Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Kowree Nursing Home Unit |
| **RACS ID:** | 3498 |
| **Name of approved provider:** | Edenhope & District Memorial Hospital |
| **Address details:**  | 128 - 134 Elizabeth Street EDENHOPE VIC 3318 |
| **Date of site audit:** | 03 September 2019 to 04 September 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 10 October 2019 |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the *Aged Care Quality and Safety Commission Rules 2018 (*Rules) about the accreditation of a service. |
| **Decision:** | To re-accredit the service under section 41 of the Rules. |
| **Further period of accreditation:** | 06 November 2019 to 06 November 2022 |
| **Assessment of performance with the Aged Care Quality Standards** |
| Standard 1 Consumer dignity and choice | Met |
| Requirement 1(3)(a) | Met |
| Requirement 1(3)(b) | Met |
| Requirement 1(3)(c) | Met |
| Requirement 1(3)(d) | Met |
| Requirement 1(3)(e) | Met |
| Requirement 1(3)(f) | Met |
| Standard 2 Ongoing assessment and planning with consumers | Met |
| Requirement 2(3)(a) | Met |
| Requirement 2(3)(b) | Met |
| Requirement 2(3)(c) | Met |
| Requirement 2(3)(d) | Met |
| Requirement 2(3)(e) | Met |
| Standard 3 Personal care and clinical care | Met |
| Requirement 3(3)(a) | Met |
| Requirement 3(3)(b) | Met |
| Requirement 3(3)(c) | Met |
| Requirement 3(3)(d) | Met |
| Requirement 3(3)(e) | Met |
| Requirement 3(3)(f) | Met |
| Requirement 3(3)(g) | Met |
| Standard 4 Services and supports for daily living | Met |
| Requirement 4(3)(a) | Met |
| Requirement 4(3)(b) | Met |
| Requirement 4(3)(c) | Met |
| Requirement 4(3)(d) | Met |
| Requirement 4(3)(e) | Met |
| Requirement 4(3)(f) | Met |
| Requirement 4(3)(g) | Met |
| Standard 5 Organisation’s service environment | Met |
| Requirement 5(3)(a) | Met |
| Requirement 5(3)(b) | Met |
| Requirement 5(3)(c) | Met |
| Standard 6 Feedback and complaints | Met |
| Requirement 6(3)(a) | Met |
| Requirement 6(3)(b) | Met |
| Requirement 6(3)(c) | Met |
| Requirement 6(3)(d) | Met |
| Standard 7 Human resources | Met |
| Requirement 7(3)(a) | Met |
| Requirement 7(3)(b) | Met |
| Requirement 7(3)(c) | Met |
| Requirement 7(3)(d) | Met |
| Requirement 7(3)(e) | Met |
| Standard 8 Organisational governance | Met |
| Requirement 8(3)(a) | Met |
| Requirement 8(3)(b) | Met |
| Requirement 8(3)(c) | Met |
| Requirement 8(3)(d) | Met |
| Requirement 8(3)(e) | Met |

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

Site Audit Performance
Assessment Report

The Commission makes the decision taking into account this site audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this site audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Kowree Nursing Home Unit (the Service) conducted from 03 September 2019 to 04 September 2019.**

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

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

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

This Report is to be read in conjunction with the Quality Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Consumers and representatives | 8 |
| Chef | 1 |
| Chief executive officer | 1 |
| Director of nursing  | 1 |
| Executive assistant | 1 |
| General services manager, hotel services staff and environmental maintenance staff | 4 |
| Infection control officer | 1 |
| Lifestyle staff | 1 |
| Nursing staff | 4 |
| Nursing Students | 2 |
| Nursing unit managers and rostering manager | 2 |
| Occupational health and safety officer | 2 |
| Quality and risk coordinator | 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 recommends that the organisation has met all six requirements under Standard 1.

The service demonstrated consumers are treated with dignity and respect and the service actively caters to consumers individual care needs. Due to the advanced stages of consumers illness, a majority of consumers require specific strategies when communicating such as using body language and eye movement. Consumers and representatives said they feel heard and staff are respectful when providing care. Staff feedback included identifying consumers as individuals and the importance of communication with the consumers when providing care.

A local church group and minister help support cultural safety and provide religious support for consumers and the service has access to a social worker for consumers/representatives who require additional support. Staff interviewed identified ways consumers cultural, emotional, spiritual and religious needs are respected and supported. Staff were observed to interact with consumers respectfully and could identify consumer’s individual preferences and histories.

Consumers and representatives say they are confident the service protects the privacy and confidentiality of consumers’ information and they are satisfied with care and services. Health and care related information of consumers is shared with relevant staff and health professionals and stored on password protected on a electronic care system.

Staff provided meaningful examples of how they help consumers make choices, including by giving consumers and representatives clear and accurate information. Staff also provide examples of how they help consumers to make choices and assist them in doing what they want to do, even if this involves an element of risk. Consumers and representatives interviewed confirm they feel well informed and supported to maintain their identity and live the life they choose.

The service monitors and reviews each requirement in this Standard through formal review of individual consumer’s care needs, feedback mechanisms and surveys.

#### 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 the five requirements under Standard 2.

Consumers and representatives confirm that conversations with staff occurred about care needs on entry to the service and are satisfied with the level of contact and information provided by the service in relation to the consumer. While representatives said they cannot recall formal care plan consultations they are kept informed about the care the consumer is receiving and communication from the service when care needs change.

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

Staff described how care and services are reviewed regularly through the ‘resident of the day’ process and when there is a change to the health or wellbeing status of the consumer. Interviews and documentation confirmed the organisation is responsive in their communication with consumers and their representatives when changes occur in the care and services the consumer is receiving.

Documentation of care files show consultation with consumers and representatives to address consumer’s needs, goals and preferences relating to advance care and end of life planning. Staff explain how this information is used in the assessment and care planning process. The end of life pathway booklet used by the service shows detailed steps and processes in place to promote pain free care and comfort when providing palliative care.

The service monitors and reviews each requirement in this Standard through formal review of individual consumer’s care needs, feedback and internal auditing.

#### 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 the seven requirements under Standard 3.

The service demonstrated a collaborative process is used to tailor both clinical and personal care to the individual to optimise their health and well-being. Collaboration with medical officers, health care professionals and representatives are documented. Consumers and representatives interviewed said they were satisfied with the care provided by the service and provided examples of what this meant to the consumer.

Management demonstrated how information is shared in a confidential way with relevant staff within the service and external health specialists and services. Staff demonstrated a working understanding of precautions to prevent and control infection and the steps they could take to minimise the need for antibiotics. Management demonstrated their internal processes for identifying, management and review of high prevalence risks such nutrition and hydration, wound care, antipsychotics medication use and behaviour management.

Management demonstrated how they have recognised and responded to deterioration in a consumer’s mental health or physical function in a timely manner and how the use of external services is implemented when required.

Care and service plans reviewed by the Assessment Team evidenced the delivery of safe and effective care, including end of life care, wound management, medication management and specialised nursing care. Management demonstrated how timely and appropriate referrals to other health services occur most of the time for consumers and how relevant correspondence is included in care plans. Management demonstrated how various policies and procedures relating to clinical care are informed by industry best practice and accessible to staff.

The service monitors and reviews each requirement in this Standard through formal review of individual consumer’s care needs and internal audits.

#### 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 recommends that the organisation has met all seven requirements under Standard 4.

Consumers and representatives interviewed confirmed satisfaction with services and supports for daily living that meets their needs. Staff provided examples how consumers are encouraged to remain independent by completing small tasks supervised such as plate collection and making cups of tea. Consumers from the nursing home have attended community bus outings with the co-located service and staff provided examples of community engagement with volunteers. Consumers and representatives provided examples on how consumers emotional and spiritual needs are met. Food satisfaction is identified by consumers and representatives with alternative meal and drink preferences offered by staff when a consumer is not enjoying their meal. Management advise that meal satisfaction is audited through surveys and feedback mechanisms.

The service demonstrates the process of providing information to health professionals when a consumer’s health needs change. Consumers and representatives are satisfied any changes in their condition are discussed with them and where needed, referrals to other health professionals occur in a timely manner.

Care and lifestyle staff adapt ways to support consumers to live the life they want and help support consumers with their individualised activity plans which involve group and one to one activity. Consumers were observed participating in individualised solo activities with staff support. Staff were observed to engage in respectful interactions with consumers and identified consumers who required additional support.

The service monitors and reviews each requirement in this Standard through formal reviews of individual consumer’s care needs, feedback mechanisms and surveys.

#### 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 recommend that the organisation has met all three requirements under Standard 5.

The organisation demonstrated that it provides a welcoming service environment that optimises consumers’ sense of belonging, independence, function and also monitors and reviews its performance.

Consumers and representatives described in various ways how the service is safe and comfortable and staff are welcoming; supporting the consumers’ sense of belonging. Representatives said staff make them feel welcome and there is a ‘quiet room’ for families and consumers to use.

An open communal dining and lounge area has room for consumers who may require specialised nursing chairs. Furniture is well maintained and clean and the area has natural light and views of outdoor garden areas. One consumer expressed satisfaction that they are able to move around within the building and have access to an external garden area. The mainly shared bedrooms contain personal items and individualised bed covers.

Staff, consumers and representatives said cleaning and laundry services are satisfactory. Cleaning schedules and preventative maintenance are in place and monitored by internal environmental audits. Maintenance requests are prioritised with timely repairs. Staff demonstrated an understanding of the services procedures to ensure a safe living environment. Management demonstrated how feedback and monitoring processes result in continuous improvements at the service.

#### Requirements:

Standard 5 Requirement 3(a) Met

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

Standard 5 Requirement 3(b) Met

The organisation demonstrates that the service environment:

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

Standard 5 Requirement 3(c) Met

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

### Standard 6:Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

The Assessment Team recommend that the organisation has met all four requirements under Standard 6.

The organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints and have appropriate action taken in response to their complaints.

Consumers and representatives said staff follow up when they raise things with them. Consumers and representatives expressed in different ways they either had no cause to complain or would raise their concern with staff who offered encouragement and support when providing feedback and complaints. Staff interviewed were able to give examples of ways to assist consumers to complain by providing forms and immediately escalating the matter to a nurse or management as appropriate.

Information on internal and external feedback and complaint processes are on display and available in consumer information packs and discussed at consumers’ meetings. Management analyse feedback information for trends, discuss at meetings and identify improvements which are documented on the continuous improvement plan and used to improve services.

The organisation has developed an open disclosure framework and management demonstrated an awareness of this providing documented examples of open disclosure used when responding to consumer/representative feedback.

#### 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 recommend that the organisation has met all five requirements under Standard 7.

The organisation demonstrated 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, respectful and quality care and services.

Consumers and representatives provided positive feedback about the workforce saying staff are kind and caring and staff know what they are doing. Consumers and representatives confirmed they feel staff value their identity, culture and diversity and their preferences are respected. Consumer feedback and observations by the Assessment Team showed staff interacting with consumers in kind, caring and generally respectful ways. On two occasions staff were overheard asking a consumer about their toileting requirements in front of other consumers.

Staff interviewed were satisfied they have enough time to complete their tasks and said they support each other with team work. All staff spoke positively about access to education. Staff identify the process to access consumers’ care plans to meet the care needs of consumers and identify the work instructions given are clear and updated regularly. Verbal and written handover is also conducted on each shift.

Management explained, and documentation confirmed the service has processes in place for rostering of staff and replacing unplanned leave. Staff provided examples of occasions where the roster has been adjusted to meet the changing needs of consumers.

Staff interviewed were also satisfied they have relevant work instructions and receive copies of position descriptions on commencement of employment. Recruitment, selection, induction and orientation processes ensure staff have the required knowledge, qualifications and skills to deliver services. The organisation monitors staff compliance including nursing registrations, police checks and monthly reports are provided to management of the service.

#### 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 recommend that the organisation has met all five requirements under Standard 8.

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

Consumers and representatives indicated the service is well run. Consumers and representatives said in various ways there are opportunities for them to be involved in care and services, design and delivery. These include consumer meetings, satisfaction surveys and direct meetings with staff or management. The service demonstrated they involve consumers in the development, delivery and evaluation of care and services, providing examples of consumers and representatives being invited to participate in Consumer Advisory Committees and contributing to the design and furnishing choices for their new aged care facility, currently under construction.

Staff show informal consultation occurs with consumers and representatives and the service is strengthening care plan consultations with consumers and representatives.

Service performance is monitored and reviewed at organisational level through review of key performance data including incident data, review of consumers and representative feedback and satisfaction surveys with results provided to management and the Board as appropriate. There are dedicated responsibilities and reporting requirements in relation to information, financial and workforce governance, regulatory compliance and feedback and complaints.

High risk or high prevalence risk management includes individual consumers being provided information regarding their right to take risk and completion of risk assessments by staff. These results, as well as minimising the use of restraint are reviewed and addressed in management meetings.

#### 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.