

The service demonstrated there is sufficient, skilled and qualified staff to provide safe, respectful and quality care and services. Recruiting processes ensure suitable staff have relevant qualifications on commencement. Staff are offered internal and external training opportunities to ensure they have the required knowledge and skills to deliver care and service. The service demonstrates regular assessment, monitoring and review of the performance of each member of the workforce.

#### 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 the service met all five requirements under Standard 8.

Consumer experience interviews show that 100% of consumers/representatives said the service is well run most of the time or always.

The service demonstrated they involve consumers in the design, delivery and evaluation of care and services, providing examples of how consumers are involved in the co-design of services and engaged on a day-to-day basis. Consumers/representatives said they are involved in care planning and delivery and provided various examples of how this occurs.

The governing body meets regularly, sets clear expectations for the organisation and regularly reviews risks from an organisational and consumer perspective. There are service governance systems to support effective information management, the workforce, compliance with regulations and clinical care. The clinical governance framework addresses anti-microbial stewardship, open disclosure and minimising the use of restraint. Staff interviewed understood these concepts and could explain how they were applied in practice.

#### 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.