Accreditation Decision

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

**Service and approved provider details**

|  |  |
| --- | --- |
| **Name of service:** | Royal Freemasons Bendigo |
| **RACS ID:** | 4558 |
| **Name of approved provider:** | Royal Freemasons Ltd |
| **Address details:** | 61 Alder Street KANGAROO FLAT VIC 3555 |
| **Date of site audit:** | 08 October 2019 to 10 October 2019 |

**Summary of decision**

|  |  |  |
| --- | --- | --- |
| **Decision made on:** | 11 November 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:** | 18 December 2019 to 18 December 2021 | |
| **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 | | Not Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Not 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 |
| **Timetable for making improvements:** | By 11 February 2020 | |
| **Revised plan for continuous improvement due:** | By 26 November 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 Royal Freemasons Bendigo (the Organisation) conducted from 8 October 2019 to 10 October 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Organisation 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 Organisation 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 organisation, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Consumers | 14 |
| Consumer representatives | 7 |
| Facility manager | 1 |
| Regional manager | 1 |
| Manager, clinical practice | 1 |
| Care managers | 3 |
| Registered nurses (including agency) | 3 |
| Care staff (including agency) | 15 |
| Hospitality and environmental organisations staff (including agency) | 4 |
| Lifestyle staff | 1 |
| Physiotherapists | 3 |
| Occupational therapist | 1 |
| Other staff (quality, information technology) | 2 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

1. The organisation:
2. has a culture of inclusion and respect for consumers; and
3. supports consumers to exercise choice and independence; and
4. respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found the organisation has met the six requirements under Standard 1 Consumer dignity and choice.

Consumer experience interviews demonstrate 100% of consumers and representatives said that staff treat them with respect most of the times or always. In addition, 93% said consumers are encouraged to do as much as possible for themselves most of the times or always. The remaining 7% said this occurs only some of the time stating they are not really encouraged. Eighty seven percent of consumers and representatives said staff explain things to consumers most of the times or always. The remaining 13% said this occurs only some of the time and only know information from staff conversations and are not always involved in care plan development.

The organisation demonstrated consumers are treated with dignity and respect, and that management and staff promote a culture of inclusion, choice and independence. Staff were observed to interact with consumers in a kind, respectful manner during care, activities and meal organisation. The Assessment Team observed how the organisation fosters cultural inclusion and socialisation with, for example, war commemorative organisations, musical band performances, an operating café for coffee, cake and gathering of family and friends. The organisation accommodates couples who choose to live together at the organisation.

Staff could provide examples of how they help consumers make choices, including where consumers including risk-based activities that support the choice and quality of life of individual consumers. Consumers described independence is of importance to them and expressed satisfaction being able to make choices regarding aspects of their personal care, meals, activities, clinical care and way of life.

In relation to privacy and dignity, staff were able to provide examples of how care is provided in a dignified manner. However, consumers commented and the Assessment Team observed that some staff do not always enter their bedrooms with a greeting or pause for a response from the consumer prior to entering. In addition, staff feedback and documentation confirmed staff at times, do not follow correct guidelines when disposing of used continence aids.

Consumers believed their personal information is kept confidential. Education records show staff complete education relating to privacy and confidentiality. Management and staff were able to mostly demonstrate that privacy, dignity is adhered to and confidentiality is understood by staff.

#### Requirements:

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

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

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

The organisation demonstrates that care and services are culturally safe.

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

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

1. make decisions about their own care and the way care and services are delivered; and
2. make decisions about when family, friends, carers or others should be involved in their care; and
3. communicate their decisions; and
4. make connections with others and maintain relationships of choice, including intimate relationships.

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

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

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

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

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

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

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

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

#### Summary of Assessment of Standard 2:

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

The organisation was not able to demonstrate the consumer is a partner in ongoing assessment and planning that involves the consumer in decisions about the care and services needed for their health and well-being. The organisation was able to demonstrate that assessment and planning generally informs the delivery of safe and effective care and addresses the consumer’s current needs, goals and preferences. If relevant and if the consumer wishes, advance care planning and end of life planning form part of care planning. Outcomes of assessment and planning are documented in a care and services plan; and care and services are reviewed for effectiveness, and when circumstances change.

Consumer experience interviews show 80% of consumers and representatives agreed they have a say in their daily activities most of the time or always. These consumers and representatives provided various examples of how they are involved in assessing and planning including being able to make choices about how they would like their personal care attended to. Of the 20% of consumers and representatives who said they only sometimes have a say in daily activities, they raised concerns related to lack of consultation when care needs are reviewed and not being offered opportunities to discuss their goals, preferences and preferred activities as part of this review.

Staff could describe how consumers and other stakeholders who contribute to the consumer’s 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. Risk assessments are undertaken which take into consideration the consumers’ right to take risks, including use of mobility scooters, visits within the local community and ironing abilities.

Staff described how they are informed by handover of the care needs of consumers. Consumer care plans sampled by the Assessment Team demonstrated regular reviews are undertaken by qualified staff relevant to the care or service provided. However, these care reviews do not always occur to schedule and do not routinely involve discussion with consumers and representatives about care and services.

#### 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) Not Met**

The organisation demonstrates that assessment and planning:

1. is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and
2. includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

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

Of consumers and representatives randomly sampled, 93% said consumers get the care they need and 93% said consumers feel safe in the organisation, while 7% of consumers and representatives said consumers get the care they need and feel safe only some of the time. Consumers and representatives provided various examples of how staff ensured the care provided is right for consumers, including assistance with walking and acting promptly in response to falls, injuries or infections. Positive feedback was provided regarding the sensitive approach of staff when consumers are in the palliative stage of care. Consumers and representatives provided feedback in relation to some problems with medication management.

Staff were observed to be kind, caring and respectful in their interactions with consumers and sensitive to their individual needs and preferences. Staff could describe how care is generally responsive to the changing needs of each consumer, including the need for referrals when care needs change. Reviews of documentation demonstrated referrals are made to a range of services and providers including physiotherapists, medical practitioners and geriatricians, speech pathologists, wound care consultants and podiatrists. The organisation has a written and verbal handover process to record and communicate changes in consumers’ conditions, preferences and needs. Risk assessments are undertaken and staff are aware of consumers at particular risk, including infection-related risks.

Changes in personal and care needs generally prompt re-assessment of care needs and care plan reviews generally occur according to schedule, although care consultations with consumers and/or their representatives do not always occur as part of these reviews. Care is monitored through a range of audits, with results used to improve care whilst also demonstrating an opportunity for improvement in regard to medication errors.

#### Requirements:

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

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

1. is best practice; and
2. is tailored to their needs; and
3. optimises their health and well-being.

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

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

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

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

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

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

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

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

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

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

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

The organisation demonstrates minimisation of infection related risks through implementing:

1. standard and transmission based precautions to prevent and control infection; and
2. practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 4:

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

Consumers interviewed confirm satisfaction with services and supports for daily living that are important to them. Ninety-three percent of consumers and representatives randomly interviewed said consumers do as much as possible for themselves most of the time or always. Seventy-three per cent of consumers randomly interviewed said they liked the food most of the time or always, with the remaining 27% of consumers saying they like the food only sometimes. Feedback from consumers interviewed ranged from the food being ‘very good’ and ‘very tasty’ to ‘tasteless’, lacking variety and ‘bland’. However, all consumers agreed there are options if they did not like the menu choices.

Consumers and representatives described the support they receive to optimise their independence, health and wellbeing and meet their emotional and spiritual needs. Consumers said they can participate in the organised activities and could provide feedback on the care and services that support their daily living.

The organisation demonstrated that it supports consumers to connect with other consumers living within the organisation and to engage with the community outside the organisation. The organisation had formal programs that enable consumers to participate in both individual and group activities and staff provided examples of how activities are tailored to the needs and interests of consumers. There are opportunities within the organisation for consumers and/or their representatives to interact in a number of private and communal areas. The organisation demonstrated how it supports consumer’s daily living through the involvement of other services and health practitioners.

The organisation demonstrated referrals are made to other service providers as required, provides meals of a satisfactory quality, variety and quantity and provides safe, suitable clean and well-maintained equipment.

#### Requirements:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

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

Consumer experience interviews show 73% of consumers and representatives randomly interviewed said the consumer feels at home most of the time or always. A minority of consumers and representatives indicated that they miss their own home. Ninety-three percent of consumers and representatives randomly interviewed said consumers feel safe most of the time or always. Consumers and representatives interviewed provided positive feedback about the organisation’s service environment and were generally satisfied that the environment was welcoming, well maintained, clean and safe.

The organisation was observed to be appropriately furnished with a range of equipment for the use in care provision. Individual rooms were personalised and decorated with the consumer’s items and memorabilia. Gardens and courtyards were observed to be well maintained and generally accessible to consumers.

There are preventative and reactive maintenance programs and a cleaning program to ensure the living environment and equipment are maintained to enable the safe provision of care and services. Staff demonstrated an understanding of the organisation’s procedures to ensure a safe living 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:

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

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

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

The organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints and have access to advocates and methods for resolving complaints. Appropriate action is taken in response to consumers’ complaints and these complaints are reviewed and generally used to improve services. Of consumers and representatives randomly sampled, 87% said consumers are satisfied staff follow up when they raise things with them most of the time or always, with 13% saying this occurs only sometimes.

Consumers and representatives are provided with multiple means for providing feedback including a kiosk in the foyer. Information about internal and external feedback processes and advocacy services is provided to consumers and representatives on admission to the organisation and brochures in multiple languages are on display.

Management demonstrated an understanding of open disclosure and consumers provided examples of their use of advocacy services.

#### 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 Not Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

The Assessment Team found that the organisation met four of the five requirements under Standard 7.

Of consumers and representatives randomly sampled, 93% said consumers get the care they need most of the times or always. The remaining 7% said this occurs only some of the time. In addition, 87% said the organisation is well run most of the time or always, with the remaining 13% saying this occurs only sometimes. A majority of consumers and representatives who reported consumers get the care they need also expressed dissatisfaction with staffing levels and how this has an impact on care delivery for individual consumers. In addition, consumers and representatives interviewed said they are satisfied with the organisation’s permanent workforce. However, six expressed concerns and dissatisfaction with agency staff use, skills and knowledge.

The organisation demonstrated they ensure staff interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. The Assessment Team observed a respectful ‘guard of honour’ for a consumer, a commemorative war presentation acknowledging four consumers of department of veteran affairs and a classic band playing for consumers.

The organisation generally demonstrates the number and mix of staff is planned to enable safe and quality care and services. Consumers and representatives consistently said staff are very busy and believe there is a need to reduce agency staff to improve consistency and continuity of staff.

The organisation demonstrated their permanent workforce is recruited to specific roles, trained and equipped to undertake these roles and supported to deliver outcomes for consumers. However, induction processes for agency staff do not always occur. Education topics are offered to staff and there is a suite of mandatory online education. Not all staff have completed their required modules, more specifically related to medication management.

#### 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) Not Met**

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

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

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

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

Of consumers and representatives randomly sampled, 80% confirmed consumers have a say in their daily activities most of the time or always, and 87% confirmed the organisation is well run most of the time or always. Consumers and representatives commented positively on current opportunities to have a say.

The organisation discussed how they involve consumers in the design, delivery and evaluation of care and services, including conducting consumer meetings and experience surveys to obtain feedback. However, both consumers and management identified an opportunity to improve the regularity of consumer meetings.

The organisation demonstrated how the governing body is accountable for the delivery of safe and quality care through monitoring processes and reporting mechanisms through executive to the board.

There are processes that promote antimicrobial stewardship, open disclosure and minimisation of restraint, including close monitoring of infections and antibiotic use. Regular review of strategies and interventions ensure consumers are as free as possible from environmental, physical and chemical forms of restraint. Actions are being taken to develop and implement new systems to further define and support these processes. Governance systems support the management of high impact, high prevalence risks.

#### Requirements:

##### **Standard 8 Requirement 3(a) Met**

The organisation demonstrates that consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

##### **Standard 8 Requirement 3(b) Met**

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

##### **Standard 8 Requirement 3(c) Met**

The organisation demonstrates effective organisation wide governance systems relating to the following:

1. information management;
2. continuous improvement;
3. financial governance;
4. workforce governance, including the assignment of clear responsibilities and accountabilities;
5. regulatory compliance;
6. feedback and complaints.

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

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

1. managing high impact or high prevalence risks associated with the care of consumers;
2. identifying and responding to abuse and neglect of consumers;
3. supporting consumers to live the best life they can.

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

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

1. antimicrobial stewardship;
2. minimising the use of restraint;
3. open disclosure.