Accreditation Decision

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Villa Maria Catholic Homes St Catherine's Aged Care Residence |
| **RACS ID:** | 3072 |
| **Name of approved provider:** | Villa Maria Catholic Homes Limited |
| **Address details:** | 1 Clayton Road BALWYN VIC 3103 |
| **Date of site audit:** | 01 October 2019 to 02 October 2019 |

**Summary of decision**

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| --- | --- | --- |
| **Decision made on:** | 31 October 2019 | |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. | |
| **Decision:** | To re-accredit the service under section 41 of the Rules. | |
| **Further period of accreditation:** | 04 December 2019 to 04 December 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | 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 Villa Maria Catholic Homes St Catherine's Aged Care Residence (the Service) conducted from 01 October 2019 to 02 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 | 12 |
| Representatives | 2 |
| Administration officer | 1 |
| Care manager | 1 |
| Care staff | 4 |
| Chef | 1 |
| Cleaning staff | 1 |
| Client Services manager | 1 |
| Endorsed enrolled nurse | 3 |
| Facilities manager | 1 |
| Food service assistant | 2 |
| Lifestyle Coordinator | 1 |
| Pastoral care coordinator | 1 |
| Physiotherapist | 1 |
| Regional manager | 1 |
| Registered nurse | 1 |
| Residential service manager | 1 |
| Volunteer | 1 |

## Detailed findings

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

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

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

#### Organisation statement:

2. The organisation:

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

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

(c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

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

Consumers experience interviews show that 100% of consumers agreed staff always or most of the time treat them with respect. Feedback through other interviews was consistent with this high level of satisfaction. The organisation uses regular consumer surveys, anonymous feedback and informal and formal complaints mechanisms to ensure that consumers are satisfied staff treat them with respect and support them to maintain their identity and live the live they choose.

The organisation demonstrated that consumers are treated with dignity and respect, and that the service actively promotes a culture of inclusion. Staff were observed to interact with consumers patiently and respectfully and could readily identify consumer’s individual preferences and interests. Consumers described the ways their social connections are supported both inside and outside the service. The service actively promotes a culture of inclusiveness and respect for diversity and culture. Staff have received education in diversity and the organisation’s diversity framework has been shared with all stakeholders. The service demonstrated this in the wide range of activities it offers for consumers with diverse backgrounds and preferences and in the delivery of care that is tailored to the person.

Staff provided a number of meaningful examples of how they help consumers make choices, including by giving consumers clear and accurate information and options to inform their choice. Consumers reported that they feel heard when they tell staff what matters to them and that they are able to make decisions about their life, even when it involves an element of risk.

Consumers reported that they are satisfied that care and services, including personal care, are undertaken in a way that respects their privacy. Staff gave examples of how they maintain the privacy of individuals. Staff were observed respecting consumer privacy.

Electronic information is password protected and the confidentiality of paper documents was maintained.

#### 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:

The Assessment Team found the service has met the five requirements under Standard 2.

Of consumers and representatives randomly sampled, 100% agreed that they get the care they need always or most of the time. Consumers and representatives provided various examples of what this meant to them. Consumers overall reported they are a partner in ongoing assessment and care planning that supports them to get the care and services they need.

Staff and management described how consumers and the care team contribute to the consumer’s care working together to ensure assessment and planning has a focus on optimising health and wellbeing in accordance with the consumers’ needs, goals and preferences.

Consumers, representatives and staff described how care and services are reviewed regularly and when there is a change to the health or wellbeing status of the consumer. Interviews and documentation confirmed the organisation is responsive in their communication with consumers and their representatives’ when changes occur in the care and services the consumer is receiving.

Staff demonstrated an understanding of incidents occurring in the service and management demonstrated how incident analyses and subsequent learnings inform continuous improvement.

Management demonstrated assessment and planning processes to address consumer’s needs, goals and preferences relating to advance care and end of life planning if the consumer wishes.

#### 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) 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 the service has met the seven requirements under Standard 3.

Of consumers and representatives randomly sampled, 100% agreed always or most of the time that the consumer feels safe in the service and gets the personal and clinical care that is right for them. Consumers and representatives provided various examples of what this meant for them.

Staff and management could describe the collaborative process used to tailor both clinical and personal care to the individual to optimise their health and wellbeing. Management demonstrated how information is shared both within the service and with others outside the service. Staff demonstrated a good understanding of precautions to prevent and control infection and the clinical team described actions they take to minimise the need for antibiotics. Management demonstrated their internal processes for identifying high prevalence risks and how these risks are monitored and reviewed on an ongoing basis.

Staff demonstrated how they recognise and responded to deterioration in a consumer’s mental health or physical function in a timely manner and the actions they take and the learnings they gain from these episodes.

Care and service plans reviewed by the Assessment Team evidenced the delivery of safe and effective care, including end of life care, wound management, medication management and specialised nursing care. Management demonstrated how timely and appropriate referrals to other health services occur for consumers and how recommendations and responses is included in care plans.

Management demonstrated how various policies relating to clinical care are informed by industry best practice and accessible to staff.

#### 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 organisation has met all seven requirements under Standard 4.

Consumers interviewed confirm satisfaction with services and supports for daily living that are important to them. 92% of consumer experience interviews show consumers always or most of the time agreed they are encouraged to do as much as possible for themselves. Consumers are satisfied they are able to access emotional and spiritual support. Consumers are satisfied that they are able to participate within their community, do things of interest to them and have social and personal relationships. Consumer experience interviews show 92% of consumers experience like the meals always or most of the time. Consumers are satisfied any changes in their condition is discussed with them.

The organisation demonstrated each consumer gets safe and effective services and supports for daily living that meet their goals and preferences and optimises their independence and quality of life. Staff were observed to support consumers in a patient and respectful way. Plans of care provided clear information about goals and strategies for achieving safe and effective services and supports for daily living, emotional and spiritual care, and accessing the community and personal relationships. Staff provided a number of meaningful examples of how they support individual needs and preferences in relation to this Standard and how they are kept informed of any changes. Consumers provided a number of examples of how staff support them in relation to this Standard.

The organisation monitors and reviews each requirement in this Standard using a regular individual review program, clinical deterioration pathway, feedback mechanisms and survey results. The organisation demonstrated how this helps inform and drive improvements to the service.

#### Requirements:

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

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

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

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

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

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

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

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

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

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

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

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

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

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

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

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

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

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 5:

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

The service was observed to be welcoming (with individual rooms decorated with memorabilia, photographs and other personal items), clean and well maintained.

The multilevel lay out of the service enables consumers to move around freely within each wing and access the balcony. There is suitable furniture, fittings and signage to help consumers navigate the service.

Consumers have access to or are helped to access courtyards with paved pathways and gardens.

Consumers reported that:

* The service was well maintained and kept at a comfortable temperature.
* They have access to a range of equipment and furnishings and felt safe using them.
* There are a number of ways they can provide feedback about how the service environment can be improved and management encourages feedback.
* They have access to quiet rooms to meet family and friends and are encouraged to use all areas of the service.

A preventative and reactive maintenance program ensures a structured approach managing the living environment. Staff demonstrated an understanding of the service’s procedures to ensure a safe living environment. Management demonstrated that feedback and monitoring processes drive improvements.

#### Requirements:

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

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

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

The organisation demonstrates that the service environment:

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

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

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

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

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 6:

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

The organisation demonstrated that consumers are encouraged and supported to provide feedback and make complaints, have access to advocates and methods for resolving complaints, have appropriate action taken in response to their complaints and they are reviewed and used to improve services.

Of consumers and representatives randomly sampled, 100% said consumers are satisfied staff follow up when they raise things with them. Feedback through other interviews with consumers and representatives was consistent with this high level of satisfaction. Consumers provided positive feedback about staff and management’s responsiveness to any issues raised and were aware of ways to raise a complaint.

Information about internal and external feedback processes and advocacy services is provided to consumers and representatives at entry and brochures are displayed in the home.

Consumers said management are responsive to issues raised and are always available to staff, consumers and representatives. Management demonstrated a working understanding of open disclosure through recent examples.

#### 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 the organisation met all five requirements under Standard 7.

Of consumers and representatives randomly sampled, 100% agreed that this place is well run most of the time or always, 100% agreed that they get the care that they need most of the time or always, and 100% agree that staff are kind, caring know what they are doing most of the time or always. Feedback through other consumer and representative interviews was consistent with this high level of satisfaction and included feedback that

The service continuously monitors and reviews their roster to reflect current and changing consumer care needs. Staffing is adjusted in response to changes in consumers and in consultation with staff. Staff interviewed confirmed attendance to a range of education, provided in various ways. The Assessment Team observed respectful staff interactions with consumers throughout the visit.

The organisation’s recruitment and selection processes ensure the workforce is competent and staff have the qualifications and knowledge to effectively perform their roles. The organisation provides staff with orientation and a mentor program to introduce new staff to the service. Staff complete mandatory education and accompanying competencies annaully and additional training when additional training needs are identifed. The service uses a range of processes to monitor staff performance including observation, monitoring incidents, analysis of consumer feedback and a formal annual performance appraisal.

#### Requirements:

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

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

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

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

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

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

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

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

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

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

### Standard 8: Organisational governance Met

#### Consumer outcome:

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

#### Organisation statement:

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

#### Summary of Assessment of Standard 8:

The Assessment Team found the organisation has met all five of the requirements in relation to Standard 8.

Consumers and representatives interviewed said management and staff encourage feedback and seek their opinion on care and services. Of consumers and representatives randomly sampled, 100% said they always feel safe and 100% said the home is well run, most of the time or always.

The organisation’s governing body is accountable for the delivery of safe and quality care and services. They engage and consult with consumers and their representatives in the delivery and evaluation for care and services.

The organisation’s governing body promotes a culture of safe and quality care and service through policy and procedures, staff education and day to day contact by management with the workforce. The governance and organisational process includes regular management reports that ensure that the governing body monitors and analysed financial performance. A risk management framework is in place and a risk register is reviewed by the governing body on a regular basis.

The governance framework includes the ongoing monitoring of continuous improvement, regulatory compliance, complaints, high-impact or high-prevalence risks, and abuse and neglect. The clinical governance framework includes antimicrobial stewardship, minimising the use of restraint and open disclosure. The organisation has developed monitoring and evaluation processes to ensure that psychotropic medication use is managed appropriately.

#### 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 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