Parklands Retirement Haven

Performance Report

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**Commission ID:** 5647

**Provider name:** Burswood Care Pty Ltd

**Site Audit date:** 19 January 2021 to 21 January 2021

**Date of Performance Report:** 26 February 2021

# Publication of report

This Performance Report **may be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Non-compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Non-compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commission’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the Approved Provider’s response to the Assessment Contact - Site report received 24 February 2021

# STANDARD 1 COMPLIANT Consumer dignity and choice

### 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.

## Assessment of Standard 1

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers, asked them about the requirements, reviewed their care planning documentation (for alignment with the feedback from consumers) and tested staff understanding and application of the requirements under this Standard. The Assessment Team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Sampled consumers considered they were treated with dignity and respect, could maintain their identity, make informed choices about their care and services and live the life they choose. Consumers/representatives interviewed said that staff were kind. Consumers interviewed confirmed they were encouraged to do things for themselves and that staff knew what is important to them. Consumers interviewed confirmed their personal privacy was respected and their personal information was kept confidential.

The service demonstrated that information provided to each consumer was communicated in a way that was clear, easy to understand and enabled them to exercise choice, including their right to take risks. Consumers provided examples of how the service offered them choice in relation to the care and services they received and described ways in which the service provided support to enable them to live life as they chose. Consumer’s relationships were acknowledged and supported, including social and intimate relationships.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*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.*

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*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.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 NON-COMPLIANT Ongoing assessment and planning with consumers

### Consumer outcome:

### 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.

## Assessment of Standard 2

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewed their care planning documents in detail, asked consumers about how they were involved in care planning, and interviewed staff about how they used care planning documents and reviewed them on an ongoing basis.

Overall sampled consumers considered they felt like partners in the ongoing assessment and planning of their care and services. Consumers and/or representatives confirmed they were included in assessment and care planning. Consumers interviewed confirmed they were informed about the outcomes of assessment and planning had ready access to their care plan if they wished. Initial assessments were completed that generally identified consumer’s needs, goals and preferences. Risks were generally identified as part of the assessment and care planning process. Care plans were reviewed on a three-monthly basis or as consumer care needs changed and were generally updated to reflect the current care needs of the consumer. The service accessed external services and allied health professionals as required to support consumer care.

Whilst the service could demonstrate that consumers/representatives were included in assessment and care planning, the Assessment Team identified that care plans did not consistently reflect consumers’ current needs, goals and preferences for three consumers at the service.

The Quality Standard is assessed as Non-compliant as one of the five specific requirements have been assessed as Non-compliant.

## Assessment of Standard 2 Requirements

### Requirement 2(3)(a) Compliant

*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.*

### Requirement 2(3)(b) Non-compliant

*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.*

The Assessment Team identified the service did not demonstrate assessment and care planning processes consistently identified and reflected the current needs, goals and preferences for consumers.

For one named consumer, documentation did not support incidents of behaviour were recorded to enable the trial of management strategies. Care planning directives were not recorded to guide staff in the management of the consumer’s behaviours. There has not been an analysis of management strategies for the consumer’s challenging behaviours and the incidents continued to occur.

The Approved Provider in its written response has acknowledged the findings of the Assessment Team and has created an action plan to address the deficiencies identified at the Site Audit. A supplementary care plan has been created to guide staff in the management of the named consumer’s behaviour. The service has committed to undertaking daily reviews of the consumer’s behaviours. Staff have received training and education relating to behaviour management and lifestyle strategies have been reviewed for the named consumer.

The Assessment Team identified for two other consumers care planning strategies were not consistent with their current diagnoses or reflect strategies recommended by specialist services. The action plan from the Approved provider contains evidence the care plans for these consumers have been updated.

While I acknowledge the actions taken by the Approved provider to rectify deficits in assessment and planning processes, at the time of the site audit care planning directives were not accurate, current or comprehensive to guide staff practice or identify the needs of the consumer. Therefore, it is my decision this Requirement is Non-compliant.

### Requirement 2(3)(c) Compliant

*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.*

### Requirement 2(3)(d) Compliant

*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.*

### Requirement 2(3)(e) Compliant

*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 COMPLIANT Personal care and clinical care

### 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.

## Assessment of Standard 3

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – their care plans and assessments were reviewed and staff were asked about how they ensured the delivery of safe and effective care for consumers. The Assessment Team also examined relevant documents.

Consumers considered they received personal care and clinical care that was safe and right for them. Consumers/representatives confirmed they received the care they needed and had access to a Medical officer or other health professional when required. Consumers/representatives reported the service included them in decisions about their or their representatives’ care, and care was tailored to their needs, goals and preferences. Consumers nearing the end of life received safe and appropriate care which maintained their comfort and dignity.

Care documentation demonstrated deterioration or changes in the consumer’s health care needs were responded to in a timely manner. The service had processes in place to minimise infection-related risks.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*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.*

While the Assessment Team identified a lack of care planning strategies were recorded to guide staff in the management of a named consumer with challenging behaviour, it is my decision this has not reflected a lack of effective clinical and personal care and I have considered this information to be relevant in Requirement 2 (3) (b).

Consumers were satisfied with the clinical and personal care provision. Care staff described consumers’ individual needs and preferences and how these were managed in line with the consumers’ care plan. Staff received relevant training to assist them to deliver safe and effective care to consumers. Management reviewed the electronic care management system daily to ensure consumers were receiving safe and effective care. The service had a suite of evidence-based policies reviewed at organisational level to guide staff in delivery of care and services to consumers.

It is therefore my decision; this Requirement is Compliant.

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

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

### Requirement 3(3)(d) Compliant

*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.*

### Requirement 3(3)(e) Compliant

*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.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*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 COMPLIANT Services and support for daily living

### 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.

## Assessment of Standard 4

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they liked to do and how these things were enabled or supported by the service and staff were asked about their understanding and application of the requirements. The Assessment Team also examined relevant documents.

Consumers considered they received the services and supports for daily living that were important for their health and well-being and that enabled them to do the things they want to do. Consumers/representatives described ways in which consumers were supported to maintain social and emotional connections with those that were important to them. Consumers interviewed provided positive feedback in relation food and confirmed that it was of adequate quantity, high quality and variety.

The service was able to demonstrate services and supports for daily living promoted each consumer’s emotional, spiritual and psychological well-being.

The Assessment Team observed a variety of activities being undertaken at the service during the audit, including group exercises and bingo. Consumers living at the service are supported to do the things that are important to them. Activity schedule of events are displayed at the service and updated daily. Consumers were observed to enjoy the meals offered and staff were available to assist as necessary.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

*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.*

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*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.*

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANT Organisation’s service environment

### 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.

## Assessment of Standard 5

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team observed the service environment, spoke with consumers about their experience of the service environment and interviewed care staff about the suitability and safety of equipment. The Assessment Team also examined relevant documents.

Most consumers considered they felt they belonged in the service and generally felt safe and comfortable in the service environment. Consumers confirmed they felt at home living at the service and they could freely and safely access indoor and outdoor areas.

Consumers and representatives sampled reported the service was clean and well maintained. Consumers confirmed their visitors were welcome in the service and they enjoyed having various indoor and outdoor areas where they can sit comfortably.

The Assessment Team observed the environment to be welcoming, clean, well-maintained and easy to move around, both inside and outside. Equipment was observed to be clean, well maintained and appropriate to consumer needs. Maintenance staff monitor the physical environment to ensure it was safe and well maintained. Any maintenance issues were reported and actioned in a timely manner when possible.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

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

### Requirement 5(3)(b) Compliant

*The service environment:*

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

The Assessment Team identified some consumers did not feel safe or comfortable at times. I have considered this information alongside the Approved Provider’s response and note while one consumer stated they did not feel safe and provided this feedback to the Assessment Team, it is not evident the service was aware of this concern to be able to act on the consumer’s concerns. The Assessment Team also provided evidence from staff members regarding female consumers feeling uncomfortable due to a male consumer’s behaviour. I consider the staff concerned had an obligation to raise these concerns with management as it is not evident the service was aware of this feedback to implement appropriate strategies.

The service was observed to be clean, well maintained and consumers were enabled to move freely both indoors and outdoors. Maintenance staff, cleaning staff and care staff could describe the maintenance and cleaning system and processes, providing examples of when maintenance was needed and how quickly it was acted upon.

Maintenance documentation and cleaning schedules/duty lists evidenced regular maintenance and cleaning of the service environment. Care documentation reflected care provided promotes a safe environment for all consumers residing at the service.

Based on the information above, it is my decision this Requirement is Compliant.

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANT Feedback and complaints

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 6

To understand the consumer’s experience and how the organisation understood and applied the requirements within this Standard, the Assessment Team sampled the experience of consumers – asked them about how they raised complaints and the organisation’s response. The Assessment Team also examined the complaints register, complaints trend analysis and tested staff understanding and application of the requirements under this Standard.

Consumers and representatives felt encouraged and supported to provide feedback regarding care and services and said if they had a concern, they felt comfortable to raise a complaint.

Consumer and representatives interviewed were not aware of the service’s formal process for raising a complaint, however, would raise concerns directly with management. Consumers and representatives were satisfied with the service’s response and outcome to concerns and complaints and felt confident that if there were any issues in the future, they would be promptly resolved by the service.

The service is currently receiving feedback from a variety of sources which is not all being captured in the services complaints and feedback register. This is currently being addressed by the service through the clinical governance reporting system.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

The Assessment Team identified the service does not consistently capture complaints and feedback in a formalised manner. It is my decision in the absence of feedback from consumers and representatives relating to unresolved complaints or feedback not actioned, this evidence is not indicative of an ineffective feedback and complaints system.

The Approved Provider in its response has evidenced the clinical governance reporting system which is in process of being implemented at the service will support the complaints and feedback system.

Based on the information above, it is my decision this Requirement is Compliant.

# STANDARD 7 COMPLIANT Human resources

### 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.

## Assessment of Standard 7

To understand the consumer’s experience and how the organisation understood and applied the individual requirements within this Standard, the Assessment Team spoke with consumers about their experience of the staff, interviewed staff, and reviewed a range of records including staff rosters, training records and performance reviews.

Consumers considered that they received quality care and services when they needed them and from people who were knowledgeable, capable and caring. Consumers and representatives confirmed staff were kind, providing examples of how staff listened to them and knew what was important to their individual wishes and needs. Consumers and representatives interviewed said staff knew what they were doing and provided examples of how staff supported the consumer’s individual care, clinical, lifestyle and hospitality needs. Consumers and representatives said there were adequate staff to meet consumers’ care and service needs.

Positive feedback was received from consumers regarding staff response times to their requests for assistance. Management had systems in place to monitor call bell response. Systems were in place to identify training needs, provide education to staff and monitor staff performance.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

*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.*

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

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

### Requirement 7(3)(d) Compliant

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

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANT Organisational governance

### 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.

## Assessment of Standard 8

To understand how the organisation understood and applied the requirements within this Standard, the Assessment Team spoke with management and staff and reviewed relevant systems and processes relating to the organisational governance underpinning the delivery of care and services (as assessed through other Standards).

Consumers considered that the organisation was well run and that they could partner in improving the delivery of care and services. Most consumers/representatives confirmed they were confident the consumer’s care and services were well managed. Consumers/representatives confirmed they engaged with management and staff day to day and had meetings with clinical staff and other health professionals regarding care and service provision. Consumers/representatives said the organisation asked for their opinions about the delivery of care and services, listened to them and made changes when something had gone wrong to prevent it happening again.

The governing body set the strategic priorities for the organisation and met regularly, to identify and review risks from an organisational and consumer perspective. The governing body developed policies and procedures that were available to all staff and guidelines and resources were available to support effective risk management systems and practices. The governing body monitored and evaluated how the organisation performed against the Aged Care Quality Standards through meetings and reporting processes.

The Quality Standard is assessed as Compliant as five of the five specific requirements have been assessed as Compliant.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

*The organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.*

### Requirement 8(3)(c) Compliant

*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.*

### Requirement 8(3)(d) Compliant

*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.*

### Requirement 8(3)(e) Compliant

*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.*

# Areas for improvement

Areas have been identified in which improvements must be made to ensure compliance with the Quality Standards. This is based on non-compliance with the Quality Standards as described in this performance report.

* Assessment and planning processes are to be inclusive of consumers’ current needs, goals and preferences to guide staff practice.