Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Uniting AgeWell Queenborough Rise |
| **RACS ID:** | 8086 |
| **Name of approved provider:** | Uniting AgeWell Limited |
| **Address details:**  | 1 Peel Street SANDY BAY TAS 7005 |
| **Date of site audit:** | 09 October 2019 to 10 October 2019 |

**Summary of decision**

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| --- | --- |
| **Decision made on:** | 07 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:** | 04 February 2020 to 04 February 2023 |
| **Assessment of performance with the Aged Care Quality Standards** |
| Standard 1 Consumer dignity and choice | Met  |
| Requirement 1(3)(a) | Met  |
| Requirement 1(3)(b) | Met  |
| Requirement 1(3)(c) | Met  |
| Requirement 1(3)(d) | Met  |
| Requirement 1(3)(e) | Met  |
| Requirement 1(3)(f) | Met  |
| Standard 2 Ongoing assessment and planning with consumers | Met  |
| Requirement 2(3)(a) | Met  |
| Requirement 2(3)(b) | Met  |
| Requirement 2(3)(c) | Met  |
| Requirement 2(3)(d) | Met  |
| Requirement 2(3)(e) | Met  |
| Standard 3 Personal care and clinical care | Met  |
| Requirement 3(3)(a) | Met  |
| Requirement 3(3)(b) | Met  |
| Requirement 3(3)(c) | Met  |
| Requirement 3(3)(d) | Met  |
| Requirement 3(3)(e) | Met  |
| Requirement 3(3)(f) | Met  |
| Requirement 3(3)(g) | Met  |
| Standard 4 Services and supports for daily living | Met  |
| Requirement 4(3)(a) | Met  |
| Requirement 4(3)(b) | Met  |
| Requirement 4(3)(c) | Met  |
| Requirement 4(3)(d) | Met  |
| Requirement 4(3)(e) | Met  |
| Requirement 4(3)(f) | Met  |
| Requirement 4(3)(g) | Met  |
| Standard 5 Organisation’s service environment | Met  |
| Requirement 5(3)(a) | Met  |
| Requirement 5(3)(b) | Met  |
| Requirement 5(3)(c) | Met  |
| Standard 6 Feedback and complaints | Met  |
| Requirement 6(3)(a) | Met  |
| Requirement 6(3)(b) | Met  |
| Requirement 6(3)(c) | Met  |
| Requirement 6(3)(d) | Met  |
| Standard 7 Human resources | Met  |
| Requirement 7(3)(a) | Met  |
| Requirement 7(3)(b) | Met  |
| Requirement 7(3)(c) | Met  |
| Requirement 7(3)(d) | Met  |
| Requirement 7(3)(e) | Met  |
| Standard 8 Organisational governance | Met  |
| Requirement 8(3)(a) | Met  |
| Requirement 8(3)(b) | Met  |
| Requirement 8(3)(c) | Met  |
| Requirement 8(3)(d) | Met  |
| Requirement 8(3)(e) | Met  |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 48 of the Rules.**

Site Audit Performance
Assessment Report

The Commission makes the decision taking into account this site audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this site audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Uniting AgeWell Queenborough Rise (the Service) conducted from 09 October 2019 to 10 October 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Service against the Aged Care Quality Standards (the Quality Standards) in accordance with the Aged Care Quality and Safety Commission Rules 2018.**

This report contains detailed findings about the performance assessment of the Service against each Quality Standard and the requirements within each Quality Standard. The Quality Standard and assessed requirements are rated as either Met or Not Met.

A Met rating for the Quality Standard means that all requirements of that Quality Standard have been assessed and rated as Met

A Not Met rating for the Quality Standard means that one or more requirements of that Quality Standard has been assessed and one or more of those requirements have been rated as Not Met.

There will be no rating of the Quality Standard if only some of the requirements have been assessed and those requirements have been rated as Met.

This Report is to be read in conjunction with the Quality Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Consumers | 13 |
| Representatives | 6 |
| Acting care manager | 1 |
| Allied health assistant | 1 |
| Care staff | 4 |
| Chef | 1 |
| Cleaning staff | 2 |
| Contractor | 1 |
| Enrolled nurse | 1 |
| Laundry staff | 1 |
| Lifestyle coordinator | 1 |
| Maintenance manager | 1 |
| Residential services manager | 1 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

2. The organisation:

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

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

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

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

All consumers and representatives interviewed confirmed that staff treat them with respect all or most of the time. The organisation’s values include respect and valuing diversity, which is reinforced through staff reward and recognition programs. Management and senior staff model appropriate behaviour and take action when they become aware of any staff conduct that does not meet the organisation’s requirements.

The service demonstrated consumers are treated with dignity and respect and that the service actively promotes a culture of inclusion. Staff were observed to interact with consumers respectfully and could readily identify consumers’ individual preferences, interests and details of their life histories. The service promotes and values individual consumers’ culture and diversity with assessment processes that identify how consumers wish to live these aspects of their lives. The service offers a wellbeing program to reflect the diverse backgrounds and preferences of consumers. Staff described how the delivery of care is tailored to the consumer.

Consumers and representatives interviewed confirmed that they feel safe, respected and have a choice in their daily activities. Staff provided meaningful examples of how they help consumers to make choices and assist them in doing what they want to do, even if this involves an element of risk. Consumers described the ways their social connections are supported and how friendships have developed within the service.

Information about the service is provided to consumers through an initial information pack, a handbook, meetings, newsletters, case conferences and individual interactions. All consumers and representatives confirmed they are able to understand the service’s communications and they can make choices based on the information provided.

Consumers and representatives are satisfied that the service promotes and protects their privacy and confidentiality of information. The service demonstrated how information stored both electronically and in hard copy is kept secure and confidential and how confidential discussions are held privately.

#### Requirements:

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

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

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

The organisation demonstrates that care and services are culturally safe.

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

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

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

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

(iii) communicate their decisions; and

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 2:

#### Requirements:

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

Of consumers and representatives randomly interviewed ,100% confirmed they have a say in their daily activities always or most of the time. All consumers and representatives interviewed said staff know what to do for them. Consumers described their engagement in initial and ongoing assessment and planning of their care assists them to get the care and services they need.

Risks to consumers’ health and wellbeing are identified and considered in the care planning process. All consumers and representatives interviewed reported feeling safe and confident that staff listen to their goals and preferences including end of life care planning if this is something they wish to discuss.

Staff could describe how consumers and others who contribute to the consumer’s care, including medical practitioners, allied health professionals, carers and family, work together to deliver a tailored care and service plan and monitor and review the plan as needed. Staff demonstrated an understanding of adverse incidents or near-miss events and how these were identified, documented and reviewed by the service, to inform continuous improvement.

Consumers report that their care and services are regularly reviewed and that when something goes wrong, or their needs or preferences change, the organisation is quick to communicate with them and seek their input to update the care and services they are getting.

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

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

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

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

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

The organisation demonstrates that assessment and planning:

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 3:

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

100% of consumers and representatives who participated in a consumer experience interview said they get the care they need most of the time or always. Feedback from consumers and representatives outlined that communication of care needs could be improved and expressed dissatisfaction with the knowledge of some staff. Feedback also included comments regarding the sufficiency of staff to supervise consumers in the memory support unit.

Consumers gave various examples of how staff ensure the care provided was right for them including by regularly asking them about their care and the way it is delivered and through involving consumers in providing feedback about care and services to inform continuous improvement.

Staff could describe how they ensure care is best practice, their opportunities for continuing education and how they ensure that information is shared both within the organisation and with others outside the organisation. Care staff were observed to be kind, caring and respectful to the consumers and sensitive to their individual needs and preferences. Staff are aware of consumers at risk and those vulnerable and how incidents and changes in personal and care needs prompt reviews and assessments. Care staff demonstrated a good working understanding of precautions to prevent and control infections and strategies to minimise the use of antibiotics. Staff could also identify the highest prevalence risks for different cohorts of consumers and how incidents were used to inform changes in practice.

The organisation demonstrated the ongoing reviews and consultations with the consumer, family or representatives and the annual reviews ensure personal and or clinical care is safe and right for each consumer. The organisation also demonstrated that they have a suite of policies and procedures underpinning the delivery of care and how they review practices and policies to ensure they remain fit-for-purpose, informed by advice from consumers and other experts.

#### Requirements:

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

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

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 4:

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

Consumers interviewed confirmed satisfaction with services and supports for daily living that meets their needs. 100% of consumers who participated in a consumer experience interview said they are encouraged to do as much as possible for themselves always or most of the time. Staff provide examples of how consumers remain engaged with the community and provide examples on how they support consumers with their emotional, cultural and spiritual needs.

Consumer experience interviews showed 100% of consumers liked the meals always or most of the time. Management continues to consult with consumers to increase satisfaction with their dining experience through internal food forums, dining satisfaction cards and one on one meetings with the chef.

Care and lifestyle staff adapt ways to support consumers to live the life they want and help support consumers with their individualised activity plans. Lifestyle assessments are created and reviewed on a regular basis and consumers ‘About me’ document are created to ensure staff are aware of personal information about the consumers lives.

The organisation demonstrates the process of providing information to health professionals when a consumer’s health needs change. Information provided and shared between the service and other health professionals is documented in the consumers progress notes and used to adapt and modify the consumers care plans to ensure care processes are relevant and current. The service monitors and reviews each requirement in this Standard using an individual review program ‘resident of the day’, feedback mechanisms such as resident consultation meetings and feedback received from consumers from one to one conversations with staff.

#### Requirements:

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

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

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

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

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

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

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

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

#### Requirements:

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

The service was observed to be welcoming, clean and well maintained. Consumers individual rooms were observed to have items and furniture from their personal homes. Consumers were observed to move freely within the service with some using walking aids to support their independence.

Consumers and their representatives expressed satisfaction regarding the cleanliness of the living environment and personal rooms. Service staff described the process for cleaning the service environment. Cleaning systems ensure compliance with cleaning and infection control guidelines. Staff interviewed confirmed their understanding of these systems and confirmed consumers’ preferences are a priority.

The service has procedures to monitor and ensure the environment is safe and well maintained. A maintenance officer attends to corrective maintenance and coordinates a range of contracted services who attend to preventative maintenance, fire and safety and other scheduled maintenance requirements.

Staff interviewed confirmed their understanding of how to report hazards and incidents. Management ensure monitoring and review of the service’s environment using audits, surveys and various feedback mechanisms.

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

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

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

The organisation demonstrates that the service environment:

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

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

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

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

Of consumers and representatives interviewed 100% said staff follow up when they raise things most of the time or always. Consumers and representatives interviewed expressed in different ways they had access to feedback and complaint processes.

Staff interviewed provided examples on ways to assist consumers who chose to complain by seeking a resolution if possible, providing forms or immediately escalating the matter to a supervisor or management as appropriate.

Information on internal and external feedback and complaint processes are displayed on throughout the service. Consumers and representatives may raise complaints through consumer meetings, representative forums or through personal contact. The organisation invites feedback and complaints and demonstrated open disclosure framework.

Management said they analyse feedback information for trends which are discussed at meetings and identify improvements which are documented on a continuous improvement register. Management also monitor the effectiveness of their response to complaints through consumer feedback processes to check satisfaction with complaint resolution outcomes.

#### Requirements:

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

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

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

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

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

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

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

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

### Standard 7: Human resources Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 7:

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

100% of consumers and representatives randomly sampled said they receive the care they need most of the time or always. 100% of respondents said the staff are kind and caring always or most of the time. Consumers and representatives spoke positively of the staff and described in various ways how staff interactions are kind, caring and respectful.

Staff interviewed confirmed in various ways that they have enough staff and enough time to complete their tasks. Staff could describe what was important to individuals and were able to describe care that was respectful and that they were confident to report any care that was not meeting this requirement.

Management demonstrated monitoring processes to ensure that the workforce has sufficient, skilled and qualified staff and that these staff work in a kind and respectful way.

#### Requirements:

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

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

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

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

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

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

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

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

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

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

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

#### Requirements:

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

Consumer experience report interviews showed 100% of consumers and representatives responded that the service was well run always or most of the time. 100% of consumers and representatives said consumers feel safe at the service.

A high proportion of consumers and representatives did not expressly comment on their engagement in care and service development and delivery, however various consumers and representatives confirmed they have opportunities to be involved in the development and delivery of care and services. They described ways the involvement may occur including consumer meetings, and contact with staff or management when requested. The service demonstrated that consumers and representatives are involved in the development, delivery and evaluation of care and services.

Service performance is monitored and reviewed through review of quality indicator data including incident data, review of feedback and complaints, meal feedback forms and satisfaction surveys. Results are escalated to management and the head organisation as required. Service level responsibility and reporting requirements in relation to information governance, financial governance, workforce governance, regulatory compliance and feedback and complaints are clearly outlined and the head organisation’s executive body and sub-committees meet regularly.

High risk or high prevalence risk management includes individual consumers being provided with information regarding their right to take risks. Examples of support for consumers to take reasonable risks were provided. The service has recently reviewed restraint practices and strengthened the monitoring of the use of psychotropic medication. Management showed consumer and staff vaccination programs operate, staff participate in infection control training, infections are tracked and monitored and there are outbreak management procedures.

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

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

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

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

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

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

(i) information management

(ii) continuous improvement

(iii) financial governance

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

(v) regulatory compliance

(vi) feedback and complaints

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

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

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

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

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

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

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

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure