Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Palm Lake Care Mt Warren Park |
| **RACS ID:** | 5763 |
| **Name of approved provider:** | Palm Lake Care Operations Pty Ltd |
| **Address details:**  | 33 Mt Warren Park Boulevard Mt Warren Park QLD 4207 |
| **Date of site audit:** | 21 August 2019 to 23 August 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 08 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:** | 09 November 2019 to 09 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 | Not Met |
| Requirement 3(3)(a) | Met  |
| Requirement 3(3)(b) | Not 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 |
| **Timetable for making improvements:** | By 02 December 2019  |
| **Revised plan for continuous improvement due:** | By 23 October 2019  |

**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 Palm Lake Care Mt Warren Park (the Service) conducted from 21 August 2019 to 23 August 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 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** |
| --- | --- |
| Activities Coordinator | 1 |
| Catering staff | 3 |
| Laundry supervisor | 1 |
| Consumers | 23 |
| Physiotherapist | 1 |
| Care staff | 7 |
| Representatives | 3 |
| Cleaning staff | 2 |
| Registered staff | 4 |
| Medical Officer | 1 |
| Hairdresser | 1 |
| Administration Officer | 1 |
| Clinical Manager | 1 |
| Maintenance Officer | 1 |
| Chef | 1 |
| Service Manager | 1 |
| Clinical Governance and Quality Manager | 1 |
| Clinical Manager  | 2 |
| Lifestyle staff | 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:

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 that the organisation has met all six requirements under Standard 1.

Consumer experience interviews indicate that all consumers agreed that staff always treat them with respect and explain things to them. The organisation uses an anonymous feedback and complaints mechanism to ensure that consumers are satisfied that staff treat them with respect and support them to maintain their identity and live the life they choose.

The organisation demonstrated that consumers are treated with dignity and respect, and that the service actively promotes a culture of inclusion. Staff were observed to interact with consumers respectfully and could readily identify consumer’s individual preferences and interests. Consumers described the ways their social connections are supported both inside and outside the service. 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 preferences and in delivery of care that is tailored to the person.

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 they feel heard when they tell staff what matters to them and that they are able to make decisions about their life, even when it involves an element of risk.

Consumers said the organisation protects the privacy and confidentiality of their information, and that they are satisfied that 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. They could demonstrate their understanding that consumers receiving personal care can feel vulnerable and what they do to ensure consumers are made to feel respected and comfortable. The organisation demonstrated how electronic and filing 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:

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 Not 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 four of five requirements in relation to Standard 2.

Consumer experience interviews indicate that all consumers agreed that they have a say in their daily activities. staff meet their healthcare needs always or most of the time. Consumers said their direct engagement in the initial and ongoing assessment and planning of their care helps them to get the care and services they need. Consumers reported feeling safe and confident that staff listen to their goals and preferences, and that the organisation seeks input from other professionals to ensure they get the right care and services to meet 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.

Consumers reported that their care and services are regularly reviewed and that when something goes wrong, or their needs or preferences change, the organisation is quick to communicate with them and seek their input to update the care and services they are getting. Each of the care plans reviewed showed plans had been regularly reviewed (with changes made) and included a date however the application of physical restraints had not been assessed for risk or reviewed by a Medical Officer as per the service’s guidelines. The service staff demonstrated an understanding of adverse incidents or near-miss events and how these were identified, documented and reviewed by the service, to inform continuous improvement.

The Assessment Team was satisfied that advance care planning and end of life planning formed part of care planning. This was evidenced by documentation for five consumers’ who said they had discussed their end of life and palliative care wishes with staff. There was evidence that the outcomes of such planning were documented in care plans.

#### Requirements:

##### Standard 2 Requirement 3(a) Not 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 Not 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 six of the seven requirements in relation to Standard 3 were met.

Consumer experience interviews indicate that all staff meet their healthcare needs and that they feel safe always or most of the time. Consumers reported feeling safe and confident that they are receiving quality care.

Consumers provided positive feedback about the delivery of personal and clinical care and said they were satisfied with the service’s responsiveness when their needs changed and satisfaction with referral processes. Consumers said staff regularly review their care needs and seek advice from allied health professionals when needed. Consumers said staff wear personal protective equipment when cleaning or providing personal care.

The organisation provided evidence to demonstrate that generally consumers get safe and effective personal and clinical care that is best practice, tailored to their needs and optimises their health and well-being. The organisation was able to demonstrate that deterioration or changes in a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner. Information about the consumer’s condition, needs and preferences is generally documented and communicated, including timely referrals to others. The organisation demonstrated processes to minimise infection related risks however, the organisation did not demonstrate the effective management of high impact risks associated with the care of consumers, including medications, diabetes and restraint management.

#### 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) Not 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.

#### Summary of Assessment of Standard 4:

The Assessment Team found that all seven requirements in relation to Standard 4 were met.

Consumers interviewed said they are satisfied with the services they receive especially in relation to their physical care and food at the service. Consumer experience interviews indicate that all consumers/representatives randomly interviewed said they like the food most of the time or always. The service demonstrated how meals meet individual consumer’s likes, dislikes and food preferences, ensuring a suitable variety, quality and quantity are provided.

Consumers said their leisure interests, emotional and psychological needs are met, and staff could demonstrate ways this is done in a supportive manner. Staff demonstrated how consumers are supported to things of interest to them including one to one, group activities and outings to places of interest including bus trips to the local sporting clubs and community parks.

The service could demonstrate how it supports consumers to connect with other supports and people outside the service. Consumers expressed satisfaction with the how they are supported and enabled to live their daily life as they choose including having their emotional and spiritual needs and preferences respected. The service could demonstrate how information regarding consumers’ needs and preferences are communicated in a timely and appropriate way. Staff could provide meaningful examples of how information about consumers is collected and shared and demonstrated their knowledge of consumers’ individual needs and preferences in relation to activities, pastimes and independence.

The service demonstrated consumers and staff are supported by equipment which is safe, suitable, clean and well maintained through 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, any 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:

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 met all three requirements in relation to this Standard.

Consumer experience interviews indicate that all consumers feel safe at the service. Consumer experience interviews show that 100 percent of consumers/representatives randomly interviewed feel at home most or all of the time and 100 percent of consumers said that they felt safe most or all of the time.

The service was observed to be welcoming with individual rooms decorated with memorabilia, photographs and other personal items, clean and well maintained. The layout of the service enabled consumers to move around freely, with suitable furniture, fittings and signage to help consumers navigate the service. Consumers had ready access to large outdoor areas with raised gardens, comfortable seating and communal tables, barbecue area, water features, and paved areas that enable free movement around the area.

Consumers/representatives said:

* The service is well maintained and kept at a comfortable temperature.
* The service regularly seeks feedback about how the service environment could be improved and more welcoming.
* The service has a good range of spaces for induvial reflection, and groups with big open courtyards.

The service has policies and procedures which describe the systems used for purchases, service and maintenance of furnishings and equipment and how environmental related risks to consumers were identified and managed. Staff interviewed confirmed their understanding of the systems and maintenance arrangements. Service agreements with contractors confirmed external services are well managed and delivered as arranged. Management confirmed that the service environment is a standing agenda item for all management and staff meetings where any emerging risk or maintenance issues are discussed and recorded in a log including any consumer feedback on the service environment.

#### 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 that the service met all four requirements under this standard.

Consumer experience interviews indicate that all consumers/representatives said that staff follow up on things most or all of the time. Consumes and representatives report they are aware of feedback and complaints avenues available to them and they feel comfortable to access them if needed. Where feedback has been provided, representatives advised of satisfaction with the process of addressing their concern and with open disclosure.

Staff demonstrated knowledge of how to enable consumers and representatives to access feedback processes and advocacy services as needed. They also demonstrated how verbal feedback is communicated so that management can address it.

Management demonstrated that all feedback received is responded to verbally or in writing. The service provided a log of compliments and complaints, and how these feed into the plan for continuous improvement. Feedback and complaints are reviewed by management and used to improve the quality of care. The service demonstrated how the complaints were used to improve the quality of care and services for individuals or across the service.

#### Requirements:

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

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

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

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

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

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

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

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

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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:

Assessment Team found that the service met all five requirements under this standard.

Consumer experience interviews indicate that staff are kind and caring most or all of the time. Consumer experience interviews show that all consumers/representatives said staff know what they are doing most or all of the time or always. Consumers experience interviews indicate that consumers get the care they need most or all of the time.

The service demonstrated that processes ensure the workforce is planned to ensure appropriate numbers and skill mix of staff to ensure the delivery and management of safe and quality care and services. Police certificate and registration requirements are monitored and reviewed regularly. Education is provided to meet mandatory requirements as well as service needs. Consumers/representatives said there are sufficient staff to meet consumers’ needs and discuss their care requirements.

Staff held qualifications relevant to their roles and were familiar with individual consumer’s needs, preferences and daily routines. Recruitment and performance monitoring processes ensure staff competence is maintained and where non-performance is identified, management address it in a timely manner.

#### 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 that the organisation has met all four requirements under this standard.

Consumer experience interviews indicate that the service is well run most or all of the time.

The service demonstrated they involve consumers in the delivery and evaluation of care and services, providing examples of how consumers are supported on a day-to-day basis. Consumers/representatives said they are involved in initial 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 organisation wide 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.

The clinical governance framework supports consumers to live the best life they can and addresses identifying and responding to abuse and neglect of consumers. Staff could describe how they would respond to such incidents and management demonstrated appropriate related systems in place to support staff. Clinical governance systems support the effective management of high-impact or high-prevalence risks including pressure injuries, the number of consumers with restrictive practices and falls. The service staff demonstrated an understanding of adverse incidents or near-miss events and how these were identified, documented and reviewed by the service, to inform continuous improvement.

#### 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(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