Samkay Health Tyabb

Performance Report

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**Commission ID:** 3572

**Provider name:** Samkay Health Pty Ltd

**Site Audit date:** 22 February 2021 to 24 February 2021

**Date of Performance Report:** 15 April 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** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | 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 Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others
* the Infection control monitoring checklist

# 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 understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers, asking them about the requirements, reviewing their care planning documentation (for alignment with the feedback from consumers) and testing staff understanding and application of the requirements under this Standard. The team also examined relevant documentation and drew relevant information from other consumer interviews and the assessment of other Standards.

Overall, the sampled consumers and representatives stated the consumers are treated with dignity and respect, can maintain their identity, make informed choices about their care and services and live the life they choose. For example:

* All consumers and representatives said they are treated with dignity and respect with their identity, culture and diversity valued.
* Consumers said staff encourage them to do things for themselves and that staff know what is important to them. For example, driving their own car.
* Consumers and representatives said consumers’ personal privacy is respected and personal information kept confidential.
* Representatives felt satisfied with the opportunity to maintain relationships and have regular contact with consumers.
* Consumers have access to various documents to enable them to make choices such as menus on display, a lifestyle calendar, notices and newsletters.

Staff spoke of individual consumer’s choices and maintaining relationships inside and outside the service and of its importance to consumers. Staff described and understood what consumers would like to do, and the level of practical assistance required to support them in doing this.

Risk assessments were completed, and care plans reflected the risks and strategies to support consumers to undertake risks safely.

Management and staff were able to demonstrate practices as to privacy, dignity and confidentiality. The service has written policies and procedures for risk management, consumer choice and decision-making to guide staff practice.

Staff were observed interacting with consumers respectfully and knocking on doors prior to entering consumer rooms.

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 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 understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – reviewing their care planning documents in detail, asking consumers/representatives about how they are involved in care planning, and interviewing staff about how they use care planning documents and review them on an ongoing basis.

Overall sampled consumers and representatives indicated that they feel like partners in the ongoing assessment and planning of their care and services. For example:

* Consumers and representatives were satisfied with their ongoing involvement in assessment and care planning processes. They felt they were involved in the planning of care needs and that they review and discuss the care plans with staff.
* Consumers and representatives indicated staff listen to their views about the care and services important to them, including end of life planning.
* Representatives said staff advise them in a timely manner of any changes to consumer needs or conditions and of changes following review by a medical practitioner.

Management and staff described assessment, planning, implementation and evaluation processes that consider risk. Staff identified the risks for individual consumers and described strategies to minimise risk which reflected documented strategies.

Care planning and assessment documentation contained consumers current individual needs, preferences and goals, and documented consideration of risks to the consumers health and well-being. Care plans demonstrated ongoing consultation with consumers and others they choose to involve. Care planning documents were regularly reviewed for effectiveness, updated when needs and circumstances changed and included advanced care planning information.

Care planning documents were observed as available online and in hard copy and readily accessible to staff delivering care.

The service has written policies and procedures to guide staff on advance care planning and end of life planning.

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

### 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 understands and applies 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 ensure the delivery of safe and effective care for consumers. The team also examined relevant documents.

Overall sampled consumers and representatives considered that consumers receive personal care and clinical care that is safe and right for them. For example:

* Consumers and representatives said consumers are provided with care that meet their needs and preferences and are referred to medical practitioners and other health professionals when needed.
* Representatives felt confident in the palliative care approach provided by the service.
* Representatives confirmed they are always notified in a timely manner of any deterioration or changes in the consumer’s condition.
* Consumers and representatives were satisfied with the actions the service has taken to minimise infection, including COVID-19.

Management and staff described high impact risks and service specific high prevalence risks to consumers and the way they minimise these risks. Incidents are documented, actioned and reviewed with improvement actions planned as appropriate to minimise recurrence.

Documentation demonstrated use of best practice tools and reflected individualised care that is safe, effective and addresses the needs and preferences of the consumer, including end of life, where appropriate. Care plans showed non-pharmacological strategies are implemented to manage pain. Care plans include triggers and individualised interventions to guide staff in responding to the needs of consumers with challenging behaviours, with medical review as required.

While some inconsistencies were observed in the documenting of medication, management demonstrated that initial and ongoing discussion about the risks and benefits of psychotropic medication always occurs with consumers or representatives as appropriate. Care planning documents included progress notes, medication charts and the use of ‘as required (PRN)’ stickers showing non-medication strategies are trialled before psychotropic medication is used and its use is minimised.

The organisation demonstrated the delivery of safe and effective personal care and clinical care through the implementation of clinical care plans and a risk management framework. Care plans are accessible to nursing and care staff in both electronic and hard copy versions.

Organisational policies and procedures based on best practice are in place to support staff in restraint, pain management, skin integrity and palliative care.

#### The service demonstrated it has an outbreak management plan to support the practice of transmission-based precautions and preparation for a possible infection outbreak. The service demonstrated effective minimisation of infection related risks. The service has an antimicrobial stewardship policy that guides staff in the appropriate use of antibiotics.

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.*

### 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 understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – observations were made, consumers were asked about the things they like to do and how these things are enabled or supported by the service and staff were asked about their understanding and application of the requirements. The team also examined relevant documents.

Overall sampled consumers and representatives considered they get the services and supports for daily living that are important for their health and well-being and that enable them to do the things they want to do. For example:

* Consumers and representatives were satisfied the consumer is supported in daily living as preferred, and to optimise independence.
* Consumers and representatives were satisfied consumers’ emotional and psychological wellbeing were promoted and said spiritual care had recently improved.
* Some consumers indicated they maintain social and personal relationships and all representatives said they felt welcomed when they visited consumers.
* Consumers and representatives were satisfied communication about consumer needs occurred within the organisation and with others as appropriate.
* Consumers and representatives said meals and snacks were of good quality, varied, sufficient and meet consumer needs and preferences.

Consumers are supported by staff to maintain relationships and connections with those people who are important to them and do things of interest to them. Staff demonstrated they know the consumers and described ways they provide care that supports consumers needs. Care plans reflect the current goals, and preferences of consumers to optimise their independence, quality of life and maximise their health and wellbeing. Lifestyle staff described how the activity schedule is developed in consultation with consumers. Catering staff described how consumer feedback informs menu development and indicates consumers are enjoying their meals.

Staff said they have access to well-maintained equipment when they need it and described the process to report faults.

Management described established systems for cleaning and servicing of equipment including emergency maintenance.

The organisation has information policy and procedures and consent forms for information sharing.

The Assessment Team observed group activities being conducted throughout the visit, including quiz sessions. Staff were observed providing one to one contact with consumers providing emotional support that aligned with care plans. A range of equipment and resources used to support lifestyle services were observed.

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 understands and applies 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 team also examined relevant documents.

Most consumers sampled did not provide feedback on the service environment. Representatives interviewed said consumers feel they belong and are safe and comfortable in the service environment. For example:

* Representatives interviewed said they are welcomed when visiting and the service environment is easy to understand.
* Consumers said they were able to come and go as they please.
* Representatives were satisfied with service cleaning and maintenance and indicated consumers can move freely in the safe environment with staff assistance as needed.

Staff described how they report safety issues, equipment hazards or items requiring maintenance. Staff said equipment is available and maintenance occurs in a timely manner.

The service environment was observed to be clearly signed and consumers freely moving throughout the home and the gardens. Shared furnishings and fittings are safe and maintained in good condition.

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.*

### 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 understands and applies the requirements within this Standard, the Assessment Team sampled the experience of consumers – asking them about how they raise complaints and the organisation’s response. The team also examined the complaints register, complaints and tested staff understanding and application of the requirements under this Standard.

Consumers and representatives said they are encouraged and supported to give feedback and make complaints. For example:

* Consumers and representatives said they could make complaints and their feedback and/or complaints resulted in changes.
* Consumers and representatives described the various ways they are made aware of and have access to advocates and other methods of raising and resolving complaints.

Staff described how they support consumers to raise any concerns and how they would report feedback to management.

Management described the complaint process and how they respond to and record complaints including reviewing feedback monthly.

While the organisation does not have written open disclosure policies and procedures, management and staff were able to describe the open disclosure process.

Complaint documentation recorded timely action taken by management and how this is used for continuous improvement.

Posters, signage and concerns, comments and corrective action forms and lodgement boxes were observed to be displayed around the service. External complaints and advocacy service brochures were observed at the entry to the service.

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.*

# 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 understands and applies 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.

Most sampled consumers consider that they get quality care and services from people who are caring. For example:

* Consumers said staff are kind, caring and gentle when providing care and confirmed that staff know what they are doing.
* While consumers were not dissatisfied with staffing, consumers and representatives provided mixed feedback about response to calls for assistance.

Clinical and care staff interviewed generally expressed they have adequate staff and shifts are replaced to cover sick leave and other absences but sometimes work short. Staff said they are supported in their roles and are satisfied they have access to education.

Staff rosters, allocation sheets and shift vacancies for the service indicate adequate coverage of shifts. Education documentation confirms staff have completed mandatory training modules.

Management described the staff appraisal process. The service has a staff appraisal and development policy to guide management.

Staff were observed providing care with respectful interactions toward consumers.

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 understands and applies 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).

Overall sampled consumers considered that the organisation is well run. For example:

* Consumers and representatives confirmed they felt the service was well run and staff delivered care that the consumers required.
* Some consumers attend the monthly ‘resident and relative’ meetings and feel able to speak up.

Staff described what they would do if they identified abuse or neglect of consumers. Staff have completed mandatory training on identifying and reporting abuse in aged care.

The organisation has effective governance systems in relation to information management, continuous improvement, and workforce governance and regulatory compliance.

The organisation provided a documented risk management framework supported by policies and procedures documented to manage risk. Staff are aware of the requirement to report incidents and risk.

While the service does not have a written open disclosure policy in place, open disclosure is understood and discussed by management and staff. The service demonstrated there is a clinical governance framework that includes minimising the use of restraint, open disclosure and antimicrobial stewardship.

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

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.