Accreditation Decision and Report

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

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Wenonah Lodge |
| **RACS ID:** | 0276 |
| **Name of approved provider:** | Gulgong Hostel Association Inc |
| **Address details:** | 27-31 Mayne Street GULGONG NSW 2852 |
| **Date of site audit:** | 06 August 2019 to 08 August 2019 |

**Summary of decision**

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| **Decision made on:** | 12 September 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:** | 07 October 2019 to 07 October 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Standard 6 Feedback and complaints | | Met |
| Standard 7 Human resources | | Met |
| Standard 8 Organisational governance | | Met |

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

## Introduction

**This is the report of an assessment of Wenonah Lodge (the Service) conducted from 06 August 2019 to 08 August 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 details the findings of this performance assessment and contains a detailed report about the performance of the Service against each Quality Standard assessed and the requirements within each Standard assessed rated as either, Met or Not Met.

For a ‘Not met’ finding, the Assessment Team has provided information about why the requirement was Not 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** |
| --- | --- |
| Lifetime Board member | 1 |
| Care staff | 8 |
| Maintenance manager | 1 |
| Representatives | 1 |
| Cook | 1 |
| Consumers | 15 |
| Chief executive officer | 15 |
| Registered Nurse | 2 |
| Lifestyle Officer | 1 |
| Care 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 organisation has met all six requirements under Standard 1.

***Consumer Experience Interviews***

16 consumer/representatives were interviewed at random.

100% of consumer stated that “staff treat them with respect” always

100% of consumer stated that “staff explain things to them” always

Consumers are regularly invited to provide feedback to management by means of regular surveys, individual discussions with management or staff and at consumer meetings. Consumers are satisfied staff treat them with respect and support them to maintain their identity and live the life they choose.

The organisation demonstrated that consumers are treated with dignity and respect, and that the organisation actively promotes a culture of inclusion. Staff were observed to interact with consumers respectfully and could identify consumer’s individual preferences and interests.

The organisation provides current accurate and timely information and consumers feel included in life in the organisation. Consumers and staff have been provided with education about the new standards and the charter of aged care rights. Communication strategies include regular meetings and updates. Consumers’ privacy is respected and confidentiality regarding personal information is 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:

#### *Consumer Experience Interviews*

#### 16 consumer\representatives were interviewed at random.

100% of consumer stated that “they have a say in their daily activities” always

Consumers and representative’s express satisfaction with staff and the care provided. They feel it covers what is important to consumers and how want their care and services to be delivered. Consumers/representatives say they are actively involved in the assessment, planning and review of consumers care, and service and they also say the service makes it easy for them to be involved. They are also say they are satisfied that the right people are engaged to deliver appropriate care and service to consumers. Consumers/ representatives interviewed are satisfied with the timely and appropriate assistance given to consumers by care staff.

Consumers’ assessments identify consumer current needs and preferences and issues were identified in the delivery of safe and effective care.

Wenonah Lodge provides consumers with appropriate clinical care through initial assessments and care planning. The home has systems that enable consumers/representatives to exercise control over the care they receive and to provide input into consumers' care planning.

Staff interviews, progress notes, medical notes, pathology, allied health and hospital discharge information demonstrates timely referrals for consumers are arranged with appropriate health specialists as required. The registered nurse has regular access to a physiotherapist, podiatrist, speech pathologist, optometrist and community clinical nurse consultants.

The care manager and registered nurses review and evaluate consumers’ individual plans of care. There is a system in place to identify when a consumers’ care plan is to be reviewed. Relevant staff are informed of any alterations/exceptions to the usual care required by the consumers through electronically, handovers, progress notes, meetings, communication diaries and verbally. Consumers’ weights, vital signs and urinalysis results are recorded monthly or as ordered by the medical officer.

An incident and accident reporting system is in place for the reporting of incidents such as falls, skin tears and behaviours of concern.

Staff demonstrate knowledge of consumers’ care needs ensuring that consumers’ clinical care is being met.

#### 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:

#### *Consumer Experience Interviews*

#### 16 consumer/representatives were interviewed at random.

100% of consumer stated that “they feel safe here” always

100%” of consumers stated that “they get the care they need” always

Consumers/representatives said they get the care they need which enhances their health and wellbeing.

Consumers’ care and services needs are identified and met by appropriately qualified nursing staff. This includes the care manager and registered nurse input into assessment, management and care planning for consumers.

The service effectively manages high impact and/or high prevalence risks relating to personal and clinical care for consumers. This may include but not limited to managing hydration and nutrition, managing risk of choking, managing medications safely, managing pain, managing falls minimising restrictive practices, managing challenging behaviour, preventing and managing pressure injuries. Staff are provided with education in these specialty areas.

Regular review and evaluation of consumers’ health and well-being and referrals are carried out by the registered nurse in collaboration with care staff and medical officers.

Effective monitoring is achieved through the handover of key consumers’ information to relevant staff. When required, consumers’ medical officers are alerted and consulted.

The service has processes to ensure consumers’ medication is managed safely and correctly. These include policies and procedures, regular pharmacy deliveries, the secure storage of medications and internal/external audits. Staff administer medication using a prepacked system and the registered nurse oversees the home’s medication management system and processes. All staff who administer medications are assessed according to the home’s medication policy through skills-based assessments.

All consumers are assessed to identify their pain history on entry to the home with medical officer input in determining the effectiveness of interventions.

A multidisciplinary approach involving the consumers’ medical officer, nursing staff, physiotherapist and recreational activity officers supports the consumers’ pain management program. Staff are knowledgeable about the many ways of identifying consumers who are experiencing pain.

Strategies include consumers choice of various methods of pain management, these include: pharmacological reviews, various non-pharmacological interventions and treatment in liaison with consumers’ medical officers. Consumers are repositioned, assisted with movement and exercise, given gentle heat therapy, massage and are involved in distraction therapy. Consumers said the care provided at the service relieves their pain or it is managed so they are comfortable.

The service demonstrated that it monitors and reviews performance against this requirement, with results used to improve processes, practices and outcomes for consumers.

#### 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.

***Consumer Experience Interviews***

16 consumer/representatives were interviewed at random.

100% of consumer/representatives interviewed said they “are encouraged to do as much as possible for themselves” always.

Consumers interviewed confirmed that they are satisfied with the services they receive especially in relation to their physical care and the food at the organisation. All consumers confirmed they are supported to be as independent as possible and they have choice on how they spent their day.

The organisation adequately demonstrated that it makes timely referrals to other organisations, provides meals of a suitable quality, variety, quantity and provides a safe, suitable clean living environment.

The organisation are involving consumers and or representatives with care plan reviews to ensure that services for daily living are provided in line with their preferences and needs.

The organisation invites consumers to provide feedback to management by means of regular surveys, individual discussions with management or staff and at the consumer meetings.

#### 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 the organisation demonstrated that all requirements in relation to Standard 5 are met.

***Consumer Experience Interviews***

16 consumer/representatives were interviewed at random.

100% of consumer/representatives interviewed said they “feel safe at the home” always.

100% of consumer/representatives said that they “feel at home here” always

The organisation demonstrated that they are providing consumers with a safe and comfortable environment that they find welcoming, easy to understand, and that optimises each consumer’s sense of belonging, independence, interaction and function.

Consumers/representatives interviewed are happy with the service environment stating that it is a relaxed, welcoming, safe and comfortable. They said the design of the environment provided them with high levels of privacy, assisted them to be independent and that its furniture and fittings added to the comfort of the environment. They stated that a well maintained, clean and hygienic environment is maintained at all times. They also stated that they are consulted and involved in proposed changes citing their involvement in a current building/refurbishment project.

Consumers said that the design of the service environment’s furniture and fittings assisted them to be independent and added to the comfort of the environment.

The service was observed to be welcoming with spaces for consumers to interact with others and for quiet reflection in each of the three cottages and outdoors. Consumer’s individual rooms with ensuite bathrooms were decorated with memorabilia, photographs and other personal items. The layout of the building enables consumers to move freely around both indoors and out, with suitable well maintained furniture, fittings and equipment provided.

The organisation demonstrated that the services environment including furnishing fittings and equipment are safe, clean, well maintained and comfortable; and enables consumers to move freely, both indoors and outdoors. It employs a range of effective strategies to maintain this. These include policies and procedures for the purchase, service and maintenance of furnishing and equipment, a cleaning program and systems to identify and manage environment risks. Management and staff interviewed confirmed that they are aware of these systems and know to correctly utilise them.

#### 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 the organisation demonstrated that all requirements in relation to Standard 6 are met.

***Consumer Experience Interviews***

16 consumer/representatives were interviewed at random.

100% of consumers/representatives said “staff follow up when you raise things with them" most of the time or always.

Interviews with 16 consumers/representatives revealed that they are aware of, and feel comfortable to use these feedback mechanisms, which include both internal and external complaint mechanisms. For example, meetings with management, the monthly residents’ meetings, staff meetings, use of feedback forms for feedback and complaints, and external complaints bodies and advocacy groups.

The organization demonstrates that consumers are encouraged and supported to provide feedback and/or make a complaint. Management and staff have participated in relevant training and could describe how they support consumers to provide feedback or make a complaint.

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints. For example, the service provides a choice of well-publicized complaint mechanisms that can be used by stakeholders including consumers, relatives and staff.

The organisation demonstrated that feedback and complaints are reviewed by management and the Board and is being used to improve the quality of care and services for individuals or across the organisation. Numerous example of the home responsiveness to feedback and complaints were provided.

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

#### 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 demonstrated that all requirements in relation to Standard 7 are met.

***Consumer Experience Interviews***

16 consumer/representatives were interviewed at random.

100% of consumers/representatives said they “get the care they need" always.

100% stated that “staff are kind and caring” always.

100% stated that “staff treat them with respect” always.

100% stated that “staff know what they are doing” most of the time or always.

100% said “staff follow up when they raise things with them” most of the time or always

Consumer interviews revealed that they value their relationships with staff many of whom they have known for many years. Feedback from consumers included "staff are excellent, everyone very thoughtful, I like living here, I receive the care I need and staff go above and beyond to help".

Consumer and staff interviews revealed that they feel that there are sufficient numbers of staff to meet the needs of consumers day and night.

The organisation demonstrates that the workforce is planned, and that there are sufficient staff to deliver and manage safe and quality care and services. The home has appropriately skilled and qualified staff sufficient to ensure that services are delivered in accordance with the needs of consumers and the Quality Standards. The home achieves this through the effective implementation of its human resource policies and procedures that include staff recruitment, orientation, education, and staff performance review and competency assessments.

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity. Consumers provided many examples of how this was demonstrated daily and what this meant to them living at Wenonah Lodge.

The Assessment team observed staff interacting in a kind, caring and respectful manner, taking time to listen to the consumers and using their preferred name.

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

The organisation has systems to recruit and maintain appropriately skilled and qualified staff sufficient to ensure that services are delivered in accordance with the needs of consumers and these standards. For example, appropriately qualified and trained registered nurses supervise and undertake the provision of specialised nursing care. Other staff are appropriately qualified including personal care staff who must have a minimum of Certificate III in aged care. Recreational activities officers currently have a Certificate IV in Leisure and Lifestyle and all other staff have participated in relevant education to support them in their role. All staff attend relevant mandatory training.

The organisation demonstrates that the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards. The maintenance of staff knowledge and skills is underpinned by the staff orientation and education programs. These programs familiarise new staff with the home’s policy and procedures and provide all staff disciplines with ongoing education on a range of relevant aged care issues including the requirements of the Aged Care Quality Standards effective 1 July 2019.

#### 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 demonstrated that all requirements in relation to Standard 8 are met.

***Consumer Experience Interviews***

16 consumer representatives were interviewed at random.

100% of consumer/representatives interviewed said “the place is well run” always.

The organisation demonstrated that they involve consumers in the design, delivery and evaluation of care and services, providing numerous examples of how consumers are involved in the co-design of services and are engaged on a day to day basis.

Consumers and representatives interviewed confirmed that they can partner in improving the delivery of care and services. Consumers said they are involved in care and service planning, delivery and evaluation, providing various examples of how this occurs in practice.

The governing body meets monthly, sets clear expectations for the organisation and regularly reviews risks from an organisational and consumer perspective.

There are organisation wide governance systems to support effective information management, the workforce, compliance with regulation and clinical care.

The clinical governance framework effectively addresses anti-microbial stewardship, open disclosure and minimising the use of restraint. Management and staff interviewed understood these concepts and could explain how they were applied in practice.

#### 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