Baptcare - Westhaven Community

Performance Report

50 Pickett Street
FOOTSCRAY VIC 3011
Phone number: 03 8371 3800

**Commission ID:** 3601

**Provider name:** Baptcare Ltd

**Site Audit date:** 19 July 2022 to 22 July 2022

**Date of Performance Report:** 24 August 2022

# Performance report prepared by

Catherine Spiller, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 1 Consumer dignity and choice** | **Compliant** |
| Requirement 1(3)(a) | Compliant |
| Requirement 1(3)(b) | Compliant |
| Requirement 1(3)(c) | Compliant |
| Requirement 1(3)(d) | Compliant |
| Requirement 1(3)(e) | Compliant |
| Requirement 1(3)(f) | Compliant |
| **Standard 2 Ongoing assessment and planning with consumers** | **Compliant** |
| Requirement 2(3)(a) | Compliant |
| Requirement 2(3)(b) | Compliant |
| Requirement 2(3)(c) | Compliant |
| Requirement 2(3)(d) | Compliant |
| Requirement 2(3)(e) | Compliant |
| **Standard 3 Personal care and clinical care** | **Compliant** |
| Requirement 3(3)(a) | Compliant |
| Requirement 3(3)(b) | Compliant |
| Requirement 3(3)(c) | Compliant |
| Requirement 3(3)(d) | Compliant |
| Requirement 3(3)(e) | Compliant |
| Requirement 3(3)(f) | Compliant |
| Requirement 3(3)(g) | Compliant |
| **Standard 4 Services and supports for daily living** | **Compliant** |
| Requirement 4(3)(a) | Compliant |
| Requirement 4(3)(b) | Compliant |
| Requirement 4(3)(c) | Compliant |
| Requirement 4(3)(d) | Compliant |
| Requirement 4(3)(e) | Compliant |
| Requirement 4(3)(f) | Compliant |
| Requirement 4(3)(g) | Compliant |
| **Standard 5 Organisation’s service environment** | **Compliant** |
| Requirement 5(3)(a) | Compliant |
| Requirement 5(3)(b) | Compliant |
| Requirement 5(3)(c) | Compliant |
| **Standard 6 Feedback and complaints** | **Compliant** |
| Requirement 6(3)(a) | Compliant |
| Requirement 6(3)(b) | Compliant |
| Requirement 6(3)(c) | Compliant |
| Requirement 6(3)(d) | Compliant |
| **Standard 7 Human resources** | **Compliant** |
| Requirement 7(3)(a) | Compliant |
| Requirement 7(3)(b) | Compliant |
| Requirement 7(3)(c) | Compliant |
| Requirement 7(3)(d) | Compliant |
| Requirement 7(3)(e) | Compliant |
| **Standard 8 Organisational governance** | **Compliant** |
| Requirement 8(3)(a) | Compliant |
| Requirement 8(3)(b) | Compliant |
| Requirement 8(3)(c) | Compliant |
| Requirement 8(3)(d) | Compliant |
| Requirement 8(3)(e) | Compliant |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Site Audit; the Site Audit report was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others

# STANDARD 1 COMPLIANTConsumer dignity and choice

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 1

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

* Consumers were satisfied they are treated with dignity and respect and their identity, culture and diversity are valued as individuals.
* Consumers and their representatives are satisfied that they are encouraged to make decisions about their care and services, who is involved in their care, communicate decisions and maintain relationships.
* Consumers and their representatives are satisfied they are supported to take risks to enable them to live the best lives they can.
* Consumers and representatives are satisfied with the information provided by the service is current and up to date, easy to understand and enables consumers to exercise choice.

Care staff could describe how the consumer’s culture influenced how they deliver care and services day-to-day. Staff were able to describe how they ensured that consumers make decisions about their care, are able to communicate their decisions and maintain relationships with people of their choice. Staff described how they support consumers to take risks to live the best life they can.

Consumers’ care planning documents included information about their individual preferences and people important to them. The service has policies and procedures to ensure that staff provide care and support services in a way that supports consumer dignity and choice. The service displays and emails consumers and/or representatives relevant information including activities calendars, meeting minutes, visiting requirements and menus.

Staff were observed treating consumers with respect and demonstrated an understanding of consumer’s choices and preferences. The Assessment Team observed staff to be considerate of consumer's privacy. Staff were observed to seek permission before entering consumer’s rooms and doors were closed while staff attended to the personal needs of consumers.

The Quality Standard is assessed as Compliant as six of the six specific requirements have been assessed as Compliant.

## Assessment of Standard 1 Requirements

### Requirement 1(3)(a) Compliant

*Each consumer is treated with dignity and respect, with their identity, culture and diversity valued.*

### Requirement 1(3)(b) Compliant

*Care and services are culturally safe.*

### Requirement 1(3)(c) Compliant

*Each consumer is supported to exercise choice and independence, including to:*

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

### Requirement 1(3)(d) Compliant

*Each consumer is supported to take risks to enable them to live the best life they can.*

### Requirement 1(3)(e) Compliant

*Information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.*

### Requirement 1(3)(f) Compliant

*Each consumer’s privacy is respected and personal information is kept confidential.*

# STANDARD 2 COMPLIANTOngoing assessment and planning with consumers

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 2

Overall, consumers and their representatives considered that they feel like partners in the ongoing assessment and planning of care and services for optimising consumers’ health and wellbeing. For example:

* Consumers and their representatives confirmed that consumer needs and preferences are discussed with staff on a regular basis.
* Consumers and their representatives confirmed that they are involved and kept informed about the outcomes of assessment and planning of consumer care.
* Consumers and their representatives said they are consulted about consumer care needs and preferences including their end of life wishes.
* Consumers and their representatives confirmed the service seeks input from other individuals or other providers who are involved in the consumer’s care.

Nursing staff explained how they provide safe and effective care to consumers through assessment and care planning. Staff said they have ready access to information to support consumers through assessment, care planning and associated documentation. Staff described how they include other organisations and providers of consumer care in the assessment and planning process.

Staff described how they engage with consumers and representatives in relation to end of life planning. Staff described how the outcomes of care planning are communicated to consumers and representatives.

The service has a suite of policies, procedures and risk rated tools to assist with identifying each consumer’s individual risk that may affect their health and wellbeing.

For the consumers sampled, documents reflect that consumers are assessed, and care plans are developed to support safe and effective care and services. The Assessment Team noted multiple entries in consumers progress notes reflecting consultation with consumers and/or representatives regarding outcomes of assessment and planning, care consultations held and care plan reviews that have been completed.

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

## Assessment of Standard 2 Requirements*.*

### Requirement 2(3)(a) Compliant

*Assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.*

### Requirement 2(3)(b) Compliant

*Assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.*

### Requirement 2(3)(c) Compliant

*The organisation demonstrates that assessment and planning:*

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

### Requirement 2(3)(d) Compliant

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

### Requirement 2(3)(e) Compliant

*Care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.*

# STANDARD 3 COMPLIANTPersonal care and clinical care

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 3

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

* Most consumers and their representatives said that staff deliver care that is safe and meets consumers’ needs in a timely manner.
* Consumers and their representatives said they feel that consumer wounds, pain, falls, weight and responsive behaviours are effectively managed.
* Consumers and their representatives said consumers were asked about their end of life wishes and were satisfied with how staff approach palliative care needs.
* Consumers and their representatives expressed satisfaction with the management of high impact consumer risks.
* Most consumers and their representatives provided positive feedback in relation to staff communicating deterioration or change to the consumer’s health.

Staff demonstrated an understanding of the individual personal and clinical needs of consumers and described how they report and manage pain and restrictive practices, incidents, skin break down and infections. Clinical and care staff described and demonstrated effective management of high impact or high prevalence risks associated with the care of each consumer. Staff interviews and documentation reflect individualised care that is safe and effective.

Care planning documentation demonstrated the management of risks associated with consumers who have impaired skin integrity, have experienced falls and require catheter care. The service has end of life and advanced care planning procedures and practice standards that reflect the importance of supporting consumers through their end of life journey. For the consumers sampled, care planning documents and progress notes reflect the identification of, and response to, deterioration or changes in consumer health.

The Assessment Team observed handover between morning and afternoon shift on day 3 of the site audit. Information shared between staff was comprehensive. The Assessment Team observed the physiotherapist and 2 podiatrists visiting consumers during the site audit.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

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

### Requirement 3(3)(b) Compliant

*Effective management of high impact or high prevalence risks associated with the care of each consumer.*

### Requirement 3(3)(c) Compliant

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

### Requirement 3(3)(d) Compliant

*Deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.*

### Requirement 3(3)(e) Compliant

*Information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 3(3)(f) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 3(3)(g) Compliant

*Minimisation of infection related risks through implementing:*

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

# STANDARD 4 COMPLIANTServices and supports for daily living

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 4

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

* Consumers and/or representatives discussed how the service welcomes visitors and makes them feel comfortable at the service.
* Consumers and their representatives described how they were supported to engage in the things they want to do and described how their individual preferences were respected.
* Overall consumers indicated in various ways how their emotional and spiritual wellbeing is supported.
* All consumers feel supported to maintain contact with family and people who are important to them.
* Overall, consumers and their representatives provided positive feedback about the quality, quantity and variety of meals.

Staff demonstrated knowledge of consumers, how to support consumers to engage in activities of the consumers’ choice, meal preferences, social and cultural history of consumers and how to assist consumers to maintain and develop relationships. The Assessment Team was provided with examples of how the staff would check in on consumers regularly and chat with them when they were feeling low.

The lifestyle program and activities are reviewed regularly with input from consumers through feedback and regular consumer/representative meetings. The lifestyle program is designed to engage all consumers with varied social, physical and creative activities provided.

The organisation has a suite of documents and processes to gather consumers’ needs, goals and preferences and these are used to plan, form and review their lifestyle and leisure program to ensure it meets the needs of the consumers.

The Assessment Team observed consistent engagement in a variety of lifestyle activities throughout the site audit. Lifestyle staff were observed to be providing some consumers with individual activities and support. Consumers were observed entertaining visitors in their rooms, being assisted to activities, and encouraged to engage with staff and other consumers.

The Quality Standard is assessed as Compliant as seven of the seven specific requirements have been assessed as Compliant.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(a) Compliant

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

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

### Requirement 4(3)(c) Compliant

*Services and supports for daily living assist each consumer to:*

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

### Requirement 4(3)(d) Compliant

*Information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.*

### Requirement 4(3)(e) Compliant

*Timely and appropriate referrals to individuals, other organisations and providers of other care and services.*

### Requirement 4(3)(f) Compliant

*Where meals are provided, they are varied and of suitable quality and quantity.*

### Requirement 4(3)(g) Compliant

*Where equipment is provided, it is safe, suitable, clean and well maintained.*

# STANDARD 5 COMPLIANTOrganisation’s service environment

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 5

Overall, consumers considered that they feel they belong in the service and feel safe and comfortable in the service environment. For example:

* Consumers and their representatives provided positive feedback about the service environment and described their rooms and bathrooms as clean and well maintained.
* Consumers and their representatives indicated that the service is welcoming and offered comfortably furnished communal spaces that enable them to interact with their families and other consumers.
* Consumers and/or their representatives were satisfied that furnishings, equipment, and the general living environment were suitable and well maintained.
* Consumers explained that they can access outdoor communal areas freely and can ask staff to assist them if they wished.

Staff said that they had access to safe, clean, and well-maintained equipment. Staff explained how they check the safety of equipment such as lifting machines prior to use and report any issues for maintenance to attend to. Staff were able to describe how requests for maintenance are submitted and actioned. Staff explained how equipment is cleaned between use. Management stated that they have cleaning staff who ensure all areas of the service are kept clean and tidy.

Cleaning contractors provide cleaning services seven days per week. Maintenance programs include essential services, non-critical preventative maintenance schedules, and reactive maintenance processes to ensure the service is safe, clean, and well maintained.

Consumer’s rooms were personalised with items from home that they wished to display, photographs and mementos were displayed in consumer rooms.

The Assessment Team found the service environment to be welcoming, clean, well-maintained, and free from odours. The service offered communal areas of different sizes, both inside and outside. Furniture, fittings, and equipment were observed to be safe, clean, and well maintained. The Assessment Team observed consumers freely accessing outdoor areas and moving throughout the service. The Assessment Team observed electronic call bell notifications and pressure mat sensors operating effectively. Call bells were observed to be within reach of consumers while in their rooms.

The Quality Standard is assessed as Compliant as three of the three specific requirements have been assessed as Compliant.

## Assessment of Standard 5 Requirements

### Requirement 5(3)(a) Compliant

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

### Requirement 5(3)(b) Compliant

*The service environment:*

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

### Requirement 5(3)(c) Compliant

*Furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.*

# STANDARD 6 COMPLIANTFeedback and complaints

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 6

Overall, consumers and representatives felt encouraged and supported to give feedback and make complaints, and they are confident that appropriate action is taken. The service has embedded systems to record feedback which can then be used to drive continuous improvements. For example:

* Most consumers and their representatives said they feel comfortable raising concerns with staff or engaging in the feedback and complaints process.
* Consumers and their representatives who had made formal complaints said they were satisfied with the action the service took to resolve their respective issues.

Staff and management personnel could describe the ways they encourage feedback and how they apply principles of open disclosure when handling complaints. Staff explained how they seek to address issues as they arise to prevent matters escalating further. Staff could describe the language and advocacy services available to consumers and how these are publicised at the service. Staff could describe the circumstances in which they might refer a consumer to an advocacy or language service.

The service displays posters and brochures about language and advocacy services. Feedback and complaint forms were observed at reception and other key locations around the service. The service holds resident and relative feedback meetings and seeks additional feedback through consumer experience surveys.

The service demonstrated how it uses feedback and complaints to improve the quality of care and services. The service compiles monthly complaints data and incorporates this information into its governance reporting and continuous improvement plan. The Board is made aware of complaints arising from incidents and provides input into continuous improvement strategies.

The Quality Standard is assessed as Compliant as four of the four specific requirements have been assessed as Compliant.

## Assessment of Standard 6 Requirements

### Requirement 6(3)(a) Compliant

*Consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.*

### Requirement 6(3)(b) Compliant

*Consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.*

### Requirement 6(3)(c) Compliant

*Appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.*

### Requirement 6(3)(d) Compliant

*Feedback and complaints are reviewed and used to improve the quality of care and services.*

# STANDARD 7 COMPLIANTHuman resources

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 7

Overall, consumers and their representatives considered that they get quality care and services when they need them and from people who are knowledgeable, capable and caring. For example:

* Consumers and their representatives considered staff to be kind, caring and respectful of their identity, culture and diversity.
* Consumers and their representatives interviewed provided generally positive feedback in relation to staff numbers and skill mix.
* Consumers and their representatives felt confident staff are qualified and have the skills needed to provide personal and clinical care required to meet their individual needs.

Management demonstrated how it ensures the service operates with the necessary number and mix of staff. The service has processes in place to ensure vacant shifts are filled at short notice. The service has processes in place to ensure staff are knowledgeable and competent in their roles, including regular mandatory and option education sessions. Education records showed that most staff have completed their mandatory education

The Assessment Team found the service plans its workforce and ensures that staff have the knowledge and skills to perform their roles. The Assessment Team sighted an education and training schedule. Management provided a copy of mandatory education records and noted that most staff have completed mandatory education

Management has recently developed a performance appraisal process and schedule. The Assessment Team sighted appraisal documentation and scheduling showing this process will be implemented from August 2022 onward. The Assessment Team observed staff interactions with consumers, representatives and others to be kind, caring and respectful.

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

## Assessment of Standard 7 Requirements

### Requirement 7(3)(a) Compliant

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

### Requirement 7(3)(b) Compliant

*Workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.*

### Requirement 7(3)(c) Compliant

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

### Requirement 7(3)(d) Compliant

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

### Requirement 7(3)(e) Compliant

*Regular assessment, monitoring and review of the performance of each member of the workforce is undertaken.*

# STANDARD 8 COMPLIANTOrganisational governance

### Consumer outcome:

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

### Organisation statement:

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

## Assessment of Standard 8

Overall, consumers and their representatives said the organisation is well run and that they can partner in improving the delivery of care and services. For example:

* Consumers said they felt comfortable approaching staff to provide feedback and make suggestions about service improvements.
* Consumers and their representatives said they feel engaged in the evaluation of how care is provided to them.

The service demonstrated effective governance systems to support continuous improvement and ensure the provision of safe and effective clinical care. A suite of policies and processes are accessible to staff to support the provision of care. The service has clear processes for documenting and managing reportable incidents and restrictive practices, in accordance with regulatory obligations. The policies and procedures in place ensure the service is well run, and the governing body remains accountable in the delivery of care for consumers

The service demonstrated how the governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery. Management advised opportunities for continuous improvement are identified from reviewing incidents, various governance meetings, and from consumer feedback obtained through various mechanisms, including from complaints, surveys, resident and relative meetings, and one-on-one conversations with consumers. Management provided examples of how consumers are involved in the development, delivery and evaluation of care and services.

The Assessment Team sighted documents that demonstrate how consumers are involved in continuous improvement. The service had a suite of polices in place to support effective governance systems.

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

## Assessment of Standard 8 Requirements

### Requirement 8(3)(a) Compliant

*Consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.*

### Requirement 8(3)(b) Compliant

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

### Requirement 8(3)(c) Compliant

*Effective organisation wide governance systems relating to the following:*

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

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

### Requirement 8(3)(e) Compliant

*Where clinical care is provided—a clinical governance framework, including but not limited to the following:*

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

# Areas for improvement

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