Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Lorne Nursing Home |
| **RACS ID:** | 4368 |
| **Name of approved provider:** | Lorne Community Hospital |
| **Address details:**  | Albert Street LORNE VIC 3232 |
| **Date of site audit:** | 24 September 2019 to 25 September 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 22 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:** | 04 December 2019 to 04 December 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 Lorne Nursing Home (the Service) conducted from 24 September 2019 to 25 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 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 | 12 |
| Representatives | 2 |
| Acting chief executive officer | 1 |
| Activities coordinator | 1 |
| Care staff | 1 |
| Enrolled nurses | 4 |
| Environmental services staff | 2 |
| Nurse unit manager | 1 |
| Quality manager | 1 |
| Registered nurse | 1 |
| Support services manager | 1 |
| Volunteers | 2 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

2. The organisation:

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

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

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found the organisation met all six requirements under Standard 1.

Consumers interviewed confirmed staff treat them with respect always or most of the time. The organisation promotes and fosters consumer input by such mechanisms as comments and complaints, surveys, meetings and on an individual basis.

The Assessment Team observed staff to engage with consumers in a kind, caring and respectful manner. Interviews with staff gave examples of how compilation of the consumer’s life story, other lifestyle information and care plans help inform personalised care and support consumer identity. The model of care adopted by the organisation fosters individualised support, based on a consumer’s interests and abilities. Consumers said that staff support and encourage them to maintain relationships in the service and within the wider community, with consumers still active in the local community from where many had their origins.

The organisation is inclusive of culturally and diverse speaking consumers and accommodate their preferences along with those of their predominately Anglo Saxon background. Staff said that they have completed a range of consumer focused education including dementia and customer service as well as training in the Montessori approach to care.

Observations and consumers interviewed confirmed the service facilitates consumers to take the risks they choose in order to live a fulfilled life. These include walking to, or otherwise accessing the township on their own. There is information regarding the service consumer packs and the Charter of Aged Care Rights is on display and has been discussed with all consumers.

Consumers said that they understand the information provided to them and are happy how the organisation protects their privacy and confidentiality of information. Policies and procedures regarding privacy and confidentiality help support staff practices. The organisation demonstrated how information storage is kept secure, safe and confidential.

#### Requirements:

##### Standard 1 Requirement 3(a) Met

The organisation demonstrates that each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

##### Standard 1 Requirement 3(b) Met

The organisation demonstrates that care and services are culturally safe.

##### Standard 1 Requirement 3(c) Met

The organisation demonstrates that each consumer is supported to exercise choice and independence, including to:

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

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

(iii) communicate their decisions; and

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

##### Standard 1 Requirement 3(d) Met

The organisation demonstrates that each consumer is supported to take risks to enable them to live the best life they can.

##### Standard 1 Requirement 3(e) Met

The organisation demonstrates that information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.

##### Standard 1 Requirement 3(f) Met

The organisation demonstrates that each consumer’s privacy is respected and personal information is kept confidential.

### Standard 2: Ongoing assessment and planning with consumers Met

#### Consumer outcome:

1. I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

#### Organisation statement:

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

#### Summary of Assessment of Standard 2:

The Assessment Team found that the organisation has met all five requirements under Standard 2.

The organisation demonstrates the consumer is a partner in ongoing assessment and planning that helps the consumer get the care and services needed for their health and wellbeing.

Consumer experience interviews show 92% of consumers and representatives agreed that they have a say in their daily activities most of the time or always. Consumers and representatives provided various examples of how they are involved in assessing and planning their care to maintain their health and wellbeing and help them get the care they need. These examples included individual discussions with staff and being confident that staff support their choices regarding care needs. Of the 8% of consumers who said they only sometimes have a say in daily activities, this was in relation to their inability to participate and own preference in not participating in activities. Management gave feedback on how consumers were individually supported with personalised plans.

Staff could describe how consumers and other stakeholders who contribute to the consumers’ care (including medical practitioners, allied health professionals and family) work together to deliver a tailored care and service plan and monitor and review the plan as needed.

Consumers gave examples of how they are involved in reviewing care and services including when needs or preferences change. The Assessment Team were satisfied that advance care planning and end of life planning formed part of care planning. Consumer care plans sampled by the Assessment Team demonstrated regular reviews and clinical care updates were undertaken by qualified staff relevant to the care or services provided.

#### Requirements:

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

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

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

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

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

The organisation demonstrates that assessment and planning:

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

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

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

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

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

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

### Standard 3: Personal care and clinical care Met

#### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

The Assessment Team found that the organisation has met all seven requirements under Standard 3.

The organisation demonstrates that it delivers safe and effective personal and clinical care in accordance with the consumers’ needs, goals and preferences to optimise health and wellbeing.

Of consumers and representatives randomly sampled, 100% said that consumers always get the care that they need and consumers feel safe most of the time or always. Consumers and representatives provided various examples of how staff ensured the care provided is right for consumers. This included staff being aware of and responding to current needs and ensuring referrals are made when care needs change or increase. The Montessori model of care adopted by the service ensures that staff are aware of the consumers’ life stories and this has a positive impact on meeting consumers’ care needs and understanding of their preferences.

Staff were observed to be kind, caring and respectful to the consumers and sensitive to their individual needs and preferences. Staff could describe how they ensure best practice and responsive to the changing needs of each consumer, including the need for referrals to a range of allied health professionals and sharing of information both within and outside the organisation. Staff are aware of consumers at risk and how incidents and changes in care needs prompt review and assessments.

Care plans viewed by the Assessment Team demonstrated the delivery of safe and effective care. Staff discussed how they manage the sensitive topic of understanding and attending to the individual needs of consumers when entering end of life. Staff are trained to discuss advanced care wishes in a sensitive and thoughtful manner

The service demonstrates that ongoing and holistic multidisciplinary reviews and consultations with the consumer, family or representatives ensure personal and or clinical care is safe and right for each consumer.

#### Requirements:

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

The organisation demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

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

The organisation demonstrates that effective management of high impact or high prevalence risks associated with the care of each consumer.

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

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

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

The organisation demonstrates that deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

The Assessment Team found that the organisation has met all seven requirements under Standard 4.

Of consumers and representatives randomly sampled, 100% agreed consumers are encouraged to do as much for themselves, within their physical capabilities, most of the time or always. 100% of consumers and representatives randomly sampled also stated that consumers liked the food most of the time or always. Consumers stated that there are alternatives available if they don’t like the main meal on offer, there are sufficient quantities of food and that consumers have input into the menu, as well as contributing to some evening meals by doing food preparation. The service described how consumers have input into the meals and improvements that have been made following consumer suggestions.

The service demonstrated that timely referrals are made to other organisations and have the benefit of a co-located hospital with on call medical practitioners, specialist services and telehealth capabilities. The service provides safe, suitable and well maintained equipment and that staff are appropriately trained to use equipment.

The organisation demonstrated that it supports consumers to connect with other supports, services and programs including people outside the home with consumers participating in local community activities. Feedback is sought from consumers about activities of interest to them. The organisation demonstrated that it supports consumers’ emotional, spiritual and psychological wellbeing.

#### Requirements:

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

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

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

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

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

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

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

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

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

Consumers expressed satisfaction with their environment saying they are assisted to personalise their living space with favourite and preferred items. Consumer experience interviews show that 100% of consumers and representatives said consumers felt safe and at home here most of the time or always.

The service environment was observed to be clean, tidy and well maintained. The building design enable consumers to move around easily utilising many of the communal sitting areas. Visual prompts such as large print signage and individual coloured doors to consumers’ rooms assist consumers to find their way around independently. Consumers had access to outdoor courtyards, gardens, outdoor furniture and paths supporting free and safe movement.

Management outlined processes to monitor the environment and ensure furniture, fittings and equipment is safe, clean, well maintained and suitable for the consumer. Staff could describe maintenance processes and how they report any issues they identify. Cleaning staff were observed to be carrying out their duties observing consumer’s choice and privacy options. An environmental audit completed by Dementia Services Australia contributed to a recent renovation improving the environment for people living with dementia.

#### Requirements:

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

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

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

The organisation demonstrates that the service environment:

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

(ii) enables consumers to move freely, both indoors and outdoors.

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

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

Consumer experience interviews show that 100% of consumers and representatives said staff follow up on things most of the time or always. Consumers and representatives interviewed said management and staff encourage feedback and expressed various ways they can raise any concerns they may have. Several consumers and representatives expressed their satisfaction with management’s response and follow-up to a concern they raised.

The organisation demonstrated that it seeks feedback from consumers and representatives via a number of mechanisms including feedback forms, consumer meetings, surveys, care plan consultations and directly to staff during care and service. Staff described in various ways how they could address a complaint made by consumers including fixing the issue themselves, reporting the issue to management or obtaining a feedback form for the consumer to complete.

Management demonstrated ways they encourage and support consumers and representatives to provide feedback and make complaints. The service informs consumers about these processes and how they can access assistance to make a complaint using advocates and language services, if required. Management provided examples of how feedback from consumers and representatives has been used to improve and enhance care and services within the organisation and how these systems link to continuous improvement opportunities.

The organisation has a ‘complaints management’ and ‘open disclosure’ policy and procedure which includes an electronic system to record, track and manage feedback. Management demonstrated an open disclosure approach to the management of incidents and has embedded this in their feedback and complaints management process.

#### Requirements:

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

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

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

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

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

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

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

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

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found the organisation has met all five requirements under Standard7.

Consumer experience interviews show that 100% of consumers and representatives said they consider staff have the required knowledge to provide care, consumers get the care they need from kind and caring staff. Consumers and representatives expressed their satisfaction with staffing levels and staff responsiveness.

Recruitment processes ensure the recruitment of appropriately qualified staff. Management demonstrated how the workforce is planned and monitored according to organisational and consumers’ needs. Orientation and buddy shifts are provided to new staff to help them settle into the service and learn their role. Staff confirmed in various ways they have enough staff to ensure they provide safe and quality care and services. The service uses a range of processes to monitor staff performance including observation, monitoring incidents, analysis of consumer feedback and performance appraisals.

Education is provided across a range of areas to ensure staff are provided with knowledge on various topics, including a number of mandatory topics. Staff interviewed confirmed attendance to a range of education, including the Quality Standards and said that consumer choice and respect is paramount in care. The Assessment Team observed respectful staff interactions with consumers throughout the visit.

#### Requirements:

##### Standard 7 Requirement 3(a) Met

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

##### Standard 7 Requirement 3(b) Met

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

##### Standard 7 Requirement 3(c) Met

The organisation demonstrates that the workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.

##### Standard 7 Requirement 3(d) Met

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

##### Standard 7 Requirement 3(e) Met

The organisation demonstrates that regular assessment, monitoring and review of the performance of each member of the workforce.

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found the organisation has met all five requirements under Standard 8.

Consumers and representatives interviewed said management and staff encourage feedback and seek their opinion on care and services. Of consumers and representatives randomly sampled, 100% said the home is well run, most of the time or always.

The service has a continuous improvement plan that is developed from a range of sources including feedback forms, meeting minutes, audits and observations. Information is provided to consumers through a range of formats including newsletters and emails. Consumer information from meetings, surveys, incidents and complaints is reported to the board for monitoring.

The organisation’s governing body is accountable for the delivery of safe and quality care and services. Consumers and representatives confirmed they are consulted in the development, delivery and evaluation for care and services, providing various examples of how this occurs. For example, a consumer sits on the employment interview panel, consumers are members of site-based committees and others have input into the lifestyle program and menu through regular meetings.

The organisation’s governing body promotes a culture of safe, inclusive and quality care and service through policy and procedures, staff education, memoranda and notices. The governance structure including organisational chart, committee structure, communication strategies and monthly reports demonstrate how information is reported to key decision makers within the organisation. This includes information and data on continuous improvement, financial governance, workforce governance, regulatory compliance and complaints. High-impact or high-prevalence risks, and abuse and neglect are identified, managed and reported.

The clinical governance framework includes antimicrobial stewardship, minimising the use of restraint and open disclosure. Staff interviewed understood these concepts and how they are 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 that effective organisation wide governance systems relating to the following:

(i) information management

(ii) continuous improvement

(iii) financial governance

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

(v) regulatory compliance

(vi) feedback and complaints

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

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

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

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

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

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

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

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure